Over-represented and Under-protected: The Rhetorical Debility of LGBTQ+ Foster Youths in Texas

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Abstract

The Texas Foster Care system is failing an over-represented population: LGBTQ+ foster youths. LGBTQ+ foster youths are disproportionately more likely to be exposed to violence in their time in foster care than are their peers. This violence includes fights in school and discrimination. LGBTQ+ youths in foster care are more likely to be subjected to conversion therapy and have higher suicidality rates. LGBTQ+ foster youths' physical and mental health are particularly vulnerable when in the foster-care system. Texas laws have lacked protections for LGBTQ+ foster youths yet have passed laws protecting child-welfare providers from having to care for LGBTQ+ foster youths. Addressing the systems of rhetorical debility implemented by the Texas Foster Care system stands to resolve the issue. Texas laws like HB 3859 exemplify how the systems of debility within foster care benefit religious foster families while silencing LGBTQ+ foster youths.

Keywords: LGBTQ+ Issues, Foster Care, Child Welfare, Rhetorical Theory, Rhetorical Debility, Disability Studies, Texas Policy

The Impact of Debility

Rhetorical debility in the Texas Foster Care system silences an over-represented population in foster care: LGBTQ+ youths. The Texas Foster Care system could stand to lose its funding or reputation as awareness grows of the legal, debilitating, and discriminatory practices LGBTQ+ youths experience within the system. Furthermore, the Texas Foster Care system could lose the trust of potential foster families and potential foster youths. Rhetorical debility endangers the Texas Foster Care system as well as those it is supposed to care for. This paper will discuss what discriminatory practices LGBTQ+ youths are presently vulnerable in the Texas Foster Care system, why these youths need unique legal protections, and how these issues of discrimination are linked to a system of rhetorical debility.

Context & Background

Foster Care's Historical Context

From its beginning, foster care has been tasked with giving children a proper family life. However, what is included in a "proper" or ideal family life? Furthermore, what is excluded? Catherine E. Rymph records in her book, *Raising Government Children*: *A History of Foster Care and the American Welfare State*, the origins of foster care that help with understanding how these questions were initially answered, which can inform our analysis of the current foster-care system.

One of the first child-welfare systems in America was the "'orphan trains'" (Rymph, p. 22) of the mid-1800s, with Charles Loring Brace being titled, the "'father'" of foster care (Lindsey, *Welfare of Children*, p. 13, as cited in Rymph, p. 22). Although not the inventor, Brace popularized the "'placing out' program, better known today as the 'orphan trains,'" where able-bodied, impoverished children from streets of cities were sent to live, "often permanently," with

rural families in nearby states (Rymph, p. 20). Children were still expected to work for their new families, via household chores, and were not bound by contract, hopefully transforming children into productive citizens (Rymph, p. 20). However, the way Brace chose children displays a sense of what his idea of a "normal family life" should look like.

While some children were placed out because of abandonment or poverty, "Brace also sought out children whose families appeared to be…culturally problematic…" (Rymph, p. 20). In other words, Brace decided which children were most in need of the placing-out program by looking at the child's cultural influences. The cultural influences that Brace thought made children most in-need were the "influences of those urban, immigrant, impoverished (and often Catholic) families…" (Rymph, p. 20-21). Brace's views of what a proper (and improper) family's culture informed his method of determining which children were most in need of his program. Brace's culturally biased view of what children were most in need is an example of how programs can target certain populations based on a view of what an ideal family for foster children should be like. There were also times when the ideal family changed to fit the needs of a child.

Another aspect of foster care's origin is society's view of what was considered care for certain children. In 1958, African American social service specialist working for the Children's Bureau, Annie Lee Sandusky, wrote about how "'conditions that may be deplorable'" for some "'are all right for others,'" particularly when "'Indian children, Negro children, etc.,'" were concerned (Sandusky, "Comments Preliminary Draft II Standards for Protective Services," 1958, box 72, as cited in Rymph, p. 124). While the distinction between appropriate and inappropriate homes was along racial, ethnic lines, the distinction serves as an example of how home availability changed, depending on the child. Another example: "'[p]erhaps, proposed an

employee of the Oregon State Public Welfare Department, a foster home headed by a single woman could be acceptable as a home for a 'mentally deficient child'... so long as the child was of 'sufficiently low mentality so that the absence of a father figure could not be vital. For the vast majority of children not deemed 'deficient,' though, the presence of a father was essential." The emphasis on having a foster father was de-emphasized when regarding a "mentally deficient child" (Monroe County Department of Public Welfare and Oregon State Public Welfare Commission, 1958, box 62, as cited in Rymph, p. 104). This change of emphasis depending on a deficiency in the child is yet another example of how, with regard to the child, foster care would change what an ideal family could look like. But foster care has changed since the late 1950s sources above. Today, foster care's role is much more complex.

Some view foster care as a responsibility to the welfare of children in need. Among other definitions of foster care, Rymph defines it as a "*public obligation*…as a means for society to fulfill its responsibilities (moral and legal) to ensure the welfare of dependent children" (Rymph, p. 4). In essence, Rymph is saying foster care is society's responsibility to create a safety net that "ensure[s] the welfare" of society's struggling children (p. 4). The definition also speaks to the intentions of foster care: ensuring the welfare of children in need.

Foster care's responsibility to child welfare can also take many forms, with different intentions, as illustrated in the comparison of multiple states' foster care systems. Reasons for variance in foster care systems can include the provider, the state laws, or the interpretations of what care means. In the case of Brace, biased views of what was problematic affected the focus of the system. Today, different states have slight variations in how their foster-care system works compared to those in other states. Massachusetts has welfare programs that focus on keeping sibling groups together whereas Minnesota emphasizes community-based care (Youth & Family

Programs, n.d.). California has many agencies and prioritizes the accessibility of child welfare processes (Youth & Family Programs, n.d.).

The Intent of Today's Texas Foster Care System

As this paper will focus on the Texas foster care system, it is important to understand Texas' specific foster care systems' intentions. The Texas Education Agency views foster care as a service that, "[w]hen children can't live safely at home and an appropriate non-custodial parent, relative, or close family friend is currently unable or unwilling to care for them, the court can give temporary legal possession to CPS and that agency temporarily places these children in foster care" (Texas Education Agency, n.d., p. 32). Basically, this interpretation of foster care's purpose intends to give children safe homes if they do not currently have access to one. To determine the safety of homes, Texas child welfare services considers the likelihood of the child to be "in immediate danger of serious harm or maltreatment, accounting as well for "factors influencing child vulnerability," including age, access to a support network, mental health, physical health, and other factors (Child Welfare Information Gateway, 2021).

Other sources support the need to consider possible risks for children and their vulnerability; however, they also reference the importance of meeting children's future needs. Texas Foster Care and Adoption Services, in partnership with diverse families and communities, claims to strive to meet the needs of children in a professional, comprehensive, highly ethical and caring manner," with a core value being the abatement of "potential risk[s] to children in our care" (Texas Foster Care and Adoption Services, n.d.). This definition of foster care's purpose focuses on keeping the children safe, particularly free from risks. Texas Foster Care and Adoption Services' definition is similar to the Texas child welfare services' focus on safety from the likelihood of the child to be "in immediate danger of serious harm" (Child Welfare

Information Gateway, 2021). Moreover, Texas Foster Care and Adoption Services (n.d.) states that it is "committed to providing a safe and [nurturing] environment" to establish a "foundation for lifelong success" for foster children. Texas foster care focuses on two factors to determine when foster care is needed and from what foster care should provide protection: a child's risk of harm and their vulnerability to other risks. Also, Texas Foster Care and Adoption Services alludes to the importance of children's future needs, a factor that is covered in the "best interest" standard.

Another popular metric when discussing what care means is the "best interest of the child," which includes the child's needs in the present, in addition to their needs in the future. According to a research paper by the Texas Public Policy Foundation, the "best interest of the child" standard is always the "primary consideration of the court in determining the issues of conservatorship and possession of and access to the child" (Brown et al., 2022, p. 1). The "best interest" standard is not clearly defined, and so the Texas Supreme Court outlined–through the *Holley factors*—nine key factors for judges to "consider when faced with best interest decisions" that are not exhaustive. These factors include the desires of the child, in addition to the child's emotional and physical needs now and in the future (Brown et al., 2022, p. 3). This definition of care emphasizes the intention of meeting not only foster children's current needs, but also their needs in the future.

Considering the previous factors, there are four parts to how the Texas foster care system protects and provides for foster children: a child's risk of harm, the child's vulnerability, the child's current health needs, and their future needs. Foster care is a safety net that can provide a certain moral, financial aid to children in need. While these goals are noble, the reality of the situation is not as simple as it seems. Not every foster child is given a safe environment. Not

every foster child has their current, nor future needs met. Not every child is given access to helpful programs but are sometimes subjected to harmful programs. These failures of the foster care system are especially common for LGBTQ+ identifying youth.

Challenges Faced by LGBTQ+ Youths in Foster Care

Over-representation AND invisibility?

Before looking at the main issues, it is important to first understand what other issues are present: the over-representation of LGBTQ+ identifying children in the national foster care system. According to an article in *Pediatrics* journal, LGBTQ-identifying foster children make up "30.4%" of foster care youth in California […]" (Baams et al. 2019, p. 4). Stated differently, there are at *least* over a quarter of the children in California's foster care system that identify as LGBTQ+. LGBTQ+ youth make up a significant part of the foster care system.

LGBTQ+ foster youth also make up a significant portion of the national community's LGBTQ+ youth. When comparing the 30% minimum of LGBTQ+ foster youths to the "11.2% [of the national probability-based sample] of 12- to 18-year-olds [that] identified as LGB or unsure…" the *Pediatrics* journal article agrees: "there is an overrepresentation of LGBTQ youth in foster care" (Baams et al. 2019, p. 2). The over-representation of LGBTQ+ youth in the foster care system is not new, however.

Five years earlier, LGBTQ+ youth were *still* over-represented in foster care, and were *still* a significant portion of the national community's LGBTQ+ youth community. A 2014 Los Angeles foster youth survey found that 13.6% of foster youth identify as LGBQ or questioning and 5.6% identify as transgender (Wilson et al., 2014, p. 6). Combined, that is 19.2% of foster care youth identifying as LGBTQ, which is still higher than the 11.2% sample earlier. Even in 2014, a significant amount of LGBTQ+ youths were in foster care. Moreover, the 2014 survey

found “between 1.5 to 2 times as many LGBTQ youth living in foster care as LGBTQ youth estimated to be living outside of foster care,” (Wilson et al., 2014, p. 6). In 2014, LGBTQ+ youths were over-represented in foster care. Five years later, in 2019, LGBTQ+ youths are still over-represented.

While LGBTQ+ youths are over-represented in the foster care system and represent a considerable portion of the broader LGBTQ+ youth community, there is still a lack of accurate research investigating the issue. The *Pediatrics* article believes “earlier estimations of overrepresentation may reflect underestimates at the state level” (Baams et al., 2019, p. 7). This study of LGBTQ+ foster youth suggests some previous research was inaccurate, and underestimates. Even when underestimated, then, LGBTQ youth still remain over-represented in foster care. The 2014 survey also notes factors that can make research into foster youth difficult, including “barriers to disclosure…lack of data collection” and foster youth not feeling “safe identifying themselves as LGBTQ…[to] child welfare workers and caregivers (Wilson et al., 2014, p. 40). Yet again, there is evidence that previous studies may not have been completely accurate with LGBTQ+ foster youths fearing identifying themselves. Nevertheless, past and recent studies still insist there is an over-representation of LGBTQ+ youths in foster care.

The effects of foster care on LGBTQ+ youth are even more significant given the large percentage of this population who experience care in the system—a part that, despite being over-represented, is “relatively invisible” due to the issues with researching foster youths (Wilson et al., 2014, p. 7, 40). According to the 2014 survey, one reason why LGBTQ+ foster youths may “not feel safe identifying themselves as LGBTQ” to others could be because of the survey’s finding that “12% of foster youth ages 17-21 years had been kicked out of their house or run away due to their identified or perceived sexual orientation or gender identity” (Wilson et al.,

2014). Notice the word "perceived" (Wilson et al., 2014, p. 34, 40). Discrimination against LGBTQ+ identifying youths, and against those just being *seen* as such, is enough to push them out of their homes. Unfortunately, that discrimination can also follow LGBTQ+ youths into foster care.

Unique Protections for LGBTQ+ Youth

LGBTQ+ youths–already over-represented in foster care–are being put at risk of harm and are being made vulnerable to other risks. The 2014 survey says "12.9% of LGBTQ youth report being treated poorly by the foster care system, compared to 5.8% of non-LGBTQ youth" (Wilson et al., 2014, p. 5). Research on LGBTQ+ Youth suggests that LGBTQ+ foster youths are seeing a much different experience in the foster care system, than their peers. Other sources agree: LGBTQ+ foster youths are consistently facing issues more often than others. The *Pediatrics* article sheds more light on what these issues are: "LGBTQ youth in foster care reported more fights in school…victimization…and mental health problems…compared with LGBTQ youth in stable housing and heterosexual youth in foster care" (Baams et al. 2019, p. 4). LGBTQ foster youths, over-represented in foster care, have especially difficult lives. Whether compared to LGBTQ+ youths outside of foster care (in stable housing), or youths in foster care, or non-LGBTQ youth, LGBTQ+ foster youths are disproportionately facing violence while under a state care system that is meant to give youths safety. But the survey and the *Pediatrics* article are far from the only sources suggesting LGBTQ+ foster youths are particularly vulnerable when under foster care.

Other sources further detail how foster care is an especially vulnerable time for many LGBTQ+ foster youths. The Trevor Project states that "LGBTQ+ [foster youths] reported

significantly higher odds of attempting suicide compared to their peers…" (Trevor News, 2023). LGBTQ+ foster youths' time in the foster care system disproportionately raises their odds of attempting suicide. What was meant to be a social safety net has further pushed LGBTQ+ youths to attempt suicide. Moreover, the Trevor Project found that "LGBTQ+ youth in foster care were more likely to be subjected to conversion therapy—a dangerous and discredited practice that attempts to forcibly change someone's sexual orientation or gender identity" (Trevor News, 2023). Forcibly subjecting LGBTQ+ foster youths, who do not have a home, to conversion therapy is blatant, harmful discrimination; this discrimination echoes the earlier findings of the 2014 study stating that "12% of foster youth ages 17-21 years had been kicked out of their house or run away" from reasons related to their LGBTQ+ identity (Wilson et al., 2014, p. 34, 40). A significant amount of LGBTQ+ youths are going through unique challenges within the foster care system. LGBTQ+ youths face these unique challenges alongside other issues they encounter more often than their peers.

If the foster care system wants to uphold its values of keeping the youths under its care safe and minimize vulnerabilities, the foster care system needs to implement a solution. The *Pediatrics* article calls for legal protections and who needs to establish them in the quotes below:

> CONCLUSIONS: Disparities for LGBTQ youth are exacerbated when they live in foster care or unstable housing. This points to a need for protections for LGBTQ youth in care and care that is affirming of their sexual orientation and gender identity…With this study, we highlight the importance of encouraging further cross-system collaboration within county and state departments to address the unique needs of sexual and gender-minority youth. (Baams et. al, 2019, p. 1, 7)

There are two key ideas to what the *Pediatrics* article brings up. It first points to the fact that challenges to LGBTQ youths are not bettered but worsened by their time in foster care. To improve conditions for LGBTQ youth, they need *protections* while under care that affirm their sexual orientation and gender identity. Protections that necessitate county and state departments working together to write up and establish protective laws that address LGBTQ foster youths' needs. Before governments can fulfill LGBTQ+ foster youths' needs, they must first understand what these needs are.

LGBTQ+ Youths' Unique Definition of Care

Researchers have pointed out that LGBTQ+ youth need specialized care different from other children and youth in care. One article, "Adapting Community Health Worker Care Models to Advance Mental Health Services Among LGBTQ Youth," studied how LGBTQ+ youths can be cared for in such a way that promotes mental well-being. Participants of the study "expressed the need for caregivers of LGBTQ youth to receive [Community Health Worker (CHW)] support from someone who could…educate them about the LGBTQ community (e.g. language, experiences, struggles)" (Barnett et al., p. 667). Put simply, caregivers' and health workers' knowledge of the LGBTQ+ community is an important aspect of caring for LGBTQ+ youths.

To care for LGBTQ+ youths and improve their mental health, it is necessary to educate CHWs, such as those that work with foster parents, on the LGBTQ+ community's "language, experiences, [and] struggles," (Barnett et al., p. 667). As care workers are the in-between for the broader foster care system and LGBTQ+ youth's foster parents, it makes sense that they would need a better understanding of how to interact with and comfort LGBTQ+ youth**s**. Furthermore, participants also found it preferable for workers to "share the same culture but…not necessarily a

member of the LGBTQ community" because of fears that it is "'really hard for a straight person to actually sympathize with what [participants] say'" (Barnett et al., p. 667). It is often hard to explain one's unique experiences to others who have never experienced anything similar. Although LGBTQ+ foster youths do have some challenges in common with others, some of the challenges are completely unique to their situation. While some experiences are hard to understand, it is still worth trying as that can go a long way for the improvement of LGBTQ+ youths' time in foster care.

The article on "Adapting Community Health Worker Care Models to Advance Mental Health Services Among LGBTQ Youth," has shown how care for LGBTQ+ youth can take the form of social support, but there are other forms of support that can improve their lives. The same article further mentions how "[h]aving strong support models" such as those where CHWs "bridg[e]" gaps to services–such as schools, medical care, and mental health services–is "crucial given the [discriminatory] difficulties that LGBTQ youth of color face…" (Barnett et al., 2023, p. 669). Here, a support system is more than social support but includes education and medical care. But it does not have to end there. Making various services and resources more accessible can truly make a difference for LGBTQ+ foster youths of color, as well as other LGBTQ+ foster youths. In fact, the article's findings regarding the importance of a strong support model "seemed especially relevant for transgender and non-binary youth, given their needs related to receiving gender affirming medical care and addressing gender within school systems" (Barnett et al., 2023, p. 669). This suggests that within the LGBTQ+ youth community, transgender and non-binary youths have certain, also unique, definitions of care.

This suggestion, at least regarding transgender youths, is referenced earlier in the article. Transgender youths have specific definitions of care that depend upon medical resources. "In

health systems" transgender youth have difficulty accessing "gender affirming care (e.g., hormone therapy)," which is "critical to a transgender youths' sense of self and identity" (Barnett et al., p. 667). Rephrased, medical care, such as gender affirmative care, is a way of making transgender youths, and possibly other LGBTQ+ youths, feel more comfortable and supported in their identity.

Another article from the *Journal of Marriage and Family*, "Defining and measuring family: Lessons learned from LGBTQ+ people and families," gives insight on LGBTQ+ families outside of the foster care system. As sources have previously pointed out, a highly influential part of LGBTQ+ youths' lives is their caregiver(s)/parent(s), whether through pushing them from their homes (Wilson et al., 2014, p. 34, 40) or comforting them in an LGBTQ+-community-informed way (Barnett et al., p. 667). But the *Journal of Marriage and Family* article frames the role of the child as equally, or more important, for the family. The article describes how LGBTQ+ children can cause their parents to be subject to similar stigmas, concluding afterwards that kids can define families by shaping their social positionality (Fish et al., 2024, p. 1458). While this article is not directly focused on foster families, it still provides context for LGBTQ+ families and can help understand the lives of LGBTQ+ youths within foster care, or even LGBTQ+ youths' lives before they went into foster care.

The *Journal of Marriage and Family* article also discusses labels that scholars have neglected to cover in their research, both within and outside of LGBTQ+ families. The article describes how family scholarship has neglected to label whether samples are heterosexual or cisgender, and—if they did—researchers would have to consider whether their samples reflect members who are cisgender or heterosexual (c.f., Loscocco & Walzer, 2013 as cited in Fish et al., 2024, p. 1459). Similar to earlier doubts on foster care research, this article is drawing

attention to a gap in how families are classified in research. However small noticing and recording families using such terms that acknowledge LGBTQ+ families might seem, it could highlight gaps in research, emphasizing who the data concerns and who it leaves out. The call for specificity when researching so that LGBTQ+ families are included could suggest that inclusion, as well as acknowledgement, is a core value behind understanding the LGBTQ+ community and scholarship. An earlier source concerning the importance of understanding LGBTQ+ youths' difficulties (Barnett et al., p. 667) would likely agree with this conclusion: inclusivity and acknowledgement are important factors.

In conclusion, these are the factors that contribute to LGBTQ+ foster youths' unique needs: understanding how to talk to and how to comfort LGBTQ+ youths; increasing accessibility to various resources, including medical care; and the inclusivity, as well as the acknowledgement of LGBTQ+ youths.

To give LGBTQ+ youths *safe homes*, it is important to have definitions of foster care that acknowledge and include them, especially their identity. To do so in an *ethical and caring manner* (Texas Foster Care and Adoption Services, n.d.), it is important for caregivers to understand how to talk to and comfort LGBTQ+ youths. It is within foster youths' *best interest* to *establish a foundation for lifelong success* for LGBTQ+ foster youths by having foster care workers and caregivers increase the youths' accessibility to various resources, such as gender affirmative care or other medical care. But it is just as important to guarantee identity affirming protections for the over-represented LGBTQ+ foster children. As foster care is a government welfare program, such protections are required from county and state governments. With the varying foster care systems, it may be more productive to focus on one state's system and discuss the conditions of foster care for LGBTQ+ youths in that state as an example.

Legal Protections for Foster Agencies

To examine the issues of foster care facing LGBTQ+ youth more closely, this paper turns now to focus on specific ways one state, Texas, has affected this population with legal and social changes. An influential and disproportionately-LGBTQ+-foster-youth-affecting piece of Texas foster care legislation was House Bill 3859. In 2017, House Bill 3859, or HB 3859, went into effect and brought protections, but not for LGBTQ+ foster youth. HB 3859 prevents any entity or person from "discriminating" or disadvantaging a child welfare services provider on certain bases. These bases include: the provider declining to assist a person under circumstances that conflict with the provider's "sincerely held religious beliefs" as well as the provider "provid[ing] or intend[ing] to provide children under the control, care…of the provider with a religious education, including through placing the children in a private or parochial school…" (HB 3859, 2017, p. 4). In essence, the bill is saying that child welfare services providers can freely decline to work with people if doing so conflicts with their religious beliefs or provide the children under their care with a religious education without worry of consequences for doing so. On first glance, this may not seem negative. It sounds helpful to protect child welfare service providers, such as foster care providers, from "discriminat[ion]" against them because they allow people to follow their "sincerely held religious beliefs," and provide children with religious education (HB 3859, 2017, p. 4). However, it is a negative change for LGBTQ+ children.

The negative consequences of HB 3859 are clarified in a fact sheet made in conjunction with Equality Texas, Lambda Legal, and the Family Equality Council. According to the Fact Sheet, HB 3859 allows providers to, based on their religious faith, "refuse to acknowledge a transgender youth's gender or to work with them at all" without fear of adverse action for doing so (Equality Texas, Lambda Legal, and Family Equality Council, n.d., p. 2). To put it bluntly,

child welfare providers, including foster care providers, can refuse to help transgender youths (thereby refusing to help them find placements) solely because they are transgender, and these providers can continue to get government funding after doing so. Moreover, the fact sheet notes that "providers could condemn or attempt to 'convert' an LGBTQ youth" (Equality Texas, Lambda Legal, and Family Equality Council, n.d., p. 2). Based on a foster youth's identity as LGBTQ+, foster care providers can not only refuse them services but also actively denounce or try to change the youth's identities. Child welfare providers can take these actions against LGBTQ+ youths without consequence.

Note, there is no need to bar religious organizations from providing religious education, but some protections for LGBTQ+ foster youths would go a long way to ensure the youths' best interest is still foster care's priority. This could be especially comforting for LGBTQ+ foster children who have had religious trauma and fear religious placements.

Providers' attempts to change youths' identities could include "compel[ling] [their youths'] participation in religious activities" or "requir[ing] religious education or indoctrination as a mandatory component of the services they provide" (Equality Texas, Lambda Legal, and Family Equality Council, n.d., p. 2). This means foster care providers could require LGBTQ+ youths under their care to participate in and be indoctrinated into certain religious beliefs as a necessary part of their services. These are some of the discriminatory practices against LGBTQ+ foster youths that providers can engage in, again, without any consequences whatsoever. And that welfare providers can now employ these practices consequence-free has terrifying implications for over-represented LGBTQ+ foster youths.

Also worried about HB 3859 was Nick Morrow, who wrote an article on the codified discrimination. Morrow explains that "HB 3859 will forbid the state from canceling a state contract with an agency that subjected children in their care to dangerous practices such as so-called 'conversion therapy…'" (Morrow, 2017). Here, Morrow agrees with the fact sheet mentioned earlier: HB 3859 allows providers to attempt to convert the children under their care without consequences. But Morrow goes a step further with their fears, contrasting the bill with one of the purposes of child welfare.

Morrow writes that HB 3859 permits "agencies tasked by the state with caring for these children…to refuse to provide services that children in care may desperately need, or subject children to care that is contrary to a child's best interest" (Morrow, 2017). Morrow questions whether the "care" that HB 3859 allows is truly for the foster youths' benefit. In some cases, such as those where foster youths prefer the religious education of HB 3859, the bill may be a positive change. Nevertheless, it is important to acknowledge that, in some cases this may not qualify as "care" nor the foster youths' "best interest" as Morrow points out (Morrow, 2017). Morrow's fears that HB 3859 does not consider all foster youth populations are confirmed through the Trevor Project's study.

The Trevor Project's study points out foster care issues disproportionately impacting LGBTQ+ foster youths that are *legalized* by HB 3859, rather than outlawed. The study found that "LGBTQ youth in foster care were more likely to be subjected to conversion therapy" (Trevor News, 2023). This serves as a reminder: conversion therapy is still an issue and HB 3589 was not helping the issue, but rather dissolved any consequences for doing so, as long as it was based on faith. Another finding from the Trevor Project's study includes "higher rates of past conversion therapy threats (18.3%) and conversion therapy experiences (12.1%)" among

LGBTQ+, once-in-foster-care youths compared to "peers who had never been in foster care (9.1% and 4.4%, respectively)" (Trevor News, 2023). LGBTQ+ foster youths seem to be especially vulnerable when it comes to conversion therapy. And HB 3859 provided protections for the child welfare providers from certain foster youths, rather than providing much-needed protections for LGBTQ+ foster youths.

Religious Welfare Provider Care and Lacking Protections

Despite the very real issues HB 3859 is fueling, it should be acknowledged that the bill was not all negative. The bill "requires that each…Department of Family and Protective Services (DFPS) regio[n]n" must have "at least one backup provider that offers all services a religious organization may deny[...]"; however, "it includes no substantial mechanism for making such referrals" (Thompson, 2017). To some degree, there was an intention to aid those that foster care agencies denied, although, there was not enough of a system to ensure this works. While intentions might not be totally at fault, lack of thought for the best interest of those that are denied services is absolutely a deficiency for LGBTQ+ foster youths' care. The denial of services to LGBTQ+ foster youths does, however, serve to benefit religious child welfare providers' rights.

Some non-LGBTQ+ people viewed the House Bill as expanding religious rights, however, not all of the religious rights HB 3859 provided are new. HB 3859 was seen by some as a "'religious freedom' bill" because of the ability for providers to refuse services that conflict with their "sincerely held religious beliefs" (Thompson, 2017). Again, upon first glance, this seems like a positive bill. Religious education may be part of another foster youth's definition of care. However, the article notes that "[u]nder the Texas Religious Freedom Restoration Act,

religious organizations already have some of the protections the bill proposes…" (Thompson, 2017). There are a lot of issues in foster care and while HB 3859 is meant to solve issues and has brought some benefits, it has also bolstered already-augmenting issues. LGBTQ+ foster youth need legal protections as soon as possible.

To put it all together, although HB 3859 does "prohibi[t] *child welfare providers* from refusing service to someone on the basis of that person's race, ethnicity, or national origin" that is far from the whole story (Equality Texas, Lambda Legal, and Family Equality Council, n.d., p. 1). HB 3859 protects child welfare *providers* from others "discriminat[ing]" (HB 3859, 2017, p. 4) against them, but does *not* protect foster youths "from discrimination on account of sex, sexual orientation, gender identity, gender expression, marital status, religion, disability or other protected classes" (HB 3859, 2017, p. 4; Equality Texas, Lambda Legal, and Family Equality Council, n.d., p. 1). HB 3859 "allows agencies…to put discrimination," such as that of foster youths, "over the best interests of children…" (Morrow, 2017). HB 3859 has not protected LGBTQ+ foster youths but has instead allowed for their danger.

There was not always a lack of protections for foster children. In 2017, "a line [in the Foster Care Bill of Rights] requiring fair treatment regardless of a child's 'gender, gender identity, race, ethnicity, religion, national origin, disability, medical problems or sexual orientation' was removed," (Asgarian, 2022). This line provided protections for LGBTQ+ foster youths but was removed the same year HB 3859 was passed. Further, "in [the line's] stead generic language around the right for foster youth to 'be treated fairly' and 'have their religious needs met' was added" (Asgarian, 2022; Melhado & Vázquez, 2024). To put it another way, comprehensive, specific protections for LGBTQ+ foster youths were in law before they were replaced with vague protections and an emphasis on religious needs in 2017.

It is very clear that Texas LGBTQ+ foster youths have not been given the government protections that minimize likely risks (Texas Foster Care and Adoption Services, n.d.). There are *still* more challenges LGBTQ+ foster youths face in Texas.

More Challenges to LGBTQ+ Foster Youths

Foster Care May Raise Suicide Rates

Earlier in this paper, it was established that LGBTQ+ foster youths correlated with higher likelihood to have been exposed to conversion therapy and higher suicidality rates. The Trevor Project's study found that LGBTQ+ foster youths were more likely to have been subjected to conversion therapy (Trevor News, 2023). The study also found that LGBTQ+ foster youths had "significantly higher odds of attempting suicide compared to their peers…" (Trevor News, 2023). This was also mentioned earlier, but takes on a new context with a certain article the Trevor Project references in their article.

The relationship between raised suicide rates for LGBTQ+ youths who have been in the foster care system may be more causal than correlational. According to a 2018 study of U.S.-residing, LBGTQ youths (13-24 years old) by Amy E. Green PhD et al. (2020), those who have experienced SOGICE (sexual orientation or gender identity conversion efforts) were "more than twice as likely to report having attempted suicide and having multiple suicide attempts (Green et al., 2020, p. 1221). In other words, attempts to convert LGBTQ+ youths can lead to, or is often paired with a greater risk of suicidality. The study goes on to state that LGBTQ+ youths "already experienc[e] significantly greater risks for suicidality" (Green et al., 2020, p. 1221). LGBTQ+ youths are especially vulnerable to conversion efforts, efforts that recent laws, such as HB 3859 and the Foster Care Bill of Rights' once-comprehensive, now-vague language permitted. Again,

protections are needed for LGBTQ+ foster youths. Especially so, as conversion efforts are not the only discrimination these youths can go through in foster care.

LGBTQ+ Youth Discrimination in Texas Placements

An article in the *Texas Tribune* tells the stories of two transgender foster care youths that have since then aged out of the foster care system: Asher and Morningstar. Morningstar was diagnosed with bipolar disorder and depression but was given so many pills at one time, it "made her lethargic" (Melhado & Vázquez, 2024). While it is commendable that Morningstar got medical tests, diagnosis, and received medication, getting so many pills at once could put Morningstar's life in danger. The state seemed to do a good job helping care for her but missed the mark by accident. To Morningstar, and to other transgender youth, however, the frequency of such mistakes make them seem like they are not accidental.

Regarding the medication, Morningstar said "'[t]he staff didn't want to deal with us so they put us on a whole bunch of drugs, so we were quiet…" (Melhado & Vázquez, 2024). From what Morningstar is saying, this issue with being given too much medication was more intentional and more widespread—hinting at others also being given too much medication. The article mentions that "improper distribution of psychotropic drugs has been an ongoing component of a 13-year-old lawsuit against the state for violating the…rights of foster children by exposing them to…'unreasonable risk of harm'" (Melhado & Vázquez, 2024). Whether this is an intentional issue or not, it is certainly not a new issue. This quote also shows how the state is allegedly putting the children in their care at risk despite the Texas Foster Care and Adoption Services' (n.d.) core value, including the lessening of "risk" to "children in our care."

But beyond these core values, LGBTQ+ youths also have unique factors that contribute to their care, such as acknowledgement. Asher describes naming conventions, for example, as a

source of constant distress and anxiety: he frequently "found himself in situations where foster families and staff refused to call him by his preferred name or acknowledge his trans identity" (Melhado & Vázquez, 2024). The state's families and staff failed to care for Asher, particularly regarding the acknowledgement of his identity. Morningstar also struggled to find acknowledgement: "[s]taff at [over 20] placements often refused to call Morningstar by her preferred name or allow her to wear feminine clothes" (Melhado & Vázquez, 2024). More than refusing to acknowledge Morningstar, staff would interfere with her expressing her identity. But sometimes, this interference went even further. "More than once, [Morningstar] was kicked out of group homes for expressing her gender identity" (Melhado & Vázquez, 2024).

Care for LGBTQ+ youth means more than acknowledgment: it also means listening for their needs beyond the basic expectation of safety. In this aspect, too, the state failed Asher:

> "I think my biggest challenge while I was in care was being listened to and being understood. Nobody wants to listen to you," Asher said…He said that was especially true of the faith-based placements that pushed church attendance on Asher and his peers. (Melhado & Vázquez, 2024)

From what Asher says, there does not seem to be an issue with staff or families understanding LGBTQ+ youths but rather, staff or families even attempting to understand. From this quote and Morningstar's earlier quote about fearing overmedication, it is clear that, at least for some LGBTQ+ youth, there is anxiety about whether or not staff want to listen to them, whatsoever. Whether these two foster youths talked or not, others did not want to listen, and so they were silenced.

Furthermore, Asher notes that such silencing was especially prevalent in faith-based placements, which also pushed church attendance. While church attendance may be part of care

for some foster children, here, Asher is saying that it was the "faith-based placements" that "especially" refused to listen to him (Melhado & Vázquez, 2024). Because of HB 3859, religious child welfare providers can do this or worse without any consequences and that is worrying.

Again, it is important to clarify: There is no need to prevent religious placements from providing religious education, however, some protections for foster youths *from providers* would be an improvement from HB 3859's lack of consequences. Such protections would further ensure foster youth's health (of body and of mind) is prioritized, as opposed to providers prioritizing protecting themselves from the foster youths.

Foster care has the ability to help many youths, but for LGBTQ+ foster youths, it has been shown to possibly cause more issues for them. Should they grow out of the system, their situation is not much better.

Aging Out Without Support

After aging out of the foster care system, LGBTQ+ youths have no support nor a foundation to build one. Because they are not effectively prepared for life after foster care, they are left without the ability to care for themselves. As Morningstar states:

> "I wasn't given any help when I aged out. I wasn't given any phone number to help me at all," Morningstar said. "It was just, 'There you go, you're not a part of CPS anymore.'" (Melhado & Vázquez, 2024)

While it is understandable that foster care has limits on how much help it can provide, all the issues mentioned thus far are made worse as, once the youths have aged out of the protection-less foster care, they are given no support system at all. Foster care does not properly prepare LGBTQ+ foster youths for aging out of care.

Adam McCormick, an associate professor of social work at St. Edward's University in Austin, agrees. In the article about the two transgender youths' experiences, McCormick says "...for trans people who age out of the foster care system, that kind of stigma worsens an already tenuous struggle to build an adult life without the kind of familial, financial and social support upon which most young adults depend" (Melhado & Vázquez, 2024). After leaving foster care, the issues for LGBTQ+ youths *still* do not end.

McCormick further elaborated on this issue in their book. After analyzing data from the Multi-Site Evaluation of Foster Youth Programs, researchers found sexual minority youth were less likely to report a checking account, less likely to report having a vehicle, and "more than twice as likely (2.41) to experience homelessness [when compared to] heterosexual youth" (Spiegel and Simmel, as cited in McCormick, 2018, p. 131). That last statistic says twice as likely as heterosexual youth, *twice*! These are important parts of becoming independent and yet there is such a difference between LGBTQ+ foster youth and heterosexual foster youth.

Texas Laws Failing to Care and Protect LGBTQ+ Foster Youths

Despite the historical context behind foster care being discriminatory, the modern goals of the Texas Foster Care system have been well-intentioned. That said, there are many issues currently with LGBTQ+ foster youths, including: over-representation, their need for unique protections, their unique definition of care, and how recent changes in Texas legislation has left the youths more vulnerable than they already are. Afterwards, more vulnerabilities for LGBTQ+ foster youths were discussed, such as: risk of suicidality, discrimination in placements, and struggle to be independent after aging out of foster care.

Clearly, there are many struggles LGBTQ+ foster youths go through, but one issue is linked to a lot of the obstacles these youths face: rhetorical debility.

Rhetorical Debility

In the end, the failures of Texas and other systems of care to provide specialized care for the needs of LGBTQ+ youth could result in a number of actions. Social workers could recommend better training for foster parents. Medical professionals could recommend more specialized medical preparation for homes accepting LGBTQ+ youth. However, another possibility for looking at the challenges of LGBTQ+ youth is to consider the systems of labeling, naming, and responding to them. These are systems of rhetorical debility: systems that keep LGBTQ+ youth from having a rhetoric–keep them from being seen or heard as people.

Systems of rhetorical debility are defined and described in Yanar Hashlamon's 2022 article. The article defines rhetorical debility as "a process of exploitation wherein political relations render populations as arhetorical" (Hashlamon, 2022, p. 23). For those that do not know, rhetoric is, simply put, the study of persuasion. When Hashlamon uses the word "arhetorical," they are referring to the idea of someone being seen as unable to be persuasive (Hashlamon, 2022, p. 23). Here, Hashlamon calls out two key parts of rhetorical debility: "political relations" are part of the cause, with "render[ing] populations as arhetorical" as the effect (Hashlamon, 2022, p. 23).

In the foster care system, LGBTQ+ youths are a debilitated population that is silenced and made arhetorical. Earlier, Asher mentioned that their "biggest challenge" in foster care was getting others to listen to him, as "[n]obody wants to listen to you" (Melhado & Vázquez, 2024). This is a shining example of two things. Firstly, it shows that there is a population that feels like it cannot persuade others in any way, as nobody will listen to Asher. Notice, Asher is not saying there are one or two bad actors, but rather, the silencing of LGBTQ+ foster youths is a systematic, structural issue. There is a population that the foster care system is debilitating, or

rendering unable to voice convincing arguments. Secondly, the quote clarifies what population is being debilitated: LGBTQ+ foster youths. As discussed previously, Asher and Morningstar have been silenced while under the foster care system. But there are more references to the idea that LGBTQ+ foster youths are seen as rhetorical.

LGBTQ+ youths outside of foster care are also silenced through the punishment of those who openly identify as LGBTQ+. Near the beginning of this paper, one source mentioned that "12% of foster youth ages 17-21 years had been kicked out of their house or run away due to their identified or perceived sexual orientation or gender identity" (Wilson et al., 2014, p. 34, 40). If someone is 'exposed' to be LGBTQ+ or even perceived as such, they risk being kicked out of their house. That is a serious consequence for simply identifying as LGBTQ+. Such reactions could serve to further silence LGBTQ+ youths—by preventing them from expressing their identity—for fear of losing their home, for fear of being put into a foster care system that further debilitates them.

Rhetorical debility mirrors a change in legal language that removed protections from LGBTQ+ foster youths. Hashlamon further details how institutions such as foster care can control how populations such as LGBTQ+ youth become "legible": "institutional subjugation [...] sets the terms of acceptable or legible rhetorical practice" (Hashlamon, 2022, p. 23). In essence, Hashlamon is saying that institutional subjugation is what is limiting the debilitated population, which, here, is LGBTQ+ youth. A great example of this is the Foster Care Bill of Rights and what language changed in 2017. The Foster Care Bill of Rights once required fair treatment regardless of a child's "'gender, gender identity, race, ethnicity, religion, national origin, disability, medical problems or sexual orientation'" however the line was replaced (Asgarian, 2022). It previously provided comprehensive protections for LGBTQ+ foster youths.

However, in 2017, it was changed to "'be treated fairly'" (Asgarian, 2022; Melhado & Vázquez, 2024). Removing protections from LGBTQ+ foster youths made it "acceptable" under the rules of the "institutio[n]" to give treatment dependent on gender, gender identity, etc. (Asgarian, 2022; Hashlamon, 2022, p. 23). By removing protections for LGBTQ+ youth and allowing discrimination of this population, the institution of foster care is implementing a system of debility.

Rhetorical debility describes how some populations benefit from debilitating language even while others suffer. Hashlamon explains that "powerful groups benefit by making available, or capacitating, certain rhetoricities for some populations at the expense of others." (Hashlamon, 2022, p. 23). When LGBTQ+ youths are made to suffer at the "expense" of others, who benefits? One answer is religious foster families. Seeing as HB 3859 gave foster agencies significantly more religious freedom when it came to LGBTQ+ youths and families, any family hoping to use religion to control or convert LGBTQ+ children would find hope in the changed legislation. While at the expense, left without protections, lie LGBTQ+ foster youths that could undergo conversion therapy under the same placements as their peers. Furthermore, the 2017 Foster Care Bill of Rights change added a line about "have[ing] [foster youth's] religious needs met" (Asgarian, 2022; Melhado & Vázquez, 2024). Religious foster families would benefit from having providers ensure foster children's religious needs are met.

However, HB 3859 also removed protections. Language about religious needs was added but language about protections–such as the language ensuring fair treatment regardless of gender, gender identity, race, ethnicity, religion, national origin, disability, medical problems or sexual orientation–were replaced with the vague language about being "treated fairly" (Asgarian, 2022). Replacing protections of LGBTQ+ foster youths with language that expands the religious

freedom of welfare providers sounds almost verbatim to how Hashlamon describes rhetorical debility. Hashlamon describes it as: "...capacitating, certain rhetoricities for some populations[,]" in this case, religious child welfare providers' now-expanded religious freedom, "at the expense of others[,]" such as LGBTQ+ foster youths now-vague-language that once provided comprehensive protections (Hashlamon, 2022, p. 23).

To be clear, rhetorical debility is "a process of exploitation" and that is exactly what has been happening. The Texas foster system, along with recent Texas legislation, has made LGBTQ+ foster youths more vulnerable to the many challenges they face. What these youths have experienced under the state's 'care' has been debilitating. In response to the political subjugation, Asher states "[k]ids should not be used to score political points, especially foster kids, because our lives are already crap" (Melhado & Vázquez, 2024). Jasbir Puar (2017) worries in *The Right to Maim* about populations she names as those "targeted for premature or slow death are figured as on the side of debility." For foster youth who identify as LGBTQ+, who are put into foster care but denied the unique attention and interests they need, this worry is all too real.

Works Cited

Asgarian, R. (2022, December 14). Texas fights federal rule that would outlaw LGBTQ discrimination in state adoptions and foster care. *The Texas Tribune*. https://www.texastribune.org/2022/12/14/texas-adoptions-lgbtq-religion/

Baams, L., Wilson, B., & Russell, S. T. (2019). LGBTQ Youth in Unstable Housing and Foster Care. *Pediatrics*, *143*(3). https://doi.org/10.1542/peds.2017-4211

Barnett, L. M., Salem, H., Rosas, Y. G., Feinberg, E., Nunez-Pepen, R., Chu, A., Belmont-Ryu, H., Matsuno, E., & Broder-Fingert, S. (2023). Adapting Community Health Worker Care Models to Advance Mental Health Services Among LGBTQ Youth. *Administration and Policy in Mental Health and Mental Health Services Research*, *50*, 658-672. https://doi.org/10.1007/s10488-023-01268-9

Brooks, A. (2019, March 20). In Texas, a Quiet Effort to Protect 'Conversion Therapy' Is Underway. *Rewire News Group.* https://rewirenewsgroup.com/2019/03/20/in-texas-a-quiet-effort-to-protect-conversion-therapy-is-underway/

Brown, A. C., Vincent, J., & Hall, C. (2022). *The "best interest of the child" standard: Texas and beyond*. Texas Policy. https://www.texaspolicy.com/wp-content/uploads/2022/09/2022-09-RfF-BestInterestofChildStandard-BrownVincentHall.pdf

Child Welfare Information Gateway. (2021, March). *The use of safety and risk assessment in child protection cases - Texas*. https://www.childwelfare.gov/resources/use-safety-and-risk-assessment-child-protection-cases-texas/

Equality Texas, Lambda Legal, and Family Equality Council. (n.d.) *Texas HB 3859 Fact Sheet*. Equality Texas. https://www.equalitytexas.org/wp-content/uploads/2017/09/EQTX-FEC-LL-Texas-HB-3859-Fact-Sheet.pdf

Fish, J. N., Reczek, R., & Ezra, P. (2024). Defining and measuring family: Lessons learned from LGBTQ+ people and families. *Journal of Marriage and Family*, *86*(5), p. 1450-1467. https://doi-org.libproxy.library.unt.edu/10.1111/jomf.12987

Freking, K. (2019, November 1). Rule would let faith-based groups exclude LGBT parents. *AP News.* https://apnews.com/article/145e048d0db24d3893904c42f929137d

Green, A. E., Price-Feeney, M., Dorison, S. H., & Pick, C. J. (2020). Self-reported conversion efforts and suicidality among US LGBTQ youths and young adults, 2018. *American Journal of Public Health*, *110*(8), 121-127. https://doi.org/10.2105/AJPH.2020.305701

Hashlamon, Y. (2022). Rhetoricity at the end of history: Defining rhetorical debility under neoliberal colonialism. *Rhetoric Society Quarterly, 52*(1), 18-31. https://doi.org/10.1080/02773945.2021.1990378

Hernandez, E. & Klibanoff, E. (2022, March). Attorney General Ken Paxton asks Texas Supreme Court to let investigations into transgender families continue. *The Texas Tribune*. https://www.texastribune.org/2022/03/21/texas-transgender-investigation-child-abuse-appeals-court/

Kempner, M. (2014, June 10). Texas Republicans Want to Keep 'Reparative Therapy' Alive in the State. *Require News Group.* https://rewirenewsgroup.com/2014/06/10/texas-republicans-want-keep-reparative-therapy-alive-state/

Lindsey, D. (2004). *The welfare of children*. Oxford University Press.

Loscocco, K., & Walzer, S. (2013). Gender and the culture of heterosexual marriage in the United States. *Journal of Family Theory & Review*, *5*(1), 1–14. https://doi.org/10.1111/jftr.12003

Luneau, D. (2024, April, 29). With New Rule, Biden Administration Strengthens Protections for LGBTQI+ Youth in Foster Care System. *The Humanitarian Rights Campaign*. https://www.hrc.org/press-releases/with-new-rule-biden-administration-strengthens-protections-for-lgbtqi-youth-in-foster-care-system

McCormick, A. (2018). *LGBTQ Youth in Foster Care Empowering Approaches for an Inclusive System of Care*. Routledge. https://doi-org.libproxy.library.unt.edu/10.4324/9781315717159

Melhado, W. & Vázquez G. D. G. (2024, April 23). Texas politics leave transgender foster youth isolated – during and after life in state care. *The Texas Tribune*. https://www.texastribune.org/2024/04/23/texas-foster-care-lgbtq-transgender-kids/

Moore, X. (2024, September 25). Texas sues Biden administration over requirement to provide LGBTQ+ youth foster placements. *The Texas Tribune.* https://www.texastribune.org/2024/09/25/paxton-biden-lgbtq-foster-youth/

Morrow, N. (2017, June 15). BREAKING: Discrimination Signed Into Law in Texas, Governor Abbott Signs HB 3859. *The Human Rights Campaign*. https://www.hrc.org/news/texas-gov-signed-hb-3859-into-law

Mountz, S., Capous-Desyllas, M., & Sevillano, L. (2019). Educational Trajectories of Youth Formerly in Foster Care who are LGBTQ: Before, During, and After Emancipation. *Child Welfare*, *97*(6), 77–100. Retrieved February 27, 2025, from https://www.jstor.org/stable/48626317

Puar, J. K. (2017). *The Right to Maim*. Duke University Press. https://doi.org/10.2307/j.ctv11314kc

Rymph, C. E. (2017). *Raising government children: A history of foster care and the american welfare state*. The University of North Carolina Press.

Texas 85(R) HB 3859 (2017) (enacted). https://www.legis.state.tx.us/tlodocs/85R/billtext/pdf/HB03859I.pdf

Texas Education Agency. (n.d.). *Chapter 4 foster care overview: Understanding the foster care system*. https://tea.texas.gov/system/files/fcss_rg-ch04.pdf

Texas Foster Care and Adoption Services. (n.d.). *About us*. TFCAS - Information about Texas Foster and Adoption Needs. https://www.texasfostercare.org/about

Thompson, L. M. (2017, May 10). House Votes to Expand Religious Freedom at the Expense of Foster Children at the Expense of Foster Children, Critics Say. *Texas Observer*. https://www.texasobserver.org/texas-house-religious-freedom-expense-foster-care-children/

Trevor News (2023). HHS Proposed Rule Offers Much-Needed Protections for LGBTQ+ Young People in Foster Care. *The Trevor Project*. https://www.thetrevorproject.org/blog/hhs-proposed-rule-offers-much-needed-protections-for-lgbtq-young-people-in-foster-care/

Wilson, B., Cooper, K., Kastanis, A., & Nezhad, S. (2014). Sexual and Gender Minority Youth in Foster Care. Assessing Disproportionality and Disparities in Los Angeles. *UCLA: The Williams Institute*. Retrieved February 27, 2025, from https://escholarship.org/uc/item/6mg3n153

Youth & Family Programs. (n.d.). *What State Has The Best Foster Care System?* https://www.ncyfp.org/blog/2024/11/26/what-state-has-the-best-foster-care-system