

ILLINOIS

Illinois has taken initial steps to address the needs of LGBT youth in state care, but must commit to follow through. The Illinois Department of Children and Family Services (“DCFS”) is in the process of establishing a youth advisory board composed of foster care youth, including LGBT youth, which will make recommendations for change within the foster care system. Additionally, DCFS is in the process of drafting non-discrimination provisions to protect LGBT youth and policies on training for foster parents and foster care staff that address LGBT issues. Historically, however, DCFS has been reticent on these issues, so monitoring of these efforts is crucial. Furthermore, far more services are needed for LGBT youth.*

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*The following recommendations are modeled on and should be read in conjunction with the “Basic Reforms to Address the Unmet Needs of LGBT Foster Youth” described at pages 22-28 of this Report. “LGBT” is an acronym for lesbian, gay, bisexual, and transgender.



I. NON-DISCRIMINATION POLICIES

A. SEXUAL ORIENTATION OF YOUTH

Assessment: The DCFS Policy Manual does not currently address discrimination on the basis of sexual orientation. DCFS has informed us, however, that it is in the process of drafting LGBT policies for inclusion in its Policy Manual that will expressly prohibit discrimination on the basis of the sexual orientation of foster care youth.

Recommendation: DCFS should follow through promptly on its plans to adopt non-discrimination policies.

B. SEXUAL ORIENTATION OF FOSTER PARENTS AND OTHER FOSTER HOUSEHOLD MEMBERS

Assessment: The DCFS Policy Manual does not contain a provision expressly prohibiting discrimination based on the sexual orientation of foster parents and other foster household members. DCFS has licensed lesbian and gay persons as foster parents.

Recommendation: Adopt express written policies prohibiting discrimination on the basis of the sexual orientation of foster parents and other foster household members, not only in licensing and placement decisions but in all interactions with DCFS and its agents.

C. SEXUAL ORIENTATION OF FOSTER CARE STAFF

Assessment: The Policy Manual provides that DCFS “will not discriminate in employment on the grounds of race, color, religion, sex, marital status, national origin or ancestry, age, physical or mental handicap unrelated to ability, or an unfavorable discharge from military service other than a dishonorable discharge,” but does not prohibit discrimination on the basis of sexual orientation.¹

Recommendation: Adopt express written policies prohibiting discrimination on the basis of the sexual orientation of foster care staff.



D. HIV/AIDS STATUS OF YOUTH

Assessment: The DCFS Policy Manual provides that the agency and all contracted service providers must comply with federal and state laws, regulations, or orders “which prohibit discrimination in service delivery on the grounds of handicap.”²

Recommendation:	Adopt express written policies prohibiting discrimination on the basis of the HIV/AIDS status of youth.
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E. HIV/AIDS STATUS OF FOSTER PARENTS AND OTHER FOSTER HOUSEHOLD MEMBERS

Assessment: The DCFS Policy Manual does not expressly prohibit discrimination based on the HIV/AIDS status of foster parents and other foster household members. However, we are informed that DCFS does license HIV-positive individuals as foster parents and treats those cases as it would treat any case with a foster parent with a chronic illness (*e.g.*, by ensuring that there is a back-up resource if the foster parent is no longer able to care for a child).

Recommendation:	Adopt express written policies prohibiting discrimination on the basis of the HIV/AIDS status of foster parents able to perform foster care responsibilities and of other foster household members.
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F. HIV/AIDS STATUS OF FOSTER CARE STAFF

Assessment: As noted above, the DCFS Policy Manual provides that DCFS will not discriminate in employment on the grounds of “handicap unrelated to ability.”³

Illinois’s Human Rights Act prohibits discrimination in employment on the basis of physical or mental handicap.⁴

Recommendation:	Clarify existing policies to expressly include HIV/AIDS status as a prohibited basis for discrimination.
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II. FOSTER PARENT TRAINING

A. EXPLAINING NON-DISCRIMINATION POLICIES REGARDING SEXUAL ORIENTATION AND HIV/AIDS STATUS

Assessment: We are advised that DCFS is in the process of drafting policies that will require training for foster parents caring for an LGBT youth.

Recommendation:	In addition to adopting sexual orientation and HIV/AIDS non-discrimination policies in the first instance, DCFS should promptly require training about these principles for all foster parents, not only those caring for an openly LGBT youth.
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B. SENSITIVITY TO SEXUAL ORIENTATION

Assessment: We are advised that DCFS is in the process of drafting policies that will require training for foster parents caring for an LGBT youth.

Recommendation:	Promptly implement plans to require mandatory training on sensitivity to sexual orientation and the challenges faced by LGBT youth for all foster parents, not only those caring for openly LGBT youth.
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C. SUPPORTING A FOSTER CARE YOUTH COMING OUT AS LGBT

Assessment: We are advised that DCFS is in the process of drafting policies that will require training for foster parents caring for an LGBT youth.

Recommendation:	Require mandatory training for all foster parents on supporting a foster care youth coming out as LGBT.
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D. SEXUAL HEALTH EDUCATION, INCLUDING HIV/AIDS AND OTHER STD PREVENTION EDUCATION AND SERVICES

Assessment: DCFS informed us that it offers six voluntary HIV training sessions to foster parents each year, in which it covers such topics as HIV policy, HIV transmission, prevention, care, legal issues, and universal precautions. These

sessions are not mandatory, and do not adequately train foster parents to educate LGBT youth about their sexuality and sexual health, one piece of which is prevention of HIV/AIDS and other STDs.

Recommendation: Require mandatory training for all foster parents on educating LGBT foster care youth about their sexual health, including prevention of HIV/AIDS and other STDs.

III. FOSTER CARE STAFF TRAINING

A. EXPLAINING NON-DISCRIMINATION POLICIES REGARDING SEXUAL ORIENTATION AND HIV/AIDS STATUS

Assessment: We are informed that HIV/AIDS non-discrimination principles are covered in initial, mandatory training for all new DCFS staff but that currently there is no training on sexual orientation issues. However, DCFS is in the process of revising its policies to include additional training for foster care staff with LGBT youth on their caseloads. The policies will also require staff to identify LGBT youth who are having difficulties with the coming out process and to ensure that LGBT youths are not being stigmatized.

Recommendation: In addition to adopting express sexual orientation and HIV/AIDS non-discrimination policies in the first instance, make training about such principles mandatory for all foster care staff, including staff who have not yet documented on their caseloads the presence of LGBT youth.

B. SENSITIVITY TO SEXUAL ORIENTATION

Assessment: DCFS is in the process of drafting policies on this topic. *See Section III. A. above.*

Recommendation: Require mandatory training for all foster care staff on sensitivity to sexual orientation and the challenges faced by LGBT youth.



C. SUPPORTING A FOSTER CARE YOUTH COMING OUT AS LGBT

Assessment: DCFS is in the process of drafting policies addressing training on this topic. See Section III. A. above.

Recommendation:	Require mandatory training for all foster care staff on supporting a foster care youth coming out as LGBT.
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D. SEXUAL HEALTH EDUCATION, INCLUDING HIV/AIDS AND OTHER STD PREVENTION EDUCATION AND SERVICES

Assessment: DCFS offers six voluntary HIV training sessions and several conferences to foster care staff each year, in which it covers topics such as HIV policy, HIV transmission, prevention, care, legal issues, and universal precautions. These sessions are not, however, mandatory, and do not adequately train foster care staff to educate LGBT youth about their sexuality and sexual health, one piece of which is prevention of HIV/AIDS and other STDs.

Recommendation:	Require mandatory training for all foster care staff on educating LGBT foster care youth about their sexuality and sexual health, including prevention of HIV/AIDS and other STDs.
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IV. LGBT YOUTH PROGRAMS AND SERVICES

A. SAFE GROUP HOMES

Assessment: Although DCFS maintains group homes, none is geared specifically to LGBT youth. However, we are informed that Chicago has a limited number of “gay-friendly” programs, with some open gay staff, but no special LGBT programming.

Given the current lack of training and services offered on LGBT issues by DCFS, these and other existing group facilities are under-equipped to address the needs of LGBT youth.

Recommendation:	<p>In the short term, to meet the pressing need, DCFS should consider designating additional group homes in the state as safe havens for LGBT youth and ensuring that existing “gay-friendly” programs are safe for LGBT youth.</p> <p>It should, however, be a priority to make every group facility in the state a safe, supportive environment for LGBT and questioning youth through strict enforcement of non-discrimination policies, staff training, sensitivity education for non-LGBT residents, and services and resources for LGBT youth.</p>
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B. IDENTIFY FOSTER PARENTS TO CARE FOR LGBT YOUTH

Assessment: There are no specific efforts to identify and train foster parents to care for LGBT youth.

Recommendation: DCFS, as well as contract agencies, should identify and train qualified foster parents, including lesbian and gay adults, interested in caring for LGBT youth.

C. COUNSELING PROGRAMS

Assessment: We are informed that although DCFS does not run its own counseling programs for LGBT youth, employees in some DCFS offices are aware of two programs to which they would consider referring these youth.

Recommendation: DCFS should ensure that one-on-one and group counseling services are available for LGBT youth.

D. RESOURCES AND COMMUNITY CONTACTS FOR FOSTER CARE STAFF, FOSTER PARENTS, AND LGBT YOUTH

Assessment: DCFS advised us that LGBT resources are generally not made formally available by their offices, other than a single publication addressing skills important in parenting LGBT youth, which is carried in a lending library designated for use by all foster parents licensed in Illinois.

Recommendation: DCFS should distribute to DCFS offices, group facilities, and LGBT youth and their foster families, resource guides that include community contacts, support groups, reading lists and materials, hotlines, LGBT advocates in the foster care system, and other resources. These resources should also be available to biological families. All youth in foster care should have direct, ready, and confidential access to developmentally appropriate resources about LGBT issues.

E. SEXUAL HEALTH EDUCATION, INCLUDING HIV/AIDS AND OTHER STD PREVENTION EDUCATION AND SERVICES

Assessment: We are informed that DCFS has tried to link Center for Disease Control-funded programs managed by city and state public health departments with independent living programs. However, DCFS has not informed us



whether it currently has mandated programming to educate LGBT foster care youth about their sexuality and sexual health, including prevention of HIV/AIDS and other STDs.

Recommendation:	Provide all foster care youth with developmentally appropriate information and resources about sexuality and sexual health, including about LGBT issues and prevention of HIV/AIDS and other STDs.
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F. ACCESS TO HIV TESTING WITHOUT GUARDIAN CONSENT OR NOTIFICATION

Assessment: The DCFS Policy Manual provides for testing of youth in its care when certain risk criteria are met.⁵ Youth aged 12 or older may consent to an HIV test without parental or guardian consent.⁶ However, there are no policies regarding a youth's ability to request and receive free and confidential HIV testing.

Recommendation:	Adopt express written policies providing foster care youth access to free and confidential HIV testing.
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G. CONFIDENTIALITY OF HIV TESTING AND TEST RESULTS

Assessment: The DCFS Policy Manual provides for the confidentiality of the HIV status of youth in DCFS care. It further provides for disclosure of such information on a need-to-know basis only. It also requires that HIV information be marked confidential in the case file and safeguarded from unauthorized access.⁷ There are, however, no provisions expressly addressing the confidentiality of information regarding whether a foster care youth has requested or received an HIV test.

Recommendation:	Expand on current policies providing for confidentiality of test results to protect information regarding whether a foster care youth has requested or received an HIV test.
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Notes to Illinois

1. Ill. DCFS Policy Manual § 429.3.
2. Ill. DCFS Policy Manual §§ 302.30(c) and 308.30.
3. Ill. DCFS Policy Manual § 429.3.
4. 20 Ill. Comp. Stat. Ann. 1510/50 (West 2001).
5. Ill. DCFS, DCFS AIDS Policy: Key Points, HIV Testing.
6. *Id.*
7. Ill. DCFS, DCFS AIDS Policy: Key Points, Confidentiality.