

Children's Mental Health Grand Rounds: Working with LGBTQ Youth in Foster Care

Thursday, May 15, 2014 with Jesse Fullenkamp

Evaluation Summary Report

Demographics

50 evaluations received

- Professional Occupation:
 - Parent: 6.0% (*n*=3)
 - Social Worker: 60.0% (*n*=30)
 - Nurse: 2.0% (*n*=1)
 - Psychiatrist: 0.0% (*n*=0)
 - Counselor: 6.0% (*n*=3)
 - Psychologist: 4.0% (*n*=2)
 - Peer Support Specialist: 2.0% (*n*=1)
 - Administration: 6.0% (*n*=3)
 - Other: 14.0% (*n*=7)
 - E.g. regional youth specialist, health education, wraparound facilitator
- At which location are you taking this training?:
 - The Children's Center: 24.0% (*n*=12)
 - Lincoln Behavioral Services: 12.0% (*n*=6)
 - Northeast Guidance Center: 18.0% (*n*=9)
 - The Center for Excellence: 30% (*n*=15)
 - Community Living Services: 16.0% (*n*=8)

Presentation Assessment

Table 1

	Strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
1. The presenter demonstrated mastery of the subject matter. (<i>n</i> =49)	67.4%	26.5%	2.0%	0.0%	4.1%
2. The learning goals and objectives were clearly stated. (<i>n</i> =48)	60.4%	29.2%	6.3%	0.0%	4.2%
3. The presentation was well organized. (<i>n</i> =49)	57.1%	36.7%	2.0%	0.0%	4.1%
4. The visual aids were useful. (<i>n</i> =48)	52.1%	25.0%	14.6%	4.2%	4.2%
5. The presenter(s) used an effective method/style of presentation. (<i>n</i> =49)	59.2%	26.5%	8.2%	2.0%	4.1%

6. The learning goals and objectives were met. (n=49)	51.0%	34.7%	10.2%	0.0%	4.1%
7. The presenter(s) was responsive to the participants' questions and/or comments. (n=49)	49.0%	38.8%	8.2%	0.0%	4.1%
8. The information presented was relevant to my work. (n=47)	31.9%	44.7%	14.9%	4.3%	4.3%
9. The information presented was easy to follow and understand. (n=47)	53.2%	36.2%	4.3%	2.1%	4.3%
10. The presenter was able to manage both the live and distant sites well. (n=47)	42.6%	44.7%	8.5%	0.0%	4.3%
11. This training will assist me in improving service to my target population. (n=47)	36.2%	36.2%	21.3%	4.3%	2.1%

Narrative

The following responses are from a variety of participants; administrators, community members, consumers, family members, peer support specialists and professionals.

Overall, the presenter received positive feedback from participants. Many of the respondents stated that the entire training had helpful information and was presented well when asked what information was most helpful. Some others responded that they liked: the resources and statistics; proper terminology to use and its explanation; explaining the importance of treating the LGBTQ population with love, care and respect; the handouts; recommendations on how to address caregivers and give support and guidance; information on the Ruth Ellis Center; the extent to which objectivity is vital to the youth feeling safe and how policies might be re-evaluated to better serve LGBTQ youth.

Information cited as least helpful included: would have liked to hear more about school and family situations; information in the packet on heterosexuals; too many confusing names, titles and descriptions; an attendee thought that the presenter was too judgmental and speculative with some assertions and was offended (i.e. the comments regarding Angelina Jolie); technical issues with video and sound.

Participants indicated they will use the information to: share with colleagues and advocate for more awareness and responsibility with regard to this population; understand what this population goes through and where support can be found; use better terminology when speaking about gender issues; remain open-minded and receptive to all youth; encourage youth and those with questions to visit the Ruth Ellis Center; be non-assuming about the youth I work with; educate other staff and guardians of youth.

Participants also indicated that they will use information provided to make changes in their current practice in the following ways: include questions during intake with new youth about gendered pronoun preferences and attraction orientation; educate others about the importance of acceptance of those who may wish to be out in the open about themselves; change

screening/assessment tools to reflect sexual identity; change documentation to reflect “biological sex” as male and female and leave other options open-ended for self-identification.

Future training topics suggested by the participants included: how the negative mental health of a parent can affect the growth and development of children; cultural competency regarding Middle East populations; depression; alternatives to foster care; seizure disorders in children; life-course perspective in mental health topics; DSM V; special education and/or understanding the IEP process; strategies to intervene with depression in LGBTQ youth; self-harm in adolescents.

Participants were asked whether the presentations were fair, balanced, and free of commercial bias. 87.8% ($n=43$) indicated agreement with the statement. 12.2% ($n=6$) disagreed, but only one of them understood the question, responding with “the frequent referral to the Ruth Ellis Center in some ways felt commercialized.”

Participants were asked if they chose to attend this VCE training to fulfill their requirements for continuing education licensure, CMHP and/or QMHP. 77.1% ($n=37$) responded with “yes” and 22.9% ($n=11$) responded “no”.