

PROJECT BRIEF

Human Services for Low-Income and At-Risk LGBT Populations: The Knowledge Base and Research Needs

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The social and legal environment for lesbian, gay, bisexual, and transgender (LGBT) people in the United States is changing rapidly. Nevertheless, existing research suggests that LGBT people, like some other minority groups, may face disproportionate risks to their economic and social well-being. These problems may be rooted partly in social stigma—negative attitudes toward LGBT people among individuals and institutions that result in discrimination and disadvantage.

The circumstances of LGBT people signal a potential need for tailored human services to help address the challenges they face and mitigate risks. However, research and data sources identifying LGBT populations are relatively limited, and substantial knowledge gaps exist regarding at-risk and low-income LGBT people and their experiences with human services.

This brief summarizes findings from an assessment of the knowledge base and research needs related to LGBT populations and human services. The assessment focused on services funded by the Administration for Children and Families (ACF) in the U.S. Department of Health and Human Services.

The knowledge base

The assessment identified the knowledge base in three areas: (1) income support and self-sufficiency programs for low-income families, (2) child welfare programs, and (3) programs for youth (especially services that ACF funds: assistance for runaway

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The Research Development Project on the Human Service Needs of LGBT Populations

aimed to determine what is known about low-income and at-risk lesbian, gay, bisexual, and transgender (LGBT) people and their interactions with human services and identify important topics for further research in this area. Mathematica Policy Research and its subcontractor, the Williams Institute, conducted the project for two offices in the U.S. Department of Health and Human Services: the Office of Planning, Research and Evaluation in the Administration for Children and Families (ACF), and the Office of the Assistant Secretary for Planning and Evaluation. The research team used a variety of methods to conduct the assessment, including developing an annotated bibliography on LGBT populations and human services, consulting with a 13-member expert panel and representatives of ACF program offices, conducting secondary data analyses, completing case studies of providers serving runaway and homeless LGBT youth, and conducting telephone interviews with staff at state and community agencies providing various types of human services to LGBT people.



and homeless youth and sexual health education for adolescents). Full citations for research findings described in this brief appear in the project's needs assessment report (Burwick et al. 2014), available at <http://www.acf.hhs.gov/opre>.

Income support and self-sufficiency programs

- Analyses of nationally representative, population-based surveys and other data sources suggest that LGBT people are more likely to face economic difficulties than are non-LGBT people, but findings related to poverty risk vary for LGBT subpopulations and across analyses focusing on individuals or couples. For example, among respondents to the nationally representative Gallup Daily Tracking survey, those identifying as LGBT were more likely than non-LGBT respondents to report experiencing a time in the past year when they did not have enough money to feed themselves or their family, pay for shelter, or pay for health care. Analyses focusing on couples and controlling for demographic characteristics find that both male and female same-sex couples are more likely to be in poverty than are different-sex married couples. Analyses focusing on individual adults find that bisexual adults are more likely to be poor than heterosexual adults (without controlling for other demographic characteristics). No nationally representative, population-based data are available to assess the extent of poverty among transgender people.
- Multivariate analyses that control for characteristics associated with the likelihood of receiving benefits (including poverty status) indicate that same-sex male and female couples are more likely to receive cash assistance and Supplemental Nutrition Assistance Program benefits than similar married different-sex couples. In similar analyses focused on individual adults ages 18 to 44, bisexual women are more likely than heterosexual women to report receiving cash assistance.
- Some providers of human services offer employment programs designed to address barriers to employment that may be specific to LGBT people, especially transgender people. These programs prepare jobseekers by helping them improve skills, access other services they may need, and address issues related to gender identity in the workplace. They also encourage employers to improve workplace conditions for transgender employees.

Child welfare programs

- Studies of population-based and purposive samples of lesbian, gay, and bisexual (LGB) adolescents and adults suggest that LGB people are at higher risk of experiencing childhood maltreatment than their non-LGB counterparts. (Data sources for these studies do not include measures to identify transgender people.) In addition, a longitudinal study of a purposive sample of youth found that a higher level of gender nonconforming behavior during childhood was associated with increased risk of maltreatment.
- In qualitative studies, LGBT youth in foster care have reported harassment by peers in child welfare settings, discomfort or rejection among foster parents and agency staff, and a lack of services to meet their specific developmental or health care needs. These studies and surveys of youth exiting or currently in foster care also suggest that LGBT youth may be more likely to experience disruption in foster care placements.
- Child welfare researchers and practitioners have recommended strategies for improving child welfare services for young LGBT people. These strategies include

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- (1) prohibiting discrimination based on sexual orientation and gender identity and ensuring LGBT youth in care are respected by child welfare agency staff and peers,
 - (2) increasing LGBT cultural competency among agency staff and foster parents,
 - (3) providing child welfare services that address the specific needs of LGBT youth and their families, and
 - (4) effectively managing information on the sexual orientation and gender identity of youth in the child welfare system.

Programs for youth


- Research on youth homelessness strongly suggests that LGBT youth are overrepresented among runaway and homeless youth, although prevalence estimates vary widely. Studies with purposive samples have found that LGBT homeless youth were more likely than their non-LGBT counterparts to have poor mental health, be victimized, and engage in risky behaviors.
- LGB youth face health disparities related to sexually transmitted infections and may be at higher risk than heterosexuals for unintended pregnancy. Analyses of population-based data have found that LGB adolescents are significantly more likely to become pregnant or cause a pregnancy than are non-LGB youth. (These data did not identify transgender youth.) Increased risk of pregnancy involvement among LGB adolescents (and those questioning or unsure of their sexual orientation) may be linked to higher rates of risky sexual behavior that is a response to stigma, or to lower levels of protective factors among these youth.
- A small number of studies, mainly involving providers, and anecdotal evidence suggest that LGBT youth may experience barriers to social service access related to insufficient provider expertise in serving LGBT youth, lack of LGBT-specific resources or information, and discrimination.

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Research needs

Many opportunities exist for improving understanding of the needs of LGBT populations and their interactions with human services. Important areas for future research include:

1. **Developing sources of population-based and administrative data that include measures of sexual orientation and gender identity.** Additional data are needed to clarify the number of LGBT people who experience economic hardships and other risks and to determine the extent to which LGBT populations participate in ACF services.
2. **Continuing to explore the nature of risk and protective factors among LGBT people, especially LGBT subpopulations.** More investigation is needed to discern who among LGBT populations is at greatest risk of poor social and economic outcomes and explore the reasons for disparities that may exist—both between LGBT people and non-LGBT people and in LGBT subpopulations, particularly transgender people and people of color.
3. **Understanding potential barriers to service access.** Existing research points toward factors that may impede LGBT people from receiving the services they need. These factors include providers' lack of knowledge regarding the specific circumstances of LGBT people and services that are not relevant to the needs of LGBT clients. It remains unclear how pervasive such barriers are and whom they affect.
4. **Identifying and documenting efforts to improve human service delivery to LGBT populations.** Researchers, professional associations, and advocacy groups



have recommended steps to increase the safety, accessibility, and relevance of human services to LGBT populations. The extent to which service providers nationwide have adopted these recommendations is not known.

5. **Evaluating the effectiveness of human service interventions targeting LGBT populations.** The assessment identified several examples of services tailored for LGBT clients, specifically in the areas of employment assistance, child welfare services, and emergency shelter and transitional housing for runaway and homeless youth. Studies are needed to establish whether these and other interventions improve outcomes for LGBT adults and youth.

Reference

Burwick, Andrew, Gary Gates, Scott Baumgartner, and Daniel Friend. (2014). *Human Services for Low-Income and At-Risk LGBT Populations: An Assessment of the Knowledge Base and Research Needs*. OPRE Report Number 2014-79. Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.

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