



Increasing Competency in Practice with LGBTQ Youth in Child Welfare Systems

Facilitator's Curriculum Guide

Modules 1-8

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Attachment: Participant Handouts

Introduction

This curriculum was developed with the National Center for Child Welfare Excellence. In developing this curriculum we relied heavily on content from the following resources. Most of the time there is a citation that is specifically applied within the curriculum. But we acknowledge the significant work of these resources in promoting an overall philosophy and approach to the work that may at times defy application of specific citations.

- Getting Down to Basics: Tools to Support LGBTQ Youth in Care. Child Welfare League of America and Lambda Legal. 2002.
- Working with GLBT Children, Youth, and Families. Gerald P. Mallon, Executive Director, National Resource Center for Permanency and Family Connections.
- You're a What? Family Members Reactions and Responses to the Disclosure of a Gay or Lesbian Identity. Gerald P. Mallon, Executive Director, National Resource Center for Permanency and Family Connections. 2004.
- Let's Get this Straight: Building Competent Practice for Working with LGBTQ Children, Youth, and Families for University of Wisconsin School of Social Work. National Resource Center for Permanency and Family Connections. 2011.
- Best Practice Guidelines for Serving LGBTQ Youth in Out-of-Home Care. Child Welfare League of America. Washington, DC. 2006.
- Research Briefs from the Gay, Lesbian, and Straight Education Network (GLSEN) including Findings from the 2007 National School Climate survey.
- Recommended Practices: To Promote the Safety and Well-Being of Lesbian, Gay, Bisexual, Transgender and Questioning Youth and Youth at Risk of or Living with HIV in Child Welfare Settings. Child Welfare League of America. 2012.
- Supporting Your LGBTQ Youth: A Guide for Foster Parents. Child Information Gateway. May 2013.
- Perry, J.R. (2013). Respect, Include, & Empower: Providing Culturally competent Services for Lesbian, Gay, Bisexual, Transgender & Questioning Youth in ACS Care (Training Curriculum). New York City, NY: New York City's Administration for Children's Services.

We wish to acknowledge Dr. Gerald P. Mallon, Executive Director of the National Center for Child Welfare Excellence for his vision in being among the first to develop services for LGBTQ youth in foster care and for his guidance in developing this competency-based training model.

SPECIAL INFORMATION FOR FACILITATORS

Reaching Higher: Increasing Competency in Practice with LGBTQ Youth in Child Welfare Systems was developed by the National Center for Child Welfare Excellence in an effort to reach an improved level of service delivery for LGBTQ youth and their families. The curriculum was developed to increase the competence for all types of child welfare staff--staff providing child protection services; foster care, kinship care, guardianship, and adoption services; and permanency planning and transitional living services. The curriculum is meant to enhance the skills of child welfare staff working with LGBTQ youth-- regardless of where the youth resides or the legal status of the case. While LGBTQ youth living in out-of-home care have faced some of the greatest challenges, there are many youth who continue to live with their families. This curriculum seeks to provide basic skills for supporting LGBTQ youth in all types of out-of-home situations.

The curriculum is divided into modules:

- Modules 1-4 provide introductory information designed to help participants assess their own values and beliefs, learn basic information about the risks and needs of LGBTQ youth and families, and develop basic skills in using language that is accurate and respectful.
- Modules 5-8 focus on blocks of information (related to supporting LGBTQ youth and working with their families) that are then incorporated into skill development through a series of fast paced scenarios entitled "What to Say, What to Do".
- The modules lend themselves to a full day of training with Modules 1-4 in the morning (3.5 hours) and 5-8 in the afternoon (3.5 hours); or two half days of training.

The training can be delivered with co-trainers or a single trainer. A co-training team, with one team member who identifies as LGBTQ or who has expertise in working with LGBTQ youth and families, is an ideal situation. However, it is recognized that in public child welfare agencies there may not be a current level of expertise regarding LGBTQ issues. Therefore the curriculum is written with significant detail information including suggested responses for all the group discussions and activities.

The following will assist you in knowing how to navigate and utilize the curriculum:

- "\sumsymbol{\subset}" designates the use of a power point slide. The use of slides is not necessary, but may enhance the learning experience if the equipment is available.
- Module-at-a-Glance provides the Facilitator with an overview of each module including what handouts and materials are needed.
- Handouts can be copied into one booklet and provided to participants at the beginning of the training day.
- In most cases the content of the handouts is incorporated directly into the Facilitator's Curriculum Guide. When this is done it is immediately visible to the Facilitator as the font is smaller and there is a perpendicular line in the right margin. (By copying the handout into the curriculum the facilitator can avoid going back and forth from the curriculum to the handouts.)

We strongly urge all trainers to download and review the resources cited in the previous "Introduction". These materials reflect some of the best research and practice that has developed in the past years. The developers of these materials have spent many years identifying best practices. Most of these resources can be found on the web and may be downloaded at no charge.

COMPETENCIES AND LEARNING OBJECTIVES

Module One Competency and Learning Objectives:

Is aware of the importance of improving child welfare practice with LGBTQ youth.

- Get acquainted with trainers and one another
- Identify specific learning needs related to serving LGBTQ youth

Module Two Competency and Learning Objectives:

Knows and understands the impact and scope of LGBTQ youth in the foster care system.

- Explain the impact that foster care placement has on LGBTQ youth
- Explain the current safety and risk factors affecting LGBTQ youth in foster care

Module Three Competency and Learning Objectives:

Knows and understands personal, religious, and cultural views and values that influence worker perspectives on LGBTQ youth and families and be able to develop strategies that balance personal beliefs and professional responsibilities.

- Clarify one's personal, religious, and cultural beliefs and values regarding sexual orientation, gender identity, and expression.
- Identify strategies for balancing personal views with professional responsibilities.
- Explain common myths and stereotypes of LGBTQ people/culture and understand accurate information regarding these myths/stereotypes.

Module Four Competency and Learning Objectives:

Knows and understands the differences in terminology associated with sexual orientation, sex, and gender and can integrate and apply this information for conversations with youth and families.

- Explain the differences between sexual orientation, sex, and gender.
- Increase competency in using accurate and culturally appropriate terminology.

Module Five Competency and Learning Objectives

Knows and understands how to assess, support, and affirm a young person in the process of "coming out."

- Describe the role of the child welfare worker in supporting LGBTQ youth.
- Explain common issues around "coming out" and how they might affect young people in out-of-home care.
- Know that "coming out" is not about sexual behavior, but about the
 recognition and disclosure of one's self-identity and relational
 preferences; both of which are critical to psychological, emotional, and
 social development.
- Explain the potential consequences of social and emotional isolation and discrimination on sexual and gender minority clients.

Module Six Competency and Learning Objectives

Knows and understands effective engagement strategies for working with LGBTQ foster youth and families.

- Appreciate the issues and concerns presented by families of LGBTQ young people.
- Describe engagement strategies for strengthening and supporting the families of LGBTQ young people.
- Describe permanency planning strategies to help ensure lifelong supportive connections.

Module Seven Competency and Learning Objectives

Knows and understands how to advocate for LGBTQ young people in their home, school, foster care setting, and community.

- Describe two advocacy strategies for supporting LGBTQ young people.
- Describe two challenges a LGBTQ youth might face in their family, school, community, or church; and identify advocacy strategies.

Module Eight Competency and Learning Objectives

Identify ways to increase one's own competency in working with LGBTQ youth and families.

- Evaluate one's own competence in working with LGBTQ youth and families.
- Develop an action plan to identify specific tasks to increase learning and competence in working with LGBTQ youth and families.

Module-at-a-Glance:

Module Name	Time	Methods	Materials Needed
Module One: Introductions and Workshop Overview	30 mins	Introductions	 ✓ Easel pad and markers ✓ Handout #1: Competencies and Objectives ✓ Prepared Easel Pad Page ✓ A large post-it at each seat (participants are urged to write on this as they come into the room)
Module Two: Let's Look at the Facts	60 mins	Small groups Lecture Guided Discussion	 ✓ Index cards with research findings from Trainer's Resource at end of module ✓ Handout #2: LGBTQ Youth and Risk ✓ Handout #3: LGBTQ Youth in the Child Welfare System—How are We Doing? ✓ Handout #4: Research to Practice ✓ Prepared easel pad page
Module Three: Packing My Suitcase	60 mins	Large Group Module Group/work station module Small Group Discussion	 ✓ Large Index Card ✓ A sign reading "Very comfortable" and a sign reading "Not at all comfortable" ✓ 4-6 work prepared work stations with easel pad pages and markers ✓ Handout #5: Beliefs and Sources of Information ✓ Handout #6: Myth/Fact Sheet ✓ Handout #7: Packing and Unpacking My Suitcase
Module Four: Talking the Talk	45 mins	Large group module Guided Group Discussion	 ✓ Prepared easel pad page with "Terms" ✓ Handout #8: Definitions of LGBTQ Terms ✓ Prepared Index Cards with a term on each card
Module Five: Affirming Engagement with LGBTQ Youth	90 mins	Digital Story Presentation and skill application	 ✓ Digital Story: Jimmy (You may access this digital story at the web site of the National Resource Center for Permanency and Family Connections at http://www.nrcpfc.org/digital stories/YP John J/index.htm) ✓ Computer and equipment for digital story ✓ Handout#9: My Role in Working with LGBTQ Youth ✓ Handout #10: Engaging with Youth to Affirm LGBTQ Identity ✓ Handout#11: What to Say, What to Do (Engagement) ✓ Handout #12: The Stages of LGBTQ Identity Formation ✓ Handout #13: Supporting Youth in the Coming Out Process

			 ✓ Handout #14: What to Say, What to Do (Coming Out) ✓ Handout #15: Supporting Transgender Youth
Module Six: Promoting Family Ties for LGBTQ Youth	60 mins	Group Discussion Presentation and Skill Application	 ✓ Handout #16: Child Welfare Role in Building Positive Relationships between LGBTQ Youth and Families ✓ Handout #17: Tips Sheet: Promoting Acceptance by Families ✓ Handout #18: Tips Sheet: Promoting Safety and Wellbeing for LGBTQ Youth in Foster Care ✓ Handout #19: What to Say, What to Do (Foster and Kinship Care) ✓ Handout #20: Improving Permanency Outcomes and Long Term Connections for LGBTQ Youth
Module Seven: Advocacy and Community Connections	30 mins	Group Discussion Presentation and Skill application	 ✓ Handout #21: Advocating for LGBTQ Youth ✓ Handout #22: What to Say, What to Do (Advocacy) ✓ Handout #23 What Can Supervisors Do to Support Caseworkers to Work with LGBTQ Youth
Module Eight: Closing and Evaluation	15 mins	Action Planning	 ✓ Handout #24: LGBTQ Resource ✓ Handout #25: Action Plan ✓ LGBTQ Resource Manual CDs ✓ Evaluation

MODULE ONE: INTRODUCTIONS AND WORKSHOP OVERVIEW

Time

30 minutes

Competency

Is aware of the importance of improving child welfare practice with LGBTQ youth.

Objectives

- Get acquainted with trainers and one another
- Identify specific learning needs related to serving LGBTQ youth

Materials

- ✓ Easel pad
- ✓ Markers
- ✓ One large sized Post-It at each seat
- ✓ Handout #1: Competencies and Objectives

Prepared Easel Pad Page

INTRODUCTIONS

- Name
- Location/Job
- Read the identified skill on the Post-It

Facilitator's Notes

Welcome the participants. Introduce self and colleagues. Provide background information and share professional experiences related to working with children and families in the child welfare system as well as your particular interest in improving practice with LGBTQ youth and families. Set ground rules for the session.

Examples of Ground Rules:

- Only one conversation at a time.
- Training starts at 8:30—please be on time.
- Respect one another's opinions.
- Participation is expected.
- There are no stupid questions
- No one will attack you if you are not using the politically correct terms
- Participants need to tell trainers if they are lost or do not understand

Refer participants to the Handout: Competencies and Objectives and review with the group. Post the timeframes (lunch, breaks, and end time) on a flip chart and also review with the group.

Ask participants to identify one specific skill they wish to gain or improve through participation in this training and to write this on the Post-It that is in front of them. Note that you will be taking these up so that no one will be able to identify who is writing what. When participants have finished go around and take up the Post-Its and then redistribute them around the room.

Refer participants to prepared easel pad page and ask participants to introduce themselves by stating their name, location/job, and then to read what is written on the Post-It. Record the responses and comment whether or not the training will likely address that particular skill. If the skill will not be addressed let participants know that you will pass this training need on to the appropriate staff.

Thank participants for sharing and summarize by:

- Noting if there were similarities in the types of skills participants wish to gain from participating in the training;
- Ensuring participants that the training will address many of their identified training needs;
- Acknowledging that all in the room are interested in improving practice and work with LGBTQ youth and families;
- Noting that you as a trainer hope to gain new skills and understanding of practice challenges by listening to their experiences

State that this training will explore new skills and best practices in working with LGBTQ youth and families, but to get started there will be a review of some of the knowledge, research, and data that have led us to develop and refine our practice.

MODULE TWO: LET'S LOOK AT THE FACTS

Time

60 minutes

Competency

Knows and understands the impact and scope of LGBTQ youth in the foster care system.

Objectives

- Explain the impact that foster care placement has on LGBTQ youth
- Explain the current safety and risk factors affecting LGBTQ youth in foster care

Materials

- ✓ 7 Large index cards with research findings (See Trainer's Resource at end of module)
- ✓ Handout #2: LGBTQ Youth and Risk
- ✓ Handout #3: LGBTQ Youth in the Child Welfare System—How are We Doing?
- ✓ Handout #4: Research to Practice in Resource Appendix
- ✓ Prepared easel pad page for activity "Research to Practice" (if you are using the power point slides you will not have to prepare this easel pad page):

To what degree does this information/research/data surprise you? What implications does this information have for how we approach our work with youth and families?

Facilitator's Notes

Start with Jake's Digital Story to frame the discussion

☐ Introduce this module by reviewing the competency and learning objectives with participants.

Explain that there is a lot of information and research regarding LGBTQ youth, safety and risk factors that impact them, and how child welfare and other systems have been challenged to better meet their needs. Note that this research and information can be very helpful in looking at ways we can improve practice.

Note that LGBTQ youth are at high risk within the general population, another layer of risk is added for these youth as well as within the child welfare population for poorer outcomes in overall health and well-being and for this reason it is particularly important that we learn better ways to work with our LGBTQ youth. Also note that despite the risks, LGBTQ youth are also very resilient.

Explain that before you begin to review these risks that it is important that participants understand that most of these risks develop due to *misunderstanding* and *lack of acceptance* within our culture.

Ask participants to identify some of the varying experiences that LGBTQ youth may have due to a lack of understanding and acceptance.

Ensure that the following types of experiences are identified in an Open Discussion with Full Group:

- Bullied at school
- Hear negative comments
- May be thrown out of the house or ostracized by family members
- Hide their sexual/gender identity and/or live in fear that others will find out
- Feel different all the time

Ask participants what they think the impact of these experiences is likely to be in the long run.

Encourage the following types of responses:

- Make it very hard for the youth to have high self-esteem
- Feelings of isolation and depression
- Substance use or abuse
- Feelings of anger
- High anxiety
- Lead to running away

Summarize the discussion by making the following points:

- The impact of isolation, feeling different and often unloved and unaccepted is indeed very challenging. Remember also that this is happening along with the already challenging tasks of adolescence.
- It is no surprise that when faced with these challenges LGBTQ youth may be overwhelmed.
- Feelings of being overwhelmed with depression, grief, or anxiety may lead
 to poor decisions in some cases (such as use of substances to selfmedicate); however some decisions may actually reflect how bleak the
 options really are for the youth (such as a youth who has been physically
 or emotionally abused in his or her family).
- It is critical that you understand the context in which risk is heightened for these youth. It is NOT because they are inherently less able or less healthy than non-LGBTQ youth. The risks are heightened due to the isolation, stigma, bullying, harassment, and overall lack of acceptance that many LGBTQ youth experience.

Refer participants to Handout #2: LGBTQ Youth and Risk – laminate each and post – ask everyone to do a Gallery Walk to pause and read each posted Risk

High incidence of substance use and substance abuse problems:

• Massachusetts Youth Risk Survey (2005) indicates higher drug usage at a younger age by LGBTQ youth; and the National Longitudinal Study of Adolescent Health indicated a higher risk for drug use among LGBTQ youth. As is always a concern with substance use, it is possible that many youth are

self-medicating to mask feelings of depression, isolation, and lack of selfesteem.

High incidence of mental health Issues:

Note that being gay, Lesbian, bisexual, transgender or questioning is not considered to be pathological or representative of a mental illness. However, the societal stigma, sense of differentness, isolation, and repeated exposure to negative comments and stereotypes place youth at greater risk for depression, anxiety, and substance use. For LGBTQ youth who do experience mental health issues, it is challenging to find affirming treatment by mental health clinicians who are versed in GLBTQ concerns. Further, the double stigma of being both LGBTQ and dealing with a mental illness can be overwhelming. Consider the challenges of being an African American gay male diagnosed with HIV and mental illness. (Fact Sheet: Mental Health Issues Among Gay, Lesbian, Bisexual, and Transgender. NAMI Multicultural Action Center 2007.)

High incidence of suicide, suicide attempts, or preoccupation with suicide:

 Recent findings from the Family Acceptance Project linked highly rejecting families with dramatically higher rates of attempted suicide and suicide ideation. The National Longitudinal Study of Adolescent Health (2001) and multiple other studies show a higher incidence of suicidal ideation and suicide attempts with the LGBTQ population.

High incidence of running away, homelessness, living on the street:

20-40% of all homeless youth identify as LGBTQ. Many of these youth choose
to live on the street instead of with their families or foster families. Many youth
are abused or neglected by their families because of their gender or sexual
orientation.

Heightened risks for homeless LGBTQ youth:

• Once youth are homeless or living on the street they are susceptible to any number of risks including adequate health care, sexual exploitation, safety, HIV/AIDS and other sexually transmitted diseases.

(Mountz, Sarah. Revolving Doors: LGBTQ Youth at the Interface of the Child Welfare and Juvenile Justice Systems, in LGBTQ Policy Journal at the Harvard Kennedy School. 2011.)

Over-representation within the juvenile justice system:

A disproportionate number of LGBTQ youth find themselves involved with the
juvenile justice system. (Irvine, Angela et.al. in Lesbian, Gay, Bisexual, and
Transgender Youth and the Juvenile justice System" in Juvenile Justice:
Advanced Research, Policy, and Practice. Ed. Jacobs and Sherman. 2011.)
Once youth are running away or living on the streets they open themselves to
many levels of risk including increased contact with law enforcement. Efforts

to meet survival needs may lead to trespassing, shoplifting, prostitution and/or bartering for sex and other illegal activities. Further, research shows that there may be higher enforcement of sex related crimes within the LGBTQ population.

☑ **Refer** participants to Handout #3: LGBTQ Youth in the Child Welfare System—How Are We Doing? and review.

- 78% of youth in placement reported being removed or running away from placements because of hostility toward their sexual orientation or gender identity. (Urban Justice Center 2001)
- LGBTQ youth in a 2002 study reported an average of 6.35 placement. (Mallon, Aledort, and Ferrera, 2002)
- Foster parents may pressure youth to change their sexual orientation, suppress their sexual identities or send them back to the agency. (Clements and Rosenwald. Foster Parents' Perspectives on LGB Youth in the Child Welfare System. Journal of Gay and Lesbian Social Services, 19(1), 57-58.
- Permanency is rarely viewed as an option for LGBTQ youth. (Jacobs and Freundlich, Achieving Permanency for LGBTQ Youth. Child Welfare, 85(2), 299-316.

Ask participants for their reaction to this information, and whether or not they are surprised at any of the information. Further the discussion by asking participants why they think the data indicates such poor outcomes.

Summarize the discussion by noting the following points:

- We are clearly being called to action.
- While the data presents a discouraging picture it also presents us with the opportunity to take stock of the facts—and commit ourselves to doing better.
- Regardless of personal, religious, or moral beliefs it is obvious that we have a population of youth who are suffering and who need the systems that are set up in our society to provide that help to step up to the plate.
- The federal government has made a formal call to action, issuing a directive memo from the Health and Human Services Administration on Children, Youth, and Families encouraging child welfare agencies to

better serve the needs of LGBTQ youth in care; the directive calls for increased training and identified LGBT prospective parents as an untapped resource for better serving LGBTQ youth.

Emphasize that data and research inform all aspects of child welfare practice. Note that studies in the 70's of foster care drift led to permanency planning efforts that have continually been revised as best practices are documented and continue to evolve. Note that while it is sometimes discouraging to review poor outcomes, it also gives us the opportunity to make changes and seek best practices. Emphasize the importance of studying the data and research, and seeking ways to continue to define better practices.

Ask for any further comments or reactions.

Summarize by noting that participants have identified many positive ideas for improving practice and that many of these ideas will be explored in greater depth as the day progresses.

TRAINER'S RESOURCE: FOR USE WITH THE ACTIVITY "RESEARCH TO PRACTICE"Cut out each of the Descriptions A-G and laminate or tape to an index card and post on the Wall

Research A: Demographics

Between 5 and 10% of the general population is LGBT. It is likely that youth in out-of-home care in the child welfare system represent an even higher percentage. Mallon noted that child welfare workers often do not identify that they have LGBTQ youth on their caseloads, drawing concern that workers are not communicating with youth in a way that leads youth to be comfortable identifying as LGBTQ.

This estimate comes from the assumption that 5-10% of the general population is LGBT. John C. Gonsiorek and James D. Weinrich, "The Definition and Scope of Sexual Orientation," in Homosexuality: Research Implications for Public Policy (Newbury Park, CA: Sage Publications, 1991.) Courtney, Dworsky, Lee, and Raap (2009) found a much higher percentage of youth in foster care who identified as something other than fully heterosexual. Mid-west Evaluation Former Foster Youth.

Mallon,G. G.P. Let's Get this Straight: A Gay and Lesbian Affirming Approach to Child Welfare. New York: Columbia University Press. (2000)

Research B: Demographics and Homelessness

Existing literature documents that LGBTQ populations have been acknowledged to a greater extent by social services directed toward runaway and homeless youth than within child welfare settings. Many youth experiencing homelessness are living on the streets because they view it as safer or preferable to child welfare placements where they have experienced verbal or physical harassment and a lack of understanding. 52% of youth experiencing homelessness have had some involvement with the foster care system at some point in their lives.

Mallon, G. 1998. We don't exactly get the welcome wagon: The experiences of gay and lesbian adolescents in child welfare systems. New York: Columbia University Press.

Mallon, G. and Woronoff, R. 2006. Busting out of the child welfare closet: Lesbian, gay, bi-sexual, and transgender affirming approaches to child welfare. Child Welfare 85(2): 115-122.

Research C: Resilience—the Role of Family

The single most significant factor in predicting resilience and positive outcomes for LGBTQ youth is a family that is accepting and supportive of the youth. Caitlin Ryan, a social worker for the Family Acceptance Project at San Francisco State has managed this multi-year mixed methods study. Ryan also found that there are effective ways to work with families to help them modify rejecting behaviors and increase their level of support. These efforts ultimately lead to strengthening families and helping LGBTQ youth to remain at home.

Ryan, Caitlin. 2010. Engaging families to support lesbian, gay, bisexual, and transgender youth: The Family Acceptance Project. Prevention and Researcher 17(4): 11-13.

Research D: Resilience—Importance of Positive Relationships

Rodrigo Torres in a doctoral dissertation for DePaul University in 2012 focused on relational resilience in a qualitative analysis focusing on gay, bisexual, and questioning male youth. Torres argues for a less deficit based framework when looking at how to more effectively work with the gay, bisexual, and questioning population. Relational resilience focuses on strengthening relationships rather than focusing on increasing the individual's strengths or skills. Torres argues that connective, positive, and supportive relationships are key to resilience.

Torres, Rodrigo, 2011. In their own words: A qualitative analysis of relational resilience in the lives of Gay, Bisexual, and questioning male youth. Chicago. DePaul University, Paper 111.

Research E: Resilience—Faith and Spirituality

Lease, Horn, and Noffsinger-Frazier (2005) note that faith experiences result in more positive feelings about self and better psychological health. Further, a report related to the aging LGBTQ population identified religious and spiritual activities as a key factor relating to positive mental and physical health.

Lease, Horne, Noffsinger-Frazier. Affirming faith experiences and psychological health for Caucasian lesbian, gay, and bi-sexual individuals. Journal of Counseling Psychology. 52(3). 2005.

Fredriksen-Goldsen et.al. Disparities and resilience among lesbian, gay, bi-sexual, and transgender older adults. Aging and Health Report.

Research F: Risk—Bullying and Harassment at School

While trying to deal with all the challenges of being a teenager, gay/ lesbian/ bisexual/ transgender teens additionally have to deal with harassment, threats, and violence directed at them on a daily basis. They hear anti-gay slurs such as "homo", "faggot" and "sissy" about 26 times a day or once every 14 minutes. Even more troubling, a study found that sixty percent of middle school LGBT youth had experienced physical harassment and more than a third were actually assaulted as a result of sexual orientation. Middle school students face more hostile environments than high school students, and may have fewer resources to help them. Most students do not report bullying or harassment. What makes this even more concerning is that harassment has been identified as a critical factor in predicting outcomes. The more harassment a youth experiences, the greater the likelihood that he or she will engage in risky behaviors.

GLSEN. 2009. The experiences of lesbian, gay, bisexual and transgender middle school students (GLSEN Research Brief) New York: Gay, Lesbian and Straight Education Network.

Bontempo D.E. and D'Augelli. 2002. Effects of at-school victimization and sexual orientation on lesbian, gay, or bisexual youths' health risk behavior. Journal of Adolescent Health, 30, 364-374.

Research G: Child Welfare Practice Risk--Multiple Placements

LGBTQ youth experience more placements, placement disruptions, and unstable placements in both the juvenile justice and child welfare systems. Mallon, Aledor, and Ferrera in 2002 documented 6.35 average number of placement for LGBTQ youth and asserted that this was related to non-affirming placements where youth may not feel safe or accepted.

Mallon, G., Aledort, N. and Ferrera, M. 2002. There's no place like home: Achieving safety, permanency, and well-being for lesbian and gay adolescents in out-of-home care settings. Child Welfare 81(2): 407-439.

MODULE THREE: PACKING MY SUITCASE

Time

60 minutes

Competency

Knows and understands personal, religious, and cultural views and values that influence worker perspectives on LGBTQ youth and families and be able to develop strategies that balance personal beliefs and professional responsibilities.

Objectives

- Clarify one's personal, religious, and cultural beliefs and values regarding sexual orientation, gender identity, and expression.
- Identify strategies for balancing personal views with professional responsibilities.
- Explain common myths and stereotypes of LGBTQ people/culture and understand accurate information regarding these myths/stereotypes.

Materials

- ✓ A large index card in front of each participant
- ✓ A handout with an empty Suitcase
- ✓ On one end (of the longest wall) hang a large sign that says "Very comfortable" and at the opposite end hang a sign that says "Not at all comfortable"
- ✓ Hang poster paper to set up four to six work stations along the walls of the room. Place 2 to 3 markers at each station. Ensure that there is room for 4-6 participants to gather around the poster paper at each location.
- ✓ Handout #5: Beliefs and Sources of Information
- ✓ Handout #6: Myth/Fact Sheet
- ✓ Handout #7: Packing and Unpacking my Suitcase

Facilitator's Notes

☐ Introduce this module by reviewing the competency and learning objectives with participants.

Introduce the idea that we all approach our "child welfare journey" with a big suitcase full of wishes, hopes, values, feelings, fears, past experiences, beliefs, and dreams. Emphasize that the suitcase may be stuffed with all kinds of things, sometimes even conflicting things or ideas or beliefs that are still in process. Note that just like on any journey you may find that you brought some things that are no longer helpful or that are even holding you back, some things that are perfect, and other things you realize you just didn't bring enough along. Emphasize the importance of doing an inventory at each step of the way to ensure that you have what you need to get the most out of your journey.

Explain that in this session of the training participants will be engaging in some activities that will help them inventory what is in their suitcase so they might decide at this point in the journey what to throw out, what to set aside for use somewhere else, what to keep, what to grow, and what may need to be added.

Ask participants to approach these activities with the following in mind:

- This is not about being right or wrong, but rather about exploring your beliefs and values.
- The more honest you are with yourself and your colleagues the more valuable these activities will be for you.
- Yes we are asking you to publicly share some of your beliefs and values because we want you to be able to learn and process your thinking with one another.
- These activities are about taking inventory—what are you carrying with you as you approach your work—are things weighing you down? Putting up barriers? Helping you along?

• Let's figure out what you might need to rearrange in your suitcase in order to do the best work that you can do.

*Note to facilitator: If the group is relatively small you can conduct this part of the training as an open discussion (which is preferable). If the group is large (more than 20) break into small groups so that participants have an opportunity to discuss the activity. However, actively move among the small groups to assist in guiding discussions.

Ask participants to take the large index card in front of them and to think about a stereotype or belief that they may hold about LGBTQ people. Encourage participants to be very honest and emphasize that they will not have to share what is written on the card. Ask that they put the card away until the end of the day.

Note that the first activity is one that will help participants consider some of their personal beliefs by looking at their level of comfort in responding to different types of situations.

Conduct the activity:

- Show participants the two signs on the wall saying "Very comfortable" and "Not at all comfortable."
- Explain that you will be reading a statement and you will ask participants
 to move along the line between the two signs as if it is a continuum. For
 example, if a participant is unsure or feels that there might be both
 comfortable and uncomfortable components in the situation, the
 participant would stand in the middle between the two signs.
- Ask participants to get out of their seats, stand in the vicinity of the continuum, and prepare to respond to the first statement.
- Read each of the statements and allow participants to adjust their
 position along the continuum. After participants have moved to their
 respective place on the continuum process each of the situations by
 asking two or three people to share why they have positioned themselves
 at that location.

Complete the module with each of these statements:

- A 17 year old youth discloses their sexual identity to you
- An 11 year old discloses their sexual identity to you
- You discover that your church does not support LGBTQ identity
- You have been invited to march in a LGBTQ parade
- You find out that your child's teacher is openly LGBT
- You find out that your doctor is openly LGBT
- You are working with a boy who is gender variant
- Your best friend comes out as LGBT
- Your child comes out as LGBT
- You need to discuss sexual identity with foster parents

Facilitate a discussion to help participants process the activity by asking the following questions.

What were your key learning points from this activity?

Responses are likely to include:

We all have different responses to various situations but in our professional role we need to be aware of these responses.

My reactions varied to the different scenarios. I will need to think about these reactions in terms of providing care to youth.

What did you learn about yourself that surprised you?

Responses are likely to include:

I am more open-minded (or close-minded) than I originally thought.

I have stronger reactions than I felt I would.

Why is this activity important to the work that you do?

Responses are likely to include:

We need to know what our limitations are—the types of situations that we know we can't handle well.

It makes us consider closely the attitudes or beliefs we have that might interfere with good care.

Summarize the module by noting that the activity demonstrated that everyone has a different level of comfort--life experiences, culture, family, friends, religion, work, and exposure to diversity may all have an impact on what you consider your "comfort zone". Note however that in professional child welfare work we may be called to get beyond what always feels comfortable as we have a responsibility to work with all types of people and all types of situations.

Explain that the next module will explore myths and stereotypes about LGBTQ people. Note that there are a number of common myths such as:

- Gay couples identify one person as the "man" and one as the "woman"
- Gay men are usually florists or decorators
- Lesbians hate men
- You can tell if someone is gay or not by looking at them

Refer participants to *Handout#5*: Beliefs and Sources of Information and instruct participants to work individually to complete the handout. Note that they are being asked to make a list of beliefs they may hold now or beliefs they held in the past, and to identify how they developed these beliefs or who provided the information or encouragement for them to develop these beliefs. Tell participants they have 10 minutes to complete their list. Call time after 10 minutes.

Divide participants into dyads, for Pair and Share activity

Call time when it appears the dyads are completing their task.

Ask each group to rotate clockwise (or to the right) to the neighboring work station. Ask that they take a few minutes to review the responses at this work station, compare the responses with their own, and make any additions. After a couple of minutes ask that each group rotate again to the next workstation. Do this until each group has visited each work station.

Reconvene the large group and conduct a large group discussion about misconceptions and truths in relation to LGBTQ people. Ask the following questions:

How much similarity was there between the lists?

Ensure that the following is covered in the discussion:

- o There was quite a bit of repetition in the lists. This points to how prevalent stereotypes may exist within our culture and in fact how stereotypes even become self-perpetuating. People repeat them as if they are fact. Stereotypes may become so accepted that it is difficult for people to challenge them or to identify that they are not based in fact.
- Why are stereotypes damaging?
 Ensure that the following is covered in the discussion:
 - Stereotypes take away individuality and seek to impose qualities across an entire group of people. Even characteristics that could be perceived as positive (such as "gay men are artistic") impose a quality that may or may not be true. But many stereotypes are negative or tend to limit possibilities or can be used as a means to be dismissive. Some stereotypes are viewed through a comedic lens, and people enjoy laughing at jokes that stereotype the LGBTQ community. All of these tend to diminish the totality of a person or a group's identity. Unfortunately it doesn't end there. As we diminish a certain group, and hold our own selves in higher esteem, it gives license to treat this group as less than ourselves. This is very dangerous thinking that easily leads to discrimination, bullying, and violence and/or of passively accepting these behaviors in others.
- Why are stereotypes damaging to our child welfare work within the LGBTQ community? Ensure that the following is covered in the discussion:
 - Our work with children and families is based on relationship.

 Through positive relationships we hope to engage, guide, mentor, and motivate. When we hold onto myths and stereotypes about people we cannot engage in an authentic relationship.

 Stereotypes limit how we see people and how we view their possibilities. Further, stereotypic views can generally be detected thus interfering with any potential to build trust. On a much more concrete level, stereotyping can simply lead you to make wrong decisions or take wrong actions. For example, if you believe that

you can tell someone is gay by how they look or talk, you will inevitably make a mistake.

- What were the most common sources of information?
 - o Parents, siblings, extended family, friends, peers, neighbors, church members, co-workers were all identified. Unfortunately stereotyping is very common so most people can cite more than one person that has contributed to the development of myths and stereotypes. In fact, some myths and stereotypes are so common that they make their way into the media, books, magazine, television shows, and movies. This layering of information, especially if it begins with people very significant to us (family member), and is reinforced by others, and then through media representations, can develop a very firm belief system in our minds. When our lifestyle prevents us from associating with members of the LGBTQ community or openness to hearing their voices, there may be little opportunity to obtain more accurate representations or develop any greater understanding of the community.

*Note to facilitator: A participant may identify a personal experience that contributed to the development of a stereotype--for example, having a close friendship with a gay male who was very effeminate and sensitive which led to an overall belief that this is descriptive of all gay men. In this situation validate the person's experience but discuss how false it is to take an experience with one person as being representative of the entire population of gay males.

Note that LGBTQ persons may not only deal with LGBTQ myths and stereotypes, but potentially with myths and stereotypes related to other aspects of their identity.

- Stereotypes and myths plays out across many levels of identify—a person's ethnicity, religion, where one lives, the profession in which one works etc.
- In fact, it is actually another stereotype that LGBTQ persons are dealing fully with LGBTQ issues at all times. In fact, LGBTQ persons—like everyone else-- have many facets to their lives including their race, ethnicity, age,

- special interests, etc.—and each of these facets may also be open to stereotypes and myths.
- When one stereotype unites with another stereotype it can make perceptions of the LGBTQ person even more distorted and potentially negative.

*Note to facilitator: Use examples that are most related to the populations you serve such as--

- What if you are a Lesbian (with inherent stereotyping about being "strong, man-hating, aggressive") living in Iowa (with inherent stereotyping that hard-working Iowa women are "sweet and demure")?
- What if you are a gay man (with inherent stereotyping about being "effeminate and sensitive") employed as an ironworker (with inherent stereotyping as being "rough and tough")?
- What if you are an Italian Catholic male (with inherent stereotyping related to "traditional, dominant, strong") who is also transgender (with inherent stereotyping of feminine characteristics as well as total misunderstanding of what transgender means)?

Emphasize that identity is complicated, and that overlays of stereotyping and myths about identity can make understanding one another and who we are very challenging—but critical in our work as child welfare professionals.

Distribute Handout #6: Myth/Fact Sheet review. Ask participants for reaction or comments as you highlight each of the myths.

| ABOUT YOUTH |

Myth: Adolescents are too young to know that they are LGBT.

Fact: Research has consistently shown that the average age of awareness of LGBT identity is 10 years of age; the average age of disclosure is 14.

(D'Augelli, A., Grossman, A. and Starks, M. "Parents Awareness of Lesbian, Gay and Bisexual Youth's Sexual Orientation", Journal of Marriage and Family, May 2005.)

Myth: LGBT youth must be separated from the general population to ensure their safety.

Fact: Isolation and separation only serve to punish LGBT youth. The safety of youth in out-of-home care is best ensured by adequate staffing, training, and meaningful programming.

(Model Standards Project: Creating Inclusive Systems for LGBT Youth in Out-of Home Care. Child Welfare League of America, 2005.)

Myth: Providing youth with information about LGBTQ identity, exposing youth to LGBTQ role models, or promoting interaction with LGBTQ peers might falsely convince a youth that he or she is LGBTQ.

Myth: Sexual abuse may lead to the child identifying as LGBT.

Myth: Youth have control over their sexual identity and orientation and can choose not to be LGBT.

Fact: The American Psychological Association acknowledges that the exact cause of sexual identity and orientation has not been identified but the APA concludes that most people "experience little or no sense of choice about their sexual orientation." Knowing gay people, being exposed to information about LGBTQ issues, being sexually abused or any number of other supposedly causative factors has no basis in research.

| ABOUT ADULTS |

Myth: Gay men molest children at higher rates than heterosexuals.

Fact: In a study by Jenny, Roesler, & Poyer (1994), researchers reviewed the medical charts of 352 children evaluated for sexual abuse in a Denver children's hospital. In 74 cases, the abuser was another child or adolescent, none of whom were identified as lesbian or gay. In 9 cases, the abuser could not be identified (e.g., each parent accused the other). In 269 cases, the child (219 girls & 50 boys) was abused by an adult. Both girls and boys were most likely to be abused by their fathers, stepfathers, or other men married to female relatives. Only 2 of these 269 abusers (less than 1%) were identified as gay or lesbian. The researchers concluded that "most child abuse appears to be committed by situational child abusers who present themselves as heterosexuals" (p. 43).

Myth: Having LGBT parents negatively impacts children's adjustment.

Fact: The research does not show that children of LGBT parents are negatively impacted by the parents' sexual identity or orientation. Cambridge Psychologist Dr. Michael Lamb, a leading researcher on child development, summarized over 40 years of research noting that other factors have much greater impact on the child's development. The US National Longitudinal Lesbian Family Study has shown that children of Lesbian parents are just as happy as children of not LGBT parents. Finally Dr. Charlotte Patterson of the University of Virginia has documented that adopted children of same-sex couples were well adjusted.

Explain that understanding how beliefs are instilled and perpetuated is very important if we are going to help create better informed supports and environments for our LGBTQ youth and families.

■ **Refer** participants to *Handout#7*: Packing and Unpacking My Suitcase and conduct an activity to bring together the learning in this module. Explain that participants are asked to reflect on the discussion, presentation, and activities during the past hour and respond to these key questions:

- What Do Social Workers Need to Become LGBTQ Competent?
- What are "your" issues re: LGBTQ persons?
- How Can You Replace Myths with Accurate Information
- How Can You Use Respectful Appropriate Language
- But my mother told me it was true.....
- What did your parent(s)/ folks who raised you, tell you about LGBT people?
- What are your earliest memories as a child about this topic?
- What role did class, culture, ethnicity, race, religion, gender, geography/region, ability, or generation(age) play in this scenario?
- But my mother told me it was true......
- What is the big RED BUTTON on top of your head about LGBT Issues?
- What can you "just not get?" about LGBTQ issues?
- If you do "get it" what drives you crazy about what your colleagues "cannot get it?"
- How did what your mother told you effect you as a social worker?

- How have you acted on this?
- Do you still reflect on what you were told by your mother as a basis for your practice?
- When did you start to (if you have) to make some judgments based on other information, what moved you?
- How does a social worker make the leap from personally based values and practices to professionally based values and practices?
- What beliefs, ideas, or personal qualities do you want to remove from your suitcase at this point?
- What beliefs, ideas, or personal qualities do you want to "grow" or bring more along?
- What new beliefs, ideas, or personal qualities do you want to pack for the journey?

△**Ask** if there is anyone who wants to quickly share:

- Something they are taking out of their suitcase?
- Something they are going to increase or try to bring more along?
- Something new they are going to put in their suitcase?

Thank participants for their participation and willingness to look closely at their values and beliefs; and note that the next module will focus on helping participants better understand terminology related to LGBTQ issues.

MODULE FOUR: TALKING THE TALK

Time

45 minutes

Competency

Knows and understands the differences in terminology associated with sexual orientation, sex, and gender and can integrate and apply this information for conversations with youth and families.

Objectives

- Explain the differences between sexual orientation, sex, and gender
- Increase competency in using accurate and culturally appropriate terminology.

Materials

✓ Prepared easel pad page:

TERMS

Gay

Lesbian

Bisexual

Transgender

Questioning

Sexual Orientation

Coming Out/Disclosure/Being Out/In the Closet/Being Found Out Symbols: Rainbow Flag/ Pink Triangle/Black Triangle/Stonewall

- ✓ Handout #8: Definitions of LGBTQ Terms
- ✓ Place a large index card in front of each participant (if there are more than 22 participants two people may share one word) with each of the terms above (Gay, Lesbian, Bisexual, Transgender, Questioning)

Each card will have one word.

Facilitator's Notes

☑Introduce this module by reviewing the competency and learning objectives with participants.

Note that child welfare professionals and people in general are likely to be confused with some of the terminology related to the LGBTQ community, and may feel intimidated or concerned about proper usage of language. Note that if participants feel this way it is actually good—because proper use of terminology is important.

Ask participants why they think the proper use of terminology and language is important in our child welfare work with LGBTQ youth and their families.

Ensure the following is covered:

- Terminology is part of the knowledge base that we need to have about the LGBTQ community so that we can communicate with LGBTQ youth, their families, and other professionals with a shared understanding;
- Language can be symbolic of your respect and concern for LGBTQ persons;
- Improper use of terminology quickly identifies you as a person who is not knowledgeable about LGBTQ issues;
- Some language may be viewed as derogatory.

Note that language is ever changing and usage may vary according to geography, age, socioeconomic status, and cultural background.

Conduct an activity designed to help participants learn how to correctly use terminology that relates to the LGBTQ community; and to get comfortable using the terms when talking with others.

 Go to the prepared easel pad page entitled TERMS and read out the different grouping of terms.

- Ask participants to pick up the index card that sits in front of them and to move about the room and search for their partner or partners; then proceed to pick up an easel pad page/markers from the front of the room and find a space to work together. (The groups will vary in size from 2 to 5)
- Explain that the purpose of the activity is for them to explore what they think the terms mean and how they would describe or define the terms.
- Instruct them to write their pair or grouping of terms at the top of the page and record the different ideas on the easel pad page.
- Instruct participants NOT to use the Handout in their Participant Notebooks which provides definitions for the words.
- Give a time warning after 5 minutes and then allow another 2-3 minutes.

Process the module by asking someone from each group to report back by sharing their definitions and ideas, as well as sharing what the experience was like for them in trying to define the terms. Allow others to add thoughts or ideas. At this time do not comment or edit the responses.

Refer participants to Handout #8: Definitions of LGBTQ Terms.

- Ask each group to now look up the definitions on the handout, compare the definition to what is on the handout, and note any differences or similarities.
- Call time after 2-3 minutes.
- Ask each group to report back their findings.
- Facilitate discussion among participants regarding the definitions and the use of different terms.

*Note to Facilitator: Most likely there will be some groups that were not able to provide accurate working definitions of the terms. Be encouraging to participants, noting that the purpose of the training is to help them as they struggle with exploring the meanings and also as they begin to use the words out loud in communicating with one another. Emphasize that this is the reason

they were asked to work on the definitions in the small groups as opposed to simply giving them the handout. Note that the exploration process will also help them to better remember the definitions and meaning.

Note that this list is not all inclusive and that within different cultures and subcultures there may be other terms that are utilized. Encourage an open discussion on other terms the group may have heard, but be sure to have participants consider if these terms may carry negative connotations. Cover the following points:

- There are a number of words that may be used within certain parts of the LGBTQ community as part of a political statement to redefine words previously used with negative connotation. (Examples include words such as dyke, faggot, queer). When these terms are used outside the "ingroup" they would likely be seen as very negative or even as hate terms.
- The terms discussed provide a good starting point for being able to use respectful and accurate language. But continue the learning process. Initiate dialogue with your LGBTQ community, talk with service providers who work with LGBTQ clients, and open up your mind and ears to learn about the LGBTQ issues within your community.
- Generally speaking if you approach LGBTQ youth with respect and acceptance they will likely be willing to help you and will be forgiving if you use a term incorrectly. It is better to ask honest questions than to be disingenuous. At the same time it is not the responsibility of LGBTQ youth to train you. You need to have a good working knowledge, which is the process we worked on today.

Ask participants if there are any further questions or comments.

ACTIVITY FIVE: AFFIRMING ENGAGEMENT WITH LGBTQ YOUTH

Time

90 minutes

Competency

Knows and understands how to assess, support, and affirm a young person in the process of "coming out."

Objectives:

- Describe the role of the child welfare worker in supporting LGBTQ youth
- Explain common issues around "coming out" and how they might affect young people in out-of-home care.
- Know that "coming out" is not about sexual behavior, but about the
 recognition and disclosure of one's self-identity and relational preferences;
 both of which are critical to psychological, emotional, and social
 development.
- Explain the potential consequences of social and emotional isolation and discrimination on sexual and gender minority clients.

Materials

- ✓ Digital Story: Jimmy John (You may access this digital story at the web site of the National resource Center for Permanency and Family Connections at http://www.nrcpfc.org/digital_stories/YP_John_J/index.htm)
- ✓ Computer /equipment for digital story
- ✓ Handout #9: My Role in Working with LGBTQ Youth
- ✓ Handout #10: Engaging with Youth to Affirm LGBTQ Identity
- ✓ Handout #11: What to Say, What to Do (Engagement)
- ✓ Handout #12: The Stages of LGBTQ Identity Formation
- ✓ Handout #13: Supporting Youth in the Coming Out Process
- ✓ Handout #14: What to Say, What to Do (Coming Out)

(Prior to this module please review any county or state policies related to transgender youth in foster care and residential/group care placement.)

Facilitator's Notes

☑Introduce this module by reviewing the competency and learning objectives with participants.

Note that this module deals with relationship building with LGBTQ youth. As we have discussed our LGBTQ youth need acceptance and support.

Introduce *Digital Story: Jimmy* for participants. Ask that as they watch the digital story they consider what steps were made or could have been made to be more affirming to Jimmy; and how child welfare professionals were supportive or could have been supportive.

Process the digital story by asking for reactions, and identifying what was done or could have been done by child welfare professionals to support the youth.

Explain that throughout the next training modules the group will be exploring specific skills in working with LGBTQ youth and their families. The modules will include presentations and then an opportunity to "try out the skill" through a series of fast paced activities called "What to Say, What to Do".

Note that the first area we will be looking at is the role of the child welfare professional in working with LGBTQ youth as this is an area that is sometimes confusing.

Refer participants to *Handout #9: My Role in Working with LGBTQ Youth*. Ask participants to complete the survey indicating the degree to which the different activities reflect the role of the child welfare worker. Call time as participants begin to finish.

Ask for volunteers to share their responses and direct a large group discussion about why they responded the way they did. The following notes will help you direct the discussion and give back up resources and research to support best practice.

(These notes are based on Serving LGBTQ Youth in Out-of-Home Care: Best Practices Guide by Wilber, S., Ryan, C., and Marksamer, J. Child Welfare League of America, 2006 and Mallon, G.P. LGBTQ Youth Issues: A Practical Guide for Youth Workers Serving Lesbian, Gay, Bisexual, Transgender, and Questioning Youth. Child Welare League of America, 2010.)

I need to ask the youth if the youth identifies as LGBTQ.

Discussion Notes: Generally speaking it is not seen as the best course of action to ask youth directly if they identify as LGBTQ. Many youth will be

reluctant to discuss the issue, especially if you do not have a relationship or a sense of trust that has been built. Some youth may fear being "outed" and your question could be viewed as a confrontation. The best course of action is to develop a positive and accepting relationship that helps the youth to feel safe to disclose information about themselves as they are ready to do so. Further, you don't necessarily know who identifies as LGBTQ. If a youth is giving you indication that he or she wants to explore the topic then it might be appropriate.

 I need to encourage the youth to disclose their LGBTQ identity to me so I can help them get the services and support they need.

Discussion Notes: You can offer services and supports to youth regardless of knowing their sexual identity or orientation. LGBTQ youth have many aspects to their identity and may have a range of issues. Youth served in the child welfare system are likely to come to our attention because they have had a range of losses, trauma, and/or unmet needs. It is important to look at the range of needs presented. While LGBTQ issues may have heightened the stress of both the youth and the family, there is no doubt that these families may also have a range of issues not solely related to LGBTQ issues such as substance abuse, mental health needs, employment needs, etc. As you work to address the range of needs and issues you can develop a positive relationship with the youth. Through this relationship the youth may at some point disclose their LGBTQ identity or issues to you. Do not totally focus on LGBTQ issues or define the youth entirely in terms of sexual orientation. On the other hand, present yourself as a person who is open and comfortable addressing all types of issues including gender/sexual orientation.

• If the youth discusses LGBTQ identity with me, I need to encourage the youth to tell family and friends.

Discussion Notes: If the youth discloses LGBTQ identity with you it represents a level of trust. Your best response is to continue to engage the youth in sorting out feelings and concerns and helping the youth develop a plan of action that is comfortable for the youth. While you may want the youth to disclose or feel that the family may already know or think that the issues need to be addressed—this is not about you. There may be steps to take to help the youth begin to feel more comfortable, and it **is** appropriate to encourage the youth to take these steps. For example, you can suggest that the youth attend a meeting of the Gay Straight Alliance at school (facilitator should search one out in the local community), explore a website such as queerattitude.com (which is a well moderated online community that addresses "coming out" and other LGBTQ issues), or seek to find a LGBTQ mentor to talk with the youth. (You may also include local resources in your

community here.) You can ask the youth how you might be helpful in working with the family or with friends. For safety reasons it is important to trust the instincts of youth who do not wish to disclose to their families. Further, school bullying statistics clearly indicate the risks a youth may take if they disclose to friends at school.

• If the youth discusses LGBTQ identity with me, I need to refer the youth to therapy.

Discussion Notes: Identifying as LGBTQ is not in and of itself an indicator of a mental health need, diagnosis, or concern. However, we have already discussed how isolation, bullying, fear, and lack of acceptance can certainly contribute to a lack of self esteem and overall feelings of depression. Thus again it is critical to listen to the youth. If the youth is clearly in distress, having overwhelming fears and anxieties, and already dealing with family and societal rejection it is certainly appropriate to talk with the youth about what supports might be most helpful. It would probably be most helpful to offer an array of supports rather than focusing solely on therapy which can carry a connotation that "something is wrong" with the youth. If you do refer the youth to therapy you need to assure that the therapist utilizes a positive youth development approach and is able to be affirming around LGBTQ issues. Obviously if a youth is having suicidal thoughts appropriate mental health services need to be put into place including an immediate evaluation.

• If the youth discusses LGBTQ identity with me, I need to discuss this with the child welfare team.

Discussion Notes: Information related to sexual identity and orientation needs to be handled as confidential information. The "child welfare team" may be a wide array of people including school, volunteers, paraprofessionals, legal staff, and service providers. It is not appropriate to discuss LGBTQ issues in this forum without the youth's permission. It is appropriate to discuss this in supervision where you can carefully consider with your supervisor who would need to be advised of this information.

• If the youth discusses LGBTQ identity with me, I need to evaluate the youth's safety.

Discussion Notes: This is absolutely true. LGBTQ youth are definitely at greater risk for many reasons. LGBTQ youth may experience abuse or conflict with their families that places them at risk. The reason a youth may have run away may relate specifically to LGBTQ issues. Returning a child home or setting up visits needs to take into consideration the safety needs of the youth. It is also important to discuss safety in other aspects of the youth's

life. As noted earlier LGBTQ youth are targeted for violence and bullying at school, on the bus, on social networks, and in the community. You have a role to assess the youth's sense of safety at school and work with the school to ensure a safe environment. Finally, for youth in foster care or residential placements there are many concerns about how LGBTQ youth are treated by both staff and other youth. You have a critical role in continual assessment of safety issues that may impact the LGBTQ youth.

Summarize the discussion by emphasizing the importance of building a relationship and working with the LGBTQ youth to identify their needs.

Note that as discussed the child welfare professional does have a role in helping the youth with the coming out process if and when the youth decides it is the right step to take.

Note that child welfare workers have a responsibility to work with all youth in a way that will help them feel comfortable in being honest about all facets of their life, and for LGBTQ youth this means helping them consider disclosing their sexual identity and orientation.

Explain that "coming out" is a process of identity formation and cover these points:

- It is more helpful to think of "coming out" as a process of identity formation as opposed to something that suddenly "happens".
- Vivienne Cass first identified stages of identity development that treated gay people as "normal" in 1979. (Homosexual Identity Formation: A Theoretical Model. Journal of Homosexuality. 4(3)1979.)
- People may progress through stages at very different processes
 depending on individual personality, supports available, and cultural
 influences. While the stages are helpful in laying out some critical steps in
 the process they are not meant to be a "one size fits all" prescriptive path.
 While the process is described as linear, it is likely that a person may move
 back and forth as part of the process.
- As a child welfare professional these stages may be helpful to you in better understanding the thought process and the challenges that LGBTQ youth face in the formation of an identity that is not representative of the norm. These are the stages as revised and updated by Gary Mallon. Mallon,G. G.P. Let's Get this Straight: A Gay and Lesbian Affirming Approach to Child Welfare. New York: Columbia University Press. 2000; and We Don't Exactly Get the

<u>Welcome Wagon: the Experiences of Gay and Lesbian Adolescents in Child Welfare Systems.</u> New York: Columbia University Press. 1998.

▶ **Refer** participants to *Handout #12: Stages of LGBTQ Identity Formation*. After discussing each stage ask participants what they think the youth needs at that stage.

Stage One: I am NOT gay.

- In total denial about the possibility. Rejection of the possibility based on fear and misinformation.
- What do youth need at this stage? Exposure and information.

Stage Two: Could I be gay?

- Confused about what is happening, concerned about self-image, and recognition of feeling different from others characterizes this stage.
- What do youth need at this stage?
 Good accurate information.

Stage Three: Suppose I was gay?

- The person begins to imagine the possibility and try on the role. With this comes a greater sense of isolation, realization of what others might think, and fear of what might happen. There may be a tendency to cling to heterosexual behavior in order to maintain a public image. This can be a very scary and isolating stage, especially for youth who may already be in compromised situations with their families (abuse, neglect, family violence, family substance abuse).
- What do youth need at this stage?
 Resources such as LGBTQ books, websites, chat lines.

Stage Four: I think I might be gay or bisexual.

- During this stage the person is desperately seeking to make contact with other LGBTQ people in order to learn more about gay identity, gauge oneself within the gay culture, and lower the overwhelming sense of alienation and isolation.
- What do youth need at this stage?
 A positive role model and positive contacts within the LGBTQ community. Continued education and support.

Stage Five: I am gay.

When the person fully settles into their identity there may be a signficant
effort to fit into the LGBTQ subculture. As peer approval is tremendously
important in the teen years it will be very important for the youth to find

LGBTQ friends. If the youth has difficulty finding a group to fit into, the youth may be very conflicted and may revert back to earlier stages.

What do youth need at this stage?
Youth need help connecting to positive LGBTQ peers and resources.
Youth will need help with coming out, knowing what to expect, and finding supports.

Stage Six: I am gay. It is an integrated part of my identity.

 At this stage the person is able to integrate their LGBTQ identity into every facet of life. Most youth have not achieved this stage as it is indicative of a high level of maturity and varied life expierences.

▶ **Refer** participants to *Handout #13:* Supporting Youth in the Coming Out Process noting that once youth disclose there are several things the child welfare team can do to help the youth.

Support youth in taking the lead in the coming out process.

- Use terminology that the youth uses without attaching labels. While you can help youth with definitions and terminology, it is up to the youth to decide the language they wish to use.
- Work with the youth to determine who they wish to tell, the impact it might have, and ways to approach disclosure. Disclosure is a very personal choice. You are there to support and guide, but not to direct.
- Assure the youth of confidentiality. As with other case related information, without the client's permission, the information is confidential.

Provide support and affirmation through the process.

- Affirm and support the youth's identity, expression, and orientation in a patient and accepting way.
- Help the youth explore their feelings, fears, and reactions as they move through the process. Know that youth have different responses. Assure the youth that their feelings and/or confusion are normal. Be prepared to provide accurate information and clarification regarding myths and stereotypes.
- Help the youth explore possible consequences of coming out and what the youth may need for support.
- Recognize the youth's strengths and assets in all facets of life, helping the youth develop pride and an over-all positive sense of self. Encourage talents, hobbies, interests, educational endeavors, and skills.

Maintain an open dialogue about safety and over-all well-being in all aspects of the youth's life and develop safety plans as needed.

- The data is sobering regarding LGBTQ youth in out-of-home care. Mallon reported that half of a sampling of LGBTQ youth reported a preference to living on the streets rather than in foster homes, group homes, or residential facilities where they were harassed, assaulted, or even raped. (Mallon, G. P. We Don't Exactly Get the Welcome Wagon: The Experience of Gay and Lesbian Adoelscents in the Child Welfare System. 1998.) Assess the youth's sense of safety and well-being in his or her current setting and talk with the youth about how you can best intervene with foster parents and out-of-home providers.
- Listen to a youth's fears and concerns about the reactions of family. Remember
 that you are working with youth who are involved with the child welfare system
 and by definition may have experienced family violence, emotional abuse, and
 neglect. Family visits as well as family reunification needs to be planned and
 monitored with safety concerns in mind.
- Discuss the school environment and the youth's concerns about the reactions of teachers, friends, peers, and others. As noted previously the school environment can be extremely hostile to LGBTQ youth, and the use of social media has event heightened the impact. Be prepared to intervene as needed.
- Be comfortable and prepared to discuss (or refer the youth to someone who can) safe sex, HIV, and related risks. LGBTQ youth are at higher risk of sexual exploitation.

Connect the youth to community resources. LGBTQ youth need peers, mentors, and professionals who identify with LGBTQ issues. Regardless of how supportive you may be it is critical that the youth connect with other LGBTQ people, and with services/programs that can provide ongoing support.

- Identify local resources that support LGBTQ youth.
- Allow for opportunities to privately explore online.
- Ensure health care with a clinic that is supportive and knowledgable of the needs of LGBTQ youth.
- Encourage connection with supportive peer and gay/straight alliances in the school setting.
- Try to identify a mentor or older peer to provide ongoing support to the youth.

Refer participants to Resource: What to Say? What to Do? (Coming Out).

Tell participants in this activity they will have the opportunity to think about ways to talk with youth that will promote positive engagement and be viewed as affirming to the youth's identity.

Explain that they will take each statement and identify potential responses.

Divide participants into groups of three.

Ask participants to work quickly as in real life there will not be a lot of time to think through your response and the activity is designed to help prepare participants to think quickly on their feet.

Instruct participant to identify specifically what they would say. (Do not indicate "I would say something supportive.")

Note they will have 8 to 10 minutes to complete the activity.

Process the activity using the following notes:

You are visiting Josh at his residential treatment program. Josh tells you that you are going to be upset with him as he has been "moved down a level". You have suspected that Josh has been questioning his sexual orientation and you have tried to show an acceptance and openness around LGBTQ issues. You are not surprised when Josh tells you that he was holding hands with another resident. Upon further questioning he tells you the person is male.

What do you say?

Examples: "So how is this person special to you? Your boyfriend?" "Thanks for letting me know this Josh. I'm glad you trust me."

What do you do?

- Continue to discuss with Josh to find out how you might be able to support him.
- Talk with staff at the program to find out what their policies are about resident contact. Some programs do not allow physical contact of any type between any residents. If needed you would want to advocate with the program to ensure that rules about physical contact are applied the same regardless of gender or sexual orientation.
- Explore with staff how they are supporting Josh, his process of coming out, and the impact on his over-all development.

Daniel lives with his foster parents. The case opened because Daniel repeatedly came home late and at one point threatened to assault his father. The parents told the judge they could not control his behavior. You have had the case one month. In your assessment meeting with Daniel he would not speak to you. You told him that was okay and reiterated what you always say to youth—that you are open to hearing about all kinds of situations, nothing will shock you, and you believe that no matter what there are usually ways to help situations get better.

He called last week and said he wanted to talk. Today when you walk in he immediately tells you he has something to tell you but you cannot tell his parents. He says, "I know you said that you could handle anything. But I bet you can't. So here goes. For starters, how about calling me Danella?"

What do you say?

Examples: "Okay, Danella. So what else do you want to tell me?" "I think you're wrong about that Danella. I'm ready to hear you."

What do you do?

- Continue the dialogue to determine what supports Danella will need.
- Find out if Danella has any supports and/or has come out to anyone else.
- Ensure that Danella is provided with appropriate health care and medical information related to transgender issues.
- Assess Danella's safety needs and put into place any safety plans that are needed.
- Connect Danella with a support group/organization/mentor that can help her with what is happening.

The school has asked you and the foster parent to come immediately to the school as 13 year old Michelle was in a fight with a group of girls. When you arrive Michelle runs to you crying and tells you the girls were making fun of her. When you ask her why she breaks down and says it is because she has a girlfriend. She hysterically begs you not to tell her foster parent or the school personnel. Mrs. Scott, the Assistant Principal, tells you the meeting will begin in five minutes.

What do you say?

Examples: "Michelle you are going to get through this. This is going to be hard but I am here to help you."

"It is wrong when people make fun of other people for any reason. But when you get in fights we do have to deal with it. I am not going to tell this to anyone in this meeting right now. But it might be helpful to Mrs. Scott if she better understood what happened. That is your decision though. I am here to support you no matter what."

What do you do?

 Advocate to the extent possible for the school to better understand the precipitants of the fight.

- Explain to Michelle that the foster parent needs to be told but you will work with her to plan out how this will happen and how you will help.
- Assess the foster parent's willingness to be accepting and affirmative to Michelle in the long run and provide any education/support that they need.
- Offer to get Michelle information about LGBTQ issues and to connect her with LGBTQ supports.
- Continue to talk with Michelle to help her in her continuing process of coming out.

Note that child welfare workers are often confused about working with transgendered youth because they do not have good information and/or lack a basic understanding of transgender issues.

Refer participants to Handout #15: Supporting Transgender Youth and ask that participants work in pairs. Instruct participants to first read the resource and then answer the questions on the second page.

Process the pairs activity. The following will assist you in the discussion:

Discuss your experiences working with transgender youth and the degree to which these practice guidelines were utilized.

Realize that historically child welfare has not adhered to most of these guidelines nor had a good understanding of the needs of transgender youth. Be encouraging of all responses (even those indicating that these practice guidelines were not utilized) noting that this only highlights the need for greater awareness and training in this area. Commend participants for participating in the training and desiring to improve practice.

Which of the guidelines do you think are most challenging to follow? Why?

Participants will likely have a lot of concerns about how to address transgender issues with the residential community and foster parents. There are many genuine issues related to safety when transgender youth are in placement. Encourage participants to connect with LGBTQ resources, medical resources, and internal child welfare staff with expertise in LGBTQ issues with very specific questions and concerns.

In the foster care or group care setting how do you ensure safety without isolating or segregating the transgender youth from others?

Facilities and foster homes are usually encouraged (or sometimes required) to provide a private bedroom and to ensure privacy and good boundaries around showering and self-care. However, this can also be isolating for the youth and make the youth stand out as different if shared quarters are utilized in the rest of the home or facility. Workers have a responsibility to seek out placements that will best meet the needs of a transgender youth. Youth whenever possible should have input into placement decisions so that they can advocate to be in a setting where they feel they will be safe and supported. (Be aware prior to the training of your state or county's policies regarding transgender youth in placement so that you can better assist participants in answering this question.)

Ask participants why they think it is important for youth to "come out." Ensure that the following is covered:

- Isolation and keeping secrets is very difficult to do on an ongoing basis.
- The anxiety that results from being afraid of being "outed" is damaging to overall health and well-being.
- The sense of being alone and isolated can lead to depression or worsen mental health issues.
- "Coming out" provides the opportunity to mobilize support services on behalf of the youth to help them through all the challenges of coming of age as an LGBTQ youth—that is, until the youth"comes out" it is difficult to work toward more positive self esteem and to deal with issues such as discrimination and bullying.

Summarize the discussion by noting that one's sexual orientation is an important part of one's identity that impacts on social, emotional, and psychological development. As noted throughout the training, feelings of social isolation can be overwhelming and place the youth at risk in all aspects of development. When youth "come out" there are many positive supports and opportunities and as professionals we can assist LGBTQ youth in building understanding within their families, schools, and communities.

☑ **Refer** participants to Handout#10: Engaging with Youth to Affirm LGBTQ Identity and note that there are several ways to affirm LGBTQ identity.

Identify yourself as a person who is affirming toward LGBTQ youth:

- Provide indicators to all youth that you are open and affirming in regards to sexual identity and orientation. It is important to establish this with all youth because you do not know who is or is not identifying as LGBTQ. Also, it is important to model acceptance and affirmation to all youth.
- Ensure that your office or meeting space has visible signs that it is all right to be an LGBTQ youth. Display the pink triangle, rainbow flag, posters, books, and flyers. You may also put stickers on your appointment book. Make it easy for youth to display curiosity, ask questions, or comment as this can lead to discussions which (regardless of sexual identity or orientation) can be useful to the youth.
- When you begin your initial work with a youth introduce yourself as a person who
 respects all types of people regardless of race, culture, gender, ability, religion,
 sexual orientation, or life experiences. Explain that you also do not tolerate jokes
 or negative comments about other people because of their race, culture,
 gender, religion, sexual orientation, or life experiences.

Seek to engage with youth in an affirming manner regarding LGBTQ issues:

- Asking youth directly if they are LGBTQ is generally not indicated. But initiating
 open and honest discussions about the youth's life is your job. The more time you
 spend talking and getting to know a youth, the more comfortable the youth will
 feel in talking to you about all types of things, including LGBTQ issues.
- Rather than looking for LGBTQ cues in youth, send out cues that say loudly and clearly that you are comfortable dealing with gender and sexual orientation issues.
- Avoid heterocentric language when talking with the youth. (Ask "Are you dating or spending time with anyone special?" rather than "Do you have a boyfriend?")
- Be able to "talk the talk"—use the words lesbian, gay, bisexual, transgender, and questioning. When you "talk the talk" you may be seen as someone who is knowledgable and supportive of LGBTQ issues.

Be prepared to help the youth make "next steps" in the disclosure process, but make sure the youth is leading the way:

- Youth may make overtures to suggest to you that they are confused or have questions or are interested in LGBTQ issues. The more books and brochures or posters that may be around, the easier these discussions may begin. But tread lightly, listen, and remain supportive. Don't jump to label the youth or make a grand pronouncement on behalf of the youth.
- If the youth has a lot of questions offer to help the youth get more information in a very safe way—have brochures or articles handy. Show the youth affirming and positive web sites. Encourage the youth to explore and learn more.
- Don't push for disclosure. Push to keep the dialogue open and honest. Offer reassurance in regards to safety and confidentiality. Ensure your ongoing support.

 Offer additional supports that may be available through local LGBTQ clubs or organizations, youth centers that are LGBTQ friendly, LGBTQ support groups, or the opportunity to meet with an LGBTQ adult mentor or peer mentor.

Refer participants to Handout #11: What to Say? What to Do? (Engagement)

- Tell participants this activity will provide an opportunity to think about ways to talk with youth that will promote positive engagement and be viewed as affirming to the youth's identity.
- Explain that they will take each statement and identify potential responses.
- Divide participants into groups of three.
- Ask participants to work quickly as in real life there will not be a lot
 of time to think through the response and the activity is designed to
 help prepare participants to think quickly on their feet.
- Note they will have 8 to 10 minutes to complete the activity.

Process the activity using the following notes:

AHMID (age 14): I don't really like to meet with social workers. I mean I know we have to meet. I don't know. It's just senseless. No one gets it.

Possible responses:

- You're right that no one else knows exactly what you are going through. But I try to be open and listen.
- You know Ahmid, I have worked with all kinds of kids in a lot of situations. I
 may have worked with someone before who is going through some of the
 things you are going through.

Learning point:

You want to indicate an openness and willingness to listen to the youth, while not directly confronting the fact that the youth is saying they do not want to talk with you.

MICHELE (age 16): I had a bad time this weekend. I hate break-ups. I'm pretty miserable.

Possible responses:

- I'm sorry to hear that. Do you want to tell me about it?
- It is hard when relationships don't work out.

Learning Point: Do not use heterocentric language. By remaining open and validating the feelings, you may invite more conversation.

BREANNA (age 15): Wow, I see you're into this rainbow thing. You a homo or something?

Possible responses:

- Well I am into the rainbow thing. It's a symbol that means I am an adult who is supportive of lesbian, gay, bi-sexual, transgender, and questioning youth.
- I have lots of symbols here in my office. I want all youth to know that they're welcome here.

Learning point: Symbols are an ideal way to generate discussion. This provides a great opportunity to directly state support for LGBTQ youth.

You walk into the room as Bryan (age 13) is holding a book from your shelf entitled "Queer: The Ultimate LGBTQ Guide for Teens". He is very embarrassed and tries to hide the book.

Possible responses:

- Oh you found one of my books that I have in here for kids to read.
- Bryan, lots of kids your age are curious about sex and sexual orientation.
 Do you want to borrow my book?

Learning point: This provides a great opportunity to model acceptance and encourage exploration. Directly asking Bryan at this point if he is LGBTQ will likely not be effective as he is already embarrassed. By treating the situation matter-of-factly you are demonstrating that this is not going to shock you or upset you. Hopefully Bryan will see that you have experience working with LGBTQ youth.

RAVINA (age 15): I just feel different. From other girls. You know. Like I just don't want a boyfriend. It grosses me out to think about it.

Possible responses:

- I know it doesn't feel good to feel different. But do you think all girls want boyfriends?
- Not all girls want to have boyfriends.

Learning point: This type of statement gives you the opportunity to provide clarification and information.

GEO (age 16): I saw this weird thing on TV about this guy that wanted to wear his mother's clothes. Weird stuff.

Possible responses:

- Well, I'm not sure it's that weird. I mean, this happens Geo.
- Sounds like an interesting show. Why do you call it weird?

Learning point: This statement also gives you the opportunity to provide some clarification. By treating the situation matter-of-factly and questioning the "weird" aspect you are demonstrating an openness that perhaps will lead to further discussion.

VONDA (age 14): My last foster home there was that kid there that was a lesbian. Remember Shauna? It totally freaked me out.

Possible Responses:

- Lots of kids identify as Lesbians or gay or bi-sexual or transgendered. Why were you freaked out?
- I do remember Shauna. She was a really nice person.

Learning point: A positive response portrays your openness about someone who identifies as Lesbian, hopefully encouraging further conversation.

Summarize the activity by emphasizing the need to approach all youth with a sense of openness and acceptance, and by modeling a positive attitude toward LGBTQ issues.

Note that the Getting Down to Basics: Toolkit to Support LGBTQ Youth in Care (CWLA and Lamba Legal) has a number of resources that can be copied and used with youth and other persons on the child welfare team. This is on the list at the conclusion of the training.

*Note to Facilitator: You may wish to download a copy of the Toolkit prior to the training to pass around and highlight the following resources:

- The resource "Information for LGBTQ Youth in Care" can be copied and given to any youth with whom you are working who identifies as LGBTQ.
 This resource is a good tool to generate conversation, provide education, give an overview of legal rights, and connect the youth to further resources on the internet.
- The resource "Working with Transgender Youth" can be copied and given to anyone on the child welfare team working with a transgender youth.
 The resource provides good overview information and connections to further resources.

MODULE SIX: PROMOTING FAMILY TIES FOR LGBTQ YOUTH

Time

60 minutes

Competency

Knows and understands effective engagement strategies for working with LGBTQ foster youth and families.

Objectives:

- Appreciate the issues and concerns presented by families of LGBTQ young people.
- Describe engagement strategies for strengthening and supporting the families of LGBTQ young people.
- Describe permanency planning strategies to help ensure lifelong supportive connections.

Materials

- ✓ Digital Story: Randy (You may access this digital story at the web site of the National resource Center for Permanency and Family Connections at http://www.nrcpfc.org.)
- ✓ Computer/equipment to play digital story
- ✓ Handout #16: Child Welfare Role in Building Positive Relationships between LGBTQ Youth and Families
- ✓ Handout #17: Promoting Acceptance by Families
- ✓ Handout #18: Promoting Safety and Well-Being for LGBTQ Youth in Foster
 Care
- ✓ Handout #19: Improving Permanency Outcomes and Long Term Connections for LGBTQ Youth

Facilitator's Notes

☑Introduce this module by reviewing the competency and learning objectives with participants.

Introduce *Digital Story: Randy* by emphasizing the importance of helping families come to a greater level of acceptance or of finding families who can be accepting and nurturing of LGBTQ youth. Explain that this is one of the Digital Stories recorded by the National Resource Center for Permanency and Family Connections.

Conduct a discussion of the Digital Story by asking the following questions:

- How did Randy describe how he felt prior to "coming out" to his family? (He
 lived in fear of the two words "I'm gay.")
- What happened when Randy decided to "come out" to his family? (He was kicked out of the home. When this happened his drug addiction got much worse. He had an overdose. He stated he knew what the reactions would be but he was not prepared for the rejection.)
- Where did Randy finally find acceptance? (He was placed in a foster home with a married Lesbian couple who had younger children. This is where he found a loving and accepting family.)

Summarize by noting that this digital story clearly shows how desperately LGBTQ youth want to be accepted and nurtured within a family and provides an excellent opener for our module on working with families.

Note that one of the most significant roles the child welfare worker can play is to help develop a supportive family for the LGBTQ youth. Remind participants of the research by Caitlin Ryan and the Family Acceptance Project showing that family acceptance and support promotes overall well-being and helps protect the young person from risk; while family rejection has a serious impact on a young person's risk for health and mental health issues into adulthood.

Explain that in this module we are addressing the concept of "family" in a broad sense—birth families, kinship families, and foster families; as well as the long term relationships that older youth (often aging out of the child welfare system) may construct for themselves. Regardless of how the youth defines his family or the type of family in which the youth is living or is connected, we have a responsibility to help build positive and supportive relationships between the youth and family.

Refer participants to Handout #16: Child Welfare Role in Building Positive Relationships between LGBTQ Youth and Families and review adding the following points:

- Our overarching goal is to help families accept and support their LGBTQ youth. In child welfare we may be working with different types of families. Sometimes one youth may be connected to one, two, or even three families. Our role may differ depending on the youth's situation.
- As we talk about working with families in this module we will talk about ways to support the family "in the moment", that is, how to help them with a youth "coming out" and the types of resources and support that can help the family grow toward acceptance. We will also be looking at the youth's need for supportive and long term connections, especially for youth who are in care. Permanency planning efforts for LGBTQ youth are not as effective as with the general population of youth in care. In a situation where permanent resources are scarce it is easy for child welfare workers to give up. (Addressing the Needs of LGBTQ Youth in Care. 2009. Seattle WA: Court Appointed Special Advocates for Children).
- First and foremost we always work with the birth family. This is always true in child welfare work. But for LGBTQ youth, whose outcomes once in care are so poor, the issue becomes paramount. Placement is not always related to LGBTQ issues, but it often is or it serves to heighten other family stressors. Adequate support and education can help families be less rejecting and move toward acceptance. Even when a youth has run away or gone into placement families can make significant change and reunification may be possible. Aggressive reunification efforts with older youth (who have been in care or on the run for many years) can be effective, especially given research by the Family Acceptance Project showing that family rejection tends to lessen after two years. Finally, even when youth are aging out we can work with them to re-establish some type of connection to their family. Statistics show that many youth return home or re-establish contact with birth families after aging out. It is clearly preferable when we can help the youth with these efforts.
- We have a responsibility to actively recruit and diligently assess families who can provide affirming and accepting care to LGBTQ youth. We also have a responsibility to support and educate these families about LGBTQ issues and ways to ensure the youth's ongoing safety. In some situations the foster family may be aware that the youth is LGBTQ. In other situations the youth may "come out" while in placement and the family may need specific help to know what to do. For youth who will likely not return home it is important to consider the family's willingness to be a long term permanent connection for the youth. (Even in situations where a youth is returning home, a foster parent may continue to be an ongoing resource for the youth.)
- Rising numbers of youth are living with relatives, and statistically speaking we know that some of these youth are LGBTQ. In some situations the youth may be living with the family member due to the birth family's rejection of their sexual orientation or gender identity. In other situations the youth may have been living with the kinship caregiver for many years and/or for totally unrelated issues. The family may be totally unprepared and may need help with the youth "coming"

out" just as a birth family would be. As in any kinship situation it is important to consider the overall safety of the situation, especially if a rejecting and punitive attitude toward LGBTQ identity exists broadly across the family and extended family. Moving the youth to another rejecting family only compounds the trauma and risk.

• For lack of a better word we may also find ourselves working with "fictive" families. These are families or persons who have no biological or formalized connection to youth, but who, for whatever reason, are supportive, accepting, and nurturing toward the youth. Many youth "build" their own families from connections they make. Traditional practice in child welfare has generally not supported, or has at least been conflicted, about how to handle these situations. But more recent practice has encouraged supporting these relationships and developing them as long term connections. Our role in developing these connections and ensuring safety is critical.

Introduce the topic of working with families to promote acceptance and help them better support their LGBTQ youth by noting the following:

- The good news from the Family Acceptance Project is that youth who are accepted and supported by their families can achieve overall well-being despite the many challenges that being LGBTQ may present. Further good news is that families can be helped to be more supportive and less rejecting.
- Many parents believe that the way to help their child is to help the child fit
 in with the heterosexual world—which can mean anything from trying to
 change the sexual orientation to trying to keep the orientation secret.
 These feelings and actions may actually be based in love and parents
 honestly trying to do the best thing they can do for the child. These
 parents are often surprised to learn that their child experiences these
 actions as rejecting or even abusive.
- It is important to be prepared to help families through the process of acceptance and to know specific things to do to support the family. Most families have no help and often suffer in isolation, leading to even further distress and increased feelings of anger.

Note that when the youth "comes out" their family "comes out" also. The family has little choice about the timing and may be ill prepared for what is coming. In addition to concern for the youth, the family msut also deal with all the reactions of the family members, extended family, friends, and the community.

Refer participants to Handout #17: Promoting Acceptance by Families and review. Ask participants to share personal experiences working with families.

Note that the handout is also applicable to working with foster, adoptive, or kinship families.

- Assure families that it is normal to struggle when a youth comes out as LGBTQ.
- Support and don't judge. Tell parents they are not "bad" for being upset, or angry. Acknowledge feelings. Some families think they did something to "make" their child LGBTQ. Others are overwhelmed and don't know what to do. Fear may paralyze the family. Model acceptance.
- Regardless of the family's reaction seek to provide a sense of hopefulness. Assure
 the family that other families have been through this. Explain that when LGBTQ
 youth feel acceptance and love from families and friends they are able to lead
 happy and fulfilled lives.
- Remind the family of their love for the youth and their desire to be a good parent.
 This helps to bring out the best in the parent.
- Explore what the main concerns may be. Some families feel great sadness that
 the youth will have a difficult life, may be bullied, and may not be able to live a
 fulfilling life. Other families may fear rejection by their friends and extended
 family. Still others may have religious beliefs that they feel are compromised. By
 listening closely to family concerns you can target needed education and
 supports.
- Provide some basic education to families. Let families know that gender identity
 and sexual orientation are not a choice. It does not mean that their child is bad
 or has done anything wrong. It does not mean that they are bad parents or have
 done anything wrong as parents.
- Acceptance is usually a process. Families will need time to process this new
 information. Realize that families can only take in a certain amount of
 information at a time. Use basic relationship skills and realize that arguing with
 families or pushing them or overwhelming them with information will likely not
 have positive results.
- Help families resolve conflicts that they may feel related to spiritual beliefs. Loving their child does not violate any religious belief. Seek to locate LGBTQ supportive resources connected to the family's religion.
- If parents want their child to participate in conversion therapy make it clear that this has not only been ineffective, but has also been found to be damaging to the child. This type of intervention only further alienates the child and makes the child feel that inherently damaged or bad.

Note that when youth are in foster care the worker has a role in monitoring and supervising the placement to ensure positive, respectful feelings toward LGBTQ youth and to help promote positive relationships between the youth and foster family.

▶ **Refer** participants to Handout #18: Promoting Safety and Well-being for LGBTQ Youth in Foster Care. Note that all foster parents need our support but foster parents may face additional challenges when fostering LGBTQ youth and have concerns about safety, bullying, and developmental issues for LGBTQ youth.

Ensure adequate training, preparation, and assessment of potential resource families and kinship caregivers. Explore how the family will react if they find out a youth is LGBTQ.

Share statistics and information with foster families related to the tremendous need for accepting and affirming families; and share the risks that occur when youth are unable to live with accepting and affirming families. (You may choose to share some of the handouts from this training with foster families.)

Ensure that families understand that sexual orientation and gender identity are not a choice, that they cannot be changed, and that any type of aversion therapy to change sexual orientation or gender identity is not allowed.

Help foster families identify specific ways they can help make their home welcoming to an LGBTQ youth, such as:

- Make it clear that jokes or slurs based on gender, gender identity, or sexual orientation are not tolerated.
- Display pink triangles or the rainbow flag as a way to indicate an LGBTQ environment.
- Accept self-expression through choices of clothing, jewelry, hairstyle, and room decoration.
- Accept of friends who may also be LGBTQ.
- Seek to use gender neutral language.
- Celebrate LGBTQ diversity in all forms and point to celebrities and role models who demonstrate bravery in the face of social stigma.

Help foster families to understand the process of coming out, confidentiality, and that the youth needs to identify his or her own plan for "coming out."

Help foster families to know about LGBTQ resources and encourage them to help the youth connect to these resources.

Ask foster families to continually monitor the youth's safety in the community, and especially in the school where bullying and harassment may take place.

Encourage foster families to be an advocate for the youth in the schools and in the community.

Refer participants to Handout #19: What To Say? What To Do? (Foster and Kinship Care).

- Tell participants in this activity they will have the opportunity to think about ways to talk with families to promote positive engagement and be affirming to the youth's identity.
- Explain that they will take each statement and identify potential responses.
- Divide participants into groups of three.
- Ask participants to work quickly as in real life there will not be a lot
 of time to think through your response and the activity is designed
 to help prepare participants to think quickly on their feet.
- Instruct participant to identify specifically what they would say. (Do not indicate "I would say something supportive.")
- Note they will have 8 to 10 minutes to complete the activity.

Process the activity by using the following notes:

Eva has lived with the Stevenson foster family since infancy. She has recently come out as a lesbian and wants to have her girlfriend come to the house to visit. Ms. Stevenson calls you to say that she cannot handle "this kind of thing".

What do you say?

Examples:

"I can tell you're upset. And we talked about how this was going to be hard. Can you share with me exactly what about this is upsetting you so much?"

"I can see it's hard knowing how to react to things that are going to happen. I'd like to talk to you to help you get more comfortable with how to deal with the things that are going to come up."

What do you do?

Encourage Mrs. Stevenson to think through her fears and concerns. Help her to distinguish between sexual orientation and sexual actions. Help her to talk with Eva to set up reasonable rules and boundaries that would be applicable to any relationship between 13 year olds.

Grant has been in a relative placement with his Aunt Lynn since he was 5 years old. He is now 13 and recently came out as gay to his aunt. Lynn wants Grant removed for fear that he will hurt her children. Grant does not want his biological parents to know about his sexual orientation and asks you not to bring it up in the coming review meeting. Lynn calls you very upset and tells you the issue has to be addressed in the meeting because that is the reason she wants him out of her home.

What do you say?

Examples:

"Lynn I know this is hard for you. Grant has lived with you for 8 years. No matter what this is going to be a hard process. But let's think about Grant right now. You've said he has to leave your home and this is the meeting to discuss that. Let's not make things any harder for him."

"Lynn it is not fair to Grant to divulge personal information. Grant needs to be prepared and ready to tell his parents. Right now with a pending move from your home he is already dealing with a lot."

What do you do?

Protect Grant's confidentiality at the meeting. Be ready to jump in to prevent confidential information from being shared. But realize that it is possible that Lynn will do what she wants to do. Tell Grant you will do everything possible but you can't control what everyone does. Make a plan with Grant for how he will handle the situation if his aunt does divulge the information either during the meeting or even afterwards. Talk honestly with Grant about how it will also be difficult for him to control what his aunt does.

The Bergen family has fostered many LGBTQ youth over the years. Due to their openness you have placed Marta, a transgender (Male to Female) youth in the home. After two weeks Mrs. Bergen calls you crying saying that she has made a terrible mistake. She says it is way too confusing even for the two other youth placed in the home. These youth are ganging up and bullying Marta. While acknowledging that she felt she and her husband could handle it, she didn't understand the overwhelming reactions from other people.

What do you say?

Examples:

"Mrs. Bergen I am so sorry this is causing such issues in your family. I'm sure this is confusing for everyone. I think you need some support."

"Mrs. Bergen, you have handled a lot of tough situations. It sounds like maybe we didn't prepare you well enough for what might happen. I think we need to get the other workers involved and strategize a plan."

What do you do?

This is a good example of how sufficient planning did not occur prior to the placement. While the Bergens may have been comfortable it seems there was an assumption that the other LGBTQ youth in the home would be supportive. At this point you can go back and try to take some steps to help. A case meeting at the agency with all the workers, the family resource worker (who supports the Bergerons), and the foster parents would be a good place to start. The bullying behavior of the other youth needs to be addressed, but in the context of offering education. Because a youth is gay or Lesbian does not mean that they understand gender and transgender issues. A house meeting can help establish rules and promote more positive acceptance. Marta needs extra support to help her as she seeks to find her place within this family.

Summarize the activity by acknowledging that there are many concerns that foster and kinship families have when LGBTQ are placed with their families. Proper preparation for the role, mobilizing the full team for support, and promoting open communication will assist in a more stable and supportive placement for the LGBTQ youth.

Remind participants that while a large part of this module has focused on "in the moment" situations, that it is also important to consider how LGBTQ youth can maintain long term connections and supports. The statistics reviewed earlier show clearly that LGBTQ youth in the child welfare system do not fare well in many areas, including permanency.

Refer participants to Handout #20: Improving Permanency Outcomes and Long Term Connections for LGBTQ Youth. Note that there are evolving practices that may promote greater permanency but may require child welfare staff to think "out-of-the-box". After reviewing each point on the handout ask participants if they have had any experience with this strategy that they could share.

- Work with birth families more aggressively to help youth remain at home or return home. Even youth who have not had contact with their families for years may find that time dissipates some of the issues. Some families may have more capacity than in earlier years and may welcome the opportunity to reunite with their child. (Caitlin Ryan, The Family Acceptance Project and Jackobs and Freundlich. Achieving Permanency for LGBTQ youth. Child Welfare, 85(2), 299-316.)
- Recognize that msot LGBTQ youth can adapt well to nurturing and supportive families. Unfortunately permnanent placements are not pursued as aggressively

for LGBTQ youth. Older adolescents are especially vulnerable as child welfare staff don't even consider adoption as a possibility which is a stance that Casey Family Services is seeking to change. (Lifelong Families: A Permanency Teaming Approach. Casey Family Services.)

- Work with the youth to identify extended family, previous supportive caregivers (foster families, families of friends), or other supports (coaches, mentors, teachers) who may be willing to make a lifelong connection to the youth. (Lifelong Families: A Permanency Teaming Approach. Casey Family Services.)
- Be receptive to giving the youth greater voice in their own planning and definition of permanency. Mallon makes the point that there are differing types of permanence—legal, relational, and physical. (Permanency for LGBTQ Youth. Protecting Children. 26(1), 49-57.) Our traditional notion of a permanent family may not resonate with youth who have lived on the streets or bounced in and out of placement. Yet these same youth often have supportive connections. Rather than to support these connections child welfare services have generally not recognized them—often due to legitimate safety concerns; but sometimes due to an oversexualized view of LGBTQ identity.

Conclude this module on working with families and ask participants if there are further questions.

MODULE SEVEN: ADVOCACY AND COMMUNITY CONNECTIONS

Time

30 minutes

Competency

Knows and understands how to advocate for LGBTQ young people in their home, school, foster care setting, and community.

Objectives

- Describe two advocacy strategies for supporting LGBTQ young people.
- Describe two challenges a LGBTQ youth might face in their family, school, community, or church; and identify advocacy strategies.

Materials

- ✓ Handout #21: Advocating for LGBTQ Youth
- ✓ Handout #22: What to Say? What to Do? (Advocacy)
- ✓ Handout #23 What can Supervisors Do to Support Caseworkers To Work with LBGBTQ Youth?

Facilitator's Notes

☑Introduce this module by reviewing the competency and learning objectives with participants.

Note that one of the most critical roles the child welfare worker can play is to advocate for LGBTQ youth.

- Child welfare professionals have a responsibility to advocate from a systems perspective for the health and well-being of all the different populations served.
- Child welfare professionals therefore have a responsibility to advocate for services to assist LGBTQ youth, promote a more accepting community, and advocate for laws and practices that protect the dignity and safety of LGBTQ youth.
- Child welfare professionals also have a responsibility to advocate on an individual level for the health and well-being of each client.
- For child welfare workers working with LGBTQ youth this means advocating for services that are competent and affirming (including foster parents or residential programs if the youth is in care); that the youth's basic rights are protected; and that the youth is safe at home and in the community.

Note that in this module we will primarily be looking at how the child welfare worker needs to advocate for services and supports to help ensure safety, permanence, and well-being for LGBTQ youth in the school and with placement and other service providers.

- ☐ Remind participants of the data regarding the high incidence of bullying of LGBTQ youth in the school setting.
 - ✓ In fact, the National Education Association reports that 1 in 3 LGBTQ students missed at least one day of school in the past month because they felt unsafe, compared to less that 5% of all students.
 - ✓ While protecting all youth from bullying in our schools is important, it is clear that LGBTQ youth are particularly at risk.

Refer participants to *Handout #21:* Advocating for *LGBTQ* Youth and review the first portion related to safety and well-being in school.

Tip Sheets:

Advocating for safety and well-being in the school setting:

- Assess with the youth what their experiences are in the school setting and whether or not there are safety or other concerns.
- Assess with the family (birth, foster, kinship, or adoptive) their concerns regarding
 the youth's safety and well-being in the school. Educate families on the level of
 risk that LGBTQ youth face in the school setting.
- Take the youth's safety concerns seriously and work with the youth to develop a plan to address the concerns with the school.
- Take a leading and supportive role in meeting with the school and addressing safety concerns.
- If a youth who is being bullied or harmed is adamant that you not contact the school this needs to be brought to your supervisor's attention. While we know that the issue needs to be addressed, it is critical to respect the youth's sense of danger and risk. Blindly leading an effort with a school that is not supportive or acepting of LGTBQ youth can place a youth in greater danger. Work with your supervisor, administrators, and legal staff to develop a plan to address the situation.
- Encourage the youth to participate in the Gay Straight Alliance or other school sponsored group for youth who identify as LGBTQ. GLSEN (the Gay Lesbian Straight Education Network) research shows that youth involved in gay straight alliances perform better in school and have high self-esteem.
- Be prepared to advocate with classroom teachers on behalf of the youth.
 Remember that most LGBTQ youth in care have experienced significant trauma that can impact behavior and learning.

Ask participants to share any experiences they have had working with the schools on behalf of LGBTQ youth.

▶ **Remind** participants of the research related to youth in placement. Consider these additional statistics by the Urban Justice Center in research done in 2001 in New York City with youth who had been placed in Group Homes.

- 100% of LGBTQ youth reported verbal harassment by peers, facility staff, and other providers based on sexual orientation or gender identity
- 70% reported physical violence
- 78% reported being removed or running away
- 56% reported feeling safer on the streets than in group homes or foster homes

Refer participants to the same handout and review the portion related to ensuring safety and well-being for LGBTQ youth in their placement.

Tip Sheet:

Advocating for safety and well-being in placement settings (group homes, residential facilities, and foster homes) and other service providers:

- Ensure that placement and service resources are provided with training on how to support LGBTQ youth.
- Prior to placement meet with potential providers to ensure they are competent
 and affirming of LGBTQ youth, that staff are comfortable using language that is
 not exclusively heterocentric, and that the environment provides supportive
 messages (presence of Rainbow or Triangle symbols).
- Develop a positive relationship with the youth so they will contact you with concerns. Make regular visits to the youth in their placement setting. Assess safety and well-being at each visit and ensure the youth has a way to contact you and/or the agency in case of emergency.
- Listen to the youth and take safety concerns seriously. Work with the youth to develop the best way to address the concerns. Obviously safety concerns must be addressed according to agency policy and procedures. But take into account the youth's sense of risk. In high risk situations convene legal staff, supervisors, and administrators to address a safety plan and ensure that it considers the youth's sense of risk.
- Ensure that the facility, home, or family will not pursue therapies geared at changing sexual orientation.
- Ensure that the facility, home, or family is providing youth with needed LGBTQ resources and appropriate supports.

Ask participants to share any experiences they have had working with facilities, group homes, foster families and other service providers on behalf of LGBTQ youth.

Refer participants to Handout #22: What to Say, What to Do? (Advocacy)

- Tell participants in this activity they will have the opportunity to think about ways to advocate for the safety and well-being of LGBTQ youth.
- Explain that they will take each situation and identify potential responses.
- Divide participants into groups of three.

- Ask participants to work quickly as in real life there will not be a lot
 of time to think through your response and the activity is designed
 to help prepare participants to think quickly on their feet.
- Instruct participant to identify specially what they would say. (Do not indicate "I would say something supportive.")
- Note they will have 8 to 10 minutes to complete the activity.

Process the activity by using the following notes:

LATOYA, a 16 year old lesbian who lives in a group home wants to go to her junior prom with her girlfriend, who goes to the same school. The school has notified the group home that they will not permit her to come with a date of the same sex. The group home has struggled with how to deal with LaToya's coming out and openness around her sexual orientation but have been supportive overall. The group home social worker calls you and asks you what should be done.

What do you say?

Examples:

"I think we need to go together to talk with the school. LaToya needs our support."

"I would like to talk with LaToya and ask her how we can support her in this."

What do you do?

- Plan with LaToya a strategy for advocating with the school to allow her to attend.
- Continue to educate the group home staff so that they are more comfortable in their role both advocating and supporting LaToya.
- Get LaToya involved with LGBTQ support groups such as the Gay Straight Alliance (if there is one)
- Help the school explore establishing a Gay Straight Alliance if there is not one

CRYSTAL, a 15 year old transgender (male to female) in a residential facility got jumped by a bunch of guys when she returned from a visit home. Crystal was wearing a dress, heels, and make-up. The staff in charge contacts you the next day noting that Crystal was seen at the emergency room and there were no physical injuries.

What do you say?

Examples:

"I am very concerned that this happened. I would like to speak with Crystal right now."

"What steps are in place right now to ensure Crystal's safety? I will be coming out today to see Crystal and talk with you about what happened.

What do you do?

- Visit Crystal immediately and conduct a safety assessment
- Meet with the group home staff to ensure that an effective safety plan has been put into place
- Ensure that an investigation is completed and that all agency reporting requirements are fulfilled
- Evaluate if Crystal is safe to remain in the group home
- Explore what other supports Crystal might find helpful

MIKE, a 12 year old youth who is openly questioning his sexual orientation has been refusing to go to school. The foster mom, Mrs. Lowe, tells you that Mike says kids are picking on him. But she knows he has friends and feels he is trying to manipulate his way out of going to school.

What do you say?

"Mrs. Lowe, I know it may seem like he is just trying to get out of going to school. But remember when I talked to you about the high percentage of kids who are bullied at school? And Mike has been openly talking about questioning whether he is gay."

"I'd like to come out and talk with Mike. I want to make sure things are okay at school. I am always worried about bullying."

What do you do?

- Set up a visit to talk with Mike and do a safety screening.
- Ask the foster mother to take his concerns seriously and to be sure to contact you.
- Set up a meeting with the school to see if they have concerns.
- If Mike does indicate real safety concerns, meet with the school to develop a safety plan.

- Encourage Mike to join the Gay Straight Alliance at his school (if there is one)
- Encourage the school to develop a Gay Straight Alliance (if they do not have one)
- Provide Mike with internet resources

Summarize the activity by noting the importance of advocating for specific youth needs as well as advocating for programs, services, and schools to become more LGBTQ affirming.

Refer participants to handout #23 What Can Supervisors Do to Support Caseworkers to Work with LGBTQ Youth?

Review with group and get open feedback.

MODULE EIGHT: CLOSING AND EVALUATION

Time

15 minutes

Competency

Identify ways to increase one's own competency in working with LGBTQ youth and families.

Objectives

- Evaluate one's own competence in working with LGBTQ youth and families.
- Develop an action plan to identify specific tasks to increase learning and competence in working with LGBTQ youth and families.

Materials

- ✓ Easel pad and markers
- ✓ Original card
- √ Handout #24: LGBTQ Resources
- ✓ Handout #25: Action Plan
- ✓ LGBTQ Resources
- ✓ Participant Evaluation

Facilitator's Notes

Ask participants to take out the index card they completed in Module Three where they identified a stereotype or belief that they held regarding people who identify as LGBTQ.

Ask each participant to share how their beliefs have changed or been influenced by what they have learned in the training.

Refer participants to *Handout#24*: *LGBTQ Resources* and explain that all of these resources can be downloaded from the Internet free of charge.

Research Resources: Identify resources within your own state, local district that support LGBTQ youth – provide participants with name, address, phone number and website information – encourage staff to visit first, then accompany youth to this LGBTQ affirming agency or support group.

Brings out the easel pad page from the morning where participants identified the skills they wished to gain or improve by attending the workshop. Review the list and determine what learning goals were met. If there were areas that were not covered try to direct participant to additional training, a resource, or a website.

Refer to *Handout #25*: Action Plan and give participants five minutes to complete the form.

Encourage each participant is to review their Action Plan with their supervisor.

Distribute the Participant Evaluation.

Thank the participants for their participation throughout the day.

Research A: Demographics

Between 5 and 10% of the general population is LGBT. It is likely that youth in out-of-home care in the child welfare system represent an even higher percentage.

Mallon noted that child welfare workers often do not identify that they have LGBTQ youth on their caseloads, drawing concern that workers are not communicating with youth in a way that leads youth to be comfortable identifying as LGBTQ.

This estimate comes from the assumption that 5-10% of the general population is LGBT. John C. Gonsiorek and James D. Weinrich, "The Definition and Scope of Sexual Orientation," in Homosexuality: Research Implications for Public Policy (Newbury Park, CA: Sage Publications, 1991.) Courtney, Dworsky, Lee, and Raap (2009) found a much higher percentage of youth in foster care who identified as something other than fully heterosexual. Mid-west Evaluation Former Foster Youth.

Mallon, G.P. Let's Get this Straight: A Gay and Lesbian Affirming Approach to Child Welfare. New York: Columbia University Press. (2000)

To what degree does this information/research/data surprise you?

Participants may have varying reactions to these demographics. The discussion may raise questions regarding definitions of lesbian, gay, bi-sexual, transgender, and questioning. Note that later in the morning the group will explore these definitions in greater details. If participants are surprised at the research showing that child welfare workers may have a lack of awareness of LGBTQ youth on their caseload it may be helpful to briefly discuss why they think this may be the case.

- What implications does this information have for how we approach our work with LGBTQ youth and families?
 - o First and foremost this tells us that we cannot deny that we as a child welfare system (or juvenile justice system) are working with large numbers of youth who are LGBTQ. Since this is a significant part of the population that we serve, it is critical that we work to develop the best practices possible in order to better meet their needs.
 - o The child welfare community needs to develop a more welcoming and supportive approach to working with LGBTQ youth, use language that is less heterocentric, and develop a greater sensitivity to the needs of LGBTQ youth.
 - Child welfare staff need best practice strategies for engaging with LGBTQ youth and ensuring safety for youth who identify as LGBTQ.

Research B: Demographics and Homelessness

Existing literature documents that LGBTQ populations have been acknowledged to a greater extent by social services directed toward runaway and homeless youth than within child welfare settings. Many youth experiencing homelessness are living on the streets because they view it as safer or preferable to child welfare placements where they have experienced verbal or physical

harassment and a lack of understanding. 52% of youth experiencing homelessness have had some involvement with the foster care system at some point in their lives.

Mallon, G. 1998. We don't exactly get the welcome wagon: The experiences of gay and lesbian adolescents in child welfare systems. New York: Columbia University Press. Mallon, G. and Woronoff, R. 2006. Busting out of the child welfare closet: Lesbian, gay, bisexual, and transgender affirming approaches to child welfare. Child Welfare 85(2): 115-122. Byrne, et.al. 2005. Quality health care for homeless youth: Examining barriers to care. Presented at Children's Aid Society, New York. July 26, 2005.

To what degree does this information/research/data surprise you?

This information may invoke deep concern in participants as this can be interpreted as a direct indictment of how poorly the child welfare system has worked with LGBTQ youth. Child welfare staff who have been trained in trauma informed care will readily recognize the extent to which our LGBTQ youth are re-traumatized by coming into contact with child welfare services. It may be the first time that participants have directly thought about this impact, or been confronted with realizing that a youth would rather be on the streets than involved with child welfare services.

- What implications does this information have for how we approach our work with LGBTQ youth and families?
 - This raises the immediate issue that more extensive efforts must be made to work with the youth and their family together so that if at all possible the family can be helped to become more accepting and supportive of youth so that running away, homelessness, and placement can all be avoided.
 - Clearly we must determine more effective ways to engage with LGBTQ youth and ensure that their needs are better met.
 - o Highlights the importance of working with street outreach and homeless programs in order to better reach, engage, and connect to LGBTQ youth.
 - Youth who end up living on the streets, after having experiences of placement or being forced to leave their homes, are clearly experiencing multiple levels of trauma and loss.
 - Highlights the need to recruit and develop foster families and placements that are committed to working with LGBTQ youth.

The single most significant factor in predicting resilience and positive outcomes for LGBTQ youth is a family that is accepting and supportive of the youth. Caitlin Ryan, a social worker for the Family Acceptance Project at San Francisco State has managed this multi-year mixed methods study. Ryan also found that there are effective ways to work with families to help them modify rejecting behaviors and increase their level of support. These efforts ultimately lead to strengthening families and helping LGBTQ youth to remain at home.

Ryan, Caitlin. 2010. Engaging families to support lesbian, gay, bisexual, and transgender youth: The Family Acceptance Project. Prevention and Researcher 17(4): 11-13.

- To what degree does this information/research/data surprise you?
- It is likely that participants will indicate that they are aware of the importance of family. In the media there is often negative information regarding how parents respond, so some participants may indicate surprise that the research shows that parents can learn ways to be more supportive.

What implications does this information have for how we approach our work with LGBTQ youth and families?

- We need to work more aggressively and proactively with parents and caregivers to help them learn ways to be more supportive and less rejecting.
- We need to learn skills for bringing youth and their families together to mediate their differences and misunderstandings.
- We should not write parents off as being "hopeless" or unable to change; but rather remain persistent in our efforts to engage them.

Research D: Resilience—Importance of Positive Relationships

Rodrigo Torres in a doctoral dissertation for DePaul University in 2012 focused on relational resilience in a qualitative analysis focusing on gay, bisexual, and questioning male youth. Torres argues for a less deficit based framework when looking at how to more effectively work with the gay, bisexual, and questioning population. Relational resilience focuses on strengthening relationships rather than focusing on increasing the individual's strengths or skills. Torres argues that connective, positive, and supportive relationships are key to resilience.

Torres, Rodrigo, 2011. In their own words: A qualitative analysis of relational resilience in the lives of Gay, Bisexual, and questioning male youth. Chicago. DePaul University, Paper 111.

To what degree does this information/research/data surprise you?

It is likely that participants will indicate that they are aware of the importance of relationships, just as they are aware of the importance of family relationships. Participants may however be somewhat surprised at the notion that one works to promote and build relationships rather than focusing on what the person needs to change (or strengthen). It is a different paradigm and way of looking at how we intervene effectively.

- What implications does this information have for how we approach our work with LGBTQ youth and families?
 - o Relational resilience focuses on finding, building, and promoting positive relationships across the youth's life.
 - This research indicates that identifying deficits and focusing on those deficits will not be as effective as working on relational issues.
 - o Relational work would promote mentoring, helping the youth build positive friendships, connecting the youth to support groups and advocacy groups, intervening with the school to promote positive connections to teachers and school organizations, identifying potential long term resources for the youth, helping the youth reconnect to past supports or resources (such as previous foster families, teachers, role models, or mentors).

Research E: Resilience—Faith and Spirituality

Lease, Horn, and Noffsinger-Frazier (2005) note that faith experiences result in more positive feelings about self and better psychological health. Further, a report related to the aging LGBTQ population identified religious and spiritual activities as a key factor relating to positive mental and physical health.

Lease, Horne, Noffsinger-Frazier. Affirming faith experiences and psychological health for Caucasian lesbian, gay, and bi-sexual individuals. Journal of Counseling Psychology. 52(3). 2005.

Fredriksen-Goldsen et.al. Disparities and resilience among lesbian, gay, bi-sexual, and transgender older adults. Aging and Health Report.

To what degree does this information/research/data surprise you?

Participants may express some surprise because there is an assumption that churches and religious groups are not welcoming to the LGBTQ population in general, and that as a result many LGBTQ youth do not look for support from the religious community. This is certainly true in some situations—but as the research shows, not in all situations.

- What implications does this information have for how we approach our work with LGBTQ youth and families?
 - We cannot assume that an LGBTQ youth is not interested in church, religion, or spiritual quests.
 - We need to offer LGBTQ youth the opportunity to explore or experience their religion in any way they see fit.
 - We need to help LGBTQ youth locate churches or religious supports that will be accepting and supportive to the youth.

Research F: Risk—Bullying and Harassment at School

While trying to deal with all the challenges of being a teenager, gay/ lesbian/ bisexual/ transgender teens additionally have to deal with harassment, threats, and violence directed at them on a daily basis. They hear anti-gay slurs such as "homo", "faggot" and "sissy" about 26 times a day or once every 14 minutes. Even more troubling, a study found that 60% of middle school LGBT youth had experienced physical harassment and more than a third were actually assaulted as a result of sexual orientation. Middle school students face more hostility than high school students, and may have fewer resources to help them. Most students do not report bullying or harassment. What makes this even more concerning is that harassment has been identified as a critical factor in predicting outcomes. The more harassment a youth experiences, the greater the likelihood that he or she will engage in risky behaviors.

GLSEN. 2009. The experiences of lesbian, gay, bisexual and transgender middle school students (GLSEN Research Brief) New York: Gay, Lesbian and Straight Education Network.

Bontempo D.E. and D'Augelli. 2002. Effects of at-school victimization and sexual orientation on lesbian, gay, or bisexual youths' health risk behavior. Journal of Adolescent Health, 30, 364-374.

To what degree does this information/research/data surprise you?

This information may not be surprising to anyone as there is increased awareness about bullying in general. There have been several sensationalized media cases that have further highlighted the issue. The extent of and voracity of what LGBTQ youth experience on a day –to- day basis may resonate with some participants as this isn't related specifically to situations of bullying. Negative language is part of mainstream culture that is heard everywhere. Participants may not be aware that there is research that clearly connects experiences of being bullied with the development of high risk behaviors.

- What implications does this information have for how we approach our work with LGBTQ youth and families?
 - We need to recognize that LGBTQ youth are likely being bullied and receiving constant negative messaging. This, along with ongoing family stressors and placement stressors puts LGBTQ youth in the child welfare system at even greater risk.
 - Bullying and violence in the school setting also serves to re-traumatize youth who may already have experienced family abuse or neglect.
 - o There is a need to prepare staff to work with the school to ensure that LGBTQ youth feel safe in school and are connected to support systems within the school (such as LGBTQ clubs, empathic teachers or other role models, etc.).
 - We must work with parents to better understand the risks their child faces in the school setting and to help parents advocate for what their child needs in order to feel safe.

Research G: Child Welfare Practice Risk--Multiple Placements

LGBTQ youth experience more placements, placement disruptions, and unstable placements in both the juvenile justice and child welfare systems. Mallon, Aledort, and Ferrera in 2002 documented 6.35 average number of placements for LGBTQ youth and asserted that this was related to non-affirming placements where youth may not feel safe or accepted.

Mallon, G., Aledort, N. and Ferrera, M. 2002. There's no place like home: Achieving safety, permanency, and well-being for lesbian and gay adolescents in out-of-home care settings. Child Welfare 81(2): 407-439.

- To what degree does this information/research/data surprise you?
 - Most participants will be aware that youth, and certainly LGBTQ youth, have difficulty achieving stable and permanent placements within the child welfare system. Participants may not have thought about how this relates to poor permanency planning outcomes or serves to re-traumatize youth over and over.
- What implications does this information have for how we approach our work with LGBTQ youth and families?
 - Highlights the importance of family work in order to avoid placement if at all possible.

- o Individualized assessment and placement plans will help ensure that youth are placed in the most appropriate placement, with the correct level of care, that is supportive of the youth's needs.
- Clearly shows the need to provide ongoing training and support to those providing care to our LGBTQ youth.
- Highlights the need for trauma informed care as LGBTQ youth have experienced multiple moves and losses.
- The need for a youth driven permanency approach that is aggressively committed to the idea that LGBTQ youth deserve permanent nurturing families that there are families willing to make that commitment, and that independent living is not viewed as a viable permanent goal.