Supporting and Serving Lesbian, Gay, Bisexual, Transgender and Queer or Questioning Youth

Lesbian, Gay, Bisexual, Transgender and Queer or Questioning (LGBTQ) youth face a variety of significant barriers in accessing culturally competent support and services from communities and institutions. LGBTQ youth across the country continue to face discrimination, bullying, violence and a basic lack of understanding from school personnel, their peers, social service and medical providers, religious communities and their own families. Los Angeles County is not alone in facing challenges to serving LGBTQ youth.

Some LGBTQ youth are rejected by their families or caretakers and run a higher risk of living in traumatic or toxic environments. For LGBTQ youth in the child welfare or probation systems, stability is often a significant problem. Many youth experience multiple placements and many ultimately face homelessness. Studies show that LGBTQ youth rejected by their families often have lower self-esteem and a greater chance of experiencing health and mental health problems into adulthood. They experience a
higher risk of using illegal drugs, contracting HIV and other STDs, and higher levels of depression and attempted suicide.

LGBTQ youth are also overrepresented in our child welfare system. As part of a five-year, federal grant awarded to the Los Angeles LGBT Center, the Williams Institute at UCLA and Holarchy Consulting conducted a landmark study in 2014 of 786 randomly sampled foster youth ages 12 to 21. The findings show that 19 percent, nearly one in five, of foster youth in Los Angeles County identify as LGBTQ, a much higher percentage than youth who identify as LGBTQ who are not in foster care. Given this overrepresentation, it is even more problematic to find very little focus on this population within the child welfare system. We know from the Williams-Holarchy study, that LGBTQ youth have a higher than average number of foster care placements, and a higher risk of being hospitalized or becoming homeless at some point in their lives. Unfortunately, many LGBTQ youth in foster care also experience further harassment or violence after they are placed in out-of-home care.

In recognition of the study’s findings, the County took steps to address the complex needs of our LGBTQ youth. In October of 2015, the Board directed Khush Cooper & Associates to conduct a study to assess the overrepresentation of LGBTQ youth in all County-related systems. The report, the *Los Angeles County LGBTQ Youth Preparedness Scan*, found greatly disparate policies and training protocols across the County regarding LGBTQ youth, and a need for more culturally competent and consistent education and training for staff on LGBTQ youth issues.

Our County’s LGBTQ youth are some of the most vulnerable and traumatized youth in our care. These youth deserve tailored services, well-trained and culturally competent staff and mental health professionals, stable housing, affirming caretakers,
and focused attention from all the County Departments that serve them. It is essential that we support these youth and create an environment where they can develop the strength and confidence they need to become successful adults. For LGBTQ youth who are not able to be linked to family or stable placements, or, for those who have aged out of the child welfare or juvenile justice systems, it is incumbent on us to provide supportive programs to help them to transition into adulthood.

While the County has begun efforts to develop specialized LGBTQ training and programs, now is the time for us to insist upon building on these efforts so that the County can systemically address the needs of all the LGBTQ youth in our care.

WE, THEREFORE, MOVE that the Board of Supervisors direct the Department of Children and Family Services, the Probation Department, the Department of Mental Health, the Department of Public Health and the Department of Health Services to report back to the Board in 90 days with the following:

1. A comprehensive inventory and assessment of existing services, programs and training within their Departments that directly assist LGBTQ youth;
2. Information about documented outcomes of existing services provided to LGBTQ youth, including whether these services are meeting the needs of this population and whether additional services or programs are needed;
3. Recommendations on whether a specialized unit or section within their Department is needed to focus on the needs of LGBTQ youth;
4. Information about best practices and innovative casework/treatment models that best meet the needs of these youth;
5. Recommendations for improving training and support provided to County staff, contractors, relative caregivers, and foster families who have direct
contact with, care for, or provide services to, LGBTQ youth that identifies, and prohibits anti-LGBTQ discrimination and harassment of youth, and foster and adopting families, including, but not limited to, physical violence, verbal harassment, imposition of personal beliefs, and denial of services, on the basis of actual or perceived sexual orientation, gender identity, and gender expression;

6. Information on existing data collected related to this population and recommendations for how data collection across Departments can be improved, including health and mental health services, family finding and foster family recruitment, placement, discharge and outcomes data;

7. Information that describes current foster family recruitment and family finding efforts targeted at locating affirming placements, as well as specialized recruitment efforts which the County may not have considered or utilized and recommendations for improving existing recruitment and family finding efforts; and

8. Recommendations for improving and expanding residential and housing programs needed for LGBTQ youth including child welfare-involved, juvenile justice-involved, and homeless youth.