



DEPARTMENT OF CHILDREN & FAMILIES



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GENDER IDENTITY & EXPRESSION

On October 1, 2011, Public Act No 11-55 added gender identity or expression to the list of protected classes within Connecticut's civil rights statutes. Protections for transgender and gender non-conforming children and adolescents are particularly important in the DCF context because these youth face widespread misunderstanding and lack of knowledge about their lives; are at higher risk for peer ostracism, victimization and bullying; and may suffer psychological harm in an environment that rejects them for their gender identity. Research shows they are also at higher risk for several health disorders, but often do not disclose or discuss sexual orientation, gender identity or expression, and other life issues with providers who are not openly supportive.

DCF Policy 7-4 "Harassment and Discrimination-Free Workplace" states "all employees have a right to a work environment characterized by respect and dignity [and that DCF] shall expect that all employees conduct themselves in a manner that reflects a respectful and dignified environment and one free from conduct that could be considered harassing, coercive or discriminatory."

DCF Policy 9-1 "Discrimination Complaints" outlines the process to resolve allegations of discrimination raised by employees, applicants seeking employment and members of the public receiving services from the Department.

<u>Conn. Gen. Stat.</u> §46a-60, §46a-71; §46a-73	<p>Connecticut law prohibits discrimination on the basis of gender identity or expression in all areas and contexts in which the law already prohibits discrimination on the basis of sex. The law imposes non-discrimination obligations on DCF as:</p> <ul style="list-style-type: none">• a service provider;• a contracting agency;• a licensing agency; and• an employer.
WHO IS PROTECTED?	<p>Everyone. Importantly, the law requires fair and equal treatment regardless of a person's gender identity or expression.</p> <p>All individuals interacting with DCF are protected by the Act.</p> <p>The law covers anyone applying for employment or currently employed by DCF. It also applies to anyone with whom DCF contracts and anyone that DCF licenses.</p> <p>Clients shall receive services based on their gender identity whether or not their gender identity is different than that associated with their birth sex or physiology.</p>
PENALTIES	Claims of unlawful discrimination or harassment based on gender identity or expression are handled in the same manner as other types of discrimination and harassment claims, and may include criminal penalties.

DEFINITIONS

DEFINITIONS	<p>Discrimination is any act, policy, or practice that, regardless of intent, has the effect of subjecting any person to differential treatment as a result of that person's actual or perceived protective class, including but not limited to sexual orientation, gender identity, or gender expression.</p> <p>Sex Discrimination involves treating someone unfavorably because of their sex. Discriminating against any individual because of their sexual orientation, gender identity or expression, including transgender status is a form of sex discrimination and violates the law.</p> <p>Gender Identity or Expression. State law defines <i>gender identity or expression</i> as "a person's gender-related identity, appearance or behavior, whether or not that gender-related identity, appearance or behavior is different from that traditionally associated with the person's physiology or assigned sex at birth, which gender-related identity can be shown by providing evidence including, but not limited to, medical history, care or treatment of the gender-related identity, consistent and uniform assertion of the gender-related identity or any other evidence that the gender-related identity is sincerely held, part of a person's core identity or not being asserted for an improper purpose."</p> <p>Gender Identity vs. Sexual Orientation? Gender Identity and sexual orientation are two different aspects of identity.</p> <p>Gender identity refers to a person's internal understanding of themselves as a man, a woman, neither, both, and any combination thereof. Some words that describe gender identity include:</p> <ul style="list-style-type: none"> • Cisgender: The sex one was assigned at birth matches one's internal gender identity. • Transgender: The sex one was assigned at birth does not match one's internal gender identity. This is a global term that includes a number of different identities and experiences. Individuals who are transgender may or may not have been prescribed hormones, undergone gender affirmation surgery, or changed their identity documents (license, passport, etc.). This is generally a private matter. • Transsexual: An individual who transitions from the sex assigned to them at birth to the gender that matches their identity. Some people may refer to themselves as MtF (Male to Female) or FtM (Female to Male). • Non-Binary or GenderQueer: An individual who rejects the notion that there are only two genders (men and women) and who experiences (and often expresses) his or her gender as fluid, neither or both. • Cross-Dresser: An individual who occasionally dresses in clothing more common to a different gender. <p>Sexual Orientation is defined as the direction of one's emotional, romantic or physical and erotic attraction, and its expression. Some examples of sexual orientation include:</p> <ul style="list-style-type: none"> • Asexuality: Someone who doesn't experience sexual attraction. • Bisexuality: Someone who is attracted to both men and women. • Pansexuality: Someone who is attracted to people regardless of gender and who assumes that there are more than simply two genders. • Heterosexuality/Straight: Someone who is attracted to people of a different gender than themselves.
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DEFINITIONS (Cont.)

	<ul style="list-style-type: none">● Homosexuality/Gay or Lesbian: Someone who is attracted to people of the same gender.<ul style="list-style-type: none">○ Gay is primarily used to refer to men who are attracted to other men, though it is also used more globally to represent both gay men and lesbians. Homosexuality is an older term that many gay or lesbian people find to be offensive.○ Lesbian is used to describe a woman who is attracted to other women.● Gender Non-Conforming (GNC) means one who does not subscribe to gender expression or roles imposed by society. <p>Gender Expression describes the ways in which individuals communicate their gender to others. People express and interpret gender through hairstyles, clothing, physical expression and mannerism, physical alterations of their body or by choosing a name that reflects their gender identity.</p> <p>Gender Binaries assume that there are only two sexes (male/female) and two genders (man/woman). Some people experience that definition as too narrow or confining and not representative of their experience of themselves. Some of the words that people use to describe this identity include genderqueer, bois, grrls, NB, non-binary and gender fluid.</p> <p>Intersex is a general term used for a variety of conditions in which a person is born with a chromosomal, reproductive or sexual anatomy that does not seem to fit the typical definitions of female or male. (This word replaces "hermaphrodite".)</p> <p>Questioning – People (often youth although not always) who are in the process of questioning their sexual orientation or gender identity.</p> <p>Sex is a biological construct that refers to one's internal and external reproductive organs, secondary sex characteristics and chromosomes. Sex is generally assigned at birth.</p> <p>LGBTQI is an umbrella term for people who identify as Lesbian, Gay, Bisexual, Transgender, Queer and/or Intersex.</p> <p>Pronouns – Individuals may choose new pronouns to match their gender identity. Examples of common pronouns are he/she/they/ze/hir, etc.</p>
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Q & A REGARDING PROTOCOLS

Is additional training available to DCF employees and providers?	<p>DCF employees and contracted providers may request additional training regarding sex, gender identity, gender expression and sexual orientation. This training is available through DCF's Academy for Workforce Development. In addition, offices and agencies may request on-site training, following their current internal protocols.</p> <p>LGBTQI youth experience trauma at high rates, and trauma can include reactions to social stigma, bias or harassment. The National Child Traumatic Stress Network (NCTSN) provides a free webinar for information related to this topic and can be found by signing into NCTSN's Learning Center at https://learn.nctsn.org/ and searching for LGBTQI.</p>
What information will be shared about my sexual orientation or gender identity?	<p>Disclosure of information about a youth's LGBTQI status or gender non-conformity without youth consent occurs only when disclosure is necessary to comply with state or federal law, or required by court order.</p> <p>Any disclosure of confidential information related to a youth's LGBTQI status shall be limited to information necessary to achieve a specific beneficial purpose.</p>
Is government or medical documentation needed in order to be protected by state law?	<p>No. Connecticut State law specifies that gender-related identity can be shown by providing evidence including, but not limited to,</p> <ul style="list-style-type: none">• Medical history;• Care or treatment of the gender-related identity;• Consistent and uniform assertion of the gender-related identity; <i>or</i>• Any other evidence that the identity is sincerely held, part of a person's core identity or not being asserted for an improper purpose. <p>However, the list is included in the law as examples of ways in which a gender-related identity <i>can</i> be shown, not as ways that a gender-related identity <i>must</i> be shown. The law does not include examples of how a gender-related appearance or behavior may be shown.</p>

Q & A REGARDING PROTOCOLS (Cont.)

What are gender markers and how should DCF document them for transgender and gender non-conforming youth?	<p>Gender markers are the designation on official records that indicate a youth's gender. Gender markers shall (and in most case, should) be determined by the youth's affirmed gender identity rather than his, her, their birth sex.</p> <p>The youth's current gender identity shall be reflected in the DCF record, as agreed upon by them.</p>
Health care access	<p>DCF will strive to provide access to healthcare providers knowledgeable about the needs of all youth including transgender youth, whenever appropriate. In addition, DCF shall ensure that youth receive care and treatment that are deemed medically necessary, including but not limited to, puberty blockers, cross-gender hormones and medically appropriate surgeries. Requests and recommendations for treatment related to gender reassignment must be brought to the DCF Medical Review Board (MRB). A list of providers is attached.</p> <p>The Medical Review Board (MRB) shall make recommendations to the Commissioner or designee in matters concerning the medical care and treatment of children in the care and custody of DCF when their health situations are exceptionally complex or present other ethical or legal issues in accordance with DCF Policy 26-8-1, "Institutional Review Board." See also the <i>Standards and Practice Regarding the Health Care of Children in DCF's Care</i>.</p>

Q & A REGARDING PROTOCOLS (Cont.)

Healthcare Advocate	<p>Husky and other insurance providers in Connecticut are required to provide coverage for medically necessary treatments for transgender youth and adults. The DCF Health Advocates and the Office of the Healthcare Advocate are resources for intervention if a child is refused coverage. For more information call 866-466-4446 or access the site at: http://ct.gov/oha/site/default.asp.</p>
Out-of-home placements for transgender or gender non-conforming youth	<p>All in- and out-of-state placements should be consistent with and supportive of a transgender or gender non-conforming youth's gender identity and expression. This means that, for sex-segregated placements, a youth shall be placed based on his or her gender identity unless there are compelling reasons that this is not in their best interest.</p> <p>Transgender youth shall not automatically be placed according to their sex assigned at birth. Agency staff shall make placement decisions for transgender youth based on the youth's individualized needs and should prioritize the youth's emotional and physical safety taking into account the youth's perception of where they will be most secure. Generally, it is most appropriate to place transgender youth based on their gender identity. If necessary to ensure their privacy and safety, transgender youth shall be provided a single room, if available.</p> <p>The law specifically requires that every contract to which the state is a party shall contain provisions that the contractor will not discriminate on the basis of gender identity and expression (among other protected classes) in the performance of the contract or as an employer. This is to include all licensed foster parents.</p> <p>The Department shall facilitate recruitment and retention of affirming foster or adoptive parent(s) or mentors, to ensure that all persons, including LGBTQI individuals are given consideration fair and equal to all other individuals.</p> <p>No child shall be removed from a biological, foster or adoptive family based solely on the parent(s)'s gender identify/expression, marital/partner or cohabitation status, or actual or perceived sexual orientation.</p>
When treatment groups are sex segregated, in which group should a transgender youth be placed?	<p>Youth should have access to groups and programming that are consistent with their gender identity.</p>

Q & A REGARDING PROTOCOLS (Cont.)

<p>How should DCF be sure that the needs of transgender and gender non-conforming youth in its care are met and that transgender and gender non-conforming youth receive fair and equal treatment?</p>	<p>There are many ways a DCF employee or provider can ensure safe, fair and equal treatment of transgender and gender non-conforming youth.</p> <p>If a youth uses a different name than is reflected in his or her legal documents, DCF staff and providers should address the youth by his or her chosen name and use the correlative gender pronouns.</p> <p>To support fair and equal treatment, DCF staff and contractors will:</p> <ul style="list-style-type: none">• Provide support for and affirmation of a youth's gender identity and not punish, shame or ridicule a youth for wearing clothing, behaving or appearing physically in ways consistent with his or her gender identity;• Regularly engage in discussions with staff, care providers and other youth about respecting differences and understanding the harms of bias and harassment;• Avoid perpetuating gender stereotypes in DCF's programs;• Ensure youth receive competent and affirming mental health and medical services• Recognize that LGBTQI youth experience higher rates of trauma and that their trauma experiences, among other experiences, also include social stigma, bias and harassment and seek to identify the youth's trauma and acquire services to address the trauma(s) they have experienced;• Interact respectfully with all youth, irrespective of sexual orientation, gender identity, or gender expression.• Not use language—verbal or nonverbal—that demeans, ridicules, or condemns LGBTQI or gender non-conforming individuals. They shall not imply to or tell LGBTQI youth they can or should change their sexual orientation gender identity or gender expression. Nor shall they make any attempts to change a youth's sexual orientation, gender identity, or gender expression.• Agency staff and contractors shall not impose their personal or religious beliefs on LGBTQI youth, and in no way shall personal beliefs impact the way individual needs of youth are met.• Agency staff and contractors shall use the preferred name and pronoun of transgender or gender non-conforming youth, regardless of the name on the youth's identity documents.• Agency staff shall avoid making assumptions about the sexual orientation, gender identity, and gender expression (SOGIE) of youth or using language that assumes that everyone is heterosexual or that heterosexuality is preferable or superior to any other identity.• Agency staff shall defer to youth about the language they use to describe their SOGIE.
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Q & A REGARDING PROTOCOLS (Cont.)

<p>What do I do if I learn that a transgender or gender non-conforming youth is suffering threats or harassment by peers or others?</p>	<p>DCF staff shall follow DCF policy and guidelines for interrupting intolerance. If a DCF employee is aware of another employee or provider discriminating on the basis of gender expression or identity, the DCF employee shall immediately bring that discrimination to the attention of his or her supervisor, the DCF Human Resources Division and the DCF Office of Diversity and Equity, as applicable, for investigation and resolution.</p> <p>DCF staff shall promptly and appropriately intervene when a youth who physically, verbally, or sexually abuses or harasses another youth based on the youth's actual or perceived sexual orientation or gender identity.</p> <p>DCF staff and contractors shall be required to report all incidents in violation of this policy in accordance with DCF Policy 7 – 4, “Harassment and Discrimination-Free Workplace”. Failure to report an incident may result in disciplinary or other consequences.</p> <p>DCF staff have an obligation to report conduct by other staff and contractors that may be in violation of this policy to the other individual’s supervisor and the [facility] administration.</p>
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FAMILY-CENTERED ASSESSMENT CONSIDERATIONS

The following offers ideas for additional areas to explore with the family when a child is transgender or gender non-conforming.

Patterns of Family and Social Interactions:

- Tell me a little about your child when he or she was younger. What, if any, behaviors, positive or other, did you notice that made you wonder about your child's gender? (Some examples might include: toys, clothes and games the child preferred; the child's activity level, and emotionality; etc.)
- Who in the family tended to notice or point out these behaviors? How did these family members respond to the child? How did they respond (what did they say) about the behaviors to the child's primary caregiver?
- Who in your family has been most accepting of the child's way of being? Least accepting? Where do you fit on that continuum?
- Have other people in your community or social support network offered you advice about your child's gender behaviors? What have they recommended?

Background and History of the Parents or Caregivers:

- What roles do males and females play in your family: chores, hobbies and interests, toys, behaviors. Were the rules, beliefs and values regarding sexual orientation similar or different? What happened when the rules were not followed?

Parenting Practices:

- As you ask parenting questions such as who is involved or not involved with the child, who supervises, etc., add a question about the feelings, perspectives and opinions about the child's gendered behavior among anyone who has a caregiving role (positive or negative).
- Tell me about your discipline practices. What are some examples of behaviors that led to using discipline? Was discipline a result of the child's sexual orientation or gender identity and expression?

Trauma History:

- Does the child identify trauma exposure, including trauma resulting social stigma, bias or harassment?
- Has the child experienced trauma? If so, determine if there is a connection to his or her gender expression or identity. Has the child been shamed or abused specifically due to gender behaviors? At what developmental stage and by whom?
- What interventions, if any, were provided to address the trauma and how did the child receive it?

PROTECTIVE FACTORS

The attributes below serve as buffers, helping parents to find resources, supports, or coping strategies that allow them to parent effectively even under stress. They are the conditions in families and communities that increase the health and well-being of children and families. Research has shown that the following protective factors are linked to a lower incidence of child abuse and neglect:

Current research demonstrates that *family acceptance or rejection* is the single most important predictor of outcomes for sexual and gender minority youth (Caitlin Ryan, PhD., Family Acceptance Project, San Francisco State University). Youth whose families are *supportive* have significantly lower rates of suicidality, substance abuse, depression and anxiety, truancy, homelessness and sexual acting out. In addition, and this is critical to supporting families, Ryan's research demonstrates that the outcomes for youth whose families are ambivalent, while less positive than supportive families, are nowhere near as negative as the outcomes for youth whose families are rejecting. Further, *a family's initial response is rarely its final response*. This means that skilled workers can make an appreciable difference in helping families move from rejection to ambivalence and even to acceptance.

It is normal for children and preschoolers to experiment and play with gender. Although most children are typically gendered, some exhibit traits or preferences more common to another gender. There is nothing pathologically or psychologically wrong with these children. Attempts to force or even encourage children to change these behaviors generally results in the child becoming anxious, depressed, withdrawn or angry. There is no evidence that attempts to influence their behavior will change their identities. A percentage of the children who are significantly gender non-conforming in toddlerhood and preschool will continue to be so throughout childhood, into and beyond puberty. A percentage will revert to identifying with the sex assigned at birth, and a third (and largest) group will begin to identify as gay, lesbian or bisexual. A parent's primary job during this process is to be patient, learn strategies and techniques to manage the parent's own anxiety about not knowing the outcome, and to let the child be who they are day to day. Work with the parents to help them recognize the signs of stress (both in themselves and in their child) and to develop coping strategies.

Nurturing and attachment

- What was your child like as a baby and a toddler? What did you like or enjoy the most about them during those ages? Are there still times that you can see those traits reflected in them?
- What are some of the things you like, respect or admire about your child? What does your child excel at? Name one or two things you find special and unique about your child.
- What were some of the hopes and dreams you had for your child when he or she was born? Are there elements of those dreams that you think might not be possible because of your child's gender identity or behavior? Which of those dreams might you have to mourn and let go? Which might still come true? What new dreams might be possible for you and your child now that you know about his or her identity?
- What scares you as you think about your child's future? Do you know any other gender non-conforming or transgender people? Would it be helpful to you to learn more about other transgender people and their lives?

Knowledge of parenting and of child development

- What strengths did the parents noticed in their child when in preschool? What talents and abilities did the parents notice while the child was growing through the different stages? What concerns or worries does the parent have for the child identifying transgender in each stage of the child's development, both in their current stage and as they imagine future stages? Pre-school? Latency? Puberty? Adulthood?

PROTECTIVE FACTORS, (Cont.)

- How would they describe the child's current friendship and dating network? Are there any "red flags" or concerns? Do they believe their child can have healthy fulfilling relationships? Do they believe their child can have a happy life?

Parental resilience

- Which of the child's behaviors stress the parents the most? How might they manage those triggers? What reactions from others most trigger the parents? The child? How might they manage those triggers?
- How do the parents manage stress? What helps the parent function at his/her best?

Social connections

- Who are the family's social connections? Who do they reach out to for support? How would the family characterize the feelings and beliefs those social connections have with regard to their child?
- To whom might they turn to learn more about what it means to be gender non-conforming or transgender? Do they have access to the internet? Would they be willing to talk with other parents in similar situations? Would they be willing to speak to a clinician who has worked with other families with children like theirs?

While parents do not need to necessarily change their values to learn to accept their gender non-conforming children, they may need to change some of their behaviors. (See Evidence-Based Behavioral Change Recommendations below.) Gender non-conforming and transgender children are at increased risk for trauma resulting from societal biases and harassment at school and in the community at large. Parents need to remain alert for signs that their child is being targeted, bullied or harassed and be willing to intervene. Parents may need to learn advocacy skills in order to ensure that their child is safe at school, within their community of faith, around other family members and within the community at large. Children need to be protected and they need to learn skills for thriving in a society which may not affirm or appreciate them.

Individual factors

- Motivation to change: Which of your supports and skills might help you better accept your child's differences? Which protective behaviors might you see yourself being able to use? What small goals might you be able to achieve now? What services might help you with this?
- Awareness of the threats to safety: Has your child experienced any difficulties with people outside your home? Have they reported or have you seen or heard them being teased or harassed because of their gender differences at school, within your family or kinship network, in the neighborhood, within your community of faith or when accessing medical or other services? Does the caregiver blame the child or the child's behaviors for the harassment?
- Ability to take action to protect children: Does the caregiver demonstrate actions to protect the child? Does the caregiver have a history of protecting the child if there have been threats to the safety of the child? Does the caregiver acknowledge the availability of and act on getting needed supports? Does the caregiver demonstrate appropriate assertiveness in advocating for the child with others?

Evidence-Based Behavioral Change Recommendations

The following is a list of parental behaviors that decrease a child's risk factors (behaviors that help) and increase a child's risk factors (behaviors to avoid). The list emerged from longitudinal research conducted by Caitlin Ryan, Ph.D. at the Family Acceptance Project.

Behaviors that Help:

- Talk with your child about his or her identity
- Express affection when your child tells you or when you learn that your child is gay or transgender
- Support your child's identity even though you may feel uncomfortable
- Advocate for your child when he or she is mistreated because of his or her identity
- Require that other family members respect your child
- Bring your child to LGBTQI organizations and events
- Connect your child with an LGBTQI adult role model
- Welcome your child's friends and partners into your home
- Support your child's gender expression
- **Believe your child can have a happy future as an adult**

Behaviors to Avoid:

- Hitting, slapping or physically hurting your child because of his or her identity
- Verbal harassment or name calling because of the child's identity
- Excluding youth who identify LGBTQI from family and family activities
- Blocking access to friends who identify LGBTQI, events and resources
- Blaming your child when he or she is discriminated against because of his or her identity
- Pressuring your child to be more (or less) masculine or feminine
- Telling your child that God will punish him or her because he or she is gay
- Telling your child that you are ashamed of him or her or that how he or she looks or acts will shame the family
- Making your child keep his or her identity a secret in the family and not letting the child talk about it

For more information regarding this research, see <http://familyproject.sfsu.edu/>.

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RESOURCES

SUPPORT FOR PARENTS AND CAREGIVERS (INCLUDING FOSTER PARENTS)

PFLAG National (Parents, Families and Friends of Lesbians and Gays):	www.pflag.org
PFLAG Hartford	pflaghartford@gmail.com ; www.pflaghartford.org
Meets the 3 rd Wednesday of the month, Immanuel Congregational Church, 10 Woodland Street in Hartford at 7:30 p.m.. Members publish a bi-monthly newsletter; provide Helpline services; offer informational pamphlets, books and tapes; maintain a speaker's bureau; and work within the Greater Hartford Area for affirming families, safe schools, inclusive faith communities and informed lawmakers.	(860) 785-0909
PFLAG Hampton	pflaghampton@gmail.com
Meets the 3 rd Thursday of the month, 6:30 p.m., Hampton Community Center, 178 Main Street, Hampton, CT.	(860) 455-9149
PFLAG Manchester	pflaghartford@gmail.com
Meets the 1 st Tuesday of every month, 6:30-8:00 p.m., 63 Linden St., Manchester, CT. This group meets at the same time as a teen group and a youth group.	(860) 785-0909
PFLAG Naugatuck	stalbot@naugatuckymca.org
Meets the 3 rd Monday of the month, 6:00 – 8:00 p.m., YMCA located at 270 Church Street, Naugatuck, CT.	(203) 729-9622
New Haven TransPACT (Parents of CT's Transgender Youth)	tony@tonyferraiolo.com Tony: (203) 376-8089
A support group dedicated to helping parents navigate the journey they and their children are on. Meets at the same time as the teen support group. Call or email Tony for more information.	
PFLAG Noank	pflagsect@snet.net or bjalthen@sbcglobal.net (860) 447-0884
Meets the 2 nd Monday of each month in the basement meeting room of the Noank Baptist Church (a welcoming and affirming church). Potluck at 6:00 p.m. and meeting at 7:00 p.m. at 18 Cathedral Heights, Noank, CT.	
PFLAG Norwalk	pflagnorwalk@gmail.com
Meets the 2 nd Sunday of the month, 3:00 – 5:00 p.m., Triangle Community Center, 618 West Avenue, Norwalk, CT. This group meets at the same time as the Transgender and Gender Questioning youth forum.	
PFLAG Waterbury	pflagwaterbury@gmail.com
Meets the 4 th Tuesday of every month, 7:00—8:30 p.m., South Congregational Church, 160 Piedmont Street, Waterbury, CT.	

INFORMATION FOR PROVIDERS/CAREGIVERS

- **American Psychological Association** "Answers to Your Questions About Transgender Individuals and Gender Identity" www.apa.org/topics/transgender.html
- **Gender Spectrum** is an organization dedicated to the education and support of families raising gender variant, gender non-conforming, gender fluid, crossgender, and transgender children and adolescents. www.genderspectrum.org/
- **TransYouth Family Alliance:** TYFA empowers children and families by partnering with educators, service providers and communities to develop supportive environments in which gender may be expressed and respected. www.imatyfa.org/
- **True Colors, Inc.** manages the Safe Harbor Project, a collaboration between DCF and True Colors that focuses on the needs of LGBT youth in out-of-home care. True Colors can provide case specific consultation and training.
- **WPATH:** The World Professional Association for Transgender Health (WPATH), formerly known as the Harry Benjamin International Gender Dysphoria Association (HBIGDA), is a professional organization devoted to the understanding and treatment of gender identity disorders. www.wpath.org/

PROGRAMS/GROUPS FOR YOUTH

Before attending a group listed below, please contact the group's leadership directly to verify meeting times/locations!

BRIDGEPORT

Game Night with True Colors gsa@ourtruecolors.org **(860) 232-0050, x306**

Ages 13 – 22, 1st Friday of the month, 6:00 – 8:00 p.m., Hall Neighborhood House, 52 George E. Pipkins Way, Bridgeport, CT. Light refreshments served.

Outspoken Social/Support Group Katelyn@ctpridecenter.org **(203) 853-0600 x103**

Ages 13 – 22, 2nd Friday of the month, 6p.m. – 7p.m., Center for Family Justice, 753 Fairfield Ave., Bridgeport, CT.

ESSEX

Open Doors Middlesexwellness@gmail.com **(860) 510-6130**

Grades 8 – 12, 2nd Wednesday of the month, 6:30 - 8:00 p.m. at 80 Plains Rd, Essex, CT. Please note you MUST rsvp to attend group! **Contact Jackie at the number above to RSVP.** Participation is FREE; attendees are asked to bring a non-perishable food item to donate to the Shoreline Soup Kitchen. For more information contact Jackie at the information above or annepetersonlpc@gmail.com.

Open Doors Junior Middlesexwellness@gmail.com **(860) 510-6130**

Grades 4 – 7, meeting days/time TBA. Please note you MUST rsvp to Jackie at the number above to attend the group! This group is currently forming.

FAIRFIELD

The Loft Liane.Nelson@gmail.com **(914) 949-7699 x475**

Meets most Fridays at 4:30 – 5:30 p.m. at Central Library (Memorial Room) 1080- Old Post Road, Fairfield, CT.

GLASTONBURY

Rainbow Café pattisivocole@gmail.com **(860) 633-5057**

Meeting times vary. St. Luke's Church, Main Street, Glastonbury, CT. Contact Patti for dates and times.

GROTON/NEW LONDON/NOANK

OutCT Youth Program [Youth@outct.org](mailto>Youth@outct.org) **(860) 339-4060 x 203**

The group meets the 3rd Sunday of each month from 3:00 – 6:00 p.m. at Main Street House, 36 Main Street, Noank, CT. For more information, contact Mario at the number above or visit www.outct.org or email youth@outct.org. Refreshments provided; parking and entrance at rear of building.

HAMDEN

CTHealingCenter@yahoo.com **(203) 288-4325**

For young adults, 18+, group fee on a sliding scale. Meets the 1st Thursday of the month, 7:00 – 8:00 p.m., CT Healing Center, 830 Sherman Ave, Hamden, CT. Facilitators: Meredith Bailey, APRN and Dennis Aptaker, OT.

HARTFORD

Friday night activities at True Colors gsa@ourtruecolors.org **(860) 232-0050, x306**

Youth Activities (open to the public); Fridays, September—June, 6:30 - 8:30 p.m., True Colors Office, 30 Arbor St, Hartford, CT. Refreshments provided.

Institute of Living/Hartford Hospital Support Group: The Right Track www.outct.org **(860) 545-7665**

A support group led by licensed clinicians for LGBT or Questioning youth between 16 – 23 who identify LGBTQ issues as being prominent in their lives. This group is tailored to meet the unique developmental, educational, and social needs of the LGBTQ population. Meets the 2nd and 4th Wednesday of each month, 5:00 – 6:15 p.m. Call for more information.

Healing Hearts [Jacqueline: \(860\) 225-4681 ext.208 / Jessica: \(860\) 225-4681 ext. 266](tel:(860)225-4681)

A Group for LGBTQ Survivors of Sexual Assault. All ages, Thursdays 5:30-7:30 p.m., YWCA New Britain Sexual Assault Crisis Service; 75 Charter Oak Ave., Suite 1-304, Hartford, CT.

K.I.K.Igvadi@lcs-ct.org**(860) 241-0024**

Gay Male Social/ Educational Group; Age: 17+, every other Thursday. Latino Community Services, Project STEP, 185 Wethersfield Ave, Hartford, CT. Contact Gina Vadi at the information above for meeting times and details.

MANCHESTER**PFLAG Teen Group**ksheridan@manchesterct.gov**(860) 647-5262**

Age: 12-14 with guardian, 15-18 with or without guardian. Meets the 1st Tuesday of every month, 6:30-8:00 p.m.

Manchester Youth Services Bureau, 63 Linden St., Manchester, CT. Contact Kellie at the information above. This meeting is at the same time as a youth meeting and a PFLAG meeting in the same building.

GNC Youth Activity Groupksheridan@manchesterct.gov**(860) 647-5262**

Age: 6-12 with guardian. Meets the 1st Tuesday of every month, 6:30-8:00 p.m., Manchester Youth Services Bureau, 63 Linden St., Manchester, CT. This meeting is at the same time as a teen group meeting and a PFLAG meeting in the same building.

MERIDEN**Your Safe Space**Cmoore@womenfamilies.org**(203) 235-9297**

This group is for gay, lesbian, bisexual, transgender, intersex and questioning youth ages 13– 24. It meets on the last Thursday of the month at 5:30 to 7:00 p.m. at the Women and Families Center, 169 Colony Street, 2nd floor, Meriden, CT. Contact Carla at the number above for more information.

NEW HAVEN**LGBTQ+ Youth Kickback**LGBTQYouthKickBackNHV@gmail.com**(646) 409-6631**

A youth-led, inclusive space for queer youth and advocates in Greater New Haven, supported by community volunteers at Yale and the People's Arts Collective. Meets Mondays, 3:30-6:00 p.m., Institute Library, 847 Chapel St. New Haven, CT. For more information, email lgbtqyouthkickbacknhv@gmail.com.

Translation (14-17)tony@tonyferraiolo.com**(203) 376-8089**

Strictly for transgendered youth only, 13 – 18 years old. Based in New Haven. Contact Tony by phone or email tony@tonyferraiolo.com for meeting details. A parent group (TransPACT), and an art group for transgender and gender non-conforming children between the ages of 8 and 13 (Create Yourself Art Group) are also running.

Create Yourself, Trans/GNC Youth Art Grouptony@tonyferraiolo.com**(203) 376-8089**

Ages 8 – 12; Meeting times and locations vary. Contact Tony for more information.

Life Gets Better Together (L.G.B.T)thedaviscompanies@execs.com**(203) 627-8734**

Discussion Group, Ages 15 – 19; Tuesdays 5:30 – 7:30 p.m.; 32 Norton Street, New Haven, CT. Contact Tiffany for more information.

NORWALK**OutSpoken****(203) 853-0600**

OutSpoken meets the 2nd and last Sunday from 4:30 – 6:00 p.m. at the Triangle Community Center, 618 West Avenue, Norwalk, CT. The meetings are free for LGBT youth, ages ranging from 13-22. The group is designed to provide a safe place for LGBT and questioning youth to meet for support and social activities.

Transgender & Gender Questioning Youthkatelyn@ctpridecenter.org**(203) 853-0600 x 103**

Ages 13 – 24. Meets 2nd and last Sunday of the month from 3:00 - 4:30 p.m., Triangle Community Center, 618 West Ave, Norwalk, CT. Contact Katelyn at the info above or Micaela at micaelascully@gmail.com.

STAMFORD**Rainbow Café**www.facebook.com/RainbowCafeStamford/**(203) 569-7106**

Rainbow Cafe-Stamford, now in its fourth year, is a safe space and meeting group for LGBTQ teens and their allies. They are open to all youth in the greater Stamford area ages 18 and under. Meetings happen most Wednesdays at FCC-Stamford, 1 Walton Pl at Bedford St., Stamford, CT.

GENDER CLINICS

Guppe Clinic

Jill Leferson Bernstein, MD, FAAP; Priya Phulwani, MD

(860) 545-9520 (Hartford)

The GUPPE clinic is located at the Department of Urology 2G, Connecticut Children's Medical Center, 282 Washington St, Hartford, CT 06106. Please specify that you wish to have a GUPPE appointment.

Yale New Haven Children's Hospital Adolescent Services Gender Clinic

Dr. Susan Boulware

(203) 785-4081

(203) 764-9199

AFFIRMING BOOKS ABOUT GENDER NON-CONFORMING CHILDREN

Bergman, S. Bear. *The Adventures of Tulip, Birthday Wish Fairy.* Toronto, Canada: Flamingo Rampant, 2012.

Bergman, S. Bear and Diamond, KD. *Backwards Day.* Toronto, Canada: Flamingo Rampant, 2012.

Bryan, Jennifer. *The Different Dragon.* Ridley Park, PA: Two Lives Publishing, 2006. Print.

Carr, J. *Be Who You Are.* AuthorHouse, 2010. Print.

Ewert, Marcus. *10,000 Dresses.* SevenStories Press, 2008. Print.

Ferraiolo, Tony. *Artistic Expressions of Transgender Youth.* Tony Ferraiolo, LLC. (2015)

Kilodavis, C. *My Princess Boy.* Aladdin, 2010. Print.

Zolotow, C. *William's Doll.* Harper & Row, 1985. Print.

Fierstein, H. *The Sissy Duckling.* Simon & Schuster Books for Young Readers, 2005. Print.

BEST PRACTICES

Child Welfare League of America's (CWLA) "Best Practice Guidelines" for Serving LGBT Youth in Out-of-Home Care, available at: <http://www.nclrights.org/wp-content/uploads/2013/07/bestpracticeslgbtyouth.pdf>.

National Center for Lesbian Rights (NCLR's) "A Place of Respect: A Guide for Group Care Facilities Serving Transgender and Gender Non-conforming Youth," available at: http://www.nclrights.org/wp-content/uploads/2013/07/A_Place_Of_Respect.pdf.

NCLR's "LGBTQ Youth in the Foster Care System," available at:

http://www.nclrights.org/wp-content/uploads/2013/07/LGBTQ_Youth_In_Foster_Care_System.pdf.

The Fenway Health Institute's learning modules concerning LGBTQ health topics, including Module 4, "Caring for LGBTQ Youth," and Module 7, "Understanding the T in LGBT," available at:

http://www.fenwayhealth.org/site/PageServer?pagename=FCHC_ins_fenway_EducPro_modules.

National Child Traumatic Stress Network (NCTSN) - LGBTQ Resources for LGBTQ Youth and Trauma

Safe Places. Safe Spaces. Creating Welcoming and Inclusive Environments for Traumatized LGBTQ Youth Video and Resource Guide — <http://nctsn.org/trauma-types/sexual-abuse>

LGBTQ Youth and Sexual Abuse: Information for Mental Health Professionals —

http://www.nctsn.org/sites/default/files/assets/pdfs/lgbtq_tipsheet_for_professionals.pdf

Transforming Trauma in LGBTQ Youth Speaker Series —
<http://learn.nctsn.org/course/index.php?categoryid=40>

Impact of Polyvictimization on LGBTQ Youth and Adults — <http://learn.nctsn.org/course/view.php?id=211>

Spotlight on Culture: Trust and Acceptance Can Encourage LGBTQ Youth to Disclose Abuse —
http://nctsn.org/sites/default/files/assets/pdfs/lgbtq_youth.pdf

Culture and Trauma Brief: Trauma among Lesbian, Gay, Bisexual, Transgender, or Questioning Youth —
http://www.nctsnet.org/sites/default/files/assets/pdfs/culture_and_trauma_brief_LGBTQ_youth.pdf

Trauma among Gay, Lesbian, Bisexual, and Transgender Youth —
<http://learn.nctsn.org/mod/page/view.php?id=439>

BOOKS AND ARTICLES

Boenke, M., et al. *Trans Forming Families: Real Stories about Transgendered Loved Ones*. Oak Knoll Press, 2003. Print.

Boylan, Jennifer F. *Stuck in the Middle with You*. Random House LLC. 2014. Print.

Brill, Stephanie A. and Pepper, Rachel. *The Transgender Child: A Handbook for Families and Professionals*. San Francisco, CA: Cleis Press, 2008. Print.

Ehrensaft, Diane. *Gender Born, Gender Made: Raising Healthy Gender-Nonconforming Children*. NYC: The Experiment, 2011. Print.

Glenn, Wendell D. *For Colored Girls Only: Reflections of an Emerging Male-to-Female Transgender and Gender Variant Youth Consciousness*. Routledge, 2009. Print.

Grossman, A.H., D'Augelli, A.R., Salter, N.P., Hubbard, S.M. "Comparing gender expression, gender nonconformity, and parents' responses of female-to-male and male-to-female transgender youth: Implications for counseling." *Journal on LGBT Issues in Counseling* 1.1 (2007): 41-59. Print.

Herman, Joanne. *Transgender Explained To Those Who Are Not*. Bloomington, IN: AuthorHouse, 2009. Print.

Krieger, Irwin. *Counseling Transgender and Non-Binary Youth: The Essential Guide*. Jessica Kinsley Publishers. London and Philadelphia. (2017)

Krieger, Irwin. *Helping Your Transgender Teen: a guide for Parents*. New Haven, CT: Genderwise Press, 2011. Print.

Kuklin, Susan. *Beyond Magenta*. Candlewick. 2014. Print.

Nealy, Elijah. *Transgender Children and Youth: Cultivating Pride and Joy with Families in Transition*. W.W. Norton and Company. New York and London. (2017)

Ryan, Caitlin; Huebner, David; Diaz, Rafael M.; & Sanchez, Jorge. "Family Rejection as a Predictor of Negative Outcomes in White and Latino Lesbian, Gay, and Bisexual Young Adults." *Pediatrics* 123(2009): 346-352. Print