



NYC Children

LGBTQAI+ Action Plan

Prepared by
Administration for Children's Services



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The New York City Administration for Children’s Services (ACS), its contracted foster care agencies and other key partners in NYC who specialize in working with LGBTQAI+ youth are committed to providing high quality services and improving outcomes for LGBTQAI+ youth in foster care. Based on this commitment, and with generous support from the Annie E. Casey Foundation, NYC Unity Project, and the Redlich Horwitz Foundation, ACS contracted with Dr. Theodorus Sandfort, Professor of Clinical Sociomedical Sciences in Psychiatry at the Columbia Mailman School of Public Health to survey youth in foster care in order to understand the proportion of youth in foster care in New York City who are LGBTQAI+ and to compare their experiences in care with youth who are not LGBTQAI+.

ACS has policies and practices intended to protect the safety of these youth, and to support and affirm their self-identity in their relationships with adults and peers. ACS sought to conduct this important survey because we recognized that the field needed more comprehensive information about LGBTQAI+ youth in foster care in New York City in order to be effective. We needed to know what proportion of youth in foster care are LGBTQAI+ and to learn directly from youth in foster care about their experiences and sense of well-being. We also recognize that our current policies were developed almost ten years ago, and we know there are likely gaps between our intentions and the resources available, and what youth describe their experiences to be. Finally, there are changes in the worldview of the next generation of LGBTQAI+ youth in terms of how they understand and describe their sexual and gender identities, and ACS wants to build the field’s capacity to strongly affirm their self-understanding and their hard-won progress in defining themselves in the world.

This work significantly contributes to our understanding of LGBTQAI+ youth in care. The results indicate that LGBTQAI+ youth in foster care are over-represented among the foster care population in New York and identify distinct differences in the experiences and well-being of LGBTQAI+ youth and their non-LGBTQAI+ counterparts. This document provides:

- Key Findings from the Survey
- ACS Work to Date Supporting LGBTQAI+ Youth in Foster Care; and
- The ACS LGBTQAI+ Action Plan moving forward, responding to the study findings.

The full report with all detailed findings from the study is [available here](#). The Executive Summary from the full report is also available here in Appendix A.

A. KEY FINDINGS FROM THE STUDY

This is the first report on the proportion of youth in foster care in New York City who are LGBTQAI+ and their differences in experiences compared to those of youth who are not LGBTQAI+. (The acronym LGBTQAI+ comprises persons who because of their gender and sexuality have specific needs and are treated differently than other persons, which might negatively affect their well-being. The letters stand for lesbian, gay, bisexual, transgender, queer or questioning, agender or asexual, and intersex). According to the results:

- **LGBTQAI+ youth are overrepresented in foster care.** More than one out of three youths (34.1%), ages 13-20, in New York City foster care identify as LGBTQAI+. This is substantially higher than the proportion of LGBTQAI+ youth in the general population.
- **LGBTQAI+ youth in foster care are more frequently youth of color.** With almost three quarters of the sample identifying as African-American/Black and almost a third identifying as Latinx, the sample reflects the population of New York City youth in foster care, in which people of color are disproportionately represented. Within this already racially and ethnically disproportionate group, LGBTQAI+ youth are more likely to be Latinx and slightly more likely to be African-American/ Black.
- **The placements of LGBTQAI+ youth in foster care are often different than that of non-LGBTQAI+ youth in foster care.** Compared to non-LGBTQAI+ youth, LGBTQAI+ youth were more likely to be placed in group homes or residential care and less likely to be placed in family-based care. Also, LGBTQAI+ youth were less satisfied with their current placement. LGBTQAI+ youth were more likely to say that they experienced little to no control over their lives in foster care and to have heard staff or other people refer to them as “hard to place.”
- **The family experiences of LGBTQAI+ youth in foster care can be challenging.** While LGBTQAI+ youth were more likely to be in touch with family members, they saw these family members less frequently. Furthermore, LGBTQAI+ youth experienced family members as less supportive than non-LGBTQAI+ youth did. Fewer LGBTQAI+ youth reported that there were adults in their lives, other than family members, who they could rely on and with whom they felt supported.
- **LGBTQAI+ young people have more struggles with institutional systems and higher risk factors for depression.** LGBTQAI+ youth had been absent without permission from their foster care placements for significantly more days than non-LGBTQAI+ youth; they also were more likely to have been homeless and to have had negative confrontations with the police. In addition, LGBTQAI+ youth were more likely to have been criticized for behaving and for dressing too much like the other sex. These risk factors were associated with differences in well-being: LGBTQAI+ youth reported to experience more depressive symptoms and fewer feelings of optimism compared to non-LGBTQAI+ youth.

B. ACS WORK TO DATE SUPPORTING LGBTQAI+ YOUTH IN FOSTER CARE

ACS recognizes the unique needs of LGBTQAI+ youth through specific policies and programmatic requirements, and by providing targeted services designed to achieve positive safety, permanency, and well-being outcomes for these young people and their families. ACS has a demonstrated history of commitment to equity practices and continues to strengthen policies and practices aimed at improving the overall health and well-being of LGBTQAI+ young people in its care. This section describes ACS' work to date supporting LGBTQAI+ youth in foster care.

POLICY

The first ACS full time LGBTQ Coordinator served in the position from 2008-2012 and worked with a committee that promulgated the agency's first policies in this area. In 2012, ACS established the Office of LGBTQ Policy and Practice to support the development and implementation of affirming policies, training curriculum, best practices for LGBTQ youth in care. Also in 2012, ACS adopted an agency wide LGBTQAI+ youth and families in care policy. The policy requires that LGBTQAI+ youth have access to gender appropriate bedrooms/bathrooms and gender appropriate grooming/hygiene products. Contracted provider agencies must recruit and support foster homes that are LGBTQAI+ affirming. The policy provides workers with engagement best practices to family interaction and maintaining youth confidentiality.

Often times, systems- involved LGBTQAI+ young people enter foster care with histories of physical abuse, bullying, conversion therapy, and racial oppression. The resulting traumas can result in youth adopting survival mechanisms that are self-harming. As per ACS policy, LGBTQAI+ identified youth entering New York City's foster care system are educated about their rights in care. This includes the ACS Non-Medicaid Reimbursable Policy which states all youth are entitled to health care that Medicaid will not pay for that includes hormone therapy and gender affirming surgeries. In addition, the ACS Foster Care Sexual Reproductive Health Policy declares that all LGBTQAI+ youth have the right to confidential sexual and reproductive health information and services that include HIV/STI testing, access to PrEP/PEP services, and OB/GYN care. Culturally responsive mental health services are critical to supporting youth in care. As standard practice, ACS and its contracted provider agencies refer youth to culturally responsive mental health providers.

OFFICE OF EQUITY STRATEGIES

In 2017, ACS created an Office of Equity Strategies, which works directly to identify strategies to reduce inequities, implicit bias and other factors that contribute to disparate outcomes for the families and communities served by ACS. Within this office, ACS has a dedicated LGBTQ Equity Strategies Director who is responsible for policy, best practices and guidance for serving LGBTQAI+ children, youth and families engaged with ACS, and helping make sure that the agency treats all youth and families equitably and compassionately regardless of sexual orientation or gender expression. The Office Equity Strategies also investigates allegations of LGBTQAI+ discriminatory practices and implements corrective actions as appropriate.

STAFF TRAINING AND RESOURCES

ACS staff are held to the highest standards for non-discriminatory practices and culturally competent engagement of LGBTQAI+ youth. To support ACS staff and contracted provider agencies, ACS provides trainings and knowledge tools on policies and best practices. ACS requires all ACS staff to take an implicit bias training as well as a one-day LGBTQAI+ training. Staff are also strongly encouraged to take the Transgender and Gender Non-Binary (TGNB) training. ACS staff are expected to have a fundamental knowledge of the ACS LGBTQAI+ youth in care policy. ACS also provides a version of these trainings to new ACS Child Protective Specialists (CPS) who conduct child abuse and neglect investigations and new Youth Development Specialists (YDS) who work in the juvenile justice system as part of their onboarding, in addition to offering refresher trainings to existing CPS and YDS staff.

ACS also requires contracted foster care agencies to provide their staff with a one-day LGBTQAI+ training and offers a one-day TGNB training, which is strongly encouraged. Both trainings use a train-the-trainer model.

Contracted foster care agencies are mandated to submit annual training data on LGBTQAI+/TGNB trainings for staff and foster parents to ACS. All foster care provider agencies are mandated to assign a staff person to be their designated LGBTQAI+/TGNB training liaison. This group informs ACS of emerging training needs and acts as a communication hub for issues LGBTQAI+ youth in care are experiencing.

ACS developed the Safe and Respected Guide, which provides best practices for direct service workers engaging transgender and gender non-binary youth involved in ACS systems. The guide is disseminated to ACS staff and foster care agencies.

ACS funds, in partnership with the NYC Unity Project, [The Center](#) and the [Gender and Family Project](#) at the Ackerman Institute for the Family to provide trainings to clinicians that work with youth and families in ACS systems. Both trainings provide clinicians with tools and techniques for working LGBTQAI+/TGNB youth and their families.

Lastly, ACS is always seeking and exploring ways to improve outcomes for youth and families, as well as opportunities to improve agency policies, practices and procedures. It was in this context that ACS sought this survey to better understand LGBTQAI+ youth experiences in the foster care system and then develop action steps to address the findings.

C. ACS LGBTQAI+ ACTION PLAN

As noted above, ACS sought to conduct this important survey because we recognized that we and the field needed more comprehensive information about LGBTQAI+ youth in foster care in order to be most effective. Youth who shared their experiences demonstrated that systems need to do better and be better for the mental, emotional, physical well-being of LGBTQAI+ youth in care. The survey demonstrates the extent to which LGBTQAI+ youth are disproportionate to LGBTQAI+ youth in New York City overall. It also documents the disparities between LGBTQAI+ youth in care and non-LGBTQAI+ youth in care in their experiences and outcomes. Disparities that African-American and Latinx youth and families experience in the child welfare system are exacerbated when youth do not conform to traditional norms of sexual orientation and gender expression.

ACS is committed to implementing targeted strategies that respond to the survey findings in order to improve the experiences and outcomes of LGBTQAI+ youth in care. This section describes ACS' goals moving forward and identifies our specific action plan.

GOALS

Improving outcomes and increasing equity for LGBTQAI+ youth in foster care requires a focus on three systemwide goals:

- Decrease unnecessary entries of LGBTQAI+ youth into foster care with a focus on addressing barriers to inclusion and equity to reduce disproportionate entries based on race and ethnicity.
- Increase placements with relatives and foster families/reduce placements in group homes and institution for LGBTQAI+ youth who must enter foster care.
- Improve well-being of LGBTQAI+ youth in foster care, regardless of race or ethnicity, including, for example, measures of placement stability; positive, supportive connections with parents and family members; reports of depression and permanency outcomes.

ACTION STEPS

ACS is currently taking steps outlined in its agency-wide Equity Action Plan that will support our goals to reduce racial disproportionality in foster care. The Plan includes actions to reduce disproportionate entries based on race and ethnicity, for example, and to increase efforts to place youth with kin. These efforts are intended to limit system involvement for all youth of color, including LGBTQAI+ youth.

To improve the experiences and outcomes for LGBTQAI+ youth in foster care, ACS is implementing additional actions. These actions will be informed by anti-racist, culturally competent, trauma informed, and strengths-based perspectives.

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- 1. ACS will broadly share the survey findings and leverage this research to inform stakeholders of LGBTQAI+ youth experiences and make systemic changes.** ACS will distribute the findings of this survey both nationally and locally to providers, legal representatives, ACS staff, foundations, systems involved youth, and other stakeholders as a way to educate New Yorkers and collaborate on implementing these recommendations aimed at improving the experiences of LGBTQAI+ youth in our care.
 - 2. ACS is updating the current LGBTQAI+ Youth in Care Policy.** The Office of Equity Strategies is working with ACS staff, provider agencies, stakeholders, advocates, and youth to ensure the newest version is comprehensive, data informed, intersectional in its lens, and culturally responsive to the needs of youth. The results of the survey will help to inform language, best practices, and protocol stated in the new version of the LGBTQ+ Youth in Care Policy.
 - 3. ACS is revising and strengthening staff training on LGBTQAI+ issues.** For the past six months, the ACS Office of Training and Workforce Development has been working with the Office of Equity Strategies to enhance our approach to training around LGBTQAI+ issues. We are now developing a combined training merging the LGBTQAI+ and TGNB training into one two-day training. This two-day training will be provided directly to all contracted provider agency staff, Child Protection Specialists, and Youth Development Specialists, instead of a train-the-trainer model, and will be required for all staff. In the meantime, the ACS Workforce Institute has developed a virtual training refresher, currently available to all staff. This training is serving as a placeholder until the combined course noted above is available and ensures that staff receive support in work with LGBTQAI+ youth even while working remotely during the COVID-19 pandemic. The new enhanced trainings will take an intersectional approach also looking at the confluence of race, ethnicity, and culture.
 - 4. ACS is increasing services and supports for LGBTQAI+ youth in foster care.** ACS recognizes that additional targeted therapeutic capacity is needed to build higher levels of support for youth and families. ACS plans to increase its support with more robust therapeutic services for foster parents/kinship caregivers by expanding work with the Ackerman Institute. Youth, parents, kinship caretakers, and foster parents referred for family therapy will also have access to other services that Ackerman's Gender Family Project (GFP) offers, including support groups for the whole family. GFP has offered virtual groups during the COVID-19 pandemic with separate spaces for youth and caregivers to gather with peers as they navigate the challenges of moving through a cis-normative culture. GFP will also offer an additional group available only to foster care parents so that their unique concerns can be addressed in a communal setting. ACS is also expanding training services for foster parents.
 - 5. ACS will form a dedicated LGBTQAI+ Committee as part of the ACS Youth Leadership Council.** This group of youth in care will act as representatives for other LGBTQAI+ youth in ACS care as it relates to practices and policies. The Council will meet with ACS staff to discuss emerging needs.
 - 6. ACS will work with foster care providers to expand recruitment targeting foster parents who would be interested in fostering the LGBTQAI+ youth population and to expand foster parent training for serving these young people.** ACS will utilize best practices for recruitment, training and support, and establish and track measurable goals for placing LGBTQAI+ youth with affirming foster families. ACS will work with Planned Parenthood of New York create and implement a relevant and engaging training program for foster parents to help them gain supportive knowledge, attitudes, and skills that will allow them to build affirming spaces for the LGBTQAI+ youth in their care.

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7. **ACS will be conducting further studies moving forward, including adding questions pertaining to Sexual Orientation and Gender Identity and Expression (SOGIE) to its annual Youth Experience Survey** and conducting a needs assessment for LGBTQAI+ youth in foster care that will measure and quantify specific needs, gaps, and resources needed to ensure LGBTQAI+ youth in the ACS systems have better outcomes in placement(s) and in aftercare.
 8. **ACS will advocate for, support and protect the implementation of LGBTQAI+ affirming policies and practices.** ACS will create opportunities to share its experiences and practice with other local jurisdictions. ACS will also collaborate with national advocacy organizations to protect and affirm LGBTQAI+ youth in foster care.

APPENDIX A:

Executive Summary¹: A Survey of the Experiences and Well-Being of Sexual and Gender Diverse Youth in Foster Care in New York City

This is the first survey to report on the proportion of youth in foster care in New York City who are LGBTQAI+ and differences in their experiences compared to those of youth who are not LGBTQAI+. The acronym LGBTQAI+ comprises persons who because of their gender and sexuality have specific needs and are treated differently than other persons, which might negatively affect their well-being. The letters stand for lesbian, gay, bisexual, transgender, queer or questioning, agender or asexual, and intersex.

This survey was initiated by the New York City Administration for Children's Services (ACS), which is committed to serving youth in foster care that are LGBTQAI+. The survey was implemented with generous support from the Annie E. Casey Foundation, NYC Unity Project and the Redlich Horwitz Foundation. This report provides the detailed findings from this survey. A separate document [HYPERLINK](#) produced by ACS identifies the steps taken to date to provide services and supports to LGBTQAI+ youth and plans to move forward in response to the survey findings.

ACCORDING TO THE SURVEY:

- LGBTQAI+ youth are overrepresented in foster care. More than one out of three youths (34.1%), ages 13-20, in New York City foster care is LGBTQAI+. This is substantially higher than the proportion of LGBTQAI+ youth in the general population.
- LGBTQAI+ youth in foster care are more frequently youth of color. With almost three quarters of the sample identifying as African American and almost a third identifying as Latinx, the sample reflects the population of New York City youth in foster care, in which people of color are disproportionately represented. Within this already racially and ethnically disproportionate group, LGBTQAI+ youth are less likely to be white and more likely to be Latinx.

1 The full report is available [here](#).

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- The placements of LGBTQAI+ youth in foster care differ from those of non-LGBTQAI+ youth in foster care. Compared to non-LGBTQAI+ youth, LGBTQAI+ youth were more likely to be placed in group homes or residential care and less likely to be placed in family-based care. LGBTQAI+ youth were less satisfied with their current placement. LGBTQAI+ youth were more likely to say that they experienced little to no control over their lives in foster care and to have heard staff or other people refer to them as “hard to place.”
 - The family experiences of LGBTQAI+ youth in foster care can be challenging. While LGBTQAI+ youth were more likely to be in touch with family members, they saw these family members less frequently. Furthermore, LGBTQAI+ youth experienced family members as less supportive than non-LGBTQAI+ youth did. Fewer LGBTQAI+ youth reported that there were adults in their lives, other than family members, who they could rely on and by whom they felt supported.
 - LGBTQAI+ young people have more struggles with institutional systems and higher risk factors for depression. LGBTQAI+ youth had been absent without permission from their foster care placements for significantly more days than non-LGBTQAI+ youth; they also were more likely to have been homeless and to have had negative confrontations with the police. In addition, LGBTQAI+ youth were more likely to have been criticized for behaving and for dressing too much like the other sex. These risk factors were associated with differences in well-being: LGBTQAI+ youth reported to experience more depressive symptoms and fewer feelings of optimism compared to non-LGBTQAI+ youth.

SURVEY METHODOLOGY

The survey aimed to determine the proportion of LGBTQAI+ youth in foster care in New York City and whether the experiences of LGBTQAI+ youth in foster care differ from those of youth who are not LGBTQAI+.

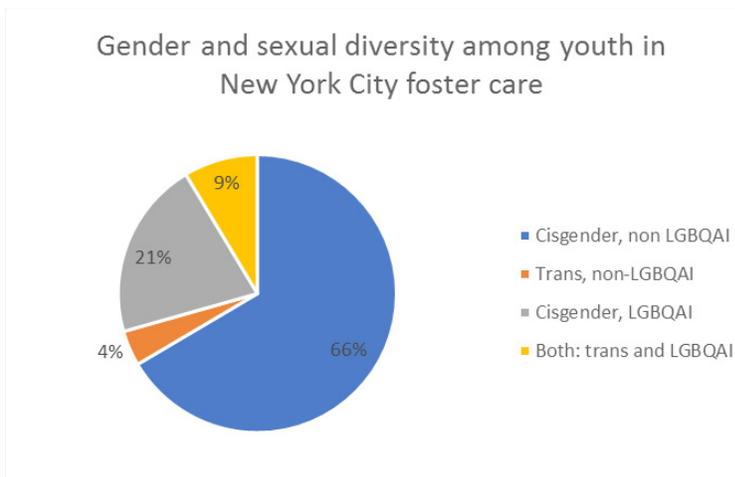
A telephone survey was conducted among youth, 13 to 21 years old, who were in foster care in New York City at the time of the survey (September – November 2019). The survey questionnaire included questions about the sexual and gender status, demographic characteristics, characteristics of the youth’s placement in foster care, the youth’s social connections, and their well-being. Collected data about youths’ sexual and gender status were linked to ACS administrative data, to further explore differences between LGBTQAI+ youth and non-LGBTQAI+ youth in foster care.

The survey had a very successful response rate. Out of 2,397 youths, a total of 659 participated in the survey. The response rate is 69.7% (the number of completed interviews divided by the number of completed interviews plus the number of youth who refused to participate). Considering the total number of (likely) eligible youth who could have participated, the response rate is 38.7%. Among comparable studies, this response rate is high.² In the analyses, data were weighted to ensure that the sample optimally reflects the foster care population.

² Kennedy & Hartig (2019)

SEXUALITY AND GENDER STATUS

The survey sought information about sexual orientation and gender identity based on self-report. For gender, the majority of the young people in New York City foster care considered themselves cisgender (that is, either male or female and corresponding with the sex they were assigned at birth). About one out of eight young people system was trans or gender nonbinary. This includes trans(gender) youth, and gender non-binary, gender fluid, or gender nonconforming youth, and intersex youth. For sexuality, close to a third of the youth care can be considered LGBTQAI+ (30.1%). This includes youth who reported any same-sex attraction or questioned such attraction, and youth who identified as bi- or pansexual, lesbian, gay, or questioning. Combining the two categories, the proportion of LGBTQAI+ youth is 34.1%. The trans and LGBTQAI categories are not completely overlapping. These categories did not include the two persons who reported to be assigned intersex at birth.



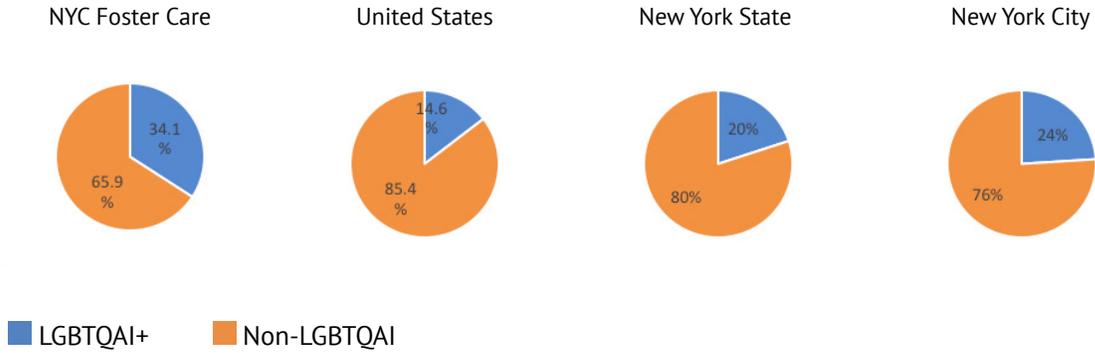
As stated above, LGBTQAI+ youth are overrepresented among the foster care population in New York City. Over a third of the youth (34.1%) could be classified as LGBTQAI+. This includes youth who belong to the trans spectrum (13.2% of the total; including transgender, gender non-binary, gender fluid, or gender nonconforming youth, and intersex youth) and youth who reported any same-sex attraction or questioned such attraction, or who identified as bi- or pansexual, lesbian, gay, or questioning (30.1% of the total group). This proportion is substantially higher than the proportion of LGBTQAI+ youth in the general population. Nationally this proportion is 14.6% and for New York State and New York City these proportions are 20% and 24%, respectively³ (differences in survey design impede absolute comparisons).

This disproportionately high number of LGBTQAI+ youth in foster care is confirmed by findings from similar studies.⁴ However, it should be noted that it is unlikely that being in foster care promotes becoming LGBTQAI+ but rather being LGBTQAI+ plays a role in entering foster care.

3 Kann et al. (2018), Yoon et al. (2019).

4 Baams, Wilson, & Russell (2019), Dettlaff & Washburn (2018), Fish, Baams, Wojciak, & Russell (2019), Mountz (2011), Sullivan (1996), Wilson & Kastanis (2015), and Winter (2013).

The chart below compares the proportion of LGBTQAI+ youth in New York City foster care, with the proportion of youth in New York City, New York State, and the United States of America in general.



PLACEMENT CHARACTERISTICS

LGBTQAI+ youth entered foster care on average at an older age than non-LGBTQAI+ youth (12.0 versus 11.0 years old, respectively; the youths' self-report was confirmed by administrative data). Although the number of spells did not differ between LGBTQAI+ and non-LGBTQAI+ youth, administrative data indicate that in their current spell, LGBTQAI+ youth had on average more placements than non-LGBTQAI+ youth.

LGBTQAI+ youth were more likely to be placed in group homes and residential care and less likely in family-based care compared to non-LGBTQAI+ youth: 29.3% of the LGBTQAI+ youth versus 20.8% of the non-LGBTQAI+ youth were in group homes or residential care and 70.1% of the LGBTQAI+ youth versus 79.2% of the non-LGBTQAI+ youth were in family-based care. Among youth in family-based care, LGBTQAI+ youth were as likely as non-LGBTQAI+ youth to live with a family member or relative (31.0%).

EXPERIENCES OF FOSTER CARE

LGBTQAI+ youth were less satisfied with their current placement than non-LGBTQAI+ youth. LGBTQAI+ youth were more likely to say that they experienced little to no control over their lives in foster care (32.5% versus 21.3% among non-LGBTQAI+ youth). LGBTQAI+ youth more frequently heard staff or other people refer to them as "hard to place" (30.6% versus 23.8% among non-LGBTQAI+ youth). Administrative data showed that the mean number of absent days without permission was significantly higher for LGBTQAI+ youth than for non-LGBTQAI+ youth (these numbers did not differ for hospital-related and other absences).

SOCIAL CONNECTIONS

Although LGBTQAI+ youth were more likely to be in touch with family than non-LGBTQAI+ youth (87.7% versus 82.7%), LGBTQAI+ youth saw their family less frequent and experienced the relationship with family as less supportive than non-LGBTQAI+ youth (both among youth in touch with family members). Furthermore, LGBTQAI+ youth were less likely than non-LGBTQAI+ youth to have adults in their lives, other than family members, who they could rely on and who they felt supported by (78.8% versus 83.5%).

RISK FACTORS FOR WELL-BEING

LGBTQAI+ youth were more likely than non-LGBTQAI+ youth to have experiences that are risk factors for their well-being. These experiences include having been homeless and negative encounters with the police. 23.3% of the LGBTQAI+ youth reported to have been homeless versus 19.5% of the non-LGBTQAI+ youth. 24.1% of the LGBTQAI+ youth reported negative encounters with the police versus 17.5% of the non-LGBTQAI+ youth. Furthermore, LGBTQAI+ youth reported more frequently than non-LGBTQAI+ youth to have been criticized for dressing too feminine/too masculine (20.3% versus 4.9%, respectively) and to behave too much like a person of the other sex (22.0% versus 5.0%, respectively).

WELL-BEING

In terms of their well-being, LGBTQAI+ youth reported more frequently than non-LGBTQAI+ youth that they recently had been bothered by little interest or pleasure in doing things (51.8% versus 31.5%) and by feeling down, depressed, or hopeless (31.5% versus 27.6%). In addition, LGBTQAI+ youth were less hopeful and more pessimistic than non-LGBTQAI+ youth about their future.

IMPLICATIONS

The health disparities in relation to the foster care youth's sexual and gender status confirm and complement findings from other studies among youth in general⁵ as well as among youth in foster care.⁶ Although some observed health disparities were bigger than others, these disparities form a pattern and warrant ongoing policy and programming activities to better accommodate the needs of LGBTQAI+ youth in foster care, and to promote their safety, permanency, and well-being. LGBTQAI+ youth should have access to competent and appropriate support in an environment that validates gender and sexual diversity.

This requires that all parties that interact with foster care youth, including social workers, foster parents, and institutional staff, understand gender and sexual diversity and related issues. They should be enabled to appropriately interact with LGBTQAI+ youth and address their needs.

5 Bouris et al. (2010), D'Augelli, Hershberger, & Pilkington (1998), Eisenberg & Resnick (2006), McLaughlin, Hatzenbuehler, Xuan, & Conron (2012), Needham & Austin (2010), Pearson & Wilkinson (2013), Russell, Seif, & Truong (2001), Ryan, Huebner, Diaz, & Sanchez (2009), Saewyc et al. (2006, 2009), and Ueno (2005).

6 Baams et al. (2019), Jacobs & Freundlich (2006), Wilson and Kastanis (2015), and Winter (2013).

The meaningful differences observed here between LGBTQAI+ and non-LGBTQAI+ youth require further, in-depth exploration of LGBTQAI+ youth's experiences, including their overrepresentation, the way they are treated on an interpersonal level by peers and adults, as well as structurally by the foster care system; the youth's relationships with family and supportive adults; and resources, such as resiliency, that LGBTQAI+ youth employ to negotiate their trajectory through foster care. Understanding of the of LGBTQAI+ youth's experiences could further be strengthened by considering how they are shaped by intersecting factors such as gender, sexuality, race and ethnicity, and socio-economic status.



