

Overview of Tool Kit

Lesbian, gay, bisexual, transgender and questioning (LGBTQ) young people are in America's child welfare and juvenile justice systems in disproportionate numbers. Like all young people in care, they have the right to be safe and protected. All too often, however, they are misunderstood and mistreated, leading to an increased risk of negative outcomes. This tool kit offers practical tips and information to ensure that LGBTQ young people in care receive the support and services they deserve. Developed in partnership by the Child Welfare League of America (CWLA) and Lambda Legal, the tool kit gives guidance on an array of issues affecting LGBTQ youth and the adults and organizations who provide them with out-of-home care.

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CHILD WELFARE LEAGUE OF AMERICA

CWLA is the nation's oldest and largest nonprofit advocate for children and youth and has a membership of nearly 1000 public and private agencies, including nearly every state child welfare system.

LAMBDA LEGAL

Lambda Legal is the nation's oldest and largest legal organization committed to achieving full recognition of the civil rights of lesbians, gay men, bisexuals, transgender people and those with HIV.

CWLA/LAMBDA JOINT INITIATIVE: FOSTERING TRANSITIONS

In 2002, Lambda Legal and CWLA combined their respective expertise in child welfare and LGBTQ issues and launched a historic partnership, entitled **Fostering Transitions**, to change the way LGBTQ youth and adults are treated in the nation's child welfare and juvenile justice systems. In addition to this tool kit, **Fostering Transitions** has published other educational and advocacy tools, including *Out of the Margins: A Report on Regional Listening Forums Highlighting the Experiences of Lesbian, Gay, Bisexual, Transgender and Questioning Youth in Care*.

Fostering Transitions is supported by a generous grant from the Andrus Family Fund (www.affund.org), a grantmaking foundation with a priority area of funding projects that help young people transition from foster care to adult independence. CWLA and Lambda Legal are profoundly grateful for the Andrus Family Fund's support and vision, without which **Fostering Transitions** and this tool kit would not have been possible.

To order free copies of the *Getting Down to Basics* tool kit, *Out of the Margins* and other resources, contact Lambda Legal at 1-866-LGBTeen (1-866-542-8336) (toll-free) or 212-809-8585, or download them for free at www.lambdalegal.org.



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Basic Facts About Being LGBTQ

If you work with young people in child welfare systems, you work with young people who are lesbian, gay, bisexual, transgender or questioning their sexual orientation or gender identity (LGBTQ). Child welfare professionals and caregivers have the duty to serve these young people in their care with competence and compassion. Unfounded myths and stereotypes about LGBTQ people have no place in the child welfare profession. The first step toward competent care is to understand basic facts about LGBTQ people and the issues they face.

WHAT DOES “LGBTQ” MEAN?

In recent years it has become common to use the string of letters “LGBTQ” to be inclusive of all individuals and communities who identify as lesbian, gay, bisexual or transgender or who are questioning their sexual orientation and/or gender identity. There is no right or wrong way to order the letters (*e.g.*, GLBTQ), and some people add additional letters, including “I” for intersex (or what used to be called hermaphroditism), “Q” for queer, and “A” for non-LGBTQ allies (*e.g.*, LGBTQIA).

Lesbian A woman who is emotionally, romantically and sexually attracted to other women.

Gay A man or woman who is emotionally, romantically and sexually attracted to the same gender; some use the term only to identify gay men. The word *gay* is preferred over the word *homosexual*, which has clinical overtones that some people find offensive.

Bisexual A man or woman who is emotionally, romantically and sexually attracted to both genders. Sometimes the attraction to each gender is equal, while for others there may be a preference for one gender over the other.

Transgender An umbrella term used to describe people whose gender identity, one’s

inner sense of being male or female, differs from the sex assigned to them at birth. **Gender-nonconforming** people are people whose gender expression, the outward communication of gender through behavior or appearance, differs from expectations associated with the sex assigned to them at birth. **Transgender girls** are people who were assigned the sex of male at birth but identify as female. **Transgender boys** are people who were assigned the sex of female at birth but identify as male. Everyone has both a sexual orientation and a gender identity. Gender identity is different from sexual orientation. Transgender people may identify as heterosexual, lesbian, gay, bisexual or questioning.

Transgender people may need specialized health care to assist with their gender transition. For more information, please see Lambda Legal’s factsheet about transition-related healthcare, available for download at www.lambdalegal.org/publications/trans-toolkit/trt_transition-related-health-care.html.

Questioning A person, often an adolescent, who has questions about his or her sexual orientation or gender identity. Some questioning people eventually come out as LGBT; some don’t.

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HOW MANY PEOPLE ARE LGBTQ?

Approximately 5–10% of the general population is lesbian, gay, bisexual or transgender. LGBTQ adolescents are estimated to make up a higher, disproportionate share of the foster care and delinquency pools. Because many LGBTQ young people face disapproval and overt rejection from their families, they are more likely to be forced from their homes into the foster care and homeless populations. Once in foster care, bias against them may make it harder to find permanent placements for them, prolonging their stay in child welfare systems.

AT WHAT AGE DO PEOPLE KNOW THEY ARE LGBTQ?

Many LGBTQ people report being aware of their orientations as very young children, well before their first sexual experiences. Others may not be aware of their sexual orientation or gender identity until they are older adults. Never assume that a person is either “too young” or “too old” to come out as LGBTQ.

HOW WILL I KNOW IF SOMEONE IS LGBTQ?

Not all LGBTQ young people identify as such, and many conceal that they are LGBTQ out of concern for their safety or privacy. Conversely, some people who are perceived by others to be LGBTQ in fact are not. The only certain way to know if someone is LGBTQ is if the person tells you. Until then, never rely on myths and stereotypes about LGBTQ people to make assumptions about a person’s sexual orientation or gender identity. However, if you work with a young person who is being harassed and mistreated because he or she is perceived by others to be LGBTQ, it’s imperative that you take immediate corrective action without first attempting to determine if the youth is in fact LGBTQ. The goal is to be open and accepting of all people and to signal to those who may be LGBTQ that you are a safe person who will help protect them from discrimination and mistreatment.

WHAT CAUSES A PERSON TO BECOME LGBTQ?

The reasons why some people are LGBTQ and others aren’t are not yet well understood. What is known is that sexual orientation and gender identity have proved to be generally impervious to interventions to change them. Indeed, so-called reparative or conversion therapies intended to change a same-sex sexual orientation have been criticized by all major mental health organizations as ineffective and potentially harmful. Moreover, it is incorrect to assume that all LGBTQ people have been traumatized or abused, or that coming out as LGBTQ is a form of acting out behavior. LGBTQ people exist around the world and have throughout time, although the concepts of identifying as LGBTQ, and LGBTQ communities, developed more recently.

HOMOSEXUALITY IS NOT A MENTAL ILLNESS.

Homosexuality is not a mental or physical disorder, and the mental health professions do not regard a same-sex orientation as harmful, undesirable or requiring intervention or prevention. It’s a core part of a person’s identity, just as a heterosexual orientation is for a heterosexual person. There was a time in this country when homosexuality was mistakenly classified as a mental illness. Extensive empirical research came to show that this assumption was wrong. Accordingly, in 1973 the American Psychiatric Association declassified homosexuality as an illness and removed it from the *Diagnostic and Statistical Manual of Mental Disorders* (DSM). All major mental health professional organizations, including the American Psychiatric Association, the American Psychological Association and the National Association of Social Workers, have long recognized that being lesbian or gay inherently poses no obstacle to leading a happy, healthy and productive life, and that the vast majority of lesbian and gay people function well in the full array of social institutions and interpersonal relationships.

GENDER DYSPHORIA IS A DIAGNOSABLE MEDICAL CONDITION.

Some transgender people are eligible for a diagnosis of gender dysphoria. In order to meet the diagnostic criteria in the DSM-IV, an individual must show evidence of a strong and persistent cross-gender identification, a persistent discomfort about one’s sex assigned at birth and clinically significant distress or impairment in important areas of functioning. Because gender dysphoria is a recognized medical condition, some transgender people have successfully argued that state nondiscrimination laws that require reasonable accommodation for people with disabilities apply, and that denying transgender people the right to dress in ways that are consistent with their gender identities is discrimination based on disability. Some transgender people would prefer that gender dysphoria be declassified as an illness in the same way that homosexuality was. It is important to understand that once transgender people are able to express their gender identities they are able to go on to lead happy, fulfilled lives.

For more information about the rights of LGBTQ people, visit www.lambdalegal.org.

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Information for LGBTQ Youth in Care

As a lesbian, gay, bisexual, transgender or questioning (LGBTQ) youth in care, you deserve support and respect from your caseworker, foster parents and the other adults involved in your life. You are also entitled to receive nonjudgmental services. You have the right to be heard, to feel supported and to be safe and free from harassment based on your sexual orientation or gender identity.

KNOW YOUR LEGAL RIGHTS IN CARE.

You have many legal rights while you are in care, including the right to be free from verbal, emotional and physical harassment in your placement, school and community. The adults involved in your care have a legal and ethical obligation to ensure that you are safe and protected. You also have the right to be treated equally, to express your gender identity and to be open about your sexual orientation.

YOUR CASEWORKER AND THE OTHER ADULTS IN YOUR LIFE HAVE AN OBLIGATION TO SUPPORT YOU.

Regardless of their personal beliefs, the adult professionals in your life have a legal duty to support and protect you from anti-LGBTQ harassment and mistreatment. Licensed and certified members of the National Association of Social Workers are bound by a code of ethics that prohibits discrimination on the basis of sexual orientation and requires your consent before the release of confidential information. If your placement is not safe, your caseworker must take steps to protect you, including moving you to a more appropriate placement.

Your caseworker and foster parents should also stick up for you in school if you are experiencing harassment and mistreatment there.

TELL YOUR CASEWORKER IF YOU FEEL UNSAFE.

Whether or not you are out to your caseworker, you should tell him or her if you do not feel safe and immediately report any mistreatment. Furthermore, it doesn't matter if you're actually LGBTQ or not. If you're being targeted because others think you're LGBTQ, you're still entitled to protection. If nothing is done to stop the abuse, you may want to file a formal complaint against the perpetrators and the adults who have failed to help stop it.

REPORT MISTREATMENT TO YOUR ATTORNEY OR GUARDIAN AD LITEM.

Your attorney may be able to take legal action on your behalf to protect you from discrimination and mistreatment. Your conversations with your attorney are confidential, and you do not need to come out to receive protection and legal advocacy. In especially bad cases, LGBTQ young people have sued for damages related to the mistreatment.

THE ADULTS IN YOUR LIFE SHOULD ACCEPT YOU FOR WHO YOU ARE AND NOT TRY TO CHANGE YOUR SEXUAL ORIENTATION OR GENDER IDENTITY.

You are not required to go along with any efforts, whether direct or indirect, to change your sexual orientation or gender identity. The

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leading mental health and child welfare experts have concluded that so-called reparative or conversion therapies are ineffective, potentially dangerous and unethical. You are likewise entitled to maintain your own religious beliefs and to be free from efforts to convert you.

BECOME AN AUTHORITY ON YOUR OWN HEALTH CARE NEEDS.

It's important that the adults in your life understand that being LGBTQ does not necessarily mean you have special mental or physical health care needs. On the other hand, it is also important that you can be yourself with your doctors and counselors and that you can openly express your LGBTQ-specific concerns with them. If you are transgender, you may well benefit from specialized mental and physical health care to help you express your gender identity. It's important that you avoid unsafe "black market" treatments and instead use safe and professional services. LGBTQ youth, like all youth, should have access to appropriate sexual health education and materials. Be sure to seek this out if it hasn't been offered to you.

Ask your caseworker or contact your local LGBT community center (www.lgbtcenters.org); Parents, Families and Friends of Lesbians and Gays (PFLAG) chapter (www.pflag.org) or the World Professional Association for Transgender Health (www.wpath.org) for a referral to supportive health care professionals in your community.

LOCATE LGBTQ RESOURCES IN YOUR COMMUNITY OR

SEEK OUT SUPPORTIVE ADULTS WHO CAN HELP.

If you have an LGBT community center in your area, inquire whether youth services are available there. You can also find helpful LGBTQ youth resources by contacting CWLA (www.cwla.org) or Lambda Legal at 1-866-LGBTTeen (1-866-542-8336) (toll-free). Lambda Legal maintains a list of national and state-by-state resources for LGBTQ youth. It can be found here: www.lambdalegal.org/publications/fs_resources-for-lgbtq-youth.

IF YOU ARE IN CRISIS, CONTACT THE TREVOR PROJECT.

The Trevor Project is the leading national organization providing crisis intervention and suicide prevention services to lesbian, gay, bisexual, transgender and questioning youth. Call the Trevor Lifeline at 1-866-4UTREVOR (866-488-7386) or visit their website at www.thetrevorproject.org.

FOR INFORMATION TO SHARE WITH YOUR FAMILY, VISIT THE FAMILY ACCEPTANCE PROJECT™ WEBSITE.

The Family Acceptance Project™ is the only community research, intervention, education and policy initiative that works to decrease major health and related risks for LGBT youth, such as suicide, substance abuse, HIV and homelessness—in the context of their families. Visit their website at <http://familyproject.sfsu.edu>.

CONTACT LAMBDA LEGAL'S YOUTH IN OUT-OF-HOME CARE PROJECT FOR HELP.

You have the right to be safe, to be free from harassment and to have adults stick up for you. If you feel threatened or unsafe because of your sexual orientation or gender identity and the adults involved in your care are not supportive, call the Lambda Legal hotline at 1-866-LGBTTeen (1-866-542-8336) (toll-free). We may also be able to help you to find LGBT friendly shelters, youth programs and other helpful resources.

“ 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. Otherwise, the ignorance will continue and nothing will ever be done about it. ”

—Youth in Care



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Families Supporting an LGBTQ Child

For some birth, foster or adoptive parents, learning that a child is lesbian, gay, bisexual, transgender or questioning (LGBTQ) can be a very difficult juncture. For others, this information is welcomed and recognized as a sign of trust. How a parent responds to their LGBTQ child will have an enormous impact on the child's development and on the quality of the parent-child relationship.

YOU ARE NOT ALONE.

Upon learning that your child is LGBTQ, you may feel a variety of emotions ranging from relief and acceptance to shock, denial, guilt and anger. It's important to know that you are not alone in this experience. In fact, approximately one in every four families in this country has a family member who is LGBTQ. Many families struggle in isolation, unaware of community resources to help them. You owe it to your child and to yourself to find the resources, support and education you may need to move toward understanding and acceptance. One of the most valuable resources is Parents, Families and Friends of Lesbians and Gays. PFLAG offers a volunteer-based network of peer support chapters around the country (see www.pflag.org to find the chapter nearest you). Most importantly, reassure your child of your unconditional love.

SHOW APPRECIATION FOR THE STRENGTH AND COURAGE IT TAKES TO COME OUT.

If your child has come out to you, it's likely that it took her or him a lot of strength and courage to make that disclosure. It's now up to you to match this with your own courage, commitment, love and support. Your expression of your love and acceptance is extremely important for your child's well-being. A study by the Family Acceptance Project™ “establishes a clear link between specific parental and caregiver rejecting behaviors and negative health problems in lesbian, gay, and bisexual adults.”¹ These health problems include

1 Caitlin Ryan, David Huebner, Rafael M. Diaz & Jorge Sanchez, *Family Rejection as a Predictor of Negative Health Outcomes in White and Latino Lesbian, Gay, and*

attempted suicide, high levels of depression, illegal drug use and engaging in unprotected sexual intercourse.² A later study by the Family Acceptance Project™ found that “family acceptance in adolescence is associated with young adult positive health outcomes (self-esteem, social support, and general health) and is protective for negative health outcomes (depression, substance abuse, and suicidal ideation and attempts).”³ If you learned that your child is LGBTQ from another source, avoid confronting your child, and instead model strength, courage and respect so that your child will feel more comfortable confiding in you. Do your best to embrace your child, his or her identity and his or her decision to be open or not with you.

EXPAND YOUR KNOWLEDGE OF LGBTQ ISSUES.

Don't rely on unfounded myths and stereotypes about LGBTQ people. Supportive literature specifically intended for parents of LGBTQ youth can help you develop a better understanding of these issues and a better relationship with your child. Such resources can be obtained through PFLAG, your local library or bookstore, an LGBT community center (to locate the one nearest you, see the National Association of LGBT Community Centers

Bisexual Young Adults, 123 *Pediatrics* 346, 346 (2009).

2 *See id.* at 349-350.

3 Caitlin Ryan, Stephen T. Russell, David Huebner, Rafael Diaz & Jorge Sanchez, *Family Acceptance in Adolescence and the Health of LGBT Young Adults*, 23 *J. Child & Adolescent Psychiatric Nursing* 205, 210 (2010).

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at www.lgbtcenters.org), or the Family Acceptance Project™ (<http://familyproject.sfsu.edu>).

UNDERSTAND THE IMPORTANCE OF YOUR SUPPORT.

Be mindful that your reaction to your child's sexual orientation or gender identity will have a major impact on his or her life. LGBTQ children and youth who are rejected by their parents face a significantly higher risk of depression, suicide and substance abuse compared with LGBTQ youth from accepting families. Once they understand the importance of their support, many parents of LGBTQ youth find that they eventually develop a stronger, closer relationship with their child.

DON'T TRY TO CHANGE YOUR CHILD'S SEXUAL ORIENTATION OR GENDER IDENTITY.

While young people may go through a process to come to understand what their sexual orientation or gender identity may be, it's important to understand that these traits are a part of each person's identity and can no more be changed for an LGBT person than they can for anyone else. Be suspicious of religious and other organizations that promote "freedom from homosexuality" through conversion or reparative therapy. Such assertions are based upon the misguided belief that there is something wrong with LGBTQ people. Leading professional organizations such as the American Psychological Association, the American Psychiatric Association and the American Medical Association have issued warnings against such therapies and the harmful effects they have on those subjected to them.⁴

⁴ The American Psychiatric Association states: "Psychotherapeutic modalities to convert or 'repair' homosexuality are based on developmental theories whose scientific validity is questionable. Furthermore, anecdotal reports of 'cures' are counterbalanced by anecdotal claims of psychological harm... APA recommends that ethical practitioners refrain from attempts to change individuals' sexual orientation[.]" (Am. Psychiatric Ass'n, APA Document Reference No. 200001, *Therapies Focused on Attempts to Change Sexual Orientation (Reparative or Conversion Therapies)* (2000)).

The American Psychological Association affirms, stating: "Treatments that are based on assumptions that homosexuality or same-sex sexual attractions are, a priori, a mental disorder or psychopathology or based on inaccurate stereotypes regarding LGB people are to be avoided because they run counter to empirical data and because reports of harm suggest that such treatments can reinforce restricting stereotypes, increase internalized stigma, and limit a client's development." (Am. Psychological Assoc., Report of the American Psychological Association Task Force on Appropriate Therapeutic Responses to Sexual Orientation (2009) at 86-87, available at www.apa.org/pi/lgbt/resources/therapeutic-response.pdf).

The American Medical Association also agrees, stating: "Our AMA... opposes the use of 'reparative' or 'conversion' therapy that is based upon the assumption that homosexuality per se is a mental disorder or based upon the a priori assumption that the patient should change his/her homosexual orientation." Am. Med. Ass'n, AMA Policies on GLBT Issues, Patient-Centered Policy H-160.991, Health Care Needs of the Homosexual Population (2005), available at www.ama-assn.org/ama/pub/about-ama/our-people/member-groups-sections/glb-advocacy-committee/ama-policy-regarding-sexual-orientation.page.

These organizations have long recognized that being lesbian or gay inherently poses no obstacle to leading a happy, healthy and productive life, and that the vast majority of lesbian and gay people function well in the full array of life activities and interpersonal relationships. Conversion therapies are regarded by mental health experts as ineffective, unethical and the cause of increased risk of depression, anxiety and self-destructive behaviors. Instead of trying to change your LGBTQ child, give him or her support.

STAND UP FOR YOUR CHILD IF HE OR SHE IS BEING PICKED ON OR HARASSED OUTSIDE YOUR HOME.

As a parent, you should protect your LGBTQ child from harm and harassment—in school, your neighborhood and in the community—just as you would for any child. This is particularly important if your daughter or son recently made the decision to come out at school or to friends. Research consistently shows that LGBTQ youth face far greater risks of harassment and violence from their peers than non-LGBTQ youth. Assure your child that you are on his or her side.

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

RECONCILE THIS NEW INFORMATION WITH YOUR RELIGIOUS BELIEFS.

Learning that your child is LGBTQ can be especially challenging if you feel your faith or religion opposes homosexuality. Understand that being LGBTQ does not impact a person's ability to be spiritual or religious any more than being heterosexual does. While some religious denominations continue to condemn homosexuality and gender variance, others publicly support gay rights and LGBTQ individuals. In fact, within many religious communities there are support groups for LGBTQ members and their families, including Dignity for Catholics (www.dignityusa.org) and Affirmation for Mormons (www.affirmation.org). You can seek supportive resources and counsel to help reconcile your religious beliefs with your commitment to your LGBTQ child.



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Caseworkers with LGBTQ Clients

If you work with young people in foster care, you probably have clients who are lesbian, gay, bisexual, transgender or questioning their sexual orientation or gender identity (LGBTQ). These young people are at high risk of harassment, abuse and self-destructive behaviors, and too often suffer from misunderstanding and mistreatment by the child welfare systems that should protect them. LGBTQ young people, like all of your clients, deserve to be treated with respect and sensitivity. There is much you can do to help your LGBTQ clients make healthy transitions from foster care to adulthood.

ACKNOWLEDGE THAT LGBTQ YOUNG PEOPLE ARE IN YOUR MIDST.

Don't assume that all of your clients are heterosexual. Even if you think you do not have clients who are LGBTQ, you most likely do. Many LGBTQ young people fear the negative reactions that come from revealing who they are and carefully hide that they are LGBTQ.

EXAMINE YOUR OWN BELIEFS AND ATTITUDES THAT MIGHT AFFECT YOUR PROFESSIONAL RESPONSIBILITIES TO YOUR LGBTQ CLIENTS.

Be aware of your own beliefs, prejudices and gaps in knowledge surrounding issues of sexual orientation and gender identity. Regardless of your personal beliefs, remember that above all you owe a professional duty of care to your LGBTQ clients. For example, licensed and certified members of the National Association of Social Workers are bound by a code of ethics that prohibits discrimination on the basis of sexual orientation and requires a client's express consent before the release of confidential information.

TREAT YOUR LGBTQ CLIENTS WITH THE SAME DIGNITY AND EXPECTATIONS AS YOU DO ALL OTHERS.

Don't assume that all the problems your LGBTQ clients have are related to their sexual orientation or gender identity. Don't address sexual orientation or gender identity questions or concerns as deviant or pathological. By the same token, don't allow an LGBTQ young person to be subjected to so-called conversion or reparative therapy for the purpose of changing his or her sexual orientation or gender identity. Such "therapies" have been

shunned by the leading national professional counseling organizations as unethical and potentially dangerous. Establish ground rules for behavior by LGBTQ clients, including standards for acceptable sexual behavior, that are the same as for heterosexual youth. Always respect and maintain an LGBTQ young person's privacy and never disclose confidential information about sexual orientation or gender identity without the client's permission.

BE AWARE OF YOUR LANGUAGE.

Eliminate antigay slurs from discussion. Use gender-neutral language with all of your clients. For example, rather than asking a teenage boy if he has a girlfriend, ask if he has "someone special" in his life. Learn the difference between "sexual orientation" and "gender identity" and use the words gay, lesbian, bisexual, transgender and questioning in appropriate contexts.

DON'T STEREOTYPE LGBTQ PEOPLE.

Don't assume that you can identify LGBTQ people based on stereotypical mannerisms or characteristics. Also avoid the assumption that all LGBTQ people "are the same" or necessarily share a common sense of community. Although LGBTQ people are in every corner of the country, the cultural responses to sexual orientation and gender identity may vary a great deal even within a particular community. The diversity of society in general is reflected within LGBTQ communities.

CREATE A POSITIVE PHYSICAL ENVIRONMENT IN YOUR OFFICE THAT WELCOMES AND AFFIRMS LGBTQ PEOPLE.

Display recognizable symbols of support such as pink triangles and rainbow flags to let all your

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clients know that you are a sensitive, safe and welcoming person for LGBTQ people to go to. You can post Lambda Legal's Youth in Out-of-Home Care poster, included in this tool kit and available in English and Spanish from the Lambda Legal website, as a sign that your LGBTQ clients are safe to be open with you.

KNOW WHAT TO DO IF A CLIENT DISCLOSES TO YOU THAT HE OR SHE IS LGBTQ.

Use the disclosure as an opportunity to show unconditional support for your client. Be willing to have an in-depth discussion, and allow your client to process her or his feelings. The goal in working effectively with LGBTQ young people is to create a safe, supportive and nurturing environment within which they can find the resources they need. Assist LGBTQ young people in deciding to whom, where, when and how to come out in order to ensure safety while maintaining privacy. If you lack knowledge on LGBTQ issues don't be afraid to admit it, but commit to learn what you need to know to provide competent supportive services.

SEEK OUT SAFE, AFFIRMING PLACEMENTS FOR LGBTQ YOUNG PEOPLE.

People who are perceived as LGBTQ are at a significantly higher risk of harassment and violence than their peers. Don't put your LGBTQ clients into placements, services, schools or neighborhoods where they will be unsafe or misunderstood. If seeking a foster or adoptive home placement, be sure that the home is accepting of LGBTQ people. Do outreach to LGBT and LGBT-friendly adults who can provide safe and nurturing homes for LGBTQ youth. If placing an LGBTQ young person in a group home setting, make sure that explicit nondiscrimination policies are in place and enforced. If such group homes do not exist in your community, inquire of a prospective home whether an LGBTQ person has ever been placed there and what the experience was like. Also inquire if the training provided to staff includes information about working with LGBTQ youth. Trust the instincts and observations of your LGBTQ clients when it comes to feeling safe and welcome. Respond promptly to anti-LGBTQ slurs and attacks. Be prepared to advocate for fair and equal treatment of your LGBTQ clients.

BE PREPARED TO WORK EFFECTIVELY WITH TRANSGENDER YOUTH.

Transgender youth may have unique medical and housing needs. They also often face serious risk of harassment and violence. It's important that you seek out additional resources, if necessary, to provide appropriate services and placements to transgender youth. Allow all of your clients to express their gender identities in ways that are most comfortable for them, including allowing transgender clients to dress in the manner that they choose. Support transgender young people's gender identity and expression by referring to them by the names and pronouns they prefer.

BECOME FAMILIAR WITH THE RESOURCES AVAILABLE TO LGBTQ YOUNG PEOPLE IN YOUR COMMUNITY.

Many LGBTQ young people benefit from attending a community-based peer support group. Those that require professional therapeutic intervention need access to supportive professional services. Your agency should develop and distribute an up-to-date list of LGBTQ community resources. If you don't know where to

find such resources, contact us, your nearest LGBTQ community center (www.lgbtcenters.org) or a local chapter of Parents, Families and Friends of Lesbians and Gays (PFLAG, www.pflag.org), or look online for national and community resources. Lambda Legal maintains a list of state and national resources that can be found at www.lambdalegal.org/publications/fs_resources-for-lgbtq-youth.

PROVIDE SUPPORT AND RESOURCES TO OTHERS IN THE LGBTQ YOUNG PERSON'S LIFE.

Be prepared to provide members of the birth, foster or adoptive families of LGBTQ clients with relevant resource materials on sexual orientation and gender identity, as well as with opportunities to discuss and process issues of concern.

ENSURE THAT YOUR LGBTQ CLIENTS RECEIVE DEVELOPMENTALLY APPROPRIATE SEXUAL HEALTH SERVICES.

Provide developmentally appropriate information and resources to all your clients about sexuality and sexual health, including about LGBTQ issues and prevention of HIV and other sexually transmitted infections. Encourage your agency to adopt written policies providing clients access to free and confidential HIV testing without guardian consent or notification, if not already in place. Protect the privacy of your clients' HIV status, with disclosure only on a need-to-know basis. For more information, visit the Center for HIV Law and Policy's page on the rights of youth in state custody to comprehensive sexual health education at www.hivlawandpolicy.org/public/teensense.

ADVOCATE FOR SUPPORTIVE, COMPETENT CARE FOR LGBTQ YOUTH AT YOUR AGENCY.

Take an inventory of the policies and training at your agency. Are LGBTQ people included in nondiscrimination policies? Are LGBTQ clients included in your best practice guidelines and standards? Are LGBTQ issues included in pre-service and in-service training curricula? Be prepared to advocate for changes at your agency to make the environment more LGBTQ-inclusive.

SCHEDULE A TRAINING FOR YOUR ORGANIZATION.

In 2009, Lambda Legal partnered with the National Association of Social Workers (NASW) on a Train-the-Trainer initiative designed to build the capacity, awareness and skills of out-of-home care professionals serving LGBTQ youth in foster care, juvenile justice centers and homeless shelters. Master Trainers are available to facilitate trainings throughout the country. To find Master Trainers in your area or to order copies of the NASW-Lambda Legal curriculum entitled *Moving the Margins: Training Curriculum for Child Welfare Services with LGBTQ Youth in Out-of-Home Care*, by Diane Elze, Robin McHaelen, NASW & Lambda Legal (2009), contact Lambda Legal at 1-866-LGBTeen (1-866-542-8336) (toll-free) or 212-809-8585, or download it for free at www.lambdalegal.org.

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Foster Parents Caring for LGBTQ Youth

Whether you are aware of it or not, youth in your care may be lesbian, gay, bisexual, transgender or questioning their sexual orientation or gender identity (LGBTQ). These young people are dealing not only with the challenges of life in foster care but also with the risk of harassment and mistreatment because they are LGBTQ.

ACKNOWLEDGE THAT FOSTER YOUTH IN YOUR CARE MAY BE LGBTQ.

Don't assume that every young person in your care is heterosexual or comfortable in his or her assigned gender. Many LGBTQ young people fear the negative reactions that may come from revealing this aspect of their identity and carefully hide that they are LGBTQ. Indeed, some may have been abused by their families of origin or thrown out after coming out and are reluctant to risk harassment and rejection from the child welfare system charged with protecting them.

EXAMINE YOUR BELIEFS AND ATTITUDES THAT MIGHT IMPACT YOUR ABILITY TO SUPPORT LGBTQ YOUTH IN YOUR CARE.

Be aware of your own beliefs, prejudices and gaps in knowledge surrounding issues of sexual orientation and gender identity. Regardless of your personal beliefs, remember that above all it's your responsibility to provide a safe, nurturing and nonjudgmental environment for the LGBTQ young people in your care.

EDUCATE YOURSELF ON LGBTQ ISSUES.

You don't have to be an expert or LGBTQ yourself in order to support an LGBTQ youth. There are plenty of resources available to help you better understand these issues. Seek out the support and information you need to feel comfortable engaging young people in frank and age-appropriate discussions about sexual orientation and gender identity.

UNDERSTAND THAT BEING LGBTQ ISN'T A "CHOICE" OR SOMETHING A YOUNG PERSON CAN CHANGE.

The leading mental health and child welfare associations have long recognized that a lesbian or gay sexual orientation is a normal variation on human sexuality and no more susceptible to change than is a heterosexual sexual orientation. A young person should never be subjected to conversion or reparative therapies for the purpose of changing his or her sexual orientation or gender identity. Such therapies have been shunned by national professional counseling organizations as unethical and potentially dangerous.

KNOW THAT YOUR ACCEPTANCE OR REJECTION AFFECTS THE HEALTH AND WELL-BEING OF THE LGBTQ YOUTH IN YOUR CARE.

Research shows that family acceptance is an important predictor of how well an LGBTQ youth will fare as an adult. As a foster parent, don't compound the rejection an LGBTQ youth may have suffered from his or her family of origin by exhibiting the same rejecting behaviors. The National Foster Parent Association has adopted a formal policy urging sensitivity and support for LGBTQ youth in foster care (see www.nfpainc.org under "Position Statements") and the Family Acceptance Project™ offers resources for families of LGBTQ young people. Their website states:

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“The Family Acceptance Project™ is the only community research, intervention, education and policy initiative that works to decrease major health and related risks for [LGBT] youth, such as suicide, substance abuse, HIV and homelessness—in the context of their families. We use a research-based, culturally grounded approach to help ethnically, socially and religiously diverse families decrease rejection and increase support for their LGBT children.”

For more information, research findings and support services, please visit <http://familyproject.sfsu.edu>.

RESPECT THE PRIVACY AND CONFIDENTIALITY OF LGBTQ YOUTH.

Most LGBTQ youth are aware of this aspect of their identity long before they disclose it to others. Some LGBTQ people report having been aware of their identity as young as at five years old, long before they were sexually active, while others were much older before they realized it. Understand that coming out is often a lifelong process and that LGBTQ youth may not be out in every context of their lives. Keep in mind that there are many factors LGBTQ people consider before disclosing their sexual orientation and gender identity, including that they may be exposing themselves to discrimination and harassment by revealing this information to others. Respect the confidentiality of the foster youth in your care while helping them to decide whether or not to come out and to whom.

APPLY THE SAME STANDARDS TO LGBTQ YOUTH THAT YOU APPLY TO OTHERS FOR AGE-APPROPRIATE ADOLESCENT ROMANTIC BEHAVIOR.

It's important for LGBTQ youth to be able to engage in developmentally-appropriate romantic behavior and to feel as validated and respected in this area as other young people. LGBTQ youth in your care should be held to the same standards you apply to non-LGBTQ youth regarding age-appropriate dating, displays of affection and romantic relationships. LGBTQ youth in care, like all young people, need developmentally appropriate information and resources about sexuality and sexual health, including about the prevention of HIV and other sexually transmitted diseases.

KNOW THE DANGERS AND RISKS FOR LGBTQ YOUTH.

Research reveals that LGBTQ youth may be at a higher risk for substance abuse, unsafe sexual practices, running away and suicidal ideation and behavior because of the social stigma and harassment they face from their peers and adults. As a caregiver, it's critical that you be aware of the warning signs and behaviors that may mean someone is struggling. If you provide a safe, supportive and bias-free home environment

where young people can be themselves, they will be less likely to engage in these risky behaviors.

BE AN ADVOCATE FOR LGBTQ YOUTH.

LGBTQ youth often face verbal and physical abuse from their peers and families and the adults in their lives. Make sure the young people in your care know that you're there for them and will be their ally. Ensure that your foster child is safe at school and in the community. Advocate for your child and demand that he or she receives respectful treatment.

ACKNOWLEDGE THAT THERE'S MORE TO AN INDIVIDUAL THAN SEXUAL ORIENTATION AND GENDER IDENTITY.

Sexual orientation and gender identity are only part of what makes an individual a whole person. Avoid making assumptions about a young person based entirely upon these particular characteristics. In fact, you may find that some LGBTQ youth are very outspoken about their identities and feel that this is a defining part of who they are, while others may not give it much thought at all. Don't assume that every struggle faced by an LGBTQ young person is the result of this aspect of his or her identity. Understand that many of his or her struggles are in fact a result of the lack of support he or she has received from caretakers and peers.

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

—Youth in Care

TAKE ADVANTAGE OF COMMUNITY RESOURCES FOR YOU AND YOUR LGBTQ FOSTER CHILD.

Know where to look for LGBTQ resources in your community. A good place to start is Parents, Families and Friends of Lesbians and Gays (PFLAG) at www.pflag.org. PFLAG offers a variety of resources to help you be an effective and supportive parent or caregiver. It also lists local chapters and support group meetings where you can meet other parents of LGBTQ youth. Help your LGBTQ foster child find peer support groups in your community as well. For a list of national and state resources for LGBTQ youth, visit www.lambdalegal.org/publications/fs_resources-for-lgbtq-youth.



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Congregate Care Providers Working with LGBTQ Youth

Lesbian, gay, bisexual, transgender and questioning (LGBTQ) youth placed in group homes and other congregate care facilities are significantly more likely to be subjected to harassment, discrimination and violence than their non-LGBTQ peers. Blatant hostility and verbal abuse toward LGBTQ youth are often an accepted aspect of institutional culture. Congregate care providers should be aware of these dangers and create a safe and welcoming environment for LGBTQ youth.

ENSURE THE SAFETY OF LGBTQ YOUTH IN CONGREGATE CARE.

Child welfare and juvenile justice professionals have a legal obligation to protect the physical and psychological safety of LGBTQ youth in their care, whether these youth are placed in group homes, residential treatment centers, correctional centers or other facilities. As congregate care providers, you play an important role in creating an environment that ensures the protection of LGBTQ youth from harassment and discrimination. This includes intervening in situations between youth, or when other staff harass or disparage LGBTQ youth.

TAKE IMMEDIATE STEPS TO ADDRESS ANTI-LGBTQ HARASSMENT IN THE FACILITY.

Send a clear message throughout the facility that anti-LGBTQ harassment will not be tolerated. Consistently model and communicate that message to all staff and residents. Never blame LGBTQ youth for being open about their identity when others subject them to harassment or violence, and don't allow others to blame them for their own mistreatment.

PROVIDE OR PARTICIPATE IN LGBTQ SENSITIVITY AND AWARENESS TRAINING.

Inquire whether your agency offers training that prepares staff to work effectively and appropriately with LGBTQ young people. An ideal training program includes suggestions for

creating and maintaining a safe environment for LGBTQ young people, as well as strategies for responding to harassment and discrimination. If your agency does not offer training on LGBTQ issues, seek out the information and support you need from resources in your community, the Internet, books and videos. For more information, see the pullout entitled *Recommendations for Training & Education on LGBTQ Issues* in this tool kit.

ADHERE TO CONSISTENT POLICIES REGARDING AGE-APPROPRIATE ADOLESCENT ROMANTIC BEHAVIOR.

LGBTQ youth in congregate care should be afforded the same rights and privileges that non-LGBTQ youth have regarding dating, displays of affection and romantic relationships. It's important for LGBTQ youth to be able to express age-appropriate romantic behavior, and to feel validated and worthy.

MAKE APPROPRIATE, INDIVIDUALIZED CLASSIFICATION AND HOUSING DECISIONS.

Don't make housing decisions based on myths and stereotypes about LGBTQ people. For example, never assume that all LGBTQ youth are more likely to engage in sexual behaviors than their heterosexual peers, or that they're all potential sex offenders. Conversely, don't isolate or segregate LGBTQ young people, or prohibit them from having roommates, as a means of ensuring their safety. While you may

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have good intentions, this will only deprive LGBTQ youth of opportunities to interact with their peers and will compound their feelings of isolation.

In sex-segregated facilities, don't automatically assign transgender youth to the girls' or boys' units based on the sex assigned to them at birth. Instead, make housing decisions on a case-by-case basis, considering the physical and mental well-being of the youth. Safety and privacy should be prioritized without resorting to isolating these youth from the general population. However, single occupancy rooms, if available, may be an acceptable alternative for transgender youth in sex-segregated facilities.

BE AWARE OF THE NEEDS OF TRANSGENDER YOUTH IN CONGREGATE CARE SETTINGS.

Transgender youth in congregate care settings are often subject to discrimination. Staff in congregate care settings should be aware of the needs of these youth and support them in their gender identity without requiring them to conform to traditional gender norms. Allow youth to express their gender identity through their attire, names, pronouns and grooming choices. Be prepared to advocate for transgender youth to receive competent and affirming mental health and medical services, including access to monitored use of hormones if deemed medically appropriate. For more information, please see the pullout entitled *Working with Transgender Youth* in this tool kit.

PROTECT LGBTQ YOUTH FROM SEXUAL ABUSE.

LGBTQ youth are often vulnerable and at increased risk for sexual abuse in congregate care settings. Staff should assess risk of sexual victimization and abuse of LGBTQ youth in a sensitive manner. Special attention should be given to prevent, detect and respond to sexual assault of LGBTQ youth. In 2012, the Department of Justice released national standards in accordance with the Prison Rape Elimination Act of 2003 (PREA), aimed at protecting inmates and detained juveniles from sexual abuse. For more information about how the PREA standards protect LGBTQ people, please read the National Center for Transgender Equality fact sheet found here: www.transequality.org/Resources/PREA_July2012.pdf.

DISPLAY LGBTQ-SUPPORTIVE SIGNS AND SYMBOLS.

By displaying LGBTQ-supportive symbols such as pink triangles, rainbows or safe zone stickers, you send the clear message to all youth and staff that you support and affirm LGBTQ youth and are open to discussing LGBTQ issues. LGBTQ youth are quick to pick up on these cues from their environment, and it often makes an enormous difference just

having them displayed. LGBTQ-supportive materials are available free of charge online, and include Lambda Legal's LGBTQ Youth in Out-of-Home Care poster, included in this tool kit and available in English and Spanish (www.lambdalegal.org).

HELP LGBTQ YOUTH TO ACCESS COMMUNITY RESOURCES.

Reduce the alienation and isolation LGBTQ youth often experience by providing opportunities for them to interact positively with their LGBTQ peers, and by helping them realize that they're not alone and that other people their age share their experiences.

Develop an up-to-date list of LGBTQ resources in your community and distribute it to everyone in your agency, including to youth who may wish privately to contact community resources on their own. For more information check www.lambdalegal.org and www.cwla.org, your nearest LGBT community center (see the National Association of LGBT Community Centers at www.lgbtcenters.org) or the local chapter of Parents, Families and Friends of Lesbians and Gays (www.pflag.com).

For sample LGBTQ policies in out-of-home care settings, contact Lambda Legal at 212-809-8585 or toll-free at 1-866-LGBTeen (1-866-542-8336).

“ 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 in Care



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Getting Down to Basics

Tools to Support LGBTQ Youth in Care

Attorneys, Guardians ad Litem & Advocates Representing LGBTQ Youth

Whether you are aware of it or not, if you advocate for young people in the child welfare and juvenile justice systems, you work with young people who are lesbian, gay, bisexual, transgender or questioning their sexual orientation or gender identity (LGBTQ). Lawyers and youth advocates should develop an understanding of the unique issues faced by these clients and cultivate advocacy strategies that are sensitive to their needs.

BE A VISIBLE ADVOCATE FOR LGBTQ YOUTH.

You don't have to be LGBTQ yourself to be an effective advocate for LGBTQ youth. By standing up for LGBTQ clients facing harassment and discrimination and publicly supporting their rights you act as a visible, much-needed advocate for LGBTQ youth in care. Let all of your clients know that you will not judge them and will work hard for them no matter what they tell you. Display LGBTQ-friendly signs and posters for your clients and others to see. Never use anti-LGBTQ slurs or rely on negative stereotypes of LGBTQ people.

BE AWARE THAT LGBTQ YOUTH ARE IN OUT-OF-HOME CARE IN DISPROPORTIONATE NUMBERS.

Research shows that young people facing family rejection, harassment and school failure are more likely to enter the child welfare and juvenile justice systems. At home, LGBTQ youth and those perceived to be LGBTQ are more likely to face disapproval, abuse and neglect—including being thrown out of their homes—than their non-LGBTQ peers. It may be harder to find supportive permanent placements for LGBTQ youth once they are in the foster care system, extending their length of time in care. On the streets, LGBTQ teens may be forced into illegal activities, including sex work, to support themselves. LGBTQ youth of color congregating in public places may face selective enforcement of “quality of life” offenses and “morals” regulations. Violations of age-of-consent laws among young people of the same sex are more likely to be criminally charged and punished more harshly

than violations among young people of the opposite sex. These factors contribute to the disproportionate numbers of LGBTQ youth in out-of-home care.

BE AWARE THAT LGBTQ YOUTH IN OUT-OF-HOME CARE ARE VULNERABLE TO MISTREATMENT AND DISCRIMINATION.

While of course parents have the right to inculcate their values in their children, this doesn't extend to a right to subject children to harm and abuse. You should be prepared to advocate on behalf of a child who is not safe at home because of parental intolerance. Often misunderstood within the child welfare and juvenile justice systems as well, many LGBTQ youth face abuse, harassment and isolation once in care. In foster family homes and group care facilities, LGBTQ youth are often mistreated and even harmed by staff, caregivers and other young people. Some are forced to convert to anti-LGBTQ religions and practices. In the delinquency system, LGBTQ youth may be placed in more restrictive and punitive settings than their offenses warrant, or isolated or segregated from the general population for their own protection or based on the misguided notion that others need to be protected from them. There currently is a serious dearth of LGBTQ-sensitive child welfare and juvenile justice services and placements. Your LGBTQ clients need your help to ensure they receive safe and appropriate treatment. Canvass the available resources in your community. Develop and maintain a network of LGBTQ-sensitive youth service providers to whom you can refer LGBTQ clients.

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AS A ZEALOUS ADVOCATE, CONFRONT ANTI-LGBTQ DISCRIMINATION AT ITS SOURCE.

Rather than simply advocating for the removal of an LGBTQ client from an unsafe placement, zealously advocate for an institutional response to the discrimination and mistreatment. Whether in a child welfare or juvenile justice facility, in a school or in the community, confront the bias or abuse at its source in order to ensure that it will not happen again to another child. Be prepared to file a grievance or complaint against an offending institution on behalf of an LGBTQ client. At the same time, advise your vulnerable clients of the realities of congregate care. Advocate for them in their decisions regarding dress and gender expression.

PROTECT THE PRIVACY OF YOUR CLIENTS.

Even if your client is open with you and others about his or her sexual orientation and gender identity, the client should always be treated as the gatekeeper of this information. Never “out” your client without his or her consent. Instead, be aware that just because a client is open with you about his or her identity does not necessarily mean that he or she is out to everyone. Object to this information being unnecessarily included in case management and service planning documentation.

BE AWARE OF THE LEGAL PROTECTIONS AVAILABLE TO YOUR LGBTQ CLIENTS.

The federally mandated State Plan for Foster Care and Adoption Assistance requires that there be a case plan for each child placed in the child welfare system.¹ While it is important to ensure that the service plan addresses the unique needs of your LGBTQ clients, there should be careful consideration as to whether the plan should include confidential information regarding your client’s sexual orientation or gender identity that could later be used against him or her by those harboring anti-LGBTQ bias. Under the Fourteenth Amendment to the U.S. Constitution, all young people in state custody have the affirmative right to protection from harm. This right—the substantive due process liberty interest in safety—includes the right to appropriate services, medical care and safe placements. LGBTQ young people harmed or discriminated against while in state custody have brought successful civil rights lawsuits against state officials, some resulting in sizeable monetary damage awards (e.g. *R.G. v. Koller*, 415 F. Supp.2d 1129 (D. Haw. 2006) and *Rodriguez v. Johnson*, No. 06CV00214 (S.D.N.Y. filed Jan. 11, 2006)).

Some transgender people have successfully argued that state nondiscrimination laws that require reasonable accommodation for people with disabilities apply to those diagnosed with gender dysphoria, and that denying transgender youth the right to dress in ways that are consistent with their gender identities in group homes is discrimination based on disability (e.g., *Doe v. Bell*, 754 N.Y.S.2d 846 (N.Y. Sup. Ct. 2003)). Be aware of state nondiscrimination

¹ The plan must be designed such that “the child’s health and safety shall be the paramount concern[.]” 42 U.S.C. § 671(a)(15)(A). The plan must include “a discussion of the safety and appropriateness of the placement” and “address the needs of the child while in foster care, including a discussion of the appropriateness of the services that have been provided to the child under the plan.” §§ 675(1)(A),(B). Additionally, a procedure must be in place for review of the case plan on a regular basis, to ensure that the plan remains “consistent with the best interest and special needs of the child[.]” § 675(5)(A).

laws, particularly those that are LGBTQ-inclusive, and seek their enforcement on behalf of your clients in out-of-home care.

PROTECT LGBTQ YOUTH FROM SEXUAL ABUSE.

LGBTQ youth are often vulnerable and at increased risk for sexual abuse in juvenile justice and congregate care settings. In 2012 the U.S. Department of Justice released national standards in accordance with the Prison Rape Elimination Act of 2003 (PREA), aimed at protecting inmates and detained juveniles from sexual abuse. For more information about how the PREA standards protect LGBTQ people, please read the National Center for Transgender Equality fact sheet found here: www.transequality.org/Resources/PREA_July2012.pdf.

CONNECT WITH ADDITIONAL RESOURCES.

The Equity Project is an initiative to ensure that LGBT youth in juvenile delinquency courts are treated with dignity, respect and fairness. The Equity Project examines issues that impact LGBT youth during the entire delinquency process, ranging from arrest through post-disposition. For more information, visit their website at www.equityproject.org. The Equity Project offers an excellent resource in a report examining the experiences of LGBT youth in juvenile courts across the country. The report, *Hidden Injustice: Lesbian, Gay, Bisexual, and Transgender Youth in Juvenile Courts* (2009), is based on information collected from surveys and interviews with juvenile justice professionals, focus groups and interviews of youth who possess relevant firsthand experience and an extensive review of relevant social science and legal research findings. Download it free of charge at www.equityproject.org/pdfs/hidden_injustice.pdf.

The National Juvenile Defender Center (NJDC) provides support to public defenders, appointed counsel, law school clinical programs and non-profit law centers to ensure quality representation in urban, suburban, rural and tribal areas. NJDC offers a wide range of integrated services to juvenile defenders, including training, technical assistance, advocacy, networking, collaboration, capacity building and coordination. For more information, visit their website at www.njdc.info.

The American Bar Association Center on Children and the Law: Opening Doors for LGBTQ Youth in Foster Care Project offers an excellent resource in their publication *Opening Doors for LGBTQ Youth in Foster Care: A Guide for Lawyers and Judges* by *Mimi Laver and Andrea Khoury* (2008). For more information, see www.americanbar.org/groups/child_law/projects_initiatives/openingdoors.html or www.thekidsarelistening.org.

For sample LGBTQ policies adopted by out-of-home care agencies, contact Lambda Legal at 212-809-8585 or toll-free at 1-866-LGBTEEN (1-866-542-8336).

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Working with Transgender Youth

Like all young people in care, transgender youth are entitled to bias-free attention to their unique needs and to be safe in their placements and services. They should be supported in their gender identity and never required to conform to traditional conceptions of gender in order to receive appropriate care. Child welfare professionals who work with transgender young people should be educated about transgender issues and prepared to work sensitively with these clients. Knowledge about lesbian, gay and bisexual issues may be helpful in working with transgender young people, but gender identity issues may be very different from issues related to sexual orientation.

KNOW WHAT IT MEANS TO BE TRANSGENDER AND USE THE TERM APPROPRIATELY.

Transgender is an umbrella term used to describe people whose gender identity, one's inner sense of being male or female, differs from the sex assigned to them at birth. **Gender-nonconforming** people are people whose gender expression, the outward communication of gender through behavior or appearance, differs from expectations associated with the sex assigned to them at birth. **Transgender girls** are people who were assigned the sex of male at birth but identify as female. **Transgender boys** are people who were assigned the sex of female at birth but identify as male.

Everyone has both a sexual orientation and a gender identity. Gender identity is different from sexual orientation. Transgender people may identify as heterosexual, lesbian, gay, bisexual or questioning.

EDUCATE YOURSELF ON GENDER DYSPHORIA.

The incongruity between people's internal sense of self as either male or female and their anatomical or birth sex can lead to depression and severe emotional distress. When these feelings rise to clinically significant levels, a person may be suffering from gender dysphoria, a diagnosable medical condition found in the

Diagnostic and Statistical Manual of Mental Disorders (DSM). Treatment of gender dysphoria is focused on providing support, not changing a person's gender identity. It may include services like individual and family counseling and such medical care as hormone therapy and surgery to align the physical body with the internal sense of self as male or female. Once transgender people are able to express their gender identity, they are able to go on to lead happy, fulfilled lives. As a result, some people oppose the classification of transgender identity as a disorder, while others recognize the advantages of having explicit standards of health care for transgender individuals. All concur, however, that transgender youth need to be supported, affirmed and safe and free to express their identities.

BE AWARE OF HEALTH CARE PROTOCOLS FOR TRANSGENDER INDIVIDUALS.

The World Professional Association for Transgender Health (www.wpath.org) has developed internationally recognized protocols for diagnosing and treating youth and adults with gender dysphoria. These protocols recommend that transgender young people gain real-life experience through dressing in the clothes and using names and pronouns associated with their gender identity. Young people age 16 years and older are seen as candidates for an individualized assessment for

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medical treatment to enable them to begin their physiological transition.

ALLOW TRANSGENDER YOUTH TO EXPRESS THEIR GENDER IDENTITY.

Allow transgender youth to express their gender identity through their chosen attire, hairstyles, names, mannerisms and

ENSURE THAT TRANSGENDER YOUTH HAVE ACCESS TO TRAINED AND AFFIRMING MEDICAL AND MENTAL HEALTH CARE PROVIDERS.

Advocate for transgender youth to receive competent and affirming mental health and medical services, including access to monitored use of hormones if deemed medically appropriate. When youth don't have access to the health care services they

// 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 in Care

other physical presentations without punishment or ridicule. Don't assume that transgender youth are "acting out" when they express their gender identity. The clothing and personal style that an individual chooses are important aspects of self-expression. Support transgender youth in these choices and challenge restrictive policies that may not allow such freedom.

TREAT INFORMATION ABOUT A YOUTH'S GENDER IDENTITY AS CONFIDENTIAL TO ENSURE PRIVACY.

Child welfare professionals have a legal responsibility to protect

need, they may resort to buying hormones from the streets without a doctor's supervision. This can lead to serious medical injury. Transgender youth may also engage in dangerous or illegal behaviors to pay for these services.

In their official position statement affirming access to appropriate medical care for transgender people, the American Psychological Association states, "Significant and long-standing medical and psychiatric literature exists that demonstrates clear benefits of medical and surgical interventions

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

–Youth in Care

confidential information regarding youth in their care. This includes information about a youth's gender identity. At times, disclosure to foster parents, school faculty or other child welfare professionals may be necessary, such as when making decisions about a youth's housing, bathroom use, showering or health and mental health services. However, such disclosure should not be made without first obtaining the youth's permission.

USE YOUNG PEOPLE'S PREFERRED NAMES AND PRONOUNS.

Respect transgender young people's preferred names and gendered pronouns that best reflect their sense of self as female or male. By doing so, you validate their identity and sense of self-worth. If you're unsure which pronoun an individual youth prefers, ask sensitively rather than simply making assumptions.

PROTECT TRANSGENDER YOUTH FROM PHYSICAL AND EMOTIONAL ABUSE.

Transgender youth are often at increased risk for abuse and violence by adults or other youth. Be clear that transphobic language, bias and bullying will not be tolerated, and respond to such behavior with swift and appropriate consequences. Model accepting and affirming behavior for all youth in your care.

to assist gender variant individuals seeking transition."¹

MAKE ROOM ASSIGNMENTS AND HOUSING DECISIONS BASED ON THE WELL-BEING OF INDIVIDUAL YOUTH.

In sex-segregated facilities, don't assign transgender youth to the girls' or boys' units strictly based on the sex assigned to them at birth. Instead, make individualized decisions based on the physical and mental well-being of the youth, their level of comfort and safety, the degree of privacy afforded, the types of housing available and the recommendations of qualified mental health professionals. The safety of transgender youth should be protected without resorting to isolating or segregating them from the general population. However, single occupancy rooms, if available, may be an acceptable alternative for transgender youth in sex-segregated facilities.

PROVIDE TRANSGENDER AND GENDER-NONCONFORMING YOUTH WITH PRIVACY, SAFETY AND RESPECT.

¹ Jack Drescher & Ellen Haller, APA Caucus of Lesbian, Gay & Bisexual Psychiatrists, *Position Statement on Access to Care for Transgender and Gender Variant Individuals* (2012), available at www.psychiatry.org/advocacy--news-room/position-statements/apa-position-statements.

Be prepared to make accommodations for transgender youth regarding bathroom use and showering. In these situations, the comfort and physical safety of the youth must remain an utmost priority. Allow transgender youth to shower in privacy, at a time set apart from other youth, and to use the bathroom that corresponds with their gender identity. If this option makes youth feel unsafe, they should be given access to a private, single-user bathroom.

ENSURE THAT TRANSGENDER YOUTH ARE SAFE IN THEIR PLACEMENTS AND SCHOOLS.

Identify and monitor appropriate placements for transgender youth that ensure their safety and provide support. Educate others involved in the placement, including child welfare professionals, other youth and foster parents, to create an

development. Frequently cut off from their families of origin, and part of a misunderstood minority, transgender young people can find a sense of family and belonging from mentors and community role models.

LOCATE AND DEVELOP RESOURCES TO HELP TRANSGENDER YOUNG PEOPLE WITH UNIQUE LEGAL ISSUES.

Transgender young people may need assistance and advocacy to obtain proper legal identity documents like birth certificates, state identification cards and driver licenses that reflect the gender with which they identify. They may also need help to obtain legal name changes. Child welfare systems have the responsibility to locate and help develop these resources for transgender young people in their care.

“ Adolescents may be eligible for puberty-suppressing hormones as soon as pubertal changes have begun... Adolescents may be eligible to begin feminizing/masculinizing hormone therapy, preferably with parental consent. ”

—Standards of Care, World Professional Association for Transgender Health

environment that is accepting and respectful of transgender youth. In situations where sleeping arrangements are dictated by gender, create an individualized housing plan that takes into account the youth's wishes as well as their physical and mental well-being.

Transgender youth often face serious safety challenges at school. It is important that transgender youth be placed in schools that will affirm their gender identities. Be prepared to advocate on behalf of transgender youth to ensure that their gender identities are respected. Work with school staff to address use of names and pronouns, clothing and grooming options, bathroom and locker room use and other accommodations.

AVOID ASSUMPTIONS ABOUT TRANSGENDER YOUNG PEOPLE'S SEXUAL ORIENTATION.

Sexual orientation is separate and different from gender identity. Transgender young people may identify as heterosexual, gay, lesbian, bisexual or something else. Learn to differentiate between sexual orientation and gender identity and to comfortably use relevant terminology. Understand that sexual orientation and gender identity are aspects of a person's core understanding of themselves.

PROVIDE TRANSGENDER-FRIENDLY ROLE MODELS AND MENTORS.

Transgender youth, like all youth, need connections to adult role models and mentors. For transgender young people in out-of-home care systems, these positive connections can be harder to find but are nonetheless crucial for their healthy

PROVIDE SUPPORT IN FINDING EMPLOYMENT.

Transgender youth face especially steep barriers to employment. Finding 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're at a further disadvantage. 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. Meaningful opportunities should be offered to transgender young people for education, job training and legal employment.

FURTHER READING:

Lambda Legal, *Transgender Rights Tool Kit: A Legal Guide for Trans People and Their Advocates* (2011), available at www.lambdalegal.org/publications/trans-toolkit.

Lambda Legal & Nat'l Youth Advocacy Coal., *Bending the Mold: An Action Kit for Transgender Students* (2009), available at www.lambdalegal.org/publications/bending-the-mold.

Jody Marksamer, Dean Spade & Gabriel Arkles, Nat'l Ctr. for Lesbian Rights & Sylvia Rivera Law Project, *A Place of Respect: A Guide for Group Care Facilities Serving Transgender and Gender Nonconforming Youth* (2011), available at www.nclrights.org/site/DocServer/A_Place_Of_Respect.pdf?docID=8301.

RESOURCES FOR TRANSGENDER YOUTH:

LAMBDA LEGAL

www.lambdalegal.org/issues/transgender-rights
120 Wall Street, 19th Floor
New York, NY 10005
Phone: 212-809-8585
Email: cwla.lambda.network@lambdalegal.org

GAY & LESBIAN MEDICAL ASSOCIATION

www.glma.org
1326 18th Street NW, Suite 22
Washington, DC 20036
Phone: 202-600-8037
Email: info@glma.org

NATIONAL CENTER FOR TRANSGENDER EQUALITY

www.transequality.org
1325 Massachusetts Avenue NW, Suite 700
Washington, DC 20005
Phone: 202-903-0112
Email: ncte@transequality.org

THE WORLD PROFESSIONAL ASSOCIATION FOR TRANSGENDER HEALTH

www.wpath.org
1300 South Second Street, Suite 180
Minneapolis, MN 55104
Phone: 612-624-9397
Email: www.wpath.org

SYLVIA RIVERA LAW PROJECT

www.srlp.org
147 W. 24th Street, 5th Floor
New York, NY 10011
Phone: 212-337-8550
Toll-Free: 1-866-930-3283
Email: info@srlp.org

RENAISSANCE EDUCATION ASSOCIATION

www.ren.org
987 Old Eagle School Road
Suite 719
Wayne, PA 19087
Phone: 610-636-1990
Email: info@ren.org

“NASW recognizes that there is considerable diversity in gender expression and identity among our population and believes that people of diverse gender—including those sometimes called ‘transgender’—should be afforded the same respect and rights as any other person... A nonjudgmental attitude toward gender diversity enables social workers to provide maximum support and services to those whose gender departs from the expected norm. ”

—National Association of Social Workers



Lambda Legal

120 Wall Street, 19th Floor
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Getting Down to Basics

Tools to Support LGBTQ Youth in Care

Keeping LGBTQ Youth Safe in Juvenile Justice & Delinquency Placements

Many young people who are lesbian, gay, bisexual, transgender or questioning their sexual orientation or gender identity (LGBTQ) and in the custody of juvenile justice and delinquency systems are unsafe in their placements and are not receiving appropriate services. Professionals working within these systems must ensure that LGBTQ young people are protected from harm and supported in their development.

ACKNOWLEDGE THEIR EXISTENCE.

If you work in the juvenile justice and delinquency systems, you probably work with LGBTQ young people. Some may be out to you as LGBTQ, while others may hide their identities to avoid conflict. Never rely on unfounded myths and stereotypes about LGBTQ people in an effort to identify LGBTQ youth. Instead, treat all young people in custody with respect for their individuality and their decision to be open or not about their sexual orientation or gender identity.

UNDERSTAND THE FACTORS CONTRIBUTING TO DISPROPORTIONATE NUMBERS OF LGBTQ YOUTH IN THESE SYSTEMS.

Research shows that young people facing family rejection, harassment and failure at school are more likely to enter the child welfare and juvenile justice systems. LGBTQ youth are more likely than their non-LGBTQ peers to face abuse and neglect at home, including being thrown out by their families. They are also more likely to be harassed and victimized at school. All too often, dropping out of school and living on the streets are seen as the only alternatives for survival. On the streets, LGBTQ teens may be forced into illegal activities, including sex work, to support themselves. LGBTQ youth of color congregating in public places, in particular, face selective enforcement of “quality of life” and “morals” regulations. Violations of age-of-consent laws between young people of the same sex are more likely to be criminally charged and to be punished more harshly than violations between different-sex partners. These factors contribute to the over-representation of LGBTQ youth in juvenile justice and delinquency systems.

ADOPT POLICIES TO IMPROVE THE QUALITY OF CARE PROVIDED TO LGBTQ YOUTH.

Adopt explicit written policies that provide guidance on how to better meet the needs of LGBTQ youth in juvenile justice settings and that

prohibit discrimination and harassment based on actual or perceived sexual orientation, gender identity or HIV status. These policies should also include mandatory training for staff on sexual orientation and gender identity and guidance with regard to rooming assignments, dress codes, requests to be called by names and pronouns that match a youth's gender identity and access to gender dysphoria treatment for transgender youth.

SEEK ALTERNATIVES TO DETENTION OF LGBTQ YOUTH.

LGBTQ youth are often detained even when detention is uncalled for, because their families refuse to accept their LGBTQ status, or the court believes that incarceration will keep these youth safe from their own LGBTQ behavior.¹ Such detentions are “inappropriate and unnecessary.”² Seek safe “alternative placements”³ for LGBTQ youth when detention is not warranted, and encourage families to understand the disastrous effect rejection can have on LGBTQ youth. For more information about the importance of family acceptance on the health and well-being of LGBTQ youth, visit the Family Acceptance Project™ website at <http://familyproject.sfsu.edu>.

SEEK OUT SAFE, AFFIRMING PLACEMENTS.

LGBTQ youth should be placed in facilities that have LGBTQ-inclusive nondiscrimination policies and where qualified staff have been trained to protect and support LGBTQ youth. If no such placements exist in your community, advocate for these changes at an existing facility.

1 Katayoon Majd, Jody Marksamer & Carolyn Reyes, *Hidden Injustice: Lesbian, Gay, Bisexual and Transgender Youth in Juvenile Courts* 95 (2009), available at www.equityproject.org/pdfs/hidden_injustice.pdf (internal citations omitted).

2 *See id.*

3 *Id.* at 97.

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PROTECT THE RIGHT OF LGBTQ YOUTH TO SAFETY.

All young people in state custody are entitled to state protection from physical and emotional harm from other juveniles or the staff. The federal right to safety while in state custody is grounded in the Fourteenth Amendment of the U.S. Constitution and has been enforced by courts around the country. In fact, juveniles are entitled to greater civil rights protections than adult prisoners while in state custody. The right to safety has been held by courts to include the right to appropriate medical and mental health care services. When a young person in state custody is harassed, harmed or not provided adequate treatment and services, the state officials responsible for ensuring protection can be held personally liable. Courts have awarded sizeable monetary awards for damages in cases involving mistreatment of LGBTQ young people.⁴ In 2007 and 2008, the Hawaii Youth Correctional Facility and the New York State Office of Children and Family Services implemented policies to protect LGBTQ youth in their care. California's Juvenile Justice Safety and Protection Act prohibits discrimination and harassment based on sexual orientation and gender identity specifically in juvenile facilities.⁵

ENSURE FREEDOM FROM UNREASONABLY RESTRICTIVE CONDITIONS OF CONFINEMENT.

Unlike adult inmates, young people in the custody of the juvenile justice system have not been "convicted" of crimes. They are entitled to services intended to rehabilitate—not punish—they. The public policy and legislative intent behind the juvenile justice and delinquency systems are to provide services to help a youth adjudicated as a delinquent to become a productive member of society. While some restrictions on the freedom of young people within these institutions are necessary for safety purposes, these restrictions must be "reasonably related" to a legitimate government interest. If not, they are inappropriate punishment. LGBTQ young people in these systems shouldn't be subjected to conditions amounting to punishment or be stigmatized or humiliated as part of their treatment. Searches may be necessary to maintain the safety of youth in juvenile justice settings, but for transgender youth they can invoke undue distress. In situations where it is necessary to conduct a search on a transgender youth, ensure that the search is conducted by a staff member with whom the youth feels comfortable, and that it is done in private. Under no circumstances should a search ever be used as an opportunity to determine a youth's genital status.

PROVIDE APPROPRIATE SERVICES.

Young people confined in institutions have the right to receive adequate medical and mental health services. Ignoring the health care needs of an LGBTQ young person in state custody would violate the young person's right to safety. For example, if a youth diagnosed with gender dysphoria exhibits a need for medical and psychological intervention and nothing is done to address that need—or worse, if the youth is referred to a so-called conversion or reparative therapist to change them—his or her legal rights have been violated. LGBTQ youth must be afforded access to affirming medical and mental health care. For transgender youth, this may include transition-related health care.⁶ Youth also have the right to comprehensive sexual health education. For more information, visit the web page for the Center for HIV Law and Policy at

⁴ *R.G. v. Koller*, 415 F. Supp.2d 1129 (D. Haw. 2006); *Rodriguez v. Johnson*, No. 06CV00214 (S.D.N.Y. filed Jan. 11, 2006).

⁵ Cal. Welf. & Inst. Code §§ 224.71(i), 224.73 (effective 2008).

⁶ For more information, see Lambda Legal's *Transgender Rights Toolkit: Survival Tips for Trans Youth*, www.lambdalegal.org/publications/trt_survival-tips-for-trans-youth (2012) and *Transition-Related Health Care*, www.lambdalegal.org/publications/trt_transition-related-health-care (2011).

www.hivlawandpolicy.org/public/teensense.

Furthermore, every institution should have policies governing the supervision and treatment of suicidal youth. Research shows that LGBTQ young people facing extreme forms of harassment and abuse are at an increased risk for suicidal ideation and behavior. Ensure that anti-LGBTQ harassment is prevented, and that appropriate mental health services are available for victims.

PROTECT LGBTQ YOUTH FROM SEXUAL ABUSE.

LGBTQ youth are often vulnerable and at increased risk for sexual abuse in juvenile justice settings. Staff should assess risk of sexual victimization and abuse of LGBTQ youth in a sensitive manner. Special attention should be given to prevent, detect and respond to sexual assault of LGBTQ youth. In 2012 the U.S. Department of Justice released national standards in accordance with the Prison Rape Elimination Act of 2003 (PREA), aimed at protecting inmates and detained juveniles from sexual abuse. For more information about how the PREA standards protect LGBTQ people, please read the National Center for Transgender Equality fact sheet found here: www.transequality.org/Resources/PREA_July2012.pdf.

DON'T ASSUME LGBTQ YOUTH ARE POTENTIAL SEX OFFENDERS.

LGBTQ youth shouldn't be treated as or housed with sex offenders unless they have a history of offending behavior. It's unacceptable for a juvenile justice or delinquency facility automatically and arbitrarily to assume based on unfounded stereotypes that LGBTQ young people should be segregated from the general population and placed with sexually aggressive youth.

PROVIDE A SOUND CLASSIFICATION SYSTEM.

Every facility must have a sound classification system for identifying and protecting the safety of youth. LGBTQ youth shouldn't be inappropriately placed with an aggressive population, with known sex offenders or with other youth who display anti-LGBTQ behaviors and attitudes. Recognize the risk of harm to a young person if he or she is openly LGBTQ or perceived by others to be LGBTQ. Consider the maturity, physical size, offense history and other risk factors, including sexual orientation and gender identity, in determining the appropriate level of security and confinement for a particular youth.

NEVER UNNECESSARILY ISOLATE LGBTQ YOUTH FROM THE GENERAL POPULATION.

LGBTQ youth should never be placed in isolation or segregation simply because of their sexual orientation or gender identity, or as punishment for being open with others about their identity. The American Psychiatric Association has denounced the practice of isolation in juvenile justice facilities, stating, "Children should not be subjected to isolation, which is a form of punishment that is likely to produce lasting psychiatric symptoms."⁷ Whether for administrative convenience or out of a well-meaning desire to protect LGBTQ youth from harassment, subjecting LGBTQ youth to isolation for extended periods of time violates their legal rights.

⁷ Am. Psychological Ass'n, *News Release No. 09-12: Incarcerated Juveniles Belong in Juvenile Facilities* (Feb. 27, 2009), available at http://www.njjn.org/uploads/digital-library/resource_1050.pdf.

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Working with Homeless LGBTQ Youth

Lesbian, gay, bisexual, transgender and questioning (LGBTQ) youth become homeless at alarming rates. Many LGBTQ youth feel compelled to run away from their families or child welfare 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 child welfare system, unprepared to support themselves and without a permanent place to live. If out-of-home systems of care are not safe and appropriate for LGBTQ youth, these young people attempt to forge a life on the streets rather than seek services and supports from these systems.

UNDERSTAND HOW HOMELESS AND RUNAWAY YOUTH SHELTERS ARE FAILING LGBTQ YOUTH.

Between 20% and 40% of all homeless youth in the United States identify as LGBT.¹ Frequently rejected by their families or fleeing abusive long-term placements, these youth are too often misunderstood and mistreated by the staff and other residents at temporary shelters. Harassment, assault and even rape within these facilities are common experiences. The data is sobering: half of a sampling of lesbian and gay youth who had been in out-of-home care reported that they had spent periods of time living on the streets in preference to the hostile environments they had found in these settings.²

DEVELOP AN UNDERSTANDING OF THE RISKS FACED BY HOMELESS LGBTQ YOUTH.

Being homeless imperils a young person's physical and emotional security. According to a 2002 study by the University of Washington, LGBTQ homeless youth are physically or sexually victimized by an average of seven more people than non-LGBTQ homeless youth.³ With nowhere

to go and no means of support, some may be forced to engage in survival behaviors that place them at significantly higher risk for mental health problems, substance abuse and exposure to sexually transmitted infections. Some of these survival behaviors, such as sex work, are illegal, leading many LGBTQ homeless youth to encounters with the juvenile justice and delinquency systems. It's important that child welfare and shelter care services acknowledge these risks and prevent young people from feeling as though they have no other choice but to take them.

PROVIDE SAFE AND SUPPORTIVE CHILD WELFARE SERVICES TO YOUTH THROWN OUT OF OR FLEEING ABUSIVE FAMILIES.

Many LGBTQ homeless and runaway youth experience abuse and rejection by their families because of their sexual orientation or gender identity, and many seek assistance from police and child welfare systems. Unfortunately, these youth may be turned away due to a lack of sensitivity about the serious issues they are facing. Some are even forced by social workers and police officers to return home to unsafe environments. If placed in care, many find that they are not safe in their placements. A 2006 study found that 65% of 400 homeless LGBTQ youth reported having been in a child welfare placement in the past.⁴ The large number of homeless LGBTQ youth reflects the fact that the child welfare system is failing these young people.

1 Nicholas Ray, Nat'l Gay & Lesbian Task Force Policy Inst. & Nat'l Coal. for the Homeless, *Lesbian, Gay, Bisexual and Transgender Youth: An Epidemic of Homelessness* (2006), available at www.thetaskforce.org/downloads/HomelessYouth.pdf.

2 Gerald P. Mallon, *We Don't Exactly Get the Welcome Wagon: The Experience of Gay and Lesbian Adolescents in Child Welfare Systems* (1998).

3 Bryan N. Cochran, Angela J. Stewart, Joshua A. Ginzler & Ana Mari Cauce, *Challenges Faced by Homeless Sexual Minorities: Comparison of Gay, Lesbian, Bisexual, and Transgender Homeless Adolescents with Their Heterosexual Counterparts*, 92 Am. J. Pub. Health 773 (2002).

4 Heather M. Berberet, *Putting the Pieces Together for Queer Youth*, 85 Child Welfare 261 (2006).

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ENSURE THE SAFETY OF LGBTQ YOUTH IN HOMELESS SHELTERS AND CHILD WELFARE FACILITIES.

Given the number of LGBTQ youth cycling between the child welfare and shelter systems of care, it's critically important that all shelters and child welfare facilities take immediate steps to ensure the safety of these young people. Every agency providing shelter care and services should adopt and enforce LGBTQ-inclusive nondiscrimination policies, provide training on LGBTQ issues for all staff and display visible signs of support for LGBTQ people. It's crucial to send a clear message throughout each facility that anti-LGBTQ harassment and discrimination will not be tolerated.

RESPOND TO THE SPECIAL NEEDS OF HOMELESS TRANSGENDER YOUTH.

Transgender homeless youth often are especially unsafe at shelters that require them to be assigned to beds according to their sex assigned at birth and not their gender identity. These insensitive shelter policies may cause a transgender youth who identifies as female to be placed in a male facility, where she is at increased risk of abuse and rape. Furthermore, sex-segregated bathrooms, locker rooms and dressing areas within these facilities are often inappropriate and unsafe for transgender youth. When making decisions with transgender youth regarding sleeping or bathroom and shower use, staff must take into account the physical and mental well-being of the youth as well as the youth's own wishes.

As is the case with lesbian, gay, bisexual and questioning youth, transgender youth who are unsafe in shelters are more likely to run away. On the streets they frequently find a thriving, oftentimes dangerous, black market for hormones and other medical procedures they seek to align their physical bodies with their gender identities. Those providing care and services to homeless transgender youth should link these youth with appropriate medical service providers in their communities to reduce the risk that they will take their healthcare into their own hands on the streets.

MAKE APPROPRIATE, INDIVIDUALIZED CLASSIFICATION AND HOUSING DECISIONS.

Don't make housing decisions within homeless youth shelters based on myths and stereotypes about LGBTQ people. For example, never assume that all LGBTQ youth are more likely to engage in sexual behaviors than their heterosexual peers, or that they're all potential sex offenders. Conversely, don't unnecessarily isolate or segregate LGBTQ young people, or prohibit them from having roommates, as a means to ensure their safety. While this may be motivated by good intentions, it will only deprive LGBTQ youth of opportunities to interact with their peers and will compound their feelings of isolation. However, when making housing decisions for transgender youth, sometimes a single room for sleeping will be the most effective means to ensure safety.

CREATE COMMUNITY CONNECTIONS FOR HOMELESS LGBTQ YOUTH.

Help homeless LGBTQ youth to access community services and supportive adult mentors, and stand up for them if they encounter negative biases and discrimination. Develop an up-to-date list of LGBTQ resources in the community and distribute it to everyone in the agency, including to youth who may wish to contact community resources privately.

DISPLAY LGBTQ-SUPPORTIVE SIGNS AND SYMBOLS.

By displaying LGBTQ-supportive images such as pink triangles, rainbows or safe zone stickers, shelter care facilities send the clear message to all youth and staff that LGBTQ youth are welcomed and affirmed. LGBTQ youth are quick to pick up on these cues from their environment; it often makes an enormous difference just seeing them displayed. Lambda Legal's LGBTQ Youth in Out-of-Home Care poster is available in English and Spanish free of charge online at www.lambdalegal.org.

CONNECT WITH ADDITIONAL RESOURCES.

National Recommended Best Practices for Serving LGBT Homeless Youth, co-authored by the National Alliance to End Homelessness, Lambda Legal, the National Network for Youth and the National Center for Lesbian Rights (2009), offers agencies guidance to improve care for homeless LGBT youth. It can be downloaded at www.lambdalegal.org/issues/youth-in-out-of-home-care or ordered from Lambda Legal at 1-866-LGBTTeen (1-866-542-8336) (toll-free) or 212-809-8585.

The National Gay and Lesbian Task Force and the National Coalition for the Homeless have partnered to co-author two publications regarding LGBT homeless populations. Their initial report is entitled *Transitioning Our Shelters: A Guide to Making Homeless Shelters Safe for Transgender People* (2003). Their follow-up report, *Lesbian, Gay, Bisexual and Transgender Youth: An Epidemic of Homelessness* (2006), looks at LGBT youth as a whole and explores the reasons why so many of these youth are homeless and the risks they face in shelters and on the street. Both publications are available at www.thetaskforce.org.

The National Alliance to End Homelessness (www.endhomelessness.org) offers resources and information about homelessness among LGBT youth, including *Supporting Homeless Transgender and Gender Non-Conforming Youth* (2012).

The particular challenges faced by transgender and gender-nonconforming youth in congregate care settings are examined in *A Place of Respect: A Guide for Group Care Facilities Serving Transgender and Gender Non-Conforming Youth* (Jody Marksamer, Dean Spade & Gabriel Arkles, Nat'l Ctr. for Lesbian Rights & Sylvia Rivera Law Project, available at www.nclrights.org/site/DocServer/A_Place_Of_Respect.pdf?docID=8301).



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Faith-Based Providers Working with LGBTQ Youth

Faith-based organizations and individuals motivated by their religious commitment have long played an important role in providing unbiased charitable and social services. Indeed, many religious communities welcome and affirm lesbian, gay, bisexual, transgender and questioning (LGBTQ) people, and many individuals are motivated by their religious faith to help LGBTQ youth in foster care. But the anti-LGBTQ beliefs of some religious traditions may create ideological barriers that undermine the professional obligation to create a supportive system of care for LGBTQ youth.

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EXAMINE PERSONAL BELIEFS THAT MIGHT CONFLICT WITH PROFESSIONAL OBLIGATIONS TO LGBTQ YOUTH.

The child welfare system is responsible for providing all youth in care a safe living environment free from harassment, humiliation and abuse. An LGBTQ young person should never be placed in a setting where he or she will be subject to religious condemnation or indoctrination. Child welfare practitioners and foster parents should acknowledge and examine any anti-LGBTQ biases they might have. If these personal religious beliefs might prevent offering nonjudgmental care to an LGBTQ young person, the practitioner or foster parent should seek outside support and make alternative care arrangements. They must put the needs of young people above their own personal beliefs.

RESPECT FEDERAL AND STATE CONSTITUTIONAL PROHIBITIONS AGAINST RELIGIOUS DISCRIMINATION.

Faith-based agencies that receive government funds to provide social services or that care for children in state custody must adhere to the bedrock constitutional mandate of separation of church and state. This means that they cannot discriminate on the basis of religious

beliefs or engage in religious proselytizing against those who are LGBTQ. Many faith-based organizations have long provided important social services while respecting civil rights and the separation of church and state.

RESPECT THE RIGHT OF LGBTQ YOUTH NOT TO BE SUBJECTED TO RELIGIOUS INDOCTRINATION.

The First Amendment to the U.S. Constitution guarantees the right to religious freedom, which includes the right to be free from government-sponsored religious indoctrination and the freedom not to subscribe to a particular religion or set of religious beliefs. As agents of the state, it's imperative that foster parents and other child welfare professionals not impose their personal religious beliefs on children in their care. LGBTQ young people often feel 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.

ENSURE THAT POLICIES AND PROTOCOLS ARE IN PLACE TO SUPPORT AND AFFIRM LGBTQ YOUTH.

Child welfare policy makers at faith-based agencies should issue clear written policies and guidelines that mandate nondiscrimination and equal treatment for all young people in care, regardless of sexual orientation or gender identity. Professional standards should be developed based on the needs of children and youth. These standards should also be incorporated into the licensing requirements for foster and group homes and enforced by all public and private licensing agents. Religious beliefs should never be used as justification for denying supportive services for LGBTQ youth in care.

MANDATE TRAINING ON LGBTQ ISSUES FOR CHILD WELFARE STAFF AND FOSTER PARENTS.

All caregivers should be prepared to deal appropriately with sexual orientation and gender identity issues and to provide a healthy living environment for youth in care. Training and education on sexual orientation and gender identity are critically important to meeting that goal. In order to dispel ignorance and misunderstanding, and to encourage adherence to existing professional best practice standards, information and guidance should be provided throughout the system.

If your agency or organization needs assistance organizing a training session, Lambda Legal can help. In 2009, Lambda Legal partnered with the National Association of Social Workers (NASW) on a Train-the-Trainer initiative designed to build the capacity, awareness and skills of out-of-home care professionals serving LGBTQ youth in foster care, juvenile justice centers and homeless shelters. Master Trainers are available to facilitate trainings throughout the country. To find Master Trainers in your area or to order copies of the NASW-Lambda Legal curriculum entitled *Moving the Margins: Training Curriculum for Child Welfare Services with LGBTQ Youth in Out-of-Home Care*, by Diane Elze, Robin McHaelen, Nat'l Ass'n Soc. Workers & Lambda Legal (2009), contact Lambda Legal at 1-866-LGBTeen (1-866-542-8336) (toll-free) or 212-809-8585, or download it for free at www.lambdalegal.org/publications/moving-the-margins.

CONSIDER THE RELIGIOUS BELIEFS OF A PROSPECTIVE CAREGIVER FOR AN LGBTQ YOUTH.

Prior to placing an LGBTQ youth, child welfare practitioners should consider whether the religious beliefs of a prospective caregiver or foster or adoptive family are not in the child's best interests. Foster families may need guidance to understand the line between their obligations as caregivers and their personal religious beliefs. Where there are strong religious beliefs against LGBT people, practitioners should assess whether conflicts may arise as a result, and whether the physical or emotional safety of an LGBTQ young person may be jeopardized in that home.

FACILITATE DIALOGUE AND UNDERSTANDING ABOUT LGBTQ ISSUES.

Child welfare policy makers should facilitate dialogue on LGBTQ issues between and among faith-based and secular child welfare service providers. By encouraging networking and other opportunities to share experiences and resources, faith-based agencies can better support one another to create more accepting and affirming systems of care. Churches and other faith-based organizations can serve as role models and mentors for agencies and individual caregivers struggling with bridging the gap between religious beliefs and professional standards of care.

“ 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 in Care



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Basic LGBTQ Policies, Training & Services for Child Welfare Agencies

There is a dire need for child welfare agencies nationwide to take remedial steps throughout their programs, policies, training and services to improve the quality of care provided to lesbian, gay, bisexual, transgender and questioning (LGBTQ) clients. Agencies providing child welfare services should acknowledge that LGBTQ youth are in their midst and should implement basic yet vital reforms. These specific reforms can help remedy LGBTQ invisibility, prevent abuse and improve care for these vulnerable young people.

ADOPT NONDISCRIMINATION POLICIES AND ENFORCE THEM.

Adopt explicit written policies prohibiting discrimination based on the actual or perceived sexual orientation, gender identity or HIV status of youth, foster and adoptive parents and other household members and child welfare staff. This should include a prohibition on all forms of harassment and discrimination, from name-calling and slurs to physical violence. Incorporate these policies in agency manuals, post them prominently, distribute them to all staff and youth in the system and require that contracting agencies adhere to them as well. Every agency should offer a formal grievance procedure for confidential complaints and provide prompt neutral third-party investigations.

PROVIDE MANDATORY TRAINING FOR STAFF AND FOSTER AND ADOPTIVE PARENTS.

Require mandatory training for staff and foster and adoptive parents on the following topics:

- State and agency nondiscrimination policies regarding sexual orientation, gender identity and HIV status;

- Sensitivity to sexual orientation and gender identity;
- Supporting youth coming out as LGBTQ; and
- Educating LGBTQ youth about their sexuality and sexual health, including prevention of HIV and other sexually transmitted diseases.

In 2009, Lambda Legal and the National Association of Social Workers (NASW) trained 40 master trainers nationwide to teach out-of-home care service providers to work competently with LGBTQ youth. To find master trainers in your area or to order copies of the NASW-Lambda Legal training curriculum entitled *Moving the Margins: Training Curriculum for Child Welfare Services with LGBTQ Youth in Out-of-Home Care*, contact Lambda Legal at 1-866-LGBTTeen (1-866-542-8336) (toll-free) or 212-809-8585.

IDENTIFY AND TRAIN FOSTER PARENTS TO CARE FOR LGBTQ YOUTH.

Your agency should make diligent efforts to identify and train qualified foster and adoptive

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parents, including lesbian, gay, bisexual and transgender adults interested in caring for LGBTQ youth.

PROVIDE SAFE GROUP HOME PLACEMENTS.

Your agency should consider whether in the short term, the pressing needs of LGBTQ youth in group home settings would best be addressed by designating specific group facilities as safe havens for LGBTQ youth. It should, however, be a priority to make every group facility a safe, supportive environment for LGBTQ youth through strict enforcement of nondiscrimination policies, staff training, sensitivity education for non-LGBTQ residents and services and resources for LGBTQ youth.

ENSURE THE AVAILABILITY OF APPROPRIATE COUNSELING SERVICES.

Your agency should ensure that professional one-on-one and group counseling services are available for LGBTQ youth. Your agency should also adopt a strict policy against the use of so-called conversion or reparative therapies intended to alter a person's sexual orientation or gender identity.

IDENTIFY AND DISTRIBUTE RESOURCE LISTS AND COMMUNITY CONTACTS FOR AGENCY STAFF, FOSTER PARENTS AND LGBTQ YOUTH.

Your agency should compile and widely distribute LGBTQ resource guides that include community contacts, peer support groups, reading lists and materials, hotlines, LGBTQ advocates in the child welfare system and other resources. All youth in foster care should have direct, ready and confidential access to developmentally appropriate resources about LGBTQ issues.

PROVIDE MEANINGFUL, CONFIDENTIAL SEXUAL HEALTH EDUCATION AND SERVICES.

Provide youth with developmentally appropriate information and resources about sexuality and sexual health, including LGBTQ issues and prevention of HIV and other STIs. Adopt explicit written policies providing youth with access to free and confidential HIV testing without requiring the consent or notification of their legal guardians. Agency policy should mandate, not merely permit, all employees to maintain confidentiality of a youth's HIV status with disclosure on only a limited, need-to-know basis to provide for a youth's well-being.

CREATE A POSITIVE PHYSICAL ENVIRONMENT IN YOUR AGENCY THAT WELCOMES AND AFFIRMS LGBTQ PEOPLE.

Display recognizable signs and symbols, such as pink triangles and rainbow flags, to let all your clients know that your agency is a sensitive, safe and welcoming place for LGBTQ people. You can post Lambda Legal's LGBTQ Youth in Out-of-Home Care poster, included in this tool kit and available in

English and Spanish at www.lambdalegal.org, as a sign that your LGBTQ clients are safe to be open at your agency.

For sample LGBTQ policies adopted by child welfare agencies, contact Lambda Legal at 212-809-8585 or toll-free at 1-866-LGBTeen (1-866-542-8336).

ADDITIONAL RESOURCES

Child Welfare League of Am., Am. Bar Ass'n Ctr. on Children & the Law: Opening Doors for LGBTQ Youth in Foster Care Project, Diane E. Elze, Family Acceptance Project, Lambda Legal, Legal Servs. for Children, Gerald P. Mallon, Robin McHaelen, Nat'l Alliance to End Homelessness, Nat'l Ctr. for Lesbian Rights, Nat'l Ctr. for Transgender Equality, Nat'l Network for Youth & Sylvia Rivera Law Project, *Recommended Practices to Promote the Safety and Well-Being of Lesbian, Gay, Bisexual, Transgender and Questioning (LGBTQ) Youth and Youth at Risk of or Living with HIV in Child Welfare Settings* (2012), available at www.lambdalegal.org/publications/recommended-practices-youth.

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

– Youth in Care

Diane Elze & Robin McHaelen, Nat'l Ass'n of Soc. Workers & Lambda Legal, *Moving the Margins: Curriculum for Child Welfare Services With Lesbian, Gay, Bisexual, Transgender, and Questioning Youth in Out-of-Home Care* (2009), available at www.lambdalegal.org/publications/moving-the-margins.

Gay, Lesbian & Straight Education Network & Nat'l Ctr. for Transgender Equal., *Model District Policy on Transgender and Gender Nonconforming Students* (2011), available at www.glsen.org/binary-data/GLSEN_ATTACHMENTS/file/000/001/1977-1.pdf.

Jody Marksamer, Dean Spade & Gabriel Arkles, Nat'l Ctr. for Lesbian Rights & Sylvia Rivera Law Project, *A Place of Respect: A Guide for Group Care Facilities Serving Transgender and Gender Nonconforming Youth* (2011), available at www.nclrights.org/site/DocServer/A_Place_Of_Respect.pdf.

Katayoon Majd, Jody Marksamer & Carolyn Reyes, *Hidden Injustice: Lesbian, Gay, Bisexual and Transgender Youth in Juvenile Courts* (2009), available at www.equityproject.org/pdfs/hidden_injustice.pdf.

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Recommendations for Training & Education on LGBTQ Issues

Education and training on lesbian, gay, bisexual, transgender and questioning (LGBTQ) issues are vital to ensuring that child welfare systems provide safe and appropriate care to LGBTQ young people. Everyone working or living in the system, from administrators, agency staff, caseworkers and foster parents to young people in care, should understand that LGBTQ people are entitled to safety and respect. The following recommendations and resources are intended to offer guidance in creating competent training and education programs based upon existing professional standards.

TRAINING ON LGBTQ ISSUES SHOULD BE MANDATORY, COMPREHENSIVE AND ONGOING.

It should be made clear to all child welfare professionals and caregivers that negative behaviors and attitudes toward LGBTQ people cannot be tolerated. Training and education on LGBTQ issues should be integrated into the pre-service and in-service training provided to child welfare professionals and foster and adoptive parents and should be mandatory for everyone working in the system. This training should address the full range of issues relevant to sexual orientation and gender identity and be provided on an ongoing basis. Educational materials on LGBTQ issues, including books and films, should be available at every child welfare agency for staff, caretakers and young people.

VALUES CLARIFICATION EXERCISES INCREASE SENSITIVITY TO LGBTQ PEOPLE.

A first step in working effectively with LGBTQ youth is to acknowledge one's own misconceptions and negative stereotypes. Training participants should assess their own personal beliefs and biases regarding sexuality and gender. By addressing these deeply held beliefs in a supportive environment, training participants are able to explore the cultural, religious and personal sources of their values. The purpose of values clarification exercises is not to alienate or ostracize those participants with negative beliefs, but to confront the ways in which one's values and beliefs can create obstacles toward providing competent care to

LGBTQ clients. Training on LGBTQ issues should emphasize the distinction between one's personal opinions and the professional responsibility to provide safe, affirming and supportive care.

SKILL BUILDING SHOULD BE A CORE PART OF TRAINING ON LGBTQ ISSUES.

Essential professional skills should be cultivated through training on LGBTQ issues. For example, training should impart information and guidance on supporting a young person coming out as LGBTQ. It should offer advice for identifying the warning signs that a young person may be experiencing anti-LGBTQ mistreatment and strategies for intervening on behalf of victims. Training should be provided on the existence and enforcement of LGBTQ-inclusive nondiscrimination laws and policies. It should include the definitions and appropriate contexts for the terms used to describe and talk about LGBTQ people and issues. It should explain the difference between sexual orientation and gender identity. The use of respectful language should be emphasized. Training participants should also be encouraged to examine how subtle cues may impart to an LGBTQ youth that a person is sensitive or hostile. For example, training should include such practical tips as asking a young person if they are "seeing anyone" rather than whether they have a "boyfriend" or "girlfriend." Child welfare professionals and caregivers should be provided with recommendations for creating a welcoming and supportive environment for

FOSTERING TRANSITIONS

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LGBTQ people, such as by displaying LGBTQ-friendly posters and signs.

ADDITIONAL TRAINING RESOURCES

Trainers, model curricula and other educational resources addressing LGBTQ issues are available around the country. Several training resources are listed below. Contact Lambda Legal for additional information and support.

- ***Recommended Practices to Promote the Safety and Well-Being of Lesbian, Gay, Bisexual, Transgender and Questioning (LGBTQ) Youth and Youth at Risk of or Living with HIV in Child Welfare Settings***, Child Welfare League of Am., Am. Bar Ass'n Ctr. on Children & the Law: Opening Doors for LGBTQ Youth in Foster Care Project, Diane E. Elze, Family Acceptance Project, Lambda Legal, Legal Servs. for Children, Gerald P. Mallon, Robin McHaelen, Nat'l Alliance to End Homelessness, Nat'l Ctr. for Lesbian Rights, Nat'l Ctr. for Transgender Equality, Nat'l Network for Youth & Sylvia Rivera Law Project (2012), *available at* www.lambdalegal.org/publications/recommended-practices-youth.¹
- ***A Place of Respect: A Guide for Group Care Facilities Serving Transgender and Gender Non-Conforming Youth***, Jody Marksamer, Dean Spade & Gabriel Arkles, Nat'l Ctr. for Lesbian Rights & Sylvia Rivera Law Project (2011), *available at* www.nclrights.org/site/DocServer/A_Place_Of_Respect.pdf?docID=8301.²
- ***Moving the Margins: Curriculum for Child Welfare Services with Lesbian, Gay, Bisexual, Transgender, and Questioning Youth in Out-of-Home Care***, Diane Elze & Robin McHaelen, Nat'l Ass'n of Soc. Workers & Lambda Legal (2009), *available at* www.lambdalegal.org/publications/moving-the-margins.³

Master Trainers are available to facilitate trainings throughout the country. To find Master Trainers in your area or to order copies of the NASW-Lambda Legal curriculum, contact Lambda Legal at 1-866-LGBTTeen (1-866-542-8336) (toll-free) or 212-809-8585.

1 In 2012, the Child Welfare League of America (CWLA) and a coalition of child welfare advocates and experts joined forces to issue this publication, which offers guidance to state and local child welfare agencies to ensure safe, appropriate care in the best interests of LGBTQ children in the child welfare system.

2 In 2011, the National Center for Lesbian Rights teamed up with the Sylvia Rivera Law Project to author a report providing comprehensive guidance about the treatment of transgender and gender-nonconforming youth in group care facilities, including detention centers, correctional facilities and group homes. The report also provides model policies and a framework for staff to ensure that all youth are given a safe and healthy living environment.

3 In 2009, Lambda Legal partnered with the National Association of Social Workers (NASW) on a Train-the-Trainer initiative designed to build the capacity, awareness and skills of out-of-home care professionals serving LGBTQ youth in foster care, juvenile justice centers and homeless shelters.

- ***National Recommended Best Practices for Serving LGBT Homeless Youth***, Nat'l Alliance to End Homelessness, Lambda Legal, Nat'l Network for Youth & Nat'l Ctr. for Lesbian Rights (2009), *available at* www.lambdalegal.org/publications/national-recommended-best-practices-for-lgbt-homeless-youth.⁴
- ***Out of the Margins: A Report on Regional Listening Forums Highlighting the Experiences of Lesbian, Gay, Bisexual, Transgender and Questioning Youth in Care***, Child Welfare League of Am. & Lambda Legal (2006), *available at* www.lambdalegal.org/publications/out-of-the-margins.⁵
- ***Breaking the Silence: LGBT Foster Youth Tell Their Stories*** (Nat'l Ctr. for Lesbian Rights DVD & Resource CD 2006).⁶
- ***CWLA Best Practice Guidelines for Serving LGBT Youth in Out-of-Home Care***, Shannan Wilber, Caitlin Ryan & Jody Marksamer (2006).⁷
- **The Family Acceptance Project™** is the only community research, intervention, education and policy initiative that works to decrease major health and related risks for LGBT youth, such as suicide, substance abuse, HIV and homelessness—in the context of their families. For more information visit <http://familyproject.sfsu.edu>.

4 This policy brief provides an overview of homelessness among LGBT youth and gives direction to agencies and not-for-profit organizations to increase their competency in working with these youth. The recommendations include specific guidance on improving practice, organizational culture and residential services.

5 Between September 2003 and December 2004, CWLA and Lambda Legal organized Listening Forums in 13 cities around the country for LGBTQ youth in care and the adults who work with them, to share their experiences and identify strategies for bringing about lasting positive change in the child welfare system for LGBTQ people.

6 *Breaking the Silence* is a training DVD that features 10 short autobiographical stories from LGBTQ former foster youth who speak about their experiences in care and what they think child welfare advocates and service providers can do to better support LGBTQ youth in care. It includes a CD containing over 25 additional training tools and resources. It is available free of charge at www.nclrights.org.

7 The *Best Practice Guidelines* provide direction to agencies responsible for LGBTQ youth in out-of-home care, including the topics that should be covered in training and education for agency personnel and caregivers on LGBT issues. It can be purchased at www.cwla.org.

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What the Experts Say: Position & Policy Statements on LGBTQ Issues from Leading Professional Associations

The overwhelming consensus among the country's leading and most respected child welfare, social service, behavioral and medical health, and legal organizations is that lesbian, gay, bisexual, transgender and questioning (LGBTQ) youth and adults deserve respect and support from professional service providers. The following policies and position statements are based upon decades of peer-reviewed and published research and subject matter expertise. The child welfare community, which includes representatives from all of these organizations, should reflect the shared professional opinion that mistreatment of LGBTQ individuals is unacceptable, and should adhere to best practice standards.

AMERICAN ACADEMY OF CHILD & ADOLESCENT PSYCHIATRY

“There is no credible evidence that shows that a parent’s sexual orientation or gender identity will adversely affect the development of the child. [LGBT] individuals historically have faced more rigorous scrutiny than heterosexual people regarding their rights to be or become parents. The American Academy of Child & Adolescent Psychiatry opposes any discrimination based on sexual orientation or gender identity against individuals in regard to their rights as custodial, foster, or adoptive parents.”

Am. Acad. Child & Adolescent Psychiatry, *Gay, Lesbian, Bisexual, or Transgender Parents Policy Statement* (revised 2009), available at www.aacap.org/cs/root/policy_statements/gay_lesbian_transgender_and_bisexual_parents_policy_statement.

AMERICAN ACADEMY OF FAMILY PHYSICIANS

“The AAFP opposes all discrimination in any form, including but not limited to, that on the basis of actual or perceived...sexual orientation [or] gender identity.”

Am. Acad. of Family Physicians, *AAFP Policy Statements: Discrimination, Patient* (1996, 2010

COD), available at www.aafp.org/online/en/home/policy/policies/d/discrimination.html.

“Family physicians are in an ideal position to be aware that their adolescent patients may be dealing with issues of sexual identity or orientation that impact their psychosocial and physical health. Asking open questions about sexual identity and orientation can open a dialogue on family relationships, safe sexual practices, suicide risks and other issues confronting gay, lesbian, bisexual, transgendered and questioning adolescents in a sensitive and accepting atmosphere.”

Am. Acad. of Family Physicians, *AAFP Policy Statements: Adolescent Healthcare, Sexuality and Contraception* (1987, 2011 COD), available at www.aafp.org/online/en/home/policy/policies/a/adol3.html.

AMERICAN ACADEMY OF PEDIATRICS

“The AAP reaffirms the physician’s responsibility to provide comprehensive health care and guidance in a safe and supportive environment for all adolescents, including nonheterosexual adolescents and young people struggling with issues of sexual orientation.”

Barbara M. Frankowski & Committee on Adolescence, Am. Acad. of Pediatrics,

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Sexual Orientation and Adolescents, 113 *Pediatrics* 1827 (2004), available at <http://pediatrics.aappublications.org/content/113/6/1827.full>.

AMERICAN BAR ASSOCIATION

“Every child deserves a permanent home and all the love and care that good parents can provide. Prospective foster and adoptive parents should be evaluated on the basis of their individual character and ability to parent, not on their sexual orientation, and courts should grant adoptions when they are determined to be in the child’s best interest.”

Am. Bar Ass’n, *Recommendation* (adopted by the House of Delegates Feb. 13, 2006), available at www.abanet.org/leadership/2006/midyear/daily_journal/102.doc.

AMERICAN COUNSELING ASSOCIATION

“The American Counseling Association strongly encourages counselors to actively participate in the elimination of all discrimination based on sexual orientation in matters of adoption, child custody and visitation, foster care, and reproductive health services in their practice, research, education and training.”

Am. Counseling Ass’n, *AGLBIC Resolution* (2005), available at www.counseling.org/PressRoom/NewsReleases.aspx?AGuid=244405dc-044e-46ae-aeac-60ca1c8bd6dc.

“The belief that same-sex attraction and behavior is abnormal and in need of treatment is in opposition to the position taken by national mental health organizations, including ACA... The Committee members agree that counselors who offer conversion therapy are providing ‘treatment that has no empirical or scientific foundation[.]’”

Joy S. Whitman, et al. *Ethical Issues Related to Conversion or Reparative Therapy* (2006), available at www.counseling.org/PressRoom/NewsReleases.aspx?AGuid=b68aba97-2f08-40c2-a400-0630765f72f4.

AMERICAN MEDICAL ASSOCIATION

“The AMA reaffirms its long-standing policy that there is no basis for the denial to any human being of equal rights, privileges, and responsibilities commensurate with his or her individual capabilities and ethical character because of an individual’s sex, sexual orientation, gender, gender identity, or transgender status[.]”

Am. Medical Ass’n, *AMA Policies on GLBT Issues, General Policy H-65.990, Civil Rights Restoration* (2005), available at www.ama-assn.org/ama/pub/about-ama/our-people/member-groups-sections/glb-t-advisory-committee/ama-policy-regarding-sexual-orientation.page.

“AMA...opposes the use of ‘reparative’ or ‘conversion’ therapy that is based upon the assumption that homosexuality per se is a mental disorder or based upon the a priori assumption that the patient should change his/her homosexual orientation.”

Am. Med. Ass’n, *AMA Policies on GLBT Issues, Patient-Centered Policy H-160.991, Health Care Needs of the Homosexual Population* (2005), available at www.ama-assn.org/ama/pub/about-ama/our-people/member-groups-sections/glb-t-advisory-committee/ama-policy-regarding-sexual-orientation.page.

“AMA support[s] public and private health insurance coverage for treatment of gender identity disorder as recommended by the patient’s physician.”

Am. Medical Ass’n, *AMA Policies on GLBT Issues, Patient-Centered Policy H-185.950, Removing Financial Barriers to Care for Transgender Patients* (2008), available at www.ama-assn.org/ama/pub/about-ama/our-people/member-groups-sections/glb-t-advisory-committee/ama-policy-regarding-sexual-orientation.page.

AMERICAN PSYCHIATRIC ASSOCIATION

“APA affirms its 1973 position that homosexuality per se is not a diagnosable mental disorder. Recent publicized efforts to repathologize homosexuality by claiming that it can be cured are often guided not by rigorous scientific or psychiatric research, but sometimes by religious and political forces opposed to full civil rights for gay men and lesbians... In the last four decades, ‘reparative’ therapists have not produced any rigorous scientific research to substantiate their claims of cure. Until there is such research available, APA recommends that ethical practitioners refrain from attempts to change individuals’ sexual orientation, keeping in mind the medical dictum to First, do no harm.”

Am. Psychiatric Ass’n, *Position Statement on Therapies Focused on Attempts to Change Sexual Orientation (Reparative or Conversion Therapies): SUPPLEMENT* (2000), available at www.psych.org/advocacy--newsroom/position-statements.

“[T]he American Psychiatric Association...[s]upports laws that protect the civil rights of transgender and gender variant individuals...[u]rges the repeal of laws and policies that discriminate against transgender and gender variant individuals...[o]pposes all public and private discrimination against transgender and gender variant individuals in such areas as health care, employment, housing, public accommodation, education, and licensing...[and] [d]eclares that no burden of proof of such judgment, capacity, or reliability shall be placed upon these individuals greater than that imposed on any other persons.”

Jack Drescher & Ellen Haller, APA Caucus of Lesbian, Gay & Bisexual Psychiatrists, Am. Psychiatric Ass’n, *Position Statement on Discrimination Against Transgender*

and *Gender Variant Individuals* (2012), available at www.psychiatry.org/advocacy--newsroom/position-statements/apa-position-statements.

AMERICAN PSYCHOANALYTIC ASSOCIATION

“The American Psychoanalytic Association affirms the right of all people to their sexual orientation, gender identity and gender expression without interference or coercive interventions attempting to change sexual orientation, gender identity or gender expression... Psychoanalytic technique does not encompass purposeful attempts to ‘convert,’ ‘repair,’ change or shift an individual’s sexual orientation, gender identity or gender expression. Such directed efforts are against fundamental principles of psychoanalytic treatment and often result in substantial psychological pain by reinforcing damaging internalized attitudes.”

Am. Psychoanalytic Ass’n, *Attempts to Change Sexual Orientation, Gender Identity, or Gender Expression* (2012), available at www.apsa.org/About_APsaA/Position_Statements/Attempts_to_Change_Sexual_Orientation.aspx.

AMERICAN PSYCHOLOGICAL ASSOCIATION

“APA has a long-established policy to deplore ‘all public and private discrimination against gay men and lesbians’ and urges ‘the repeal of all discriminatory legislation against lesbians and gay men’... [T]here is no scientific evidence that parenting effectiveness is related to parental sexual orientation: lesbian and gay parents are as likely as heterosexual parents to provide supportive and healthy environments for their children... [T]he APA opposes any discrimination based on sexual orientation in matters of adoption, child custody and visitation, foster care, and reproductive health services.”

Am. Psychological Ass’n, *Sexual Orientation, Parents, & Children* (2004), available at <http://www.apa.org/about/policy/parenting.aspx> (internal citations omitted).

“[T]he American Psychological Association advises parents, guardians, young people, and their families to avoid sexual orientation change efforts that portray homosexuality as a mental illness or developmental disorder and to seek psychotherapy, social support and educational services that provide accurate information on sexual orientation and sexuality, increase family and school support, and reduce rejection of sexual minority youth[.]”

APA Task Force on Appropriate Therapeutic Responses to Sexual Orientation, *Report of the Task Force on Appropriate Therapeutic Responses to Sexual Orientation* at 121 (2009), available at www.apa.org/pi/lgbt/resources/therapeutic-response.pdf.

CHILD WELFARE LEAGUE OF AMERICA

“Based on more than three decades of social science research and our 85 years of service to millions of families, CWLA believes that families with LGBTQ members deserve the same levels of support afforded other families. Any attempt to preclude or prevent gay, lesbian and bisexual individuals or couples from parenting, based solely on their sexual orientation, is not in the best interest of children.”

Child Welfare League of Am., *Position Statement on Parenting of Children by Lesbian, Gay, and Bisexual Adults* (2007), available at www.cwla.org/programs/culture/glbtposition.htm.

“All applicants [for adoption] should be assessed on the basis of their abilities to successfully parent a child needing family membership and not on their...sexual orientation.”

“The family foster care agency should not reject foster parent applicants solely due to their...sexual orientation.”

Child Welfare League of Am., *Standards of Excellence in Adoption Issues* (2000), available at www.cwla.org/programs/culture/glbtpstandards.htm.

EVAN B. DONALDSON ADOPTION INSTITUTE

“Research shows that children fare as well with gay and lesbian parents as those raised by heterosexuals. [S]tudies on children dating back 25 years conclude that children raised by gay and lesbian non-adoptive parents fare as well as those reared by heterosexual parents.”

“All adults should be evaluated and licensed as foster parents based on their capacity to provide nurturing support for children in foster care, rather than on their sexual orientation. Foster families should be chosen based on their ability to meet individual children’s needs. State child welfare policy should explicitly prohibit the exclusion of foster parent applicants solely on the basis of sexual orientation.”

Evan B. Donaldson Adoption Inst., *Expanding Resources for Waiting Children II: Eliminating Legal and Practice Barriers to Gay and Lesbian Adoption from Foster Care* at 5, 6 (2008), available at www.adoptioninstitute.org/publications/2008_09_Expanding_Resources_Legal.pdf.

NATIONAL ADOPTION CENTER

“We believe that every child has the right to a loving, nurturing and permanent family. Therefore, it is the policy of the National Adoption Center that no person should be denied consideration in the adoption process solely based on...sexual orientation[.]”

Nat’l Adoption Ctr., *Our Policies for Providing a Free Adoption Service: Adoptive Parent Assessments* (2008), available at www.adopt.org/assembled/policies.html.

NATIONAL ASSOCIATION OF SCHOOL PSYCHOLOGISTS

“[NASP] supports that all youth have equal opportunities to participate in and benefit from educational and mental health services within schools regardless of sexual orientation, gender identity, or gender expression. Harassment, lack of equal support, and other discriminatory practices toward lesbian, gay, bisexual, transgender, and questioning (LGBTQ) youth violate their rights to receive equal educational opportunities... education and advocacy must be used to reduce discrimination and harassment against LGBTQ youth[.]”

Nat'l Ass'n School Psychologists, *Lesbian, Gay, Bisexual, Transgender, and Questioning Youth (Position Statement)* (2011), available at www.nasponline.org/about_nasp/positionpapers/LGBTQ_Youth.pdf.

NATIONAL ASSOCIATION OF SOCIAL WORKERS

“It is the position of the NASW that same-gender sexual orientation should be afforded the same respect and rights as other-gender orientation... NASW is committed to advancing policies and practices that will improve the status and well-being of all lesbian, gay, and bisexual people.”

Nat'l Ass'n Soc. Workers, *Social Work Speaks: National Association of Social Workers Policy Statements* at 221 (9th ed. 2012).

“NASW recognizes the considerable diversity in gender expression and identity among our population. NASW believes that people of diverse gender—including those who are included under the transgender umbrella—should be afforded the same respect and rights as that any other people. NASW asserts that discrimination and prejudice directed against any individuals on the basis of gender identity or gender expression, whether real or perceived, are damaging to the social, emotional, psychological, physical and economic well-being of the affected individuals, as well as society as a whole, and NASW seeks the elimination of the same both inside and outside the profession, in public and private sectors.”

Nat'l Ass'n Soc. Workers, *Social Work Speaks: National Association of Social Workers Policy Statements* at 340 (9th ed. 2012).

NATIONAL FOSTER PARENT ASSOCIATION

“[T]he National Foster Parent Association acknowledges gay, lesbian, bisexual, transgender and questioning youth are present in the foster care system and encourages and supports establishment of standards, policies and training programs for foster care providers and professionals based

on non-discrimination principles and sensitivity to the sexual orientation of all foster children and youth.”

Nat'l Foster Parent Assoc., *NFPA Position Statements: 118.05 - Gay, Lesbian, Bisexual, Transgender & Questioning Youth* (2012), available at www.nfpaonline.org/Default.aspx?pageId=1020551.

NORTH AMERICAN COUNCIL ON ADOPTABLE CHILDREN

“Children should not be denied a permanent family because of the sexual orientation of potential parents... NACAC believes children and youth in the foster care system who are... LGBTQ deserve loving and permanent families and should be afforded the same rights, services and protections as those who are heterosexual... Unfortunately, many LGBTQ youth are in care solely because of their family's reaction to their sexual orientation or gender identity... The prejudice, family rejection, and mistreatment experienced by LGBTQ youth—or those who are perceived to be LGBTQ—have a tremendous negative impact... NACAC strongly opposes the use of conversion or so-called reparation services that are designed to involuntarily change the sexual orientation of youth.”

North Am. Council on Adoptable Children, *LGBTQ Issues*, available at www.nacac.org/policy/lgbtq.html.

THE WORLD PROFESSIONAL ASSOCIATION FOR TRANSGENDER HEALTH

“The overall goal of the [*Standards of Care for the Health of Transsexual, Transgender, and Gender Nonconforming People*] is to provide clinical guidance for health professionals to assist transsexual, transgender, and gender nonconforming people with safe and effective pathways to achieving lasting personal comfort with their gendered selves, in order to maximize their overall health, psychological well-being, and self-fulfillment... Health is promoted through public policies and legal reforms that promote tolerance and equity for gender and sexual diversity and that eliminate prejudice, discrimination, and stigma. WPATH is committed to advocacy for these changes in public policies and legal reforms.”

World Prof'l Ass'n for Transgender Health, *Standards of Care for the Health of Transsexual, Transgender, and Gender Nonconforming People, 7th Version* (2011), available at www.wpath.org/publications_standards.cfm.

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LGBTQ Youth Resources

A growing body of resources is available to assist the child welfare community to provide competent, supportive care to lesbian, gay, bisexual, transgender and questioning (LGBTQ) young people. The following resources offer support to LGBTQ youth and to the caregivers and professionals in their lives.

CWLA/LAMBDA LEGAL JOINT INITIATIVE: FOSTERING TRANSITIONS

In 2002, the Child Welfare League of America (CWLA) and Lambda Legal launched a historic partnership to change the way LGBTQ youth and adults are treated in the nation's child welfare systems. As leading national advocacy and education organizations, CWLA and Lambda Legal offer assistance on a variety of educational, legal and policy matters to better serve LGBTQ people in the child welfare and juvenile justice systems.

CHILD WELFARE LEAGUE OF AMERICA (CWLA)

www.cwla.org

CWLA is a powerful coalition of hundreds of private and public agencies serving vulnerable children and families. Their expertise, leadership and innovation on policies, programs and practices help improve the lives of millions of children in all 50 states, and their impact is felt worldwide. Their mission is to lead the nation in building public will to ensure safety, permanence, and well-being of children, youth and their families by advancing public policy, defining and promoting practice excellence and delivering superior membership services.

1726 M Street NW, Suite 500
Washington, DC 20036
Phone: 202-688-4200

LAMBDA LEGAL

www.lambdalegal.org

Lambda Legal 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.

120 Wall St., 19th Floor, New York, NY 10005
Phone: 866-LGBTTeen / 212-809-8585
Email: cwla.lambda.network@lambdalegal.org

NATIONAL ORGANIZATIONS

These organizations offer resources for LGBTQ young people and the adults who care for them.

AFFIRMATION: GAY AND LESBIAN MORMONS

www.affirmation.org

Affirmation's mission is to provide a forum for gay Mormons to associate with their peers. It seeks to meet the needs of persons experiencing frustration or alienation from family, friends, and the Church. Affirmation includes extensive resources for transgender individuals and youth.

P.O. Box 1435, Palm Springs, CA 92263-1435
Phone: 661-367-2421

AMBIENTE JOVEN

www.ambientejoven.org

Ambiente Joven is a project of Advocates for Youth and is dedicated to the gay, lesbian, bisexual and transgender Latino/a youth

FOSTERING TRANSITIONS

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community in the U.S. and Latin America, with the goal of providing information about sexual and mental health as well as general cultural information.

BISEXUAL RESOURCE CENTER

www.biresource.net

BRC is a website dedicated to providing resources to the bisexual community as well as to those who identify as pansexual, fluid, heteroflexible, omniseual and queer. It includes youth resources.

P.O. Box 170796, Boston, MA 02117

Phone: 617-424-9595

Email: brc@biresource.net

CASEY FAMILY PROGRAMS, LIFE SKILLS ASSESSMENT, LGBTQ SUPPLEMENT

www.casey.org

Casey Family Programs' Life Skills Assessment is a free and easy-to-use tool to help young people prepare for adulthood. The Assessment includes an optional supplement developed specifically for LGBTQ youth. It provides instant feedback. Customized learning plans provide a clear outline of next steps, and the accompanying teaching resources are available for free or at a minimal cost.

Casey Family Programs

2001 Eighth Avenue, Suite 2700, Seattle, WA 98121

Phone: 206-282-7300

CENTERLINK

www.lgbtcenters.org

CenterLink exists to support the development of strong, sustainable LGBT community centers and to build a unified center movement.

P.O. Box 24490, Fort Lauderdale, FL 33307

Phone: 954-765-6024

Email: centerlink@lgbtcenters.org

CHILDREN OF LESBIANS & GAYS EVERYWHERE (COLAGE)

www.colage.org

COLAGE is a national movement of children, youth, and adults with one or more lesbian, gay, bisexual, transgender and/or queer (LGBTQ) parent/s. COLAGE builds community and works toward social justice through youth empowerment, leadership development, education and advocacy.

4509 Interlake Avenue N, #180, Seattle, WA 98103

Phone: 855-4-COLAGE

Email: colage@colage.org

THE EQUITY PROJECT

www.equityproject.org

The Equity Project is an initiative to ensure that lesbian, gay, bisexual and transgender (LGBT) youth in juvenile delinquency courts are treated with dignity, respect and fairness. The Equity Project examines issues that impact LGBT youth during the entire delinquency process, ranging from arrest through post-disposition.

Email: info@equityproject.org

FAMILY ACCEPTANCE PROJECT™

<http://familyproject.sfsu.edu>

The Family Acceptance Project™ is the only community research, intervention, education and policy initiative that works to decrease major health and related risks for LGBT youth, such as suicide, substance abuse, HIV and homelessness—in the context of their families. It uses a research-based, culturally grounded approach to help ethnically, socially and religiously diverse families decrease rejection and increase support for their LGBT children.

San Francisco State University

3004-16th Street, #201, San Francisco, CA 94103

Email: fap@sfsu.edu

FAMILY EQUALITY COUNCIL

www.familyequality.org

The Family Equality Council works to ensure equality for LGBT families by building community, changing hearts and minds and advancing social justice for all families.

P.O. Box 206, Boston, MA 02133

Phone: 617-502-8700

Email: info@familyequality.org

THE GAY, LESBIAN & STRAIGHT EDUCATION NETWORK

www.glsen.org

GLSEN, the Gay, Lesbian and Straight Education Network, strives to ensure that each member of every school community is valued and respected regardless of sexual orientation or gender identity/expression.

90 Broad St., 2nd Floor, New York, NY 10004

Phone: 212-727-0135

Email: glsen@glsen.org

GENDER SPECTRUM

www.genderspectrum.org

Gender Spectrum provides education, resources and training to help you create a more gender sensitive and supportive environment for all people, including gender variant and transgender youth. In a simple, straightforward manner, Gender Spectrum helps students, families, schools, and organizations understand and address the concepts of gender identity.

Their accessible, practical approach is based on research and experience, enabling their clients to gain a deeper understanding of gender variance.

1122 E. Pike Street #796, Seattle, WA 98122
Phone: 510-567-3977
Email: info@genderspectrum.org

GLBT NATIONAL HELP CENTER

www.glbtnationalhelpcenter.org
The GLBT National Help Center is dedicated to meeting the needs of this community and those questioning their sexual orientation or gender identity. It offers free and confidential peer-counseling, information and local resources for cities and towns throughout the United States. It offers counseling to callers of all ages about coming out issues, relationship concerns, HIV/AIDS anxiety, safer-sex information and more.

2261 Market St., PMB #296, San Francisco, CA 94114
Phone: 888-843-4564
Toll-Free Youth Talkline: 800-246-PRIDE
Email: info@glbtnationalhelpcenter.org

MATTHEW'S PLACE

www.matthewsplace.org
An online community and resource center for LGBTQ and allied youth, the Youth Lounge provides resources about LGBTQ youth friendly shelters, outreach centers and empowerment programs across the country. It includes moderated chats, discussion boards and informational columns from notable individuals in the LGBTQ and allied communities.

NATIONAL CENTER FOR LESBIAN RIGHTS

www.nclrights.org/youth
NCLR's Youth Project advances the rights of LGBTQ youth through education, public policy and precedent-setting casework. By bringing the issues faced by LGBTQ youth front and center, it is changing the legal landscape for all youth, and ensuring health and safety for the next generation of all young people.

870 Market Street, Suite 370, San Francisco, CA 94102
Phone: 415-392-6257
Email: info@nclrights.org

NATIONAL CENTER FOR TRANSGENDER EQUALITY

www.transequality.org
The National Center for Transgender Equality (NCTE) is a 501(c)3 social justice organization dedicated to advancing the equality of transgender people through advocacy, collaboration and empowerment.

1325 Massachusetts Avenue NW, Suite 700
Washington, DC 20005
Phone: 202-903-0112

NATIONAL JUVENILE DEFENDER CENTER

www.njdc.info
The National Juvenile Defender Center provides support to public defenders, appointed counsel, law school clinical programs and non-profit law centers to ensure quality representation in urban, suburban, rural and tribal areas. NJDC offers a wide range of integrated services to juvenile defenders, including training, technical assistance, advocacy, networking, collaboration, capacity building and coordination.

1350 Connecticut Avenue NW, Suite 304
Washington, DC 20036
Phone: 202-452-0010
Email: inquiries@njdc.info

NATIONAL NETWORK FOR YOUTH

www.nn4youth.org
The National Network for Youth has been serving the youth of America for more than 30 years by championing the needs of runaway, homeless and other disconnected youth through advocacy, innovation and services.

741 8th Street, SE, Washington, DC 20003
Phone: 202-783-7949

OPENING DOORS PROJECT

www.americanbar.org/groups/child_law/what_we_do/projects/openingdoors.html
The Opening Doors Project is one of many at the ABA Center on Children and the Law. Opening Doors aims to provide the legal and child welfare community tools, resources and support for improving outcomes for LGBTQ young people in foster care.

740 15th Street, NW, Washington, DC 20005-1019
Phone: 202-662-1000

PARENTS, FAMILIES & FRIENDS OF LESBIANS AND GAYS (PFLAG)

www.pflag.org
PFLAG promotes the health and well being of lesbian, gay, bisexual and transgender persons and their families and friends through: support, to cope with an adverse society; education, to enlighten an ill-informed public; and advocacy, to end discrimination and to secure equal civil rights.

1828 L Street, NW, Suite 660, Washington, DC 20036
Phone: 202-467-8180
Email: info@pflag.org

RENAISSANCE TRANSGENDER ASSOCIATION

www.ren.org

Renaissance Education Association is a non-profit, non-political, educational and social support organization founded and designed to educate and support persons regarding transgender issues, sexual orientation, sexual identity or gender identity without prejudice.

987 Old Eagle School Road, Suite 719, Wayne, PA 19087

Phone: 610-636-1990

Email: info@ren.org

SAFE SCHOOLS COALITION

www.safeschoolscoalition.org

The Safe Schools Coalition is an international public-private partnership in support of LGBT youth that is working to help schools, at home and all over the world, become safe places where every family can belong, where every educator can teach and where every child can learn, regardless of gender identity or sexual orientation.

c/o Rosehedge

1401 East Jefferson Street, Suite 401, Seattle, WA 98122

Phone: 206-451-SAFE

Crisis Phone: 877-SAFE-SAFE

SYLVIA RIVERA LAW PROJECT

<http://srlp.org>

The Sylvia Rivera Law Project (SRLP) works to guarantee that all people are free to self-determine their gender identity and expression, regardless of income or race and without facing harassment, discrimination or violence. SRLP seeks to increase the political voice and visibility of low-income people and people of color who are transgender, intersex or gender non-conforming. SRLP works to improve access to respectful and affirming social, health and legal services for these communities.

147 W. 24th Street, 5th Floor, New York, NY 10011

Phone: 212-337-8550 / 866-930-3283 (toll-free)

Email: info@srlp.org

THE TREVOR PROJECT

www.thetrevorproject.org

The Trevor Project is determined to end suicide among LGBTQ youth by providing life-saving and life-affirming resources including a nationwide, 24/7 crisis intervention lifeline, digital community and advocacy/educational programs that create a safe, supportive and positive environment for everyone.

8704 Santa Monica Blvd., Suite 200

West Hollywood, CA 90069

Phone: 310-271-8845

Hotline: 866-4-U-TREVOR

THE WORLD PROFESSIONAL ASSOCIATION FOR TRANSGENDER HEALTH

www.wpath.org

As an international multidisciplinary professional association, WPATH has a mission to promote evidence based care, education, research, advocacy, public policy and respect in transgender health.

1300 South Second Street, Suite 180, Minneapolis, MN 55454

Phone: 612-624-9397

Email: wpath@wpath.org

YOUTH GUARDIAN SERVICES, INC.

www.youth-guard.org

Youth Guardian Services is a youth-run organization that provides support services on the Internet to LGBTQ and supportive youth.

101 East State Street, #299, Ithaca, NY 14850

Phone: 877-270-5152

YOUTHRESOURCE

www.amplifyyourvoice.org/youthresource

YouthResource, a website created by and for LGBTQ young people 13 to 24 years old, takes a holistic approach to sexual health and issues of concern to LGBTQ young people.

c/o Advocates For Youth

2000 M Street NW, Suite 750, Washington, DC 20036

Phone: 202-419-3420

Lambda Legal

120 Wall Street
19th Floor
New York, NY 10005

866-LGBTeen
212-809-8585

www.lambdalegal.org

Child Welfare League of America

1726 M Street NW
Suite 500
Washington, DC 20036

202-688-4200

www.cwla.org

Teaching LGBTQ Competence in Schools of Social Work

The quality of care provided to lesbian, gay, bisexual, transgender and questioning (LGBTQ) youth and their families within child welfare systems in large part hinges on how well prepared social workers and other child welfare professionals are to address LGBTQ issues. Schools of social work are the training grounds for future child welfare practitioners. It is the obligation of these schools to ensure that the social workers they train are equipped to work competently and compassionately with LGBTQ young people. Schools of social work have a unique responsibility to fill the gaps in knowledge and understanding on LGBTQ issues and thereby increase the capacity of child welfare systems to support LGBTQ people.

ENSURE THAT EVERY STUDENT IS PREPARED TO WORK COMPETENTLY AND PROFESSIONALLY WITH LGBTQ CLIENTS.

The National Association of Social Workers (NASW) and the Council on Social Work Education (CSWE), leading organizations that set the standards of practice and education for social workers, both recognize the importance of expanding the concepts of cultural competency within schools of social work to include training and education on sexual orientation and gender identity. Every social worker must be prepared to serve clients from diverse populations, and schools of social work are responsible for ensuring that all graduates can effectively work with LGBTQ clients.

- “Social workers shall advocate for and participate in educational and training programs that help advance cultural competence within the profession.”

Nat'l Ass'n of Soc. Workers, *Standards for Cultural Competence in Social Work Practice*, Standard 8: Professional Education (2001)

- “Social workers understand how diversity characterizes and shapes the human experience and is critical to the formation

of identity. The dimensions of diversity are understood as the intersectionality of multiple factors including...gender identity and expression...and sexual orientation... Social workers recognize the extent to which a culture's structures and values may oppress, marginalize [or] alienate, or create or enhance privilege and power [and] gain sufficient self-awareness to eliminate the influence of personal biases and values in working with diverse groups.”

Council on Soc. Work Educ., *Educational Policy and Accreditation Standards*, Educational Policy 2.1.4—Engage Diversity and Difference in Practice (2008, revised 2010)

ENSURE THAT CURRICULUM CONTENT INCLUDES LGBTQ ISSUES.

Every school of social work should ensure that all relevant courses address LGBTQ issues. They should offer specific educational opportunities to build knowledge and practical skills and professional experience working with LGBTQ people and communities. LGBTQ issues should be integrated into the texts, class examples and scenarios utilized for class projects and discussions. Curriculum content should be updated and supplemented to ensure

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the inclusion of positive and accurate information regarding LGBTQ issues and existing practice standards.

- “Social workers should obtain education about and seek to understand the nature of social diversity and oppression with respect to...sexual orientation[.]”

Nat'l Ass'n of Soc. Workers, *Code of Ethics of the National Association of Social Workers*, 1.05 Cultural Competence and Social Diversity (1996, revised 2008)

- “[The social work] program’s commitment to diversity—including...gender, gender identity and expression...and sexual orientation—is reflected in its learning environment.”

Council on Soc. Work Educ., *Educational Policy and Accreditation Standards*, Accreditation Standard 3.1—Diversity (2008, revised 2010)

PROVIDE OPPORTUNITIES FOR STUDENTS TO PUT INTO PRACTICE WHAT THEY LEARN ABOUT LGBTQ ISSUES.

Practical application of academic concepts is especially important in the training of social workers. Group discussions, role-playing and fieldwork experiences are all essential methods of preparing students to work effectively with individuals and families. Ensure that there are opportunities for students to gain such real-life experiences working with LGBTQ people as well as with families of origin that may be rejecting or hostile toward their child’s sexual orientation or gender identity.

ENCOURAGE STUDENTS TO DEVELOP THEIR KNOWLEDGE OF AVAILABLE LGBTQ RESOURCES AND TO BECOME INVOLVED IN RELEVANT LEGISLATION AND POLICY ADVOCACY.

Encourage social work students to develop their knowledge of supportive LGBTQ resources, including within their communities. This will help prepare them to promote community connections among LGBTQ people in order to combat the social isolation many experience. In keeping with the nondiscrimination values of the NASW and CSWE, encourage students to become active in opposing misguided legislation or policy that negatively affects LGBTQ people in their state or community.

- “Social workers should act to prevent and eliminate domination of, exploitation of and discrimination against any person, group or class on the basis of...sexual orientation[.]”

Nat'l Ass'n of Soc. Workers, *Code of Ethics of the National Association of Social Workers*, 6.04 Social and Political Action (1996, revised 2008)

- “Social workers...understand the forms and mechanisms of oppression and discrimination...and engage in practices that advance social and economic justice.”

Council on Soc. Work Educ., *Educational Policy and Accreditation Standards*, Accreditation Standard 2.1.5—Diversity (2008, revised 2010)

SUPPORT LGBTQ STUDENTS IN THEIR FIELD PLACEMENTS.

Ensure that field placement manuals include resources that may be of particular interest to LGBTQ students, including a list of LGBTQ-friendly field placement agencies. Provide support for LGBTQ students regarding disclosure of their sexual orientation and gender identities within their placements and advice for navigating professional and personal boundaries.

ENCOURAGE ACADEMIC RESEARCH ON LGBTQ ISSUES.

Schools of social work should encourage and academically and financially support scholarship and research around LGBTQ issues and communities. Ensure that your school has the latest LGBTQ publications and materials. A number of publications can be ordered from the CWLA website: www.cwla.org/pubs.

ADVOCATE FOR DEPARTMENTAL AND UNIVERSITY NONDISCRIMINATION POLICIES THAT ARE INCLUSIVE OF SEXUAL ORIENTATION AND GENDER IDENTITY.

If the nondiscrimination policies at your school are not inclusive of sexual orientation and gender identity, advocate for their inclusion. Ensure that policies are implemented and enforced so that students and faculty have a safe and supportive learning environment that is inclusive of LGBTQ issues and individuals. Faculty Hiring and Student Services Committees should work together to create plans to recruit and retain LGBTQ students, faculty and staff. School of social work faculty and staff should be visible advocates and allies to LGBTQ communities and confront covert and overt homophobic, transphobic and heterosexist comments and actions.

NATIONAL SURVEY: SEXUAL ORIENTATION AND GENDER EXPRESSION IN SOCIAL WORK EDUCATION

In 2009, Lambda Legal and the CSWE conducted a survey study of social work programs to assess how well they are preparing students to provide competent and respectful services to LGBTQ individuals and LGBTQ youth in out-of-home care. See www.lambdalegal.org for the study findings and best practice recommendations for schools of social work.

Lambda Legal

120 Wall Street
19th Floor
New York, NY 10005
866-LGBTTeen
212-809-8585
www.lambdalegal.org

Child Welfare League of America

1726 M Street NW
Suite 500
Washington, DC 20036
202-688-4200
www.cwla.org

Combating Misguided Efforts to Ban Lesbian & Gay Adults As Foster & Adoptive Parents

Under long-settled child welfare policy and practice, foster and adoptive parents are evaluated as individuals on a case-by-case basis. Child welfare professionals—not politicians—are best equipped to make sound judgments about which adults are qualified to serve as foster and adoptive parents for particular children. Furthermore, all leading national associations of child welfare professionals concur that lesbian and gay adults are as fit as any others to be considered for service as foster or adoptive parents. Yet despite this clear professional consensus, some states carry politically motivated legislative and administrative policies that prohibit otherwise qualified lesbian and gay adults from service. These misguided efforts are contrary to the best interests of the many children in need of nurturing foster and adoptive parents and unfair to the lesbian and gay adults who are well-equipped to care for them.

EFFORTS TO BAN LESBIAN AND GAY ADULTS FROM FOSTERING AND ADOPTING CHILDREN ARE COUNTER TO OVERWHELMING SOCIAL SCIENCE EVIDENCE AND PROFESSIONAL CONSENSUS.

Decades of social science data show that children raised by lesbian and gay adults fare just as well as other children. Every leading professional child welfare organization in this country strongly supports the practice of licensing lesbian and gay people as foster and adoptive parents according to the exact same criteria applied to all other applicants. Efforts to prohibit lesbian and gay people from serving as foster and adoptive parents are contrary to the mainstream professional consensus on the subject, represented by these statements of the following leading professional organizations:

The American Academy of Pediatrics
“The American Academy of Pediatrics recognizes that a considerable body of professional literature provides evidence that children born with parents who are homosexual can have the same advantages and the same expectations for health, adjustment, and development as can children whose parents are heterosexual.”¹

1 Am. Acad. of Pediatrics, *Policy Statement on Coparenting and Second-Parent Adoption by Same-Sex Parents*, 109 Pediatrics 339, 339 (2002, reaff'd 2010).

The National Association of Social Workers
“Legislation seeking to restrict foster care and adoption by gay, lesbian, bisexual or transgender people should be vigorously opposed.”²

The Child Welfare League of America
“Based on more than three decades of social science research and our 85 years of service to millions of families, CWLA believes that families with LGBTQ members deserve the same levels of support afforded other families. Any attempt to preclude or prevent gay, lesbian and bisexual individuals or couples from parenting, based solely on their sexual orientation, is not in the best interest of children.”³

“The family foster care agency should not reject foster parent applicants solely due to their... sexual orientation.”⁴

“All applicants [for adoption] should be assessed on the basis of their abilities to successfully

2 Nat'l Ass'n of Soc. Workers, *Foster Care and Adoption, Social Work Speaks: National Association of Social Workers Policy Statements, 2003-2006* (6th ed. 2003), at 150.

3 Child Welfare League of Am., *Position Statement on Parenting of Children by Lesbian, Gay, and Bisexual Adults* (2005), available at www.cwla.org/programs/culture/glbtcposition.htm.

4 Child Welfare League of Am., *CWLA's Standards of Excellence for Family Foster Care Services* (1995), available at www.cwla.org/programs/culture/glbtcstandards.htm.

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parent a child needing family membership and not on their... sexual orientation.”⁵

The North American Council on Adoptable Children (NACAC)

“Children should not be denied a permanent family because of the sexual orientation of potential parents...All prospective foster and adoptive parents, regardless of sexual orientation, should be given fair and equal consideration. NACAC opposes rules and legislation that restrict the consideration of current or prospective foster and adoptive parents based on their sexual orientation.”⁶

continue to exist in many states in our country and around the world.”⁹

The report also notes the increasing numbers of non-heterosexual parents in the United States and the positive outcome this has on the well-being of adoptable children.

“Lesbian and gay parents, like their heterosexual counterparts, are providing love, nurturance, stability and life-long permanence for...children. Moreover, they are doing so with a high level of parenting sensitivity and competence, comparable to that found among heterosexual adopters. And the evidence is

“ Any attempt to preclude or prevent gay, lesbian and bisexual individuals or couples from parenting, based solely on their sexual orientation, is not in the best interest of children. ”

– Position Statement of CWLA

Evan B. Donaldson Adoption Institute

A 2006 policy brief entitled *Expanding Resources for Children: Is Adoption by Gays and Lesbians Part of the Answer for Boys and Girls Who Need Homes?* finds no child-centered reason to prevent lesbian and gay adults from becoming adoptive parents, and recommends that lesbian and gay parents be utilized more extensively to provide permanent, loving homes for children living in foster care systems across the country.⁷

According to the 2008 report *Expanding Resources for Waiting Children II: Eliminating Legal & Practice Barriers to Gay & Lesbian Adoption from Foster Care*, “[l]aws that prohibit adoption by non-heterosexual individuals and couples should be rescinded to maximize the number of interested, qualified adoptive families for waiting children.”⁸

In 2011, the Institute published the results of a four-year research project in *Expanding Resources for Children III: Research-Based Practices in Adoption for Gays and Lesbians*. The policy recommendations indicated in this publication affirm those of previous publications, asserting:

“Given that so many children live in institutionalized or temporary settings—and are in need of safe, permanent families—greater efforts should be directed toward removing the legal, political and cultural barriers to LGBT adoption that

that their sons and daughters are adjusting just as well as those being raised by heterosexual parents.”¹⁰

IT IS CONTRARY TO THE BEST INTERESTS OF CHILDREN IN NEED OF LOVING FAMILIES TO DIMINISH THE POOL OF QUALIFIED FOSTER AND ADOPTIVE PARENTS.

State child welfare agencies have an affirmative duty to ensure the safety and well-being of the children in their custody. In 2010 there were over 400,000 children in this country’s foster care systems, of whom more than 100,000 were awaiting adoption by a loving family.¹¹ With only 153,000 licensed foster homes nationwide as of 2004, there remains a critical shortage of available homes to care for all these children.¹² More—not less—effort is needed in every state to find permanent loving families for these waiting children. Measures to bar lesbian and gay foster and adoptive parents, and thus senselessly diminish the pool of potential foster care resources still further, are not in the best interests of children. Such measures would not only ban countless qualified prospective foster parents, further decreasing the already short supply, but would also wrench children already placed with loving, capable foster parents from the stable homes in which they are thriving.

BLANKET BANS AGAINST SERVICE AS FOSTER OR ADOPTIVE PARENTS VIOLATE THE RIGHTS OF LESBIAN AND GAY ADULTS.

The United States Supreme Court has held that restrictions based solely on animus or moral disapproval towards lesbian

5 Child Welfare League of Am., *CWLA’s Standards of Excellence for Adoption Services* (2000), available at www.cwla.org/programs/culture/cwsstandardsadoption.htm.

6 North Am. Council on Adoptable Children, *Position Statement on Gay and Lesbian Adoptions and Foster Care* (2005), available at www.nacac.org/policy/lgbtq.html.

7 Evan B. Donaldson Adoption Inst. (2006), at 6, available at www.adoptioninstitute.org/publications/2006_Expanding_Resources_for_Children%20_March_.pdf.

8 Evan B. Donaldson Adoption Inst. (2008), at 8, available at www.adoptioninstitute.org/publications/2008_09_Expanding_Resources_Legal.pdf.

9 Evan B. Donaldson Adoption Inst. (2011), at 47, available at www.adoptioninstitute.org/publications/2011_10_Expanding_Resources_BestPractices.pdf.

10 *Id.* at 58.

11 U.S. Dept of Health and Hum. Svcs., Admin. for Children & Families, *The Adoption & Foster Care Analysis and Reporting System Report* (2011), available at www.acf.hhs.gov/programs/cb/stats_research/afcars/tar/report18.htm.

12 Foster Care Alumni of Am., *Facts About Children in Foster Care*, [www.fostercarealumni.org/userfiles/file/FCM07_Fact_Sheet_\(national\).pdf](http://www.fostercarealumni.org/userfiles/file/FCM07_Fact_Sheet_(national).pdf), n.3.

and gay people—at bottom the only explanation behind such a restriction—lack even a rational relationship to a legitimate state purpose and are unconstitutional.¹³ State governments are prohibited from adopting laws and policies specifically designed to disadvantage gay and lesbian people.

A BAN ON LESBIAN AND GAY FOSTER PARENTS WOULD WASTE TAXPAYER DOLLARS.

Imposing a ban on lesbian and gay foster parents would not only deprive children of nurturing foster families but would also needlessly impose added costs on already financially strapped child welfare systems. Given the critical shortage of foster families, if lesbian and gay adults are barred from the pool of available homes, many children will be relegated to more restrictive group home settings, which are substantially more expensive than foster family care and where the quality of care, even in the best facilities, rarely approximates that of a loving family. Such arbitrary bans on foster parenting by lesbian and gay adults undoubtedly would invite costly legal challenges as well.

foster parents based on sexual orientation or marital status.¹⁵ In keeping with existing professional standards and research, a number of states and cities have adopted policies making explicit that sexual orientation is not a bar to licensing qualified foster and adoptive parents. Courts also have struck down these arcane bans where they once existed. For example:

Arkansas: In 2011, the Arkansas Supreme Court upheld a lower court ruling that struck down Act 1, a state law banning unmarried couples living together from adopting or fostering children. The court declared that Act 1 violated rights to privacy and equal protection guaranteed under the Arkansas State Constitution. The court stated, “Act 1 directly and substantially burdens the privacy rights of ‘opposite-sex and same-sex individuals’ who engage in private, consensual conduct in the bedroom by foreclosing their eligibility to foster or adopt children, should they choose to cohabit with their sexual partner.”¹⁶

“ County child welfare departments, group home facilities, and foster family agencies have a legal responsibility to provide care, placement, and services to foster children, family members, foster parents, and service providers without discriminating on the basis of actual or perceived ... sexual orientation, gender identity ... or HIV status. ”

– California Foster Care Non-Discrimination Act

THESE ARCAINE BANS HAVE LARGELY BEEN ELIMINATED WHERE THEY ONCE EXISTED, AND STATE CHILD WELFARE SYSTEMS INSTEAD ARE INCREASING THEIR CAPACITIES TO SERVE LESBIAN AND GAY PEOPLE.

There are currently no states that maintain a statutory ban explicitly preventing lesbians and gay men from becoming adoptive or foster parents. However, a few states have laws and directives which could be used to prevent lesbians or gay men from adopting or fostering a child.¹⁴ At the federal level, the Every Child Deserves a Family Act was reintroduced in Congress and the Senate in 2011. If passed, this legislation would prohibit discrimination nationwide against adoptive and

13 *Romer v. Evans*, 517 U.S. 620 (1996); see also *Lawrence v. Texas*, 539 U.S. 558 (2003).

14 A Mississippi statute prohibits “[a]doption by couples of the same gender[.]” Miss. Code Ann. § 93-17-3 (5) (2012). In Utah, only single individuals and legally married couples may foster (U.A.C. R501-12-4 (1) (2012)) and adopt (U.A.C. R512-41-4 (1)(c) (2012)); cohabiting unmarried couples, regardless of their sexual orientation, may not. The Nebraska Department of Social Services does not license “persons who identify themselves as homosexuals” as foster parents. Memorandum from Director of Nebraska Dep’t of Social Servs. (Jan. 23, 1995). In 2012, the Virginia State Code was amended to allow “private child-placing agencies” to refuse to “participate in any placement of a child for foster care or adoption when the proposed placement would violate the agency’s written religious or moral convictions or policies.” Va. Code Ann. § 63.2-1709.3 (2012).

Florida: In 2010, Florida ended its 33-year ban on adoptions by gay men and lesbians when an appellate court declared that the law violated the right to privacy guaranteed under the Florida State Constitution. The State of Florida decided not to appeal the ruling.¹⁷

Missouri: In 2006, a judge in Missouri overturned a Department of Social Services decision denying the foster parent application of a highly qualified applicant solely because she was a lesbian involved in a same-sex relationship. The court held that the Department improperly relied on a state law criminalizing sexual intimacy between same-sex couples that had been deemed unconstitutional by the U.S. Supreme Court in *Lawrence v. Texas* in 2003.¹⁸

Texas: In 2003 and 2005, ill-advised bills were proposed in the Texas legislature to prohibit lesbian and gay adults from fostering and adopting children in that state. Heeding the strong opposition of Texas-based and national child welfare and

15 See H.R. 1681, 112th Cong. (2011); S. 1770, 112th Cong. (2011).

16 *Arkansas Dep’t of Human Servs. v. Cole*, 2011 Ark. 145, *18 (2011).

17 *Fla. Dept. of Children & Families v. X.X.G.*, 2010 Fla. App. LEXIS 14014 (Fla. 3d DCA 2010).

18 *Johnston v. Missouri Dep’t of Soc. Servs.*, Case No. 0516CV09517 (2006), available at www.aclu.org/lgbt/parenting/24194lgl20060217.html.

social work organizations, the legislature has repeatedly refused to pass such a bill into law.

California: In 2003, California’s Foster Care Non-Discrimination Act went into effect, providing that “County child welfare departments, group home facilities and foster family agencies have a legal responsibility to provide care, placement and services to foster children, family members, foster parents and service providers without discriminating on the basis of actual or perceived...sexual orientation, gender identity...or HIV status.”¹⁹

In 2010 the California Department of Social Services issued an all-county information notice to provide child welfare and out-of-home care agencies with information on resources to improve services to “LGBTQ youth, their caregivers and LGBT prospective foster and adoptive parents” and to further illustrate the purpose of Assembly Bill 458, which “prohibits discrimination in the California foster care system on the basis of...sexual orientation [or] gender identity[.]”²⁰

New Hampshire: In 1999, the New Hampshire state legislature overwhelmingly voted to repeal a 1987 law prohibiting lesbian and gay adults from fostering and adopting children.²¹

BANNING LESBIAN AND GAY ADULTS FROM SERVING AS FOSTER AND ADOPTIVE PARENTS IS SIMPLY BAD PUBLIC POLICY.

There is no valid reason to diminish the already critically inadequate pool of prospective foster homes by rejecting otherwise qualified, loving adults based only on sexual orientation. The professional consensus is resoundingly opposed to such bans, and decades of social science research shows no evidence of risk of harm—physical, sexual or emotional—based upon the sexual orientation of a child’s foster, adoptive or birth parents. In fact, more foster and adoptive parent recruitment, not less, is necessary to meet the needs of the most vulnerable members of our society.

Contact Lambda Legal for additional support and resources if you are opposing a proposed ban on lesbian and gay foster and adoptive parents or are seeking to increase the capacity of your state child welfare system’s ability to find lesbian and gay adults to serve as foster and adoptive parents.

CONNECT WITH ADDITIONAL RESOURCES

The Human Rights Campaign Foundation’s “All Children All Families” initiative helps to find permanent families for children by promoting policies that welcome LGBT foster and

19 Cal. Welf. & Inst. Code § 16013(a) (2012).

20 State of Cal. Health and Human Servs. Agency, Dep’t of Soc. Servs., All County Information Notice I-81-10, *Serving Lesbian, Gay, Bisexual, Transgender and Questioning (LGBTQ) Youth, LGBTQ Caregivers and LGBT Prospective Foster and Adoptive Parents* (2010), available at www.dss.cahwnet.gov/lettersnotices/entres/getinfo/acin/2010/i-81_10.pdf.

21 See H.B. 90, 1999 Leg., 156th Sess. (N.H. 1999).

adoptive parents. The program works to help enhance LGBT competence among child welfare professionals and increase opportunities for LGBT people to become foster or adoptive parents to waiting children. For more information, see www.hrc.org/issues/parenting/adoptions/12111.htm.



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LGBTQ Youth Risk Data

Lesbian, gay, bisexual, transgender and questioning (LGBTQ) youth are coming out and publicly acknowledging that they are LGBTQ at younger ages than ever before. For many LGBTQ youth, sexual orientation or gender identity is why they are in out-of-home care in the first place. Their families may have rejected them outright, or they were forced to escape physically or psychologically abusive families who wanted to “cure” or punish them. Further exacerbating their situation is the harassment and violence that LGBTQ youth often face in school settings. As a result, LGBTQ youth are over-represented in out-of-home systems of care. They are at increased risk of homelessness, dropping out of school, physical or emotional abuse, depression, substance abuse, rape and suicide.

20-40% of all homeless youth identify as LGBT.

See Nicholas Ray, Nat'l Gay & Lesbian Task Force Policy Inst. & Nat'l Coal. for the Homeless, *Lesbian, Gay, Bisexual and Transgender Youth: An Epidemic of Homelessness* (2006).

65% of 400 homeless LGBTQ youth reported having been in a child welfare placement at some point in the past.

See Heather M. Berberet, *Putting the Pieces Together for Queer Youth*, 85 Child Welfare 261 (2006).

Half of a sampling of gay and lesbian young people in out-of-home care reported having been homeless at some point in the past.

See Gerald P. Mallon, *We Don't Exactly Get the Welcome Wagon: The Experiences of Gay and Lesbian Adolescents in Child Welfare Systems* (1998).

When compared to heterosexual homeless youth, LGBT homeless youth:

- Are physically or sexually victimized by an average of seven more people;
- Leave home an average of 12 times as compared to seven times for non-LGBT youth;
- Have had nearly twice as many sexual partners;
- Have used 11 of 12 dangerous substances more frequently.

See Bryan N. Cochran, Angela J. Stewart, Joshua A. Ginzler & Ana Mari Cauce, *Challenges Faced by Homeless Sexual Minorities: Comparison of Gay, Lesbian, Bisexual, and Transgender Homeless Adolescents with Their Heterosexual Counterparts*, 92 Am. J. Pub. Health 773 (2002).

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63.5% of LGBTQ students reported feeling unsafe at school because of their sexual orientation, while 43.9% felt unsafe because of their gender expression.

- 81.9% said they had been verbally harassed because of their sexual orientation in the past year and 63.9% said they had been verbally harassed because of their gender expression.
- 38.3% had been physically harassed (*e.g.*, pushed or shoved) in the past year because of their sexual orientation and 27.1% had been physically harassed because of their gender expression.
- 18.3% had been assaulted (*e.g.*, punched, kicked or injured with a weapon) because of their sexual orientation and 12.4% had been assaulted because of their gender expression.
- Less than 40% of students who experienced harassment or assault reported it to school staff. Of those who did report, 36.7% said that no action was taken by the staff.
- Nearly 30% of LGBTQ students surveyed reported missing at least one full day of school in the past month because they felt unsafe or uncomfortable.

See Joseph G. Kosciw, Emily A. Greytak, Elizabeth M. Diaz, Mark J. Bartkiewicz, Madelyn J. Boesen & Neal A. Palmer, Gay, Lesbian & Straight Education Network, *The 2011 National School Climate Survey* (2012).

19% of all transgender people have been homeless at some point in their lives. 55% of those who tried to access a shelter were harassed by staff or residents and 29% were turned away altogether. Of those who were able to access a shelter, 22% were sexually assaulted by residents or staff.

See Jaime M. Grant, Lisa A. Mottet, Justin Tanis, Jack Harrison, Jody L. Herman & Mara Keisling, Nat'l Ctr. for Transgender Equality & Nat'l Gay & Lesbian Task Force, *Injustice at Every Turn: A Report of the National Transgender Discrimination Survey* (2011).

Lesbian, gay and bisexual youth are 190% more likely to use drugs and alcohol than their non-LGB counterparts.

See Michael P. Marshal, Mark S. Friedman, Ron Stall, Kevin M. King, Jonathan Miles, Melanie A. Gold, Oscar G. Bukstein & Jennifer Q. Morse, *Sexual Orientation and Adolescent Substance Use: A Meta-Analysis and Methodological Review*, 103 *Addiction* 546 (2008).

39% of LGBT homeless youth in one study said they had been kicked out of their homes because of their sexual orientation or gender identity; 45% reported involvement with the juvenile justice system.

See Heather M. Berberet, *Putting the Pieces Together for Queer Youth*, 85 *Child Welfare* 261 (2006).

62% of LGBT homeless youth attempt suicide, in contrast to 29% of their homeless non-LGBT peers.

See Nat'l Alliance to End Homelessness, Lambda Legal, Nat'l Network for Youth & Nat'l Ctr. for Lesbian Rights, *National Recommended Best Practices for Serving LGBT Homeless Youth* (2009).

58% of LGB homeless youth in one study reported being the victims of sexual assault, versus 33% of their non-LGB homeless peers.

See Les B. Whitbeck, Xiaojin Chen, Dan R. Hoyt, Kimberly Tyler & Kurt D. Johnson, *Mental Disorder, Subsistence Strategies, and Victimization among Gay, Lesbian, and Bisexual Homeless and Runaway Adolescents*, 41 *J. Sex Research* 329 (2004).

LGB young adults with high levels of family rejection are significantly more likely to report having attempted suicide, high levels of depression, illegal drug use and unprotected sex compared to LGB adults with little or no family rejection.

See Caitlin Ryan, David Huebner, Rafael M. Diaz & Jorge Sanchez, *Family Rejection as a Predictor of Negative Health Outcomes in White and Latino Lesbian, Gay, and Bisexual Young Adults*, 123 *Pediatrics* 346 (2009).



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Getting Down to Basics offers practical tips and information to ensure that lesbian, gay, bisexual, transgender and questioning (“LGBTQ”) young people in out-of-home care receive the support and services they deserve. Developed in partnership by the **Child Welfare League of America** and **Lambda Legal**, this tool kit gives guidance on an array of subjects of importance for LGBTQ youth and the adults and organizations who care for them.

WHAT'S INSIDE

- Overview of Tool Kit
- Basic Facts About Being LGBTQ
- Information for LGBTQ Youth in Care
- Families Supporting an LGBTQ Child
- Caseworkers with LGBTQ Clients
- Foster Parents Caring for LGBTQ Youth
- Congregate Care Providers Working with LGBTQ Youth
- Attorneys, Guardians ad Litem & Advocates Representing LGBTQ Youth
- Working with Transgender Youth
- Keeping LGBTQ Youth Safe in Juvenile Justice & Delinquency Placements
- Working with Homeless LGBTQ Youth
- Faith-Based Providers Working with LGBTQ Youth
- Basic LGBTQ Policies, Training & Services for Child Welfare Agencies
- Recommendations for Training & Education on LGBTQ Issues
- What the Experts Say: Position & Policy Statements on LGBTQ Issues from Leading Professional Associations
- LGBTQ Youth Resources
- Teaching LGBTQ Competence in Schools of Social Work
- Combating Misguided Efforts to Ban Lesbian & Gay Adults as Foster & Adoptive Parents
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