

OUTCOMES FOR LGBTQ+ YOUTH IN CHILD WELFARE:

WHAT WE KNOW

STATE OF KNOWLEDGE SHEET

Research suggests that LGBTQ+ youth* involved in the CWS have numerous worse health and social outcomes than their cisgender and heterosexual peers, including:

Worse mental health outcomes than non-LGBTQ+ youth

- More likely to experience depression, trauma, and substance use. 1, 2
- Nearly three times as likely to be hospitalized for emotional or physical issues.³
- Three times more likely to report a suicide attempt in the last year.⁴

Increased challenges in transitioning from the child welfare system to adult living

- Youth who age out of foster care often have not been taught basic life skills needed to achieve successful independent living.⁵⁻⁸
- Youth aging out of CWS report the following challenges with transition to adulthood: lack of preparation to secure living wage jobs, unemployment, disrupted social networks, hunger, homelessness and housing instability.^{5, 9-11}

Increased likelihood of involvement in multiple crisis systems

• LGBTQ+ youth can experience a cycle of family rejection, child welfare involvement, running away, homelessness, engagement in survival crimes, and entry into the justice system. 12-14

Increased likelihood of experiencing homelessness

- LGBTQ+ youth in the CWS are less likely to be adopted or reunited with their families of origin.
- Between 31% and 46% of participants existing the foster system experience homelessness at least once by age 26.⁷ Between 20 and 40% of youth experiencing homelessness identify as LGBTQ+;^{6, 18-21} LGTBQ+ youth of color are at greatest risk.²²
- LGBTQ+ youth are disproportionately placed in institutional settings instead of foster families, which can lead to running away and homelessness.
- Transgender and gender-expansive youth who feel unsafe in child welfare placements may choose to live on the streets, increasing their risk and vulnerability.^{22, 23}

· Poorer school functioning

- LGBTQ youth in foster care report more fights in school, victimization, and mental health problems compared with LGBTQ youth in stable housing and heterosexual youth in foster care.²⁴
- Unstable foster care placements among LGBTQ+ youth can lead to more disruptive school changes. 25
- Only 3-11% of former foster care youth in the US obtain a college degree, compared to 33% of the general US youth population.²⁶



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- More difficulty finding stable, legal forms of employment.
 - LGBTQ+ youth exiting the CWS are less likely to complete their education and may face employment discrimination.^{11, 25}

Greater risk of substance use

 Substance use and abuse among LGBTQ youth with prior experience with the CWS are higher when compared to heterosexual, cisgender youth.^{1,27}

· Greater rates of risky sexual behaviors

 Research has found higher rates of involvement in high-risk sexual behavior related to survival sex work, trafficking, and other exploitation of LGBTQ+ youth experiencing homelessness.^{27, 28} One study found that 44% of LGBTQ+ youth participants engaged in survival sex work compared to 32% of heterosexual and cisgender youth participants.²⁹

Systemic Risk Factors

• Anti-LGBTQ+ Discrimination and Stigma

Rates of mental health issues/substance use are already higher among LGBTQ+ youth who are not involved in the CWS, due to identity and stigma-related stress factors,³⁰⁻³² as well as child maltreatment, ³³⁻³⁵ poverty, structural racism, and family instability.¹³ Compounding stigma and discrimination within the CWS exacerbates these issues.

• Limited effective programs for transitional aged LGBTQ+ youth

Limited services including housing, health care, social supports, and life skills.³⁶

Intersecting vulnerabilities

• For LGBTQ+ youth, risk factors related to intersecting identities of race, gender and socioeconomic status can reduce likelihood of successful outcomes.³⁶

Health Justice Framework: We conceive of Health Justice for LGBTQ+ youth as involving the application of human rights principles to public health needs; moreover, human rights principles require guarantees of non-repetition of harms, which leads health justice approaches to seek system-level reforms. Another rights principle guides us to prioritize meaningful participation of the persons most affected by the inequity in seeking solutions.



OUTCOMES FOR LGBTQ+ YOUTH IN CHILD WELFARE:

WHAT WE DON'T KNOW

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There is limited longitudinal, population-based research examining:

- Developmental pathways for LGBTQ+ youth in child welfare and other crisis systems.
- Intersectional vulnerabilities and the impact on transitions to adulthood.
- Youth involvement in multiple crisis systems (such as juvenile justice, immigration, homelessness, etc.)
- Fertility and parenting outcomes among LGBTQ+ youth who have been involved in CWS.

RESEARCH RECOMMENDATIONS

- Increased research on resilience/protective factors for positive outcomes among LGBTQ+ youth exiting the CWS.
 - Explore individual and collective strategies, like alternative family structures and resource sharing, that LGBTQ+ youth deploy to manage the challenges of exiting the CWS and transitions to adulthood.
 - Identify service organizations that LGBTQ+ youth find useful after exiting CWS.
 - Notable examples of current intervention research focused on increasing resilience among LGBTQ+ youth include:
 - Proud & Empowered: a school-based intervention to help sexual and gender minority youth cope with minority stress experiences (PI: Dr. Gabe Miller): https://www.proudandempowered.com/
 - Tuned In! A mindfulnesss-based affirmative program to virtually address the mental health needs of sexual and gender minority youth (PI: Dr. Gio Iacano)³⁷
- · Research on youth involved in multiple systems.
 - Study outcomes and experiences for LGBTQ youth who are in multiple systems, particularly child welfare and juvenile justice, but also homeless services and the educational system.
- Program Implementation and Evaluation research
 - Research focused on enhancing permanency outcomes for LGBTQ+ youth in care or young people at risk of child welfare involvement.
 - Examine how LGBTQ+ youth fit into existing metrics of evaluation around exiting the CWS system.
 - Identify and evaluate practices to promote positive outcomes once LGBTQ+ youth are system-involved. Examples include: restorative justice practices versus zero tolerance policies in schools,³⁸ community capacity building versus policing,^{39, 40} and kin placement versus group home placement.⁴¹
- **Use participatory methodologies** that empower LGBTQ+ youth in the CWS and their support networks to participate in developing programs and research studies to evaluate them.

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