A Primer on Trans Youth

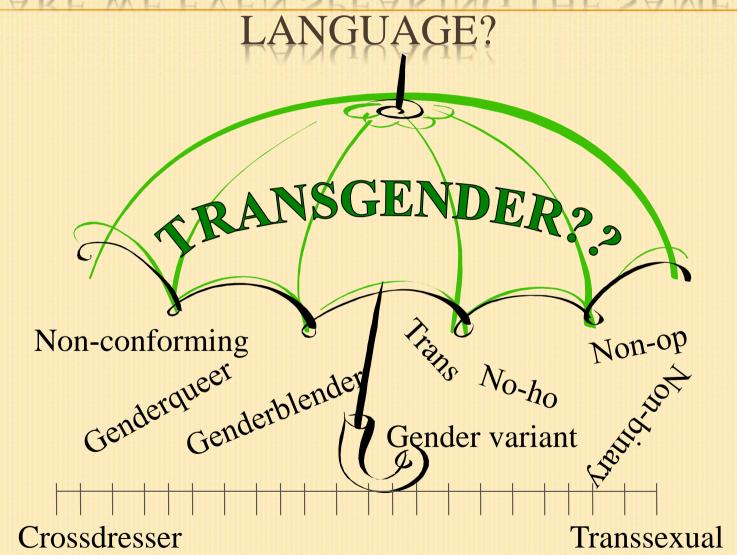
Child Welfare League of America 2013



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ARE WE EVEN SPEAKING THE SAME

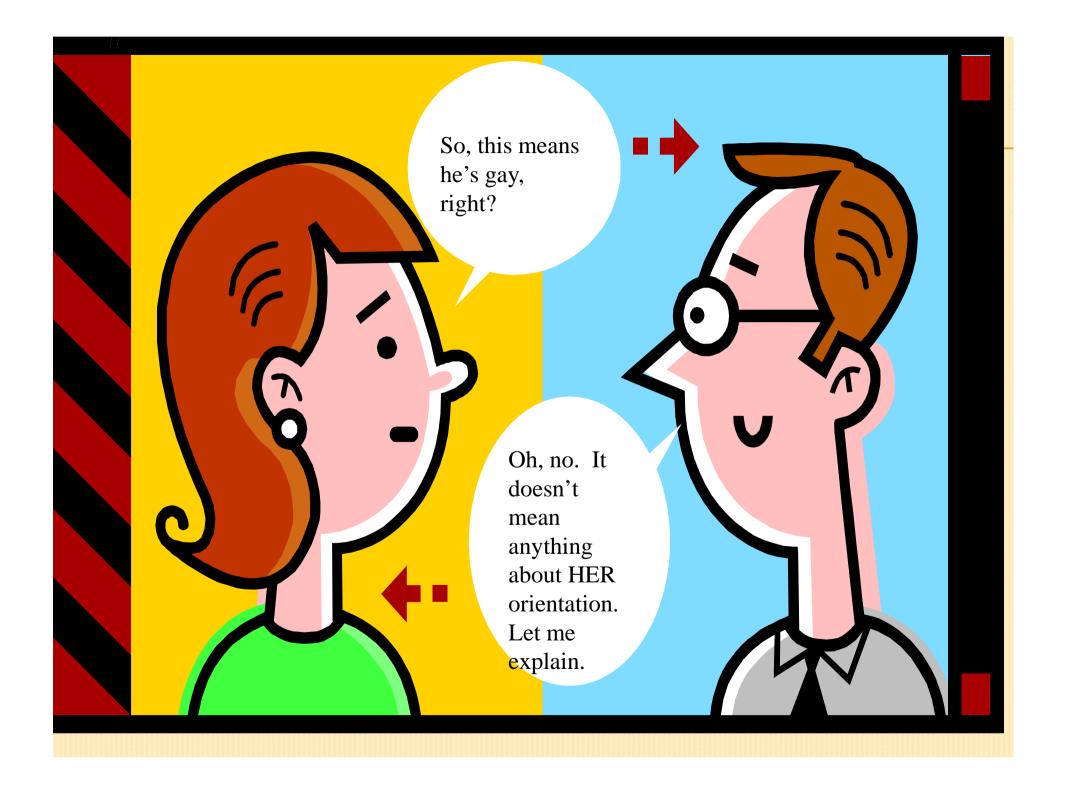


A PRIMER ON TRANS YOUTH

- 1. The difference between sexual orientation & gender identity
- 2. Why is this concept worthy of a discussion?
- 3. A few facts about trans youth in out-of home care
- 4. How young do kids know?
- 5. The basics of becoming a trans-aware provider/advocate
- 6. Suicide risks and Axis 4 considerations

This IS an opportunity to:

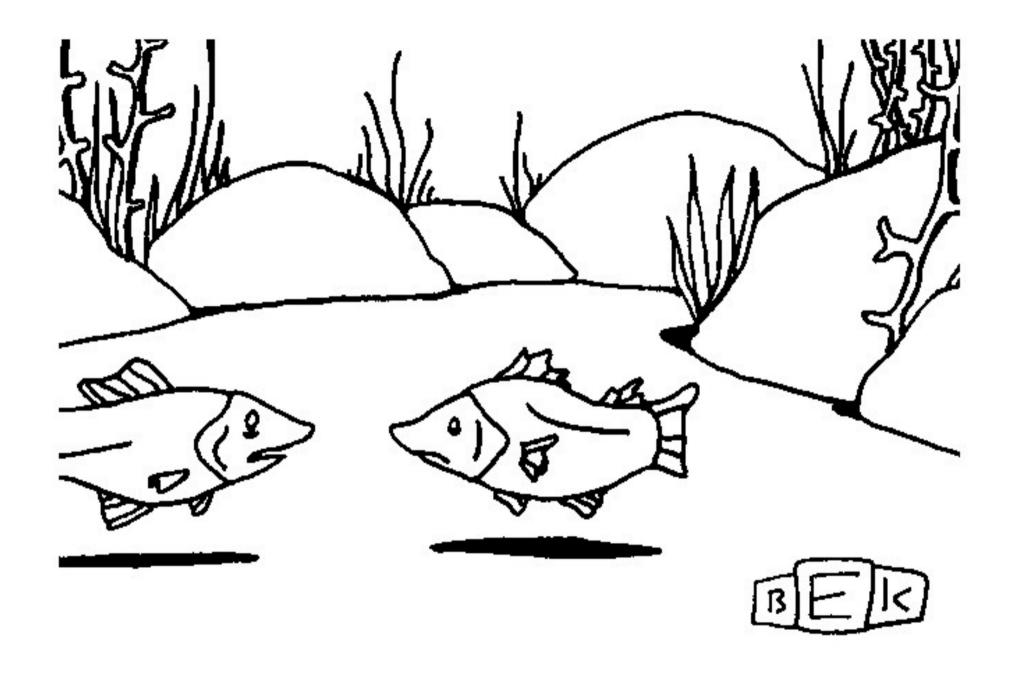
- 1. Gain a greater understanding of gender variance
- 2. Further your appreciation for diversity
- 3. Ask questions and share information
- 4. Get in touch with personal bias
- 5. Better understand the experience of being a transgender/gender variant youth
- 6. Expand your empathy to intentionally include a very marginalized population



WHY ARE WE TALKING ABOUT
TRANSGENDER YOUTH IF IT ONLY
IMPACTS A SMALL PERCENTAGE
OF THE POPULATION?

Because

Youth who identify as transgender or gender variant live in a world that often marginalizes, ignores, or even outright hates them for living in their own skin



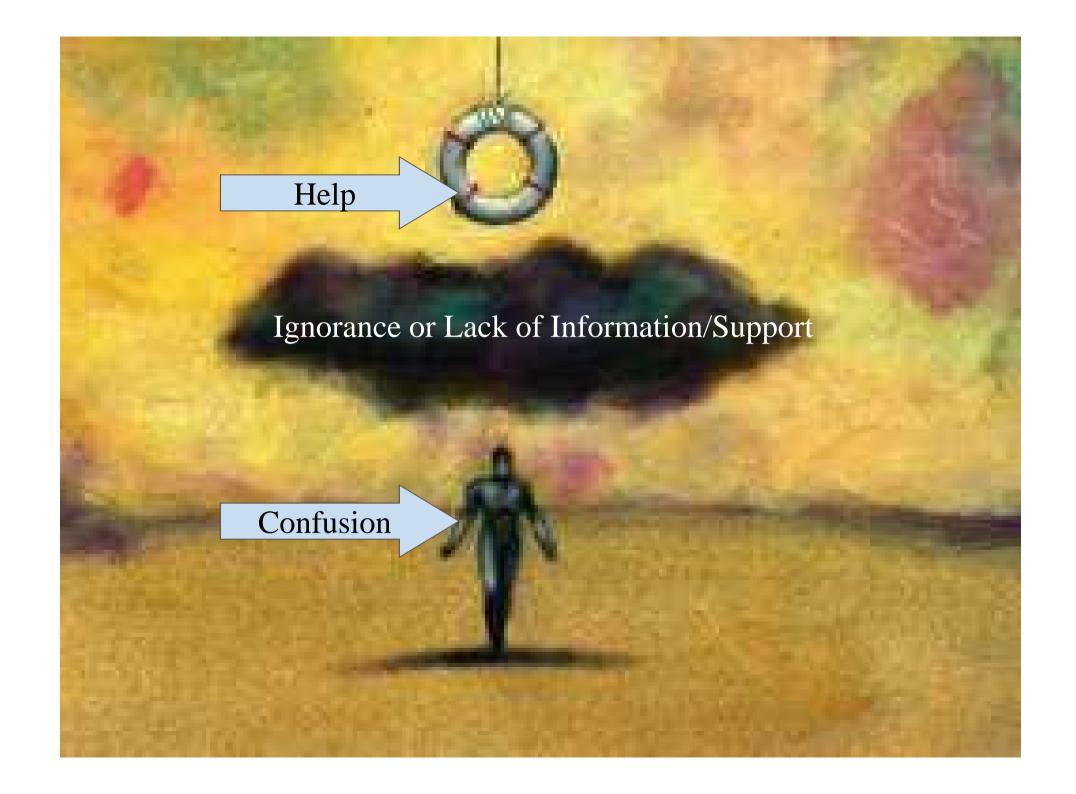
"To tell you the truth, even when I'm in water I don't feel that comfortable."

ALSO KEEP IN MIND...

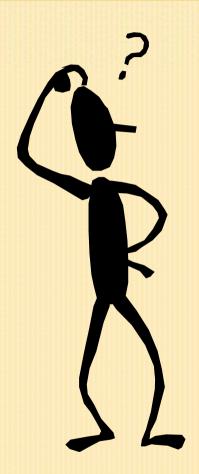
Research shows that young people presenting as transgender will continue on as transgender young adults and adults (DeVries et al, 2010)

De Vries, et al. Puberty suppression in adolescents with gender identity disorder: a prospective follow up study. J Sex ed. 2011 Aug:8(8):2276-83

And, of the thousands of adults I've counseled over the 15 years I've been doing this work, most knew at a very young age (as young as 2) that they didn't feel like the sex they were assigned at birth was correct. You will be seeing these children because family rejection places these children at a higher risk for abuse, neglect, and abandonment by families.



How does this impact MY work?



THE VERY BASICS TO BEING A TRANS-FRIENDLY PROVIDER/CASE WORKER

- 1. When a youth comes out to you, immediately thank them for trusting you
- 2. Ask what name/pronoun they prefer
- 3. Educate your staff
- 4. Ask the client when they were last seen by a medical professional
- 5. Are they taking HRT, and if so, who is prescribing it?
- 6. Do they have a support network?
- 7. Any psychiatric issues inhibiting their ability to successfully come out/transition?
- 8. Be open to self-identities other than TS, TG...

Many patients are reluctant to access care based on their gender identity and the discrimination they have already experienced or anticipate experiencing.

Furthermore, many transyouth have been kicked out of their homes, experienced discrimination on many levels (even within the foster care system) and have a great deal of fear that issues of permanence will never be achieved because of their gender identity.

They are often without role models who have experienced gender variance and find a definitive sense of comfort when people in authority affirm and attempt to understand their unique challenges.

* WPATH SoC (7th version) states that "minority stress" is unique and may, in fact, exacerbate anxiety and depression among transgender, transsexual and gender non-conforming populations.

A Primer for Transyouth

41% of transgender and gender non-conforming people have attempted suicide versus 1.6% of the general population!

Study conducted in 2011 by the National Center for Transgender Equality and the National Gay and Lesbian Task Force

WHY THERAPY IS BENEFICIAL:

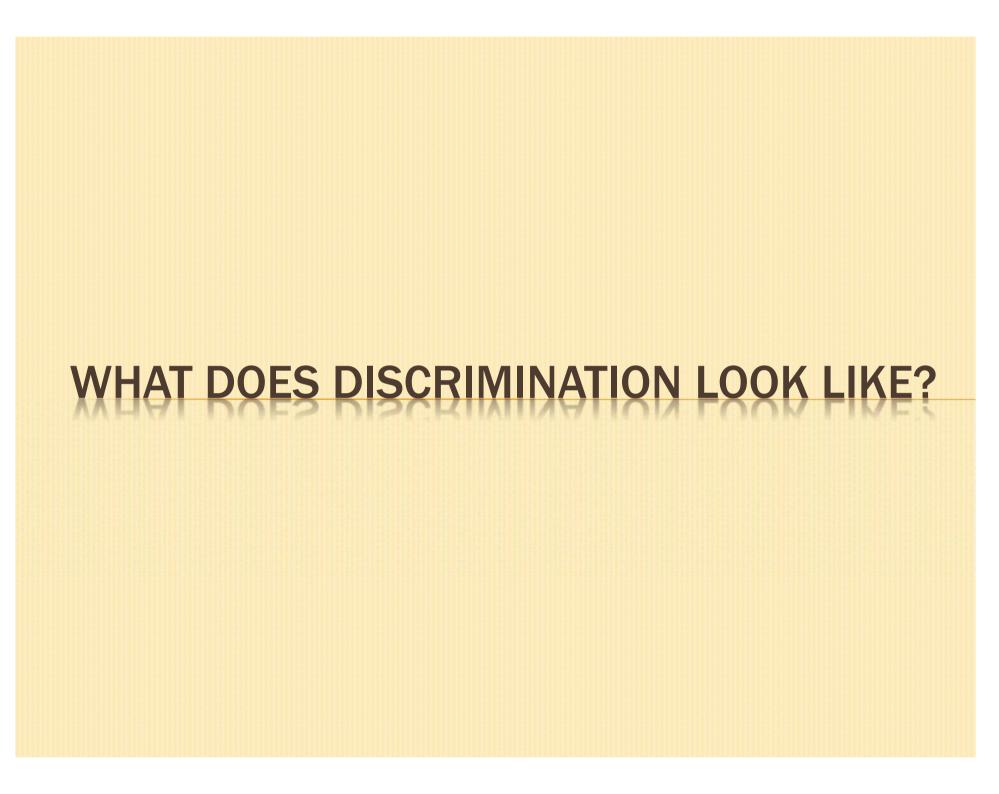
- Work done before therapy
- Assist with self-esteem
- 3. Realistic expectations from family/caregivers/friends/school...
- 4. Assess mental health concerns
- 5. Talk about the spectrum
- 6. Support groups

AXIS 4 Issues:

- Loss of family
 - **×** Loneliness
 - Loss of job
- * Harassment at school
- × Kicked out of house
- Discriminated against
- × No access to healthcare

Common diagnostic presentations

- 1. Anxiety (GAD, PTSD)
- 2. Depression (MDD, Dysthymia)
- 3. Conduct disorder
- 4. Oppositional defiant disorder
- 5. PDD (Asperger's)
- 6. Substance dependence
- 7. Dissociative disorder (Depersonalization)



REFUSING TO RESPECT

- I came in to the detention center dressed as I always did, and they ripped the weave out of my hair, broke off my nails, wiped my makeup off, stripped me of my undergarments, and made me wear male undergarments and clothes.
 - + Mariah, young transgender woman

REFUSING APPROPRIATE CARE

- Access to affirming medical and mental health treatment
- Denial of requests to continue care (i.e. hormone therapy treatments)
- Attempts to change a young person's gender identity is impermissible

REFUSING TO PROTECT

- Failure to respond to reported incidents of verbal, physical, or emotional abuse by
 - + Facility staff
 - + Other residents
 - + School staff
 - + Peers
- Treating the transgender youth as the problem (i.e. inappropriate use of isolation or restraints)

WHAT LAWS PROTECT TRANSGENDER YOUTH IN CARE?

FEDERAL & STATE CONSTITUTIONS

× Equal Protection

+ Requires equal enforcement of the rules in a nondiscriminatory manner

* Due Process

- + Prohibits unreasonable and arbitrary conduct
- Requires procedural safeguards to prevent denials of rights

Freedom of Speech

- + Prohibits improper restrictions on conduct and speech
- Privacy

ANTI-DISCRIMINATION LAWS

* Gender

+ Courts interpret gender discrimination to be very broad and include a failure to conform to sex stereotypes

Gender Identity

+ Fourteen states prohibit discrimination on the basis of gender identity

Disability

+ Gender Identity Disorder may be considered a disability under state anti-discrimination laws

WHAT SHOULD BE DONE TO ADDRESS THE NEEDS OF TRANSGENDER YOUTH?

ACKNOWLEDGE, RESPECT, & SUPPORT

- Use chosen name and pronouns
- Provide transgender youth access to clothes, undergarments, and toiletries based on gender identity
- Treat information related to a young person's gender identity as private
- Provide access to safe and private restrooms and shower facilities

APPROPRIATE INDIVIDUALIZED ASSESSMENT

- The default should be to house a young person based on gender identity
- All placement and classification determinations should be based on an individualized assessment
 - + For example, some transgender males may want to be housed with the females for safety reasons
 - + This process cannot be influenced by misconceptions and stereotypes of transgender people

PROPER PROTECTIONS

- Staff should respond quickly and adequately to reports of harassment of transgender youth
- Create a clear policy and procedure for reporting and investigating incidents of harassment
- Transgender youth should not be blamed for the harassment or placed in isolation as a means of protection
- Take proactive measures to foster a safe and supportive environment
- Provide support and advocacy in other settings such as school

ADEQUATE AND APPROPRIATE HEALTH CARE

- Provide transgender youth access to genderaffirming mental health and medical care
- Continue all transition-related medications and treatments during custody
- Screen providers to ensure that the provider will not seek to change the young person's gender identity

SUPPORTIVE AND AFFIRMING PROGRAMMING

- × Identify local resources for transgender youth
- Provide transition programming that will assist youth in addressing the unique issues faced by transgender adults

LEGAL/POLICY RESOURCES

- A Place of Respect: A Guide for Group Care Facilities Serving Transgender and Gender Non-Conforming Youth
- Hidden Injustice: LGBT Youth in Juvenile Courts
- Guidelines for the Management of Information Related to the Sexual Orientation, Gender Identity and Expression of Children in Child Welfare Settings
- CWLA Best Practices Guidelines: Serving LGBT Youth In Out-of-Home Care
- Breaking the Silence: LGBTQ Youth in Foster Care Tell Their Stories



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