Texas Foster-Care System and the LGBTQ+ Community

Jake Lopez, Lucy Murrey, Louis Pratt, Vanessa Wu

Northeastern University

Introduction

Benchmark data conducted on foster-care processes in Texas paint the system as a success (see Figure 1.2); however, during preliminary data collection, researchers noted a łack of information on support tailored to the needs of the LGBTQ+ community. Researchers speculate this lack of information may indicate the absence of an intersectional approach by the Texas foster-care system— an approach that shows acknowledgement, inclusion, and protection of minority groups like the LGBTQ+, which states like Massachusetts prioritize. Further, researchers question how local conservative politics or faith-based organizations may influence the methods of training, services, and support made available to foster-care stakeholders in Texas. For the scope of this analysis, researchers will collect, triangulate, and analyze data that pointedly investigates gaps in support for foster-care stakeholders in Texas, and reveal underlying negligence of the LGBTQ+ community. Data-based recommendations for systemic improvement will be discussed.

Texas Recruitment, Training, and Licensing Process

Recruitment

The Texas Department of Family and Protective Services (DFPS) conducts recruitment on a statewide basis through the support of public service announcements, civic and community group meetings, and distribution of printed materials (2021a). Through these platforms, DFPS (2021a) can identify and track families and individuals interested in providing foster-care and adoption services through the telephone contact to the statewide 800-inquiry number or to a local DFPS office; public information meetings or orientation sessions are another way inquiries are made (DFPS, 2021a). The Texas Adoption Resource Exchange (TARE) provides information on children waiting for adoption by posting their profiles online, as well as participates in national

recruitment campaigns with national adoption organizations and works with national websites to place Texas children's profiles on their websites (DFPS 2021b).

Training and Licensing

Child Protective Services (CPS), a division of the DFPS, prepares a pre-service training for all prospective foster and adoptive parents before they receive a home verification and approval for adoption (DFPS, 2021a). CPS utilizes Parent Resource Information Development Education (PRIDE) as its training curriculum. Texas PRIDE is a 35-hour, competency-based, training program that is co-trained by an agency staff member and a foster or adoptive parent over a spread of approximately 10 weeks (DFPS, 2021a). This curriculum covers child attachment, loss and grief, infant and child development, discipline and behavior intervention, sexual abuse etc. Moreover, prospective foster families must also complete additional pre-service training and certification requirements such as the communicable disease training, infant, child and adult CPR certification, first aid certification, water safety training, and psychotropic medication training (DFPS, 2021b). All of this, including the annual training of 20- 30 hours per family or per foster parent, is required to attain a license. The training serves two purposes: to teach potential parents about foster-care and adoption, and to mutually assess the applicant's appropriateness to care for children in DFPS custody (DFPS, 2021b).

Certification Process

Many families are interested in both fostering and adopting, and it is not uncommon for parents to get licensed even if they are only interested in adoption (HHSC, 2020). According to DFPS (2020b), there are three categories of adoptions: private adoption (limited to adoption of newborns), international adoption agencies (for children of all ages), and the adoption of a child through CPS. Staff begin with background checks that include criminal history reports from the

Texas Department of Public Safety and child abuse checks through DFPS computer database known as CAPS (Texas Health and Human Services Commision [HHSC], 2020). Additionally, a home study assessment is conducted by interviewing all adults and children in the home to assess one's home for safety and available space. All homes must meet standards required in the Minimum Standards and Guidelines for Child-Placing Agencies (HHSC, 2020).

State Foster-Care Systems Compared

The data uncovered from TX, MA, and DC was surprising in terms of the breadth and depth of their systematic processes (see Figure 1.1). All states report thorough yet incredibly lengthy procedures to achieve full training, licensing and placement, which may act as a barrier to providing more placement opportunities to children. However, it should be acknowledged that the multitude of policies can ensure an accessible pathway for the child to receive and parent(s) to provide care. Demonstrated by their high rates of system retention and positive permanency in comparison to national averages (see Figure 1.2), Texas shows significant effort toward facilitating an above-average foster-care system procedurally. Massachusetts, however, continually falls below national averages for reunification speed and permanency. Instead, Massachusetts and DC both excel in supplying a uniquely intersectional approach to foster-care, evidenced by the attention paid to specific needs of the LGBTQ+ community (see Figure 1.1).

Figure 1.1

	Training Process	Home Study	LGBTQ+ Stakeholders
TX	Pre-service training program (PRIDE)	2-6 weeks upon completion	No specific training included
	20 hours of annual training per home	Background checks	Demonstrate systemic neglect of needs in this community
	Applies to both kinship and non-kinship placements		

MA	30 hours of training with MAPP program	Typically around 30 days	Establishment of LGBTQ Liaisons
	Screening process Applies to foster and adoptive parents	Reviewed by a DCF supervisor	Reveal biases during home study process Trained social workers
DC	30 hours pre-service training with Child Welfare Training Academy (CWTA) Additional 15-30 hours training annually Strict foster-to-adopt policy (all parents come in as foster parents before adopting).	Spans "several weeks," everyone in the family is interviewed. Background checks	Policy against discrimination of the LGBTQ+ community Statement claiming the DCFSA "frowns upon" conversion therapy, but still recognizes it as a legitamite service "unless the parent has lost that right."

Information Retrieved from Department of Family and Protective Services (2021b), Child and Family Services Agency (2013),

Massachusetts Department of Children and Families, (2020).

Problem Identification

After initial benchmarking and further research into the training and licensing process, researchers were unable to conclude the presence of considerations by the Texas foster-care system to meet the needs of LGBTQ+ stakeholders; whereas Massachusetts had robust measures in place to address LGBTQ+ stakeholders. These measures included the establishment of the LGBTQ Liaisons, who works directly with the DCF on how to best support children in the LGBTQ+ population through tailored training for prospective foster and adoptive parents, placement procedures, and the establishment of relevant partnerships with LGBTQ+ community groups (MADCF, n.d.).

As no such initiative appeared to exist for the state of Texas from quantitative research, researchers utilized interpretive methods to reveal insights not represented in organizational data. Researchers contacted representatives from each region of the DFPS by phone to gain an ethnomethodological snapshot of support standards for LGBTQ+ stakeholders during the training and licensing process. When discussing the process of fostering or adopting a child in

the state of Texas, representatives were asked if there were any measures within the system's PRIDE training program aimed to benefit the LGBTQ+ community, or if sexual orientation and gender identity are taken into consideration during placement. The responses were mixed, with a fair amount of representatives stating they were not familiar with any specific measures in place.

A few representatives stated it is "touched on" during training in a powerpoint and that acceptance of a child's sexual orientation is considered in the home-study process (Representative from DFPS Houston region, representative from DFPS El Paso region, personal communication, March 17, 2020). One representative expressed that the agency had "a long way to go," citing a high homeless population for LGBTQ+ youth due to a lack of homes that are open to accepting a child who identifies with that community (Representative from DFPS San Antonio region, personal communication, March 17, 2020). Notably, when asked if gender identity or sexual orientation is considered during placement, a respondent replied, "it is considered, but the family does not necessarily have to be completely accepting of that identity. In some cases, a welcoming family can help a child during a time of confusion" (Representative from DFPS San Antonio region, personal communication, March 17, 2020). The casual use of the word 'confusion' in reference to one's LGBTQ+ identification indicates a culture of discouragement toward the LGBTQ+ community in Texas, and led researchers to investigate this norm as it exists in the statewide environment.

Data Collection and Analysis

Texas and the LGBTQ+ Community

To understand the context in which foster-care operates in Texas, data was collected covering a breadth of community and political issues. Resulting information supported researchers' hypothesis that LGBTQA+ stakeholders are generally unprotected. With regard to

the protections of the LGBTQ+ community, the Human Rights Campaign (HRC) refers to Texas as an "inconsistent patchwork of legal protections in their states and local communities" (HRC, 2021). According to the Movement Advancement Project (2021), Texas ranks low with regard to LGBTQ+ protection and notably does not have or enforce the following policies (see Appendix B):

- Policies against discrimination in foster system. Agencies are permitted to refuse to place and provide services to children and families in LGBTQ+ community;
- Housing protection laws for LGBTQ+ community;
- A ban on conversion therapy for LGBTQ+ youths.

In more recent news, new bills have been introduced into Texas Legislature such as HB1399, which prohibits healthcare providers from "[p]erforming gender confirmation surgery, or prescribing, administering or supplying puberty blockers or hormone treatment to anyone under the age of 18," and SB1311, which "[w]ould revoke the medical license of healthcare providers and physicians who perform such procedures or prescribe such drugs or hormones to people younger than 18" (Munce, Megan, 2021; Texas Legislature Online, 2021a; Texas Legislature Online 2021b). However, the bill that has developed much controversy (TX SB1646) is one that "[w]ould codify any gender-affirming care, including hormone replacement therapy and surgical procedures, for minors as child abuse," thus effectively labeling parents that seek support for their trans children as "child abusers" (LegiScan, 2021). Further, it was not until June of 2020, as a result of the Bostock v. Clayton County U.S. Supreme Court case, that Texas made it illegal to fire someone based on their sexual orientation (Bostock v. Clayton County, 2020). According to HRC (2021), despite recent policies put in place, discrimination toward the LGBTQ+ community is common in workplaces and social services.

The lack of stable policies for these stakeholders communicates a lack of genuine care, as well as a provision to the commentary of religious influence mixed with a culture of conservatism that infiltrates the policy making and shaping of the Texas legal system. When considering the Texas foster system, it becomes clear that its structures and standards are significantly influenced by this socio-political landscape. For example, the OneStar Foundation, classified as a "faith-based initiative," plays a significant role both in acquiring donations and organizing volunteer opportunities for the Texas foster-care system, as well as other statewide initiatives like the Rebuild Texas fund and the current Texas COVID-19 Relief Fund (OneStar Foundation, 2019). While one can argue that the support provided serves as a net benefit, it leads one to question the larger role faith-based organizations may play in dictating the adoption and foster processes of LGBTQ+ children and parents.

Influence of Faith-Based Organizations

While some protective policies for LGBTQ+ stakeholders may be in place (see Appendix A), significant loop-holes exist that allow religious beliefs to take precedent. Notably, Texas HB 3859 states that "a child welfare services provider may not be required to provide any service that conflicts with the provider's sincerely held religious beliefs;" this is an exceptionally problematic policy when considering that faith-based organizations take on a significant amount of responsibility in the approval of prospective foster and adoptive parents (Texas Legislature Online, 2017). By speaking to a representative from Saint Francis Ministries — an organization in the Lubbock region that provides foster-care licensing and similar services — researchers gained insight into the extent to which law is applied in practice (Saint Francis Ministries, 2021). The representative disclosed that Saint Francis Ministries does not deny licensing to same-sex couples; in fact, part of their redesign efforts towards community-based care include trying to

provide more opportunities for children in marginalized populations (Representative from Saint Francis Ministries of Lubbock region, personal communication, March 18, 2021). The representative indicated Guiding Hope, a child welfare agency founded in 2020 to provide LGBTQ+ children with a placement opportunity that is representative of their identity, as an example of these efforts (Guiding Hope, 2020). Although these findings are encouraging in isolation, the representative made it clear that Saint Francis is an exception to the rule.

While not every licensor discriminates, the representative emphasized that many faith-based organizations continue to deny licensing to same sex couples. Buckner Children and Family Services was one example cited by the representative that does so (Representative from Saint Francis Ministries of Lubbock region, personal communication, March 18, 2021).

Buckner's website outlines their faith-based approach to foster-care and adoption, stating in their values that "marriage is the uniting of one man and one woman in covenant commitment for a lifetime" (Buckner International, 2021). Further, when HB 3859 was on the floor, Buckner's vice president, Randy Daniels, testified multiple times in front of the Texas legislature to defend the law and used roughly \$250,000 of the organization's funds to help advance religious liberty protections for his organization and others (Gaultney & Pritchett, 2017). This information not only evidences a lack of support for LGBTQ+ stakeholders in Texas foster-care but, further, demonstrates attempts at blatant discrimination done to this community by some faith-based foster-care agencies in the Texas area.

Interpretation of Findings

Figure 1.2

	Retention Rates	Reunification Speed	Long-term Care
TX	30% of children who exited substitute	22 months spent in	CPS may provide up to six months of

	care were able to return to their original home, 30% were adopted, and 30% were placed with a relative. A total of 90% positive permanency → Texas is doing much better than the national average of 10% of children and youth exiting out of foster-care to permanent homes.	foster-care system before being placed in permanent home (as of 2014)	supervision to make sure that the family is safely caring for the child and offer support services. Typically, the caseworker makes face-to-face contact with the child weekly for the first eight weeks; this frequency of contact decreases as the family and child adjust to their reunification
MA	The Massachusetts rate of placement moves per 1,000 placement days is currently 5.44, which is below the national standard of 4.44	7.1 months to be reunified with family — below the national median of 6.5 months (as of 2020)	Initial Placement Reviews are held six weeks after a child enters foster-care, with structured questions that emphasize permanency goals. For older children, this program brings together managers, social workers, clinicians, foster parents, group care providers, and other important adults in the child's life to discuss the child's best options.
DC	No official retention rate available in DC annual reports Permanency shows 46% of children placed in non-relative foster family homes, and 32% were placed in relative foster homes 6% were placed in institutions, 4% are in group homes, and 2% are placed in supervised independent living homes	14.7 spent in foster-care system before being placed in permanent home (as of 2018)	After placement of a child, a Social Worker visits weekly for an initial four weeks. After the fourth week, Social Worker will visit twice per month (one visit must always be at the child's home, while the other can be recorded at the child's school, day care, etc.)

Information Retrieved from Casey Family Programs, (2014), Child Welfare Information Gateway, (2020), Massachusetts Department of Children and Families, (2020).

While Texas' recruitment, training, and licensing process may appear systematically thorough and relatively successful in terms of output (see Figure 1.2), when given a closer look, major gaps in support for the LGBTQ+ community become evident. The influence of conservative, faith-based organizations in the licensing and placement process poses a significant threat to LGBTQ+ stakeholders, for it grants power and representation to groups prone to mistreat a population that is proven to be already marginalized and underrepresented in the state

of Texas (see Appendix B). Although these religious organizations are required to refer same-sex couples to another organization that will license them if they are unwilling to do so, the ability of faith-based groups to turn away entire populations according to discriminatory beliefs (e.g., Buckner Children and Family Services) demonstrates an affordance of legal protection to the perpetrators of the issue, and neglect toward groups that need protecting. Further, this discrimination means there are fewer homes available for placements and a higher likelihood for LGBTQ+ youth to find placement in a home that does not support their identity, thus leaving them susceptible to maltreatment. All of these structures communicate to LGBTQ+ stakeholders that the foster-care system in Texas was created and has been upheld without acknowledgement or consideration for their involvement, thus discouraging their involvement.

These findings, triangulated in Appendix A, pose the question: if Texas is considered a high-performing and successful state for foster-care, *for whom* is it successful? Through interpretive data collection, triangulation, and analysis, tailored support for LGBTQ+ stakeholders was revealed to be a significant area for improvement for the Texas foster-care system, as well as the result of environmental, socio-political factors which must be addressed in a strategy for problem resolution.

Research-Based Recommendations

A critical, foundational step to ensure better treatment for LGBTQ+ stakeholders in the TX system is to begin tracking and reporting placements, permanency rates, and overall outcomes of this specific community. Throughout our investigation, we were unable to find reports specific to the treatment of the LGBTQ+ community, which indicates these data have either been made difficult to uncover or do not exist. Reporting the stats and standards for this community should be prioritized and made readily available in order to: (a) validate the presence

and importance of these stakeholders, (b) hold the system accountable for the treatment of these stakeholders, and (c) measure the success of implemented changes that serve this group over time.

Once proper tracking and reporting methods are established, the DFPS is advised to create representation for LGBTQ+ within their training and licensing process by developing groups of stakeholders to design and lead trainings or panels about the LGBTQ+ experience in the foster-care system. Uplifting these voices throughout the training and licensing process would not only demonstrate state-wide recognition for the LGBTQ+ perspective, but it may also help to change the norms of behavior toward this community in a way that benefits their experience in and across homes. Further, streamlined and frequent communication between LGBTQ+ advocacy groups and other foster-care stakeholders should be established to allow LGBTQ+ stakeholders the same affordance of influence as other groups that work in conflict with their best interests. For example, conducting regular meetings between faith-based groups, like Buckner Children and Family Services, and advocacy groups, like Guiding Hope, may result in constructive conversations that ensure their respective initiatives are working toward the same goal of providing safe, supportive care to all foster children in Texas.

The goal is that each of these recommendations will build on one another to encourage routine shifts in perspective that result in widespread, systemic improvements for LGBTQ+ stakeholders, such as more appropriate placements, higher retention rates, and better overall treatment. Through increased representation of LGBTQ+ identities and perspectives and improved communication surrounding the LGBTQ+ perspective, the LGBTQ+ community will be granted not only the recognition but the *power* necessary to affect positive change for their experience in the system. The intention is that these provisions of representation, voice, and

influence in the TX foster-care system may not only change the standard of treatment for this community in measurable ways, but also shift cultural norms surrounding LGBTQ+ persons from those of discouragement to advocacy.

Appendix A

<u>Table 1</u>
LGBTQ+ State Protective Policies

TX	Ban on Conversion Therapy: No Sexual orientation Policy Tally: 2.25/18.5 Gender Identity Policy Tally: -2.25/20 Overall Tally: 0/38.5	Available policies: • Local laws against employment discrimination (gender and sexual orientation) • State law against discriminating LGBTQ+ on sexual orientation (not gender) • Same-sex marriage and adoption laws
MA	Ban on Conversion Therapy: Yes Sexual Orientation Policy Tally: 15.25/18.5 Gender Identity Policy Tally: 17.25/20 Overall Tally: 32.5/38.5	Unavailable policies: Private health insurance nondiscrimination laws for sexual orientation Gender neutral options on birth certificates Ban on the "panic defense." Credit and lending nondiscrimination laws Ban on best practice medical care for trans youth
DC	Ban on Conversion Therapy: Yes Sexual Orientation Policy Tally: 16.5/18/5 Gender Identity Policy Tally: 18/20 Overall Tally: 34.5/38.5	Unavailable policies:

Information Retrieved from Movement Advancement Project (2021).

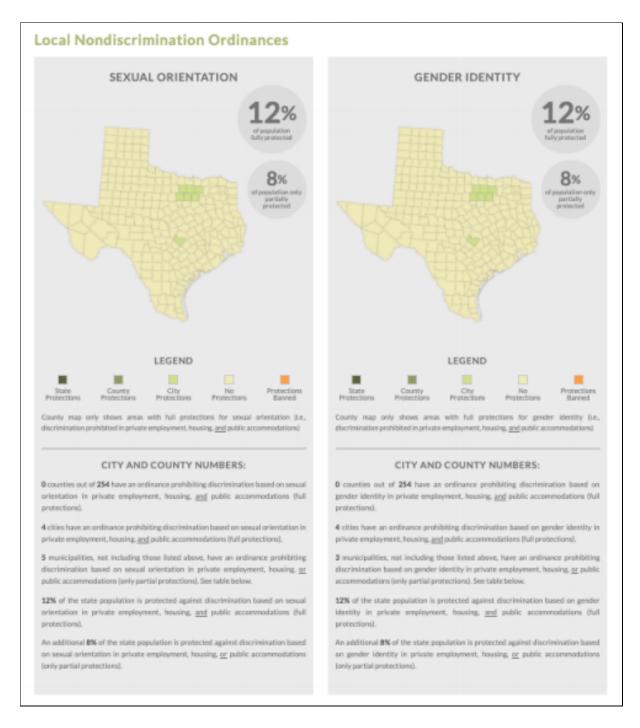
Appendix B

<u>Table 1</u>
Texas State Equality Profile: LGBTQ Policy Tally



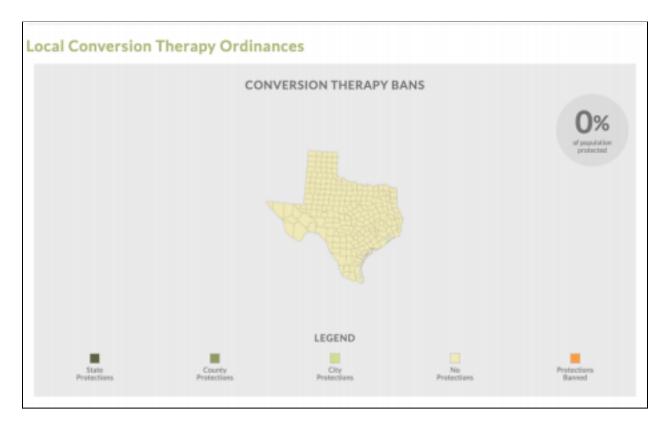
Image Retrieved from Movement Advancement Project (2021).

<u>Table 2</u>
Texas State Equality Profile: Local Nondiscrimination Ordinances



Retrieved from Movement Advancement Project (2021).

<u>Table 3</u>
Texas State Equality Profile: Local Conversion Therapy Ordinances



Retrieved from Movement Advancement Project (2021).

References

Bostock v. Clayton County, Volume 590 U.S. (2020).

https://supreme.justia.com/cases/federal/us/590/17-1618/#tab-opinion-4261583.

Buckner International. (2021). Foster-care and adoption: statement of faith.

https://www.buckner.org/foster-care-adoption/statement-of-faith.

Casey Family Programs. (2014). Assessment of foster-care lengths of stay and permanency outcomes in Harris County, Texas.

https://www.dfps.state.tx.us/About DFPS/Reports and Presentations/CPS/documents/20

14/Harris County Assessment/Harris County Assessment Report April 2014.pdf.

Child and Family Services. (2013). Have a heart... give a child a new start.

https://cfsa.dc.gov/sites/default/files/dc/sites/cfsa/publication/attachments/6training.pdf

Child Welfare Information Gateway. (2020). Foster-care statistics 2018.

https://www.childwelfare.gov/pubPDFs/foster.pdf

Department of Family and Protective Services. (2021a). *Overview.* Texas Adoption Resource Exchange.

https://www.dfps.state.tx.us/Adoption_and_Foster_Care/About_TARE/Foster_Care/overview.asp.

Department of Family and Protective Services. (2021b). *Foster adopt information packet*.

Retrieved from http://www.dfps.state.tx.us/adoption and foster care/get started/.

Gaultney, K., Pritchett, B. (June 14, 2017). *Fostering freedom in Texas*. World Magazine. https://world.wng.org/2017/06/fostering_freedom_in_texas.

Guiding Hope. (2021). *Hope home*. http://guidinghope.org/.

Human Rights Campaign. (2021). Texas. https://www.hrc.org/in-vour-area/texas.

LegiScan. (2021). TX SB1646/2021-2022/87th Legislature.

https://legiscan.com/TX/bill/SB1646/2021

Massachusetts Department of Children and Families. (n.d.). *Staff advocate ("LGBTQ liaisons")* role description.

https://assets2.hrc.org/files/assets/resources/MA_DCF_-_Staff_Advocate_Role_Description.pdf.

Massachusetts Department of Children and Families. (2020). *Annual report FY2020*. https://www.mass.gov/doc/dcf-annual-reportfy2020/download.

Movement Advancement Project. (2021). *Texas' equality profile*. https://www.lgbtmap.org/equality-maps/profile_state/TX.

Munce, Megan. (April 20, 2021). Texas lawmakers advance bills blocking access to gender-affirming health care despite opposition from LGBTQ Texans, medical associations. Texas Tribune.

 $\underline{https://www.texastribune.org/2021/04/20/texas-transgender-health-care-restrictions/}$

OneStar Foundation. (2019). How state agencies connect with faith-based & community organizations. https://onestarfoundation.org/how-state-agencies-connect-with-faith-based https://onestarfoundation.org/how-state-agencies-connect-with-faith-based https://onestarfoundation.org/how-state-agencies-connect-with-faith-based https://onestarfoundation.org/how-state-agencies-connect-with-faith-based https://onestarfoundation.org/how-state-agencies-connect-with-faith-based https://onestarfoundation.org/how-state-agency-coordinating-group-legislative-report/.

Saint Francis Ministries. (2021). Our services. https://saintfrancisministries.org/services/.

Texas Health and Human Services Commission. (2020). *Minimum standards for child-placing agencies*. Child Care Licensing.

https://hhs.texas.gov/sites/default/files/documents/doing-business-with-hhs/provider portal/protective-services/ccl/min-standards/chapter-749-cpa.pdf.

Texas Legislature Online. (2017). HB3859.

https://capitol.texas.gov/BillLookup/History.aspx?LegSess=85R&Bill=HB3859.

Texas Legislature Online. (2021a). HB1399.

https://capitol.texas.gov/BillLookup/History.aspx?LegSess=87R&Bill=hb1399

Texas Legislature Online. (2021b). SB1311.

https://capitol.texas.gov/BillLookup/History.aspx?LegSess=87R&Bill=SB1311