Lesbian, Gay, Bisexual, Transgender, and Questioning Youth/clients; Promoting Dignity and Respect

I. POLICY

It is the policy of the AGENCY to maintain and promote safe, respectful, and affirming environments for lesbian, gay, bisexual, transgender, queer, and questioning (LGBTQ) youth/clients in AGENCY-operated residential and community programs. All AGENCY employees, contract providers and volunteers are prohibited from engaging in any form of discrimination against or harassment based on actual or perceived sexual orientation, gender identity, and gender expression. AGENCY is committed to providing a healthy and accepting setting for all youth placed in facilities and clients served by community programs by training staff and educating youth/clients on LGBTQ issues. Any discrimination against or harassment of youth/clients, including by other youth/clients, will not be tolerated. The provision of services within AGENCY facilities and programs will be based on professional standards and will be free of institutional and personal bias. AGENCY staff will recognize and address the individual needs of the youth/clients and will apply AGENCY policies and practices fairly to all youth/clients in AGENCY facilities and
community programs.

II. DEFINITIONS

LGBTQ – an acronym commonly used to refer to lesbian, gay, bisexual, transgender, queer, and questioning individuals.

LGBTQ youth/clients – For purposes of this policy, LGBTQ youth/clients includes all youth/clients who have self-identified as lesbian, gay, bisexual, transgender, queer, or questioning their sexual orientation or gender identity.

Sexual Orientation – refers to an individual’s emotional, romantic, and/or sexual attraction to other persons. Examples of sexual orientations may include gay, lesbian, straight, bisexual, pansexual, and asexual.

Gender identity – refers to a person’s concept of self as woman/girl, man/boy, a blend of both, another gender, or no gender. A person’s gender identity may be the same or different from their assigned sex at birth.

Cisgender – refers to a person whose gender identity matches their assigned sex at birth.

Gender expression – refers to the way a person expresses their gender through clothing, appearance, behavior, speech, etc. A person’s gender expression may vary from the norms traditionally associated with their assigned sex at birth. Gender expression is a separate concept from sexual orientation and gender identity.

Gender nonconforming – having or being perceived to have gender characteristics and/or behaviors that do not conform to traditional or societal expectations. These expectations vary across cultures and have changed over time. Gender nonconforming people may or may not identify as LGBTQ.

Lesbian – refers to a woman/girl who is emotionally, romantically, and/or sexually attracted to other women/girls.

Gay – refers to a person who is emotionally, romantically, and/or sexually attracted to people of the same gender. Sometimes, it may be used to refer to gay men and boys only. This term is currently preferred over the term “homosexual.”

Bisexual – refers to a person who is emotionally, romantically, and/or sexually attracted not exclusively to people of one sex or gender.

Asexual – refers to a person who may not experience sexual attraction or has little interest in sexual activity; asexuality exists along a spectrum.

Pansexual – refers to a person who is emotionally, romantically, and/or physically attracted to people regardless of their sex, gender, and/or gender identity. A pansexual person may be, but is not necessarily, a person who identifies as bisexual.

Straight – refers to a person who is emotionally, romantically, or sexually attracted to people of the opposite sex or gender.
Transgender – an adjective and umbrella term that describes a person/people whose sex assigned at birth differs (in varying degrees) from their gender identity.

Transgender female – refers to a person who was assigned the sex of male at birth and who identify as female. Similarly, the terms transgender girls and transgender women refer to those who now identify as girls or women.

Transgender male – refers to a person who was assigned the sex of female at birth and who identify as male. Similarly, the terms transgender boys and transgender men refer to those who now identify as boys or men.

Misgendering – transgender and gender nonconforming people may choose to be referred to with a pronoun consistent with their gender identity rather than the sex assigned to them at birth. Misgendering refers to the intentional use of pronouns based on the sex assigned to a person at birth instead of the pronouns the person has requested be used.

Deadnaming – transgender or gender nonconforming youth/clients may choose to be referred to by a name consistent with their identity rather than their legal name. Deadnaming refers to the intentional use of a youth/client’s legal name instead of their chosen name.

Questioning – refers to a person who is exploring or questioning issues of sexual orientation or gender identity or expression. Some questioning people may ultimately identify as gay, lesbian, bisexual, or transgender; others may identify as heterosexual and cisgender.

Queer – has historically been used in derogatory or violent ways toward LGBTQ people. However, the term has been reclaimed for positive use by some LGBTQ individuals and communities. The positive usage of this term intentionally does not have a strict definition, and there are three general ways it is used:

- A sexual orientation identity, used instead of or in addition to identities such as lesbian, gay, bisexual, asexual, etc.
- A way to broadly refer to people who are not heterosexual or cisgender (Ask an individual if they use this word to describe themselves as some people do not like the term).
- A sociopolitical term to signify resistance to the "status quo" of sexuality and/or gender. The term queer should never be used pejoratively.

Intersex – a term describing people who have physical sex characteristics (i.e., chromosomes, genitals, and/or gonads) that are not considered typical within the binary framework of male/female. Some examples of these conditions include ambiguous external genitalia, lack of typical responsivity to sex-related hormones, and inconsistency between external genitalia and reproductive organs.

Nonbinary – refers to individuals who do not identify as male or female, but as neither, as a combination, and/or as something else.
III. PROCEDURES

A. Training of Staff

AGENCY will provide strength-based training to all appropriate AGENCY staff regarding the goals and requirements of this policy. Training will focus on raising awareness and staff capacity to respond to sexual orientation, gender identity, and gender expression (often referred to as SOGIE) issues in residential settings and community programs. Training will foster understanding of common issues faced by LGBTQ youth/clients and their families, and will promote behaviors and interactions that demonstrate affirmation, dignity, and respect. Training will also include identifying behaviors that constitute discrimination and harassment, and the procedures for preventing, intervening on, and reporting such behavior.

B. Resource and Policy Dissemination to Youth/clients

AGENCY will provide written and verbal information to all youth/clients in AGENCY-operated facilities and community programs regarding this policy, including their rights and responsibilities under this policy and the procedures for reporting complaints.

1. AGENCY programs will affirm the identity of the youth/clients they serve by creating supportive environments. It is important that educational books and other reading materials for youth/clients interested in learning more about LGBTQ identity are available and reflect diverse experiences and identities. AGENCY will make reading materials available in languages other than English as needed.

2. LGBTQ literature and other signs/posters that indicate staff are knowledgeable and open to communication should be visible in the common areas and elsewhere in facilities.

3. AGENCY will provide youth/clients with access to supportive resources containing age appropriate LGBTQ information, including a reading list, website list of community resource supports, and advocacy groups.

C. Disclosure

1. Staff should not make assumptions about a youth/client’s sexual orientation or gender identity. There are no tools or instruments to assess a person’s sexual orientation or gender identity. Staff can only know a youth/client’s sexual orientation or gender identity if they self-disclose.

2. Youth/clients may disclose their sexual orientation and/or gender identity to staff when they are ready. Staff should promote a safe and affirming environment and trusting relationship for such disclosure. When youth/clients are placed with AGENCY, intake staff will provide opportunities for youth/clients to disclose their sexual orientation and gender identity through direct inquiry.

3. If youth/clients disclose to staff that they are LGBTQ, it is important to talk with them about it in an open, affirming, and understanding fashion. Staff should acknowledge the disclosure and discuss with the youth/clients what it means for them to be lesbian, gay, bisexual, transgender, queer or questioning to the extent
the youth/clients wants or needs to have this conversation.

4. It is important to respect a youth/client’s confidentiality. Staff may only share information disclosed by youth/clients regarding their sexual orientation and gender identity with individuals outside of the treatment team if the youth/client consents to such disclosure, as necessary to protect the youth/clients from harm or is otherwise authorized by statute or regulation. Youth/clients will be informed that information disclosed regarding their sexual orientation and gender identity may be discussed with other members of the treatment team in accordance with the above stated guidelines. Staff members must inform youth/clients that, under certain circumstances, such as in connection with a placement/transfer request, AGENCY may be required to disclose to the youth/client’s family that the youth/client has raised issues relating to gender identity or gender expression in relation to their placement. When AGENCY is required to make such a disclosure, staff members will be affirming of the youth/client’s gender identity or expression and provide the youth/client’s family with resources to better understand the youth/client’s LGBTQ identity.

D. Youth/client Placement

Youth/clients can request placement in or transfer to a facility based upon their gender identity during the intake process or at any other time. Requests for such placement will be forwarded to the [insert appropriate committee] for review and disposition. The committee will begin its review with the presumption that the most appropriate placement for a youth/client is one that affirms their gender identity and/or where the youth/client feels safest. In making its decision, the [appropriate committee] must carefully consider all relevant factors including but not necessarily limited to: the youth/client’s informed request/consent, their ability to understand the implications of their request, the youth/client’s emotional and physical safety, informed consent from the youth/client’s legal guardian where legally required, the youth/client’s developmental stage in transition to their identified gender, and mental health and medical assessments. Where indicated, the [appropriate committee] will confer with the youth/client’s clinician, case manager, medical staff, direct care staff, and any others involved in mental health, psychosocial, education, and medical assessments to account for the recommendations of the treatment team. The [appropriate committee] will work closely with AGENCY administration to assess all relevant factors included in making this decision and to support the success of such youth/client placements. If a youth/client is not placed in a facility that matches their gender identity, the facility in which the youth/client is placed must respect and affirm the youth/client’s gender identity and meet the youth/client’s emotional and psychological needs.

E. Prevention of Harassment and Discrimination

AGENCY staff are responsible for modeling appropriate and affirming behavior at all times. AGENCY staff will not tolerate discriminatory or harassing behavior by staff or youth/clients toward youth/clients on the basis of actual or perceived sexual orientation, gender identity, or gender expression, and must take immediate action to intervene in any such situations. AGENCY staff are required to report all incidents of staff discrimination toward youth/clients on the basis of the youth/client’s actual or perceived sexual orientation, gender identity, or gender expression. AGENCY staff will actively engage and redirect youth/clients who engage in harassing or bullying
behaviors. Staff will not attempt to convince LGBTQ youth/clients to reject, change, or hide their sexual orientation or gender identity.

F. Language, Name, and Pronouns

1. Staff should use the words gay, lesbian, bisexual, queer, and transgender in an appropriate context when talking with youth/clients about sexual and gender diversity, and not use the value-laden terms such as homosexual or transvestite. There are many ways in which LGBTQ individuals identify that are not all covered in the Definitions section of this policy. These identities vary across individuals and can change over time. To the best of their ability, staff should use the language that youth/clients use to describe themselves. Staff should also use inclusive and gender-neutral language as much as possible. When staff become aware of a new term with which they are not familiar, they will try to understand the term in order to stay current with the evolving language used by LGBTQ youth/clients.

2. It is AGENCY’s policy to allow youth/clients to request use of a chosen first name rather than their legal name. Consistent with this policy, youth/clients may designate a first name that they wish to use. Staff members will address and refer to the youth/client by their requested name and pronouns, regardless of placement, appearance, anatomy, medical history, sex assigned at birth, or legal name. Staff should understand that the ability to choose a name and/or a pronoun(s) consistent with the youth/client’s gender identity, rather than the youth/client’s sex assigned at birth, may be especially important to transgender youth/clients. Staff are prohibited from intentionally misgendering or deadnaming youth/clients. The youth/client’s requested name and pronouns should be used in documentation relating to the youth/client, while also identifying the youth/client’s legal name, except when such use may disclose the youth/client’s gender identity to persons the youth/client is not comfortable having such information. Youth/clients will not be permitted to request names affiliated with gangs or that otherwise present safety issues. LGBTQ youth/clients requesting use of a name or pronoun will be prompted to discuss in what context and with whom their requested name and pronouns will be used. This is important because the youth/client may not yet have disclosed their gender identity to family members. Youth/clients may elect to be referred to by their requested name and pronouns while in an AGENCY facility but may not want facility staff to refer to them as such when talking with families or outside providers.

3. Although a legal name change is not required for a youth/client to use a requested name while in AGENCY care, transgender youth/clients may be interested in legally changing their names to ones that reflect their gender identity. A transgender youth/client who is interested in applying to legally change their name will be referred to the [appropriate office] and to additional programs which youth/clients may receive assistance with legal name changes.

G. Communication and Documentation

1. Ongoing communication among staff and between staff and youth/clients is central to good care and supervision for all youth/clients, including LGBTQ youth/clients.
2. Documentation is an essential treatment team communication tool. All staff who interact with LGBTQ youthклиents should maintain ongoing documentation in accordance with established protocols so that critical information is shared, and appropriate care and treatment are coordinated and provided. Also, LGBTQ youthclients, especially youthclients who are questioning their gender identity, may go through multiple name and pronoun changes. This is a common experience for youthclients seeking to better understand and define their identity. Maintaining current records of these changes allows youthclients to be referred consistently by their chosen name and pronouns.

3. Consistent with established regulation, policy and procedures for all youthclients, confidentiality must be maintained in all forms of communication, including written documentation. No information regarding a youthclient’s sexual orientation or gender identity will be shared with their families, other youthclients, or outside providers unless doing so has been requested by the youthclient, is necessary to protect the youthclient from harm or as otherwise authorized by statute or regulation.

4. Documentation protects youthclients and facility staff. Staff will document and report any complaints of discrimination or harassment in accordance with established AGENCY policies and procedures. AGENCY will investigate all claims of discrimination and harassment and take appropriate remedial administrative action consistent with applicable collective bargaining agreements.

H. Reporting Responsibilities and Procedures for Staff

AGENCY staff have an obligation to report any incidents of discrimination or harassment, or any other conduct by staff that violates this policy. Reports must be made according to current AGENCY protocols.

I. Incident Reporting Procedures for Youthclients

The [appropriate staff/office] are available for youthclients to express and resolve concerns regarding their care and treatment.

J. Enforcement

Supervisory and management staff will treat all incidents of discrimination and harassment seriously and report them promptly. In accordance with AGENCY policy and procedures, and consistent with applicable collective bargaining agreements, AGENCY will investigate alleged violations of this policy and take appropriate corrective or disciplinary action.

K. LGBTQ Accommodations and Oversight Committee

Certain issues that require consideration of an LGBTQ youthclient’s individual circumstances are to be referred to the [appropriate bureau] for determination by the [appropriate committee].

1. The issues that should be referred to the [appropriate committee] include youth/client requests for placement in or transfer to a facility based upon gender
identity or gender expression, requests to wear a nonstandard uniform (other than
undergarments), and other requests for modified clothing and self-care items that
are consistent with a youth/client’s gender identity and/or expression.

2. When facility staff receive a request from a youth/client concerning
accommodations, the request should be referred immediately to the [appropriate
bureau], along with all relevant reports and facility records. The [appropriate
committee] will acknowledge the request and initiate an initial review of the request
within one week. The [appropriate committee] will secure sufficient information to
assess, make a determination, and respond to the youth/client’s request within two
weeks. A written determination will constitute a final decision. A youth/client’s
gender identity-based request will be accommodated whenever possible.

3. The [appropriate committee] is comprised of representatives from the
administration, clinical teams, and designated facility staff, with assistance from
LGBTQ consultants. The Committee will include individuals with understanding of
and expertise in issues facing LGBTQ youth/clients.

L. General Facility Operations

All AGENCY youth/clients must abide by the [appropriate manual/policies] and are
accountable for their behavior. All youth/clients are expected to be respectful of others
and their environment.

1. Safety and security, as well as AGENCY treatment and care practices, remain
paramount for all youth/clients in AGENCY facilities.

2. All youth/clients need to feel safe in their environment for positive programming
and positive client outcomes to occur.

3. Rules must be maintained with dignity and respect for all youth/clients.

4. Staff will help youth/clients to understand the rationale behind their decisions and
responses to youth/clients (especially when those decisions and responses are
specifically connected to a youth/client’s gender identity or sexual orientation), and
youth/clients should be given the appropriate opportunity to express themselves.

5. Staff will provide youth/clients with information about the [appropriate committee],
the right to request a uniform or facility change, and the right to request to continue
or begin hormone therapy or request other gender-affirming medical care through
the [appropriate health services bureau].

6. Staff should instruct youth/clients that any anti-LGBTQ threats of violence, actual
violence, or disrespectful or suggestive comments or gestures toward any
youth/clients, including misgendering and deadnaming, will not be tolerated.

7. The treatment team will decide how to approach LGBTQ issues, as they would
with behavior of any youth/clients (i.e., as a team or in each specific unit). Good
care and supervision of youth/clients requires consistency.

8. Certain behaviors are inappropriate regardless of a youth/client’s gender identity,
gender expression or sexual orientation (e.g., seductive or sexual behavior, exchanging sexually suggestive notes). Staff must maintain boundaries for safe and appropriate supervision of all youth/clients.

9. As with all youth/clients, LGBTQ youth/clients will be included in all activities or jobs for which they qualify and show a positive interest.

10. Sexual orientation and gender identity are two separate things. Staff will remember that transgender girls are girls (not gay boys) and may be attracted to any gender(s). Transgender boys are boys (not lesbians) and may be attracted to any gender(s).

M. Medical Evaluation and Care

1. Consistent with OCFS regulations and agency medical/health policies, all youth/clients arriving at an AGENCY facility have an initial health screening, which includes identification of existing medications being taken by the youth/clients. If, during the course of the screening, a transgender youth/client is identified as undergoing hormone therapy, staff should follow existing AGENCY policy and practice for the continuation of medication upon admission (see [appropriate policy]). Medical and behavioral health staff should monitor youth/clients for any symptoms that might occur as a result of any changes in related treatment.

2. Transgender youth/clients who request to begin hormone therapy or other gender-affirming medical care while in AGENCY care should be referred to facility medical and behavioral health staff for an evaluation. Medical and behavioral health facility staff will inform and seek guidance from the [appropriate health services bureau]. AGENCY will make a determination regarding the initiation of hormone therapy or other gender-affirming medical care based on accepted standards of care and the youth/client’s best interest. Appropriate consent must first be sought and obtained, as required by law.

3. Facility medical staff should provide appropriate medical information and education for all youth/clients.

N. Mental Health Assessments of LGBTQ Youth/clients

1. As in all assessment situations, AGENCY clinicians will engage LGBTQ youth/clients with sensitivity and self-awareness. Clinicians will not assume any pathology simply because a youth/client is LGBTQ or gender nonconforming. Clinicians should be aware that, in addition to the typical developmental and social challenges the youth/client may be experiencing, LGBTQ youth/clients also frequently face pressures based on their gender identity or sexual orientation, and that difficulties in coping with these challenges may result in comorbid problems, including increased suicide risk, depression and anxiety, tobacco/drug/alcohol abuse, and homelessness.

2. It is important that every youth/client receive a comprehensive biopsychosocial screening and assessment, so that individual needs can be identified, and appropriate treatments can be provided.
3. Assessments could include a family evaluation, and where clinically indicated, a psychiatric evaluation for any related mental health distress and potential comorbid problems requiring mental health care and treatment.

4. In ongoing clinical work, clinicians should help LGBTQ youth/clients explore their feelings about their gender identity or sexual orientation, along with related issues and questions, in a safe and affirming manner. Clinicians should help youth/clients reduce co-occurring problems or distress related to their gender identity or sexual orientation, and develop their strengths, coping skills, and resiliency. Clinical staff working with transgender youth/clients should become familiar with recent literature and affirmative cultural practices to assist youth/clients with developing a healthy, positive sense of themselves.

5. Where clinically indicated, facility clinical staff working with transgender youth/clients should refer the youth/client for a diagnostic assessment by or in consultation with LGBTQ specialists in the field. Clinicians must be aware that professional mental health organizations, including the National Association for Social Worker and the American Psychiatric Association, strongly condemn any attempt to change a youth/client’s sexual orientation or gender identity through “corrective” or “reparative therapies.” Attempts to do so are strictly prohibited by this policy and by state law.

6. Due to the high risk of substance use behaviors for LGBTQ youth/clients, a comprehensive assessment of the youth/client and family history should be incorporated into the overall biopsychosocial assessment. Clinicians should be aware that a large percentage of youth/clients report alcohol and drug use as common mechanisms for coping with feelings of severe isolation.

O. Counseling

1. If a youth/client discloses that they are lesbian, gay, bisexual, transgender or questioning while in placement, the youth/clients should be offered appropriate counseling and information to support the youth/clients with individual, family, and health issues.

2. The supervisory staff is responsible for referring any youth/clients for counseling, mental health, health, or other program services as appropriate.

3. All staff should recognize that youth/clients questioning their sexuality and/or gender identity is a normal part of development, especially for adolescents, and that a youth/client may be currently unsure of their identity for any number of reasons.

4. Counselors should facilitate exploration of any gender or sexuality issues with LGBTQ youth/clients by being open, affirming, and empathetic. Staff is prohibited from imposing their personal beliefs on youth/clients and families by attempting to change a youth/client’s sexual orientation, gender identity, or gender expression.

5. Counseling sessions for the entire youth/client population should include group and individual opportunities to discuss any gender identity questions or feelings that may arise as a result of having youth/clients in the residential setting who may
be perceived as “different.”

P. Search Issues

1. All youth/clients will be searched consistent with 18 NYCRR 441.17 and as provided by AGENCY policy and procedure ([cite appropriate procedure/policy]). All employees conducting a search must assure its thoroughness while maintaining the dignity of the youth/clients being searched.

2. Transgender youth/clients may request that either male or female staff conduct a strip search when such a search is required. This request will be accommodated whenever possible, considering staffing and safety needs.

3. Searches will not be used for the purposes of determining a youth/client’s genitals or secondary sex characteristics.

Q. Clothing

1. All youth/clients must wear AGENCY-approved attire.

2. All youth/clients may receive undergarments of their choice among available agency supplies regardless of their gender, except where therapeutically not indicated. Other requests by youth/clients for clothing and personal self-care items consistent with their identified gender will be referred to the [appropriate health services bureau] for review and determination by the [appropriate committee].

3. Bras and other modified clothing and self-care items may be removed from youth/clients at night for safety reasons where indicated.

R. Personal Grooming

Grooming rules and restrictions, including rules regarding hair, makeup, shaving, etc., will be the same in male and female facilities. Youth/clients may not be prevented from or disciplined for, engaging in personal grooming that does not match gender norms.

Examples of grooming rules that may impact transgender and gender nonconforming youth/clients include:

- Youth/clients may tie long hair back with a hair band.
- Youth/clients with long hair can receive a basic cut and shape.
- Youth/clients must maintain fingernails and toenails at a length that supports safety and security.
- Youth/clients may, but are not required to, shave their faces and bodies, as permitted by AGENCY policy, in keeping with safety and security concerns.

S. Individual Bedrooms

Transgender youth/clients should be placed in a facility that can provide individual
sleeping quarters (one-person bedroom) to allow for privacy. Any exceptions must be authorized by the [appropriate authority] and documented in the youth/client’s record.

T. Bathroom Facilities

1. Transgender youth/clients shall be allowed to use individual stalls.

2. Transgender youth/clients must be allowed to shower privately. When individual showers are not available, the youth/clients can be the first or last in line to use a shower, so they have the option to shower separately.

3. Transgender youth/clients shall not be required to use a single occupancy bathroom on the sole basis that they are LGBTQ, gender nonconforming, nonbinary, or because of another individual’s discomfort or concerns with the youth/client’s sexual orientation, gender identity, and gender expression.

U. Transition/Discharge Planning

1. When any LGBTQ youth/client transfers to another AGENCY facility or is discharged, members of the treatment team will collaborate and share information with the receiving facility or [appropriate reentry office] to coordinate the youth/client’s transitions.

2. It is critical for staff members to work with the youth/client’s family/discharge resources throughout placement to enhance permanency efforts. However, staff should recognize that LGBTQ youth/clients may be estranged from their family and/or may not want their family to know about their sexual orientation or gender identity.

3. Staff working with LGBTQ youth/clients will identify and become familiar with community resources to support LGBTQ youth/clients and their families. Staff should assist families of LGBTQ youth/clients in identifying supportive resources and professionals in appropriate LGBTQ issues in their area.

4. Staff should recognize that resources that are helpful to some youth/clients may not be helpful for LGBTQ youth/clients if the resources are not accepting and supportive of LGBTQ youth/clients. Staff should evaluate resources to determine their appropriateness. AGENCY will make every effort to refer youth/clients to LGBTQ-affirming programs and resources.