The Society for the Psychology of Sexual Orientation and Gender Diversity (APA Division 44) Opposes Rollback of Policy Prohibiting Discrimination against LGBTQ+ People by U.S. Department of Health and Human Services Grantees

November 4, 2019

On Friday, November 1<sup>st</sup>, 2019, a rule change was proposed that would undo existing anti-discrimination regulations for U.S. Department of Health and Human Services (HHS) Grantees. The Society for the Psychology of Sexual Orientation and Gender Diversity, Division 44 of the American Psychological Association (APA), strongly and unequivocally opposes this change.

Under the proposed rule, agencies receiving HHS grants would be permitted to discriminate against lesbian, gay, bisexual, transgender, queer, and other gender or sexual minority people (LGBTQ+). This rollback of non-discrimination protections for LGBTQ+ people has far-reaching implications. It will permit discrimination against LGBTQ+ people in a variety of settings, including foster and adoptive care placements, HIV and STI prevention programs, addiction recovery programs, and youth homelessness services, among other services.

This proposed change has the potential to disproportionately harm vulnerable LGBTQ+ youth, including those awaiting placement into foster care or adoption. Approximately 400,000 youth are served in foster care annually, with chronic under-availability of foster parents and adoptive homes (Anne E. Casey Foundation, 2019). The LGBTQ+ youth in foster care can be adversely affected both by reducing availability of services to them, and by reducing their access to LGBTQ+ foster and adoptive parents. LGBTQ+ youth are disproportionately represented in the child welfare system (Fish, Baams, Wojciak, & Russell, 2019) and are two times more likely to experience homelessness (Morton, Samuels, Dworsky, & Patel, 2018). This proposal could therefore limit services to youth who are among the most vulnerable. LGBTQ+ adults offer a resource for nurturing, stable, and supportive homes for vulnerable youth. The developmental outcomes for children raised in same-sex couples are consistent with, or in some cases better than, outcomes for children raised by heterosexual couples (e.g., Gartrell & Bos, 2010; Wainright, Russell, & Patterson, 2004), but this proposal could limit access for youth to these potential foster parents and adoptive parents.

In addition to directly impacting people who seek services funded by HHS grants, the proposed rule change reinforces stigma against LGBTQ+ people. The Institute of Medicine of the National Academies of Science (2011) has concluded that actions that reinforce stigma are negative to the general health and wellbeing of LGBTQ+ people, and can contribute to health inequalities. This conclusion is supported by psychological research on the impact of public policies on LGBTQ+ people's health and wellbeing (e.g., Hatzenbuehler, Phelan, & Link, 2013; Hendricks & Testa, 2012; Meyer, 2013).

We urge the HHS to reverse this decision immediately, and retain the strong anti-discrimination protections previously adopted.

## References

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