

Commission Recommendation for FY09 DPH Violence Prevention Funds

This recommendation is based on recommendations from the Commission, current available data, and on consultations with the Department of Public Health. The recommendation is the product of an ongoing collaborative process between the Commission and the Department and represents the *first* step in a long-term process to achieve real and permanent improvements in population health for GLBT youth. The recommendation should be construed as a singular recommendation. No part of the recommendation has any necessary priority over another.

Funds appropriated in FY09 should be applied to achieve the objectives below. The Commission will incorporate this recommendation into its 2009 Annual Report, will publish the recommendation on its website, and will use this recommendation to evaluate programs and policies in FY2009. The Commission is guided by a central principle in formulating this recommendation: to deliver maximum impact on GLBT youth populations and to reduce the gap between GLBT youth and non-GLBT youth health outcomes. The Commission is also committed to two propositions: maintaining and strengthening the current infrastructure and services; and seeking population-level changes by working across the prevention spectrum.

PROGRAM AREAS

COMMISSION ADMINISTRATION

Background:

The establishment and maintenance of a solid administrative infrastructure is critical to the ongoing success of all Commission endeavors and essential to improving the public health of GLBT youth. A well-functioning, fully staffed Commission Administration is essential for GLBT youth work; its existence has a corresponding programmatic effect.

The Executive Director brings the mandate of the Commission to interactions with state agencies, the legislature and policy-makers. The Executive Director oversees the work of all Commission committees, development and preparation of the annual report, as well as all identified Commission initiatives. The administrative assistant enables communications and logistics for the Commission.

Funding the Commission administration sends a message that the Commission itself is a significant and valuable asset that is *worth* funding. The Commission has an important function in public health advocacy for GLBT youth: its work assists service providers, improves public policy, and enables public hearings on the most current topics. The Commission also has a significant role in the appropriations process.

Details:

- Staffs the commission with a full-time Executive Director and part-time administrative assistant.
- Covers costs of quarterly mandatory full commission meetings (includes, but is not limited to: refreshments, security, rental costs), as well as travel costs for commissioners for all mandatory meetings.
- Covers costs of up to 3 trainings per year for commissioners.

Funding Level:

The Commission Administration will be funded at \$130,000.

HOMELESSNESS AND GLBT YOUTH

Background:

There is a body of qualitative evidence suggesting that homelessness is a growing public health problem facing GLBT Youth. The Department should apply resources to identify the scope and severity of the problem, a plan for surveillance, as well as a plan to directly address the problem.

Evidence suggests that transgender youth and youth of color are disproportionately represented among GLBT homeless youth in Massachusetts. The prevalence of homelessness in these sub-populations should be proactively addressed by the Department within the following recommendations.

Details:

- Identify the scope and severity of the problem of homelessness in GLBT youth populations;
- Submit a plan to include this issue in on-going Department efforts to improve public health surveillance of GLBT populations;
- Create a plan in FY2009 to ensure services meet the needs of GLBT homeless youth statewide, over next 3-5 years.

Funding Level:

No recommended level.

CURRENT VIOLENCE PREVENTION PROGRAMS

Background:

The current infrastructure funded by the Department to provide services to GLBT youth is unstable. This instability is driven in part by lack of support from sources outside the Department, a problem the Commission is addressing, but also in part by a lack of coordinated and comprehensive approaches to GLBT youth services as a population within the Department. While we note that the Department was working under political constraints in the past, the current environment is amenable to a proactive approach to this problem. We know that the current leadership of the Department has the vision to stabilize the infrastructure but are concerned that this vision has not been taken up by the Department staff. We are also concerned that there are insufficient evaluation tools in place to monitor current programs to ensure that services are being provided, to ensure the programs are achieving impact, and to ensure that they can produce population-level changes.

Details:

- Institute evaluation systems to measure population impact of new and existing programs.
- Ensure that programs fit into a comprehensive model that targets all levels of society and that the programs achieve not only impacts at the individual level but also are properly situated to achieve significant and measurable impact on GLBT youth populations;
- Program monies should be spent where there is potential for greatest population impact. Spending on programs that provide health improvements for the benefit of individual GLBT youth, e.g. scholarships, should be avoided.
- The current program infrastructure should be strengthened and expanded to provide a more robust role in the public health system.
- Develop new and existing programs according to identified geographic and socioeconomic needs of GLBT youth of color. At a minimum, programs should be targeted and identified by ethnicity, geography and socio-economic status to ensure all programs are targeting the populations with the greatest health burden;
- Ensure demonstrable population impact through use of evaluation tools.

Funding Level:

No recommended level.

SURVEILLANCE

Background:

Surveillance of GLBT youth populations is limited and limits effective public health policy. The Department, working with the Commission, should make effective surveillance of GLBT youth populations a priority.

While disparities exist among all GLBT youth, racial, ethnic and socioeconomic disparities exist across the board. Disparities for the transgender youth population remain unsurveyed to date, though anecdotally they are at critical levels. The past ten years of YRBS data has not been inclusive of transgender and gender questioning youth. The need to acknowledge and address health disparities within transgender and gender questioning youth populations is critical.

Details:

- Ensure transgender youth populations are measured;
- Ensure that GLBT youth are measured in every setting, not only school settings;
- Ensure instruments provide information on ethnicity;
- Ensure instruments include socioeconomic status;
- Investigate surveillance using natural data sources that provide for accretion of data;
- Maintain privacy of GLBT youth.

Funding Level:

No recommended level.