

**LIVE THROUGH THIS:
THE EXPERIENCES OF QUEER YOUTH IN CARE IN MANITOBA**

BY

LINDA DAME

A thesis submitted to
the Faculty of Graduate Studies
In Partial Fulfillment of the Requirements for the Degree of

MASTER OF SOCIAL WORK

Department of Social Work
University of Manitoba
Winnipeg, Manitoba

© Linda Dame, July 2004

THE UNIVERSITY OF MANITOBA
FACULTY OF GRADUATE STUDIES

COPYRIGHT PERMISSION PAGE

Live Through This: The Experiences of Queer Youth in Care in Manitoba

BY

Linda Dame

**A Thesis/Practicum submitted to the Faculty of Graduate Studies of The University
of Manitoba in partial fulfillment of the requirements of the degree**

of

MASTER OF SOCIAL WORK

LINDA DAME ©2004

Permission has been granted to the Library of The University of Manitoba to lend or sell copies of this thesis/practicum, to the National Library of Canada to microfilm this thesis and to lend or sell copies of the film, and to University Microfilm Inc. to publish an abstract of this thesis/practicum.

The author reserves other publication rights, and neither this thesis/practicum nor extensive extracts from it may be printed or otherwise reproduced without the author's written permission.

ACKNOWLEDGMENTS

There are four gifted, generous, and strong women who made this accomplishment possible for me. Included in those four are the three members of my thesis advising committee. These three women: Dr. Susan Strega, Dr. Janice Ristock, and Kim Clare, very possibly comprise the first ever all lesbian master's committee in the history of the University of Manitoba. Of course there is no historical accounting to verify this assumption against, no book in the library entitled: *The History of Lesbians and Their Contributions to the Education of Students at the University of Manitoba*. But perhaps if there ever is, these three women would be featured.

Kim Clare was known to me through her compassionate reputation before I had the opportunity to meet her face to face. She is a dedicated educator and a truly warm person. Her calming voice during times of stress and her attention to detail in the final stages added much to this thesis and I am thankful.

Dr. Janice Ristock is one of the University of Manitoba's most valuable and dedicated professors. There is hardly anyone even remotely educated in women's studies, feminist theory, and/or feminist research practices in North America that has not been exposed to her writings. It was an honour for me that Dr. Ristock agreed to be on my advising committee. Her insightful contributions and enthusiastic support were invaluable. Thank you.

The remaining member of my committee and my main thesis advisor is Dr. Susan Strega. I could write as much as this thesis detailing all the ways Dr. Strega supported me and guided me through the process of writing this thesis.

She is my advisor and my mentor. Dr. Strega embodies all the qualities of a great professor and she is the best thing that ever happened to the social work faculty at the University of Manitoba. Dr. Strega, you made this solitary journey an exciting and enriching experience and I am forever grateful.

Finally, I would like to acknowledge the woman in my life for whom I am grateful every day. Brenda Robbins, life with you makes every dream possible. I love you, I thank you, and I share this success with you.

TABLE OF CONTENTS

INTRODUCTION	1
RATIONALE	9
LITERATURE REVIEW	16
METHODOLOGY	38
METHODS	45
ETHICS	62
DATA ANALYSIS	81
DISCUSSION	107
CONCLUSION	120
REFERENCES	122
APPENDIX	128

In June of 2001 I began a position with the province of Manitoba as a social worker for children and youth permanently in care. Up until that time I had worked in the child social services field for several years but I had not worked as a mandated child protection worker. During my career I had seen, experienced, and heard of systemic homophobia within child social services, but my first day on the job as a social worker began my exposure to just how ingrained those systemic abuses and discriminatory practices really are.

On the first day of my employment I had a meeting about my caseload with my direct supervisor from northern Manitoba and another supervisor from the Winnipeg office I would work in. When discussion turned to one particular fifteen year old I was informed that he was the most difficult child my entire office had ever experienced and very easily the most difficult child in the system period. The "problems" of this teen were never clear to me that first day and I was told that I would understand more when I met him. With my prodding I was told that this teen liked to "act out" by dressing "provocatively" and "inappropriately" and he regularly used this "negative attention-getting behaviour" to escalate staff in his home. Having worked in the Winnipeg group home system for years I had a good idea of what was considered provocative dress within youth culture and I felt unperturbed by it. I was soon to discover, from my perspective, that nothing that I was told regarding this youth was either accurate or fair.

The first time I met this teen was at the Crisis Stabilization Unit (CSU), where he had been admitted for his own "safety". The CSU is a short-term

locked unit used for stabilizing suicidal or self-harming adolescents. When I asked the CSU staff the reasons for admission and what the discharge plan was I encountered vagueness. I was told he was a habitual admission to the unit for extreme acting out behaviour and that after a day, two, or maybe more, he would return to his individual "treatment" home.

I had reviewed the file before I visited the CSU and I already knew that this boy was in fact a transgendered male to female young woman and that she, not he, had been subjected to incredibly ridiculous and abusive case planning strategies for many years, if not close to her entire young life. No note in the file referred to her transgenderism and all notes referred to her as male and used her original male name even though she had changed it years previously. File notes from when she as young as four years old described her interest in dressing like a girl. A psychological consultation conducted when she was about eight years old stated that when asked to draw a picture of herself she drew a woman, complete with accurate anatomy. Rather than being a case of "negative attention getting behaviour", this seemed to me to be a case of a young person reacting to the rigidity of institutionalized discrimination.

As this teen was a habitual admission to the CSU, staff knew her and followed the regular admission routine specific for her. This routine included having her wash her face to remove all traces of make up and taking off all female identifiable clothing, including her bra, and changing into the sweat pants and sweater they provided. When I asked the coordinator of the CSU why she

was stripped of her identity, which provided her with a great deal of security at a time when she was feeling most vulnerable, I was told that if she entered the boys' unit dressed like a female or looking like a female in any way it would be too upsetting for the other boys and they were all there to de-escalate. There was never any possibility of her staying on the girls unit even though there is twenty four hour staffing and surveillance and residents have their own separate rooms. Girls who are born girls who enter the CSU do not have to wash off their make up and they do not have to remove their bras.

Shortly after she began living at her treatment home, but still well before I met her, this teen had made a formal complaint to the office of the Children's Advocate stating that she did not feel that staff in her home respected her. She specifically complained about their use of male pronouns and their refusal to consistently use her name of choice. Even after she launched this formal complaint and the Children's Advocate, supporting her complaint, directed staff to use her chosen name and pronouns, there were still staff employed that continued to refuse to do so. The first time I entered this home I was assured by the coordinator that all staff tried hard to use her chosen name but that it was difficult to remember and sometimes accidental slips were made. While in the home that first time I saw a large white board in the staff office that had her male name written on it with notes and where she was referred to as "he". When I pointed out this discrepancy to the coordinator this practice was justified by her explanation that this teen did not have access to the office and therefore was not

aware that they were still using her male name for internal communication. However, during the time I was this teen's social worker and visited her home I saw her in the staff office often. Some time after I made this initial visit to the treatment home I was discussing the name issue with a senior colleague from my office in northern Manitoba. I thought this co-worker did a pretty good job of summing up the attitude the treatment home staff, the CSU, and Child and family Services (CFS) in general hold towards transgendered youth when she stated, "Look, if he thought he was Marilyn Monroe we wouldn't be doing him any good if we all agreed to call him Marilyn". At that point I knew my supervisor was right in our first meeting and that this was going to be a difficult case.

Case planning notes in her file from previous social workers outlined strategies they attempted to change her public cross-dressing behaviour. For example, one of these strategies consisted of allowing her to wear "women's clothing" and make-up only on Thursdays and only in the house. This and other strategies failed miserably because this teen vehemently refused to limit her cross-dressing and hated the androgynous clothes that were bought for her as a compromise. Attempted enforcement of the house rule for "gender neutral clothing" invariably resulted in a verbal fight with treatment home staff, often escalating and culminating in a CSU admission. And so the cycle continued.

The individual treatment home where she lived was a three bedroom suburban bungalow that, at that time, was operating solely for the purpose of housing this one teenager. The home had a director and twenty-four hour staffing

with double staffing most waking hours. No other residents were placed in the home at the time this teen lived there because it was felt by both the home's staff and this teen's previous social worker that placing another teen in the home would be too difficult to manage and it would unfairly subject the new resident to her disruptive behaviour.

In two years the province of Manitoba spent over a quarter of a million dollars housing this one "difficult" teenager. This teen has since run away from Winnipeg to Toronto where she joined the legions of marginalized teens living on the streets. At the time of this writing, her present whereabouts are unknown.

While I was this teen's social worker I was also taking courses through the Master's of Social Work program at the University of Manitoba. This thesis is the final requirement of that degree. At present no classes exist in that program that are designed to address the issues specific to lesbian, gay, bisexual, Two-Spirited, and/or transgendered youth or adults. In all the courses I took I had only *one* assigned reading that pertained to this population. It was one article, out of the thirty eight assigned for the course, on gay men who experience partner abuse in their relationships and it was assigned in an Issues in Family Violence course (Letellier, 1996).

However, there were three textbooks assigned through other courses that had contained some content on lesbian/gay issues. One of those textbooks was *Family Therapy: Concepts and Methods* and although this text does not acknowledge the lack of information in its own pages, it does state that, "We

hope the day will arrive soon when gay and lesbian families, African Americans, and other marginalized groups are studied by family therapists to learn not only about the problems they face but also about how they survive and thrive against such great odds" (Nichols and Schwartz, 1998, p.335). In this text one page out of 586 discusses lesbian and gay issues. It is dismissive that a current graduate level textbook can write about the lack of research and the wish for the social work profession to produce more literature about lesbian and gay families while at the same time failing to dedicate any more than *one page* of space to this issue, which they claim is "finally out of family therapy's closet" (p.334). The two white male authors wrote one page of lesbian and gay content and yet claim that their text covers "the full scope of family therapy" (p.xvii) while at the same time lamenting that "straight family therapists ignore this literature and receive little if any exposure to gay and lesbian issues in graduate school" (p.334).

Another assigned textbook, *Re-visioning Family Therapy: Race, Culture, and Gender in Clinical Practice*, contains one article, out of thirty one, on lesbian and gay families (McGoldrick, 1998) although that particular reading was not assigned. And the final textbook I was assigned in the graduate social work program at the University of Manitoba that even mentions anything gay specific did just that – only mention it. The text, *Structural Social Work* (Mullaly, 1997), was written by the newly hired white male heterosexual dean of the Social Work faculty at the University of Manitoba and it discusses structural social work and its ideology, theory, and practice. It includes sections entitled *The need for a*

Progressive Social Work Vision and A Progressive Perspective on Social Work Ideology. Despite this apparent claim to be progressive, this text, out of 228 pages, contains the word heterosexism exactly once. By its total exclusion of lesbian and gay people it represents the very definition of heterosexism. The subject index fails to contain the words homosexuality, homophobia, lesbian, or gay.

My employment, my education, my personal experiences in the community, and my passion for social justice and change have fueled the idea behind this research. But more than any of those influences, it is the youth themselves that brought me to this work. I have met and been moved by many queer youth in care that have become interesting and loving individuals despite growing up in a world that tells them they are wrong for being themselves and loving who they love. I thank them all and wish them peace and safety.

In months I will be graduating from a program that rendered me, my experience as a lesbian, and my entire community virtually invisible. I have lived and felt what it is like to be a negated member of society. As a woman privileged enough to have had the opportunity to attend graduate school I could not imagine picking any topic other than the emergency in how lesbian, gay, bisexual, and/or transgendered youth are treated by social work education and practice in this province. To me, queer youth in care is not a topic, it is a cause. They may be an invisible population but they have a lot to say and considering that queer

youth have up to three times the suicide rate of heterosexual youth (Morano and Cisler, 1993), I think it is time we listened.

My work will help this area in several important ways:

1. it is providing a base of information in an area that is lacking,
2. it is highlighting the oppressive social structures that are contributing to the lack of study in this area,
3. it can be applied practically for social work practice and policy changes that will benefit queer youth,
4. it can be used within social work curriculum to illustrate the unique challenges queer youth in care face,
5. and this study can serve as support for other social action groups who are working towards equality for sexual minorities in any number of different areas.

RATIONALE

The reality of queer youth living within the child protection system has been a challenge for child protection services to accept. More adolescents are realizing their queer identity at a younger age (Beaty, 1999) and saving themselves years of self-denial, but by coming to this self knowledge they are also exposing themselves to discrimination, by both society and the system mandated to protect them. With no specific policies or guidelines in place to inform social workers about the unique challenges queer youth face, workers are left to use their own assumptions, attitudes, and experiences about sexual minorities to inform and guide their practice decisions.

Child protection services, with its lack of official policy protecting queer youth, is failing to recognize and respond to their unique protection needs. As previously mentioned, I have worked within child welfare in Manitoba for over ten years and specifically as a mandated social worker for the last two of those ten years. During that time I did not see, nor was I aware of, any existing policy specific to lesbian, gay, bisexual, Two-Spirited, and/or transgendered youth. It is hoped that this research will contribute to the formulation of official child welfare policies to protect queer youth in care in Manitoba.

This research project utilized grounded theory methodology and feminist research practices to examine the experiences of queer identified youth and

young adults who are living, or have lived, in foster care in Manitoba. From the standpoint of their voices, this project focused on how these youth perceive and express themselves. Using the constant comparative method consistent with grounded theory (Glaser and Strauss, 1967; Strauss and Corbin, 1998), I analyzed data gathered through loosely structured personal interviews with queer identified youths to develop an understanding of the social processes involved in being a queer youth in care.

Through their voices I hope to influence research beyond the practitioner level and suggest practice and policy recommendations for Child and Family Services that particularly reflect their experiences. This project is original and significant on two levels. First, there is little existing literature on queer youth theorized from feminist and other critical perspectives and second, there is almost no existing research on the experiences of queer youth in care. This project will make a significant and original contribution in both these areas.

For the purposes of this research the term *queer youth* refers to all self-identified lesbian, gay, bisexual, transgendered, transsexual, Two-Spirited, and/or queer adolescents and young adults.

A transgendered youth is an individual you lives as a member of the opposite gender to which they were assigned at birth. Transgender is generally used as a blanket term for a variety of individuals, behaviors, and groups centered around the full or partial reversal of gender roles. A transgendered youth may consider themselves straight or queer.

A transsexual is person also construed as belonging to the queer community, although some identify with the queer community and others do not, or prefer not to use the term to describe themselves. Transsexuality is not associated with or dependant on sexual orientation. Transsexual women and men exhibit a range of sexual orientations just as non-transsexuals do. They almost always use terms for their sexual orientation that relate to their target gender; for example, someone assigned to the male gender at birth but who identifies as a woman, and who is attracted to men, will identify as heterosexual, not gay.

The term Two-Spirited refers to people of First Nations ancestry who identify with their culture's traditional teachings towards what we refer to today as gay or lesbian. Those teachings emphasized the place of honour a Two-Spirited person would traditionally hold within the tribe. Those who identify as Two-Spirited often associate homophobia as a European import.

To be gay, lesbian, or transsexual has typically been viewed as related to sexual identity. Transgenderism is typically discussed as related to gender identity. However, just as gay, lesbian, and bisexual youth may or may not identify as transgendered, transgendered youth may or may not identify as gay, lesbian, or bisexual. Gender identity issues are not exclusive to transgendered youth. For these important reasons definitions were kept as open and as inclusive as possible. I adopted the phrase queer youth to encompass all the

complexities of gender and sexual orientation. However, for the purposes of this thesis, the terms sexual minority and refer to all sexual and gender minorities.

The terms *in care* refer to living, for any period of time, in an out-of-home care setting due to child protection involvement. These settings include, but are not limited to, foster homes, group homes, youth shelters, emergency receiving homes, treatment homes and/or facilities, or correctional facilities.

This study is not neutral. I have not come to this topic out of a general interest in the area as it pertains to my profession in social work. As I mentioned in the introduction, I am personally invested in the cause of social justice for sexual minorities and I am especially passionate about protecting those who I see as the most vulnerable of our queer community, namely queer youth in care. Although I have felt the stigma and discrimination of openly belonging to the queer community from both society and those much closer to home, I have not had the experience of growing up in care. From what I have witnessed through my employment, I assume that the emotional challenges of growing up in care, for both heterosexual and sexual minority youth, are many.

My interest and my perspective originate in the idea that queer youth are unique, that they are not just like all other teens, and that they deserve and urgently need special services to address their specific developmental needs and challenges. I believe social service providers must make every provision to accommodate and address these youths' epistemological differences and their particular tendency towards self-harming behaviour. The main objective of this

research project was to gain a better understanding of the issues relating to queer youth in care in Manitoba through exploring their experiences. My interest in the subject stems from working within social services for the past ten years and observing an alarming lack of education and awareness on the part of social workers, social work educators, group home staff, and administrators with regards to sexual diversity in general. The denial that teenage queer identity can and does exist and the “treat them like everyone else” unofficial policy that workers adopt when a young client does self-identify as queer illustrates that this area is in serious need of applicable research.

My interest in this area also stems from what I have observed with the young people themselves. I have seen how dealing with rejection and abandonment by their biological families, coupled with discrimination in their foster homes, schools, and extended communities have contributed to creating an internal belief that they are worth less than their heterosexual peers. I have seen how these young people expect rejection and even learn to self-protect by creating it before it occurs through extreme acting out behaviour. By giving a voice to queer youth in foster care and their experiences I am hoping to contribute to the child welfare knowledge base so that specific services and policies will emerge that validate queer youth reality.

By coming out an individual goes through what has commonly been described as the most difficult and socially isolating phase of a person’s life (Armesto, 2001). To go through this life altering process while having the

emotional and social immaturity of adolescence is truly a challenge. Coming out is much more than a re-evaluation of self. For queer youth it is a process which means:

...learning to cope with stigmatization; coming to understand all the different ways their lives will be affected by this stigmatization; learning to feel good about themselves in spite of the way society and culture feel about homosexuality; and ... it means having the courage to disclose their sexual orientation to their family (Schneider, 1997, p.20).

These tasks as well as others are essential for an adolescent to understand their sexual minority identity. Coming out is completely unparalleled in heterosexual development and as this process typically begins before adolescence, it is occurring at the same time as all the other developmental changes and challenges inherent with the teen years.

Ignoring the layered hardships queer youth go through further denies their reality. Being a child in foster care is difficult at best for even the most well adapted child. To be raised in foster care and to struggle with sexual identity issues is a combination even the most well adjusted adult would struggle with.

In the next chapter I examine current research on how often lesbian and gay content articles are published in leading social work journals. That section leads into a review of what does exist in the literature on queer youth. In that review I outline research that investigates issues specifically pertaining to queer youth involved in the child welfare system as well as research that investigates queer youth in general. From there I outline the methodological framework for this study and present an analysis of the findings. The final chapter includes a

discussion on the need for child welfare workers, foster parents, and administrators to understand how these issues impact sexual minority adolescents involved in the child welfare system.

LITERATURE REVIEW

Introduction

Journal publications are the main source of current information on social work theory, empirical study, and practice approaches. Staying informed through the literature is the primary way social work educators and policy makers remain current in their work and uphold the mandate of the Social Work Code of Ethics that states, “a social worker shall have and maintain competence in the provision of a social work service to a client” (see Appendix 6 for a complete copy of the Social Work Code of Ethics). The lack of information pertaining to sexual minorities leaves practitioners and policy makers uninformed in providing service to queer clientele and, as exemplified earlier through my discussion of the curriculum in the graduate social work program at the University of Manitoba, creates difficulty for professors attempting to provide curriculum content that accurately reflects these populations.

The absence of research on queer youth in child social services is alarming and by far the most pressing problem in this area of study. “Absent from the literature is a systemic investigation of the problems experienced by lesbian, gay and bisexual youth in shelters, group homes, treatment homes and other residences” (O’Brien, 1994, p.39). Heterosexism among social scientists

and publication rates in journals are factors that have a serious impact on research on the queer youth experience.

Social work journals often excuse their lack of attention to queer specific issues by periodically publishing a token “special issue”. By condensing information about our community in that way publishers are sending the message that integration into mainstream social work practice is not important but if you happen to be interested, here is a separate issue. Van Voorhis and Wagner (2001; 2002) studied this absence of queer content by examining twelve leading social work journals over the ten-year period of 1988 to 1997 in an attempt to quantify gay related content (see Appendix 1 for list of the twelve journal titles examined). These authors believed that by studying the publication patterns in journals they could provide one measure of whether heterosexist bias exists within the social work profession.

The specific journals examined were chosen because they all have a national audience in terms of readers and authors, they all cover a general spectrum of social work practice, articles submitted to these journals are peer reviewed, and these journals are viewed by the social work profession as the major journals reflecting current social work trends. These authors found that in over ten years only *one percent* of all the articles published in these twelve journals had any gay subject matter *other than* gay men living with HIV/AIDS. Most articles focused on how to assist homosexual people in adapting to a heterosexual world and few addressed institutionalized heterosexism or

environmental interventions. No articles were published in any of the journals in the areas of lesbian/gay people of colour, alcohol and other drug use within this population, parenting issues for gay men, health issues other than HIV/AIDS, and domestic violence. Van Voorhis and Wagner also make the point that the articles published with lesbian or gay content should not be assumed queer positive or free of heterosexual bias (2001).

Six of the journals had an average rate of publication of less than one article in ten years (see Appendix 1). This frequency rate was also found not to be increasing. Despite growing public and professional acceptance and interest in gay specific issues, professional journal space devoted to queer content has remained virtually unchanged in the past ten years. Invisibility in the literature highlights the lack of value the discipline has for the queer population. "There is a need for the proliferation of these types of studies. Investigation in a range of different sites will make possible a broader theoretical analysis of the social organization of heterosexual dominance" (O'Brien, 1994, p.54). The failure of social work professional literature to address heterosexism and homophobia in society and in the profession is further evidence of the existence of these structural forms of oppression. "There is no better way to subjugate human beings than to ignore them and deny their reality" (Hartman, 1993, p. 23).

The profession of social work also has the ethical responsibility for social change. According to the Social Work Code of Ethics, a social worker must "identify, document, and advocate for the elimination of discrimination", "advocate