Supporting Diverse SOGIE in Wraparound

2019

Presenters:

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Learning Objectives

1. Welcome
2. Learn about LGBTQ+ disparities and disproportionalities
3. Learn about the SOGIE components of our identity
4. Explore the “Coming Out” process
5. Gain understanding about the Importance of family support
6. Strategies for supporting youth and their families
7. Common myths and mistakes
8. Wrap up and Next Steps

The Institute for Innovation and Implementation offers LGBTQ+ expertise related to supporting young people and their families in systems of care. Our team is comprised of professionals from across disciplines who can provide training and consultation to help meet your specific needs around diverse sexual orientation, gender identity, and gender expression.

NWIA

What do you already know?

Lesbian, Gay, Bisexual, Transgender, Questioning, Queer, Intersex, 2 Spirit

Sexual Orientation, Gender Identities, and Expressions

LGBT youth are estimated to be between 3-8% of youth in U.S.—So why are we focusing on a smaller population of youth?

Keeping Them
Bullied to Death
CNN

SUICIDE

LGBTQ youth are twice as likely to attempt suicide than their non-LGBTQ peers[2]

DISPARITY

1 in

Approximately 1 in 5 youth (19 percent) of children and youth in the Los Angeles foster care system identify as LGBTQ[1]

ABUSE

30 percent of LGBTQ youth in the foster care system report physical violence by family members after disclosing their sexual orientation or gender identity[2]

INCARCERATION

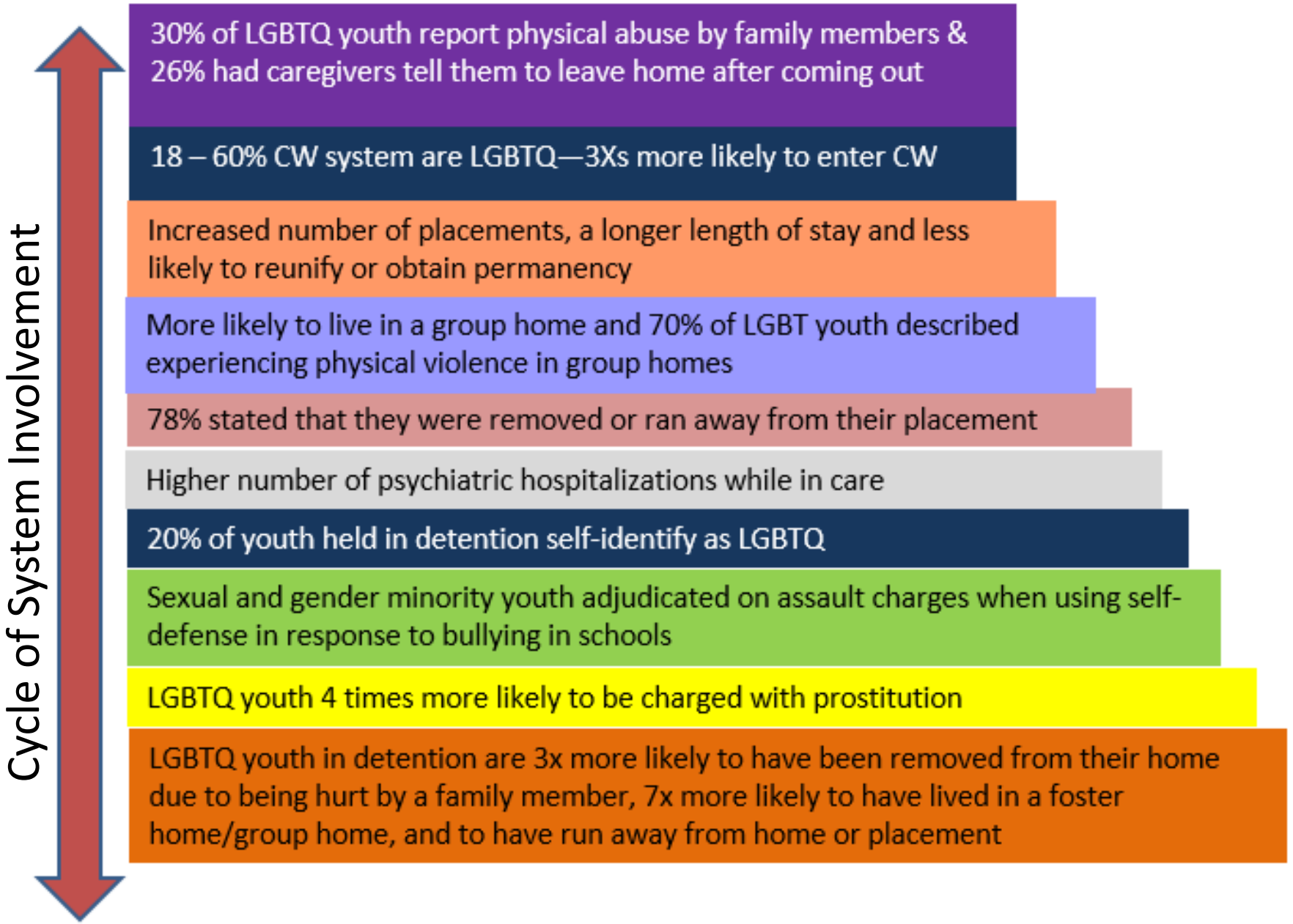
20 percent of youth in detention halls identify as LGBTQ or gender non-conforming[3]

HOMELESSNESS

Two in Five

As many as 40 percent of LGBTQ youth accessing homeless services at the Los Angeles LGBT Center are coming out of foster care

NWIA


Cycle of System Involvement
30% of LGBTQ youth report physical abuse by family members & 26% had caregivers tell them to leave home after coming out
18 – 60% CW system are LGBTQ—3Xs more likely to enter CW
Increased number of placements, a longer length of stay and less likely to reunify or obtain permanency
More likely to live in a group home and 70% of LGBT youth described experiencing physical violence in group homes
78% stated that they were removed or ran away from their placement
Higher number of psychiatric hospitalizations while in care
20% of youth held in detention self-identify as LGBTQ
Sexual and gender minority youth adjudicated on assault charges when using self-defense in response to bullying in schools
LGBTQ youth 4 times more likely to be charged with prostitution
LGBTQ youth in detention are 3x more likely to have been removed from their home due to being hurt by a family member, 7x more likely to have lived in a foster home/group home, and to have run away from home or placement

An all boys group home won’t let a young person buy wigs, bras, or other feminine items saying that “we can’t give this youth special treatment.”

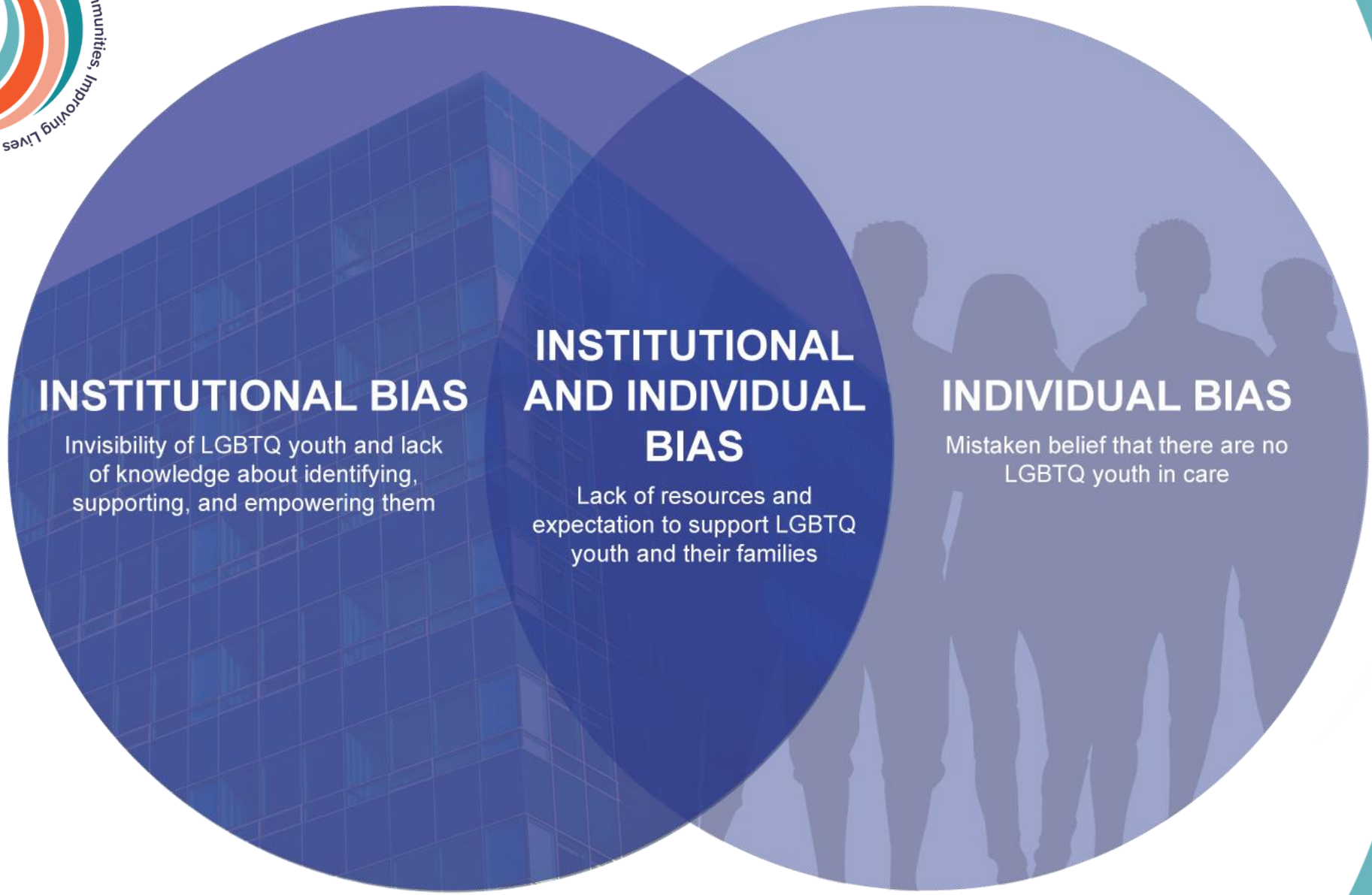
Curb Cutouts

People who need a wheel chair represent approx. 3.3 million people in the US- roughly 1% of the population

In 1990 ADA required sidewalks to have curb cutouts

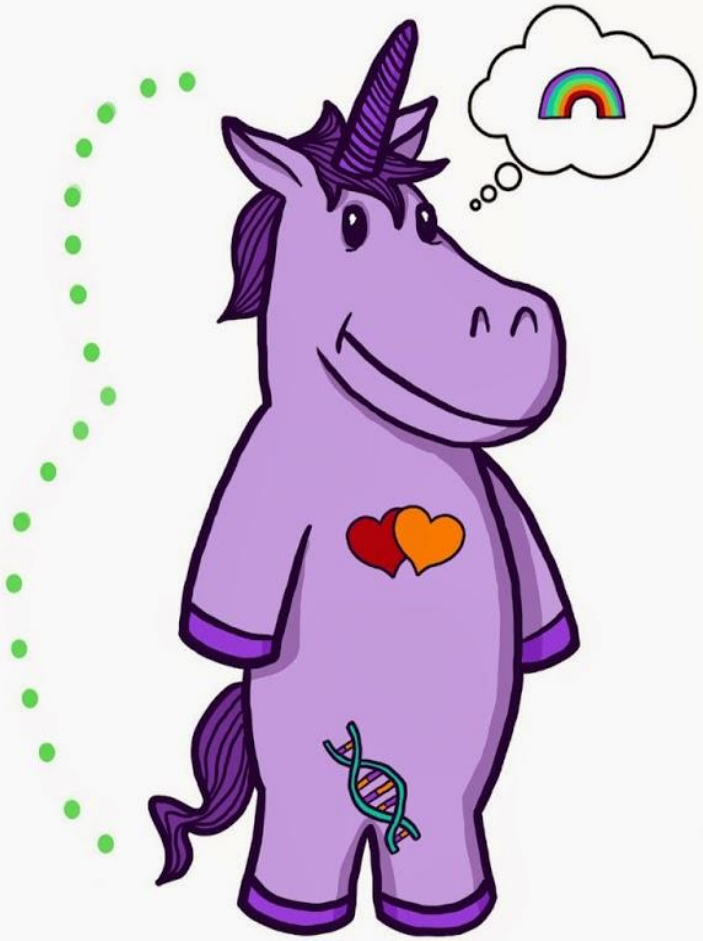
Laws and programs designed to benefit vulnerable groups, such as people with disabilities, people of color, or people with diverse SOGIE often end up benefiting all of society.

Lily’s Story


INSTITUTIONAL BIAS
Invisibility of LGBTQ youth and lack of knowledge about identifying, supporting, and empowering them
INSTITUTIONAL AND INDIVIDUAL BIAS
Lack of resources and expectation to support LGBTQ youth and their families
INDIVIDUAL BIAS
Mistaken belief that there are no LGBTQ youth in care

The Gender Unicorn

Graphic by:
TSER
Trans Student Educational Resources



Gender Identity

- Female/Woman/Girl
- Male/Man/Boy
- Other Gender(s)

Gender Expression/Presentation

- Feminine
- Masculine
- Other

Sex Assigned at Birth

Female | Male | Other/Intersex

Sexually Attracted To

- Women
- Men
- Other Gender(s)

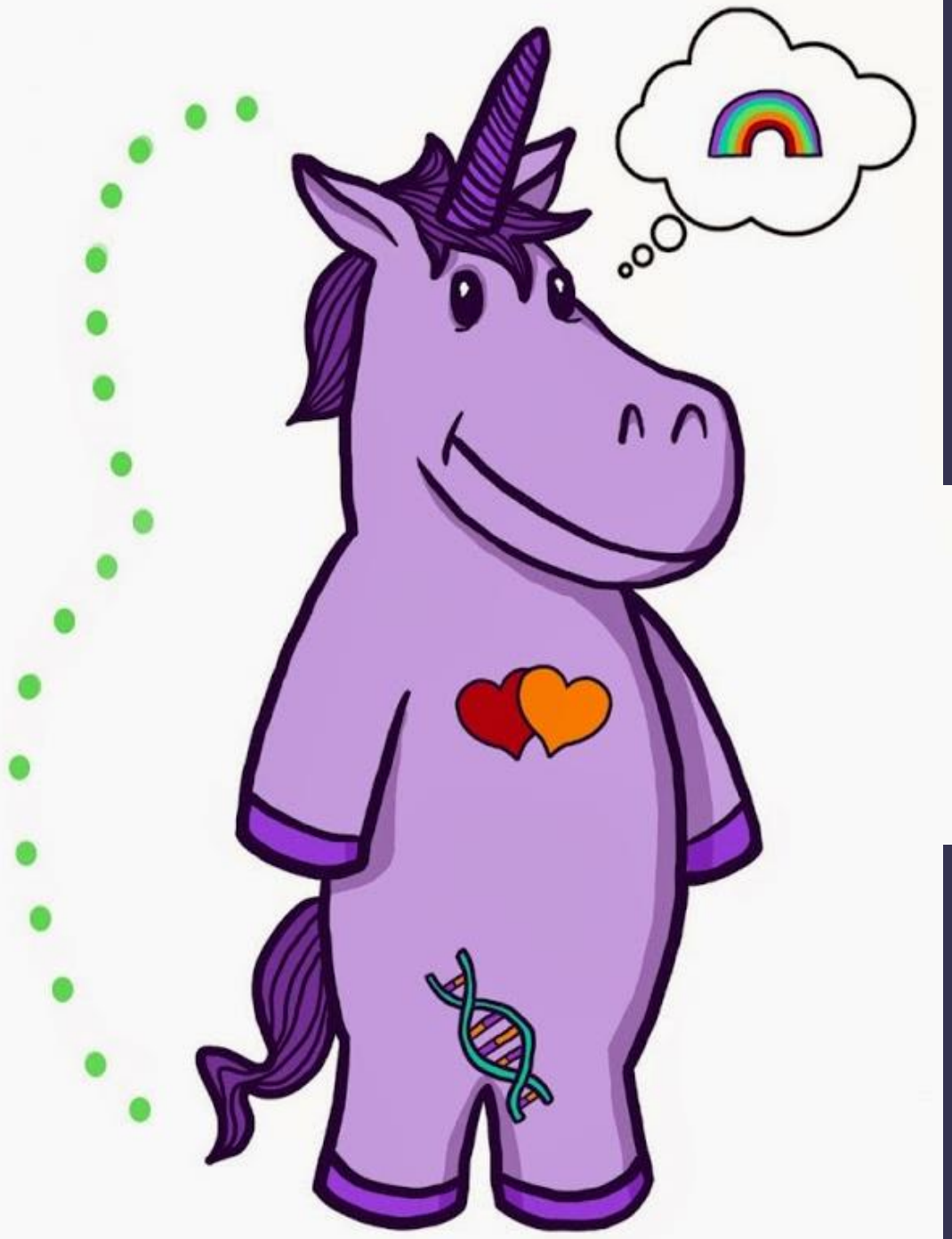
Romantically/Emotionally Attracted To

- Women
- Men
- Other Gender(s)

To learn more, go to:
www.transstudent.org/gender

Design by Landyn Pan

NWIA
Building Skills, Transforming Communities, Improving Lives



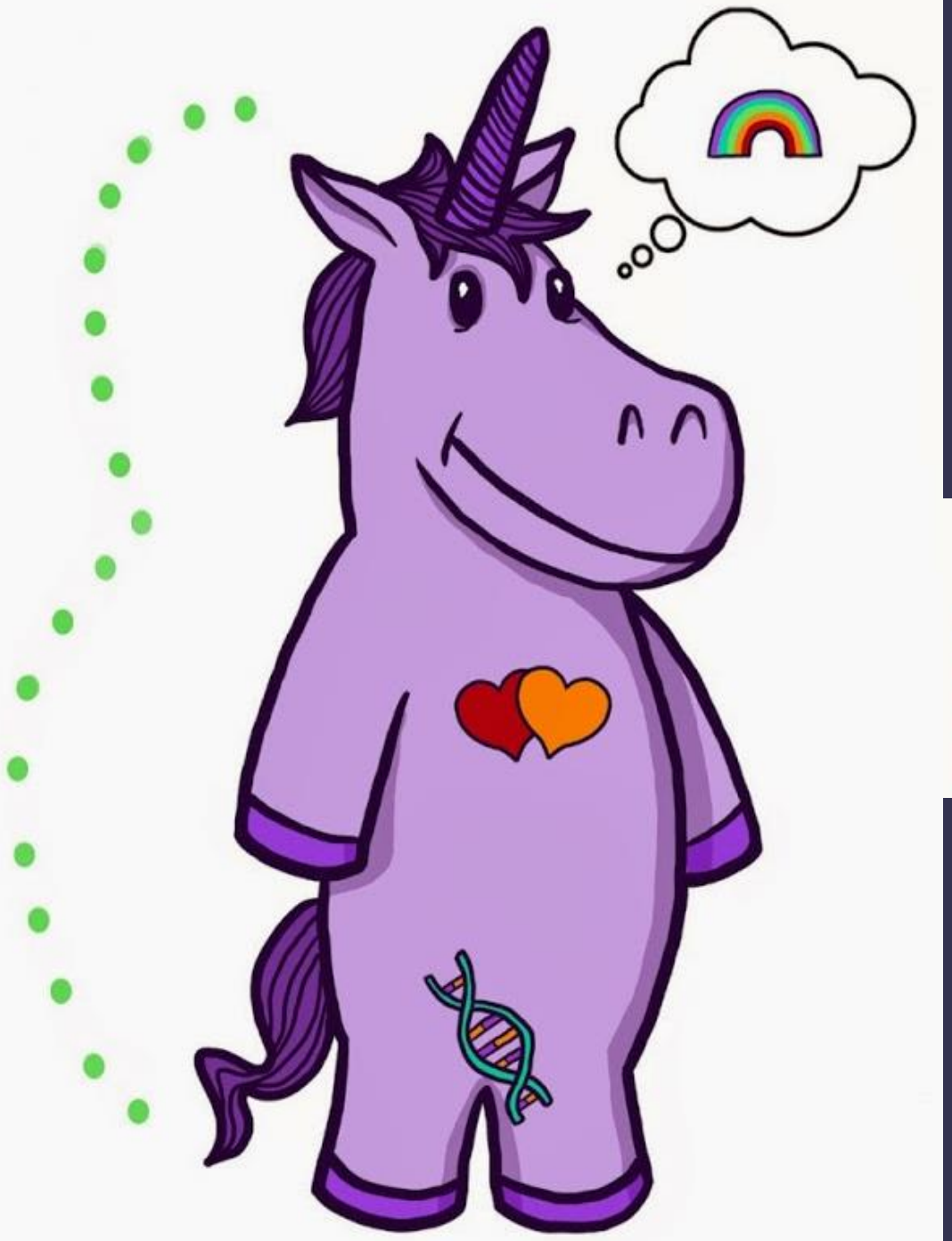
Sex Assigned at Birth

Female

Male

Other/Intersex

Intersex Identities



Gender Identity

- Female/Woman/Girl
- Male/Man/Boy
- Other Gender(s)

Cisgender

A description for a person whose gender identity and assigned sex at birth align (e.g., a person identifies as a man and was assigned male at birth by a doctor).

Culturally Responsive Terminology

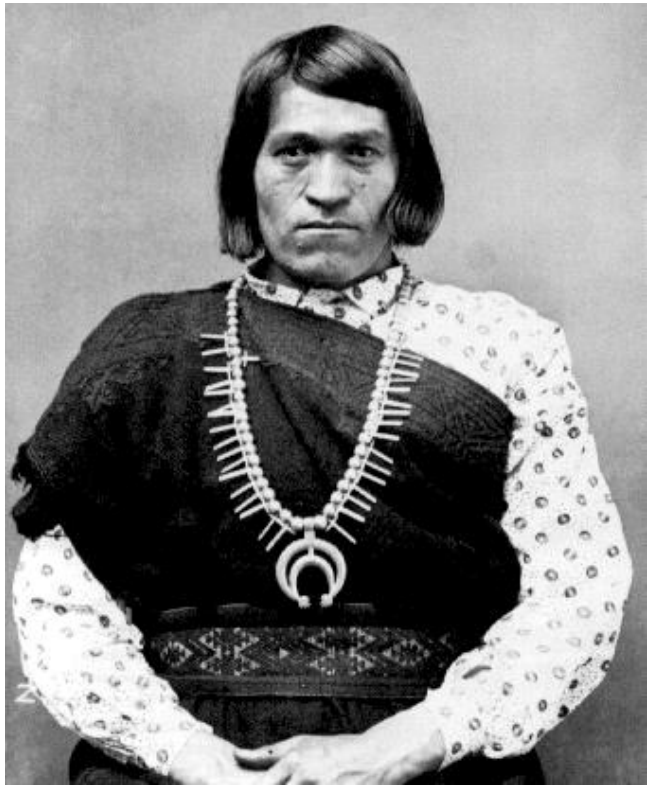
- **Transgender –**Umbrella term for all gender-nonconforming, non-binary, and [transitioning] transgender people
- **Trans man** – assigned female at birth, identifies as a man
- **Trans woman** - assigned male at birth, identifies as a woman

The Transgender Spectrum

- **Gender-diverse:** Someone whose *gender expression* varies from the expected norm; [**Gender-variant** & **gender nonconforming** used less today]
- With children, often **Gender diverse; Gender-expansive; Gender-creative**
- **Gender Queer:** *gender identity* is more fluid and/or blurs the binary; **non-binary** (the binary construct does not work at all) **Agender** (neither gender, neutral), **Bi-gender** (both genders),

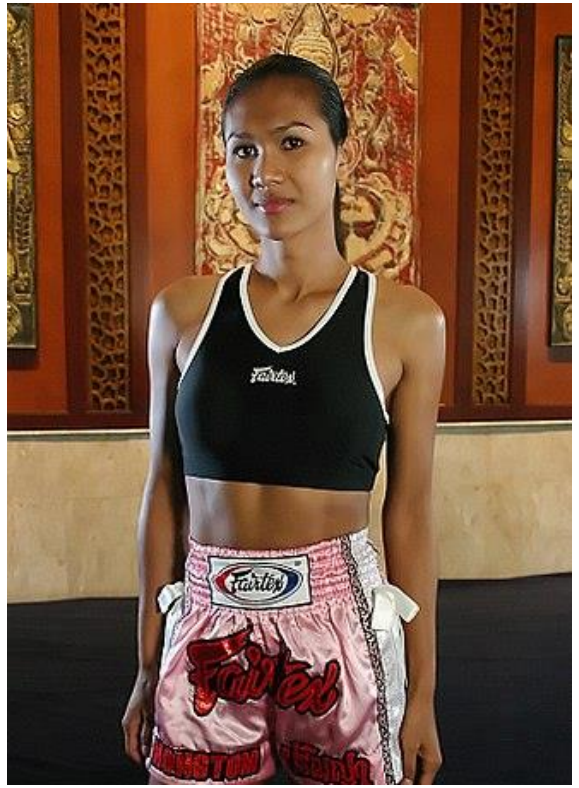
Non-Binary Identities

Trans People through Time and Culture

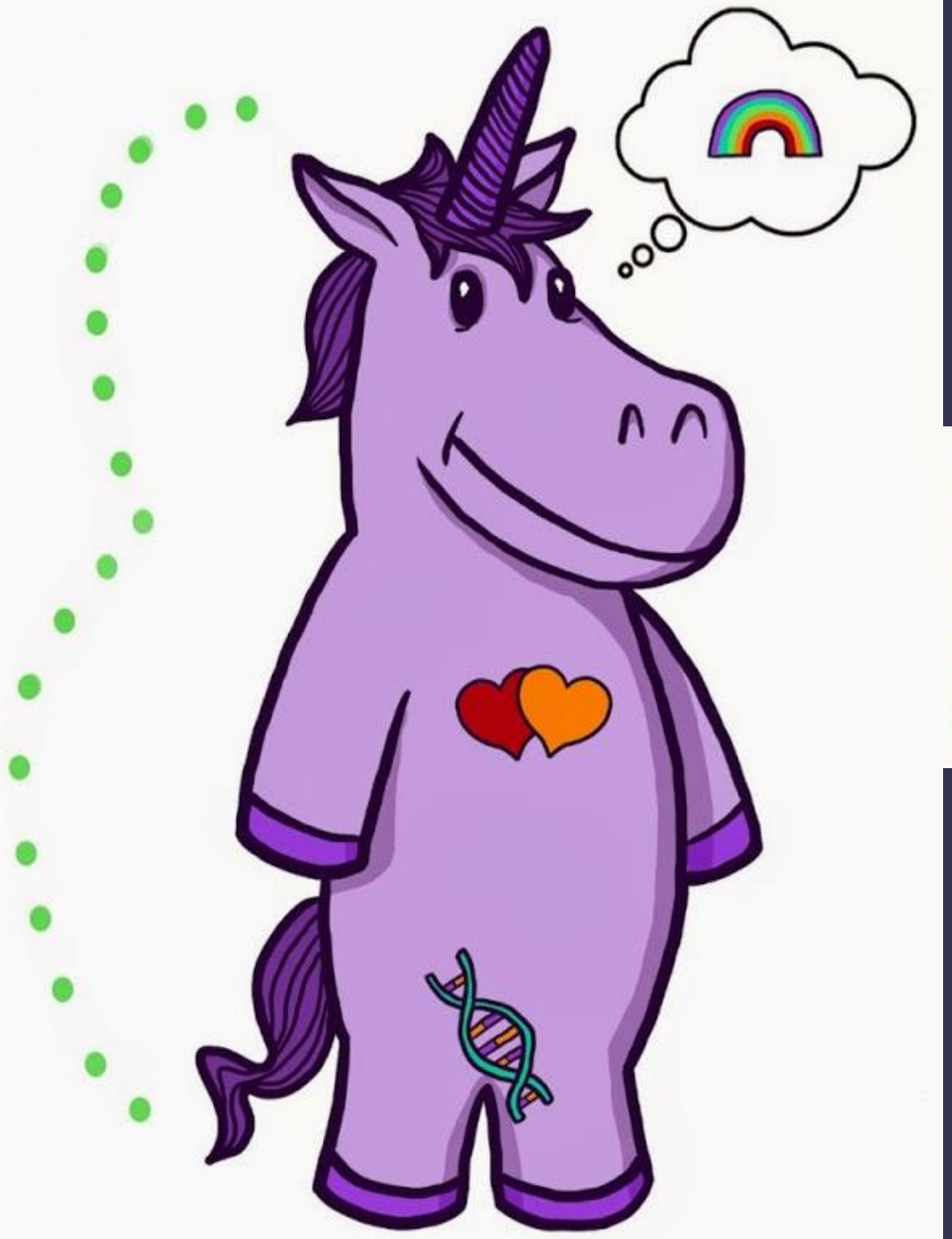


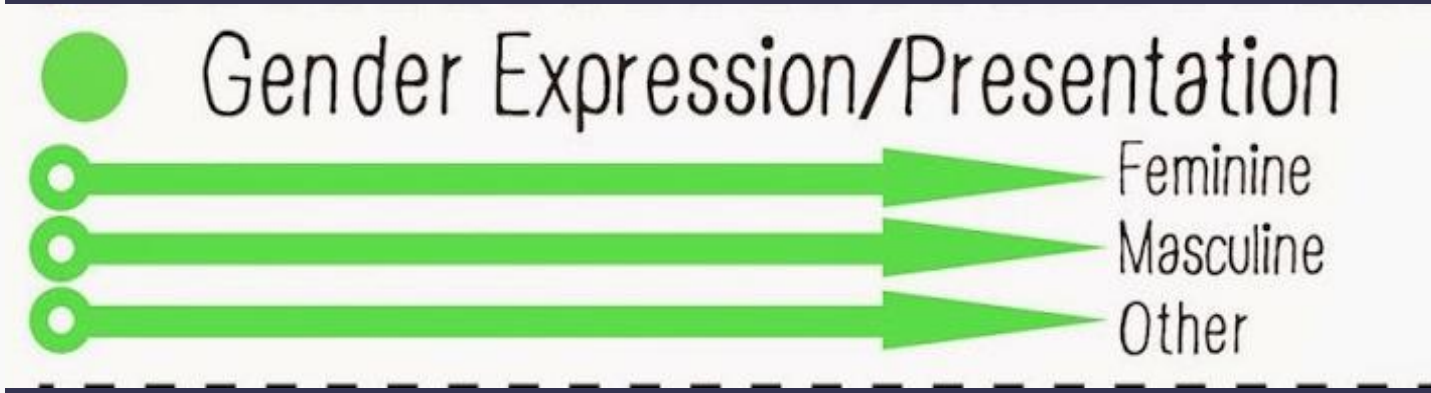
Two-Spirit Native Americans

Hijra-India



Kathoey-Thailand




Gender Expression/Presentation
Feminine
Masculine
Other

Gender

Expression is

Cultural

Gender *Expression*

Changes

Gender Policing

You should grow out your hair.

That's not very lady like!

Why haven't I ever seen you in a dress?

You should wear heels to work.

Why don't you wear makeup?

Don’t be such a girl!

Don’t be a wuss!

Be a man!

You should cut your hair!

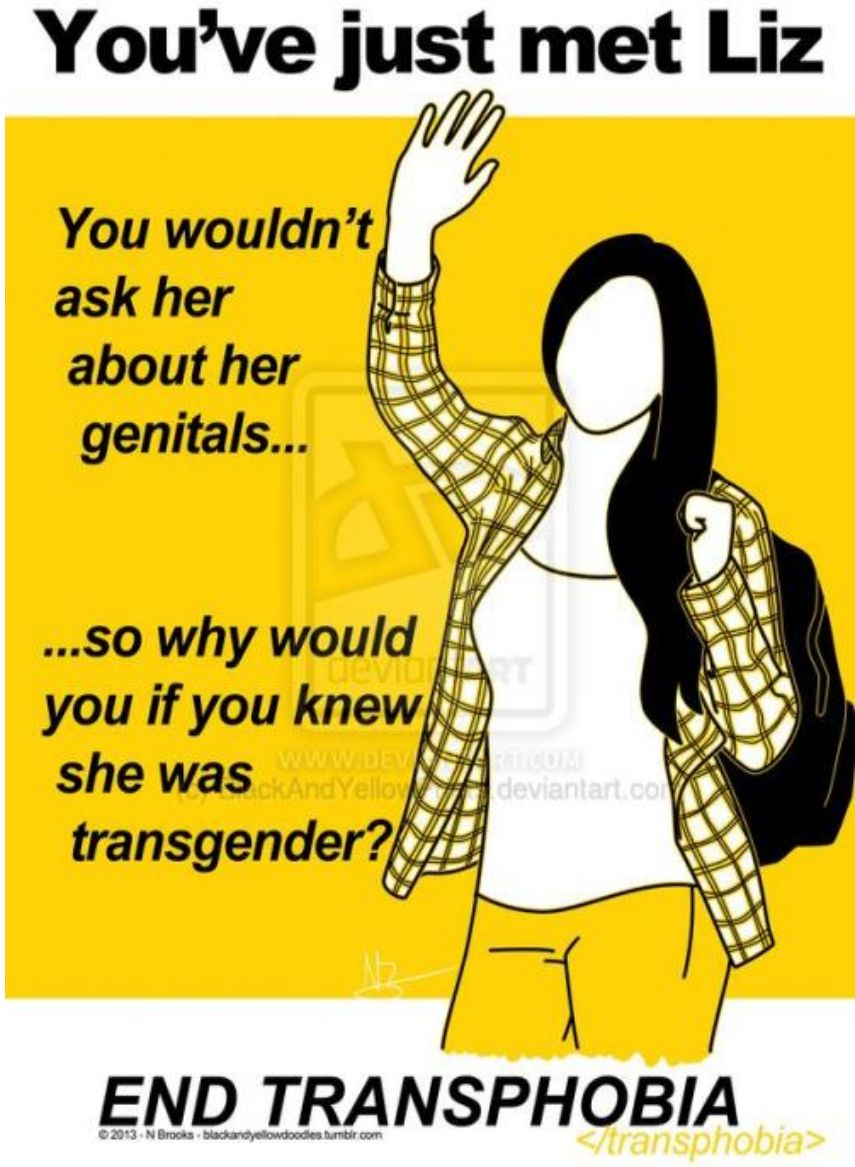
You should grow out a beard.

Language to Avoid

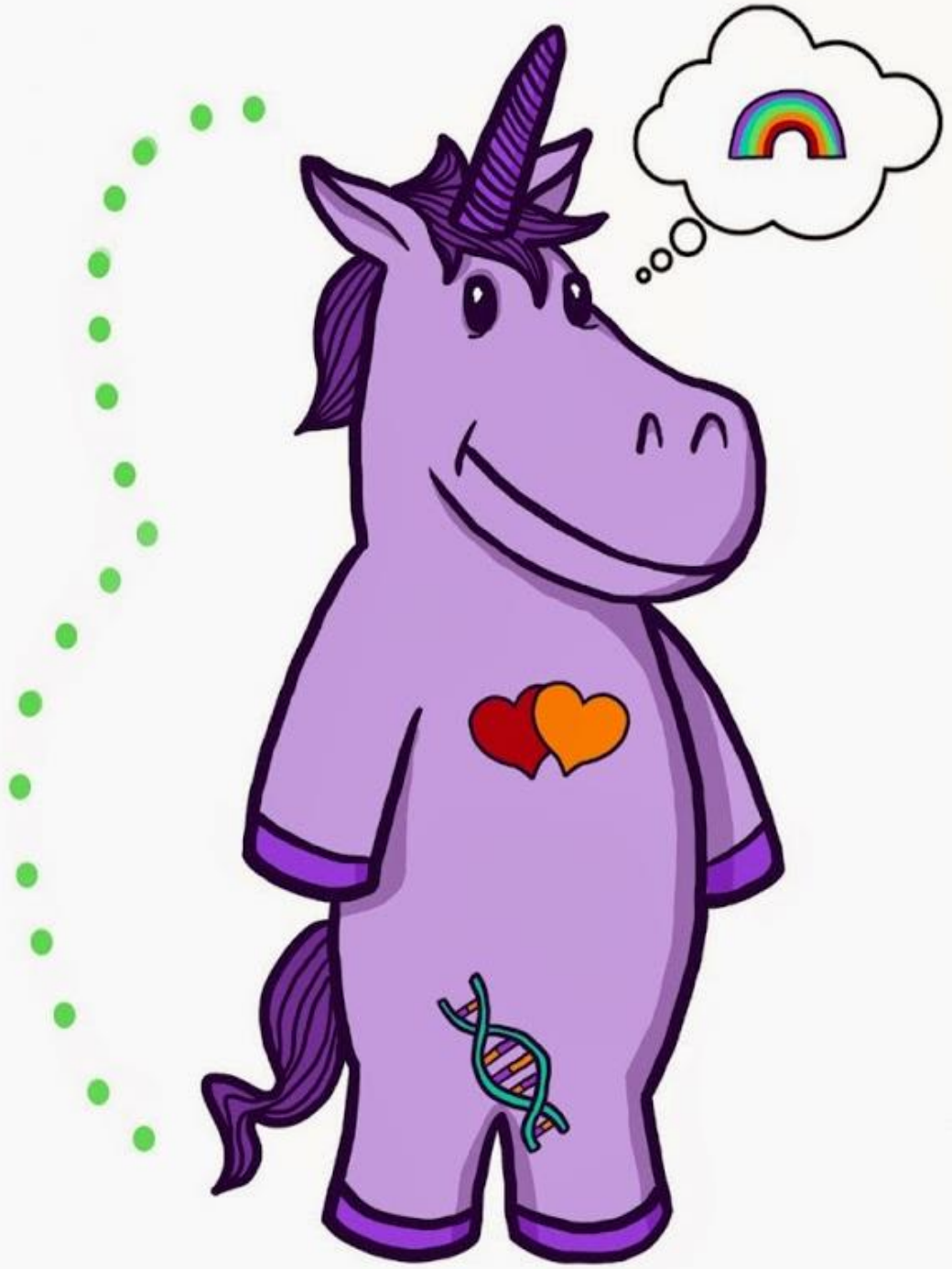
Transexual	Transvestite	MTF or FTM
A transgender or transgenders	Transgendered	Transgenderism
Tranny	He/she or it	Sex change/pre-op/post-op
Passing	Biologically male or genetically female	

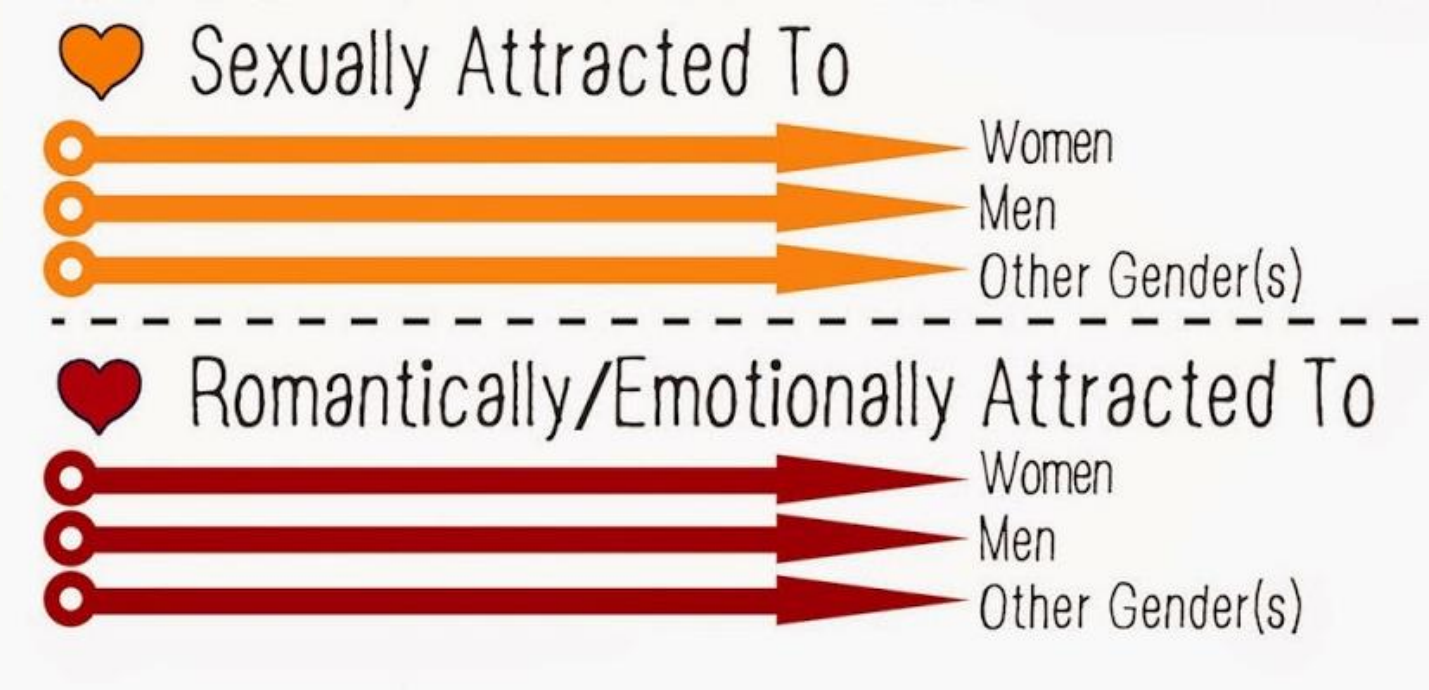
Best Practices

- Admit when you don’t know something and don’t be afraid to apologize. ***Then move on.***
- Become comfortable with fluidity. Don’t insist on binary identifications. Don’t define someone else. Everyone has the right to choose the identities they feel best suit them.
- Do not sensationalize or sexualize trans or gender diverse bodies.
- It is inappropriate to ask a trans person how they have sex or what their genitals look like.



TRANSGENDER RIGHTS




Sexually Attracted To
Women
Men
Other Gender(s)
Romantically/Emotionally Attracted To
Women
Men
Other Gender(s)

Trans-sexualities

- A trans woman/girl who likes other women/girls may identify as lesbian
- A trans woman/girl who likes men/boys may identify as straight
- A trans man/boy who likes other men/boys may identify as gay
- A trans man/boy who likes women/girls may identify as straight
- A trans person attracted to people of both/all genders/expressions may identify as bisexual, pansexual, asexual, celibate, or something else.

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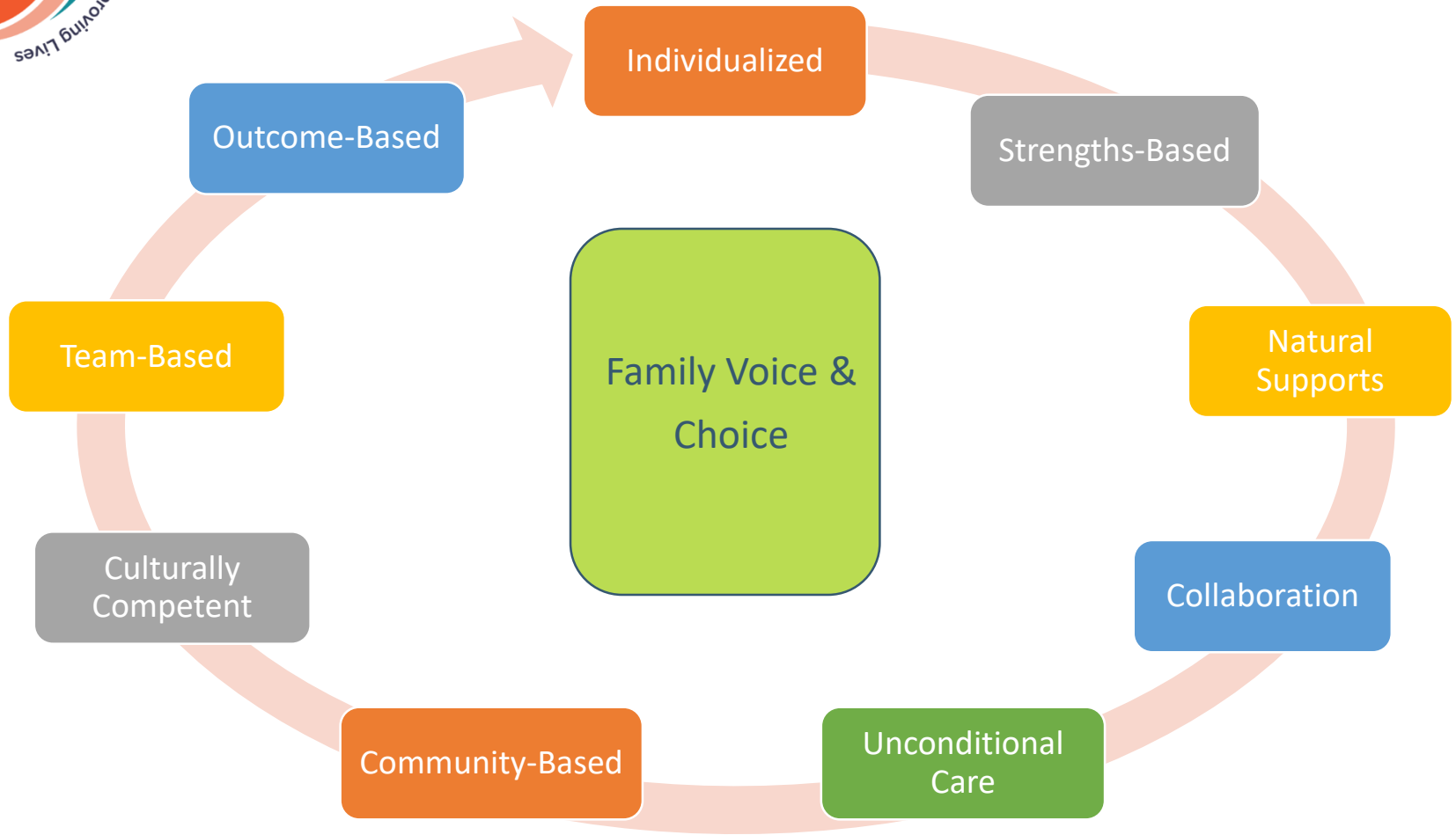
SOGIE Competent Wraparound Practice

Principles of Wraparound



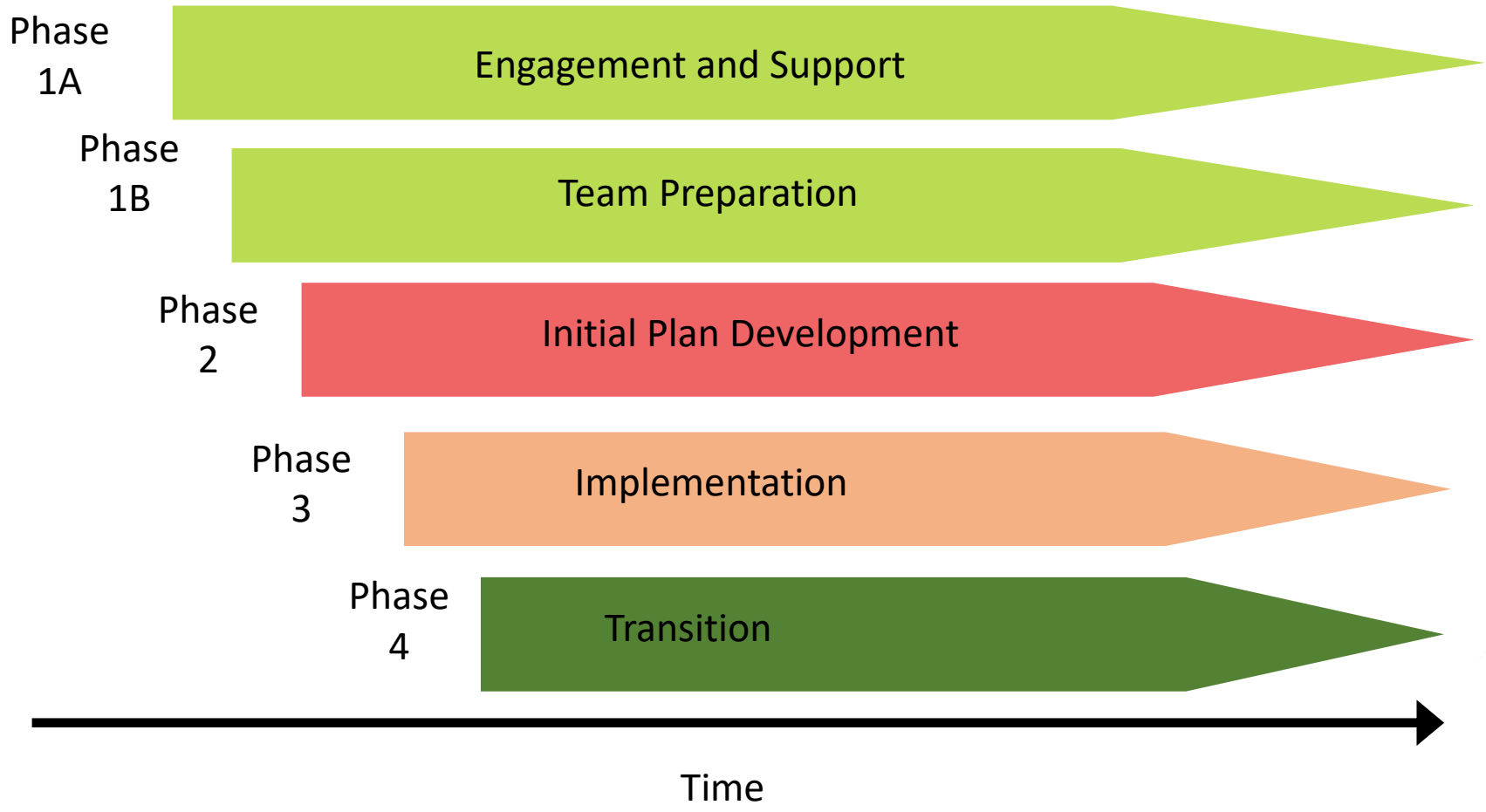
What Makes Wraparound Unique?

Based on 4 Key Elements:

1. Wraparound is *Grounded in a Strengths Perspective*
2. Wraparound is *Driven by Underlying Needs*
3. Wraparound is *Supported by an Effective Team Process*
4. Wraparound is *Determined by Families*

For wraparound to be considered high-fidelity and quality practice, all 4 elements must be present

The Phases of Wraparound



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Phase 1A: Initial Engagement and Support

Review The Day Family Vignette/ Family Story

What challenges might happen in your initial meeting with the family?

Pick your #1 Challenge and we will report out

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Creating a Welcoming Environment

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Coming Out as Having Diverse SOGIE

Time for an Activity!

Answer the following questions on your index card:

- Who are the three *people* that you spend most of your “down time” with?
- Where are three *places* that you spend most of your “down time”?
- What are three *activities* you tend to do on your “down time”?

Let’s Play a Game!

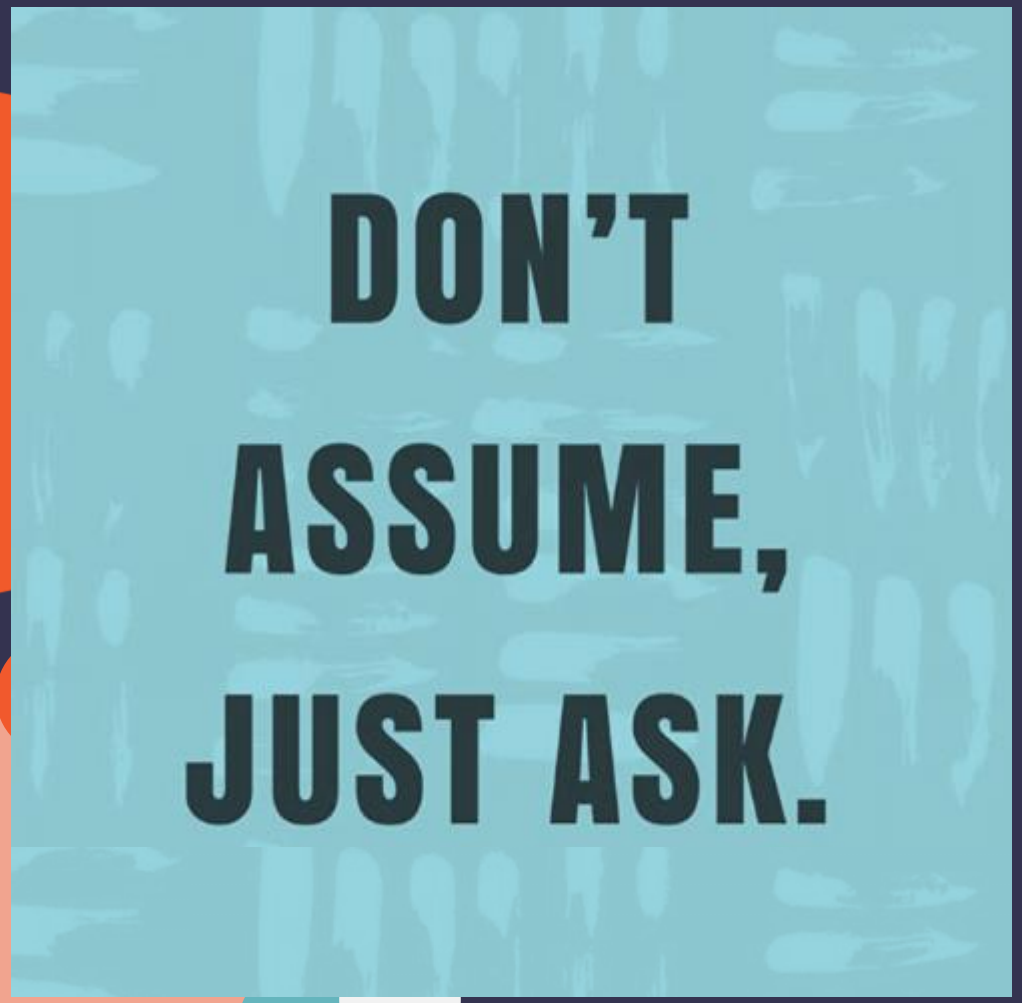
- What did you do last weekend?
- What did you do last night?
- What do you hope to do for vacation this year?
- Who are you going with?
- Are there any special events coming up in your life in the next three months?

Possible Affects of Silence on Youth with Diverse SOGIE:

- Severe social, emotional and cognitive isolation result in a higher incidence of mental health issues
- Significant substance abuse problems
- Higher incidence of homelessness, dropping out running away and sexual acting out
- Significantly higher risk of HIV/AIDS transmission
- Higher risk of multiple suicide attempts and suicide plans
- Vulnerability to involvement with the juvenile justice system

YOUTH today

Doing Your Part to End the Silence



- Use language and environmental cues to communicate safety and support
- Ask all youth about their SOGIE, or at least ask them how they would like to be addressed
- Believe them when they tell you and let them guide your support
- Always use their identified pronouns and name
- Create visual cues in your office space

Think about your referral and intake forms.

Do they need to be updated?

Making an Impact with Language & Avoid Assumptions

Avoid Terms Like

Do Use Gender Neutral Language

Always Use Youth's Identified Pronoun

Common Types of Coming Out Experiences

- Coming out to self – thinking about and realizing “who I am”
- Coming to family or community – looking for affirmation from others who are very important in their lives
- Coming out friends and peers – developmentally very important; peers tend to be more affirming, but can also be very hurtful
- Coming out at school and work –Affirming adults can help to mitigate those negative effects
- Families coming out – parents often navigate the reactions of others to their child’s expressions, including their coming out

Supporting Youth Through the Coming Out Process

- Ask them about their coming out process so far and offer support to help them come up with plans to navigate current or future disclosures .
- Assess whether their families/support systems need more education on how to support the young person's SOGIE.
- Make sure they feel safe in their homes, placements, and with their current providers.
- Offer them services and support groups that are affirming of their diverse SOGIE.
- Ensure they have access to the right medical care, sex education, hygiene items, bathrooms, etc.

Key aspects of the coming out process

- There is no single way and no “right” way to come out.
- Coming out is generally a lifelong process, all done in the individual’s own way and time.
- Coming out, or not, is a decision process shared by LGBTQ+ people across all of their differences.
- Coming out is unique to the LGBTQ+ population and accentuated by societal conflicts about sexuality and sexual expression.
- Coming out should always remain in the control of the individual.

Be with Youth through the Stages of Coming Out

Opening up to yourself – "How do I define myself?" "How am I 'supposed' to be?" Gender identity and sexual orientation are just two aspects of this much broader, complex process. Self understanding often precedes coming out to others.

Deciding how to reveal – Generally, most people want to be or show themselves for who they are, but there are real risks.

Making a plan – Decision made, plan who, how, and when to reveal oneself. "What might I face?" "Where is support for me?"

Self-revelation – Act on the plan. Hope for a positive, supportive reaction, but be prepared to be patient, face questions.

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Phase 1B: Team Preparation

What are some of the areas you are going to need to address in team preparation?

Crisis and Safety Planning

What must be addressed in the initial crisis and safety plan?

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Family Support Matters

Rejecting Behaviors Can Negatively Impact LGBTQ Youth

Rejecting Behaviors

- Blaming
- Shaming
- Excluding
- Name-Calling

Unhealthy Outcomes

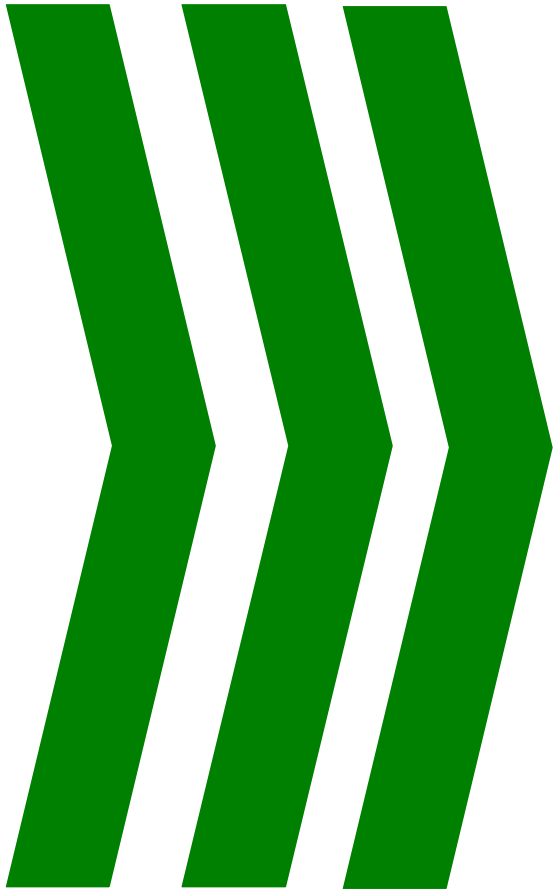
- Attempted suicide
- High levels of depression
- High risk for HIV & STIs
- Use of illegal drugs

Ryan, C. (2009). Supportive families, healthy children: Helping families with lesbian, gay, bisexual & transgender children. San Francisco, CA: Marian Wright Edelman Institute, San Francisco State University. (pp. 9)

Accepting Behaviors Can Positively Impact LGBTQ Youth

Accepting Behaviors

- Require respect
- Support
- Advocate
- Express Affection



Healthy Outcomes

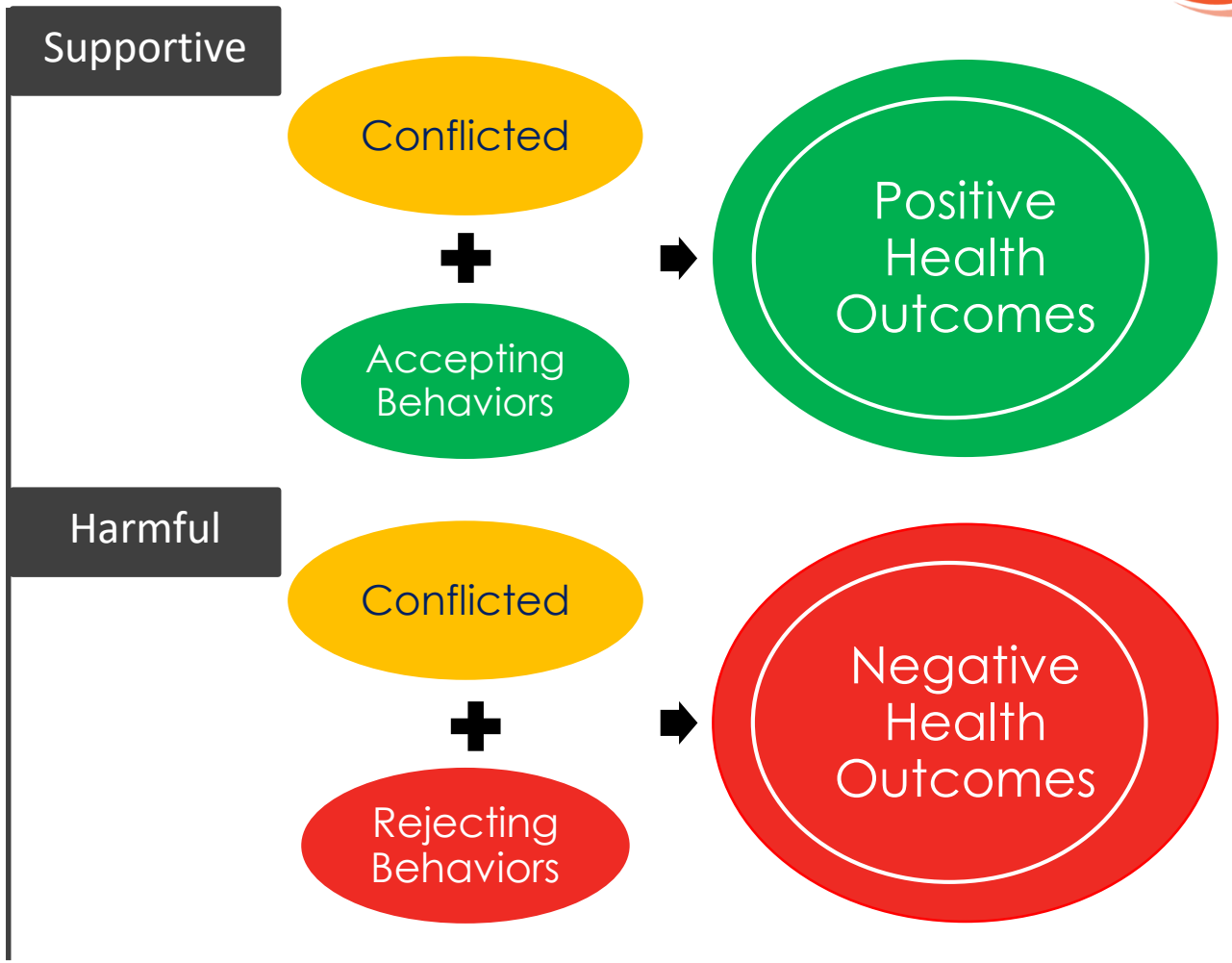
- Higher self- esteem
- Have closer relationships with family
- Believe they can be a healthy happy adult
- Better overall health

Ryan, C. (2009). Supportive families, healthy children: Helping families with lesbian, gay, bisexual & transgender children. San Francisco, CA: Marian Wright Edelman Institute, San Francisco State University. (pp. 9)

Actions Versus Beliefs

Not knowing what to do happens. People may feel:

- Conflicted or unsure about how to react
- Disappointed by youth's orientation or identity
- Concerned for the youth's safety



Family Video

Meeting the Family Where They Are

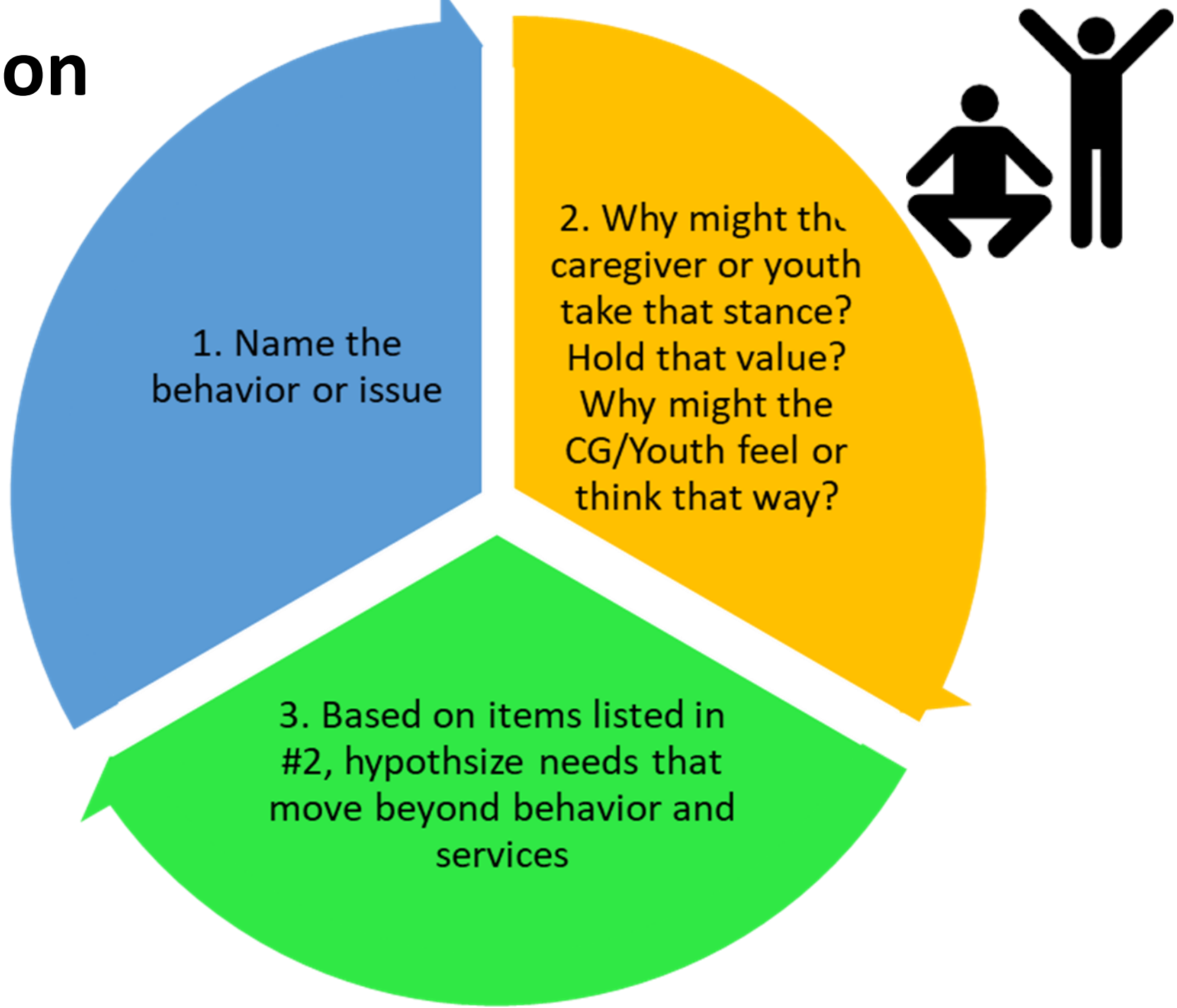
- Ask them about their experiences, their fears, their hopes for the young person
- Validate and normalize their feelings…even when it's hard
- Create "small steps" with them that align with their goals with the youth's needs (i.e., "I know you're not comfortable using they/them pronouns. For now, do you think you could just use their name with no pronouns?")
- Model appropriate use of names, pronouns, terminology, and language
- Gently correct stereotypes and misperceptions

Meeting the Family Where They Are Cont'd…

- Ask them if they would be open to learning new things about SOGIE, when they are, you are ready to start introducing more psychoeducation.
- Work with the team to provide affirming resources
- Connect them to appropriate services and support groups when they are ready
- A PPSP can help them by modeling was advocacy might look like and asking them to practice with them.
- Always check in with the youth about how things are going during this process.

Needs Identification

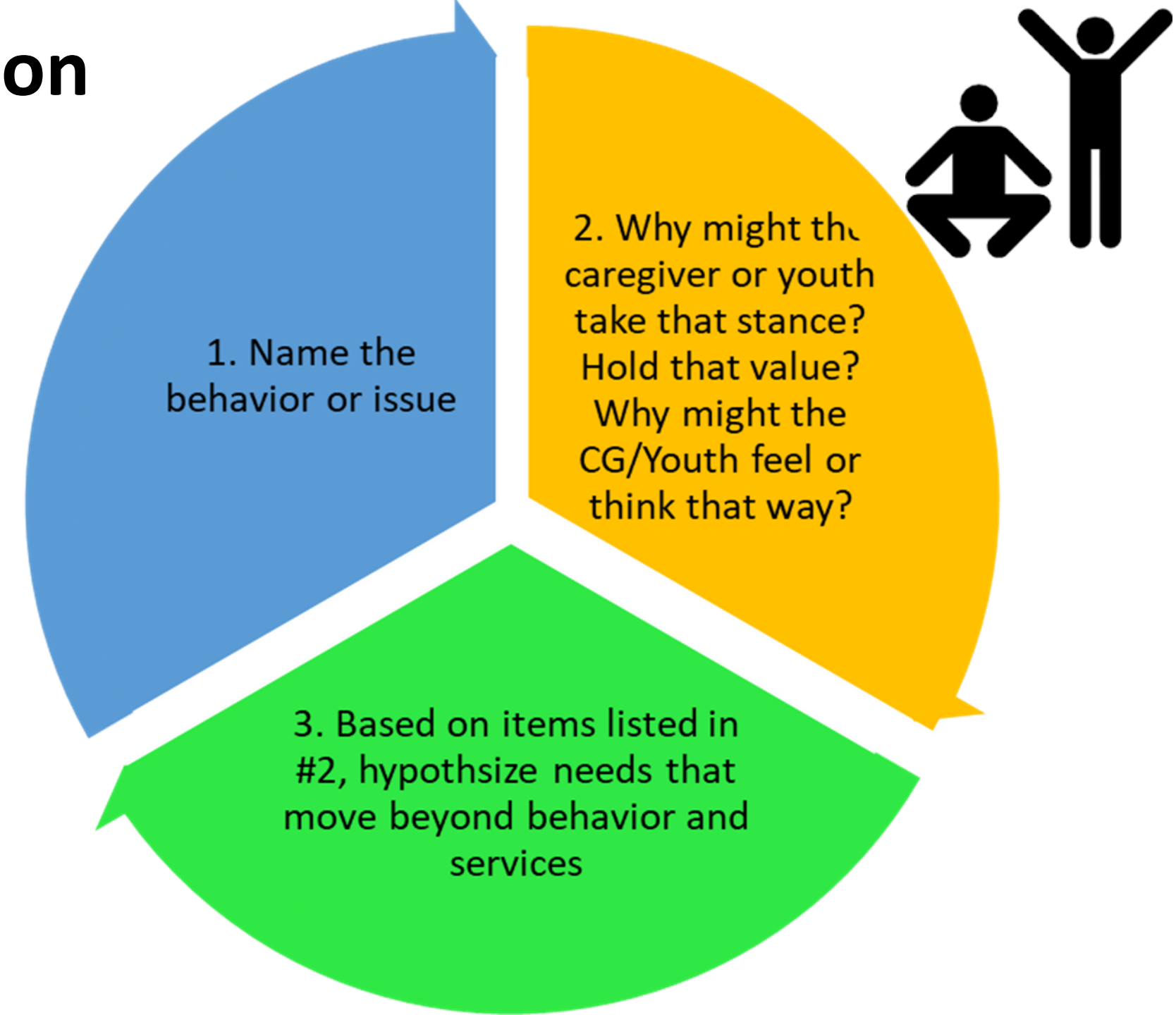
Jackie repeatedly brings up conversion programs, refuses to use she/her pronouns for Lisa, will not let her dress in feminine clothes.



Needs Identification

Lisa has attempted suicide, is isolating and her grades are dropping

By yourself…
List what could be an underlying need for Lisa?



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Phase 2: Initial Plan Development

You are in a team meeting and Jackie continues to suggest conversion therapy as an option.
What do you do?

Family Vision

Team Mission

Strengths review

Crisis plan review

Needs review

What are considerations for services and supports?

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Phase 3: Implementation

Jackie continues to suggest conversion therapy as an option after the first team meeting.

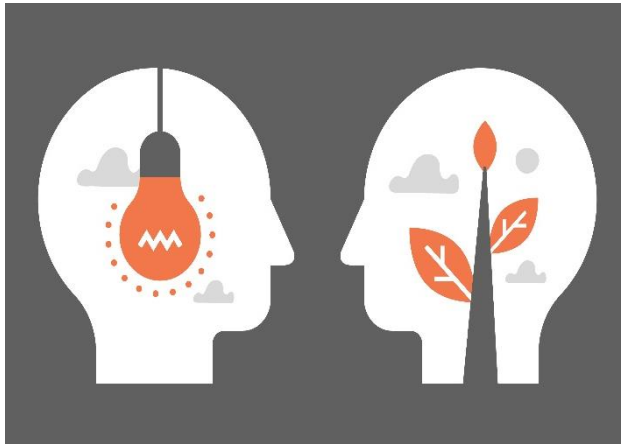
What do you do?

Acknowledge

Align

Reframe

Understand



CONFIDENTIALITY POLICY

Activity

Instructions:

1. On one side, number the pieces of paper 1-4
2. Think of 4 people that you love, who are very important and special in your life. Write the name of each person on the other side of each paper.
3. Think about the love, influence, and support each individual brings to your life.

Support Outcomes

1. Place to stay in an emergency, but no emotional support.
2. Place to go for holidays, but you can't talk about your partner or your identities.
3. Can stay in the home as long as you wear the clothes they tell you to wear.
4. Unconditional love and support.

Building the Child and Family Team

Building support for families is always important. It's particularly important for youth with diverse SOGIE and their families

Building the Child and Family Team

- Are new team members supportive and affirming?
- Does work have to be done between meetings to help build understanding?

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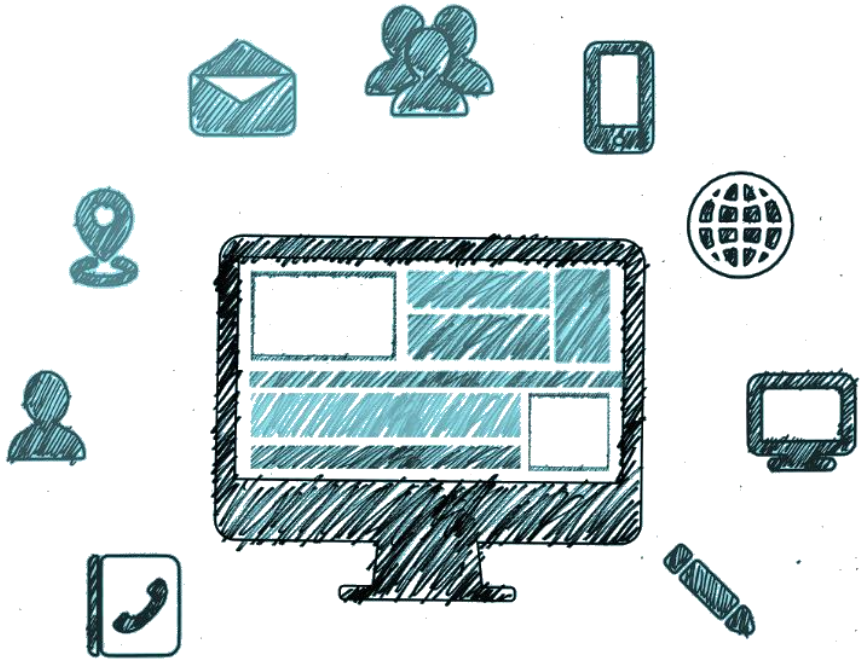
Phase 4: Transition

Questions

Resource

- https://youtu.be/fyXRwX3aeOU

Contact Us



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Website

National Center LGBTQ+ Work:
https://theinstitute.umaryland.edu/our-work/national/lgbtq/

National Quality Improvement Center for LGBTQ2S Youth in Foster Care: **http://www.qiclgbtq2s.org/**

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