Getting Down to Basics
Tools to Support LGBTQ Youth in Care

Working with Transgender Youth

Like all young people in care, transgender youth are entitled to bias-free attention to their unique needs and to be safe in their placements and services. They should be supported in their gender identity and never required to conform to traditional conceptions of gender in order to receive appropriate care. Child welfare professionals who work with transgender young people should be educated about transgender issues and prepared to work sensitively with these clients. Knowledge about lesbian, gay and bisexual issues may be helpful in working with transgender young people, but gender identity issues may be very different from issues related to sexual orientation.

KNOW WHAT IT MEANS TO BE TRANSGENDER AND USE THE TERM APPROPRIATELY.

“Transgender” is an umbrella term used to describe a person whose self-image of their gender differs from the norms traditionally associated with the sex assigned to them at birth based upon their physiological anatomy. For example, a transgender woman is a person who identifies as a female, but was assigned “male” at birth. Conversely, a transgender man is a person who identifies as a male, but was assigned “female” at birth. The term is also used to describe a person who may be gender nonconforming — that is, whose behaviors, mannerisms or clothing are perceived by others to be inappropriate for their birth sex based on societal beliefs or standards. The terms “trans” and “genderqueer” are two additional terms frequently used by transgender and gender nonconforming youth.

EDUCATE YOURSELF ON GENDER IDENTITY DISORDER.

The incongruity between a person’s internal sense of self as either male or female and their anatomical or birth sex can lead to depression and severe emotional distress. When these feelings rise to clinically significant levels, a person may be suffering from gender identity disorder (GID), a diagnosable medical condition found in the Diagnostic and Statistical Manual (DSM). Treatment of GID is focused on providing support, not changing a person’s gender identity. It may include services like individual and family counseling and such medical care as hormone therapy and surgery to align the physical body with the internal sense of self as male or female. Once transgender people are able to express their gender identity, they are able to go on to lead happy, fulfilled lives. As a result, some people oppose the classification of transgender identity as a disorder, while others recognize the advantages of having explicit standards of health care for transgender individuals. All concur, however, that transgender youth need to be supported, affirmed and safe and free to express their identities.
BE AWARE OF HEALTH CARE PROTOCOLS FOR TRANSGENDER INDIVIDUALS.
The World Professional Association for Transgender Health (www.wpath.org) has developed internationally recognized protocols for diagnosing and treating youth and adults with GID. These protocols recommend that transgender young people gain real-life experience through dressing in the clothes and using names and pronouns associated with their preferred gender. Young people age 16 years and older are seen as candidates for an individualized assessment for medical treatment to enable them to begin their physiological transition from one gender to another.

ALLOW TRANSGENDER YOUTH TO EXPRESS THEIR GENDER IDENTITY.
Allow transgender youth to express their gender identity through their chosen attire, names and mannerisms without punishment or ridicule. Don’t assume that transgender youth are “acting out” when they express their gender identity. The clothing and personal style that an individual chooses are an important aspect of self-expression. Support transgender youth in these choices and challenge restrictive policies that may not allow such freedom.

“ My main concern with the social service system is the lack of understanding of transgender issues. As a transgender woman, my experiences and needs are different from gay and lesbian youth in care. ”

– Youth in Care

ENSURE THAT TRANSGENDER YOUTH HAVE ACCESS TO TRAINED AND AFFIRMING MEDICAL AND MENTAL HEALTH CARE PROVIDERS.
Advocate for transgender youth to receive competent and affirming mental health and medical services, including access to monitored use of hormones if deemed medically appropriate. When youth don’t have access to the health care services they need, they may resort to buying illegal medications and hormones from the streets. Using hormones without medical supervision can lead to serious medical injury, HIV and other sexually transmitted infections. Transgender youth may also engage in dangerous or illegal behaviors to pay for these services.

MAKE ROOM ASSIGNMENTS AND HOUSING DECISIONS BASED ON THE WELL-BEING OF INDIVIDUAL YOUTH.
In sex-segregated facilities, don’t assign transgender youth to the girls’ or boys’ units strictly based on their anatomical sex. Instead, make individualized decisions based on the physical and emotional well-being of the youth, taking into account their level of comfort and safety, the degree of privacy afforded, the types of housing available and the recommendations of qualified mental health professionals. The safety of transgender youth should be protected without resorting to isolating or segregating them from the general population. However, single occupancy rooms, if available, may be an acceptable alternative for transgender youth in sex-segregated facilities.

ENSURE THAT TRANSGENDER YOUTH ARE SAFE IN THEIR PLACEMENT AND SCHOOL.
Identify and closely monitor appropriate placements for transgender youth that ensure their safety and provide support.

“ The child welfare system needs to respect the maturity of transgender young people and the decisions they make. ”

– Youth in Care

USE YOUNG PEOPLE’S PREFERRED NAMES AND PRONOUNS.
Respect a transgender young person’s choice of name and gendered pronouns that best reflects their sense of self as female or male. By doing so, you validate their identity and sense of self-worth. If you’re unsure which pronoun an individual youth prefers, ask sensitively rather than simply assuming what they would prefer.
Educate others involved in the placement, including child care staff, other youth and foster parents. Transgender youth often face serious safety challenges at school. It’s your responsibility to advocate on behalf of the transgender youth in your care to ensure their safety in school and in their neighborhood.

“Adolescents may be eligible for puberty-delaying hormones as soon as pubertal changes have begun ... Adolescents may be eligible to begin masculinizing or feminizing hormone therapy as early as age 16, preferably with parental consent.

— Standards of Care, World Professional Association for Transgender Health

AVOID ASSUMPTIONS ABOUT TRANSGENDER YOUNG PEOPLE’S SEXUAL ORIENTATION.
Transgender youth may identify as gay, lesbian, bisexual, questioning, heterosexual or differently. It’s important to keep in mind that sexual orientation is separate from, and not determined by, one’s gender identity and expression.

“... The general goal of psychotherapeutic, endocrine or surgical therapy for persons with gender identity disorders is lasting personal comfort with the gendered self in order to maximize overall psychological well-being and self-fulfillment.

— Standards of Care, World Professional Association for Transgender Health

LOCATE AND DEVELOP RESOURCES TO HELP TRANSGENDER YOUNG PEOPLE WITH UNIQUE LEGAL ISSUES.
Transgender young people may need assistance and advocacy to obtain proper legal identity documents like birth certificates, state identification cards and drivers licenses that reflect the gender with which they identify. They may also need help to obtain a legal name change. Child welfare systems have the responsibility to locate and help develop these resources for transgender young people in their care.

PROVIDE TRANSGENDER-FRIENDLY ROLE MODELS AND MENTORS.
Transgender youth, like all youth, need connections to adult role models and mentors. For transgender young people in out-of-home care systems, these positive connections can be harder to find but are nonetheless crucial for their healthy development. Frequently cut off from their families of origin, and part of a misunderstood minority, transgender young people can find a sense of family and belonging from mentors and community role models.

PROVIDE SUPPORT IN FINDING EMPLOYMENT.
Transgender youth face especially steep barriers to employment. Finding employment is even more complicated for those transgender youth whose identity documents do not match their chosen names and gender expression. Without adequate educational and job training opportunities, they’re at a further disadvantage. Transgender young people aging out of child welfare systems can be left with few options other than to engage in illegal and harmful activities in order to survive. Meaningful opportunities should be offered to transgender young people for education, job training and legal employment.
The many other components of Getting Down to Basics offer additional support.

This tool kit includes additional handouts covering a variety of topics addressing the needs of LGBTQ youth and adults involved with the child welfare and juvenile justice systems, such as Basic Facts About Being LGBTQ, Caseworkers with LGBTQ Clients, Teaching LGBTQ Competence in Schools of Social Work, Families Supporting an LGBTQ Child, Information for LGBTQ Youth in Care and LGBTQ Youth Resources. To order free copies of the Getting Down to Basics tool kit, contact Lambda Legal at 1-866-LGBTeen (toll free) or 212-809-8585, or download it for free at www.lambdalegal.org or www.cwla.org.

NASW recognizes that there is considerable diversity in gender expression and identity among our population and believes that people of diverse gender — including those sometimes called ‘transgender’ — should be afforded the same respect and rights as any other person. A nonjudgmental attitude toward gender diversity enables social workers to provide maximum support and services to those whose gender departs from the expected norm.

– Social Work Speaks Abstract, National Association of Social Workers