Addressing the Needs of LGBTQ Youth in Foster Care

Estimates of the population attracted to members of the same sex range wildly from 1% at the low end (Alan Guttmacher Institute, 1993) to 10% at the high end (Alfred Kinsey, 1948), depending on the study and its exact definitions. Most experts split the difference at about 5%. Rates of transgender identity (see Vocabulary sidebar on page ) are much lower than the other categories under discussion; however very little statistical data exists. Many child welfare professionals believe that youth who identify as lesbian, gay, bisexual, transgender or questioning (LGBTQ) are overrepresented in the child welfare system. After all, a significant portion of LGBTQ teens enter foster care because they are exiled from their homes. Without taking transgender youth or disproportionate representation into account, this subset of the 800,000 children who experience foster care every year could easily populate a city the size of Twin Falls, ID (40,380).

Opinions vary about whether homosexual orientation causes problems in itself. Adults’ opinions about the pitfalls of gay, lesbian or transgender identity often take the focus away from meeting the needs of these youth. Society’s reaction to a youth’s identity can without a doubt cause a great deal of harm. A recent study published in Pediatrics demonstrated that lesbian, gay and bisexual young adults who reported higher levels of family rejection during adolescence were more than eight times more likely to have attempted suicide (See “American Academy of Pediatrics” in the expanded Resources sidebar available at CASAforchildren.org/Connection). The challenges and risks faced by LGBTQ youth in care can be summarized in three broad categories: intolerance, barriers to permanency and lack of safety.

A Stigmatized Identity

A teenage girl’s foster parents refer to her as a ‘dyke’ and try to remake her by replacing all her clothing against her will. (From Out of the Margins, listed in Resources sidebar on page 8)

Nearly every challenge faced by LGBTQ youth in care can be traced to a lack of acceptance. Whether it is called prejudice, discrimination, ignorance or thoughtlessness, these youth may experience rejecting behavior from birth parents, foster parents, advocates, peers and sometimes even the professionals who serve them. Sources of this discrimination may be cultural or religious.

“All of us carry our biases, beliefs and attitudes with us,” points out Ellen Kahn, director of the Human Rights Campaign’s Family Project. “I think homophobia and transphobia are the last frontier for tolerating intolerance. There aren’t yet national laws against this discrimination that would give us the foundation we need in order to fight it successfully—nothing parallel to what we use in fighting racial discrimination.”

Many researchers and LGBTQ individuals believe strongly in the genetic origins of sexual orientation. “People need to understand that it’s not a choice—any more than it would be for a heterosexual person to say they chose to be straight,” says Mary McGowan, a guardian ad litem volunteer with the 4th Judicial District Guardian ad Litem
Program in Minneapolis, MN. “We have to see it as not a lifestyle, not a choice—but who you are.” In addition to being a GAL volunteer, McGowan is an adoptive parent of five special-needs children. She is also a professional trainer and speaks nationally and internationally on this subject.

McGowan takes it a step further when she does new foster parent education. “I talk with the foster parent candidly when they say, ‘I want to raise little kids so they won’t grow to be gay.’ I let them know it’s a myth that they can control this. I tell them that if they don’t think they can raise a child who eventually identifies as gay or lesbian, then they should reconsider doing foster care. It will be a terrible influence if their issues get in the way and the child sees her own identity as something bad.”

Prejudicial treatment of these youth is so pervasive that young people themselves often don’t recognize it when it happens. “We sponsored a listening forum last fall offering LGBTQ youth in our county a chance to share their experiences with us,” says Ann Marie Foley Binsner, executive director of CASA of Prince George’s County in Hyattsville, MD. “One of the things that struck me most was that even though the youth were recounting discriminatory and hateful experiences, they weren’t identifying those experiences as such because it was par for the course. When a young man was told, ‘As long as you don’t act gay, you’ll be fine in our group home,’ he didn’t think it was a big deal. He said, ‘So I don’t act gay and I’ve been getting along there just fine.’ It’s shocking to me that somebody would be told not to be themselves and they would be okay with that.”

Lack of Permanency

A teenage boy is singled out by his foster parents and social worker solely because of his non-gender-conforming appearance and mannerisms. A recommendation is made for placement in a residential center known for treating youth who are sexual offenders.

Youth in foster care who are LGBTQ are less likely to find a permanent home than other children, whether that means reunification or adoption (see “Lambda Legal” in the Resources sidebar for sources). “One of the issues that affects youth in the system who are sexual or gender minorities is not enough focus on permanency,” says Jody Marksamer, staff attorney and youth project director at the National Center for Lesbian Rights (NCLR). “Child welfare workers often give up on the idea that these youth will find a family that’s excited to have them.”

Transgender youth may have the hardest time with permanency. “I’ve worked with a lot of homeless transgender youth who couldn’t find anyone who would accept them for who they are,” says Lydi Davidson, MSW, director of resource development for the National CASA member program Advocates for Children in Columbus, IN. “The bigotry they face in the community is incredible. Institutions that most of us take for granted such as family, education, health care and religion often have turned their backs on them.” Davidson formerly ran Indiana Youth Group, an agency that offers a safe house and other services for gay and transgender youth ages 12–18.

Marksamer believes that CASA/GAL volunteers are in a good position to help make sure that youth who are gay or transgender are getting the same attention for finding permanency that other youth receive. “They should also work with the LGBT youth to help identify adults that these youth can really get support from, because it is very difficult leaving the system without those permanent adult relationships,” he adds.

LaRae Oberloh is program manager at the Sioux Falls Area CASA Program in South Dakota. She says, “We need to ensure permanency. I think it’s critical to find a family where the youth can feel safe and accepted. And it doesn’t have to be parents who identify as LGBTQ. They just have to be people that youth can trust and know will be there for them as they go on to adulthood.”

Tyler Smith, 20, of Tacoma, WA, aged out of care two years ago. He recalls being in “more than 25” foster homes before age 11, when he reached the home of Berdie Williams, who he now considers his second mom. “I definitely think my being gay impacted my movement between homes while I was in care,” says Smith. “I knew by the time I was 6, and I was open about it at a very young age. Before I moved into Berdie’s house, I never lived in a permanent home.”

Tobias Rogan, who wrote this issue’s Youth Editorial, spoke movingly of his lack of a consistent adult presence
in his life. Another youth had this support, but from an unusual source. Schylar Canfield of Montana, now 26, was in foster care from age 6 to 18. He lived in 11 foster homes, two group homes and a children’s home. “Then I was allowed to live on my own just as I was turning 17,” he says. “I’m going through an adult adoption that will be finalized soon. My new father was my sixth-grade music teacher. Through all my homes, I always kept in contact by writing or calling. He was always there to listen to me. But besides that there was really no one who was always with me.”

“I tell [gay youth], ‘If people don’t accept you now, they’ll eventually come around. And if they don’t, it’s their loss.’”

–Berdie Williams, Foster Mother

Lack of Safety

A young man in a group home is beaten up by other boys in the home. When he reports the incident to the program’s director, he is told, “Well if you weren’t a faggot, they wouldn’t beat you up.” No effort is made to intervene in the continuing violence.

There is not room in this article to document the many ways and the degree to which LGBTQ youth in care lack safety. The Resources sidebar above contains sources of more information. Suffice it to say that they are more likely to drop out of school, to become involved in the criminal justice system, to be sexually assaulted or exploited, to contract STDs including HIV, to become homeless, to have mental health issues, to abuse substances and to commit suicide.

While Schylar Canfield did not have a CASA volunteer, he is now on the board of directors of Montana CASA. “I’m a FosterClub All-Star from way back, so my being gay isn’t a big secret,” he says. “I had to hide it a lot growing up though. As soon as I reached junior high was when my
foster brother at the time started beating the crap out of me. He could tell I wasn’t like the other boys.”

Berdie Williams, Tyler Smith’s foster mom, recalls how as a teenager he would ask her to take in homeless teens who were visiting the gay youth center: “These were wonderful kids whose parents had kicked them out when they found out they were gay. All had the potential to go so far, had they had parental support. Some knew how to survive; some didn’t. And I would tell them, you’re welcome to sleep on my couch.”

One former youth in care who did not want to disclose his name stated, “I was diagnosed with HIV at 18. I think a huge part of that was that I was taught my whole life, ‘Just don’t have sex or you’ll go to hell.’ It’s impossible to expect an older teen to remain celibate. If you tell someone not to have sex, period, you’re kidding yourself and that kid. So I had one unprotected partner, and that pretty much shot it. I’ve met a couple of other foster kids who had similar stories.”

For transgender youth, access to appropriate health care is a critical safety issue. “For those youth that have been diagnosed with gender identity disorder, the standard treatment usually involves psychotherapy as well as hormone treatment,” says Flor Bermudez, staff attorney for the Youth in Out-of-Home Care Project at Lambda Legal. “Unfortunately, many of the state child welfare agencies are not equipped or willing to find trained professionals to first diagnose the youth and second to provide and pay for the treatment. When youth buy hormones from street sources, they put themselves in great danger.”

Georgia Feiste is a volunteer advocate and trainer with CASA for Lancaster County in Lincoln, NE. She has also been active for 15 years with Parents, Families and Friends of Lesbians and Gays (PFLAG) because her son is gay.

“One of the things that I have observed about LGBT people is that there is often a great deal of introspection,” says Feiste. “And that is unusual for a teenager. What I found with young teens is that at first most didn’t want to be gay. There is this self-hatred that starts to permeate their personality. Many teenagers who have not accepted the fact that they are gay become very angry and often end up self-medicating with alcohol and drugs, and our son was not an exception. What they are really looking for is someone to help them understand who they are—and help them learn to love themselves.”

What is Feiste’s message when she helps train new CASA volunteers? “The most important thing that these teenagers need is someone to tell them that they are okay just the way they are. Oftentimes it may only be the CASA volunteer who can give them that feeling of acceptance.”

Rob Woronoff, formerly LGBTQ program director for the Child Welfare League of America (CWLA), continues to consult and train adults working in child welfare. He points out the dangers of “conversion” or “reparative” therapy, which has been denounced by nearly all mainstream child welfare and psychological/psychiatric associations. “There is no need to try to ‘change’ a child’s sexuality. Research shows that trying to do so only harms children, making them more likely to commit suicide.”

Having to hide their identity means that youth can’t reveal the normal rites of passage such as their first romances or breakups. And while their peers may be confiding or even bragging about their first sexual experiences, they must keep silent. Former foster youth Schylar Canfield tells how this affected him: “My foster parents were extremely religious. My foster mother found out I was gay after my first crush broke up. I came home pretty devastated. She jokingly asked me if I was a ‘fag,’ and that launched the whole thing. She freaked out. Our relationship had been great up until that point, but the moment she found out I was gay it turned very dark. I actually ran away from that home, the last foster home I lived in.”

Regarding coming out, foster mother Berdie Williams offers this advice to adults: “Just be neutral. And if you know they are gay but have not come out, just pretend that you don’t know. Because they do need to come out, to face it. They build up confidence when they do it. They think, ‘I’m living here in this house, and I came out to her, and it worked just fine.’ And I tell them, ‘If people don’t accept you now, they’ll eventually come around. And if they don’t, it’s their loss’.”

The question of confidentiality can be difficult to navigate when a youth’s safety is involved. How do you advocate for protection without outing a youth who would rather not be open? LaRae Oberloh of South Dakota
offers this advice: “I think that foremost is to respect the confidentiality of the youth. If safety is an issue, the key is to leave it to the youth to decide whether to disclose their sexual orientation or gender identity. Any breach could lead some kids to self-harm or to running away. But I think that a trusted adult can tell the youth, ‘We have these resources, and I can help you with this issue’ and let them have control. The youth may say, ‘Okay, fine, let’s do this.’ We’re better off including them and developing a plan to ensure their safety. But once it’s documented that a youth has come out, that will follow wherever he or she goes, and that’s not always a good thing.”

What CASA Programs Are Doing to Address Youth Needs

CASA of Prince George’s County, Hyattsville, MD

“The majority of the youth we serve are teenagers,” says Ann Marie Foley Binsner of CASA of Prince George’s County, introduced earlier. “So we have a lot of young people who are questioning or realizing their sexuality.”

“One thing we were able to do here was approach the Department of Social Services and express our concern to them regarding the lack of services offered to older youth and the need to train social workers who serve LGBTQ youth,” says Binsner. “We were very pleased that they were open to working with us to bring training to the social workers, the foster families and others who are working with youth in our county.”

This partnership led to the formation of an active countywide, multidisciplinary taskforce that has met monthly over the past three years. Adds Binsner, “We address training for service providers, policies that impact youth in our state and county and needed services for our young people.”

The taskforce consists of representatives from youth-serving county agencies along with the CASA program and other private providers. The county now frequently offers training on gay and transgender issues to all social workers. The Prince George’s CASA program has also made this topic a regular part of the new volunteer training curriculum.

Binsner points to two new practices of her CASA program: “First, in our pre-screening interview of potential volunteers we’ve added a question inquiring as to their experience with and thoughts about LGBTQ youth and adults. Then a follow-up question asks if they would be comfortable being assigned to a youth who identified as gay or lesbian or was questioning his or her sexual orientation. If they lack knowledge or experience in this area, we can train around it. But we feel it is important to carefully screen volunteers who would not be, at a very minimum, accepting of a young person for who they are.”

The second new practice of Prince George’s CASA program involves pre-service training. “We’ve added a component that we adapted from a training provided by the Child Welfare League of America,” says Binsner. “The centerpiece is an exercise to help volunteers understand what it might be like to be a young person who is gay or lesbian and who cannot express their true self because of fear of how they might be treated. The exercise has helped our volunteers ask questions and identify with the young people they serve.” (This sensitivity training exercise is available at CASAforchildren.org/Connection.)

11th Judicial Circuit GAL Program, Miami, FL

The 11th Judicial Circuit Guardian ad Litem Program in Miami is another CASA program leading the way on this issue. The Miami staff is going through a three-part training put on jointly by the National Association of Social Workers and Lambda Legal, using materials co-produced by CWLA.

“What we envision is our GAL program becoming known as a place where children in care know they can talk to someone who respects them and cares about their needs,” says Garry Bevel, staff attorney with the program. “I hope we’ll also be known as a place where youth can be linked to services, resources and people in the community who will support them.”

Bevel recounts, “About a year ago our staff went through training by Safe Schools South Florida. It reminded me of my own experience at Florida State University where there were ‘safe zones’ designated by pink triangle stickers on various doors across campus. These were places I knew would be accepting and I could go talk to someone.” After this training, he took the idea of a GAL safe zone to the program’s director.

One of the first things Bevel knew would be important was to give staff members a baseline understanding of LGBTQ issues. “We’ve done several communications
trainings because a lot of it involves healthy, informed communication about this topic. People still have their own perspectives, but we’re able to connect around the common purpose of serving these youth.”

While recognizing that not everyone shares the same beliefs, the Miami leadership reminds its staff and volunteers that they are committed to ensuring that all youth are safe. Bevel insists, “I truly believe you can hold your own personal opinions regarding gender and orientation and still advocate to see children safe and be able to identify resources that will help them.”

Beyond the services of the GAL staff and volunteers, Bevel hopes to make statewide inroads in terms of legal advocacy: “I’d like to see us identifying instances where laws need to be changed and making sure that appropriate services are part of these youth’s case plans.”

Up to this point, the special training has only been for the Miami program’s staff members. “We certainly envision making it a part of the new volunteer training,” says Bevel. “It’s about offering people information and believing that change is possible. It’s exciting because I’m confident it’s going to get better.”

CASA for Children of DC, Washington, DC

Training volunteers to be nonjudgmental and to know the resources available to gay and transgender youth is also important to Richard Harris, senior manager at CASA for Children of DC. “Our volunteers spend a lot of time trying to close in the gaps by providing a sensitive and caring ear as well as connecting youth to the services and resources available in the community,” Harris says. Each year, the DC program conducts an in-service training to make sure all volunteers are aware of local providers who help gay or transgender young people.

Harris points to the importance of having volunteers become known for their open-mindedness. “While we may have volunteers working with eight young people right now who have identified as LGBTQ, we need all of our volunteers to be prepared to do so. We’re sure there are a number of young people who are not comfortable coming forward yet. So it’s important for everybody to make sure they’re being sensitive, that they’re using the right language, that they’re not sending any messages about being unsupportive.”

CASA for Children of DC has also been working with the district’s child welfare agency on this issue. “They are preparing to do training for all of their social workers,” says Harris. He sees this as a direct result of the LGBTQ taskforce that was started by the family court about three years ago. “Membership includes the judge, social workers, providers and a range of professionals who demonstrated an interest in this population.”

LGBTQ Vocabulary

Bisexual—A person who is romantically, emotionally or physically attracted to both sexes. A bisexual person may not be equally attracted to both men and women, and the degree of attraction may vary over time.

Coming Out—An evolving process of identifying oneself as lesbian, gay, bisexual or transgender—first to oneself and then to others.

Gay—The term used to describe people who are physically, romantically or emotionally attracted to people of the same sex. Gay may be used to refer to both men and women, but lesbian is the preferred term for women.

Gender Identity—An individual’s self-perception as a man or a woman.

Heterosexism—The attitude that heterosexuality is the only valid sexual orientation.

Homophobia—Fear or hatred of LGBTQ people, including fear of one’s own gay or lesbian feelings or of people who are thought to be LGBTQ.

Homosexual—As a noun, a clinical and dated term considered inappropriate or offensive to many gay men and lesbians. Gay and lesbian accurately describe people who are attracted to members of the same sex.

Queer—Once considered strictly derogatory, the term has been embraced by younger LGBTQ people as an umbrella term for not being strictly heterosexual or gender-conforming. Because the general public and older LGBT people still find it offensive, use with caution.

Questioning—The stage of exploring or being unsure of one’s sexual orientation or gender identity.

Sexual Orientation—Lesbian, gay, bisexual and heterosexual orientations refer to the kind of person an individual is romantically or physically attracted to.

Transgender—A transgender person is someone whose gender identity is at odds with their physical sex. Many transgender people live as members of the sex not assigned to them at birth. In addition, some people whose gender expression differs from conventional expectations of masculinity and femininity identify as transgender.

Transtsexual—This is considered an older, clinical term which originated in the medical and psychological communities. Many transgender people prefer transgender to transexual, but it is best to ask someone which term they prefer.

Transvestite—A person who dresses in clothing of the opposite gender. This is a derogatory term and should not be used.

Adapted from a compilation from numerous sources edited by Kelly Franks, program coordinator for CASA of Prince George’s County in Hyattsville, MD.
Success Stories

Richard Harris gives one example of a case where a CASA volunteer was very helpful. A young transgender man (born female but who identifies as male) was assigned to a volunteer advocate. Prospects for the youth to remain at home, even with supportive services, looked bleak because of his father’s attitude. “He was extremely homophobic,” says Harris. The family constantly reminded the youth that his gender identity was “against God’s will.” The CASA volunteer identified resources for the young man and his family. The mother was connected to a progressive parent of gay children who shared her Christian values and helped the mother learn to deal with her son’s identity and remain comfortable with her religious convictions. The young man also got into minor trouble with the juvenile justice system. During his very brief incarceration, the CASA volunteer advocated for him to be in a private cell so that he would not be subject to harassment by other inmates. A number of policy and resource challenges were brought to light by this particular case, leading to system improvements. And best of all, the youth was ultimately able to safely remain at home with his family.

Another successful young man is David Ambroz. He was on CWLA’s National Foster Youth Advisory Council when he learned of the agency’s then-new LGBTQ initiative with Lambda Legal. Ambroz felt comfortable enough to come out as gay and get involved with the project. He went on to law school and was recently named the American Bar Association’s young lawyer of the year.

Tyler Smith, the young man from Tacoma introduced earlier, credits his foster mother with establishing a safe environment for him to come out very young as well as her ability to find resources for him, particularly the local gay youth center. Smith graduated from high school at 17 and completed college by age 19. Today, he is a social worker and HIV prevention counselor. “So I’m extremely familiar with GAL and CASA volunteers. I always say that it’s important to help kids build a support circle that is safe and nurturing. That’s what was most important for me, and I know that’s what CASA volunteers do.” Having his foster mother connect him with the youth center was life-changing for Smith. “That’s where I learned everything I know about the community,” he says. “The staff there are people who greatly influenced my choice to go into social welfare.”

Jarel Melendez, now 23, was in foster and kinship care in New York State from ages 5 to 18. Today he works as a youth advocate at Lawyers for Children. “We have law guardians and we have masters-level social workers, and then we have me, the youth advocate,” says Melendez. “I’m in family courts throughout New York advocating on behalf of adolescents.” As a volunteer, Melendez is proud to run a monthly support group for gay and transgender youth. He is finishing his last year at the City University of New York, Baruch College, where he is earning a bachelor’s in international business management. Melendez credits his mentor for being open and willing to research resources for him. “I call him my father now. He didn’t really understand foster care or the LGBTQ piece. But he wasn’t afraid to get out of his comfort zone and read up on things to help me. I feel I’m where I’m at today because of him.”

Podcast and Tips for CASA Programs Available Online

In researching this article, telephone interviews were conducted with 2 CASA staff members and volunteers, youth formerly in foster care, parents and national experts on the needs of gay and transgender youth in foster care. You can find a podcast featuring many of the voices of these subject-matter experts by going to CASAforchildren.org/Connection. Also on this web page you will find the sensitivity training exercise mentioned earlier and the web-only article “Seven Tips for CASA/GAL Programs Working with LGBTQ Youth.”

Where Do We Go from Here?

There are many more resources today than there were ten or even five years ago in terms of organizations, publications, trainings, toolkits and websites dealing with LGBTQ youth in general as well as those in care. With research, planning, training, collaboration, creativity and sensitivity, CASA volunteers and staff members can help ensure that these youth are not retraumatized by negative reactions to their identity.
In addition to the subject-matter experts quoted in this article, we thank the following individuals for providing their insight:

Anonymous Mother  
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Dennis Patrick, Foster and Adoptive Father  
Diane Wagner, Adoption and Permanency Resources Division Chief, DFYS, Los Angeles, CA

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