

**Supplemental Comments to the Office of Management and Budget on
Health and Human Services Notice of Proposed Rulemaking RIN 0991-AC16**

June 8, 2020

Family Equality submits these supplementary comments in addition to our December 19, 2019 comment letter on the above rule (“the Proposed Rule”) (RIN 0991-AC16) to address developments since then, including the COVID-19 pandemic and newly published research.

Our comments are directed to the impact of the proposed re-promulgation of 45 CFR §75.300(c) and (d) (“the Final Rule”) particularly, but not exclusively, as it pertains to the administration of child welfare programs under Title IV, Part E, of the Social Security Act, 42 U.S.C. §670 et seq. Family Equality strongly opposes the repeal and replacement of the Final Rule with the Proposed Rule for the following reasons:

- 1) the Proposed Rule ignores the facts demonstrating that discrimination limits the availability of foster and adoptive homes for neglected and abused children and thus harms children in foster care;
- 2) the Proposed Rule would increase the likelihood of inappropriate/unsuitable placement of children who do not belong to the agency’s approved religion or who identify as LGBTQ;
- 3) the Proposed Rule harms LGBTQ foster youth by allowing discrimination, service denials, and disparate treatment targeting them;
- 4) the Proposed Rule causes substantial harm to prospective foster and adoptive parents by removing prohibitions on discrimination against them;
- 5) the Proposed Rule causes substantial harm to LGBTQ parents and their children by removing prohibitions on discrimination against them.

Family Equality strenuously objects to OIRA finalizing this rule while only 6,024 of 121,039 comments received in response to the Notice of Proposed Rulemaking have been publicly posted. The lack of posting denies those holding 12866 meetings the full breadth of information that they should appropriately be afforded access to. We urge

OIRA to ensure the posting of all comments received, followed by an opportunity to schedule 12866 meetings with access to this information.

This delay is necessary because of new grant programs created under COVID-19 response legislation. HHS only allowed 30 days, including the Thanksgiving holiday, to provide comments on the Proposed Rule. Organizations and associations assessing the impact of the rule on those we represent were hard pressed to analyze the impact of this complicated rule on the over \$500 billion in existing HHS grant programs within that time frame. Since then, Congress has passed over \$3 trillion in additional spending to address the COVID-19 pandemic, including new grants provided through HHS. OIRA should allow American citizens and institutions the opportunity to assess the impact of the Proposed Rule on Americans seeking access to COVID-19 response services administered through HHS grants programs, and the impact of removing nondiscrimination protections for Americans from those programs under the Proposed Rule on the health and wellbeing of Americans which HHS is tasked with promoting. Additional time will be needed for individuals and organizations to review the authorizing legislation and any subsequent regulations to determine the policy and fiscal impact of the Proposed Rule on those grant programs.

Further, during the emergency period of the COVID-19 pandemic, Americans facing health and economic challenges due to the pandemic - including the over 20 million Americans who have lost their jobs since February 2020 - will be hard pressed to provide or prioritize needed substantive input to nonessential rulemaking such as this proposed rule. We urge OIRA to delay finalization of this and other nonessential rules - rules not addressing the economic and health crises created by the pandemic - until 90 days following the end of the COVID-19 emergency period declared by President Trump, to allow substantive input.

Finally, we are gravely concerned that HHS and OIRA have not adequately considered the fiscal impacts of the Proposed Rule. As outlined under the first section below, turning away qualified prospective foster and adoptive parents due to non-merit related reasons

such as religion, sex, sexual orientation, gender identity, or being in a same-sex marriage limits the pool of prospective foster and adoptive parents for foster youth across the United States, and this is associated with high costs for states and tribes.

For example, the average annual cost of foster care maintenance payments under Title IV-E and administrative costs for children in foster care in FY10 was \$25,782.¹ That same year, adoption subsidies for children whose parents received subsidies and administrative costs for an adopted child averaged IV-E agencies \$10,302 in costs.² Thus, successfully placing a foster youth in a foster home leading to adoption would lead to an annual cost savings of \$15,480 per child. Further, congregate care including group homes, residential treatment facilities, psychiatric institutions and emergency shelters costs state governments 3-5 times more than family foster care.³ Based on average annual foster care maintenance payments per child of \$19,107 in FY2010,⁴ placing a child with a foster family rather than having her remain in congregate care would save a minimum of \$38,214 *per child per year*.

It should be noted that all costs are not easily quantified, such as the long-term health benefits of a foster youth exiting foster care sooner to a permanent family; the cost savings estimated above are simply those within the foster care system itself.

¹ Zill, E. "Better Prospects, Lower Cost: The Case for Increasing Foster Care Adoption", *Adoption Advocate* (35), May 2011, National Council for Adoption
http://www.adoptioncouncil.org/images/stories/NCEA_ADOPTION_ADVOCATE_NO35.pdf

² *Ibid.*

³ National Conference of State Legislatures, "*Congregate Care, Residential Treatment and Group Home State Legislative Enactments 2009-2013*", February 2017 <http://www.ncsl.org/research/human-services/congregate-care-and-group-home-state-legislative-enactments.aspx>

⁴ *Ibid.* "Better Prospects, Lower Cost: The Case for Increasing Foster Care Adoption"

1) The COVID-19 Pandemic and New Data Reaffirm: Discrimination Limits the Availability of Foster and Adoptive Homes for Neglected and Abused Children and thus Harms Children in Foster Care

In a child welfare system that already is facing a nationwide shortage of foster and adoptive families⁵, limiting available homes to foster children by allowing foster care providers to turn away qualified prospective parents for non-merit reasons including their religion, sex, sexual orientation, gender identity, or other non-merit factors makes it less likely that young people in foster care will find the temporary or permanent family they deserve. The COVID-19 pandemic has made children more vulnerable to neglect and abuse. The child welfare system will likely face a spike in demands for placements, and the Proposed Rule limits the pool of qualified foster and adoptive homes that will be available.

Secretary Azar himself has recognized the current pandemic as “an unprecedented threat.”⁶ As COVID-19’s death toll in America climbs well past 100,000, Americans are living under emergency public health orders that have closed schools and workplaces. Stay-at-home orders, rampant rates of unemployment, and the closures of schools and workplaces all have a worsening effect on child abuse and neglect and place greater strains on the child welfare system, reaffirming the strong need to ensure that non-

⁵ John Kelly, D., Heimpel, J., Loudonback, C., Renick, K., Phagen-Hansel, E., Green, M. Zarate, “Foster Care Housing Crisis”, *The Chronicle of Social Change* (2017), available at: <https://chronicleofsocialchange.org/wp-content/uploads/2017/10/The-Foster-Care-Housing-Crisis-10-31.pdf>.

⁶ HHS.gov “Secretary Azar Statement on Launch of Phase 1 COVID-19 Vaccine Trial” *Health and Human Services Press Office* (March 16, 2020) <https://www.hhs.gov/about/news/2020/03/16/hhs-secretary-azar-statement-on-launch-of-phase-1-covid-19-vaccine-trial.html>

discrimination measures are in place to maximize the pool of qualified prospective families.

Jayne Coffman, medical director at Cook's Children's Hospital's in Fort Worth, Texas, predicts the cumulative effects of the COVID-19 pandemic will lead to more child abuse and mistreatment. "People have so much increased stress right now...they've got financial stress. Some people have lost their jobs or are worried about keeping their jobs. They've lost income. You've got stress from being overcrowded. Everyone's cooped up together. They feel like they can't get away from each other. These stressors can lead to abuse."⁷

These fears of a spike in abuse are well-founded based on recent research. In a 2019 systematic literature review of 11 studies, the authors found that "emergencies and natural disasters escalate the risk" of violence against children because families "face greater social and economic pressures."⁸ An increase in child abuse during a crisis stresses an already overburdened child welfare system. Now more than ever, children experiencing abuse and neglect at home will need the support of the child welfare system, and to turn away qualified prospective parents who can offer them supportive homes is harmful to the well-being of these children.

Despite this expected spike in demand for child welfare services, the closure of schools due to the COVID-19 pandemic will likely lead to significant underreporting of child

⁷ Schaefer Riley, N. "Children in Jeopardy: The Covid-19 lockdown will greatly strain the U.S foster-care system." *City Journal*. April 3, 2020 <https://www.city-journal.org/covid-19-lockdown-foster-care-system>

⁸ Seddigh, H., Salmani, I., Javadi MH., Seddighi S. "Child Abuse in Natural Disasters and Conflicts: A Systematic Review." *Trauma, Violence, & Abuse*, Mar. 2019 <https://www.ncbi.nlm.nih.gov/pubmed/30866745>

maltreatment. Debi Grebenik, ex-Director of foster care agency Maple Star Colorado told *City Journal*, a Manhattan Institute publication, reports that “one of the main ways that we find out about child abuse and neglect is from teachers’ reports.”⁹ Star Allen-Pettway told local Detroit news that “when kids are going to school or they’re involved in community activity, there are more people who have access to kids to be able to determine if there are instances of abuse or neglect.”¹⁰ The coupled effect of increased abuse and maltreatment, with reduced reporting opportunities due to school closures, is truly unprecedented.

The predictable consequence is that the current period of underreporting will be “followed by a big spike when things get back to normal,” according to Grebenik.¹¹

Cheryl Williams, assistant branch director of Bethany Christian Services Georgia told one reporter that “once kids start going back to school, there will be a major increase in referrals.”¹² And it is unlikely the child welfare system will be able to prepare sufficiently for the increase in children that will be flowing into the system soon. The Child Welfare League of America reports that “Child welfare offices and agencies have been forced to shut their doors in order to prevent staff members from becoming ill or because staff have tested positive for the virus.”¹³ In response to this unprecedented current and

⁹ *Ibid.* “Children in Jeopardy” <https://www.city-journal.org/covid-19-lockdown-foster-care-system>

¹⁰ FOX 2 Detroit “COVID-19 crisis increasing the need for foster parents in Michigan” *FOX 2 Detroit* (April 2, 2020) <https://www.fox2detroit.com/news/covid-19-crisis-increasing-the-need-for-foster-parents-in-michigan>

¹¹ *Ibid.* “Children in Jeopardy” <https://www.city-journal.org/covid-19-lockdown-foster-care-system>

¹² Bonds Staples, G., “Why surge in foster care placement will follow COVID-19 pandemic” *The Atlanta Journal-Constitution* (April 07, 2020) <https://www.ajc.com/lifestyles/why-surge-foster-care-placement-will-follow-covid-pandemic/NKtnijQQwZpfsL8XypJsr/>

¹³ James-Brown, C., “In Troubled Times, Advocating for Children and Young People who are Vulnerable” *Child Welfare League of America* (April, 2020) https://www.cwla.org/wp-content/uploads/2020/04/Editorial-Letter-_COVID19.pdf

future pressure on the child welfare system, it is more important than ever that we ensure all willing and qualified parents are able to care for children in need of loving homes.

LGBTQ parents are extremely willing foster and adoptive parents: same-sex couples are seven times more likely to be raising foster and adoptive children than different-sex couples.¹⁴ Non-discrimination laws and regulations, such as the Final Rule, encourage a diverse pool of parents by encouraging LGBTQ parents to participate – parents who are uniquely suited to affirm and advocate on behalf of the large numbers of LGBTQ youth. LGBTQ-headed families as placements do not just benefit LGBTQ foster youth; Erica Fener Sitkoff, executive director of Voices for Georgia’s Children, told local Atlanta media that “even without the COVID-19 pandemic, the division is always in need of foster homes, especially for teens, large sibling groups and children with special needs.”¹⁵ LGBTQ parents are more likely to foster and adopt these hard to place groups – older foster children, sibling groups, and children with special needs - than their non-LGBTQ counterparts¹⁶. The expected spike in demand for placements after the pandemic will make it crucial that LGBTQ parents are included in the prospective parent pool, and excluding them runs contrary to the well-being of foster children generally and particularly these at-risk groups of children who might not otherwise find a home.

¹⁴ Goldberg, S.K. & Conron, K.J., How Many Same-Sex couples are Raising Children?, *Williams Institute* (July, 2018) <https://williamsinstitute.law.ucla.edu/wp-content/uploads/Parenting-Among-Same-Sex-Couples.pdf>

¹⁵ *Ibid.* “Why surge in foster care placement will follow COVID-19 pandemic”

¹⁶ Brodzinski, D.M., Expanding Resources for Children III: Research-Based Best Practices in Adoption by Gays and Lesbians, *Evan B. Donaldson Adoption Institute*, (2011), available at: https://www.adoptioninstitute.org/wp-content/uploads/2013/12/2011_10_Expanding_Resources_BestPractices.pdf.

2) New Research Reaffirms the Proposed Rule Would Increase the Likelihood of Inappropriate/Unsuitable Placement of Children Who Identify as LGBTQ

Allowing child welfare providers to discriminate based on non-merit factors such as sexual orientation, gender identity, or religion – as the Proposed Rule permits – risks allowing the agencies to turn away the best possible placement for a child. It is estimated that as many as 30% of foster youth identify as LGBTQ, a number two to three times higher than their representation in the general population.¹⁷ Once in the child welfare system, LGBTQ youth suffer higher rates of discrimination and abuse than their non-LGBTQ peers. Thus, a pool of LGBTQ-affirming placements, including families headed by LGBTQ individuals and same-sex couples, is essential to ensuring a placement that is in the best interests of many of these youth. The Proposed Rule would diminish the possibility of placement in a home that may be best suited to their needs, and increase the likelihood of placements that are detrimental to the well-being of LGBTQ children.

A recent paper from the Center for the Study of Social Policy (CSSP) points out that LGBTQ youth often are placed in inappropriate placements in congregate care settings because the feelings of rejection due to a lack of affirming care and family placements is “pathologized,” precisely because systems are not always equipped to identify or

¹⁷ Baams L, Wilson B.D.M, Russell S.T. LGBTQ Youth in Unstable Housing and Foster Care. *Pediatrics*. 2019 <https://pediatrics.aappublications.org/content/pediatrics/early/2019/02/07/peds.2017-4211.full.pdf>
Martin, M., Down, L., & Erney, R. Out of the Shadows: Supporting LGBTQ youth in child welfare through cross-system collaboration. *Center for the Study of Social Policy* (2016)
<https://cssp.org/wp-content/uploads/2018/08/Out-of-the-Shadows-Supporting-LGBTQ-youth-in-child-welfare-through-cross-system-collaboration-web.pdf>

address the feelings of rejection.¹⁸ Given the particular needs of LGBTQ foster youth, it is no surprise that they experience greater placement instability, and thus, on average, more placements than their non-LGBTQ counterparts. A December 2019 literature review describes such placement instability as “a devastating experience” and finds that “higher levels of placement instability have been linked with less positive mental health outcomes and increased rates of emergency room admissions.”¹⁹ A recent study based on Adoption and Foster Care Analysis and Reporting System (AFCARS) and other data sources also found that placement instability has “a positive relationship with risk of homelessness.”²⁰ Recent research from Chapin Hall confirms that homeless youth “who had been in foster care were... more likely to identify as LGBTQ.”²¹ LGBTQ foster youth of color are in an even more precarious situation than their white counterparts, according to a literature review published in February 2020. Here, the authors concluded that the precarity of LGBTQ foster youth stems from their “increased risk for social isolation and family rejection,”²² funneling them into the child welfare system, and possibly accounting for their disproportionate representation there. “This is particularly

¹⁸ Citrin, A. & Martin, M. “Advancing Healthy Outcomes: Eight Ways to Promote the Health and Well-Being of LGBTQ+ Youth Involved with Child Welfare through FFPSA” *Center for the Study of Social Policy* (August 2019) <https://cssp.org/wp-content/uploads/2019/08/Policy-AdvancingHealthyOutcomes-Website-1.pdf>

¹⁹ Ossorio, D.F., de Carvalho, J. “Foster Care Placement and the Impact of Placement Instability” *International Journal of Humanities and Social Science Review* Vol. 5(4) (December 2019) <http://www.ijhssrnet.com/uploads/volumes/1577287331.pdf>

²⁰ Sneddon, D. “Community-level and Individual-level Predictors of Variation in Rates of Homelessness among Youth Transitioning Out of Foster Care” (2019) <https://archive.hshsl.umaryland.edu/handle/10713/11612>

²¹ Dworsky, A., Gitlow, E., Horwitz, B., & Samuels, G.M. (2019). Missed opportunities: Pathways from foster care to youth homelessness in America. Chicago, IL: *Chapin Hall at the University of Chicago*. https://www.chapinhall.org/wp-content/uploads/Chapin-Hall_VoYC_Child-Welfare-Brief_2019-FINAL.pdf

²² Hailey, J., Burton, W. & Arscott, J., “We Are Family: Chosen and Created Families as a Protective Factor Against Racialized Trauma and Anti-LGBTQ Oppression Among African American Sexual and Gender Minority Youth” *Journal of GLBT Family Studies*. Vol. 16(2), 176-191 (2020) <https://www.tandfonline.com/doi/full/10.1080/1550428X.2020.1724133>

true in African American communities,” the authors concluded, “where there is an increased lack of social support and acceptance for LGBTQ youth from their biological families, communities, churches, schools and healthcare systems.”²³ Due to the COVID-19 pandemic, the risk of social isolation among foster youth will be elevated, and the Proposed Rule would reduce the likelihood that these children and youth are placed in supportive homes that meet their unique needs.

3) Recent Research Reaffirms: the Proposed Rule Harms LGBTQ Foster Youth by Allowing Discrimination, Service Denials, and Disparate Treatment Targeting Them

The Proposed Rule allows direct discrimination against LGBTQ foster children and youth because of their sexual orientation and gender identity, which could result in LGBTQ children being denied needed support services, health care, and educational opportunities, as well as appropriate and affirming placements as described above. Recent research confirms the particular vulnerability of LGBTQ youth, and their need for extensive support systems, and the Proposed Rule could reduce their access to necessary care. Research has found that LGBTQ children are at an increased risk for parental abuse, and they are likely to be disproportionately affected by the conditions of this crisis. The COVID-19 pandemic, by causing families to stay in close proximity during stay at home orders, could exacerbate the family rejection and abuse faced by LGBTQ children at home. Family rejection and abuse based on their sexual orientation or gender identity are primary causes for LGBTQ youth entering foster care or being homeless. In

²³*ibid.*

a “meta-analysis of adolescent school-based studies that compared the likelihood of childhood abuse among sexual minorities vs sexual nonminorities”, researchers found that “sexual minority individuals were on average 3.8, 1.2, 1.7, and 2.4 times more likely to experience sexual abuse, parental physical abuse, assault at school or to miss school through fear, respectively.”²⁴ The disproportionate experience of child abuse suffered by LGBTQ children will likely be compounded by the expected increase in child abuse during this pandemic. If the disproportionate rejection of LGBTQ children increases during this time of crisis, and it is likely to, this reaffirms that child welfare agencies must ensure equitable treatment of and prevent denials of needed services to LGBTQ foster children simply due to their sexual orientation and gender identity. The Proposed Rule eliminates the “public policy requirement of HHS that no person otherwise eligible will be excluded from participation in, denied the benefits of, or subjected to discrimination in the administration of HHS programs and services based on non-merit factors such as ... gender identity or sexual orientation,” thus signaling to child welfare grants recipients that they can deny needed services to LGBTQ youth.

According to recent research by the National Conference of State Legislatures, mental health is a critical issue in foster care.²⁵ Eighty percent of foster youth have mental health issues, and they fare worse in areas ranging from substance and alcohol abuse, to post traumatic stress disorder.²⁶ Given the dire mental health needs of foster youth, adding

²⁴ Friedman, M. S., Marshal, M. P., Guadamuz, T. E., Wei, C., Wong, C. F., Saewyc, E., & Stall, R. (2011). A meta-analysis of disparities in childhood sexual abuse, parental physical abuse, and peer victimization among sexual minority and sexual nonminority individuals. *American journal of public health*, 101(8), 1481–1494. <https://doi.org/10.2105/AJPH.2009.190009>

²⁵ National Conference of State Legislatures *Mental Health and Foster Care* (Nov 1, 2019) <https://www.ncsl.org/research/human-services/mental-health-and-foster-care.aspx>

²⁶ *Ibid.*

the additional burdens of discrimination and denial of services runs contrary to the goal of ensuring the best-interests of LGBTQ children.

4) New Research Reaffirms: The Proposed Rule Causes Substantial Harm to Prospective Foster and Adoptive Parents by Removing Prohibitions on Discrimination Against Them.

Being turned away by a state funded child welfare provider simply because of who they are or what they believe can have a chilling effect on applicants' willingness to move forward as a foster or adoptive parent. While some prospective parents abandon their efforts altogether, even those who persevere may be delayed for significant periods of time. The government's role should be to encourage families to foster and adopt; the Proposed Rule fails to do so and, instead, creates the possibility and probability that more qualified parents will be turned away from being loving parents and helping meet the needs of our overburdened child welfare system which is expected to be further strained in the context of this pandemic.

But despite significant interest in foster care and adoption from the LGBTQ community,²⁷ new research based on interviews with LGBTQ prospective parents finds that they continue to "face multiple challenges to parenthood because of barriers such as discriminatory legislation and policies" and denial of services.²⁸ This study concluded

²⁷ *Ibid.* "How Many Same-Sex couples are Raising Children?"

²⁸ Levitt, H. M., Schuyler, S. W., Chickerella, R., Elber, A., White, L., Troeger, R. L., ... & Collins, K. M. (2020). "How discrimination in adoptive, foster, and medical systems harms LGBTQ+ families: Research on the experiences of prospective parents." *Journal of Gay & Lesbian Social Services*, 1-22. <https://www.tandfonline.com/doi/abs/10.1080/10538720.2020.1728461>

that anti-LGBTQ “attitudes and discrimination can lead to debilitating and enduring harm upon the economic, emotional, and relational well-being of growing LGBTQ+ families.”²⁹ Another recent study of 337 LGBTQ adults in the United States who reported delays or disruptions in the adoption or foster care process found that anti-LGBTQ attitudes and practices discourage prospective parents from entering the system, or prevents and delays them from actually parenting children.³⁰ In particular, the authors concluded that “placement delays and disruptions discourage LGBTQ people from adopting.”³¹ The Proposed Rule causes substantial harm to prospective foster and adoptive parents by removing the requirement in the Final Rule that all grant recipients “must treat as valid the marriages of same-sex couples.” This rule would cause same-sex couples to suffer the humiliation and indignity of being turned away when they want only to provide loving homes to abused or neglected children and would thus cause them substantial dignitary harm, and possibly lead them to abandon their efforts to become foster or adoptive parents.

5) Data on the LGBTQ Community During the COVID-19 Pandemic
Reaffirms: the Proposed Rule Causes Substantial Harm to LGBTQ Parents
and their Children by Removing Prohibitions on Discrimination Against
Them.

²⁹ *Ibid.* “Findings indicate that heteronormative attitudes and discrimination can lead to debilitating and enduring harm upon the economic, emotional, and relational well-being of growing LGBTQ+ families.”

³⁰ Goldberg, A.E, Frost, R.L., Miranda, L., Kahn, E., “LGBTQ individuals' experiences with delays and disruptions in the foster and adoption process.” *Children and Youth Services Review*, Vol. 106 (2019) <https://www.sciencedirect.com/science/article/pii/S0190740919305791>

³¹ *Ibid.*

The Proposed Rule could harm children of LGBTQ parents by permitting discrimination in removals and family prevention and support services provided under Title IV of the Social Security Act, the Child Abuse Prevention and Treatment Act, and the Family First Prevention Services Act, as well as in child care and after-school programs. Under the Proposed Rule, parents who identify as LGBTQ and/or who are in same-sex marriages could be denied prevention services designed to preserve families and avoid foster care, such as substance abuse and mental health services. Child welfare providers could also discriminate against parents of origin who meet criteria for family reunification because they identify as LGBTQ or are in a same-sex marriage, or deny them services to support family reunification, undermining the well-being of their children during the socio-economic crisis of this global pandemic.

The COVID-19 crisis is revealing and likely deepening existing health and economic disparities and inequities between LGBTQ and non-LGBTQ populations, and the removal of prohibition on discrimination against LGBTQ parents and their children will further widen these disparities. In a survey of 1,000 U.S. adults conducted in April 2020, LGBTQ individuals reported being “much worse off” at almost twice the rate of the general population.³² They were 36 percent more likely than the general population to have lost work after the closing of nonessential businesses around the country.³³

Recent research shows that LGBTQ people have greater rates of health complications that could put them at higher risk of contracting COVID-19 or heighten complications

³² Lang, N.. “Coronavirus Finance Troubles Have Hit LGBTQ People Extra Hard” *Vice News* (April 23, 2020) https://www.vice.com/en_us/article/y3myq5/coronavirus-finance-troubles-have-hit-lgbtq-folks-extra-hard

³³ *Ibid.*

after contraction. For example, LGBTQ people are more likely to be smokers than other Americans.³⁴ They also are more likely to have asthma. LGBTQ Americans, especially those who are nonwhite, are also more likely to have chronic medical conditions such as HIV or AIDS. Access to health care can also be contributing to high cases of COVID-19 among LGBTQ Americans. Roughly 17% of LGBTQ adults do not have any health insurance coverage, compared with 12% of non-LGBTQ American. This research demonstrates that LGBTQ families, including families of origin and foster and adoptive families, will likely have increased needs for supportive and preventative services during this pandemic, but the Proposed Rule will only increase the probability they will face barriers to accessing the care and services they need.

³⁴ Kozuch, E. "HRC Releases Research Brief on the Vulnerabilities of the LGBTQ Community During the COVID-19 Crisis" (March 20, 2020)
<https://www.hrc.org/blog/hrc-releases-research-brief-on-lgbtq-community-during-covid-19-crisis>