The need for safe spaces: Exploring the experiences of homeless LGBTQ youth in shelters

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ABSTRACT

Studies indicate LGBTQ youth are at higher risk of homelessness (2–13 times) than their heterosexual cisgender counterparts and that they represent a substantial portion of youth utilizing housing and shelter services. Some authors have provided anecdotal (rather than empirical) examples of LGBTQ youth experiencing abuse or mistreatment in shelters; most studies focusing on LGBTQ homeless youth have been conducted in large cities and have rarely collected data from both youth and providers. Using an exploratory, grounded theory approach, this study utilized data from interviews with LGBTQ youth with a history of homelessness as well as service providers working with this population in a mid-sized Northeastern city. Findings suggest youth experience multiple challenges, barriers, and mistreatment in the shelters; further, data suggests several ideas about how to transform shelters to better meet the needs of LGBTQ youth.

1. Introduction

Homelessness among lesbian, gay, bisexual, transgender, and questioning/queer (LGBTQ) youth has been consistently demonstrated to be a serious social problem in the United States. It has been estimated that between 300,000 and 600,000 U.S. homeless youth may identify as LGBTQ (Ferguson-Colvin & Maccio, 2012). Research indicates that LGBTQ youth are at greater risk of homelessness (2–13 times) than their heterosexual cisgender counterparts, and that they are more likely to leave home as the result of physical abuse at home, often because of conflicts with parents about sexual orientation (Cochran, Stewart, Ginzler, & Cauce, 2002; Corliss, Goodenow, Nichols, & Austin, 2011; Ray, 2006). Studies of service providers conducted by Durso and Gates (2012) and Choi, Wilson, Shelton, and Gates (2015) indicated that while non-LGBTQ issues were sometimes cited as the primary reason for homelessness, the most common reason for LGBTQ youth running away from home or being kicked out was related to parents’ rejection of sexual orientation or gender identity. Homeless youth providers have reported that the proportion of LGBTQ youth seeking services has increased over the past ten years, with the increase being most noteworthy for transgender youth (Choi et al., 2015).

Once homeless, LGBTQ youth are at greater risk than non-LGBTQ youth for a variety of experiences that can detrimentally affect their physical and mental health, such as physical and sexual trauma, risky survival strategies such as survival sex, unprotected sex, increased risk for HIV/AIDS, more sexual partners, and more illicit drug use, (Cochran et al., 2002; Corliss et al., 2011; Gangamma, Slesnick, Toviessi, & Serovich, 2008; McLaughlin, Hatzenbuehler, Xuan, & Conron, 2012; Walls, Potter, & Van Leeuwen, 2009; Whitbeck, Chen, Hoyt, Tyler, & Johnson, 2004). In their survey of homeless youth providers, Choi et al. (2015) found that LGBTQ youth experience longer homelessness than non-LGBTQ youth. Additionally, transgender youth may be particularly vulnerable, as providers perceived transgender youth to have experienced more bullying, family rejection, and physical and sexual abuse than their LGBQ counterparts (Choi et al., 2015).

Because LGBTQ youth experience homelessness at a disproportionate rate, it would logically follow that they would also represent a disproportionate number of the youth utilizing shelter and housing services. Durso and Gates (2012) surveyed 381 service providers representing 354 agencies throughout the United States to understand the experiences of homeless LGBTQ youth. Results indicated that 28% of youth utilizing all types of housing programs were LGBT (24% LGB and 4% transgender). When specifically looking at emergency shelters, 21% of youth were LGBT (17% LGB and 4% transgender). While Durso and Gates’s (2012) study provided information about providers’ perceptions of LGBTQ youth’s experiences of family rejection and increased mental and physical health risks, it did not shed light on LGBTQ youth’s actual experiences while in housing and shelter programs.
Similarly, Maccio and Ferguson (2016) interviewed 24 directors and staff from 19 homeless youth shelters from across the U.S. to identify gaps in services for LGBTQ youth. Findings indicated numerous service gaps including the need for increased services for housing, education, employment, family support, and LGBTQ-affirming mental and medical health, as well as more cultural competency training and advocacy. While these recommendations for improving services for LGBTQ homeless youth are helpful, the analysis did not consider the direct voices of homeless LGBTQ youth.

Some studies have explored homeless youths’ direct experiences with services, though have not been specific to LGBTQ-identified youth. Altena, Beijersbergen, and Wolf (2014) measured the experiences of Dutch homeless youth and found client-worker relationships to be the most positive aspect of shelter and community care services, with the results of services being least positive. The overall evaluation score of services were most strongly associated with client-worker relationships and living conditions in the shelters, suggesting these variables are vital aspects in service performance. However Altena et al. (2014) did not measure LGBTQ identities as a demographic variable, thus could not provide information about what experiences may be unique to these youths.

Another study (Ha, Narendorf, Santa Maria, & Bezette-Flores, 2015) conducted focus groups with homeless young adults (age 18–24) to examine barriers and facilitators to shelter utilization. Ha et al. (2015) found that facilitators to shelter utilization included the desire to extract themselves from street life and turn their lives in a new direction, having supportive others, and shelters’ ability to connect them to other services. Barriers to shelter utilization included stigma/shame, self-reliance/pride, lack of shelters, shelter conditions, staff attitudes that are not acceptable to them, and restrictive shelter rules. While this provides some information about young adults’ choice whether or not to utilize shelter services, it does not address the unique experiences of LGBTQ youth, youth under the age of 18, or actual experiences while being housed in shelters.

An additional limitation of the existing research on LGBTQ homeless youth is that most of the studies have been conducted in larger US cities with a population of one million or more, such as New York City, Los Angeles, and Chicago. Few studies have examined this problem in mid-sized (population between 250,000 and 1,000,000) and smaller (population less than 250,000) cities. While some recent studies have examined homeless youth in mid-sized cities, the studies have been quantitative and have focused experiences of discrimination and stigma (related to race sexual identity, and homelessness) and mental health (Gattis & Larson, 2016; Gattis & Larson, 2017), rather than the qualitative and descriptive experiences of youth in shelters. Gwadz et al. (2017) sought to understand organizations for runaway and homeless youth under the age of 18, or actual experiences while being housed in shelters.

To our knowledge, no studies to date have qualitatively studied what happens to LGBTQ youth while in homeless shelters, from both the perspective of youth as well as providers in a mid-sized city. Some authors have provided anecdotal examples of LGBTQ youth experiencing abuse or mistreatment in shelters and commendably advocated for changing the shelter system to be safer for LGBTQ youth (e.g., Hunter, 2008; Woronoff et al., 2006). However, research demonstrating what LGBTQ youth are experiencing while staying in shelters is limited. This study attempts to add to this research using exploratory methodology, asking youth and service providers for direct accounts of what is happening to LGBTQ youth in homeless shelters in a mid-sized city in the Northeast United States. This research was undertaken in response to community agencies in the area asking for research to understand what is happening for local LGBTQ homeless youth. These community agencies assisted in the design of this study and the recruitment of participants; in turn, results from this study have been shared with local community agencies who are now using this data to apply for further funding to expand local services for this population.

2. Method

2.1. Researcher reflexivity and minority stress theoretical orientation

Qualitative researchers understand that who we are influences the collection, selection, and interpretation of our data (Finlay, 2002). Thus it is important for us to engage in self-reflexivity in order to be aware of how our role impacts the data. Both authors began this research having assumptions and personal experiences of LGBTQ-related stigma and resilience that guided interviews and data analysis. The first author identifies as a pansexual cisgender woman who came out in early adulthood. While I (initials) have experienced homo/bi/pan-phobia first-hand, I have not experienced homelessness. I am also a therapist who has specialized in therapy with transgender people and their families for nearly 20 years, thus I have witnessed countless experiences of LGBTQ-related stigma, discrimination, and marginalization. Additionally, I have watched many clients grow and flourish despite family and social rejection and mistreatment, demonstrating remarkable resilience.

The second author identifies as a lesbian cisgender woman who came out in early adulthood. I (initials) have first-hand experiences with homophobia and discrimination based on sexual orientation, and I grew up in the foster care system, though I have not experienced homelessness. As a member of the local LGBTQ community, I have known LGBTQ youth in the past who have been homeless and who have engaged in survival sex. I also know from personal experience that it is possible to rise above early life disadvantages and be successful after living through traumatic childhood experiences.

Our attention to stigma and resilience can also be understood through the lens of Meyer’s (1995, 2003) Minority Stress Model. This model identifies four sources of minority stress: external/environmental events (such as experiences of discrimination, microaggressions, assaults, and other general threats to safety or security), the anticipation of mistreatment, internalized prejudice, and concealment of sexual and gender identity. Because LGBTQ people are exposed to these additional sources of stress, they sometimes also develop coping skills and social support that help buffer the negative effects of the stressors (Meyer, 1995; Meyer, 2003). This resilience takes two forms, the first being individual resilience, which includes qualities that a person possesses which aid in coping with stress. The second form is community resilience, which refers to identifying with and connecting to other people in one’s community and opportunities for social support, helping people in building coping strategies (Meyer, 2015). As we designed interview questions and analyzed data, we were interested both in the unique stressors experienced by LGBTQ homeless youths as well as how they were able to survive (and sometimes thrive) in the face of these challenges.

2.2. Use of grounded theory

Grounded theory studies often ask, 'What is happening here?' (Glaser, 1978). Because we were interested in finding out what was happening for local LGBTQ youth experiencing homelessness, grounded theory was a good fit for our study. Grounded theory emphasizes creating analyses of action and process (Glaser, 1978; Glaser & Strauss, 1967) and allows for the rich data collection strategy of gathering data from multiple perspectives to build theory about the experiences being studied (Charmaz, 2014). Further, in studies informed by grounded
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