

(MASSACHUSETTS)

**DEPARTMENT OF SOCIAL SERVICES
STANDARDS OF CARE
RELATIVE TO GAY LESBIAN BISEXUAL AND TRANSGENDERED (GLBT)
YOUTH**

The Department of Social Services is committed to ensuring that every child in its care and/or custody is treated in a safe, nurturing, supportive and respectful, manner. This extends across all demographic lines including; race, ethnicity, religion, gender, ability, socioeconomic status, and sexual orientation. This philosophy extends beyond the Department's immediate scope, as it is a philosophy that must be upheld by all service providers. Invisibility and emotional/physical trauma can impede the delivery of adequate services for children and adolescents, particularly if these traumas are associated with a child's/adolescent's sexual orientation and/or gender identification. Children and adolescents who conform to society's accepted notions of sexuality tend to find support within the larger society as well as within the DSS system of care. But if a child is gay, lesbian, bisexual or transgendered (GLBT), the Department recognizes that there exists the potential for harm, intended or otherwise as a result of an inability to support GLBT youth adequately. These inadequacies may be tied to homophobia (defined as a hatred of homosexuality based in fear and/or ignorance) or heterosexism, defined as the belief that one form of sexual expression is superior to, or more accepted than, another. In order to minimize this harm and improve services to this population, the following standards of care set forth the Department's expectations relative to GLBT youth.

In accordance with federal law, which mandates those states that receive federal funding, develop plans for every child to assure safe and proper care consistent with the child's "best interest and special needs". States are also required by federal law to establish standards to protect foster children's civil rights. These laws came out of a report presented by the Child Welfare League of America, which highlighted the fact that "Child welfare agencies and their staff members have often been handicapped in their ability to properly meet the needs of this client group due to social stigmatization, a lack of information, misinformation, and fear and a consequent lack of understanding". (Child Welfare League of America, *Serving Gay and Lesbian Youths: The Role of Child Welfare Agencies*, 1991)

These standards of care will be implemented within the Department of Social Services, as well as within the provider community. These standards will not only improve the level of service provided to the client within the Department, but treatment received/utilized by GLBT youth within the provider community. The acknowledgement of the unique situation that GLBT youth may find themselves in while utilizing the services available through the Department is absolutely critical. The understanding of this importance must be consistent throughout the provider community.

The Departments of Education and Public Health, as well as the Governors Commission on Gay and Lesbian Youth, established under the Weld Administration and supported by all subsequent Administrations, have set the bar regarding service needs for GLBT youth within the Commonwealth. The Department of Social Services intends to follow the lead of these organizations to best attend to the needs of the youth it serves.

The following information was compiled from the 1999 Massachusetts Department of Education's Youth Risk Behavior Survey (MYRBS). This tool was developed in the late 80's by the US Centers for Disease Control and Prevention and is administered in public school systems throughout the US. This nationwide survey is conducted on a bi-annual basis. The most recent MYRBS for which data are available was conducted in the Spring of 1999 in 64 randomly selected public high school across Massachusetts. A total of 4415 students, in grades 9 through 12 participated in this survey. Due to the high student and response rates, the results of this survey can be generalized to apply to public high schools across the Commonwealth. Sexual minority is defined as a student who reported to have had same sex contact but identified as heterosexual, students who identified as GLB and had same sex contact and students who identified as GLB but have not had same sex contact. (Data are consistent since 1993).

Basic comparisons of the risk behaviors of heterosexual and sexual minority adolescents show that the sexual minority youth have significantly higher rates of substance use, high risk sexual behaviors, depression, suicidality, and violence-related behaviors. Based on the profile of the adolescents served by the Department it can be understood that the current Department's population boasts a higher percentage of GLB youth than represented in the study. Thus our need to better serve GLB youth becomes of paramount importance.

- ◆ GLB youth are more than twice as likely as non-GLB youth to be in a physical fight at school
- ◆ GLB youth are nearly four times more likely as non-GLB youth to be threatened with a weapon at school
- ◆ GLB youth use tobacco products, alcohol and drugs at rates significantly higher than those of non-GLB youth
- ◆ Gay/Bisexual males reported higher rates of skipping school because of feeling unsafe.
- ◆ GLB youth are more than twice as likely than non-GLB youth to seriously consider suicide, and more than four times as likely to attempt suicide
- ◆ GLB youth get pregnant, or get someone pregnant, nearly three times more often than non-GLB youth
- ◆ Gay/Bisexual males were more likely than their heterosexual peers to believe they were overweight and to go to extremes to rectify their perceived weight problem.
- ◆ Victimization experiences appear to be stronger among GLB youth than among their heterosexual peers; an increase in victimization levels is associated with a greater increase in GLB risk than in Heterosexual risk.

These high-risk behaviors, depression, suicidality, substance use and victimization are consistent with the presenting problems included in the client profile of many DSS youth. It can be inferred that there is a subset of the youth that the Department is currently serving that are indeed GLBT. The intent of this document is not to pathologize GLBT youth or the activities in which they engage. Rather, the intent is to highlight the reality that the issues confronting GLBT youth are the same or similar to those confronting youth in the care or custody of the Department. Therefore, it is imperative that the Department develops strategies to understand and address the links between a youth's sexual development and behaviors that may impede their healthy development.

Throughout the history of the Department, the needs of GLBT youth have been met inconsistently at best. During the absence of policy and/or procedures regarding GLBT youth, this population has been served differently on a case by case basis, relying on the varying levels of resourcefulness of individual staff, teams, units, areas, and/or regions. Information regarding best practice for social work staff working with GLBT youth has been inconsistent and difficult to locate. Resources utilized to serve GLBT youth have been scarce, often relying on informal, personal networks. The stigmatization surrounding GLBT issues has in some situations prevented the Department and many service providers from addressing the issue of sexual orientation as it pertains to service or treatment planning for youth. This is compounded by a lack of awareness by the general population of the needs of GLBT youth and the needed resource development.

To best meet the needs of the children of the Commonwealth, the following tasks have been set forth:

- ◆ The Department will design and utilize GLBT friendly assessment tools.
- ◆ The Department will assure GLBT competent staff at all levels of the organization.
- ◆ The Department will maintain trained staff at all levels of Social Work.
- ◆ In accordance with state law, the Department will ensure an environment that is free from discrimination and harassment.
- ◆ The Department will develop a culture where GLBT individuals feel safe and comfortable. This includes clients, employees and vendors.
- ◆ The Department will develop and maintain mechanisms to assist GLBT individuals to address issues of human rights infractions.
- ◆ The Department will ensure training of contracted providers regarding GLBT issues.
- ◆ The Department will include in its non-discrimination statement wording regarding GLBT individuals in order to protect the youth in its care and custody.
- ◆ The Department maintains a zero tolerance policy for harassment and/or discrimination of GLBT individuals.

The role of the DSS Social Worker in the life of a GLBT youth involved with the Department is a vital one. The following serves to outline the roles available and

necessary when working with youth who may have previously self-identified as GLBT, may be in the process of self identifying, or may do so in the future:

- ◆ Maintain oneself as someone open to the possibility that the youth they are working with, or someone within their family system, are potentially GLBT.
- ◆ Utilize training, as it is available in the area of GLBT issues.
- ◆ Consult with service providers, as appropriate, with the knowledge of the client, to improve service delivery.
- ◆ Assist GLBT clients with identifying services that are appropriate for them
- ◆ Develop an understanding of available research as well as ways in which it applies to the lives, behaviors and experiences of GLBT youth

Acknowledging that much of the treatment provided to our clients is through service providers outside of the Department and it is absolutely necessary that all service providers maintain the same philosophy as the Department in terms of GLBT youth. The Department holds the following expectations of the providers.

- ◆ Ensure an environment that is safe and supportive to GLBT youth.
- ◆ Utilize training made available by the Department as well as by outside resources on the topic of GLBT youth.
- ◆ Seek out additional resources as needed regarding GLBT youth.
- ◆ Adopt a non-discrimination statement protecting GLBT individuals.
- ◆ Utilize inclusive language within all program materials and dialogue.
- ◆ Ensure safety of GLBT youth in program. This includes eliminating risk of harm by staff and/or other clients.

Residential providers are met with some unique challenges when working with GLBT youth. It is critical that when a residential provider is working with GLBT youth that they not only adhere to the general expectations of all service providers, but also take the extra steps necessary to best serve GLBT youth within their facilities. These steps should include but are not limited to:

- ◆ Ensuring a milieu that takes into account of all possible sexual orientations and gender identities.
- ◆ Utilize logical planning when setting up group and individual living space.
- ◆ Account for differences in sexual orientation and gender identities when planning program activities.
- ◆ Ensure that all subcontractors and other service providers within the community are sensitive to GLBT issues. Minimally securing “GLBT safe” vendors.
- ◆ The Standards of Care set forth an expectation that residential providers will have a policy outlining strategies for maintaining a safe milieu within the program. The behaviors, attitudes and actions of their peers profoundly influence youth, particularly adolescents. Residential programs are often challenged by the dynamics present in a milieu after a youth has “come out” as GLB or T. It is the Department’s

expectation that the residential provider will identify and employ a variety of strategies to maintain safety and support of GLBT youth within the milieu.

The Departments of Education and Public Health also have responsibilities relative to many of the DSS Residential Programs. It is of equal importance that DOE and DPH be participants in discussions about the implementation of the DSS Standards of Care.

Legal Issues Requiring Clarification

1. Where or if to document a client's sexual orientation as to have it be accessible to social workers, and service providers while still respecting confidentiality.
2. Should this information be documented within a client's file, which may be viewed by parents, lawyers, case reviewers, etc?
3. Should the Department create a policy addressing living space within residential programs for transgender youth?

Recommended Next Steps

1. The Department should immediately implement the Standards of Care set forth in this document.
2. The Department should conduct an anonymous demographic survey regarding GLBT issues.
3. The Department should formalize a workgroup to address deficit areas outlined within this document.
4. The Department should plan for the inclusion of GLBT issues, as they pertain to the youth in the care and custody of the Department, into Social Worker Core Training.
5. The Department should research and utilize training resources available to train all current field staff, by area, in GLBT issues.
6. The Department should mandate that all service providers seek out formal training in the area of GLBT issues.
7. Research and develop a statewide training to address the training needs of the residential service provider community.
8. The Department should support specific placements when necessary for individual GLBT youth.
9. The Department should continue to be proactive around coming out issues.
10. The Department should establish a GLBT youth advisory panel that will provide ongoing feedback and guidance to DSS.