Dr. Briana McGeough House District 45 & Senate District 19 Testimony in Opposition of HB 2311

My name is Dr. Briana McGeough, and I am an Assistant Professor in the University of Kansas School of Social Welfare. My testimony is offered in my personal capacity as a social worker with experience practicing in the child welfare system and providing mental health services to LGBTQ people, not as a representative of the University of Kansas. My research focuses on understanding mental health challenges experienced by LGBTQ individuals and identifying strategies to promote the mental health and well-being of LGBTQ people.

I am testifying today because I strongly oppose HB 2311, and I am concerned about the impact that this policy could have on the mental health, safety, and placement stability of LGBTQ youth in the child welfare system. I am also concerned about the impact that this policy could have on the child welfare system, more broadly, especially the burden it places on individual child welfare workers to find safe placements for LGBTQ youth without sufficient institutional support promoting placement safety.

Because LGBTQ youth are disproportionally likely to experience out-of-home or adoptive placements, <sup>1,2</sup> this bill could have a considerable and pervasive negative impact on LGBTQ youth in the state of Kansas. I am particularly concerned about the aspect of this bill that forbids the adoption of policies that prohibit the selection of placements because of "religious or moral beliefs regarding sexual orientation or gender identity or *intent to guide or instruct a child consistent with such beliefs*." Most children, including LGBTQ children, enter out-of-home or adoptive placements following traumatic life experiences, including physical, emotional, and sexual abuse. <sup>3,4</sup> To heal from their traumas and grow into healthy and successful adults, they need compassionate care and skilled interventions. Research has found that rejecting caregiver behaviors, such as instructing LGBTQ children that their sexual orientations or gender identities are morally wrong or making efforts to change their sexual orientations or gender identities, are linked to depression, substance use, and suicidality. <sup>5</sup> The mental and behavioral health impacts of rejecting behaviors can be particularly severe when LGBTQ youth experience them both in their families of origin and also in out-of-home placements. <sup>2</sup>

In addition to their mental and behavioral health consequences, rejecting messages and actions from caregivers are associated with reductions in placement stability because youth may be removed from their placements or run away from unsafe environments.<sup>6,7</sup> Placement instability has consistently been linked to worse mental and behavioral health for youth in out-of-home care.<sup>8</sup> Placement instability also creates challenges for the child welfare system, more broadly, including increased financial costs and worker and administrative burden.<sup>9</sup>

Although this bill allows for workers to consider, on an individual basis, the impact of a child's sexual orientation or gender identity when making out-of-home and adoptive placement decisions, the reality is that many youth are not yet aware of, or do not feel safe being open about, their sexual orientations or gender identities when entering care.<sup>2,10</sup> This means that it is likely that such factors may not be considered when making decisions about placements, putting LGBTQ youth at risk of placements that may be harmful to their mental health and well-being. Furthermore, placing the responsibility of finding safe placements for LGBTQ

youth on individual caseworkers, rather than adopting proactive policies that promote the safety of all placements for LGBTQ youth, contributes to stress and burnout among child welfare workers, imperiling outcomes for all Kansas children in care. 11,12

In sum, LGBTQ youth often enter out-of-home or adoptive placements following significant traumatic events. Placing LGBTQ youth in homes that are unsupportive has the potential to lead to additional, compounding traumatic experiences, mental health challenges, and placement instability. In addition to having adverse mental and behavioral health consequences for the youth most impacted, placement instability also creates systemic concerns for the broader child welfare system, including additional financial costs, administrative burden, and worker burnout. It is our responsibility to do all that we can to promote the safety and well-being of Kansas children involved in the child welfare system, and I am concerned that this bill brings us further from that promise. As a social worker and researcher committed to the mental health of LGBTQ youth, I urge you to vote against this bill.

References

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