

Plenary: Parenting and Partnering: Lesbian, Gay, Bisexual, and Transgender (LGBT)

18th Annual Birth to Three Institute

Jennifer Boss: Here we are on the last day of the Birth to Three Institute. Did you all enjoy the Institute? [Cheers and applause] Yes. Wonderful. And I hope you really did not only enjoy the sessions that you went to, but I hope that you were able to really fully engage with not only the speakers, but with colleagues. I was thinking about this learning community that we have created together over the years, and here at the Birth to Three Institute this year, we have — We worked really hard, and I told you before about the Early Head Start National Resource Center and the staff and how hard they've worked, and we have worked hard to really try to pull in wonderful, wonderful speakers for you and to bring you really stellar professional development experiences. And so I hope that not only you were able to take advantage of that, but that also you brought yourself to those experiences, because we had great speakers, but we also have really great participants in this room and with us over the last week. And we all contribute to not only teaching one another, but learning from one another. So I hope that you were able to really engage in that full, full learning experience this week.

I also would be remiss if I didn't say thank you to, not only to our staff, who pulled this together, and to the great leadership that we received from the Office of Head Start and to the participants who are here, but to our fabulous speakers and to the other Office of Head Start National Center staff who contributed to the Birth to Three Institute, as well. The Early Head Start National Resource Center is one of six national centers funded by the Office of Head Start. And we work in partnership with the other national centers, and we have been working very hard to really collaborate and partner together to bring you coordinated information and resources that Training and Technical Assistance providers can use with grantees and that grantees can access themselves. And so I want to say thank you to all of our national centers partners for being here and contributing so much to the Institute.

I have a few more housekeeping notes, believe it or not, before we end today and before I turn this over to Angie Godfrey to introduce our speaker and then our panel, our fantastic panel. Oh, and let me just say this too. I love BTT and all of the sessions and all of the opportunities for learning and the research that we get at the plenaries and all of the information that we get, and we engage in all of these learning experiences throughout the week. And the experience that we are going to have in a few minutes with this panel of parents here is what brings it all home. So we can talk in theory about all of this fantastic work that we do, but hearing directly from the parents who have experienced the services provided in the programs, who have experienced what it's like for their child to be cared for by you, to hear their stories makes it all real and makes it clear why it is so important, the work that we all do. So this is my absolute favorite part of the Institute. So we are all in for a treat here.

Okay, quickly, CEUs, please, don't forget to turn in your CEU forms in to the CEU desk in the registration area. Do not forget that; if you want to get your CEUs, please turn your form in. And also, remember, I told you this yesterday, please, complete your evaluations at the end of your sessions and at the end of each session, you should have received by e-mail an evaluation form to submit. So please make sure you have been doing that, and you will receive a final overall Birth to Three Institute evaluation. Please,

please, please complete it and submit it back to us. I said before, we take your feedback very, very seriously. We actually use that feedback when we are planning for the next Institute. So, please, we appreciate your feedback to us, so don't forget to do that.

And then one more thing: a few people have asked about the handouts in the sessions. You did not receive handouts in hard copy unless your presenters brought the handouts with them. The handouts are all available electronically. So you can download them for all of the sessions from the Birth to Three page on the ECLKC. And the link to where you can get the handouts is in your final program — your program that has all of the sessions on it — on page five. So make sure you go. If you were missing the handouts from the session, you can get them; they are still available. You can download them at any time. Okay, so those are my housekeeping notes.

I am going to ask Angie Godfrey to come back up and say a few words and introduce Kiersten Beigel, who's going to introduce our panel. So, thank you all so much for being here, for your participation, for your enthusiasm. And I will say now, because I probably won't have a chance to say later, have a wonderful trip home, and we love having you here with us. Thank you so much.

[Applause]

Angie Godfrey: Good morning, everyone. It's really nice to see you today, the third day and a wonderful day. The fourth day for many of you. And it has been, to me, just a wonderful week, an amazing week of so many different presentations and people who are here. And I just want to thank Jennifer Boss and everyone at the Early Head Start National Resource Center. They do incredible work; I know — If you could all just stand for a minute? I just — And Joe — I just want you all.

[Applause] Thank you. Thank you. I'm sorry you left before we danced last night, Tamisa, so... [Laughter] The work that they do is incredible. The thing that always amazes me about them is they do everything. They understand the science, as I said yesterday. They bring it to you; they understand it in a way that they know can support your programs, but they also — they move things, and they find people. And yesterday I'm running around looking for an AV person, and suddenly three appeared, you know? It's just — I really do appreciate every bit of that and wanted to thank them for that. And I would agree with Jen.

As wonderful as the week has been, I just so look forward to hearing from all of you. And, I don't know, I might have to take some of that Kleenex before I go. We know that parents lead us, and it is a wonderful, wonderful feeling to know that parents lead us. And I don't think anyone knows that better than my colleague — Kiersten Beigel. — I almost mixed your name — My colleague Kiersten Beigel, who is the lead for working with families in family-community partnership in the National Center on Family and Community Partnerships. And she is also — We work closely together in many ways. And one of the things I love about her, other than the fact that she is a social worker and she really loves being a social worker, is her ability to understand how important parents are to the process and to really understand, for Early Head Start and for the infant/toddler work, it's really nested in what happens with parents and parent outcomes and in the work that we do with parents, and she reminds me of that every day. And I just — I feel it's an honor to work with Kiersten. She is a bold, brave, and beautiful woman. And I am so

proud to know her. So, come on, Kiersten, you have lots of work to do here. Good luck, all of you.
[Applause]

Kiersten Beigel: Hi, Early Head Start. Audience: Hi.

Kiersten: And also a hearty welcome to our live streamers. We are glad you are with us this morning. I also want us to thank the Early Head Start National Resource Center and Angie for their leadership in particular on this topic that we are going to really delve into this morning, LGBT families. They held an expert work group last year and invited a number of programs and parents together to really explore how well we are doing in thinking about supporting and serving LGBT families. And I think some of you probably participated in that. I know there was a lot of interest in it. So they did that, and it was really to try to help the Office of Head Start think about, you know, what we can be doing better with training and technical assistance and policy, too. So, and then with today's plenary, highlighting and raising this topic up here at Birth to Three, I just appreciate their leadership. I personally feel so lucky to get to kick this off. And I know you really just probably want us to get going here so we can hear from our families, but we do have so much to learn from them. And this year is really no exception. In fact, I think this year feels really special because this topic — it's kind of a special time for this topic in thinking about this plenary coming in the wake of some changes to federal legislation in the past year.

Thinking about last June when the Supreme Court invalidated Section 3 of the Defense of Marriage Act, which said that marriage was between a man and a woman. And so with that — overturning in the Supreme Court ruling, that's had a real big trickle-down effect across the federal government in terms of how we think about same-sex couples and marriage. And I think that HHS has worked pretty quickly to try to implement changes reflective of the court's ruling, and in ACF in particular, which is where Office of Head Start is situated, we have been working to adapt our programs across ACF to be more responsive to LGBT youth, LGBT individuals, and, of course, families. And we are also prioritizing new research, so we can learn more about the needs and challenges of LGBT families. There is very little research; it has not been a priority. So that is really exciting. And then, as you probably know, in June, this past June, just last month, we released an information memoranda that recognizes same-sex marriages and the definition of family that you we all use and that you all have memorized when you are determining eligibility, right? for Early Head Start. So that basically means that, regardless of where a same-sex married couple goes, once they have been legally married in a state, Early Head Start recognizes that marriage anywhere in the country. Okay?

The other thing the IM does is that it mentions that family support and parent engagement activities really need to be inclusive and responsive to single, coupled, and married LGBT families. So I think that really draws attention to the fact that we really need to be thinking across the board how we can do better in creating LGBT-friendly programs. So that is really exciting. I think, though, amongst other things that this group is going to be talking about this morning, they, I think, are going to be getting into some discussions about what it means to be an LGBT family and the burden that sometimes comes with knowing whether or not you are going to be accepted and that your child is going to be accepted, right? in any given circumstance, on any given day. And I think that — just honoring that for a second is enough for me to want to say to you all, to thank you for your courage and for your leadership in being here today, so that we can listen, reflect, and really think about how we can be more welcoming to all of

our families. So, with that in mind, I want, and the courage it takes, to do this: I would really like to invite our wonderful audience to give them a very affirming and encouraging round of applause to get them going. [Cheers and applause] Whoo-hoo! Mandy Smith: Thank you.

Amanda Perez: And Kiersten gets a little applause, too, right? Yes, for sure. Thank you so much, Kiersten; thank you so much, Angie and Jen. It is such a thrill always to be up here with families, and, as Kiersten said, we know that this is a brave topic to be speaking about, so I do want to recognize everybody's specialness here today. For sure. And we are really honored that you are here to share your experiences with us and your strategies with us. I want to introduce each of you really quickly in turn, so that we get a little sense of who you are. This isn't who you are; this is your name. But we'll just talk very briefly about who's who on this panel. So Kim Phillips is here at the end. She was a part of the Children's Home Society of Florida Early Head Start, which is near Orlando. Is anybody from Florida here? Make a little noise. Whoo-hoo! Wow, the Floridians left a little early today. Okay, Sharon DeBerry —

Sharon DeBerry: DeBerry.

Amanda: DeBerry — Sharon DeBerry is from City of Rockford Early Head Start near Chicago, Illinois. We are thrilled to have her here. [Applause] Ah, so nice. And finally we have Mandy Smith, who is here from the Breckinridge-Grayson Programs Early Head Start in Leitchfield, Kentucky. [Cheers and applause] Anybody from Kentucky? And I was hoping for folks to identify if they were from those communities, because we know, given some of the things that we are going to hear today and some of the things that Kiersten alluded to, that sometimes LGBT families can be hidden, right? But we know that families are out there, and so part of our role in Early Head Start in our community assessment is really to figure out where are the families who we need to be serving, where are the LGBT families, and how can we find them and identify ourselves as welcoming and friendly and all those pieces, right? These are some of the things that we are talking about.

I want to tell you, we are going to be running this panel a little differently today. So usually I start with one family, and I go through the whole story. But as I was talking with these three women, I was realizing that really what we have here is a discussion. We want to get to some themes and some strategies. We are going to hear their stories, of course, of course, but we are really going to get to some very practical strategies that we hope that you can take home and really put into practice, okay? And I also want to say — Kiersten mentioned that expert work group that we had that included families, included researchers, staff, it included a bunch of people — program staff, of course — some advocates who came together to really help us think about how we can address some of the issues in Early Head Start and childcare programs. And we are going to bring in a few of those strategies, as well. We really want you to leave with a tool kit of some ideas of sort of how to go home and make this work where you are or to continue the work that you are already doing there. So I want to ask each of you — I'm hearing that feedback. So I want to ask each of you to tell us a little bit about your family. I can't not start there, of course, and we are going to start with Kim. So, Kim, should I put up the picture now?

Kim Phillips: Yes.

Amanda: Okay.

Kim: This is my stepson, Kaiden, he is 18 months. When he was born, he was born with complications in his heart. He had a heart murmur. Didn't even get to spend the first night with us in the mother/infant room. He had what's called tetralogy of Fallot. It's, basically had a hole in his heart, and his pulmonary valve was too narrow to let the oxygen poor blood to go to all four chambers of his heart. So they kept him in the nursery overnight, and the next day, he gets transferred to another hospital, because there was nothing that the hospital could do for us at the time, so we dealt with that, and he had to have open heart surgery at 3 months old. But, thankfully, God was by his side, and he is not going to have to go through another surgery when he is older. [Applause]

Amanda: And I think part of the interesting part of this story, Kim, is that you are not the biological parent of this child, right?

Kim: No.

Amanda: But tell us what you feel about Kaiden.

Kim: Oh, that is my booger butt. I love him to death. He is — very special to me. He has opened my mind to a different view in life, and he is getting me on track where I need to be in life.

Amanda: I love to hear that, right, and we know that is true about families and the way that parents feel about one another, so, while your partner at the time was the biological parent, the connection that I hear as I talk with Kim about her stepson is really extraordinary. Sharon.

Sharon: Yes.

Amanda: Tell us about your family. It came together in a different kind of way, right?

Sharon: Our family, at this point, is comprised of five children. All of our children are foster children. Margaret and I have been fostering children for about nine years. This family is so special to us. Our first child in this family of five is Angelina. Angelina, we met Angelina when she was in the hospital in NICU when she was about 6 weeks old. She was, maybe, 5 1/2, 6 pounds. She had a cleft palate and cleft lips. The clefting was extremely extensive. She had a heart defect. She couldn't eat or swallow. We walked with her in the hospital. We didn't have a clear understanding at first about whether or not we would be able to foster her, but at 3 months, after she had a feeding tube inserted, they did let us take Angelina home. Angelina has never been anywhere other than our home. She is 3 years old now. She has been through five surgeries to repair her clefting.

And about a year into living with our baby, her brothers and sisters came into care. [Laughter] They are somewhere in the photograph. You'll probably want to do one of those "I spy" things and pick them out. The reason our pictures don't show their faces clearly is because of the regulations that have to do with foster children. Rena is 8 now. Paul is 7. Samantha is 6. And Isaiah is 4. Angelina just turned 3. Every day is a blessing, and every day is hard because they are a lot of work. [Laughter] But it's so fun to have these children. One of the things that I find interesting in our relationship with our kids is they are all Native American, and we have to honor that and work with that. Our life has changed with five children at one time. We are two women.

Amanda: Well, I was talking to Sharon the other day; I was trying to get a hold of her, and I got her. And she was driving all five children to a different state to go to a zoo. So I think their social calendar is chock full of appointments and all those kinds of things. I know Sharon is really the leader in all of that effort.

Sharon: Yeah, well, you have to understand that Margaret, my wife, is very athletic, very enthusiastic, very adept at working with kids and children and adults with disabilities. And I could not ever envision myself alone and having this set of children without her. She is marvelous. [Applause]

Amanda: All right, Mandy, it is your turn.

Mandy Smith: This is Miss Isabella Rose. Isabella has a very unique birth story. My pregnancy was a normal pregnancy. I did not know that our daughter or my partner knew at the time that our little girl was going to be born with Down syndrome. The day she was born, the doctors came in and gave Becky the option to tell me about Bella's disability. Bella spent four days at the hospital we were at. Friday morning, they said: "We are going to have to transfer her to the children's hospital, that we don't know if she is going to live or die." So they transferred her to the children's hospital, and they determined that her PDA valve had not shut off, so it was causing a very bad murmur. I was actually holding Isabella when her valve shut off. Her heart rate dropped, and she picked it right back up. But, because her heart rate dropped so low, it guaranteed her another five days in the NICU. Isabella was sent home five days later and she is a healthy child. She is extremely smart. [Applause]

But that journey implanted a seed in us. The doctor that delivered her sat down and said — sat us down and said: "Here is all the information you need to get her started in the right direction." And if it wasn't for my doctor sitting us down and discussing that with us, we wouldn't be where we are now. It's funny, Isabella is 4 years old now. And one of my main things about Isabella is, don't let that extra chromosome fool you at all, because that kid knows how to work it, okay? So, she has a way of wrapping you around her finger. Anyone she comes in contact just automatically falls in love with her, and she does have a bit of an accent, like I do. So, yes. But Isabella is the light of our life. We came alive when we brought her home, when she was born. We were thrown into a world we knew nothing about. You know, we heard all these stories. And really it turned out to be horror stories, you know. I was so scared that I wouldn't even put Isabella in her crib to sleep. She was right there with me at all times. But we were in a program and got introduced to the program Isabella is in now. Isabella has been in this program since she was about 1 year old.

Amanda: So let's talk for just a second about the rest of your family.

Mandy: This is Bella's older brother in the top picture. This is the first time he met her. In the bottom picture is her sister, Abby. We do have two older children, Colby and Abby. Colby just graduated high school. He is getting ready to start college. And Abby Jade is a junior this year. And they keep Isabella pretty busy. [Laughter]

Amanda: So we know that these three moms have a ton to share with us today, of course, and I've been thinking about the theme of this Institute, which, as you all might remember, is nurturing relationships, responsiveness, and readiness. And I think that we can really use that theme to help guide us as we talk a little bit today. So I think we can really help folks consider: Is your program ready to welcome all

families? Is it ready to welcome all families, including LGBT families? Are program staff able to build supportive relationships with LGBT families as well as all the other families that you all are serving? And finally, how can your program be responsive, in this case, to the LGBT families that you are serving? And so we hope to touch on some of those pieces, but these are questions to consider as we are going through today with these families. So what does it take for a program to be ready to serve LGBT families? One piece of readiness that I think came out of our discussions is to be really clear about what it is that we are talking about. So when we say, "lesbian, — gay, bisexual, and transgender families," what does that mean to you; what does that mean? And, Kim, you said something to me that made me really realize how important that question is. Do you remember what that was?

Kim: No, I don't. [Laughter]

Amanda: I just saw that in your face. So we were talking about sort of — that you think that people have a sort of a certain sense when they hear you are a lesbian, and they start thinking about sex.

Kim: Right. It's really, what happens behind closed doors is what really classifies you as lesbian, gay, bisexual, and transgender, because obviously you are not walking the streets, having sex. It is, you know, something that's done behind closed doors. So it's just — people shouldn't judge by how you look, what you wear, how you act, whose hand you are holding or who you kiss in public.

Amanda: And what you told me is that this is about love.

Kim: It is. It's... At the end of the day, gender has no love — or love has no gender. [Applause]

Amanda: And I wanted to bring that up; it was such an important point in our conversation, I wanted to bring that up, because I think sometimes we get really confused about that. And when we talk about LGBT, we are really talking about identity and relationships, right? We are talking about love, we are talking about roles, was one of the things that you were talking about, Sharon, we are talking about connections and family, and as staff and programs serving kids, we are really focused on those important emotional pieces, right? So we want to be clear about that focus here today, as we are talking about LGBT families, and it may be important to bring that back to your programs as well. What is it that we are talking about when talking about when we are thinking about LGBT?

But the other thing that I think that this message does for us is it really reminds us that many of the messages that you all are serving apply to all families. Right? This applies to all families in so many ways, the kinds of things that you guys are going to bring up for us. As we consider readiness, I think another thing to think about is the context in which families live in communities. And as we discussed earlier, it's really different in different communities, right? This is a very different context that folks may live in. We hope that people are becoming more and more accepting. I think that the families that I've been talking to have said that that seems to be the case. But recent studies show that LGBT adults, way too often, way too often, are still the victim of slurs or jokes, certainly discrimination, workplace discrimination being one of the chief places among that, but other places, as well, rejection from families and friends, and in some cases we've talked about, even violence. So we want to be aware of what is happening in our community with families, of course. What can you all tell us a little bit about that context? Kim, I wonder if you want to start. What has been your experience in the context of your community?

Kim: Well, the slurs, for one, because I used to dress like a boy. And I've had a life changing moment, I guess you can say. [Laughter] But just the things people say and bashing on social networking and across the TV, you know, when we were going through the state's legalizing gay marriage. A lot of slurs and just name calling, and it hurts. I mean, we are humans. At the end of the day, we all bleed the same color. We all have feelings. And you don't know what the person has been through for them to become LGBT or you don't know their path, so you can't judge a book by its cover.

Amanda: I think one of the experiences of sort of having this be such a front piece in the news, and you all correct me, of course, if I'm wrong, but I think, Kim, you and I had a conversation about this, it has been so prevalent in the news, right, so then the people — that are not accepting are also coming forward with those other messages. And so there is a lot in the media right now that is really complicated, I think, for families, for sure. How about you?

Sharon: I have been out since I was in my 20s. I'm in my 60s now. Don't walk out of this room and tell everybody you know. [Laughter] I have been through a lot of — I have had a lot of experiences. Some of them negative. I am a married lady now. And that is because... [Applause] Thank you. And the reason I'm married is because — I'm "legally" married — is because of the change in the law. Margaret and I met about 16 years ago. We got married 15 years ago. We felt at that time that we were — Actually, we didn't feel that. What happened was society, our friends, some of our families, people in general, looked at us like we were radical outlaws — "radical outlaw lesbians." [Laughter] And suddenly, because we were married, we worked, we lived our lives, we didn't ignore people, because if you ignore people, you put yourself at risk. But for us it simply did not matter. Our commitment was to one another. We were married; we are married. But in June in Illinois, our marriage was recognized. And suddenly we lost our status as "radical outlaw lesbians." [Laughter] What we are now is bored — boring married people. [Laughter and applause]

Amanda: That is what we want, right?

Sharon: That's absolutely what we want.

Amanda: You are still a little radical, Sharon. I hate to tell you. Still an outlaw.

Sharon: Still an outlaw.

Amanda: Mandy, what would you say?

Mandy: Well, we come from a small community where we live and back last year, when the President was working on some LGBT issues, just as an example, all the churches decided to preach that Sunday at the sermons about homosexuality. And you could see the resistance building, you know, because when you go to these small communities, you have to be careful. There is no if, ands, or buts about it, because there are violent people in this world. So, my doctor that delivered Isabella, I had been talking to her off and on throughout that week, and she said: "I'm not going to church on Sunday because I don't want to hear that." You know, me and my partner, we can't walk around and hold hands. We can't be affectionate in public, because we don't know if a wacko is going to come up and hit us in the back of the head. Because that it does happen. And — but we do not hide who we are, either. But we don't

come out and be like, "Hey, I'm gay; how are you?" You know. [Laughter] But, you know, everyone I have met — My partner has lived there in Grayson County almost all of her life. I moved — I was born and raised in Alabama. I moved to Bowling Green, which is about 45 minutes away from where I live now, and then I moved to the country, and I'm a country girl. I'm not a big city girl, as you can hear, you know. [Laughter] But we have been accepted there. And I think because we have been so driven — We are kind of cast out in the spotlight a little more because our daughter has a disability. And so we have to interact with a lot of people on a daily, on a weekly basis, to get our daughter the help she needs. Everybody that knows us knows it is about our daughter. It is not about us. We are there to help her. But I want you to hear what I'm asking you to do. Don't worry about what I do in my home because it's not relevant. You focus on my child. [Applause] Give her the help she needs. You know, don't make it the focus on, "Oh, they are lesbians, watch out!" You know.

[Laughter] But too, I have a bubbly personality, so I tend to make everybody forget that I'm gay. So, you know, of course, that's hard to do... I mean, come on, look at me, but seriously. [Laughter] But, you know, we have had some wonderful experiences, you know, and I kind — If — I have only had a few slurs, but I turn around and knock it right back. You know, I'm not hateful about it, but I'm like, "What you talking about? You don't even know me. How can you stand there and judge me? You don't know my story, you don't know her story. And don't you dare say nothing about my daughter." [Laughter] But, you know, I enjoy the community where we live. They are very supportive of us.

Amanda: Very good, well, and we hope for that, right? We hope for that support of the community. We hope that things are sort of in that place, but we also know that there are other places that folks can go. And we will talk a little bit about that in a second. I wondered, though, I just wanted to ask if anybody wanted to share anything about family and family response or friend response.

Sharon: Could you repeat that?

Amanda: If anybody wanted to talk about some of the messages that have come from family.

Mandy: Sure.

Amanda: Yeah?

Mandy: I came out — I was about 24 years old. And my mother had passed away in 2003. She is the only parent I had growing up. And so, when I discovered and figured out that I was a lesbian, I called the closest person I have to me in my family, that is my aunt that lives in Bowling Green, and I told her. And her response was, she kind of got quiet for a few minutes, she says, "Well, I'm just not going to tell your uncle." And I'm like, "What do you mean, you are not going to tell him? He is going to figure it out." And, you know, so I kind of, you know, didn't talk to her there for a little while. But the lady that lives across from my aunt, she is a nurse. She has been a nurse for years and years and years. And my aunt had got to talking to her one day. And the lady's name is Anna Jean and she told her, she said: "Joyce," she said: "that is not her choice", you know, "She didn't choose to be like, 'Oh, hey, I want to be a lesbian for the day.' It doesn't work like that." She explained to her that I had finally faced and identified with myself about who I was. And the more she talked about it with her, the more my aunt began to understand. And now we have a wonderful relationship.

The majority of my fam... The rest of my family live in Alabama. They love me, they respect me, they respect my partner. But yet we do not talk about "the gay issue," you know, because we can't, because our views are so different that it causes a lot of conflict. But, like I said, you know, I still love them and they love me. But as long as we have a little bit of respect there and a little bit of boundaries, everything is okay. But there is always some resistance there, because the further south you go, the worse it is going to get.

Amanda: Hmm. How about you two? No? So, as we sort of think about that context and what is happening with families and sort of some of the messages that kind of can come in and sneak in as a part of this experience, I think that it's important for readiness, but it's also really important, I think you all have taught me, in terms of relationships, right? So I'm wondering, as we are talking with all of these staff here today, if you all can help us think about how that context of the environment informs the way that you enter into relationships with service providers and what folks might see. And, Mandy, I wonder if we can start with you.

Mandy: Sure. We got linked through Early Head Start from a different provider. — That's where you were going — I had enrolled in the HANDS program, and that was a prenatal program. They followed me throughout my pregnancy, and they would follow up until Bella was 3 years old. But the lady that was with us with the HANDS program linked us to Early Head Start. I was kind of scared at first because I didn't know how we were going to be accepted. So the first three or four months, it was kind of iffy, you know, because I could tell, you know, I don't like to use this word, but she was a churchgoer. And I could tell she was very uncomfortable, which was, in turn, making us uncomfortable. So I debated several times, you know, "Maybe we need to switch. Maybe we just need to stop the program." But as time went on, we got more comfortable with each other, and it just led from one door to another, you know, and — I think once they got used to us, they thought, "Well, it's going to be okay. You know, yes, they are a different family, but they are okay. There is nothing to be afraid of." [Laughter] Because, you know, we get that. You know, people are scared. You know, they are scared to ask questions. And I don't know why. You know, you want to ask me something, ask me something, 'cause I'm going to tell you. [Laughter]

Amanda: I'm going to ask you a lot of questions today.

Mandy: Yes, yes, yes, I will give you my honest opinion about it.

Amanda: Well, but I think what you are sort of describing for us, Mandy, is the sort of cautiousness with which you are just naturally going to approach these relationships, right?

Mandy: Yes, yes, yes, because you never know with our family, you know, our family is a different family. We never know when we are going to be accepted and when we are not going to be accepted. So we are kind of thrown out there, and there is a trial period, but every person you meet in your life, there is — You get a little uncomfortable, you know, until you feel that person out and get used to them. And that is the way it was starting out. We were just getting used to the program. We were getting used to the home-based worker coming in once a week, you know, because they were thrown into our life, too, you know, and probably something that they weren't around very much. And I think once

everybody figured that, "Okay, well, you know, they are okay, there is nothing to be scared of, you know, they are just like any other family," everything went forward.

Amanda: Except maybe kind of special.

Mandy: Exactly, exactly.

Sharon: We are kind of on opposite ends of the spectrum, Mandy and I. I have had a lot of experience providing services myself and advocating for people with vulnerable profiles. So when it came to the point of what are we going to do for Angelina, we had already started seeking services. She was in early intervention. When her brothers and sisters moved in, education, which has always been a critical, primary value for my family, my brothers and sisters, mom and dad type family, when her brothers and sisters moved in with us, we immediately noticed that they — needed more, all five of them. Our oldest had no — She was — It was horrible. You have a 7-year-old who has to go to summer school because she can't read because she missed 20 days in school. You have a 4- or 5-year-old who'd never been to any kind of academic anything, and she is smart as a whip. She wants to be with other kids, and she wants that feeling of achievement, and all she can do is sit in the house all day, every day.

Then you have the baby of the four, who is preschool age, and no one was thinking or planning, trying to get him involved. And Angelina had her own set of issues. You are going to have speech issues when you are born with essentially no palate and cleft lip. It was not overwhelming for Margaret and myself as a family. What happened was we were just working, working, working hard to find the contact that would help us help our children. We were looking for a place for Isaiah, Head Start or preschool. We were fortunate to find the Head Start in Rockford. Our family's resource person was wonderful. She came into our home, asked us questions. I didn't judge her because she was heterosexual and wore long skirts and probably was not the same — didn't belong to the same religion that I did. We just looked at what the kids needed. She never questioned Margaret's relationship to me or my relationship to Margaret. It just didn't come up. That kind of thing tends to happen in cities. I happen to think that Rockford's Early Head Start and Head Start program are great. They are exceptional in how they do what they do.

When Angelina finally got into Early Head Start, she — We had already done a lot of planning and working and hopefully helping her to be a really — a kid who through play was developing. And I don't want to sound like an egomaniac, but I thought we were doing a good job, until the Early Head Start teacher came in, and we saw that, "Gosh, this girl is good." I mean, "girl," sorry. Melissa, our Early Head Start teacher, came in. The focus was not on us. It was not on our relationship. We were — It appeared to us that to her we were another typical family with a kid who needed what she had to offer. Angelina has blossomed. She now will go up to Melissa, sit on her lap, talk to her, sign with her. It's just been such a joy watching Angelina grow and having this teacher come into our home and help us and support us in giving Angelina what she needs.

Amanda: So this is — And I am not going to be able to keep these folks on an outline. I just have to tell you, that is just not happening, but what we have gone to now is the piece of responsiveness, right? So one of the pieces that was very strong from this panel is how important that focus on the child is. We have got to focus on the child; that is where the focus is. This is a program about child development. So,

some of this other stuff isn't really relevant, you know, at certain times. And what is most important to families, of course, all families is how is the child doing, right? But I do want to drag you guys back to this place about sort of entering relationships and what it is that you guys are looking for. So one of the things you said to me, Kim, was about nonverbals. You talked about how when you see somebody, you kind of, you get a sense of them. You are really looking for those nonverbal pieces.

Kim: Right, like, maybe in the applications I was telling her about the Human Rights Campaign or human equality, that human equality sign, not necessarily to have something with rainbow on it or the blue and purple for bisexual, just something that LGBT families can look and be aware that we are welcome and we are not going to be looked at differently, no matter what.

Amanda: Yeah, so that is a sign that we can put on the program, right, that says, "LGBT families are welcome here," the equal sign that you all may have seen, the blue-and-yellow equal sign that comes from the Human Rights Campaign, and what Kim was saying was that that is a better indicator for her, actually, than even a rainbow would be, a rainbow flag.

Kim: Right, and also, when you go to fill out mother and father, for example, when we filled out the application for Early Head Start when my partner was pregnant, it didn't have "mother" and "father." It had "mother" and then "parent or guardian" as for the father. So that also made me feel a little bit more comfortable, because there is not always a father in the picture.

Amanda: So let me just add that you came in during pregnancy, right, so there was a mother for sure, and so the other parent was gender-neutral, which was really helpful to you, you said.

Kim: Right.

Amanda: How about when you are meeting folks for the first time, right, and you are sort of trying to assess what is happening here. Is there something that you guys are looking for in terms of? You know, "This is somebody that I can really connect with and have a relationship with," that's sort of nonverbal?

Kim: Acceptance.

Amanda: You say the acceptance piece?

Kim: Acceptance and respect is all we ask for.

Amanda: Mm-hmm, and what do you say, Sharon?

Sharon: I — This may not be politically correct, but I just expect people to do their jobs. I do mine. The fact that I am a lesbian woman doesn't enter into it. I want people to act towards myself, my wife, our kids, I want — typical treatment. I think we all deserve that. Yeah, everybody is special. Everybody's got a special need. But being gay is not one of them.

All: No. [Laughter]

Mandy: I agree; I agree. [Applause]

Amanda: Yeah, so, so just being — [Laughter] What are we going to do, you know? So, in some of my conversations, I mean, one of the things that we've talked about is biases, right, that people just naturally have biases. We all have biases. Those of us who have been social workers for years still come in with these biases. The piece of this that I think has really come forward from this group is how important that self-awareness is. Are you communicating, when you meet somebody for the first time, acceptance, no matter who it is, right? We want to communicate that acceptance in a really powerful way. And sometimes if families have had experiences where not everyone in the community is accepting them, they are very sensitive to those issues, right? We expect that, of course. That makes a lot of sense. So, you know, in going back home I think another part of readiness is really to look within staff and sort of talking with them about, "Where are your biases? How can we understand those?" And if we can surface them, if we can identify them — sometimes they are not something we are thinking about; we don't really identify them very quickly — but if we can bring them to the surface and really understand them, then we can really support staff in coming forward in a way that they are communicating with their body acceptance, they are communicating with their words acceptance.

And finally, you know, we hope that behavior will sometimes guide us in attitude, right? So we really want to be looking at how we are presenting ourselves to families, is where I was kind of going with that, with the help of the panel. Yes, okay, so, Kim, you brought up this point about language, as well, which I think we've heard is really important. It was important to you to see on those intake forms the gender-neutral parent piece of it. Do any of the rest of you have language stories that you'd like to tell? No. Okay, so what I want to encourage all of us to do is to go back and look at those forms. Are the forms that we are using really inclusive of all of the families we are serving, right? Does that make sense in what we are doing? We want to check the intake process. You said that the question about the relationship didn't come up, and it wasn't necessary to come up. We really have to check the intake process and make sure it makes sense. I also am hoping that folks can check the way that they are talking with kids about families. How are you talking with the children in your programs about families? Now, Sharon, your kids are older, right? But you said that they do come home and they have questions about things that they hear at school about sort of what makes a family.

Sharon: Yes. Our Isaiah is in Head Start and he — he did not actually come home with a story. What happened was the teachers told us a story about his peers in the classroom. Typically I take him to Head Start every afternoon. Margaret, after work, picks him up. After, oh, I would say six months, the kids in that class told Isaiah how lucky he was because he had two mamas. And I was — It was one of those, "Aww..." [Laughs] moments for us. Our children have difficulties with the fact that — They don't have difficulties with the fact that there are people who care about them. They are in the foster care system. That is a whole another set of problems from kid world. And our children, as I said earlier, are Native American. They encounter racism and discrimination because they are not Caucasian. They are not Hispanic. We are black and white, and everybody, their peers, want to know what is going on here. And then [gasps] you are a foster child, too, oh, my goodness. So our Paul, when he was in second grade, one of his peers started ragging on him around Thanksgiving because "Oh, you are an Indian." And we talked — the teacher talked to us, and I offered to go into the classroom and have a discussion with the kids, but she said, "Oh, no, hold on. I'll do this." [Laughter] So those are experiences that I just wanted to share with you.

Amanda: And you also told me that sometimes they bring home questions about the Father's Day celebration kind of pieces.

Sharon: Yes, yes, because we are women and because the grade school, it's a grade school, they have "Muffins with Mom," "Dances with Dad," "Family Nights." We — Our children are very involved. We involve them in sports. We go to all of the sing-alongs and the things that you do as parents. So we are very visible. And the children wanted to know, because their birth parents were not there, not available, if we would come to the dad's day and be there for them. So, of course, that happened. I just think it's so hard being a child and having a lot of things that you think you have to manage like a little adult, but you can't. So that is what we are there for, to be their parents. And being their parents doesn't — Again, the fact that we are lesbian, the fact that we are gay, is so secondary. It's — It is a piece of what makes us who we are, certainly, not denying that. But primarily we are their parents.

Amanda: Absolutely.

Mandy: Exactly. [Applause] Now, in our program, they did allow Becky to sign as Bella's other parent. In every document where I have to sign, they allow Becky to sign, as well. And they have done that from the beginning.

Amanda: Really nice.

Mandy: Yes.

Amanda: Well, and I think that this piece about sort of — So we want families to have this message about family, and we also want kids to have this message about family. Even the youngest children, so we are talking — We are hearing about sort of the sensitivity that children have in wanting to be included in all of these places, and for older toddlers, they are getting those messages, too, right? So a few strategies that might come up, consider in your programs, are you using the family names with children, with the family's permission? So we talk with the child about, "Oh, your mama is coming; oh, your papa is coming." Are we saying, "Oh, Mama Jane is coming! Oh, Mama Pat is coming! Here they come"? You know, are we being really intentional in doing that? Are we including photographs of a diversity of families on walls so that families are really seeing — or children are really seeing their family represented in books and in posters and in all of those places? And if we are posting family pictures, with permission, of course, are we doing that in a way that includes, again, all families? We really want to be sure that those kids have — not that we are singling anybody out — We want children to have a very broad definition of family. We want them to be able to recognize family when they see it, right? And we also want them to be able to recognize their own family when family is being discussed. And we know that it can be really complicated if that can't happen. Okay, I'm going to stop with my lecturing. [Laughter]

Okay, so one of the other messages that came out is that being out to certain folks in your community doesn't mean that you are out to everyone, right? So, at the same time that I'm saying, you know, we should have pictures of families on the wall, it may be that families are not comfortable always with

that. And so we have to spend some time kind of thinking about that. Staff do need to be kind of careful in their programs, and, Mandy, you were talking with me a little bit about how careful sometimes — You know, how careful folks do need to be.

Mandy: Yes. Not every LGBT family want everybody at your center to know that they are gay or lesbian, whatever they are in life. That is one thing you should talk to these families about. They might be out to their family at home, but they do not want everybody at your center to know they are gay or lesbian. So that is one thing that does need to be discussed with our families. And the reason I say that is because our families are afraid of backlash, a negative backlash, because sometimes you might not get it here, but it goes on down the line, and it can get worse as it progresses. And it ends up being a big problem in the community because you get scared.

Amanda: Yeah, so we definitely want to be cautious with the way that we do that. And, Kim, you had an idea about how folks might find out about whether folks want to be out in that way.

Kim: By simply asking the family if they are comfortable with everybody knowing they are out. Me, I came out when I was 16 to my grandmother. And my grandmother means the world to me. So, if I can tell her, I don't care what the rest of the world thinks. I'm proud of who I am, and I'm proud of what I'm going to be. [Applause]

Amanda: And you thought that that was a good question at an intake process, right, so that folks would really — So right away we have a sense of, you know, if families are sharing, if that's a question that's coming up, we really want to know as soon as that comes up, "Is that something that you are comfortable with? You know, other folks — other families in the program knowing?" Yeah? Does that make sense?

Kim: Yes, just like a release form when you ask to take a picture. Just ask. I mean, being LGBT is not a disease, it's not a virus. It's just who we love at the end of the day.

Amanda: Now, some of you talked about how — or a couple of you talked about already how important it was to you that your children get services in this program and that it was really child-focused and that it's been a fantastic service for you. Kim, you also talked about how it was a community for you.

Kim: Yes, it's like a home away from home. We did our gardening. They had a variety on the ages of kids when we had our family time, which I think that's addressed later that they should have a variety on age groups and things like that. It is kind of different when you have, say, a 6-month-old, a 2-year-old, and a 3-year-old in family time, because they are not all on the same learning level. So I think it should be focused more like, you know, infants and then maybe 2-year-olds and 3-year-olds, instead of putting them all together.

Amanda: Yeah, so Kim was hoping for a big community at those socializations, and it was smaller than you hoped it would be, but it still — You told me that sometimes it felt like family.

Kim: Yeah, it was really small. We only had about — I'd say about three other families that were there. And it wasn't — It is separated by where you live, because a lot of the people where I live don't have transportation to family time, so they have a bus that picks us up. And they separate everybody depending on where they live. So we don't get to see all of the families that's in the program because we are all separated, and I think that should be changed.

Amanda: So that was her idea about doing that, which I think would work really well in your community. So, Mandy, you are from a rural community. We've talked a little bit about how small that rural community is and that there may be some particular issues around rural communities, and particularly you are thinking in the South. And we know that sometimes those families may feel a real sense of isolation if there needs to be sort of a hiddenness to that aspect. But that has not been your experience. Can you tell us a little bit about your community in Leitchfield?

Mandy: Well, we have — There are several other gay families where we live. And we are all really close. One of my good friends was just hired at the center that my daughter — our daughter is in, so I get to see her more now, so — But all of us gay families, lesbian families, however you want to say it, we call our children "gaybies," okay? [Laughter] You know, I joke about it all the time, you know. I call Isabella a "gayby." You know, it's just a little nickname. But we have that support, you know, we not only have the support of our center where our daughter is, but we have support from other gay families. And all of our children are the same age. We were the first to start having children as a lesbian couple, and then it was our next set of friends. They had a little girl. Her and Isabella are six months apart. And then another set of our friends had another little girl. She is about a year younger than Isabella is. So we have very small children that are around the same age, you know. And they have kind of grown up together. And I think it is wonderful. You know, we have that support of, "Okay, yeah, everybody knows we are different, but hey, we've got our own little clique over here, you know, y'all go on. We are good." You know, but it's wonderful to have that support, because they can identify with you, and you don't feel so outside the box, I should say, because there are others in your community like you, and that kind of helps with your life, you know.

Amanda: Well, and we hope for that. I mean, we always are talking about what kinds of social supports families have. So sometimes with LGBT families we have to ask some sort of different kinds of questions if we are doing the epigrams, the family mapping that we sometimes do, right? We sometimes have to ask slightly different questions and really learn who the supports are in families' lives. The other part of that is that we hope to bring some of that in, as Kim kind of found a little bit, I think, into Early Head Start. What can Early Head Start offer to families that's going to be useful to them, all families? And we are talking here about LGBT families. Our expert work group also talked about rural communities and sort of what folks might do, and they had a couple of other tips.

So one idea was to really have LGBT families come in, and, in whatever way they can, help identify where they are meeting challenges in the community, because sometimes that can be really hard. The other piece is to connect folks by social media. And when we were talking last night, we were talking a lot about social media, mostly related to Down syndrome, but it can certainly be a place to find community for a number of families. So we just want to bring that in as a resource for folks. The other thing that programs can do is that they can really be an advocate out there, and I wanted to ask — I

know Sharon is a policy wonk. She told me that. So I wanted to ask her to talk to us a little bit about sort of how you see folks might be able to be advocates in their communities.

Sharon: The first thing that comes to mind is you, the person who's gay or bi or trans, you have to be who you are. You can't hide. You can hide, but you should not. [Laughter] It doesn't help anything. And, in order to be an advocate for other people, I think it's important to first self-advocate, ask questions, find out what's going on, especially when you are dealing with program people. If you are at all uncomfortable with your service providers, then you have to be the start, you have to be the catalyst for change, by asking those complex, difficult, uncomfortable questions. It's not always going to happen that people are going to treat you respectfully or treat you with dignity and, if that happens, again, being an advocate for yourself, first, before you go out in those circles and, then, you are advocating for your kids, you are advocating for your family, you are, you know, being part of the big, the greater community, if you feel slighted or, again, if you feel that you are not respected, then get up in their faces, give them attitude, face them off, tell them how you feel, as a person. I think that, certainly — and Amanda knows this — I do it. [Laughter]

We all should take responsibility on that level. After you are comfortable doing that, then, you go out and you can build on that. All of the things that I'm saying, easy to say, hard to do. When I was in my 20s, I worked for the state of Illinois and I saw another staff person hit a person with developmental disabilities. She whomped that lady hard with a purse. I, you know, get that eyeball-to-eyeball contact and see it going down and my feeling was "I got to tell." So I told. I wasn't particularly out at work. The lady actually was disciplined, ultimately, but I got the surprise of my life, and that surprise was I was called in to the director's office and asked "Are you gay?" It was a non sequitur. Why would, after somebody hit someone, I be called in and asked that, in the context of this investigation? Apparently, the lady who hit this person used, as her defense, that I had come out to her, told her that, you know, I was so conflicted about being gay. That didn't happen. When my director asked me if I was gay, I told her "Yes, I'm gay, however, I consider myself more as a feminist." She let me go and, within a short time, everybody at work knew my story — or they believed they knew my story.

Amanda: So, let me just — When you say "let me go," you don't mean that they fired you?

Sharon: Oh, no, no, no, no. She told me that there were more people than I knew who were gay and that this didn't have anything to do with the incident. "Go back to work." [Applause] So I worked. At that time, I was a direct support person who gave physical care to people with developmental disabilities. And, in the intervening years, I just worked as hard as I could and really worked on understanding policies, standards, rules, regulations, just being a policy wonk. And, ultimately, I became a director of one of the seven developmental centers for the state of Illinois. Being out, being gay, and understanding who you are can be transformative for some people. I guess I was one of those. [Laughter] But, again, it was about advocating. You can't let fear rule your life.

Amanda: So, and one of the things you said to me was "Know the rules and use them to support people who are vulnerable."

Sharon: Yes. That's one of the ways that I've lived my life. I think that children can be very vulnerable. I know that people with disabilities, specifically, women with disabilities, we become targets. And, to the extent that you can help another person be fearless, then, you are worth the skin and bones that God gave you. [Laughter]

Amanda: Well, and it's such an important message, I think, for Early Head Start, as we are thinking about "How we advocate?" We have an opportunity here. Laws are changing. Our definition of "family" is very broad. We have a lot to say in communities about what family means and so the idea that we can use that knowledge to really support the families we are serving is really exciting. I want to ask how your families are doing now. I have some more pictures. I think. Do we have PowerPoint? You guys have PowerPoint. So, I can't see who that is.

Attendee: Bella.

Amanda: Oh, it's Bella! How's she doing?

Mandy: She's doing wonderful. Isabella has been in an equine therapy program since she was 2, so she's been in it for 2 years. That program has helped strengthen her muscles the natural way. She is now so strong that she doesn't require physical therapy. She is receiving OT for her hands, and speech therapy. But Isabella is doing wonderful. The program has made such a difference in her life and our lives and it's the positivity that goes along with it. They have helped us push Bella in the right direction, to get her where she is now. [Applause]

Amanda: Well, and before we go to Kim, Mandy, tell us about you.

Mandy: Well, I am in school. I'm working on an associate's degree for early childhood education. [Applause] I have about five classes left. I'm a busy person, a busy mother, but I'm proud to say that I have a 3.8 GPA. [Applause] So I've come a long way and my daughter is what pushes me and I'm thankful for all the people from our program that has helped me along the way because they've not only helped her, they've helped me, too. And I need that. I need that guidance, I need that support, I need that positivity to help push us forward in our life. And they are just wonderful. I couldn't say — I could talk to you all day about these wonderful people. I'm very, very thankful for them. Yeah. [Applause]

Amanda: [Laughter] Kim, how about you and this little dude?

Kim: Oh, he's doing just great! He only has to see his cardiologist twice a year, I believe, now. And, after he turns 3, it'll only be once a year, because he still had some fluid around his heart. His last visit to the cardiologist, there was no more fluid, so, hopefully, he'll be moving on from that. [Applause]

Amanda: And you are looking at going to school and doing all kinds of stuff.

Kim: Yes, for business management.

Amanda: Looking at business management. [Applause] And Sharon?

Sharon: Those pictures there? The little person with the stripes and the bicycle, that's Angelina. She has gone from a high-risk life to being just a feisty little kid.

Amanda: [Laughs]

Sharon: Every day, I think, how I used to hold her like that, you know? And, now, she is on bikes and she is saying "no" and she is signing "no." We are so fortunate: all of the kids are doing extremely well. Angelina is speaking in, not sentences, paragraphs. She is asking "What's this? What's that?" You cannot really understand her well, but that will change. Every one of the five of them, their lives are changing so much, for the better, every day. We keep them, again, we keep them very, very busy and they are learning. They've learned things like how to have dinner at a table, how to use toilet paper, things that you just don't think about. Their social skills are improving. They are able to — This summer, the three oldest went to camp. Rina, who could not read, is a homework hero. Thank you very much. We are thrilled to be able to be the people, during this time in their lives, that are acting in the role of parents.

Our concern is, through the court process for permanency, that they will have to, perhaps, live with other family members, which means they won't live with us. We are taking that process one court hearing at a time and we are trying our best to help the kids deal with that because they've shown us that they consider us their family and they would be grieved to have to leave us. Ultimately, we know that whatever happens to them will be the best for them. And, as with other children that we've fostered, who have perhaps gone to their birth families or other family members, we will always try to keep contact with them and be their extended family.

And that's Margaret. Margaret is doing — Margaret's doing the job that she should be doing in that picture. [Laughter] We are very happy. Her career is flourishing. And, again, for a woman who works, she spends a huge amount of time with being a parent. I'm retired. I retired about 5 years ago and I thought I would not work, but we have foster kids, so that's — [Laughter] that's out of the picture. One of the things that has happened to me, lately, is I was drafted to our policy council as an early childhood advocate, excuse me, member, and that's been wonderful. I approach it as if it is a job. I have been passionate about working all of my life, so approaching it as if it's a job is a good thing, and I hope to be able to contribute to early childhood and Head Start, if I'm, you know, continued to be allowed to do that.

Amanda: I can't imagine them not allowing you to do that.

Sharon: [Laughter] That was a nice thing to say.

Amanda: Well, of course! And I do want to make a note about your piece about being a foster family and sort of what's involved in that because we know that a number of LGBT families, out of the peculiarities of biology, are not able to have children traditionally, right? So we do see a lot of families that come in through the child welfare process, through the foster care process, and so, being aware of some of these issues related to foster care is really helpful, in terms of that readiness piece, right? How are these families — And we know that foster care kids are eligible for Early Head Start programs, so we hope to see a lot of those kids in programs. We hope to see a lot of families, as well. I wonder if you all have any closing thoughts for us today. Kim, do you have anything?

Kim: No.

Amanda: Said it all?

Kim: Yep.

Amanda: How about you, Sharon?

Sharon: I always have thoughts. [Laughter] Some of them deserve the light of day and some that don't. I have been singularly impressed by the people I've met here during this conference. You show so much passion, so much enthusiasm, so much commitment for what you are doing. It's pretty evident, whether I've been with a group of managers or a group of people who teach and train. I have been impressed and I would like to thank you all very much for what you are doing for families, for my family, and for all of the families that use your services. The fact that you are committed to continuing to educate yourself, the fact that you are all here, listening to us, I find amazing. We were all kind of scared [Laughter] to do this, but you've been so kind. Thank you.

Mandy: I agree. Thank you all. I agree.

Amanda: How about you, Mandy?

Mandy: My main purpose for this panel was this statement that I am about to say. Whatever you do, please do not put your own personal belief into the mix about that family, because, when it comes down to it, your personal belief does not matter. That child is what matters. Focus on helping those two parents, whoever they are, with that child. Teach that child. Help that family grow, help that child grow and that family will be grateful for you for the rest of your life. Make them go back and say "Thank you for helping me get my child where my child is now." [Applause]

Amanda: So, at the end of this week, we are thinking about nurturing the children and families in our programs, all the families and children in our program; primarily, the children we are hearing, but, also, those families, as well. So many of today's lessons are applicable, right? To all families. We talked about that in the beginning. We have to be knowledgeable and ready to support families in the context of the communities in which we are serving, right? We have to attend to those absolutely critical relationships and understand what, you know, can come out of those relationships as well and we have to be responsive to their unique, to their individual, when I say "unique," I mean "individual," — because we heard different stories here today — their strengths, their needs, and their goals, right? That's a big task.

But, in the beginning, we did a little definition. So if working with LGBT families is really about honoring relationships and really about honoring love and all of those kinds of important emotional pieces, nurturing those pieces, we know that Early Head Start and child care folks are the folks, the natural leaders for that, right? You are the natural leaders to go forth and serve families in this way, serve children in this way, and be community leaders in this way and we are really excited about that. Before we send you off to do that important mission, that important work, right? I just want to say, to Kim, to Mandy, to Sharon, and Kim, I just want to say: we cannot thank you enough. Thank you so much for being here, for sharing your stories, and for helping all of us really think about how we are nurturing the children and families in our community. Thank you and have a great trip home. [Applause]

Mandy: Yay! You did it! [Laughter]