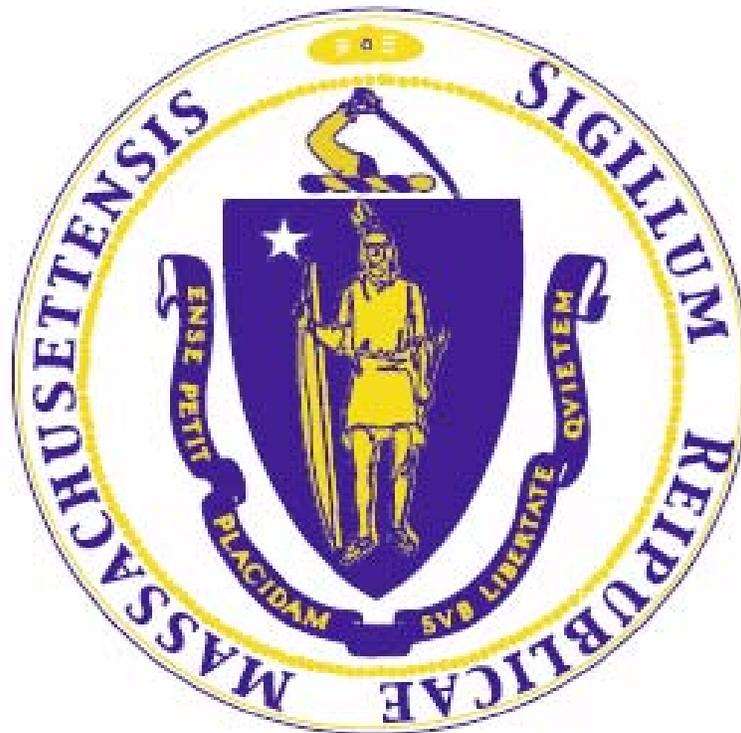


**The Commonwealth of
Massachusetts
Commission on Gay, Lesbian,
Bisexual, and Transgender Youth**

**Annual Recommendations
to the Great and General Court
and Executive Agencies
FY2011**



Lisa Perry-Wood, Executive Director

Arthur Lipkin, Chair

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Letter from the Chair

In 2010-11 the Massachusetts Commission on GLBT Youth seeks to expand funding for and to make improvements in programs and services for GLBT youth in the Commonwealth. To fulfill our legislative mandate, we are extending our call to departments and agencies, like EOHHS and DMH, whom we have never addressed before. This publication is our third yearly submission of recommendations to elected officials and public agencies. Many are merely refinements of prior recommendations that have gone unmet, mostly due to a continuing economic slump.

We are dismayed that The “Act Related to Gender-Based Discrimination and Hate Crimes”, which would extend protections against discrimination to include gender identity and expression, has not yet become law. We call on the legislature to act quickly to pass this legislation, so vital to the health and safety of transgender and gender-non-conforming youth.

On the other hand, we applaud the passage of the new Anti-Bullying Law and look forward to working with DESE and DPH to craft policies, training, and school curricula that will prevent bias-related bullying, which research shows has a devastating and disproportionate impact on GLBT students.

We reiterate that civil rights legislation by itself will not solve the complex health and safety issues that face the youth whose welfare is the focus of our work. Discrimination based on sexual orientation and/or gender identity/gender expression as well as race/ethnicity, is a key factor in many young people’s lives. Discriminatory and unsupportive environments damage GLBT youth in both institutional and private settings.

Addressing the well-documented health disparities between GLBT youth and their heterosexual peers should be the responsibility of all state agencies that deal with youth and/or families. All such agencies have GLBT youth among their clients, yet their needs are sometimes unaddressed.

The Commission’s top priorities are to lessen health disparities for GLBT youth based on race and ethnicity as well as on gender identity/expression. Our own Massachusetts health risk surveys show that youth of color experience worse health and safety outcomes than their white counterparts. Eliminating racial and ethnic disparities *within* the GLBT youth cohort has been the Commission’s primary goal for more than two years. The needs of transgender youth across all races and ethnicities still demands greater attention. Based on numerous studies, some of which are cited herein, the Commission believes this population experiences violence and homelessness with alarmingly high frequency. Nevertheless, transgender youth’s demographics and health risks have gone un-assessed in this state, creating fundamental barriers to effective policies and programs. The

Commission is frustrated that research measurements developed by a combined DPH-DESE task force for surveying transgender youth have yet to be integrated into existing youth health surveys.

We emphatically recommend that the government target programs and services to eliminate health risk disparities for GLB youth of color and all transgender youth.

The Commission calls for population based improvement to GLBT youth health. Providing “rescue” services to GLBT youth, but failing to address root causes of their predicament, including structural ones, is not acceptable. GLBT youth struggle, not because their health risks are intrinsic, but because of the antagonism and inequity they face and the lack of preventive support they receive. The amount and allocation of resources for GLBT youth work continues to limit its impact. Therefore, the Commission urges again that programs be objectively assessed by means of proven public health research methods. Massachusetts must embrace a data-driven process to document program impact and value.

Prior recommendations sought to enhance and formalize our collaborative and reporting relationships with the Departments of Public Health (DPH) and Elementary and Secondary Education (DESE). The Commission appreciates DPH leadership’s and staff’s efforts to communicate and work with us, and looks forward to continuing such collaboration. We are distressed, on the other hand, that our relationship with the DESE has been less open and productive.

In FY2010, levels of GLBT youth funding were reduced to \$350,000 (from \$550,000) at DPH and to zero (from \$300,000) at DESE. Administration and staff at DPH worked with the Commission to minimize the consequences of these cuts, but the impact on GLBT youth services has still been severe. At DESE, regrettably, no earmarked funding has meant no programming for GLBT youth in schools.

The law requires the Commission to work with government agencies toward a coordinated and comprehensive approach to improving the health and safety of GLBT youth and students. The fact that the core of our current recommendations is largely identical to that of prior years demonstrates that progress is slow, but that the Commission remains committed to our mission and confident in our goals.

Sincerely,
Arthur Lipkin, Chair
Massachusetts Commission on GLBT Youth

Commission Recommendation for Fiscal Year 2011

History and Structure of the Commission

The Massachusetts Commission on Gay, Lesbian, Bisexual and Transgender Youth was created by the General Court in 2006 (Act of Jul. 1, 2006, Ch. 139 §4, codified in Mass. Gen. Laws Ch. 3 §67). Up to 50 commissioners may be appointed, representing twelve Public Education, Public Health and GLBT organizations, and fourteen state regions. The Commission's leadership includes a Chair who appoints an Executive Committee which meets monthly. All members meet quarterly as a full body and monthly in functional teams.

Mandate

The work of the Commission is to eliminate the disparities between GLBT youth populations and non-GLBT youth populations. The Commission adopts a public health approach, which focuses on the root causes of disease and injury in GLBT youth populations in Massachusetts. The scope of Commission activities includes:

- Reviewing current research, identifying disparities and disseminating that information publicly;
- Researching best practices for programs and services for GLBT youth populations;
- Making policy recommendations to state agencies: including MA Department of Public Health (DPH) and Department of Elementary and Secondary Education (DESE);
- Supporting, testifying and crafting legislative initiatives to redress disparities;
- Advocating for increased funding to support programs for GLBT youth populations;
- Recommending targeted use of state agency funds to best improve the public health of GLBT youth populations, and
- Serving as the connecting point regarding policy targeting GLBT youth populations in the Commonwealth, through its diverse organizational and regional representation.

Terms and Definitions Regarding Priority Populations

Youth/Students of Color

The Commission defines youth of color broadly, to include those groups that have a specific, racialized, and longstanding relationship to systems of racism in the United States. We also encourage the inclusion of groups of color with ethnic and cultural backgrounds, which position them for experiences of racism.

When discussing GLBT youth/students as a population, it is important to recognize that young people of color may not fit or define themselves according to “commonsense” or prevailing definitions of gay, lesbian, bisexual or transgender (Silenzio 2003, 867-871). When using the term GLBT, the Commission is referring to more than sexual identity or behavior per se, as youth, particularly those who are more vulnerable due to poverty, neglect, abuse, cognitive, emotional or physical disability or chronic illness may not have fully developed sexual identity. Questioning youth are also included in the GLBT definition.

Defining and measuring GLBT youth populations can be difficult with most instruments relying on sexual identity, sexual orientation, sexual behavior, or a combination of the three. (Robin, Brener, Donahue, Hack and Goodenow 2002, 349-355) (Austin, Conron, Patel, and Freedner 2007, 55-65) While the Commission urges the continued use of the term “GLBT”, it recognizes that this term should not be read to suggest only youth/students identifying as GLBT, but also include youth/students who would be represented by broader measures such as orientation and same-sex sexual behavior. We believe that a broader understanding of this term takes into account the complexity of sexual identity development and allows for more culturally specific descriptions of populations than a reliance on identity alone. (Rosario, Schrimshaw, and Hunter 2008) (Rosario, Schrimshaw, and Hunter 2004) (Harper, Jernewall, and Zea 2004).

Transgender and Gender Nonconforming Youth/Students

The Commission recommends the consistent use of as broad a definition of transgender as practicable. Gender norms are complexly influenced by broader cultural norms and those cultural norms affect self perception and perception by others. Additionally, transgender is a relatively new and rapidly evolving term, with no set standards for social science measurements and survey instruments. Because of these factors, we recommend that transgender should be defined to include both identity and behavioral measures around gender, including gender expression and identity closely attached to gender expression. This avoids what the Commission believes is a dangerous risk of excluding transgender youth/students of color and other gender non-conforming youth/students with the application of a narrower definition of transgender. Such an inclusive definition is, for instance, needed to ensure that professionals interact with these youth in an appropriate manner and provide appropriate care.

Introduction

The Commission’s goal is to improve the health and safety of youth and students who are gay, lesbian, bisexual or transgender. The Commission is committed to the elimination of disparities in access to services and in service outcomes for GLBT populations in all life arenas, including health, education, social services, housing, and jobs. Information from providers serving the GLBT populations, from youth themselves, and from such surveillance data as exist indicate that youth who are GLBT are a vulnerable population,

and that all youth who are transgender and all youth of color are particularly vulnerable (Consolacion, Russell, and Sue, 2004; Garofalo, DeLeon, Osmer, Doll, and Harper, 2006; Gutierrez, 2004; Harper, Jernewall, and Zea, 2004; McCready, 2004; O'Donnell, O'Donnell, Wardlaw, and Stueve, 2004).

The Commission has developed the following recommendations to the Great and General Court and to key state departments as ways of making the state more responsive to the needs of GLBT populations. As part of its work, the Commission will monitor and report on the implementation of these recommendations. Certain items, such as designated funding within the state budget, are easy to track. The Commission will track designated funds within the budget, meet with respective agencies to track progress, request written reports from agencies to assess implementation barriers and offer assistance when needed.

Recommendations to the Massachusetts Great and General Court

The Commission recognizes the significant strides the Commonwealth has made in meeting the unique challenges of individuals who are gay, lesbian, bisexual or transgender. However, current resources are inadequate to address the health and welfare needs of youth who are GLBT, and discrimination against youth who are transgender or gender non-conforming is still not explicitly illegal in Massachusetts.

- **Extend Anti-discrimination Protections to youth who are Transgender and Gender Non-Conforming**

The Commonwealth needs to make an explicit commitment to providing equal protection under the law to people of diverse gender identities and expressions. The state at this time has no laws protecting the civil rights of transgender and gender non-conforming youth, and thus they may be arbitrarily denied access to school, employment and housing. In the last legislative session “An Act Relative to Gender-Based Discrimination and Hate Crimes” garnered support from a majority of members in both the House and Senate members but the bill did not reach the floor for a vote. Similar legislation will be introduced this year, and this civil rights bill remains the Commission’s top legislative priority.

- **Appropriate funding in the FY 12 budget for the Departments of Public Health and Elementary and Secondary Education that is dedicated to meeting the needs of youth who are gay, lesbian, bisexual or transgender.**

Due to the fiscal crisis in the Commonwealth, significant cuts were made in FY09 and FY10 in funding for services targeted to address the health, welfare and safety needs of these vulnerable populations. To date (6.23.10), there is no dedicated funding for these services in the FY11 budget, nor any explicit requirement that funds be expended for services to the GLBT populations. This could particularly impact

GLBT youth in resource poor communities of color where private funding may be less available. The Commission recommends that the House and Senate budgets each include dedicated service funding for these populations at least at the level of the original FY09 appropriation, and also funds to support the ongoing work of the Commission on GLBT Youth.

- **Address deficiencies in the treatment of GLBT youth offenders and victims.**

The juvenile and adult criminal justice systems have a high impact on the future of both juvenile offenders and juvenile victims. Evidence strongly suggests that incarcerated GLBT youth, especially transgender youth, are likely to face serious safety concerns (Majd, Marksamer, and Reyes. 2009). Yet, very little is known about the treatment of GLBT youth in the criminal justice system, whether as offenders or victims, and the long-term outcomes of that treatment.

Accordingly, we recommend that the legislature, through the Executive Office of Public Safety and EOHHS, commission studies of the treatment of GLBT youth offenders and victims. The study's purpose should be to identify deficiencies and propose corrective measures. Such a study should review the treatment of GLBT youth in each of the following stages of the juvenile and adult justice system:

- Victim/witness services and counseling, investigation, prosecution, sentencing, drug diversion and treatment, corrections facilities, and parole.

We recommend that such a study incorporate at least two dimensions:

- Causes and rates of both recidivism and avoidance of future criminal activity by GLBT youth;
- Accessibility effectiveness of victim recovery treatment and rehabilitation services for GLBT youth

Recommendations to Massachusetts Agencies Providing Health Care to Transgender Youth

- **Mental health and other care providers should be trained consistent with the World Professional Association For Transgender Health, Inc. (WPATH) guidelines¹ or their equivalent.**

¹ The Harry Benjamin International Gender Dysphoria Association's Standards Of Care For Gender Identity Disorders, Sixth Version, February, 2001, published by The World Professional Association For Transgender Health, Inc. (WPATH) online at: http://www.wpath.org/about_wpath.cfm.

- **Existing treatment of transgender and gender-nonconforming youth should be reviewed and revised for consistency with most recent WPATH guidelines or their equivalent.**

Recommendations to the Department of Children and Families (DCF)

Develop a workplan by 4/30/11 to ascertain if youth who are gay, lesbian, bisexual and transgender are achieving the same outcomes as other youth served by DCF, and if the outcomes for GLBT youth indicate racial and ethnic disparities. Submit a progress report on the workplan development by 01/10/ 2011.

This is the first time the Commission has addressed a recommendation to DCF. Youth who are GLBT are at higher risk than the general population for poverty, homelessness, and poor physical and mental health, a statement that may apply as well to the overall DCF population. However, within DCF placements, GLBT youth often face the same stigma and discrimination that they faced previously. In order to assess whether DCF services are meeting the needs of its youth who are GLBT, the Commission recommends that the department develop a plan that will enable it assess if there are disparities in outcomes for youth who are GLBT and, if so, to address such disparities.

Recommendations to the Department of Mental Health (DMH)

Develop a draft workplan by 4/30/11 to ascertain if youth (through age 24) who are gay, lesbian, bisexual and transgender are achieving the same outcomes as other youth served by DMH and if the outcomes for GLBT youth indicate racial and ethnic disparities. Submit a progress report on the workplan development by 01/10/ 2011.

This is the first time the Commission has addressed a recommendation to DMH. Youth who are GLBT or have same sex relationships have been shown in the MA Youth Risk Behavior Survey (MYRBS, 1996-2008) to be at higher risk than the general population for poverty, homelessness, depression and suicide; other studies suggest an increased risk of substance use and abuse, and disordered eating. Such youth also face specific issues of stigma and discrimination. In order to assess whether DMH services are meeting the needs of its youth who are GLBT, the Commission recommends that DMH take steps to assess whether there are disparities in outcomes for youth who are GLBT, and, if so, to address such disparities, ensuring adequate psychosocial support respecting differences in race, ethnicity, culture and language.

Recommendation to the Division of Medical Assistance

Develop a draft workplan by 4/30/11 to ascertain if youth who are gay, lesbian, bisexual and transgender are achieving the same outcomes as other youth receiving Intensive Care Coordination through the Community Service Agencies and if the outcomes for GLBT youth indicate racial and ethnic disparities. Submit a progress report on the workplan development by 01/10/ 2011.

This is the first time the Commission has addressed a recommendation to the Division of Medical Assistance. Youth who are GLBT or have same sex relationships have been shown in the MA YRBS to be at higher risk than the general population for poverty, homelessness, depression and suicide; other studies suggest an increased risk of substance use and abuse, and disordered eating. Such youth also face specific issues of stigma and discrimination. In order to assess whether youth who are GLBT are being connected to services and community resources that will help them meet their needs, the Commission requests that Medicaid take steps that will enable it to assess whether there are disparities in outcomes for youth who are GLBT, and, if so, to address such disparities, ensuring adequate psychosocial support respecting differences in race, ethnicity, culture and language.

Recommendations to the Department of Public Health

The Department is the major provider of services dedicated to youth who are GLBT and also hosts the administrative office of the Commission. The Commission applauds the extraordinary effort DPH has made during the current fiscal crisis to preserve the infrastructure for GLBT youth programming and to support the work of the Commission.

Maintain and, if possible, expand, current programming addressing the needs of youth who are GLBT.

- Request dedicated funding in the FY12 state budget for the Safe Spaces for GLBT youth program in order to restore resources to the level appropriated in the original FY09 state budget, prior to budget cuts precipitated by the recent fiscal crisis

The DPH Safe Spaces program purpose is to provide opportunities for gay, lesbian, bisexual and transgender youth to develop to their full potential in a safe and nurturing environment. The Commission supports ongoing development of the Safe Spaces program, in alignment with our current recommendations.

Assure that DPH funded programs, including current violence prevention programs, provide maximum benefit and focus on the most vulnerable youth within the GLBT populations.

- Establish criteria for future program funding that identify and address GLBT who are the most vulnerable. The Commission recommends the following priorities:
 - Programs targeting GLBT youth of color
 - Programs targeting transgender youth generally
- Focus funding on programs with the potential for the greatest impact on those populations the Commission has prioritized.
- Ensure that programs fit into a comprehensive model, such as the youth development model, and that these programs have impact not only at the individual level but also have significant and measurable impact on prioritized GLBT populations as a whole.
- Develop and institute evaluation protocols to measure the impact of new and existing programs on GLBT populations and to assure that the most vulnerable populations are being reached. Evaluation should stratify findings according to sexual orientation, gender identity or gender expression; ethnicity; socio-economic status; and geography.

In making the above recommendation, the Commission is aware of the paucity of funds available for programming and for evaluation. However, the Commission is eager to work with the Department in seeking outside resources to support evaluation activities.

Reduce Homelessness among the GLBT populations

- Identify the scope and severity of the problem of homelessness in the GLBT youth populations based on data from the YRBS, the Youth Health Survey and other data that may be available to DPH. To the extent that the data is available, stratify the results by race, ethnicity, socio-economic status, sexual orientation, and gender identity or expression.
- Develop a plan to include homelessness in ongoing DPH efforts to improve public health surveillance of the GLBT populations.
- Represent the needs of GLBT youth on the Interagency Council to End Homelessness.

Improve data surveillance of the GLBT populations to facilitate problem identification and remedial action

- Ensure that a mechanism is in place to measure the transgender youth population, using as broad a definition of transgender as practicable, or refine existing measures based on initial studies.
- Analyze data from Youth Health Survey of FY'11 and report to the Commission on GLBT youth.
- Use multiple measures to identify GLBT youth.
- Measure GLBT youth in various settings, not only school (e.g., drop-in centers, shelters, and other public spaces).
- Include race, ethnicity and socio-economic status in data collection.

- Work with EOHHS and other secretariats and departments to promote surveillance in all state direct service agencies and to ensure consistency in data definitions so data can be aggregated.
- Maintain privacy of GLBT youth; ensure all surveillance is HIPAA compliant.
- Dedicate research and staff resources to improving data collection and surveillance.

Lack of data is a fundamental problem in addressing the physical and mental health needs of GLBT youth. Comprehensive surveillance is essential to identify disparities in access and in outcomes and to make sure that programs target the populations in greatest need. The limitations of current surveillance, in particular the inability to measure transgender youth needs, are problematic.

Provide administrative support for the Commission on GLBT Youth

- Request dedicated funding for the Commission in the FY12 state budget, to cover administrative expenses and training for Commission members
- Cover costs of Commission meetings, including but not limited to: security; rental costs; preparation and delivery of meeting related materials; travel costs for Commissioners who request assistance; expenses related to set-up and logistics of mandatory meetings; software subscriptions to allow for ongoing communication among Commissioners.

The Commission is a volunteer body, with representation from diverse communities. It functions as a public health advocacy body for GLBT youth, with a focus on improving public policy and securing quality services for the GLBT populations. Basic administrative support is necessary to enable the Commission to meet and perform its legislative mandate.

Recommendations to the Executive Office of Health and Human Services (EOHHS)

- **Identify the scope and severity of the problem of homelessness in GLBT youth populations.**
- **Develop a report by 4/30/11 that describes current regulations, policies, standards, training requirements or other measures for organizations serving homeless youth to assure safety and support for youth who are gay, lesbian, bisexual and transgender.**

This is the first time the Commission has addressed a recommendation to EOHHS. Reports indicate that youth who are GLBT are at higher risk for homelessness than the general youth population, and are often subject to stigma and discrimination (Quintana, Rosenthal, and Krehely, 2010). The Commission wants assurance that homeless GLBT youth are finding appropriate housing in safe settings that are responsive to their

particular needs. The Commission has particular concerns about the transgender population, who are not currently covered under state non-discrimination laws.

Recommendations to the Department of Housing and Community Development (DHCD)

Develop a workplan by 4/30/11 to ascertain if homeless youth, through age 24, who are GLBT are able to secure permanent housing to the same degree as the non-GLBT population. Submit a progress report on the workplan development by 01/10/ 2011.

This is the first time the Commission has addressed a recommendation to DHCD. Reports indicate that youth who are GLBT are at higher risk for homelessness than the general youth population, and are often subject to stigma and discrimination (Quintana, Rosenthal, and Krehely, 2010). The Commission wants assurance that homeless GLBT youth are finding appropriate housing in safe settings that are responsive to their particular needs. The Commission has particular concerns about the transgender population, who are not currently covered under state non-discrimination laws.

Recommendations to the Department of Elementary and Secondary Education (DESE)

- **Maintain a focus on outcomes for GLBT youth by requesting that funds be allocated in the FY12 state budget to hire a staff person responsible for coordinating the Safe Schools Program and serving as the point person for communication with the Commission regarding DESE activities.**
- **Assure that activities funded through DESE provide maximum benefit and focus on the most vulnerable youth within the GLBT populations, particularly transgender youth and youth of color.**
 - Establish criteria for future training, grants or other initiatives that identify and address GLBT who are the most vulnerable. The Commission recommends the following priorities:
 - Programs targeting GLBT youth of color
 - Programs targeting transgender youth generally
 - Develop and institute evaluation protocols to measure the impact of GSAs and to assure that the most vulnerable populations, namely transgender youth and youth of color, are being reached. Evaluation should stratify findings according to sexual orientation, gender identity or gender expression; ethnicity; socio-economic status; school size, urban/rural geography.
 - Expand program focus beyond suicide and violence to address other health disparities, e.g., substance abuse and sexual health.

- Develop a workplan by 4/30/11 to analyze the impact on GLBT youth of funds made available to school districts through the Safe and Drug Free Schools and Communities Act (SDFSCA).

The Commission perceives that the key to implementation of these recommendations is DESE hiring of a specific individual to coordinate GLBT related activities and to ensure the following: that DESE retains a focus on GLBT youth; that Safe Schools programs maximize their potential to improve the lives of GLBT youth; that DESE activities directed to the general student population take into account the needs of youth who are GLBT, and that DESE maintain communication with the Commission.

- **Assure that trainings developed in response to anti-bullying legislation, Chapter 92 of the Acts of 2010, address bullying of youth who are GLBT.**
- **Change language in old documents and ensure that language in new documents that refer to the GLBT populations, such as curricula, regulations, training documents, evaluation material and grant opportunities explicitly refer to gay, lesbian, bisexual and transgender youth, rather than just gay and lesbian youth as has been the past practice. Submit a workplan by 1/10/2011 that identifies all documents needing revision. Submit a report by 4/30/2011 indicating documents that have been changed.**
- **Promulgate regulations permitting transgender students to use their name and pronouns of choice, pursuant to DESE authority to regulate school record-keeping.**
- **Improve data gathering about the GLBT populations to facilitate monitoring and potential problem identification and remedial action**
 - Work with the Commission and other experts to develop and establish a mechanism to measure the transgender student population.
 - Report out on information gathered through the YRBS related to GLB populations, and to the extent data-use rules permit, provide detailed analysis by sexual orientation, gender identity, race, ethnicity, socio-economic status, school size, urban/suburban, as permitted by CDC regulation and available data.

Recommendations for DESE in conjunction with the Massachusetts Board of Elementary and Secondary Education (BESE)

- **Continue review of both the Massachusetts Curriculum Frameworks and the Vocational Technical Education Frameworks to ensure adequate inclusion of GLBT-related content, with emphasis on topics of race, ethnicity, and gender identity and expression within the GLBT community. Report on reviews**

conducted during FY11 by 4/30/11.

- **Review teacher and administrator licensure to guarantee that awareness of GLBT student concerns and other school-related GLBT issues are explicitly addressed. Report results of such review to the Commission by 4/30/11.**

The Commission appreciates past Board of Education actions taken to ensure that teacher preparation and instruction practices include sensitivity to GLBT youth in the classroom. The Commission perceives that there is still a need for better grounding in GLBT concerns, including both racial/ethnic dimensions and gender identity and expression, which have not been previously addressed.

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