eQuality Project

Protocol for Safe & Affirming Care

Improving the Lives of LGBTQ+ Youth in Washington State's Child Welfare and Juvenile Justice Systems

1st Edition / January 2017

Nicholas Oakley, JD

Table of Contents

Executive Summary

As a guide for professionals, volunteers, and caregivers in Washington State's child welfare and juvenile justice systems, the Protocol for Safe & Affirming Care provides the framework for providing safer and more affirming care to lesbian, gay, bisexual, transgender, queer, and questioning youth (LGBTQ+) in these systems. In doing so, it lays a foundation for improving the lives of not only LGBTQ+ youth, but all youth in these systems.

Foundation

The Foundation of the Protocol includes its purpose, vision, and principles.

Purpose: The purpose of the Protocol is to improve the safety, health, and well-being of *all* youth in Washington's child welfare and juvenile justice systems. Professionals, volunteers, and caregivers will *not* be able to improve the safety, health, and well-being of all youth unless and until they address the specific needs of LGBTQ+ youth. LGBTQ+ youth are overrepresented in these systems, experience unique forms of trauma, and have specific needs related to their sexual orientation and gender identity. Therefore, ensuring appropriate care for *all* youth necessitates a focused effort on behalf of LGBTQ+ youth.

Vision: Professionals, contracted providers, caregivers, and volunteers in Washington's child welfare and juvenile justice systems will support each and every youth in the development of the youth's sexual orientation and gender identity and recognize that such support is critical to the youth's safety, health, and well-being.

Principles:

1. LGBTQ+ youth exist.

2. Meeting the specific needs of LGBTQ+ youth is a matter of health, safety, and well-being.

3. The health, safety, and well-being of youth is the priority.

4. Youth have a right to self-determination.

5. LGBTQ+ youth are individuals.

6. LGBTQ+ youth are entitled to equitable services and resources.

7. Understanding LGBTQ+ youth is a core competency for every professional, volunteer, and caregiver.

8. Youth have expertise in their own lives.

9. Making assumptions is harmful.

10. Collaboration is the key to success.

10 Components of Safe & Affirming Care

Based on the Foundation, the 10 Components of Safe & Affirming Care each contain model policies that further the purpose of the Protocol, as well as tools to assist professionals, volunteers, and caregivers in carrying out those policies.

The 10 Components are:

1. **Protecting the Rights of All Youth:** To ensure basic, fundamental protections for all youth.

2. **Training Professionals, Volunteers, and Caregivers:** To ensure:

   - All professionals, volunteers, and caregivers have the foundational knowledge necessary to ensure the safety, health, and well-being of youth as it relates to their sexual orientation, gender identity, and gender expression; and
   - Each agency, court, and organization has at least one professional who has a high level of knowledge with regard to sexual orientation, gender identity, and gender expression and can support other professionals, volunteers, and caregivers with these issues when they arise.

3. **Creating Safe & Affirming Spaces for All:** To increase the comfort and sense of safety among youth and ensure all youth know—through verbal and non-verbal indicators—that they can talk about their sexual orientation and gender identity.

4. **Talking About Sexual Orientation and Gender Identity with All Youth:** To increase the comfort and sense of safety among youth and ensure all youth know—through verbal and non-verbal indicators—that they can talk about their sexual orientation and gender identity.

5. **Collecting Data on Sexual Orientation, Gender Identity, and Gender Expression (SOGIE):** To obtain information on the sexual orientation, gender identity, and gender expression of *all* youth so as to better understand how sexual orientation, gender identity, and gender expression impacts entry into systems, experiences in systems, and outcomes after exiting systems. The purpose is also to understand how the relationship between youth's SOGIE and other demographics, such as race and ethnicity, impacts youth's experiences. Ultimately, this information will better enable professionals, volunteers, and caregivers to: prevent more youth from entering systems; improve youth's experience in systems; and ensure better outcomes upon exiting systems.

6. **Ensuring Safe & Affirming Services for LGBTQ+ Youth:** To ensure that system professionals provide services that meet the specific needs of LGBTQ+ youth and ensure contracted or partner providers do the same.

7. **Ensuring Safe & Affirming Housing for LGBTQ+ Youth:** To ensure professionals, volunteers, and caregivers meet the specific housing needs of LGBTQ+ youth.

8. **Ensuring Safe & Affirming Healthcare for LGBTQ+ Youth:** To ensure professionals, volunteers, and caregivers meet the specific healthcare needs of LGBTQ+ youth, especially transgender youth.

9. **Responding to Families of LGBTQ+ Youth:** To assess families' attitudes and beliefs towards LGBTQ+ people and the impact of any negative attitudes or beliefs, and to provide families with accurate, free, and accessible information and reconciliation services if warranted.

10. **Establishing Expectations for Professionals, Volunteers, & Caregivers:** To ensure professionals, volunteers, and caregivers provide safe and affirming care to LGBTQ+ youth and that they use data to continue to improve their systems for LGBTQ+ and all youth, with the ultimate goal of improving the health, safety, and well-being of all youth.

About CCYJ and eQuality

The Center for Children & Youth Justice (CCYJ was founded in 2006 with a singular mission: work solely to reform the foster care and youth justice systems to improve the lives of generations of children and youth. CCYJ identifies gaps and cracks, develops innovative approaches to mending problems, and then ensures that policymakers embed those reforms into practices and procedures. The results of CCYJ's work are put into state law, adopted as standing protocols by courts and schools, and developed into new treatments and interventions for at-risk, abused or neglected children and their families. For more information, please visit www.ccyj.org.

CCYJ launched eQuality in 2013 as a multi-phased project aimed at creating lasting reform within the child welfare and juvenile justice systems for LGBTQ+ youth. In its first phase, eQuality conducted the first comprehensive research effort on the experiences of Washington's lesbian, gay, bisexual, transgender, queer, and questioning youth in the child welfare and juvenile justice systems and published report, *Listening to Their Voices: Enhancing Successful Outcomes for LGBTQ Youth in Washington State's Child Welfare and Juvenile Justice Systems.* This report served as the impetus for Phase II of eQuality, which includes the development of the Protocol. For more information, please visit: http://ccyj.org/initiatives/equality/.

Acknowledgments

First and foremost, we—the eQuality Project staff—are immensely grateful to the LGBTQ+ system-involved youth and LGBTQ+ young adults who have system experience who courageously shared their personal experiences to the eQuality Project.

We would also like to recognize the organizations and individuals who made the development of the Protocol for Safe & Affirming Care possible through their generous financial support, including the Raikes Foundation, the Pride Foundation, QLaw Association of Washington, Seattle Goodwill, and numerous individual donors.

We are thankful to the eQuality Project Advisory Committee for dedicating their time and expertise throughout the development of the Protocol. They are Jamie Belieu; Judge Elizabeth Berns, Detective Kim Bogucki; Marsha Botzer; Judge James Doerty, ret.; Lea Ennis; Alison Gerttula; Anthony Gipe; Natalie Green; Carrie Hennan; Kris Hermanns; Mark Lee; Judge Anne Levinson, ret.; Linda Lillevik; Ann McGettigan; Barbara "b.g." Nabors-Glass; Shane Nybo; Caleb Oken-Berg (ex officio); Senator Jamie Pedersen; Andy Sachs; Kat Scheibner; and Fred Swanson.

We are grateful to the dedicated professionals, volunteers, caregivers, and youth who participated in developing the Protocol at one of the five summits the eQuality Project held across Washington and/or by reviewing initial drafts and providing invaluable input.

Erica	Allison	Triple Point, Children's Home Society of Washington
Erik	Applebee	Alliance for Child Welfare Excellence
Sherri	Aune	Whitman County Juvenile Court
Janis	Avery	Treehouse
Kestrel	Bailey	Northwest Youth Services
Jim	Bamberger	Office of Civil Legal Aid
Darryl	Banks	Benton Franklin Juvenile Justice Center
Dr. Susan	Barkan	Partners for Our Children
Judge Jeffrey	Bassett	Kitsap County Superior Court
Ronni	Batchelor	Lutheran Community Services NW
Dan	Baxter	King County Juvenile Court
Jami	Belieu	Children's Administration
Michelle	Betts	Children's Administration
Kristen	Bishopp	Bishopp Law Office
Annie	Blackledge	The Mockingbird Society
Minnie	Bliesner	The Mockingbird Society
Jaime	Bliss	Auburn Youth Resources
Kim	Bogucki	Seattle Police Department
Shannon	Boniface	Children's Administration
Cindy	Bricker	Administrative Office of the Courts
Launi	Burdge	Children's Administration

Bonnie	Bush	Spokane County Juvenile Court
Sevan	Bussell	Odyssey Youth Movement
Berta Nul	Cambell	
Michael	Campbell	Children's Administration
Mike	Canfield	Foster Parents Association of Washington State
Barbara	Carr	Jefferson County Juvenile Court
Grifynn	Clay	City of Spokane
Jessica	Colito	University of Washington
Judge Scott	Collier	Judicial Advisory Committee
Victoria	Colliver	Whatcom County Juvenile Court
Currey	Cook	Lambda Legal
Leonard	Costello (ret.)	Kitsap County Superior Court
Amanda	Crawmer	Lutheran Community Services Northwest
Julia	Crouch	Seattle Children's Hospital
Sheila	Davidson	Benton Franklin Counties Superior Court
Peggy	Devoy	Children's Administration
Randy	Dorn	Office of Superintendent of Public Instruction
Judge Michael	Downes	Superior Court Judges' Association
T.J.	Driver	Spokane County Juvenile Court
Mackenzie	Dunham	Spokane County Juvenile Court
Mabel	Elson	Lutheran Community Services Northwest
Lea	Ennis	King County Juvenile Court
Daniel	Estes	Alliance for Child Welfare Excellence
Amy	Fager	Excelsior Youth Center
Melissa	Fieldling	Children's Administration
Marilyn	Finsen	Snohomish County Juvenile Court
Kim	Foley	Aspen Victim Advocacy Services
Lovella	Fullton	The Mockingbird Society
Christine	Garcia	Children's Administration
Jodee	Garretson	Crime Victim Service Center
Barb	Geiger	Children's Administration
Jennifer	Godfrey	Children's Administration
Natalie	Green	Children's Administration
Kristina	Greene	Amara
Lisa	Greene	Rural Resources Victim Services
Dori	Guterson	Families Like Ours
Judge Helen	Halpert	Judicial Advisory Committee
Heather	Hamasaki	Children's Administration
Dana	Hanson	Thurston County Juvenile Court

Ted	Hanson	Equal Rights Washington
Garrett	Harrison	Court Appointed Special Advocate Association, Cowlitz
Sabian	Hart	The Mockingbird Society
Amber	Hasler	Pierce County Juvenile Court
Erin	Hatheway	The Mockingbird Society
Delton	Hauck	Children's Administration
Kristy	Healing	Stillaguamish Tribe of Indians
Brett	Helling	Children's Administration
Carrie	Hennen	All Home
JJ	Herbert	SE Family Youth and System Partner Round Tables
Kris	Hermanns	Pride Foundation
MaShelle	Hess	Children's Administration
Irena	Hess	Court Appointed Special Advocate Association, Stevens
April	Hinkle-Johnson	Northwest Youth Services
Rick	Holcomb	Eastern Washington University
Paula	Holter-Mehren	Tri-County Juvenile Court
Hermenia	Jackson	Children's Administration
Avanthi	Jayasuriya	YouthCare
Monica	Jenkins	Children's Administration
Rep. Laurie	Jinkins	Washington State House of Representatives
Mike	Johnson	Skagit County Juvenile Court
Dr. David	Johnson	Navos
Pam	Jones	Department of Adult and Juvenile Detention
Rep. Ruth	Kagi	Washington State House of Representatives
Christine	Kakalecik	Cocoon House
Wyatt	Kanger	Yakima Neighborhood health
Jeannie	Kee	Foster Youth Alumni
Professor Lisa	Kelly	University of Washington School of Law Child and Youth Advocacy Clinic
Lenea	Keltner	Court Appointed Special Advocate Association, Whitman
Cole	Ketcherside	Office of Homeless Youth
Lori	Kinnear	Spokane City Council
Seth	Kirby	Oasis
Josh	Koutcecky	Children's Administration
Mathew	Krempel	Lutheran Community Services Northwest
Todd	Kukzyk	Families Like Ours
Nicole	LaBelle	Children's Administration
Commissioner Jennie	Laird	King County Juvenile Court
Shelby	Langer	University of Washington
Tamsen	Latimer	Benton Franklin Juvenile Justice Center

Carla	Lee	King County Prosecuting Attorney's Office
Anne	Lee	TeamChild
Courtney	Lehman	Odyssey Youth Movement
Wendy	Lenz	Court Appointed Special Advocate Association, Clark
Jess	Lewis	Office of the Superintendent of Public Instruction
Peggy	Lewis	Children's Administration
Mary	Li	Office of the Attorney General
Lydia	Lippold-Gelb	Washington State House of Representatives
Annette	Lukinbill	Pierce County Attorney and Court Appointed Special Advocate Association
Holly	Luna	Children's Administration
Debbie	Lyn	Children's Administration
Val	MacIntyre	Court Appointed Special Advocate Association, Ferry
Jim	Madsen	Mason County Juvenile Court
Jill	Malat	Children's Representation Project, Office of Civil Legal Aid
Theresa	Malley	Children's Administration
John	March	Children's Administration
Keylee	Marineau	Community Youth Services
Tim	Markham	Benton Franklin Juvenile Justice Center
Robyn	Martin	Thurston County Office of Assigned Counsel
Yolanda	Marzest	Alliance for Child Welfare Excellence
George	Mattson (ret.)	King County Superior Court, Council Chair
Theresa	Mauey	Children's Administration
Lisa	McAllister	Juvenile Rehabilitation Administration
Rep. Joan	McBride	Washington State House of Representatives
Christopher	McBride	University of Washington School of Law Child and Youth Advocacy Clinic
Ana Maria	McCleary	Snohomish County Juvenile Court
Ann	McGettigan	Seattle Counseling Services
Chris	McLaughlin	Children's Administration
Morgan	Mentzer	Office of Civil Legal Aid
Cameron	Mitchell	Benton Franklin Juvenile Justice Center
Commissioner Royce	Moe (ret.)	Judicial Advisory Committee
Joanne	Moore	Office of Public Defense
Eamon	Morgan	Children's Administration
Tonia	Morrison	Birth Parent Advocate
John	Morse	Amara
Kurt	Munnich	Jefferson County Juvenile Service
Ryan	Murrey	Washington State CASA
Marcia	Navajas	King County Juvenile Detention
Dan	Newell	Office of Superintendent of Public Instruction

Shane	Nybo	Snohomish County Superior Court
Dr. Joel	Odimba	Children's Administration
Judge Sean	O'Donnell	Superior Court Judges Association
Caleb	Oken-Berg	QLaw Association
Brandy	Otto	Children's Administration
Marianne	Ozmun-Wells	Department of Social and Health Services
Sen. Jamie	Pedersen	Washington State Senate
Dorene	Perez	Children's Administration
Shannon	Perez-Darby	Northwest Network of Bi, Trans, Lesbian and Gay Survivors of Abuse
Tori	Peterson	Spokane County Juvenile Court
Geri	Phillips	Children's Administration
Victor	Place	NAVOS
William	Powell	BakerHostetler
Leila	Pozegic	The Mockingbird Society
Johnathan	Preshaw	University of Washington School of Law Child and Youth Advocacy Clinic
Kris	Randall	Children's Administration
Rhea	Reynolds	Snohomish County Superior Court
Esther	Rich	Renton High School
Cheryl	Rich	Children's Administration
Veronica	Risken-Oakes	Central Valley School District
Carmen	Rivera	Echo Glen Children's Center
Marilee	Roberts	Children's Administration
John	Robertson	Volunteers of America of Eastern Washington & Northern Idaho
Ciara	Rodriguez	Children's Administration
Heather	Rodriguez	Triple Point, Childrens Home Society of Washington
Hannah	Roman	King County Department of Public Defense
Robin	Romanovich	Legal Counsel for Youth and Children
Diane	Ross	Court Appointed Special Advocate Association
Sam	Ryan	Court Appointed Special Advocate Association, Cowlitz
Andy	Sachs	eQuality Advisory Committee
Judge Wesley	Saint Clair	King County Superior Court
Cedric	Samples	Benton Franklin Juvenile Justice Center
Joy	Schaad	Pierce County Juvenile Court
Jacqueline	Schafer	Washington State Attorney General's Office
Dan	Seidel	Juvenile Rehabilitation
Judge Susan	Serko	Pierce County Superior Court
Marty	Shaw	Cocoon House
Erin	Shea McCann	The Mockingbird Society
Karla	Short	Lutheran Community Services Northwest

Julia	Simon	Cocoon House
Erin	Smith	YouthCare
Tony	Smith	Families Like Ours
Chalia	Stallings-Ala'ilima	Washington State Attorney General's Office
Vickie	Stock	Children's Administration
Elana	Stone	Treehouse
Jennifer	Strus	Children's Administration
Marcus	Stubblefield	King County Executive's Office
Denise	Sullivan	Spokane County Juvenile
Fred	Swanson	Gay City, Foster Parent
Annie	Taylor	Children's Administration
Jessi	Taylor	YWCA
Anita	Teeter	Children's Administration
Mark	Terrell	Cup of Cool Water
Maria	Thew	Court Appointed Special Advocate Association
Sheryl	Thierry	Court Appointed Special Advocate Association, Clark
Lisa	Tremblay	Skagit County Juvenile Court
Jermaine	Turner	The Mockingbird Society
Yecerica	Valdivia	Aspen Victim Advocacy Services
Marsha	Valenzuela	Partners with Families and Children
Judge Kitty	van Doorninck	Washington State Superior Court Judge's Association
Susan	Vaughn	YouthCare
Alisha	Vilela	Children's Administration
Sean	Walsh	All Home
Clarie	Walter	Educational Service District 112
Carrie	Wayno	Washington State Attorney General's Office
Dave	Wheeler	Benton Franklin Juvenile Justice Center
Montrai	Williams	eQuality Advisory Committee
Sheila	Wilson	Families Like Ours
Jessica	Yost	Rural Resources Victim Services
Melody	Youker	Martin Hall Juvenile Facility

Introduction

The *Protocol for Safe & Affirming Care* is a guide for the professionals, volunteers, and caregivers in Washington State's child welfare and juvenile justice systems. It builds the framework for providing safer and more affirming care to lesbian, gay, bisexual, transgender, queer, and questioning youth (LGBTQ+) in these systems and, in doing so, lays the foundation for improving the lives of not only LGBTQ+ youth, but all youth in these systems.

The Foundation of the Protocol are its purpose, vision, and principles. These are followed by 10 Components of Safe & Affirming Care. Under each component is the purpose for its inclusion in the Protocol, a restatement of the principles that are particularly relevant to that component, model policies, and tools that professionals, volunteers, and caregivers can use in furtherance of those policies.

The Protocol is intended to be a "living document"—one that is periodically updated to reflect the growing body of knowledge surrounding LGBTQ+ youth. The eQuality Project intends to revise the Protocol following a pilot implementation of the Protocol in 2017. The pilot and its evaluation will undoubtedly provide key lessons and insights that will strengthen the Protocol. This revision will be completed in 2018. The eQuality Project may also make other revisions as needed.

Background

The Protocol is the culmination of three years of work at the Center for Children & Youth Justice (CCYJ) and decades of work on the part of LGBTQ advocacy organizations, juvenile courts, and child welfare agencies across the United States.

In 2013, CCYJ's eQuality Project began the first comprehensive research effort on the experiences of Washington State's LGBTQ+ youth in the child welfare and juvenile justice systems. This effort culminated in the report, *Listening to Their Voices: Enhancing Successful Outcomes for LGBTQ Youth in Washington State's Child Welfare and Juvenile Justice Systems*.

> ## Beyond the Child Welfare and Juvenile Justice Systems
>
> The Center for Children & Youth Justice's mission is to reform the child welfare and juvenile justice systems. Since its inception over a decade ago, CCYJ has worked in these arenas, developing expertise and a statewide network. As such, CCYJ's eQuality Project developed the Protocol for Safe & Affirming Care primarily for the professionals, volunteers, caregivers, and youth in these two systems.
>
> However, the Protocol can be adapted for all systems caring for youth—from education to behavioral health to homeless youth services. While each system is unique, many of the principles and model policies contained in the Protocol are universally applicable and others easily modifiable. The eQuality Project encourages leaders from other systems to use the Protocol as a starting point for ensuring safer and more affirming care for the youth they serve.

The findings of *Listening to Their Voices*, which are summarized below, made it clear that meaningful reform would require practice and policy change at the court, agency, and organizational level in addition to any efforts at the legislative level. In other words, a protocol setting forth model practices and policies would be necessary if the eQuality Project and its partners across Washington were to meaningfully improve the lives of LGBTQ+ system-involved youth.

Recognizing that LGBTQ+ advocacy organizations, juvenile courts, and child welfare agencies across the country have been working on model policies and practices for a number of years, the eQuality Project did not seek to "reinvent the wheel." Rather, its goal was to use existing resources as a basis off which Washington could build. The result is a document that encompasses national work and literature but centers on voices from Washington.

Listening to Their Voices: Key Findings

The following is a summary of the key findings from *Listening to Their Voices*. CCYJ envisions users of the Protocol will read the report in its entirety as it provides an in depth foundation for the principles and policies set forth. *Listening to Their Voices* can be accessed at http://ccyj.org/wp-content/uploads/2015/04/LTTV_Full.pdf.

These findings identify key barriers that LGBTQ+[1] youth face within Washington's child welfare and juvenile justice systems. Some issues are similar to those faced by all system-involved youth. However, these findings illustrate the unique circumstances that LGBTQ+ youth encounter throughout their system-experience.

System Entry: Some LGBTQ+ youth enter the systems for reasons not related to their LGBTQ+ identity, while others become system-involved for reasons directly associated with their identity such as family rejection, abuse, and hostile school environments. Involvement in both the child welfare and juvenile justice systems, or "dual system-involvement," is common for LGBTQ+ youth.

Mistreatment: While in either system, many LGBTQ+ youth experience significant mistreatment including discrimination, abuse, harassment, and additional trauma from caretakers, system professionals, and peers.

Placement Disruption: Unsuccessful placements are common for LGBTQ+ youth in foster care, often because of the mistreatment they experience and the lack of LGBTQ-accepting placement options.

Disclosure: LGBTQ+ youth do not feel safe disclosing their sexual orientation and gender identity to system professionals and caretakers because they fear further marginalization. Yet, when system professionals are not aware of a youth's LGBTQ identity, they cannot effectively identify and address their needs.

Culturally Competent Services: LGBTQ+ youth do not have consistent access to culturally competent services and some have been subjected to disrespectful and harmful services such as conversion therapy.

Rights: LGBTQ+ youth are not provided adequate information about their rights within the systems nor are they given adequate instruction on how to report grievances. When youth do make reports, the responses are not always timely or helpful.

Outcomes: Homelessness is a significant risk for LGBTQ+ youth while system-involved and after exiting either system.

---

[1] Note that *Listening to Their Voices* uses the acronym "LGBTQ" rather than "LGBTQ+." The "+" was added to the summary here to reflect eQuality's evolving approach to using more inclusive terms. For further discussion, see the section entitled *Understanding LGBTQ+* in the Protocol.

Training: Most system professionals have not been offered LGBTQ+ cultural competency training in their workplace and such training has not been required for their positions.

Policies & Best Practices: While some policies and best practices currently exist within both systems regarding treatment for LGBTQ+ youth, gaps and inconsistencies demand attention. Furthermore, a substantial number of professionals in both systems lack awareness of existing policies and practices regarding LGBTQ+ youth.

Methodology

The eQuality Project developed the Protocol in a six stage process:

1. **Identifying the needs of Washington's LGBTQ+ youth in the child welfare and juvenile justice systems**. As noted above, this stage encompassed the research and drafting of eQuality's *Listening to Their Voices* report.

2. **Conducting a national review of model policies and practices for serving LGBTQ+ youth.** eQuality Project staff outreached to key stakeholders in several states and completed a literature review of model policies and practices.

3. **Surveying Washington's stakeholders on their perspectives on the model policies and practices identified.** eQuality used an electronic survey to determine whether Washington's stakeholders were already using the model policies and practices identified from the national review, believed these models were/would be beneficial to LGBTQ+ system-involved youth, and perceived potential or actual barriers to these models.

4. **Convening four regional mini-summits across the state to engage diverse groups of stakeholders in the design of the Protocol.** eQuality convened stakeholders from both systems, as well as advocates and community based service providers, in a series of four regional mini-summits for an in-depth discussion on the purpose, principles, participants, practices, and structures that should be included in the Protocol.

5. **Submitting a draft of the Protocol for review and feedback to stakeholders.** Using the models identified through the national review and insight gained from the mini-summits, eQuality developed a draft protocol. It then disseminated this draft to all of the stakeholders who participated in the previous stages, as well as other interested stakeholders, for their review and comment. Additionally, it held a statewide summit of high level leaders and a series of youth summits to review the Protocol.

6. **Finalizing the Protocol.** Incorporating the feedback from stage five, eQuality finalized the Protocol for Safe & Affirming Care.

A detailed description of this process, including results of the survey and summaries of each of the mini-summits, will be provided in the companion document to the Protocol, *Developing the Protocol for Safe & Affirming Care*, to be finalized in 2017.

Terminology

For the sake of brevity and uniformity, the Protocol uses the following terms and acronyms in a manner that may differ from and/or have a more specific meaning than in their common usage:

Caregivers: Individuals who fill a parental or guardian role for system-involved youth, such as foster parents and relative caregivers.

LGBTQ+: LGBTQ refers to gay, lesbian, bisexual, transgender, queer, and/or questioning. The Protocol adds the "+" to include youth who, like LGBTQ youth, face marginalization, discrimination, and/or mistreatment on the basis of their sexual orientation or gender identity. This includes, but is not limited to, youth who identify as asexual, gender-nonconforming, two-spirit, and intersex. The "+" is also recognition that terminology is constantly evolving and LGBTQ inadequately represents the population of youth whose experiences give rise to the need for the Protocol.

Professionals: Individuals employed by the child welfare or juvenile justice system, such as caseworkers and probation and detention counselors. This also includes legal professionals who work with children and families in the child welfare and juvenile justice systems, such as attorneys and judicial officers.

SOGIE: Sexual orientation, gender identity, and gender expression.

Leaders: Professionals who hold leadership positions in the child welfare or juvenile justice systems, such as regional administrators and juvenile court administrators.

System-involved: Youth who are involved in the child welfare and/or juvenile justice systems.

Volunteers: Individuals that have a voluntary role in the child welfare or juvenile justice system but do not fill a parental or guardian role for system-involved youth, such as court appointed special advocates.

Pronoun Usage

The Protocol uses the pronoun "their" as a gender-neutral singular pronoun. While the use of "his or her" remains, technically, the grammatically correct option, the pronouns "his" and "her" do not reflect the identities of a significant number of system-involved youth for whom the Protocol was developed. The authors of the Protocol opted to use more inclusive language, reflecting a recent trend toward the use and acceptance of "they" as a singular pronoun.[2]

---

[2] See, e.g., Walsh, B. (2005). The Post drops the 'mike' — and the hyphen in 'e-mail'. *The Washington Post*. Retrieved from https://www.washingtonpost.com/opinions/the-post-drops-the-mike--and-the-hyphen-in-e-mail/2015/12/04/ccd6e33a-98fa-11e5-8917-653b65c809eb_story.html?tid=a_inl&utm_term=.6a1ecc28ea0a; Nunberg, Geoff. (2016). Everyone Uses Singular 'They,' Whether They Realize It or Not. *Fresh Air*. NPR. Retrieved from http://www.npr.org/2016/01/13/462906419/everyone-uses-singular-they-whether-they-realize-it-or-not; Green, Robert. L. (2014). Johnson: Singular they. *The Economist.* Retrieved from http://www.economist.com/blogs/prospero/2014/02/pronouns

Understanding LGBTQ+

Understanding what it means to be a person who is lesbian, gay, bisexual, transgender, queer, or questioning takes more than a list of definitions. Terminology is constantly evolving and what was once an inappropriate or offensive term may now be an affirming one. "Queer" was widely used as an insult and is now commonly used as an affirming, umbrella term for the LGBTQ+ community. Conversely, terms that were once used to describe the LGBTQ+ community are now insufficient. The term "gay" in gay-straight alliance or "gay and lesbian" in the National Gay and Lesbian Task Force may have been intended to represent the LGBTQ+ community, but are no longer considered inclusive of everyone in that community.
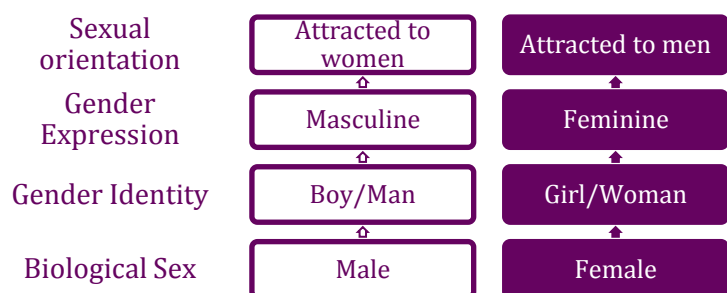
While in-depth training and, most importantly, developing relationships with LGBTQ+ individuals is the best way to understand what it means to be LGBTQ+, the following is a brief introduction to one way of understanding the topic.

Sexual Orientation, Gender Identity, and Gender Expression (SOGIE)[3]

Understanding LGBTQ+ youth (and adults) requires an understanding of the relationship between sexual orientation, gender identity, and gender expression and how those categories relate to biological sex.

Category	Questions Answered	Relates to
Biological Sex	What did the doctor mark on my birth certificate?	Anatomy, chromosomes, and hormones.
Gender Identity	How do I feel on the inside?	Identity and sense of self.
Gender Expression	How do I present myself to others?	Communication of gender, including dress and appearance.
Sexual orientation	Who am I attracted to?	Romantic and erotic response.

For many, there is a presumption that the SOGIE categories relate in only two ways—a pathway to those whose biological sex is male and another for those whose sex is female. If someone is assigned male at birth, the presumption follows that that person grows up to identify as a man, expresses himself in a masculine manner, and is attracted to women. Conversely, if someone is assigned female, that person grows up to identify as a woman, expresses herself in a feminine manner, and is attracted to men.
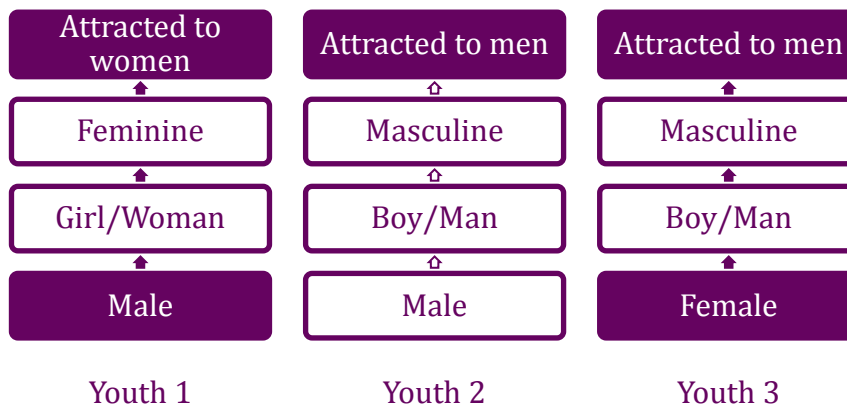
Sexual orientation	Attracted to women	Attracted to men
Gender Expression	Masculine	Feminine
Gender Identity	Boy/Man	Girl/Woman
Biological Sex	Male	Female

---

[3] Adapted from *Coming out As You: The Spectrum*. (2016). Retrieved from The Trevor Project:
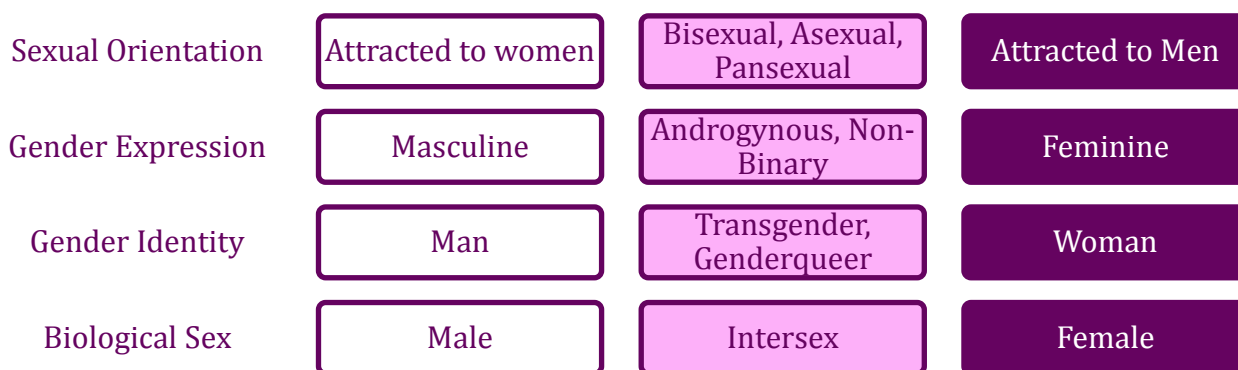http://www.thetrevorproject.org/pages/spectrum

The SOGIE Relationship for LGBTQ+ Youth

The relationship between SOGIE and biological sex differs for LGBTQ+ youth and adults. Their identities do not align in either one of the two ways described above. In some instances, LGBTQ+ youth still identify as either male or female, man or woman, masculine or feminine, and attracted to women or men. However, these identities correspond to each other in different ways than in the SOGIE binary. The corresponding graphic provides a visual representation of just three youth for whom this description fits. There are many other identities not highlighted here.

Youth 1 is a transgender woman because she was assigned male at birth but identifies as a woman. Her sexual orientation is lesbian because she is a woman who is attracted to women. Youth 2 is a cisgender man who is gay because he was assigned male at birth, identifies as a man, and is attracted to men. Youth 3 is a transgender man who is gay because he was assigned female at birth, identifies as a man, and is attracted to men.

Youth 1	Youth 2	Youth 3
Attracted to women	Attracted to men	Attracted to men
↑	↑	↑
Feminine	Masculine	Masculine
↑	↑	↑
Girl/Woman	Boy/Man	Boy/Man
↑	↑	↑
Male	Male	Female

For other LGBTQ+ youth, the two opposing sides of the SOGIE Binary do not reflect their identity. Their identities fall along a spectrum, in between (or outside) these two opposing sides. In fact, some youth identify as "non-binary." The following graphic provides just a few examples of these identities. It is important to understand that within each SOGIE category, there is a spectrum of identities.

Sexual Orientation	Attracted to women	Bisexual, Asexual, Pansexual	Attracted to Men
Gender Expression	Masculine	Androgynous, Non-Binary	Feminine
Gender Identity	Man	Transgender, Genderqueer	Woman
Biological Sex	Male	Intersex	Female

LGBTQ+ youth experience harm in profound and lasting ways when adults and other youth assume that LGBTQ+ youth's identities fit within the SOGIE Binary and that their biological sex, gender identity, gender expression, and sexual orientation align in a certain way; dismiss LGBTQ+ youth because LGBTQ+ youth's identities fall outside the binary or their SOGIE align differently; and/or convey to LGBTQ+ youth that LGBTQ+ youth are wrong or sick because LGBTQ+ youth's identities fall outside the binary or their SOGIE align differently.

This shared harm is one of the reasons the Protocol considers the diverse set of youth that make up LGBTQ+ youth as one group. LGBTQ+ youth, despite their differences, have a shared experience that child welfare and juvenile justice systems must address.

Common LGBTQ+ Terms[4]

Asexual: Describes an individual who does not experience sexual attraction, but may experience emotional or romantic attraction.

Biological sex:[5] Describes an individual's biological status and is typically categorized as male, female, or intersex. There are a number of indicators of biological sex, including sex chromosomes, gonads, internal reproductive organs, and external genitalia. *Biological sex assigned at birth* is the sex marker placed on an individual's birth certificate at birth.

Bisexual: Describes an individual who is emotionally, romantically, and sexually attracted to both men and women.

Cisgender: Describes an individual whose gender identity and gender expression matches the gender typically associated with their biological sex. For example, a cisgender man is a male who identifies as a man and is perceived as a man.

Gay: Describes a man who is primarily emotionally, romantically, and sexually attracted to other men. This term has also been used as an umbrella term to describe the LGBTQ+ community.

Gender Expression: Describes an individual's outward communication of gender through behavior or appearance. An individual's gender expression may or may not correspond with their biological sex assigned at birth.

Gender Identity: Describes an individual's inner sense of being a man, woman, or another gender. Gender identity may or may not correspond with an individual's biological sex assigned at birth.

Gender Non-Conforming: Describes an individual whose gender expression does not correspond with their biological sex assigned at birth.

Heterosexual: Describes an individual who is only or primarily emotionally, romantically, and sexually attracted to the opposite sex. The term "straight" is often used to describe heterosexual individuals.

---

[4] Unless otherwise noted, all definitions are adapted from The Center for Children & Youth Justice. (2015). Listening to Their Voices: Enhancing Successful Outcomes for LGBTQ Youth in Washington State's Child Welfare and Juvenile Justice Systems. Seattle, WA: Ganzorn, S., Curtis, M., & and Kues. D. Retrieved from http://ccyj.org/wp-content/uploads/2015/04/LTTV_Full.pdf

[5] Adapted from American Psychological Association. (2011). Definition of Terms: Sex, Gender, Gender Identity, Sexual Orientation. Retrieved from https://www.apa.org/pi/lgbt/resources/sexuality-definitions.pdf

Intersex: Describes individuals whose combination of sex chromosomes, gonads, internal reproductive organs, and external genitalia are not "typical"—according to the medical community—of "female" or "male."

Lesbian: Describes a woman who is primarily emotionally, romantically, and sexually attracted to other women.

LGBTQ: A general term used to describe individuals who identify as lesbian, gay, bisexual, transgender, and/or queer/questioning. In some cases, I, for intersex, A, for asexual, 2, for two-spirit, and/or +, to reflect a broader sense of inclusivity, is added.

Pansexual: Describes an individual who is emotionally, romantically, and sexually attracted to individuals of all gender identities and expressions including those who do not fit into the standard gender binary (man and woman).

Pronouns or Preferred Pronouns: A term used to describe gender pronouns that an individual wants others to use when referring to that individual, such as: he, him, his; she, her, hers; or they, them, theirs. Others use less common pronouns.[6] Pronouns may or may not match the individual's birth assigned gender and may be gender neutral or words not commonly used as pronouns.

Queer: An umbrella term describing individuals who identify as gay, lesbian, bisexual, transgender, gender neutral, questioning, and many other identities. While this term has been used in a derogatory way in the past, many individuals and groups are reclaiming it as an all-encompassing way to describe those who do not identify as heterosexual and/or cisgender.

Questioning: Describes an individual (often an adolescent) who has questions about his or her sexual orientation and/or gender identity. Some questioning individuals will identify as LGBTQ; some might not.

Two-Spirit: A term sometimes used to describe indigenous North American individuals who have a gender identity and/or gender expression that does not traditionally align with their sex assigned at birth or have a culturally distinct gender, apart from man or woman.

Sexual Orientation: Describes an individual's emotional, romantic, and sexual attraction to the same or opposite gender. An individual's sexual orientation is different from an individual's gender identity.

Transgender: An umbrella term that describes individuals whose gender identity differs from the biological sex assigned to them at birth. A transgender woman is a person who is assigned the sex of male at birth but identifies as female. A transgender man is a person who is assigned the sex of female at birth but identifies as male.

---

[6] See, e.g., University of Wisconsin Milwaukee Lesbian, Gay, Bisexual, Transgender Resource Center. (2016). Retrieved from https://uwm.edu/lgbtrc/support/gender-pronouns/

Foundation

The foundation for the Protocol is its Purpose, Vision, and Principles. These three elements of the foundation provide answers to the following fundamental questions:

- Purpose: Why should we adopt the Protocol?

- Vision: What future do we seek to create?

- Principles: What shared values, precepts, and understandings can we use to guide us in fulfilling our purpose and achieving our vision?

Purpose

The purpose of the Protocol is to improve the safety, health, and well-being of *all* youth in Washington's child welfare and juvenile justice systems. Professionals, volunteers, and caregivers will *not* be able to improve the safety, health, and well-being of all youth unless and until they address the specific needs of LGBTQ+ youth. LGBTQ+ youth are overrepresented in these systems, experience unique forms of trauma, and have specific needs related to their sexual orientation and gender identity. Therefore, ensuring appropriate care for *all* youth necessitates a focused effort on behalf of LGBTQ+ youth.

Vision

Professionals, contracted providers, caregivers, and volunteers in Washington's child welfare and juvenile justice systems will support each and every youth in the development of the youth's sexual orientation and gender identity and recognize that such support is critical to the youth's safety, health, and well-being.

The Protocol Benefits *All* Youth

Youth who do not identify as LGBTQ+ benefit when professionals, volunteers, and caregivers improve their ability to serve LGBTQ+ youth. A recent Annie E. Casey Foundation report aptly noted,

> Every youth has a gender identity, not just transgender youth. All youth express their gender, whether they transgress or conform to gender norms. Every youth has a sexual orientation, not just gay, lesbian and bisexual youth. Creating a professional environment that acknowledges and respects youth across the full spectrum of gender and sexuality permits all youth to explore their emerging identities, prevents mistreatment based on anti-LGBT bias, and promotes the health and well-being of all youth. It also sends the message to all youth that self-determination and affirmation are core values and gives all youth the opportunity to define themselves in a supportive and afforming environment. Learning respect for differences will serve youth in all parts of their lives.[7]

---

[7] The Annie E. Casey Foundation. (2015). Lesbian, Gay, Bisexual and Transgender Youth in the Juvenile Justice System. Baltimore, MD: Shannan Wilber. Retrieved from www.aecf.org

Principles

While the Protocol provides model policies that apply to many different circumstances, the Protocol cannot envision every circumstance in which a professional, volunteer, or caregiver will need guidance in serving LGBTQ+ youth. In instances where there is not an applicable policy or there is a lack of clarity, professionals, volunteers, and caregivers should consult these Principles.

1. **LGBTQ+ youth exist.** LGBTQ+ youth are a part of the child welfare and juvenile justice systems, as well as all systems of care and communities in general. Their sexual orientations, gender identities, and gender expressions are valid, viable, and valued.

2. **Meeting the specific needs of LGBTQ+ youth is a matter of health, safety, and well-being.** Failure to provide safe and affirming care jeopardizes the health, safety, and well-being of LGBTQ+ youth. As such, they are entitled to access to resources and services from informed and trained professionals, volunteers, and caregivers within an environment that is "safe and affirming."

3. **The health, safety, and well-being of youth is the priority.** Professionals, volunteers, and caregivers' paramount priority is to ensure the health, safety, and well-being of youth.

4. **Youth have a right to self-determination.** Every youth has the right to acknowledge, declare, and live authentically according to their personal identity—including their sexual orientation, gender identity, and gender expression—without harm, judgment, dismissal, or coercion to change.

5. **LGBTQ+ youth are individuals.** While the sexual orientations, gender identities, and gender expressions of LGBTQ+ youth may be part of their identity, it is not all of their identity. LGBTQ+ youth's needs, experiences, strengths, and challenges are shaped by many factors aside from sexual orientation, gender identity, and gender expression, including but not limited to race, ethnicity, religion, ability, and socio-economic status.

6. **LGBTQ+ youth are entitled to equitable services and resources.** LGBTQ+ youth have specific strengths and resiliency, in addition to specific challenges and needs. Therefore, they require equitable services and resources to their non-LGBTQ+ counterparts.

7. **Understanding LGBTQ+ youth is a core competency for every professional, volunteer, and caregiver.** Basic knowledge of sexual orientation, gender identity, and gender expression—including LGBTQ+ identities—is a core competency for every professional, volunteer, and caregiver.

8. **Youth have expertise in their own lives.** All youth, including LGBTQ+ youth, have expertise in their own lives and can provide critical insight and information in professionals, volunteers, and caregivers' decision making processes.

9. **Making assumptions is harmful.** Making assumptions about youth, whether it is about their sexual orientation, gender identity, or anything else, is harmful to youth.

10. **Collaboration is the key to success.** Implementing truly safe and affirming care will require the collaboration of professionals, volunteers, caregivers, and *youth* from across systems. These players can enhance collaboration by approaching others as if they are doing the best that they can with what they have and know.

10 Components of Safe & Affirming Care

Where the Foundation of the Protocol is broad, the 10 Components of Safe & Affirming Care provide more detailed guidance. The Components are:

1. **Protecting the Rights of All Youth;**

2. **Training Professionals, Volunteers, and Caregivers;**

3. **Creating Safe & Affirming Spaces for All Youth;**

4. **Talking About Sexual Orientation and Gender Identity with All Youth;**

5. **Collecting Data on Sexual Orientation, Gender Identity, and Gender Expression;**

6. **Ensuring Safe & Affirming Services for LGBTQ+ Youth;**

7. **Ensuring Safe & Affirming Housing for LGBTQ+ Youth;**

8. **Ensuring Safe & Affirming Healthcare for LGTBQ+ Youth;**

9. **Responding to Families of LGBTQ+ Youth; and**

10. **Establishing Expectations for Professionals, Volunteers, and Caregivers.**

For each component, a purpose statement, a restatement of relevant principles, policies, and tools are provided.

Purpose. Each component's purpose statement provides a reason for including that component in the Protocol.

Principles. While the Foundation section provides the principles underlying the Protocol, those principles that are particularly relevant to each component are restated to provide additional context.

Policies. The policies outline what professionals, volunteers, and caregivers must do to fulfill the purpose of each component.

Tools. The tools are intended to support professionals, volunteers, and caregivers in carrying out the policies.

1. Protecting the Rights of All Youth

Purpose
To ensure basic, fundamental protections for all youth.

Principles
The following principles are particularly relevant to the Rights of Youth.

1. **LGBTQ+ youth exist.** LGBTQ+ youth are a part of the child welfare and juvenile justice systems, as well as all systems of care and communities in general. Their sexual orientations, gender identities, and gender expressions are valid, viable, and valued.

3. **The health, safety, and well-being of youth is the priority.** Professionals, volunteers, and caregivers' paramount priority is to ensure the health, safety, and well-being of youth.

4. **Youth have a right to self-determination.** Every youth has the right to acknowledge, declare, and live authentically according to their personal identity—including their sexual orientation, gender identity, and gender expression—without harm, judgment, dismissal, or coercion to change.

6. **LGBTQ+ youth are entitled to equitable services and resources.** LGBTQ+ youth have specific strengths and resiliency, in addition to specific challenges and needs. Therefore, they require equitable services and resources to their non-LGBTQ+ counterparts.

8. **Youth have expertise in their own lives.** All youth, including LGBTQ+ youth, have expertise in their own lives and can provide critical insight and information in professionals, volunteers, and caregivers' decision making processes.

Policies

1. **Identification.** Professionals, volunteers, and caregivers will acknowledge, respect, and uphold the right of youth to openly identify as LGBTQ+ or any other identity and to live free from attempts to change how they identify.

2. **Anti-Discrimination.** Professionals, volunteers, and caregivers will acknowledge, respect, and uphold the right of youth to live free from discrimination and the right of LGBTQ+ youth to equitable services, care, placement, treatment, and benefits as non-LGBTQ+ youth. Professionals, volunteers, and caregivers will not deny youth any of these because of their sexual orientation, gender identity, or gender expression.

Rights of Youth Policies

The policies in this component are designed to protect youth's health, safety, and well-being by prohibiting discrimination, ensuring youth can live consistent with their identity, and safeguarding youth's privacy. Parents and guardians, of course, also have important rights. Actual or perceived conflicts may arise between the rights of youth and rights of parents. In these circumstances, users of the Protocol should carefully consider all factors and consult with their LGBTQ+ Leads, legal counsel, and/or CCYJ, while recognizing that the health, safety, and well-being of youth is the paramount priority.

3. **Dress.** Professionals, volunteers, and caregivers will acknowledge, respect, and uphold the right of youth to wear clothing consistent with their gender identity. For example, when youth are required to wear gender-specific uniforms, they will be permitted to select the uniform that most closely aligns with their gender identity.[8]

4. **Names.** Professionals, volunteers, and caregivers will acknowledge, respect, and uphold the right of youth to designate the appropriate name for themselves and will refer to youth by the designated name in instances in which a first name is used and use of a legal name is not legally required.

5. **Pronouns.** Professionals, volunteers, and caregivers will acknowledge, respect, and uphold the right of youth to determine the appropriate pronoun for themselves and will use that pronoun.

6. **Privacy.** Professionals, volunteers, and caregivers will acknowledge, respect, and uphold the right of youth to *not* disclose their sexual orientation or gender identity.

7. **Safer facility access.** Professionals, volunteers, and caregivers will acknowledge, respect, and uphold the right of youth to use sex segregated facilities, such as a restrooms and locker-rooms, consistent with their gender identity.

---

[8] Adapted from Majd, K., Marksamer, J., & Reyes, C. (2009). Hidden injustice: Lesbian, gay, bisexual, and transgender youth in juvenile courts. *Equity Project*. 6, 38, 49, 50, 105, Appendix E. Retrieved from http://www.nclrights.org/wp-content/uploads/2014/06/hidden_injustice.pdf; Annie E Casey Foundation. (2014). A Guide to Juvenile Detention Reform – Juvenile Detention Facility Assessment. *Juvenile Detention Alternatives Initiative*. Retrieved from http://www.aecf.org/resources/juvenile-detention-facility-assessment

Tools

	Title	Author	Link
For LGBTQ+ Youth in Foster Care	LGBTQ Youth In Washington State Foster Care	Washington State Children's Administration	http://independence.wa.gov/lgbtq-youth-in-washington-state-foster-care/
School Safety Center	Lesbian, Gay, Bisexual, Transgender, Questioning (LGBTQ) Youth	Office of Superintendent of Public Instruction	http://www.k12.wa.us/Safetycenter/LGBTQ/default.aspx
Know Your Rights Materials	How the Law Protects LGBTQ Youth	Lambda Legal	http://www.lambdalegal.org/know-your-rights/youth/how-the-law-protects-lgbtq-youth
	It's Your Life	American Bar Association Opening Doors Project	http://www.americanbar.org/content/dam/aba/migrated/child/PublicDocuments/its_your_life.authcheckdam.pdf
	Know Your Rights: LGBTQ Youth and Youth Living with HIV in Foster Care and Juvenile Justice Systems	Lambda Legal	http://www.lambdalegal.org/publications/xfs_know-your-rights-lgbtq-and-hiv-youth-in-foster-care
Transgender Youth Rights	Survival Tips for Trans Youth	Lambda Legal	http://www.lambdalegal.org/sites/default/files/transgender_booklet_-_youth.pdf

2. Training Professionals, Volunteers, & Caregivers

Purpose

To ensure:

- All professionals, volunteers, and caregivers have the foundational knowledge necessary to ensure the safety, health, and well-being of youth as it relates to their sexual orientation, gender identity, and gender expression; and

- Each agency, court, and organization has at least one professional who has a high level of knowledge with regard to sexual orientation, gender identity, and gender expression and can support other professionals, volunteers, and caregivers with these issues when they arise.

Principles

The following principles are particularly relevant to Training for Professionals, Volunteers, & Caregivers.

2. **Meeting the specific needs of LGBTQ+ youth is a matter of health, safety, and well-being.** Failure to provide safe and affirming care jeopardizes the health, safety, and well-being of LGBTQ+ youth. As such, they are entitled to access to resources and services from informed and trained professionals, volunteers, and caregivers within an environment that is "safe and affirming."

3. **LGBTQ+ youth are individuals.** While the sexual orientations, gender identities, and gender expressions of LGBTQ+ youth may be part of their identity, it is not all of their identity. LGBTQ+ youth's needs, experiences, strengths, and challenges are shaped by many factors aside from sexual orientation, gender identity, and gender expression, including but not limited to race, ethnicity, religion, ability, and socio-economic status.

1. **Understanding LGBTQ+ youth is a core competency for every professional, volunteer, and caregiver.** Basic knowledge of sexual orientation, gender identity, and gender expression—including LGBTQ+ identities—is a core competency for every professional, volunteer, and caregiver.

10**. Collaboration is the key to success.** Implementing truly safe and affirming care will require the collaboration of professionals, volunteers, caregivers, and *youth* from across systems. These players can enhance collaboration by approaching others as if they are doing the best that they can with what they have and know.

Policies

1. **LGBTQ+ Lead.** Every court, agency, and organization will have at least one person on staff who is highly trained on LGBTQ+ issues. This person will serve as the LGBTQ+ lead and serve as a resource for their agency.

LGBTQ+ Lead

Careful consideration should be given when designating an LGBTQ+ Lead. The LGBTQ+ Lead should have a high level of knowledge of the areas listed in Policy 2(d) and local LGBTQ+ resources. This may not always be possible initially; many regions lack trainings and resource. If this is the case, the LGBTQ+ Lead should have a plan in place for building and developing these competencies. Contact CCYJ for assistance in identifying supports for the LGBTQ+ Lead.

2. **Mandatory Training.** Professionals, volunteers, and caregivers will undergo mandatory initial and ongoing trainings on serving LGBTQ+ youth.[9] Such training will:

   a. Be in-person and include interactive discussion; it may include videos, webinars, and/or alternate training but these should not be the primary means;

   b. Be tailored to fit the various roles within the child welfare and juvenile justice systems; and

   c. Include youth-led components.

3. **Training Components.** Trainings will address the following components: [10]

   a. Overview of the Protocol for Safe & Affirming Care;
   b. Implicit bias and microaggressions;
   c. Vocabulary and definitions relevant to LGBTQ+ youth;
   d. Myths and stereotypes relevant to LGBTQ+ youth;
   e. Developmental issues and adaptive strategies for LGBT youth;
   f. Promoting positive development of LGBTQ+ youth;
   g. Building safe and affirming environments;
   h. The coming-out process and how families and adults can support a young person who is coming out;
   i. How sexual orientation or gender identity may relate to the reasons a young person is system involved;
   j. Issues and challenges specific to transgender youth;
   k. Approaches to working with the families of LGBTQ+ youth;
   l. Identifying the warning signs that youth are experiencing anti-LGBTQ+ mistreatment;
   m. Guidance on how to serve LGBT youth respectfully and equitably;
   n. Resources available to serve LGBT youth and their families;
   o. Collecting data on sexual orientation, gender identity, & gender expression; and
   p. Laws and policies of particular relevance to LGBTQ+ youth.

---

[9] Adapted from Annie E Casey Foundation. (2014). A Guide to Juvenile Detention Reform – Juvenile Detention Facility Assessment. *Juvenile Detention Alternatives Initiative*. Retrieved from http://www.aecf.org/resources/juvenile-detention-facility-assessment

[10] Adapted from Wilber, S., Ryan, C., & Marksamer, J. (2006). CWLA best practice guidelines. *Washington, DC: Child Welfare League of America Best Practice Guidelines.* Retrieved from http://www.nclrights.org/wp-content/uploads/2013/07/bestpracticeslgbtyouth.pdf

Tools

	Title	Author	Link
Training Curricula	Toward Equity A Training Curriculum for Understanding Sexual Orientation, Gender Identity, and Gender Expression, and Developing Competency to Serve Lesbian, Gay, Bisexual, and Transgender Youth in the Juvenile Justice System	The Equity Project (A collaborative initiative of Legal Services for Children, National Center for Lesbian Rights, and the National Juvenile Defender Center)	http://www.equityprojects.org/wp-content/uploads/2015/01/Equity_Curriculum_Complete.pdf
	Moving the Margins: Training Curriculum for Child Welfare Services with LGBTQ+ Youth in Out-of-Home Care	Lambda Legal	http://www.lambdalegal.org/publications/pp_moving-the-margins
	Fostering Pride for Social Workers	Marianne K. Ozmun and Holly Luna, Washington State Department of Social and Health Services	Please contact the eQuality Project at CCYJ for more information.
Video and Discussion Guide	We are GLBTQ	Washington State Department of Social and Health Services	Video: https://www.youtube.com/watch?v=91OAzCu3CPY Discussion guide: http://depts.washington.edu/allcwe/sites/default/files/sites/default/files/caregiver/glbtq_discussion_resource_guide.pdf
Tools for Trainers	RISE Technical Assistance Tools for Trainers (includes facilitation tools and self-care tools)	Los Angeles LGBT Center RISE Initiative	https://lalgbtcenter.org/rise/technical-assistance/tools-for-trainers
	Toolkit to Support Child Welfare Agencies in Serving LGBTQ Children, Youth, and Families	Capacity Building Center for States	https://capacity.childwelfare.gov/states/focus-areas/lgbtq/agencies-serving-lgbtq-toolkit/

	Title	Author	Link
Responding to Statements and Questions about LGBTQ+ Training	Frequently Encountered Biased Questions and Statements	Los Angeles LGBT Center RISE Initiative	http://files.lalgbtcenter.org/pdf/rise/Los-Angeles-LGBT-Center-RISE-Frequently-Encountered-Biased-Questions-Statements.pdf
Training Standards	Model Standards: Staff Training Focusing on the Needs of Youth in State Custody	The Center for HIV Law & Policy Teen Sense	http://www.hivlawandpolicy.org/sites/www.hivlawandpolicy.org/files/Teen%20SENSE%20Model%20Standards%20-%20Staff%20Training%20Focusing%20on%20the%20Needs%20of%20Youth%20in%20State%20Custody.pdf
	Best Practices in Creating and Delivering LGBTQ Cultural Competency Trainings for Health and Social Service Agencies	National LGBT Cancer Network	http://www.cancer-network.org/downloads/best_practices.pdf
Technical Assistance	Provider Training & Technical Assistance	The NW Network of Bi, Trans, Lesbian, and Gay Survivors of Abuse	http://www.nwnetwork.org/provider-training-and-technical-assistance/

3. Creating Safe & Affirming Spaces for All Youth

Purpose

To increase the comfort and sense of safety among youth and ensure all youth know—through verbal and non-verbal indicators—that they can talk about their sexual orientation and gender identity.

Principles

The following principles are particularly relevant to the Safe & Affirming Spaces for All.

1. **LGBTQ+ youth exist.** LGBTQ+ youth are a part of the child welfare and juvenile justice systems, as well as all systems of care and communities in general. Their sexual orientations, gender identities, and gender expressions are valid, viable, and valued.

2. **Meeting the specific needs of LGBTQ+ youth is a matter of health, safety, and well-being.** Failure to provide safe and affirming care jeopardizes the health, safety, and well-being of LGBTQ+ youth. As such, they are entitled to access to resources and services from informed and trained professionals, volunteers, and caregivers within an environment that is "safe and affirming."

9. **Making assumptions is harmful.** Making assumptions about youth, whether it is about their sexual orientation, gender identity, or anything else, is harmful to youth.

Policies

1. **Proactive affirmations.** At the initial meeting with a youth and periodically thereafter, professionals, volunteers, and caregivers will indicate, in language that is appropriate for the youth, that their agency/court/organization is a safe place for all youth, including LGBTQ+ youth, and that:

   a. Youth will be supported regardless of their sexual orientation, gender identity, gender expression, or any other identity; and

   b. Any acts of bullying, intimidation, or harassment against them by peers or adults will not be tolerated.

2. **Visual indicators.** LGBTQ-affirming images, symbols, and/or quotations (such as the equal sign, rainbow flag, or "All Are Welcome" sign) will be displayed prominently in reception areas, offices, and other areas frequented by youth.

The Relationship Between Components 3, 4, & 5

Many publications and online resources about serving LGBTQ+ youth combine guidance on creating safe spaces (Component 3), talking about sexual orientation and gender identity (Component 4), and data collection (Component 5).

While all three are highly related, the Protocol distinguishes the three because they serve distinct purposes. Component 3 is about creating a space in which youth are and feel safe and affirmed. In doing so, professionals, volunteers, and caregivers will be more successful in implementing Component 4, which is talking to youth about their sexual orientation and gender identity. Having these critical conversations will better ensure LGBTQ+ youth are matched with appropriate services. Once professionals have conversations about sexual orientation and gender identity, they can implement data collection in Component 5. Data collection ultimately improves the ability of systems to care for youth.

Tools

	Title	Author	Link
Self-Assessment	Self-Assessment Checklist for Personnel Providing Services and Supports to LGBTQ Youth and Their Families	Tawara D. Goode, M.A. and Sylvia K. Fisher, Ph.D. National Center for Cultural Competence, Georgetown University Center for Child and Human Development	http://nccc.georgetown.edu/documents/Final%20LGBTQ%20Checklist.pdf
Toolkit	GLSEN's Safe Space Kit: Be an Ally to LGBT Youth	GLSEN	http://www.glsen.org/safespace
Guidelines: Juvenile Justice	A Guide to Juvenile Detention Reform: Lesbian, Gay, Bisexual and Transgender Youth in the Juvenile Justice System -- Section IV: Creating a Fair, Inclusive and Respectful Organizational Culture	Annie E. Casey Foundation	http://www.nclrights.org/wp-content/uploads/2015/09/AECF_LGBTinJJS_FINAL2.pdf (page 14)
Guidelines: Group Care Facilities	A Place of Respect: A Guide for Group Care Facilities Serving Transgender and Gender Non-Conforming Youth -- Chapter Five: Best Practices for Administrators for Changing Culture, Adopting Practice Guidelines and Policies, and Training and Evaluating Staff	Jody Marksamer, National Center for Lesbian Rights; Dean Spade and Gabriel Arkles, Silvia Rivera Law Project	http://www.nclrights.org/wp-content/uploads/2013/07/A_Place_Of_Respect.pdf (page 49)
Video and Guide	Creating LGBTQ Affirming Agencies Video and Guide	Capacity Building Center for States	https://capacity.childwelfare.gov/states/focus-areas/lgbtq/affirming-video/

4. Talking About Sexual Orientation & Gender Identity with All Youth

Purpose

To determine, at an appropriate time and place and subject to youth's willingness to disclose, how a youth identifies with regard to their sexual orientation and gender identity so as to be able to provide the youth with appropriate services and housing.

Principles

The following principles are particularly relevant to the Talking About Sexual Orientation & Gender Identity with Youth.

2. **Meeting the specific needs of LGBTQ+ youth is a matter of health, safety, and well-being.** Failure to provide safe and affirming care jeopardizes the health, safety, and well-being of LGBTQ+ youth. As such, they are entitled to access to resources and services from informed and trained professionals, volunteers, and caregivers within an environment that is "safe and affirming."

3. **The health, safety, and well-being of youth is the priority.** Professionals, volunteers, and caregivers' paramount priority is to ensure the health, safety, and well-being of youth.

3. **Youth have a right to self-determination.** Every youth has the right to acknowledge, declare, and live authentically according to their personal identity—including their sexual orientation, gender identity, and gender expression—without harm, judgment, dismissal, or coercion to change.

9. **Making assumptions is harmful.** Making assumptions about youth, whether it is about their sexual orientation, gender identity, or anything else, is harmful to youth.

> ### Have Conversations with *All* Age Appropriate Youth Who Can Understand and Discuss These Issues
>
> It is critical that professionals, volunteers, and caregivers talk about sexual orientation and gender identity with <u>all</u> of the youth they serve. Professionals, volunteers, and caregivers should never single out youth they perceive to be LGBTQ+ for these conversations. Such an approach is based on assumptions and is harmful. For example, it can be embarrassing for youth perceived to be LGBTQ+. It also means LGBTQ+ youth who are not perceived to be so are overlooked and denied the opportunity to have this important conversation.
>
> Professionals, volunteers, and caretakers should take a transparent approach—letting youth know that this is the type of conversation they have with all youth and that it is for the purpose of helping match youth with appropriate services.

Policies

1. **Talking about sexual orientation.** The *appropriate* professional, volunteer, and/or caregiver will talk to every age appropriate[11] youth about their sexual orientation at the *appropriate* time and in the *appropriate* setting for the purpose of ensuring the youth's needs are met. Professionals, volunteers, and caregivers should never require a response.[12] Professionals, volunteers, and caregivers should never single out youth who they perceive as LGBTQ+; they should approach all youth in a similar manner.

2. **Talking about gender identity.** The *appropriate* professional, volunteer, and/or caregiver will talk to every age appropriate[13] youth about their gender identity at the *appropriate* time and in the *appropriate* setting for the purpose of ensuring the youth's needs are met. Professionals, volunteers, and caregivers should never require a response.[14] Professionals, volunteers, and caregivers should never single out youth who they perceive as LGBTQ+; they should approach all youth in a similar manner.

3. **Responding to disclosures.** If a youth discloses their sexual orientation and/or gender identity, professionals, volunteers, and caregivers will talk about it with them in a safe and affirming manner and never just move-on.

> ### Using Written Questions
>
> Professionals, volunteers, and caregivers should consider whether using written questions about sexual orientation and gender identity may be appropriate for their circumstances. Youth may be more comfortable answer a written questions than saying it out loud. Professionals, volunteers, and caregivers may be able to use written answers to start a follow-up conversation.
>
> Carefully consider any confidentiality concerns around written questionnaires.

4. **Confidentiality.**

   a. With regard to communication within their own agency, court, or organization, professionals, volunteers, and caregivers will only share information about the sexual orientation or gender identity of a youth if disclosure is necessary to serve the youth or ensure safety, and never to the youth's detriment.[15]

---

[11] It is recommended that professionals, volunteers, and caregivers discuss sexual orientation with youth age 10 and older. *See* Wilber, S. (2013). *Guidelines for Managing Information Related to the Sexual Orientation and Gender Identity and Expression of Children in Child Welfare Systems*, p. 10, Putting Pride Into Practice Project, Family Builders by Adoption, Oakland, CA.

[12] Adapted from Annie E. Casey Foundation, 2014; Majd, Marksamer, & Reyes, 2009; Wilber, Ryan, & Marksamer, 2006

[13] It is recommended that professionals, volunteers, and caregivers discuss gender identity with youth age 3 and older. *See* Wilber, S. (2013). *Guidelines for Managing Information Related to the Sexual Orientation and Gender Identity and Expression of Children in Child Welfare Systems*, p. 9, Putting Pride Into Practice Project, Family Builders by Adoption, Oakland, CA.

[14] Adapted from Annie E. Casey Foundation, 2014; Majd, Marksamer, & Reyes, 2009; Wilber, Ryan, & Marksamer, 2006.

[15] *Id.*

b. With regard to communication outside their own agency, court, or organization, professionals, volunteers, and caregivers will not share information about the sexual orientation or gender identity of a youth without first obtaining the youth's consent. This applies to information shared with the youth's parent(s) or guardian(s).[16]

c. If a professional, volunteer, or caregiver has or may have a duty to disclose what a youth shares about their sexual orientation or gender identity to another adult, then that professional, volunteer, or caregiver will notify all youth of that duty at the beginning of the initial meeting.

---

[16] *Id.*

Tools

	Title	Author	Link
Interviewing and Intake	Sample Interview and Intake Protocols: • NCCD LGBTQ Youth Interviewing Tool • NYC ACS Juvenile Justice Intake Form • MA DYS Dialogue Tree • Impact Justice SOGIE Questions • ACS Asking SOGIE Questions Policy	The Equity Project (A collaborative initiative of Legal Services for Children, National Center for Lesbian Rights, and the National Juvenile Defender Center)	http://www.equityprojects.org/resource/1022/
	Lesbian, Gay, Bisexual and Transgender Youth in the Juvenile Justice System – Section IV, C: Collecting and Protecting SOGIE Information	Annie E. Casey Foundation	http://www.nclrights.org/wp-content/uploads/2015/09/AECF_LGBTinJJS_FINAL2.pdf (page 17)
Talking About Gender Identity	Tips for Allies of Transgender People	GLAAD	https://www.glaad.org/transgender/allies
Icebreaker Tool	Q Cards	Q Card Project	http://www.qcardproject.com/
Guidelines: Managing SOGIE Information	Guidelines for Managing Information Related to the Sexual Orientation & Gender Identity and Expression of Children in Child Welfare Systems – Section III: Information Guidelines	Shannan Wilber, Family Builders by Adoption	http://www.nclrights.org/legal-help-resources/resource/guidelines-for-managing-information-related-to-the-sexual-orientation-gender-identity-and-expression-of-children-in-child-welfare-settings-2013/ (page 6)

Additional Guidance: Determining when it is appropriate to ask about sexual orientation and gender identity

There is no uniform guidance on asking youth about their sexual orientation and gender identity. Each system, court, agency, organization, and community is different. The following table provides general guidance on the factors suggesting it is and is not appropriate. System leaders should work with their LGBTQ+ point persons and LGBTQ+ advocates in their communities to develop specific guidelines for their court, agency, or organization.

	Likely Appropriate	**Likely Not Appropriate**
Person	By individuals who: • Have developed a relationship with youth; • Have discretion or obligation to maintain confidentiality upon request; and/or • Do not have an adversarial relationship with youth. Examples may include: • Attorney for youth; • Health care providers; • Caseworkers; and • Probation counselors.	By individuals who: • Have not or do not have the opportunity to develop a relationship with youth; • Have an obligation to disclose youth's information to others; and/or • Have an adversarial relationship with youth. Examples may include: • Forensic interviewers; • Intake staff; • Judicial officers; • Law enforcement.
Time	At a time: • After youth have had time to adjust to the system; and/or • That is not in conjunction with questioning about negative behaviors, such as substance use.	At a time: • Immediately upon entering the system (note that this may be necessary at times); and/or • That is in conjunction with questioning about negative behaviors, such as substance use.
Setting	In a place that is: • Private; • Non-threatening; and/or • Excludes other individuals that the youth may fear will reject or mistreat the youth. Examples may include: • A private conference room or office; • An exam room; and • One on one with the youth.	In a place that is: • Open to the public; • Threatening; and/or • Includes other individuals that the youth may fear will reject or mistreat the youth. Examples may include: • An open courtroom; • A lobby or public waiting area; and • A meeting with the youth and the youth's parents.

5. Collecting Data on Sexual Orientation, Gender Identity, and Gender Expression

Purpose

To obtain information on the sexual orientation, gender identity, and gender expression ("SOGIE") of *all* youth so as to better understand how sexual orientation, gender identity, and gender expression impacts entry into systems, experiences in systems, and outcomes after exiting systems. The purpose is also to understand how the relationship between youth's SOGIE and other demographics, such as race and ethnicity, impacts youth's experiences. Ultimately, this information will better enable professionals, volunteers, and caregivers to prevent more youth from entering systems, improve youth's experience in systems, and ensure better outcomes upon exiting systems.

Principles

The following principles are particularly relevant to Data Collection on LGBTQ+ Youth.

1. **LGBTQ+ youth exist.** LGBTQ+ youth are a part of the child welfare and juvenile justice systems, as well as all systems of care and communities in general. Their sexual orientations, gender identities, and gender expressions are valid, viable, and valued.

5. **LGBTQ+ youth are individuals.** While the sexual orientations, gender identities, and gender expressions of LGBTQ+ youth may be part of their identity, it is not all of their identity. LGBTQ+ youth's needs, experiences, strengths, and challenges are shaped by many factors aside from sexual orientation, gender identity, and gender expression, including but not limited to race, ethnicity, religion, ability, and socio-economic status.

Policies[17]

1. **Population surveys.** System leaders will administer periodic anonymous surveys of system-involved youth that, at a minimum, contain questions about:

    a. Sexual orientation;

    b. Sex assigned at birth;

    c. Gender identity;

    d. Gender expression;

    e. Race;

    f. Ethnicity;

---

[17] Adapted from Center for American Progress. (2016). How to Collect Data About LGBT Communities. Washington, D.C.: Baker, K, Durso, L., & Ridings, A. Retrieved from https://www.americanprogress.org/issues/lgbt/report/2016/03/15/133223/how-to-collect-data-about-lgbt-communities/; Family Builders, Legal Services for Children, National Center for Lesbian Rights, & Center for the Study of Social Policy. (2013). Guidelines for Managing Information Related to the Sexual Orientation & Gender Identity and Expression of Children in Child Welfare Systems. Oakland, CA: Shannan Wilbur. Retrieved from http://www.nclrights.org/wp-content/uploads/2013/07/Information_Guidelines_FINAL_DRAFT_3-20-13.pdf

g. Previous experience with homelessness or unstable housing;

h. Certainty of future stable housing;

i. Involvement in systems other than the one that is administering the survey; and

j. Discriminatory experiences related to these social statuses.

2. **Research.** Where possible, system leaders should include questions about sexual orientation, sex assigned at birth, and gender identity in research on system-involved youth.

3. **Administrative and programmatic data.**

    a. System professionals will record each and every youth's response to questions about biological sex assigned at birth, sexual orientation and gender identity alongside the responses to other demographic questions. If they are not already doing so, system professionals will also collect responses to questions about the youth's previous experience with homelessness or unstable housing and the youth's certainty of future stable housing.

    b. System leaders will provide a breakdown by sexual orientation and gender identity as it relates to biological sex assigned at birth, as is commonly done for race and ethnicity, in reports and analyses of reasons for system entry, experiences in the system, and outcomes after leaving the system.

4. **Clinical records.** If applicable, system leaders should include a breakdown by sexual orientation and gender identity in reports or analyses based on information collected in clinical records.

Tools

	Title	Author	Link
Guidelines	Guidelines for Managing Information Related to the Sexual Orientation & Gender Identity and Expression of Children in Child Welfare Systems	Family Builders, Legal Services for Children, National Center For Lesbian Rights, & Center for the Study of Social Policy	http://cssr.berkeley.edu/cwscmsreports/documents/Information%20Guidelines%20P4.pdf
Research	Sexual and Gender Minority Youth in Foster Care: Assessing Disproportionality and Disparities in Los Angeles	The Williams Institute; Los Angeles LGBT Center; Honarchy Consulting; PII Permanency Innovations Initiative	http://www.acf.hhs.gov/sites/default/files/cb/pii_rise_lafys_report.pdf
	Safe Schools & Youth	The Williams Institute	http://williamsinstitute.law.ucla.edu/category/research/safe-schools-and-youth/

6. Ensuring Safe & Affirming Services for LGBTQ+ Youth

Purpose

To ensure that system professionals provide services that meet the specific needs of LGBTQ+ youth and ensure contracted or partner providers do the same.[18]

Principles

The following principles are particularly relevant to the Services for LGBTQ+ Youth.

2. **Meeting the specific needs of LGBTQ+ youth is a matter of health, safety, and well-being.** Failure to provide safe and affirming care jeopardizes the health, safety, and well-being of LGBTQ+ youth. As such, they are entitled to access to resources and services from informed and trained professionals, volunteers, and caregivers within an environment that is "safe and affirming."

3. **The health, safety, and well-being of youth is the priority.** Professionals, volunteers, and caregivers' paramount priority is to ensure the health, safety, and well-being of youth.

5. **LGBTQ+ youth are individuals.** While the sexual orientations, gender identities, and gender expressions of LGBTQ+ youth may be part of their identity, it is not all of their identity. LGBTQ+ youth's needs, experiences, strengths, and challenges are shaped by many factors aside from sexual orientation, gender identity, and gender expression, including but not limited to race, ethnicity, religion, ability, and socio-economic status.

> ## Consider the Impact of Youths' LGBTQ+ Identities on the Need for Services
>
> Even if a youth's sexual orientation, gender identity, or gender expression is not directly related to the youth's system involvement, these aspects of the youth's identity impact the youth's health, safety, and well-being. It is important that professionals, volunteers, and caregivers are cognizant of this impact.
>
> In many cases, LGBTQ+ youth will benefit from the same services that non-LGBTQ+ youth receive, so long as the providers of those services are safe and affirming. In other instances, it LGBTQ+ will require LGBTQ+ specific services, with a provider that focuses on LGBTQ+ issues and/or a group of other LGBTQ+ youth. Professionals, volunteers, and caregivers should work with youth to make this determination.

6. **LGBTQ+ youth are entitled to equitable services and resources.** LGBTQ+ youth have specific strengths and resiliency, in addition to specific challenges and needs. Therefore, they require equitable services and resources to their non-LGBTQ+ counterparts.

7. **Understanding LGBTQ+ youth is a core competency for every professional, volunteer, and caregiver.** Basic knowledge of sexual orientation, gender identity, and gender expression—including LGBTQ+ identities—is a core competency for every professional, volunteer, and caregiver.

---

[18] Note that this Component applies generally to all services, including Components 7 (Housing) and 8 (Healthcare). The Protocol separates housing and healthcare as stand-alone components because they each contain unique sets of policies and tools. Separating housing and healthcare also highlights the importance of these two categories of services to LGBTQ+ youth.

Policies

1. **Screening of service providers.** Prior to licensing, contracting with, or referring a youth to a service provider, Children's Administration, juvenile courts, and Juvenile Rehabilitation will explicitly verify and confirm that the service provider will uphold the basic rights of youth as outlined in "Rights of Youth" in the Protocol.

2. **Identification of LGBTQ+ affirming providers.** Professionals will make good faith efforts to identify and maintain an updated list of LGBTQ+ affirming providers to which they can refer youth who have identified themselves as LGBTQ. LGBTQ+ affirming means going beyond the minimum protections outlined in "Rights of Youth" and providing highly competent services for LGBTQ+ youth.

3. **Proactive consideration of the impact of other identities on the service needs of LGBTQ+ youth.** In consultation with youth, professionals will proactively consider the impact of the other identities of LGBTQ+ youth on their service needs. Professionals will recognize that youth of color are likely vastly overrepresented among their LGBTQ+ youth population.

4. **Linking youth to supportive services.** When necessary, professionals will make a good faith effort to recruit volunteer transporters and/or mentors to connect youth to supportive services. This may be especially necessary in rural areas.

5. **Educational materials.** LGBTQ-specific materials will be included with other educational materials made available to youth.[19]

6. **Community building of youth in care.** Professionals will make good faith efforts to bring LGBTQ+ youth together for support, education, and/or recreation.

---

[19] Adapted from Cook County Juvenile Temporary Detention Center. (2013). Chapter 11: LGBTQ Residents. *Cook County Juvenile Temporary Detention Center: Policies and Procedures.*

Tools

	Title	Author	Link
Washington Resources and Resource Directories	LGBTQ Youth in Washington State Foster Care	Independence.wa.gov	http://independence.wa.gov/lgbtq-youth-in-washington-state-foster-care/
	Resources: Youth	Gay City	https://www.gaycity.org/youth/
	Resources: Overview	NW Network of Bi, Trans, Lesbian and Gay Survivors of Abuse	http://www.nwnetwork.org/resources-overview/
	LGBTQ Youth in Washington State Foster Care	Independence.wa.gov	http://independence.wa.gov/lgbtq-youth-in-washington-state-foster-care/
National Resources and Resource Directories	Youth Topics / LGBT: Child Welfare	Youth.gov	http://youth.gov/youth-topics/lgbtq-youth/child-welfare
	RISE – Foster Youth Services Resources	Los Angeles LGBTQ Center RISE Initiative	https://lalgbtcenter.org/rise/resources
Toolkit	Getting Down to Basics: Tools to Support LGBTQ Youth in Care	Child Welfare League of America & Lambda Legal	http://www.lambdalegal.org/sites/default/files/gdtb_2013_complete.pdf

7. Ensuring Safe & Affirming Housing for LGBTQ+ Youth

Purpose

To ensure professionals, volunteers, and caregivers meet the specific housing needs of LGBTQ+ youth. While the principles and policies contained in "Services" applies to housing, there are also principles and policies that are specific to housing.

Principles

The following principles are particularly relevant to Housing for LGBTQ+ Youth.

2. **Meeting the specific needs of LGBTQ+ youth is a matter of health, safety, and well-being.** Failure to provide safe and affirming care jeopardizes the health, safety, and well-being of LGBTQ+ youth. As such, they are entitled to access to resources and services from informed and trained professionals, volunteers, and caregivers within an environment that is "safe and affirming."

3. **The health, safety, and well-being of youth is the priority.** Professionals, volunteers, and caregivers' paramount priority is to ensure the health, safety, and well-being of youth.

4. **Youth have a right to self-determination.** Every youth has the right to acknowledge, declare, and live authentically according to their personal identity—including their sexual orientation, gender identity, and gender expression—without harm, judgment, dismissal, or coercion to change.

6. **LGBTQ+ youth are entitled to equitable services and resources.** LGBTQ+ youth have specific strengths and resiliency, in addition to specific challenges and needs. Therefore, they require equitable services and resources to their non-LGBTQ+ counterparts.

Policies

1. **Screening of caregivers.** Agencies or organizations responsible for supervising or licensing caregivers will explicitly verify and confirm that prospective caregivers and placements will uphold the basic rights of youth as outlined in "Rights of Youth" in the Protocol.[20]

2. **Safer searches.** When a search of a youth is necessary and legally permitted, professionals will allow transgender or intersex youth to choose the gender of the person who will search them.[21]

3. **Isolation as a last resort.** Professionals, volunteers, and caregivers will not use isolation or segregation as a default means to protect LGBTQ+ youth from violence or harassment.[22] In

---

[20] Adapted from Stoessel, T. Y. (2013). Addressing the Harm of Silence and Assumptions of Mutability: Implementing Effective Non-Discrimination Policies for Lesbian, Gay, Bisexual, Transgender, and Queer Youth in Foster Care. *UC Davis Journal of Juvenile Law and Policy, Winter.*

[21] Adapted from Cook County Juvenile Temporary Detention Center. (2013)*; New York State Office of Children and Family Services: Lesbian, Gay, Bisexual, Transgender and Questioning Youth (PPM 3442.00).*

[22] Adapted from Stoessel, T. Y. (2013).

consultation with youth impacted, professionals, volunteers, and caregivers will work to identify alternative means of protection. Isolation will be a last resort and minimized.[23]

4. **Safer facilities.** Professionals, volunteers, and caregivers will ensure youth are able to use gender segregated facilities, such as restrooms and locker rooms, consistent with their gender identity. Transgender, intersex, and youth with privacy concerns will be permitted to shower separately from other youth.[24]

Tools

	Title	Author	Link
Resources for Recruiting Placements	Youth Topics / LGBT: Child Welfare	Youth.gov	http://youth.gov/youth-topics/lgbtq-youth/child-welfare
	Tools and Resources: Diverse Populations	National Resource Center for Diligent Recruitment at AdoptUSKids	http://www.nrcdr.org/diverse-populations/tools-and-resources
Webinars	LGBT-Headed Foster and Adoptive Families: Youth Perspectives	AdoptUSKids and National Resource Center for Permanency and Family Connections	http://video.adoptuskids.org/v/Webinar/lgbt-headed-foster-and-adoptive-families/lib/playback.html
Guidelines: Group Care Facilities	A Place of Respect: A Guide for Group Care Facilities Serving Transgender and Gender Non-Conforming Youth	Jody Marksamer, National Center for Lesbian Rights; Dean Spade and Gabriel Arkles, Silvia Rivera Law Project	http://www.nclrights.org/wp-content/uploads/2013/07/A_Place_Of_Respect.pdf
PREA	Prison Rape Elimination Act Juvenile Facility Standards	PREA Resource Center, United States Department of Justice	http://www.prearesourcecenter.org/sites/default/files/library/preafinalstandardstype-juveniles.pdf

---

[23] For additional research, see Marksamer, J., Spade, D., & Arkles, G. (2011). A Place of Respect: A Guide for Group Care Facilities Serving Transgender and Gender Non-conforming Youth. *San Francisco: National Center for Lesbian Rights.* 24; Cook County Juvenile Temporary Detention Center, 2013; Wilber, Ryan, & Marksamer (2006).

[24] Adapted from Cook County Juvenile Temporary Detention Center (2013); New York State Office of Children and Family Services (2008). Lesbian, Gay, Bisexual, Transgender and Questioning Youth (PPM 3442.00). *Juvenile Justice and Opportunities for Youth*; Stoessel, T. Y. (2013).

8. Ensuring Safe & Affirming Healthcare for LGBTQ+ Youth

Purpose

To ensure professionals, volunteers, and caregivers meet the specific healthcare needs of LGBTQ+ youth, especially transgender youth. While the principles and policies contained in "Services" applies to healthcare, there are also principles and policies that are specific to healthcare.

Principles

The following principles are particularly relevant to Healthcare for LGBTQ+ Youth.

2. **Meeting the specific needs of LGBTQ+ youth is a matter of health, safety, and well-being.** Failure to provide safe and affirming care jeopardizes the health, safety, and well-being of LGBTQ+ youth. As such, they are entitled to access to resources and services from informed and trained professionals, volunteers, and caregivers within an environment that is "safe and affirming."

3. **The health, safety, and well-being of youth is the priority.** Professionals, volunteers, and caregivers' paramount priority is to ensure the health, safety, and well-being of youth.

4. **Youth have a right to self-determination.** Every youth has the right to acknowledge, declare, and live authentically according to their personal identity—including their sexual orientation, gender identity, and gender expression—without harm, judgment, dismissal, or coercion to change.

5. **LGBTQ+ youth are individuals.** While the sexual orientations, gender identities, and gender expressions of LGBTQ+ youth may be part of their identity, it is not all of their identity. LGBTQ+ youth's needs, experiences, strengths, and challenges are shaped by many factors aside from sexual orientation, gender identity, and gender expression, including but not limited to race, ethnicity, religion, ability, and socio-economic status.

6. **LGBTQ+ youth are entitled to equitable services and resources.** LGBTQ+ youth have specific strengths and resiliency, in addition to specific challenges and needs. Therefore, they require equitable services and resources to their non-LGBTQ+ counterparts.

Policies

1. **Prohibition on so-called "conversion therapy."** Professionals will not contract with any provider that attempts to change, or supports attempts to change, a youth's sexual orientation, gender identity, or gender expression.[25] Professionals will explicitly prohibit volunteers and caregivers from attempting to change or supporting attempts to change a youth's sexual orientation, gender identity, or gender expression.

2. **LGBTQ+ affirming healthcare.** Professionals will ensure LGBTQ+ youth are provided healthcare, including medical and behavioral healthcare, by LGBTQ+ affirming health care providers.[26]

---

[25] Adapted from Annie E. Casey Foundation (2015); Wilber, Ryan, & Marksamer (2006).

[26] Adapted from Annie E. Casey Foundation (2015).

3. **Transgender healthcare.** Professionals will ensure transgender youth are provided transition-related healthcare, such as hormones, when prescribed or recommended by the youth's health care provider. [27]

Tools

	Title	Author	Link
Healthcare Guidelines	Guidelines for the Primary and Gender-Affirming Care of Transgender and Gender Nonbinary People 2nd Edition	Center for Excellence for Transgender Health Department of Family & Community Medicine University of California, San Francisco	http://transhealth.ucsf.edu/pdf/Transgender-PGACG-6-17-16.pdf
	Lesbian, Gay, Bisexual, and Transgender Health	Centers for Disease Control and Prevention	http://www.cdc.gov/lgbthealth/
Standards of Care	Standards of Care for Transgender Health	World Professional Association for Transgender Health	https://s3.amazonaws.com/amo_hub_content/Association140/files/Standards%20of%20Care%20V7%20-%202011%20WPATH%20(2)(1).pdf
Transgender Health Care Clinic and Information	Gender Clinic	Seattle Children's Hospital	http://www.seattlechildrens.org/clinics-programs/gender-clinic/
Health Care Resources Directory	Health & Wellness Resources for Seattle's LGBTQ Communities	The NW Network of Bi, Trans, Lesbian, and Gay Survivors of Abuse	http://www.nwnetwork.org/local-resources
Crisis Intervention and Suicide Prevention	Trevor Support Center	The Trevor Project	http://www.thetrevorproject.org/section/trevor-support-center

---

[27] Adapted from New York State Office of Children and Family Services (2008).

9. Responding to Families of LGBTQ+ Youth

Purpose

To assess families' attitudes and beliefs towards LGBTQ+ people and the impact of any negative attitudes or beliefs, and to provide families with accurate, free, and accessible information and reconciliation services if warranted.

Principles

The following principles are particularly relevant to Responding to Families.

2. **Meeting the specific needs of LGBTQ+ youth is a matter of health, safety, and well-being.** Failure to provide safe and affirming care jeopardizes the health, safety, and well-being of LGBTQ+ youth. As such, they are entitled to access to resources and services from informed and trained professionals, volunteers, and caregivers within an environment that is "safe and affirming."

3. **The health, safety, and well-being of youth is the priority.** Professionals, volunteers, and caregivers' paramount priority is to ensure the health, safety, and well-being of youth.

4. **Youth have a right to self-determination.** Every youth has the right to acknowledge, declare, and live authentically according to their personal identity—including their sexual orientation, gender identity, and gender expression—without harm, judgment, dismissal, or coercion to change.

9. **Making assumptions is harmful.** Making assumptions about youth, whether it is about their sexual orientation, gender identity, or anything else, is harmful to youth.

10. **Collaboration is the key to success.** Implementing truly safe and affirming care will require the collaboration of professionals, volunteers, caregivers, and *youth* from across systems. These players can enhance collaboration by approaching others as if they are doing the best that they can with what they have and know.

Policies

1. **Assessing the impact of anti-LGBTQ+ attitudes and beliefs.**

   a. If a youth has already openly identified as LGBTQ+ to their parent(s)/guardian(s), then professionals will:

      - Inquire about the parent/guardian's attitudes and beliefs with regard to the youth's identity;

      - Make a determination as to whether any negative attitudes and beliefs—even those deeply rooted in religious beliefs and cultural values—impact the youth's immediate health, safety, and well-being and/or put the youth at risk for future harm.

b. If a youth has not identified as LGBTQ+ to their parent(s)/guardian(s) but a parent or guardian espouses anti-LGBTQ+ attitudes or beliefs, then professionals will:

- Refrain from divulging any known information about the youth's sexual orientation or gender identity to the parent(s)/caregiver(s);

- Refrain from making or sharing any assumptions about the youth's sexual orientation or gender identity; and

- Make a determination as to whether any negative attitudes and beliefs—even those deeply rooted in religious beliefs and cultural values—impact the youth's immediate health, safety, and well-being and/or put the youth at risk for future harm.

c. If a professional suspects that a family member's anti-LGBTQ+ attitudes and beliefs may be the source of conflict between a youth and family but the youth does not openly identify as LGBTQ+ and the family has not made anti-LGBTQ+ attitudes and beliefs explicit, then professionals will work with their LGBTQ+ liaison to determine the most appropriate course of action.

2. **Information for families.** When it does not threaten the privacy of youth, professionals will provide families of LGBTQ+ youth with free, accessible, and accurate information regarding the youth's sexual orientation, gender identity, and/or gender expression and the effect of un-affirming, homophobic, and transphobic behavior on the youth's health, safety, and well-being.[28]

---

[28] Adapted from Annie E. Casey Foundation (2014); Cook County Juvenile Temporary Detention Center (2013).

Tools

	Title	Author	Link
Comprehensive Website	Family Acceptance Project (general website)		http://familyproject.sfsu.edu/overview
Resource Guide	A Practitioner's Resource Guide: Helping Families to Support Their LGBT Children	Substance Abuse and Mental Health Services Administration	http://store.samhsa.gov/product/PEP14-LGBTKIDS
	Youth Topics / LGBT: Child Welfare	Youth.gov	http://youth.gov/youth-topics/lgbtq-youth/child-welfare
	Rise Foster Youth Services Resources	Los Angeles LGBTQ Center RISE Initiative	https://lalgbtcenter.org/rise/resources
Washington Family Support Directory	Family Support Groups	Gender Diversity	http://www.genderdiversity.org/family-support-groups/
	PFLAG Washington State Council	PFLAG	http://www.pflagwsc.org/
Education and Support Services	Family Support	Gender Diversity	http://www.genderdiversity.org/support/

10. Establishing Expectations for Professionals, Volunteers, and Caregivers

Purpose

To ensure professionals, volunteers, and caregivers provide safe and affirming care to LGBTQ+ youth and that they use data to continue to improve their systems for LGBTQ+ and all youth, with the ultimate goal of improving the health, safety, and well-being of all youth.

Principles

The following principles are particularly relevant to Accountability for Professionals, Volunteers, & Caregivers.

2. **Meeting the specific needs of LGBTQ+ youth is a matter of health, safety, and well-being.** Failure to provide safe and affirming care jeopardizes the health, safety, and well-being of LGBTQ+ youth. As such, they are entitled to access to resources and services from informed and trained professionals, volunteers, and caregivers within an environment that is "safe and affirming."

3. **The health, safety, and well-being of youth is the priority.** Professionals, volunteers, and caregivers' paramount priority is to ensure the health, safety, and well-being of youth.

7. **Understanding LGBTQ+ youth is a core competency for every professional, volunteer, and caregiver.** Basic knowledge of sexual orientation, gender identity, and gender expression—including LGBTQ+ identities—is a core competency for every professional, volunteer, and caregiver.

10. **Collaboration is the key to success.** Implementing truly safe and affirming care will require the collaboration of professionals, volunteers, caregivers, and *youth* from across systems. These players can enhance collaboration by approaching others as if they are doing the best that they can with what they have and know.

Policies

1. **Standards of conduct.** Professionals, volunteers, and caregivers will take accountability for their words and actions. If a professional, volunteer, or caregiver becomes aware that their words or actions have—even unintentionally—insulted, disparaged, or otherwise harmed a youth, that professional, volunteer, or caregiver will acknowledge and apologize.

2. **Individual evaluations.** Evaluation of adherence to the Protocol for Safe & Affirming Care and additional standards set forth in training and/or policies regarding LGBTQ+ youth will be included in evaluations of professionals, volunteers, and caregivers. Such evaluation should include a self-evaluation component.[29]

---

[29] Adapted from Wilber, S., Ryan, C., & Marksamer, J. (2006); ACS, N. NYC ACS Juvenile Justice Intake Form; Department of Youth Services, M. MA Department of Youth Services Dialogue Tree for Disclosure of a Youth's Gender Identity using JJEMS General Assessment E-File.

3. **Confidential complaints.** There will be a mechanism by which youth can make confidential complaints of issues related to sexual orientation, gender identity, and gender expression to a neutral third-party, who investigates such complaints.[30]

4. **Advisory committee.** System leaders will convene an advisory committee—preferably multi-disciplinary and across systems—on a periodic basis to:

    a. Conduct an initial organizational assessment to identify the degree to which their court, agency, or organization provides safe and affirming care to LGBTQ+ youth;

    b. Arrange for initial and ongoing trainings;

    c. Monitor organizational efforts to provide safe and affirming care to LGBTQ+ youth, including periodic reassessments;

    d. Develop clear mechanisms for reporting discrimination or disrespectful treatment;

    e. Develop disciplinary processes that address intimidating, disrespectful, or discriminatory behavior toward LGBTQ+ youth;

    f. Identify an individual directly accountable to leadership for overseeing organizational efforts to provide more culturally competent care to LGBTQ+ youth;

    g. Identify and support staff champions who have special expertise or experience with LGBTQ+ youth;

    h. Evaluate data collected and assess its implications; and

    i. Make recommendations for further improvement.

---

[30] Adapted from New York City Children's Services. (2011). Promoting a Safe and Respectable Environment for Lesbian, Gay, Bisexual, Transgender and Questioning (LGBTQ) Youth and their Families Involved in the Child welfare System; and Guidelines for Promoting a Safe and Respectable Environment for Lesbian, Gay, Bisexual, Transgender and Questioning (LGBTQ) Youth and their Families Involved with DYFJ.

Tools

	Title	Author	Link
Organizational Audit	Quick Organizational Audit: LGBT Visibility & Inclusion	The Northwest Network of Bisexual, Trans, Lesbian, & Gay Survivors of Abuse	http://www.nwnetwork.org/advocacy-tools
Practice Guide	Creating a Juvenile Justice LGBTQ Task Force	National Council on Crime & Delinquency	http://www.nccdglobal.org/sites/default/files/publication_pdf/practice-guide-lgbtq-task-force.pdf
Planning Tool	Improving Emotional and Behavioral Outcomes for LGBT Children/Youth: An Action Planning Tool	American Institutes for Research	http://www.tapartnership.org/docs/Tool%20for%20planning%20improved%20supports%20for%20LGBT%20young%20people%206-1-13.pdf