




WHERE AM I GOING TO GO?



**INTERSECTIONAL
APPROACHES
TO ENDING
LGBTQ2S YOUTH
HOMELESSNESS IN
CANADA & THE U.S.**



**Canadian
Observatory on
Homelessness**
homelesshub.ca



EDITED BY: ALEX ABRAMOVICH & JAMA SHELTON

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A very special thanks to all of the young people who have taken the time to share their stories with us over the years.

DEDICATION

This book is dedicated to all of the LGBTQ2S youth who are experiencing homelessness. We love you and we commit to continuing our work to create a socially, economically, and racially just world where every young person has a safe place to call home.

PROLOGUE

Coming out is hard for everyone. Sometimes there is no way of knowing how homophobic or transphobic your parents or family will be: sometimes we are unpleasantly surprised. Below are two separate yet similar stories, at once unique and not unique, that may give you a felt sense of the myriad of LGBTQ2S youth experiences. We ask you to consider these stories as an entry point to this book.

All We Want is To Be Heard

Bentley Burdick

When I was on the streets, a lot of ‘adults’ gave me advice. Really, they all just thought they knew more than me, that they understood my life better than I did. I was young, small and wide-eyed enough that they didn’t question those beliefs in themselves. As an adult who has now, more or less, overcome that struggle without any substantial help from those same adults—because, when push came to shove, their advice crumbled and all I was left with was the vague memory of some random, bad advice—I can say that at the end of the day, no one could tell me how to fix my life.

No one had a secret answer to getting off the streets. The whole “if you do this, then—bam!—everything is better!” approach worked about as well as any get-rich-quick scheme would. And yet, if you ask anyone who has never starved, never experienced housing instability, never been kicked out by their families, most of them will have an ‘answer.’ A better solution. My soon-to-be mother-in-law is a great example of this. One of the first times I met her, I told her a bit about my life—the struggles I’ve faced and the situations I was forced into when I was just a kid, how I had to grow up under that pressure to become the person I am today. At the time, she was open to hearing my story, but later? Later came the small barbs of comment. One day, in the car with my fiancé, we drove past a man holding a sign by the side of the road, asking anyone for help. The first words out of my future mother-in-law’s mouth? “Oh, I hate paying them. I want to help people, but most get themselves into a position like that.”

Maybe she didn’t mean to be hurtful. She’s an all-round very kind and considerate woman. But it shows that even the sweetest of people can be tainted by the judgement of those experiencing homelessness that has spread throughout our culture. Everyone should be

kinder, more understanding, and help each other—but in helping each other, especially young adults struggling with housing instability because of their identities or sexualities, know that sometimes the best thing you can provide for them is to not provide advice that judges them. In fact, the best way to help is by just listening, because nine times out of ten, we'll figure it out ourselves with support along the way. All we want is to be heard.

Welcome To My Time in The Shelter System

Teal-Rose Jaques

You walk through the doors; no idea what awaits you on the other side. It is a nice place, lovely woodwork, big open spaces and hardwood floors. You get only a moment to take that in, though, because you are instantly blasted by noise, so much noise. Residents, staff, phones, dominoes slamming on tables, a fight or two. It is sensory overload: the space completely contradicts its appearance. You are lost, and not a goddamn person in that room wants to help you. You won't meet someone who does for another day or two, and you will cling to them as a lifeline. It is cold out, and you are hungry, scared and alone.

No one cares about you anymore: your friends have abandoned you, your parents have rejected you, and your pet, the best friend you ever had growing up, will likely live the rest of his life never seeing you again. Employers have learned shelter's addresses: they don't want you. You don't matter anymore. You have dropped below a line in society that makes you invisible to 99% of positive interactions, but you have become a glowing neon sign for hate, as if you weren't already, being a queer, trans, fat and neuro-atypical person.

You decide to stick to your guns, be exactly who you are, fuck everyone else. If you don't matter anymore, you get to be you! But staff and resident alike make sure to beat that out of you. To staff, you will be compliant and subservient or suffer the consequences: they hold your housing, belongings, everything at their fingertips. To residents, you will become an asshole, who feels nothing and will fight everyone, or else you are weak, pathetic, the thing that is wrong with the world. Even among people society rejects, you are a reject. They threaten people like you, jump them in the shower and beat them, cut your door with knives, and staff do nothing: maybe they agree, or didn't sign on for that much work, or are held back by management, which is tying their hands until they can't take it and quit. You decide to fight back, make changes: you have nothing to lose anymore! No one wants you, no one fucking sees you, so you will do this and die. You

expect to die, by their hand or your own. It will happen, so use up every bit of energy you have, go super nova! Take the punishments: lose housing at places that will later congratulate you for making them change, but will never apologize for punishing you for it; that will commend you on your strength, where once they threatened you for it; that will pat you on the same back they once lashed with their actions. Now that people read your words, you matter, and they need to look good. They don't want to be the bad guy in your story, but you were never meant to have a story: you were meant to be nothing and KNOW that, accept that, live that.

Welcome to my time in the shelter system. Enjoy your stay.

About the Authors

Bentley Burdick

An advocate native to Montana, Bentley works within the homeless youth and LGBTQ populations, ultimately spreading acceptance and knowledge through the outlet of writing with plans to one day take the world by storm with the carefully crafted form of his words. www.caughtunderglass.com

Teal-Rose Jaques

During five years navigating and fighting the shelter system of Toronto, Teal-Rose Jaques decided to help fix the system she saw herself and others struggling against in a more official capacity, enrolling in George Brown College's Community Work program and graduating with a diploma in Community Work. Her story has been featured on a number of different media and she has been integral in reshaping the LGBTQ2S policy for a number of Toronto shelters.

LETTER TO THE READER

Dear Reader,

Where am I going to go? What am I going to do? Throughout our careers, we've been asked these questions by LGBTQ2S young people experiencing homelessness a countless number of times. We've been asked versions of the same questions by service providers working with youth experiencing homelessness, advocates for LGBTQ2S youth, and policy makers—*Where do we go from here? What are we going to do?*

The problem of LGBTQ2S youth homelessness can overwhelm us if we let it. It is a big problem, involving other big problems, like poverty, racism, cissexism, transphobia, heterosexism, homophobia, and colonialism. We see the impact of these, and LGBTQ2S young people experiencing homelessness live the impact of these, every day. For example, some of us live in cities or provinces that are unwelcoming to LGBTQ2S people. This, in turn, may make the available services for LGBTQ2S young people equally as unwelcoming.

Almost all LGBTQ people going into shelters have a fear of them, because it isn't a matter of if it's dangerous, but just how dangerous it will be.

Many of us live in cities or provinces that are hostile toward Indigenous youth and Black youth, often resulting in violence toward youth of colour, stigma, and social isolation. Systems are often not designed to meet the specific needs of youth who have experienced multiple stigmas related to racism, homophobia, and transphobia. As such, providers working within these systems may not always understand how to meet the needs of youth with intersecting identities, leaving LGBTQ2S youth of colour experiencing homelessness with few places to turn to for support.

As a queer person I can find a few resources which may help, but as a Black trans woman, the margins are even more narrow.

Most of us live in places that criminalize the experience of homelessness. The notion that youth experiencing homelessness make the streets unsafe is still a widely held belief. Public discourse on crime and homelessness tends to revolve around youth experiencing homelessness as the perpetrators of crime, rather than the victims, which has been a key factor leading to the criminalization of homelessness. However, a major part of the problem

is that there is not nearly enough housing for youth experiencing homelessness, leaving young people with no choice but to fend for themselves. Youth are then criminalized for figuring out how to survive without any support or assistance; they are ticketed for sleeping outside, trespassing, and loitering. And when they engage in street economies to buy the things that they need, they are arrested.

That's when I started getting in trouble, like, with the police and everything.

So, *where do we go from here? What are we going to do?* If you've picked up this book, that is a good first step! In this volume you will find some of the latest research related to LGBTQ2S youth homelessness, as well as case studies of innovative program models that are working alongside LGBTQ2S youth experiencing homelessness in Canada and the U.S. You will also have the opportunity to learn from several young people who have contributed to this book. We believe that those most impacted by LGBTQ2S youth homelessness—LGBTQ2S youth themselves—must be at the centre of conceptualizing and creating the solutions that will help us end LGBTQ2S youth homelessness.

As queer researchers with a profound understanding of family rejection and the complexities of coming out, as well as the relationship between coming out and homelessness, we are deeply connected to this work. Our relationship to this work has taught us about reflexivity and the importance of being reflective researchers.

We approached the creation of this book, much like we approach our everyday work, committed with a full heart. This is a project of love and hope. We put this book out into the world with the hope that it may help create a necessary shift, so that all young people have a safe place to call home, and that together we may work to end LGBTQ2S youth homelessness.

In solidarity,
Alex & Jama

A FEW NOTES ABOUT LANGUAGE FOR THE READER

A glossary of important terms used throughout the book can be found on page 354, however, we would like to clarify certain key terms that are integral to every chapter and case study in the book.

We have chosen to use the acronym LGBTQ2S throughout the book. This stands for lesbian, gay, bisexual, transgender, queer, questioning and two-spirit. At times, queer and trans will be used interchangeably with LGBTQ2S. Exceptions to the consistent use of LGBTQ2S include circumstances when the acronym did not accurately reflect the population of youth served in programs or cited in research, for example, when authors are citing specific research and case studies from programs that did not specifically include two-spirit youth.

We recognize that the terms youth use to name themselves may vary widely, and these terms may differ for youth in different geographic locations, and youth of different ages, races, gender and sexual identities, and those exposed to LGBTQ2S people and communities. From a practice perspective, we recommend that providers remain open and flexible in their language usage, creating opportunities for youth to name themselves, and affirming youth in the identities they name for themselves. One way to ensure youth are able to share their identities is by asking open-ended questions about sexual orientation and gender identity, and honouring the words youth share.

We have also used the phrase “youth experiencing homelessness” throughout the book. This is an intentional shift from the phrase “homeless youth.” Even though this can make for lengthier, and at times ‘clunkier’ sentences, this rephrasing marks an important ideological shift in the way we conceptualize homelessness. It makes us think about homelessness as an issue, rather than a condition. This person-first language can help break down damaging stereotypes about homelessness and can also inform the approach used to address homelessness.

The terms ‘youth’ and ‘young people’ are used throughout this book, and are meant to refer to people between adolescence and young adulthood. Youth-serving organizations typically categorize youth as being between the ages of 16 and 24 years, however, federal and municipal governments in Canada tend to define youth up to the age of 29 years. The definition of youth in the United States varies, based on the system with which youth

are involved. For example, the Runaway and Homeless Youth Act specifies that youth are “not more than 21 years of age,” while the U.S. Department of Housing and Urban Development considers youth to include young people through the age of 24.

The Canadian definition of youth homelessness states:

‘Youth homelessness’ refers to the situation and experience of young people between the ages of 13 and 24 who are living independently of parents and/ or caregivers, but do not have the means or ability to acquire a stable, safe or consistent residence.

Youth homelessness is a complex social issue because as a society we have failed to provide young people and their families with the necessary and adequate supports that will enable them to move forward with their lives in a safe and planned way. In addition to experiencing economic deprivation and a lack of secure housing, many young people who are homeless lack the personal experience of living independently and at the same time may be in the throes of significant developmental (social, physical, emotional and cognitive) changes. As a result, they may not have the resources, resilience, education, social supports or life skills necessary to foster a safe and nurturing transition to adulthood and independence. Few young people choose to be homeless, nor wish to be defined by their homelessness, and the experience is generally negative and stressful.

Youth homelessness is the denial of basic human rights and once identified as such, it must be remedied. All young people have the right to the essentials of life, including adequate housing, food, safety, education and justice (Canadian Observatory on Homelessness, 2016).

Just as definitions of youth vary in the U.S., so do definitions of youth homelessness. Current definitions include:

The Runaway and Homeless Youth Act

The Runaway and Homeless Youth Act (RHYA) defines homeless youth as individuals who are “not more than 21 years of age...for whom it is not possible to live in a safe environment with a relative and who have no other safe alternative living arrangement.” This definition includes only those youth who are unaccompanied by families or caregivers.

The U.S. Department of Education

The U.S. Department of Education defines homeless youth as youth who “lack a fixed, regular, and night-time residence” or an “individual who has a primary night-time residence that is a) a supervised or publicly operated shelter designed to provide temporary living accommodations; b) an institution that provides a temporary residence for individuals intended to be institutionalized including welfare hotels, congregate shelters, and transitional housing for the mentally ill; or c) a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.” This definition includes both youth who are unaccompanied by families and those who are homeless with their families.

The U.S. Department of Housing and Urban Development

The U.S. Department of Housing and Urban Development (HUD) defines homelessness for their program by four categories. The categories are:

- “Individuals and families who lack a fixed, regular, and adequate night-time residence (includes a subset for an individual who resided in an emergency shelter or a place not meant for human habitation and who is exiting an institution where he or she temporarily resided);
- Individuals and families who will imminently lose their primary night-time residence;
- Unaccompanied youth and families with children and youth who are defined as homeless under other federal statutes who do not otherwise qualify as homeless under this definition; and
- Individuals and families who are fleeing, or are attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member.”

We must acknowledge that numerous young people we have worked with over the years have reported not seeing themselves reflected in conventional definitions of homelessness. Some young people have described themselves as ‘street-involved.’ Others have described themselves as ‘lease-less’, but not homeless, even if they were staying in emergency shelters, couch-surfing, or living in other precarious situations. This was in part due to stigma, shame and pride.

I didn't like people saying I was homeless. So I came up with the term 'home unfortunate.' And my definition for that term is, it's unfortunate I don't have a real home.

This is an important insight that tells us the explanation of such a complex phenomenon as homelessness may not be fully captured in a definition. Perhaps a longer and more sustained explanation or account that captures the fluid nature, ever-changing circumstances and chronic instability under which LGBTQ2S youth experiencing homelessness often live, can reveal and explain what it means to experience homelessness, as well as provide direction for action.

CONTENTS

| | | |
|------------|---|------------|
| 1 | Introduction: Where are we now? <i>Alex Abramovich & Jama Shelton</i> | 1 |
| 2 | Homeless & Street-Involved Indigenous LGBTQ2S Youth in British Columbia: Intersectionality, Challenges, Resilience & Cues for Action <i>Elizabeth Saewyc, Brooke Mounsey, Jessica Tourand, Dana Brunanski, David Kirk, Jeffrey McNeil-Seymour, Kyle Shaughnessy, Samantha Tsuruda & Natalie Clark</i> | 13 |
| 2.1 | It's A Kiki... <i>Tina "TJ" Jones & Jermaine "Jlin" Ellis</i> | 41 |
| 3 | Pathways Into and Out of Homelessness for LGBTQ2S Youth <i>Coco Wheeler, Christa Price & Ian Ellasante</i> | 49 |
| 3.1 | Ruth Ellis Center Family Preservation Program, Detroit, Michigan <i>Jessie Fullenkamp</i> | 63 |
| 4 | Discrimination & Mental Health Outcomes of Black Youth Experiencing Homelessness <i>Maurice N. Gattis & Andrea Larson</i> | 73 |
| 4.1 | Central Toronto Youth Services <i>David Yeh, Lindsay Elin, LeeAndra Miller, Kathleen O'Connell & Robert Sears</i> | 99 |
| 5 | The Youth Homelessness Crisis and a Path to End It: Interventions to Better Serve LGBTQ2S Youth Experiencing Homelessness <i>Larry Cohen, Colin McSwiggen, Ronald Johnson, Kit Cali & Matthew Montelongo</i> | 115 |
| 5.1 | Youth Wisdom, Harm Reduction & Housing First: RainCity Housing's Queer & Trans Youth Housing Project <i>Aaron Munro, Vikki Reynolds & Marria Townsend</i> | 135 |
| 5.2 | Messy and Magical: A Closer Look at the GLBT Host Home Program <i>Raquel (Rocki) Simões & Khalid Adam</i> | 155 |
| 5.3 | YMCA Sprott House: Creating a Better Space for LGBTQ2S Youth in Toronto <i>Kate Miller, Kavita Bissoondial & Morgan</i> | 169 |
| 5.4 | Ozone House: LGBTQ2S Inclusive Emergency Services <i>Katie Doyle</i> | 183 |

| | | |
|------------|---|------------|
| 6 | Black Queer Youth, Unstable Housing and Homelessness: Understanding the Impact of Family Conflict, School and Community-Based Violence on Racialized LGBTQ2S Youth | 205 |
| | <i>Lance T. McCready</i> | |
| 6.1 | The Black Queer Youth Initiative: Challenging Racism, Stigma & Exclusion | 217 |
| | <i>Adam Benn</i> | |
| 6.2 | Unapologetic: The Young Black Gay Men's Leadership Initiative | 229 |
| | <i>DaShawn Usher, D'Angelo Morrison, Kahlil Barton-Garçon & D'Angelo Cameron</i> | |
| 7 | Addressing the Vocational Needs of LGBTQ2S Youth Experiencing Homelessness with Supported Employment | 241 |
| | <i>Kristin M. Ferguson</i> | |
| 7.1 | LEAP into Action: Preparing LGBTQ2S Youth for the Workforce | 263 |
| | <i>Natasha Jones & Michelle Dugan</i> | |
| 8 | Addressing the Legal Needs Of LGBTQ2S Youth Experiencing Homelessness | 273 |
| | <i>Emily Chan & Julia Huys</i> | |
| 8.1 | The Peter Cicchino Youth Project (PCYP) & the Reality of Street-Involved Youth & Youth Experiencing Homelessness in NYC | 295 |
| | <i>Lee Strock & Joey Lee</i> | |
| 9 | Policy into Practice: How Government Can Play a Role in Supporting LGBTQ2S Youth | 309 |
| | <i>Stephen Gaetz</i> | |
| 9.1 | A Provincial Response to LGBTQ2S Youth Homelessness | 321 |
| | <i>David French</i> | |
| 10 | Conclusion: The Way Forward | 335 |
| | <i>Alex Abramovich & Jama Shelton</i> | |
| | Epilogue | 347 |
| | <i>Christian Carmen Olivia Jane & Ryan</i> | |
| | Creative Pieces | 350 |
| | <i>Alex Abramovich & various queer and trans youth experiencing homelessness, arranged by Jama Shelton</i> | |
| | Glossary of Important Terms | 354 |

1 INTRODUCTION: WHERE ARE WE NOW?

Alex Abramovich & Jama Shelton

Try living in a world where it's hard enough to love yourself, but even harder to be accepted. Going into a place where you think you can be safe, going into a place where you assume you can get help, but every door you try to open is locked or sealed shut. You're trying to walk back to where you started, but that door is also locked. You try very hard to break down that door. Once you get through, you realize you cannot be you.

A, 23 years old

Young people experiencing homelessness make up 20% of the homeless population in Canada (Gaetz, Gulliver, & Richter, 2014). Recent data on the prevalence of youth homelessness in Canada includes the first pan-Canadian study of young people experiencing homelessness, *Without a Home: The National Youth Homelessness Survey*, which involved 1,103 respondents from 47 communities across 10 provinces and territories (Gaetz, O'Grady, Kidd, & Schwan, 2016). Over the course of one year, approximately 40,000 young people experience homelessness in Canada, and between 6,000 and 7,000 do so on any given night (Gaetz et al., 2016). Homelessness among families and dependent children and youth has recently been cited as an invisible and growing problem across Canada (Gulliver-Garcia, 2016).¹

Accurate data on the prevalence of youth homelessness in the United States (U.S.) are lacking, due to challenges collecting this data and inconsistent definitions of youth homelessness (Anthony & Fisher, 2016). The U.S. annual Point-in-Time (PiT) count identified 180,760 children and youth under the age of 25 experiencing homelessness in January 2015 (Department of Housing and Urban Development, 2015). Almost one-quarter of those were unaccompanied young people under the age of 25 (Department of Housing and Urban Development, 2015).

Data on the prevalence of lesbian, gay, bisexual, transgender, queer, questioning and Two-Spirit (LGBTQ2S) youth experiencing homelessness are also lacking; however, it has been

¹ Between January and April 2016, the Government of Canada supported the first homeless count coordinated between 30 communities across Canada, employing a Point-in-Time (PiT) count approach; however, results were not yet available when this introduction was written.

known for over two decades that LGBTQ2S youth are overrepresented in the homeless youth population, and are often unsafe in emergency shelters and housing programs (O'Brien, Travers, & Bell, 1993; Ray, 2006; Savin-Williams, 1994). Though a growing body of research examines LGBTQ2S youth homelessness, gaps in knowledge remain, and large-scale data collection continues to be limited. Research shows that LGBTQ2S youth make up a disproportionate number of youth experiencing homelessness in North America (Abramovich, 2012; Choi, Wilson, Shelton, & Gates, 2015; Durso & Gates, 2012; Maccio & Ferguson, 2015; Kipke, Weiss, & Wong 2007; Quintana et al., 2010; Van Leeuwen et al., 2006). Estimated to comprise 20–40% of the overall homeless youth population, the percentage of LGBTQ2S youth experiencing homelessness is at least three times greater than the percentage of the general LGBTQ2S youth population, which is thought to be between 5–10% of the overall youth population (Crossley, 2015; Josephson & Wright, 2000; Quintana et al., 2010). *The National Youth Homelessness Survey*, which recently surveyed 1,103 youth experiencing homelessness across Canada, found that 29.5% of young people surveyed self-identified as LGBTQ2S, while 6% self-identified as transgender, Two-Spirit, and non-binary (Gaetz et al., 2016). A recent survey of street outreach programs in the U.S. found that 7% of 656 young people surveyed self-identified as transgender (Whitbeck, Lazoritz, Crawford, & Hautala, 2014).

It is difficult to measure precisely how many youth experiencing homelessness identify as LGBTQ2S, for a variety of reasons:

Data Collection

- Research on youth experiencing homelessness, street needs assessments, and PiT counts, as well as youth-serving organizations, shelters and housing programs have missed important opportunities to collect data on gender and sexually diverse youth because they seldom include questions regarding LGBTQ2S identity, and when they do, they frequently do not include transgender and non-binary identities. For example, intake forms often provide options for individuals to identify only as either female or male—and sometimes ‘other’—however, staff routinely complete intake forms for youth, checking off female or male based on what they perceive the young person’s sex to be. Any identity that does not fall into those two fixed categories is rarely included.
- In order to collect accurate data, program staff and those conducting surveys need adequate training to ask questions concerning gender and sexual identity in a sensitive manner, while also making sure that every respondent is asked the same questions, regardless of whether they are perceived by the questioner to identify as LGBTQ2S.

- Studies have frequently grouped trans people under the label *sexual minority*, making it difficult to differentiate between gender identity and sexual identity. While gender identity and sexuality overlap, they are not the same. Including transgender and gender-expansive young people in a sexual minority category, rather than allowing them a separate category, replicates the common misreading of transgender people as homosexual (Shelley, 2009). Referred to by Ansara (2010) as coercive queering, this practice results in an underrepresentation of transgender youth in research, and can lead to a lack of safe, inclusive, affirming and effective services and systems for transgender youth experiencing homelessness (Shelton, 2015).

Data Synthesis

- Even when youth do self-identify as LGBTQ2S, accurate prevalence rates are dependent on a community's or system's data management program having been set up to include data on gender and sexual identity, as well as the larger data management systems at the community, regional and national levels having been designed to capture and integrate this data.

Safety Concerns

- Enumeration barriers exist even when individual programs do collect data on gender and sexual identity because LGBTQ2S youth may not feel safe disclosing their sexual or gender identity, opting to hide their identities for safety.
- The expectation that every young person will fit into the gender binary makes the shelter system and housing programs especially difficult places for transgender and gender-expansive individuals to navigate.
- Many youth are not enumerated at all because they do not access services out of safety concerns. Hidden homelessness is a significant issue among LGBTQ2S youth, especially for those living in rural and remote communities, making it difficult for them to be included in statistics and key reports on youth homelessness.

I was taking so many sleeping pills, so that I could sleep through the night. [...] It was safer for me to be popping pills and sleeping outside in minus zero degree weather than being in the shelter system [because of] transphobia and homophobia.

J, 26 years old

Family conflict is the most frequently cited pathway to youth homelessness, regardless of gender or sexual identity (Cull, Platzner, & Balloch, 2006; Gaetz, 2014; Hagan & McCarthy, 1997; Karabanow, 2004). Identity-based family conflict resulting from a young person coming out as LGBTQ2S is a major contributing factor to youth homelessness and the most frequently cited reason for homelessness in queer and trans youth (Abramovich, 2016; Choi et al., 2015; Cochran, Stewart, Ginzler, & Cauce, 2002). Compared to their heterosexual and cisgender peers, LGBTQ2S youth face an increased risk of homelessness and experience homelessness for longer periods (Choi et al., 2015; Cray, Miller, & Durso, 2013). The experience of homelessness is different for LGBTQ2S youth compared to heterosexual and cisgender youth for various reasons, including high rates of social stigma, and homophobic and transphobic violence on the streets and at shelters and support services. LGBTQ2S youth are particularly vulnerable to mental health difficulties, and face an increased risk of physical and sexual exploitation, substance use and suicide (Denomme-Welch, Pyne, & Scanlon, 2008; Ray, 2006).

Transgender youth have needs that are distinct from those of lesbian, gay and bisexual youth. For example, they may need transition-related health care, including access to hormones or surgery, and/or support changing legal identification (ID) and with a legal name change. Because most programs serving youth experiencing homelessness are not set up with transgender youth in mind, they often replicate the cisnormative societal structures that create barriers for transgender and gender-expansive youth (Shelton, 2015). Shelter staff generally receive minimal trans competency training, resulting in a lack of understanding and awareness. This means staff may not understand the importance of asking youth what pronoun and name they go by, or on which floor they would feel safest sleeping. A high proportion of transgender and gender-expansive youth report being denied access to shelters on the basis of their gender identity (Grant et al., 2011; Hussey, 2015). Transgender women of colour are often the most underrepresented group in shelters and housing programs and frequently experience severe marginalization based on their gender and sexual identity, race, class, and age (Grant et al., 2011; Mottet & Ohle, 2003; Sakamoto et al., 2010). Family rejection, poverty, a lack of specialized social services and discrimination in housing and shelters, employment, and education all make it extremely difficult for LGBTQ2S youth to secure safe and affirming places to live. Even when programs have worked to become inclusive and affirming of LGBTQ2S youth, engagement in services may still be perceived as risky by the youth.

I didn't want to go to a public shelter. 'Cuz it was, like, I just heard really bad things about it.

J, 24 years old

Systemic cissexism and heterosexism that erase the needs of LGBTQ2S youth, coupled with widespread homophobic and transphobic discrimination and violence in shelters and housing programs, have resulted in LGBTQ2S youth being underrepresented in such programs.

National Efforts in Canada

LGBTQ2S youth homelessness has been acknowledged as an emergent crisis in Canada for over two decades (O'Brien, Travers, & Bell, 1993); however, this issue has been neglected and inadequately addressed for years. Until fairly recently, there were no specialized housing programs for LGBTQ2S youth in Canada. The first such programs have opened in Canada only in the past two years. For example, in 2015, the Boys and Girls Clubs of Calgary opened a Host Homes program in Calgary, Alberta. RainCity opened a Housing First program for LGBTQ2S youth in Vancouver, British Columbia in 2015 (see Case Study 5.1). In 2016, the City of Toronto allocated funds to open Canada's first Transitional Housing program for LGBTQ2S youth through YMCA, Sprott House (see Case Study 5.3). However, there are still no specialized emergency shelters in Canada to specifically meet the needs of LGBTQ2S youth.

Key decision-makers across Canada have not responded appropriately to the needs of LGBTQ2S youth experiencing homelessness, and instead have continuously asked for more evidence-based research to implement changes to existing services and policies or to develop new programs and policies. It has taken years of community advocacy, research, creative knowledge mobilization and downright activism to provide the necessary evidence to move forward by including LGBTQ2S youth in important national dialogue on youth homelessness. In 2015, the Government of Alberta released a targeted response to prevent and end youth homelessness: the Youth Plan (Government of Alberta, 2015). The Youth Plan recognized that ending youth homelessness requires prioritizing subpopulations of young people disproportionately represented in the population of youth experiencing homelessness, including LGBTQ2S youth. This led to Canada's first

provincial government strategy to address the needs of LGBTQ2S youth experiencing homelessness and the first provincial working group on LGBTQ2S youth homelessness (Abramovich, 2015) (see Case Study 9.1).

In 2015, the National Learning Community on Youth Homelessness developed a national LGBTQ2S Toolkit to provide service providers across Canada with the resources they need to better support LGBTQ2S youth accessing services (National Learning Community, 2015).

We need a committed national strategy to end LGBTQ2S youth homelessness. This will allow us to respond to the unique needs of LGBTQ2S youth in both rural and urban communities, and from one province to another. The strategy must place specialized housing with integrated supports at the forefront, along with comprehensive mandatory LGBTQ2S cultural competency training for staff at drop-in and housing programs. A national strategy to end LGBTQ2S youth homelessness is a promise that we will no longer tolerate homophobia, transphobia or biphobia. It's a message to the world that everyone deserves a safe place to sleep, and no young person should end up on the streets because of whom they love or how they identify.

National Efforts in the U.S.

LGBTQ2S youth homelessness was recognized as an urgent national issue in the U.S. in 2006, with a publication from the National LGBTQ Task Force, *Lesbian, gay, bisexual and transgender youth: An epidemic of homelessness*. This publication illuminated the local work of programs serving LGBTQ2S youth experiencing homelessness in multiple locations across the country. The programs were either specifically designed for LGBTQ2S youth or provided services designed to be safe, inclusive and affirming of LGBTQ2S youth. In the decade that followed, several key efforts contributed to a growing national movement in the U.S. to end LGBTQ2S youth homelessness. These efforts have included the launch of the True Colors Fund, the first national organization focused solely on the issue of LGBTQ2S youth homelessness, and the LGBTQ2S Youth Homelessness Prevention Initiative. In addition, national efforts to more broadly address youth homelessness by including LGBTQ2S youths' perspectives include A Way Home America and Voices of Youth Count. Each initiative is briefly described below.

The True Colors Fund was founded in 2008 to raise awareness about and bring an end to LGBTQ2S youth homelessness. Through a combination of education, training, advocacy and collaboration with youth, the True Colors Fund has mobilized cross-sector collaboratives in communities around the country to address LGBTQ2S youth homelessness. The organization hosts a free network, called the 40 to None Network, for those interested in joining the movement. The name comes from the often-cited statistic that up to 40% of youth experiencing homelessness identify as LGBTQ2S, and the goal of taking that percentage from 40 to none. Additional resources include: an online learning platform called TrueU; an online directory of LGBTQ2S-inclusive and affirming programs for youth experiencing homelessness; an assessment tool to assist youth-serving systems and programs to increase their LGBTQ2S competency; and numerous downloadable toolkits to assist with local PiT counts, community planning initiatives, and making programs safe, supportive and accessible for transgender youth.

To help address the overrepresentation of LGBTQ2S youth in the population of youth experiencing homelessness, the U.S. Department of Housing and Urban Development (HUD), initiated the first-of-its-kind LGBTQ Youth Homelessness Prevention Initiative (Initiative) in 2014. The Initiative was developed and supported by five U.S. federal partners—the U.S. departments of Housing and Urban Development; Education; Health and Human Services; Justice; and the United States Interagency Council on Homelessness (USICH)—in partnership with the True Colors Fund. The Initiative began with two communities that developed local, community-wide prevention plans, which included strategies for preventing LGBTQ2S youth from becoming homeless and intervening as early as possible if they do become homeless. The Initiative identified two goals. 1) Facilitate better local collaboration between stakeholders working with youth and families, including local child welfare, education and law enforcement agencies; service providers to runaway and homeless youth; LGBTQ2S organizations; and other local stakeholders. 2) Help federal agencies and local communities learn more about implementing community-wide strategies for preventing homelessness in LGBTQ2S youth at risk of becoming homeless, and intervening early when homelessness occurs. The Initiative and the local plans were grounded in the four core outcomes outlined in the USICH's *Framework to End Youth Homelessness*: stable housing, permanent connections, education/employment and social-emotional wellbeing.

Voices of Youth Count (VoYC) is a national initiative working to expand knowledge about the scope and scale of youth homelessness in the U.S., and to deepen the understanding of the experiences of unaccompanied youth experiencing homelessness. VoYC seeks to contribute to the movement to prevent and end youth homelessness in the U.S. by building knowledge, integrating new information with existing evidence, and working with policy makers, program developers and service providers to put that knowledge into action. They are also committed to partnering with youth in all aspects of this work. VoYC recognizes that preventing and ending youth homelessness requires understanding the experiences of LGBTQ2S youth. As such, the data collection instruments they use and the resources they provide to the public include measures related to sexual orientation and gender identity. This approach recognizes that large-scale efforts to prevent and end youth homelessness must explicitly include LGBTQ2S youth.

A Way Home America (AWHA) is a national initiative, modeled after A Way Home Canada, to build the movement to prevent and end homelessness in youth. Guided by *Opening Doors: Federal Strategic Plan to Prevent and End Homelessness*, the collaborative is working toward a common goal: To prevent and end homelessness among all youth and young adults by 2020; and to ensure that homelessness among youth and young adults is rare, and when it does occur, that experiences of homelessness are brief and one-time. The collaborative consists of service providers, young people with lived experience of homelessness, researchers, government agencies, advocates and philanthropists. Like VoYC, AWHA recognizes that preventing and ending homelessness for youth requires a focus on subpopulations that are overrepresented in the population of youth experiencing homelessness. AWHA highlights LGBTQ2S youth and racialized youth in their work.

Everybody seems to be down and when we have these pressures [homophobia], well guess what? Now people have to guard themselves all the time. That guy's crying, this girl's crying, that kid looks so sad, this kid just wants to talk to somebody, that kid's dying on the inside. It's a big problem. There's a big social thing going on here with all the kids and they're all dying to just talk to somebody. [...] A community would look like people looking out for the best interests of kids; that's a community. I'm Native, we know that. It's about the kids; it's not about nobody else. You're supposed to be watching out for them, no matter what.

R, 26 years old

Why this Book?

This book represents efforts to address LGBTQ2S youth homelessness that are currently underway, in both Canada and the U.S. The book is organized by 10 chapters that focus on LGBTQ2S youth homelessness through an intersectional lens, including an examination of the needs of that population, the identity-related structural barriers LGBTQ2S youth experiencing homelessness face in accessing adequate services and in achieving successful transitions out of homelessness, and program models that successfully address those barriers. Each chapter, rooted in either empirical research or through a more theoretical orientation, addresses a specific need and that need's associated barriers, accompanied by a case study of a successful program intervention exemplifying how to put the chapter's information into action. The anticipated outcome of this book will be the sharing of new knowledge to inform the development of LGBTQ2S-inclusive and affirming systems and service provision at the community, regional and national levels.

Through our work, we have found that factors such as institutional erasure and homophobic and transphobic violence and discrimination that is rarely dealt with, addressed, or even noticed, make it difficult for LGBTQ2S youth experiencing homelessness to access shelters and supportive services. The result is queer and trans youth feeling safer on the streets than in shelters and housing programs. We hope this book will motivate the reader to make change in their own corner of the world. The issue of LGBTQ2S youth homelessness can no longer be denied. Our youth can no longer be silenced and ignored.

It is time to take action.

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2 HOMELESS & STREET-INVOLVED INDIGENOUS LGBTQ2S YOUTH IN BRITISH COLUMBIA: INTERSECTIONALITY, CHALLENGES, RESILIENCE & CUES FOR ACTION

Elizabeth Saewyc, Brooke Mounsey, Jessica Tourand, Dana Brunanski, David Kirk,
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Introduction

In keeping with many Indigenous traditions, as authors of this chapter we begin by acknowledging the land on which this work of listening, sharing, statistical analyzing and writing took place: the traditional, ancestral and unceded territories of the Musqueam, Tsleil-Waututh, Squamish, Stó:lō and Secwépemc Nations, located in Western Canada. It is also important to share who we are, and how we came to write this chapter. While our author bios provide more specific descriptions of our backgrounds and identities, our team includes researchers who are Indigenous (First Nations or Métis) and identify as lesbian, gay, bisexual, transgender, queer or Two-Spirit (LGBTQ2S); researchers who are Indigenous but not LGBTQ2S; and researchers who are non-Indigenous but LGBTQ, and have more than a decade working on research with Indigenous communities. We are from territories across Canada, the United States (U.S.), and the United Kingdom (U.K.).

Several of us conducted a recent large-scale health survey of street-involved youth and youth experiencing homelessness across 13 different communities in British Columbia (BC) in 2014. Although Indigenous organizations and Indigenous Peoples were part of that original survey research team, it was not solely designed for Indigenous LGBTQ2S research. Therefore, after we were asked by more than one Indigenous group and by the editors of this book to consider more detailed analyses about LGBTQ2S Indigenous youth, we took additional steps to Indigenize our methods as follows: Our team members who were first asked to write this chapter invited an advisory group of Indigenous LGBTQ2S people, especially those who work with Indigenous LGBTQ2S youth experiencing homelessness, to provide guidance on the analyses. As the chapter work progressed, most advisory members also became co-authors. Finally, in keeping with our commitment to build capacity for the next generations, our team included an Indigenous university student, who has had a pivotal role in completing this work.

Street-involved youth and youth experiencing homelessness in Canada are disproportionately likely to be Indigenous: while the Canadian census estimates about 6% of youth in Canada are Indigenous (Statistics Canada, 2013), previous multi-city surveys of street-involved youth and youth experiencing homelessness in Western Canada have found more than half identify as Aboriginal, First Nations, Inuit or Métis (Smith et al., 2007; Smith et al., 2015).

Our overall purpose is to contribute to the limited existing research about LGBTQ2S Indigenous youth who are experiencing homelessness in Canada, based on our research in Western Canada. What are the specific challenges faced by youth experiencing homelessness who are both Indigenous and LGBTQ2S? What resilience factors help them cope despite these challenges? What resources do they access, how helpful are these supports, and what recommendations do young people offer for how services can be more supportive? This chapter will examine the limited existing research, and then expand that knowledge by drawing on data from the 2014 BC Homeless and Street-Involved Youth (HSIY) Survey to answer those questions. We will incorporate recommendations young people made, and consider how these findings fit within the relevant recommendations from the Truth and Reconciliation Commission of Canada, although we note, as others have, that none of the recommendations specifically mention Two-Spirit people (Truth and Reconciliation Commission of Canada, 2015).

It is important to begin by describing Indigenous understandings of LGBTQ and Two-Spirit identities, as there are significant differences in cultural definitions of sexual orientation, gender identity and spiritual identity that may influence how Indigenous youth experiencing homelessness in Canada identify as LGBTQ2S.

Defining LGBTQ and Two-Spirit in Indigenous Canadian Contexts

Historically, many Indigenous Peoples throughout the world embraced positive, often spiritual roles in their societies for their people whose fluid or ambiguous gender identity or sexual orientation did not fit into the rigid roles dictated by the social norms of European colonial powers; in North America, more than 1,200 distinct Indigenous communities had such roles, and most Indigenous languages had one or more different words, such as *winkte* in Lakota, or *niizh manitoag* in Ojibway to describe them (Jacobs, Thomas, & Lang, 1997; Plaut & Kirk, in press). As Plaut and Kirk and others have noted, however, with

colonization and the influx of Christian missionaries, the efforts to extinguish Indigenous cultures often included trying to remove Indigenous norms, values and language through residential schools, punitive laws and conversion to Christianity, all of which supported the colonizers' homophobic perspectives, and influence Indigenous community perspectives to this day (McNeil-Seymour, 2015). In 1991, members of an Indigenous LGBT meeting in Winnipeg adopted the term 'Two-Spirit' as an intertribal term to reflect these concepts in Indigenous communities, a term intended to encompass more than just gay, lesbian or bisexual orientations, or diverse gender identities. Some Indigenous people have neither taken up the term Two-Spirit, nor reclaimed traditional language terms; instead, they avoid disclosing their identities because their Elders feel it is contrary to their community's current cultural beliefs, and these people fear being rejected by their community (Plaut & Kirk). Some Indigenous LGBTQ2S Peoples still prefer the terms gay, lesbian or bisexual. Therefore, for this chapter, we use the acronym LGBTQ2S to refer to the group of young people who identify as either LGBTQ or Two-Spirit, or both.

LGBTQ and Two-Spirit Youth Experiencing Homelessness: What is Already Known?

The research literature about Indigenous LGBTQ2S young people experiencing homelessness, whether in Canada, the U.S., or other colonized countries, is sparse. Our search included community and government reports and unpublished theses, in addition to peer-reviewed journals, but we found only a small number of studies focused solely on Indigenous LGBTQ2S youth experiencing homelessness (Teengs & Travers, 2006; Toronto Aboriginal Support Services Council, 2014; Wesley, 2015). These studies all incorporated interview or focus group methodologies, which provided rich information about a localized group of Indigenous LGBTQ2S youth experiencing homelessness, but all took place in Toronto, Ontario. Other studies focused on LGBTQ youth of colour experiencing homelessness, including a small number of Indigenous youth (Daniel & Cukier, 2015; Walsh, 2014). Some studies focused on Indigenous youth experiencing homelessness generally, with some mention of Indigenous LGBTQ2S youth (Baskin, 2007; Hunt, 2011; Saewyc, et al., 2009). With so few studies available, we also drew on research about Indigenous LGBTQ and Two-Spirit adolescents who were not experiencing homelessness (Barney, 2004; Bostwick, et al., 2014; Gosnell-Myers, 2012; Saewyc, Clark, Barney, Brunanski, & Homma, 2014; Tourand, Smith, Poon, Saewyc, & McCreary Centre Society, 2016); on literature about LGBTQ and Two-Spirit adults experiencing homelessness

(Ristock, Zoccole, & Potskin, 2011); and research about Indigenous LGBTQ2S adults who were not experiencing homelessness (Balsam, Huang, Fieland, Simoni, & Walters, 2004; Brotman, Ryan, Jalbert, & Rowe, 2002; Cassels, Pearson, Walters, Simoni, & Morris, 2010; Chae & Walters, 2009; Elm, Lewis, Walters, & Self, 2016; Fieland, Walters, & Simoni, 2007; National Center for Transgender Equality & National Gay and Lesbian Task Force, 2012; Scheim, Jackson, James, Sharp Dopler, Pyne, & Bauer, 2013).

The research about Indigenous LGBTQ2S youth experiencing homelessness documents their challenges in finding supportive communities, both on reserves, where they felt rejected, and in the cities to which they moved. As previously noted, all four studies we found took place in Toronto. In a study by the Toronto Aboriginal Support Services Council (2014), a number of Indigenous LGBTQ2S youth experiencing homelessness were interviewed to illuminate the barriers they face. The authors argued that, given the systemic racial oppression Indigenous LGBTQ2S youth face, along with the stigma attached to their sexual identities, they were at the highest risk for homelessness, violence, abuse and suicide compared to all other homeless youth. Within shelters, the main issues youth reported were staff apathy, homophobia from other clients, racial profiling, and rejection of clients who were not sober. The streets presented youth with a similar set of challenges, including being ignored or stereotyped by people who were not experiencing homelessness, and also being targeted for stigma around their sexuality, not just their housing status.

Another study with 13 Two-Spirit youth in Toronto who had migrated there from other communities (Teengs & Travers, 2006) found similar themes: since youth experienced homophobia and gay-bashing in the small towns and reserves from which they came, they migrated to the city in search of acceptance by the wider LGBTQ community. Yet once in Toronto, without a completed education and with limited job opportunities, they were not prepared for life in an expensive urban centre, and ended up homeless. Some spoke of experiencing racism and classism in mainstream gay communities and homophobia in Indigenous circles. Several of them said they ended up in the party scene and coped by abusing substances, while others turned to survival sex to support themselves, which put them at risk for HIV. Recent master's thesis work conducted in Toronto validated these findings: Wesley (2015) brought together five Two-Spirit youth in a sharing circle. Their narratives revealed they did not believe a Two-Spirit community existed in Toronto, and they used the term 'Two-Spirit' to more holistically describe a way of being, rather than a sexual or gender category. They described the intolerance that existed on the reserves they

came from, and their need to migrate to cities for safety. The youth expressed a desire for more cultural programming and social events in the city for Two-Spirit people, preferably not delivered by a social service organization. They also desired more Two-Spirit Elders to talk to and look to for mentorship. Another study included a focus group of both Somali LGBTQ and Indigenous LGBTQ2S youth experiencing homelessness in Toronto, who described being ‘invisible’ and outcasts, experiencing poor treatment by police, but also having a ‘street family’ that offered protection and emotional support (Daniel & Cukier, 2015). Indigenous LGBTQ2S participants noted the ongoing impacts of colonization and called for more culturally relevant spaces, services and shelters.

Studies that focused on Indigenous youth experiencing homelessness, but not specifically on Indigenous LGBTQ2S youth experiencing homelessness, reported similar issues of racism and stereotyping within shelter settings, as well as vulnerability to violence, sexual exploitation and substance use issues. A qualitative study of 24 Indigenous youth at risk of or experiencing homelessness in Ontario highlighted a strong link between being raised in the child welfare system and experiencing homelessness as a youth (Baskin, 2007), but the study had only one Two-Spirit youth. Nearly half the Indigenous youth experiencing homelessness in the 2006 multi-community survey of homeless and street-involved youth in BC had a history of government care (Saewyc et al., 2009); in one of the few direct comparisons of LGBTQ and heterosexual Indigenous youth experiencing homelessness, this study found LGBTQ Indigenous youth were significantly more likely than heterosexual peers to have run away from home or to have been kicked out of their homes. They were also more likely to report experiences of sexual exploitation than heterosexual youth; other studies in BC have documented the risks for sexual exploitation among Indigenous youth, both on- and off-reserve (Hunt, 2011).

What about the experiences of Indigenous LGBTQ2S youth who are not experiencing homelessness? One recent study of Aboriginal Canadian, Native American, and Maori adolescents compared sexual minority and heterosexual youth in school-based surveys in Canada, the U.S., and New Zealand (Saewyc et al., 2014). It should be noted the surveys did not specifically include Two-Spirit as an identity term in Canada or the U.S., but included only lesbian, gay, and bisexual. The study found that sexual minority Indigenous students were more likely than their heterosexual peers to experience enacted stigma, that is, harassment, bullying, physical assault, and ethnic and sexual orientation discrimination. Those who experienced these higher rates of enacted stigma were also more likely to report behaviours that put them at risk for HIV, including unprotected sex, multiple sexual

partners, pregnancy involvement and injection drug use (Saewyc et al., 2014). A U.S. study of over 6,000 sexual minority and ethnically diverse youth found Native American sexual minority youth had a greater likelihood of negative mental health outcomes than their White counterparts, such as self-reported feelings of sadness, suicidality and self-harm (Bostwick et al., 2014). Native American sexual minority youth also had the highest rates of attempted suicide within the previous year. However, the gap between sexual minority Native American and sexual minority White adolescents was smaller than among Native American and White heterosexual youth.

There have been only a couple of studies of primarily homeless LGBTQ2S young adults, and these have focused on those who have either been sexually exploited as an adolescent, or are involved in current sex work as an adult. One of the studies involved interviews with 96 Aboriginal young men in the sex trade in BC, Alberta, Saskatchewan and Manitoba (McIntyre & the Hindsight Group, 2012), while another study involved focus groups with 14 young men, women and transgender Aboriginal youth (Gosnell-Myers, 2012). Both studies noted that most of their participants were sexually exploited before the age of 18, and this was often preceded by a history of physical and sexual abuse, being in government care, and being rejected or kicked out by family, often due to sexual orientation. As in the other studies described, these young adults stated that Two-Spirit youth experiencing homelessness were treated differently, including being ignored or treated as offenders by police, and even in some cases being physically abused by police (Gosnell-Myers, 2012). LGBTQ2S young adults who were involved in sex work struggled with substance use issues, although in one study, sexual exploitation preceded problematic substance use for most young people (McIntyre & the Hindsight Group, 2012), while in the other study, substance use came first for most of the young people (Gosnell-Myers, 2012).

Many studies describe the legacy of colonization that contributes to Indigenous youth homelessness, especially historical trauma from policies and practices that tried to eradicate Indigenous culture, for example, residential schools or the systematic removal of Indigenous children from families (Baskin, 2007; Hunt, 2011; Toronto Aboriginal Support Services Council, 2014). While the colonial legacies of poverty and family conflict have often been determinants of youth homelessness, especially among Indigenous youth living on impoverished reserves, the additional homophobic and transphobic legacies of colonization create further vulnerability to homelessness for LGBTQ2S youth.

While some of the information presented here about Indigenous LGBTQ2S adults experiencing homelessness, or about Indigenous LGBTQ2S youth who are not homeless, might reflect the experiences of Indigenous LGBTQ2S youth experiencing homelessness, it is difficult to know how much is similar and what might be different. The few studies that focus on Indigenous LGBTQ2S youth experiencing homelessness involved interviews and focus groups with a small number of youth, primarily in Toronto; they provide rich insights from specific places, but the experiences of Indigenous LGBTQ2S youth experiencing homelessness in other provinces, or other communities, may be quite different. Our study contributes to the existing literature by drawing on patterns of experiences from hundreds of Indigenous youth experiencing homelessness across BC, and more than 100 Indigenous LGBTQ2S youth experiencing homelessness.

Method

The Current Study: The 2014 BC Homeless & Street-Involved Youth Survey

From fall 2014 through winter 2015, the McCreary Centre Society, in partnership with several youth-serving community organizations and the Stigma and Resilience Among Vulnerable Youth Centre of the University of British Columbia, conducted a survey of homeless and street-involved youth, aged 12 to 19 years, in 13 diverse communities across BC, including large urban centres, such as Vancouver, and rural and small communities, such as Prince Rupert and Nelson. The surveys asked a wide range of questions about life circumstances, risk exposures, assets and supports, health and risk behaviours, and health outcomes. The surveys also included measures of sexual orientation and gender identity, and several questions about Indigenous identity and related life circumstances, such as whether youth had ever lived on a reserve.

The 2014 survey followed the same participatory methods as two previous multi-community homeless and street-involved youth surveys conducted by the McCreary Centre Society in 2000 and 2006 (Smith et al., 2007). In each community, the society partnered with agencies that provided services to homeless and street-involved youth as community champions and advisory members. These champions guided the questionnaire and supported co-researcher teams comprising youth workers and currently or previously homeless youth, who administered surveys in each designated area and participated in data analyses. Community partners included Indigenous organizations, such as the Friendship House Association of Prince Rupert and the Prince George Native Friendship

Centre. The surveys were anonymous: the co-researcher team members read questions aloud, but youth answered on their own surveys, putting them afterwards in envelopes without names or identifiers. Some surveys were conducted one-to-one, while others were administered in groups of no more than five youth. Participants could also skip questions, or stop when they wanted. A total of 689 youth ages 12 to 19 years participated, and 681 youth completed enough of the survey to provide usable data. The original report provides more details about the original research (Smith et al., 2015).

Measures in the Survey

Most measures used in the survey were drawn from our previous youth health surveys of youth who were in school or experiencing homelessness, as well as existing validated measures from other sources. The key measures used to identify our sample for this analysis were three questions asking about sexual orientation, gender identity and Two-Spirit identity, as well as a question about ethnic background. The questions about sexual orientation have been used in a number of surveys in Canada and the U.S.; these questions were first asked in the BC Adolescent Health Survey among adolescents in schools in 1992, and have since been used in each cycle, to date with more than 120,000 students aged 12 to 18 years. One specific question was first asked among youth experiencing homelessness and street involvement in the 2000 survey conducted in six communities across BC. This question asks about self-identity linked to attractions, and offers seven response options. The question and response options are:

People have different descriptions about themselves when it comes to being attracted to other people. Which of the following best describes your feelings?

- Completely heterosexual (straight; attracted to people of the opposite sex);
- Mostly heterosexual;
- Bisexual (attracted to both males and females);
- Mostly homosexual;
- Completely homosexual (gay/lesbian; attracted to people of the same sex);
- Questioning (I'm questioning who I'm attracted to);
- I don't have attractions.

In addition, the survey asked the following question about gender identity: "Are you....?
Male, Female, Transgender, Another, specify: _____."

As part of the section on Aboriginal identity, and Aboriginal experiences, such as currently or ever having lived on a reserve, etc., we also asked, “Do you identify as Two-Spirit?” with the response options as “No,” “Yes,” and “I don’t know what Two-Spirit means.” For the purposes of these analyses, those who identified as bisexual, mostly or completely lesbian/gay, questioning, transgender, and/or Two-Spirit were combined into the LGBTQ2S group. For the heterosexual cisgender comparison group, we included only those who identified as completely heterosexual or straight, and also did not identify as transgender.

The question assessing Indigenous status asked, “What is your background? (Mark all that apply)” and included the option of Aboriginal. If youth checked the Aboriginal identity, they were also asked to answer further questions in the grey box just below that question. These follow-up questions included, “Are you Aboriginal? (Mark all that apply)” with the following response options: “Yes, I am First Nations,” “Yes, I am Métis,” “Yes, I am Inuit,” and “Yes, other, specify.” If youth checked Aboriginal as one of their ethnic backgrounds, they were included in the sample.

Based on advice from our advisory group, we conducted three types of analyses. First, we gathered descriptive data about the Indigenous LGBTQ2S youth in the survey, including who they were, where they were from, how they identified, and some aspects of their lives. Our goal was to consider the intersectionality of their health and life experiences; that is, how being both Indigenous and LGBTQ2S may be different from being either of these alone. We next conducted comparisons of Indigenous LGBTQ2S youth to their heterosexual cisgender Indigenous peers in the survey. Finally, we compared Indigenous LGBTQ2S youth to non-Indigenous LGBTQ youth. We statistically tested the comparisons between groups, to see how likely or unlikely it would be that our results were due to chance; this usually involves specifying a cut-off or ‘alpha’ level of how unlikely that is. We generally chose the conventional alpha or p-value of .05, which means there is a low likelihood the results are based on random chance. Most of the differences between groups that we report in this chapter are statistically significant; in some cases, where the p-value was between .05 and .10, we also examined the effect size, which is a calculation of how much the particular outcome differs between the groups. For effect sizes, we usually used a calculation called the *phi* coefficient; a *phi* between .10 and .29 is a small effect size, .30 to .49 is moderate and .50 or higher is a large effect. All comparisons or differences between groups that are reported without mentioning effect sizes are statistically significant at .05; where we mention effect sizes, that means that the test statistic’s p-value lies between .05

and .10, so not significant at the usual .05 level, but still potentially meaningful. For those who are interested in the precise type of statistical tests we used to do these comparisons, most of our analyses used chi-square tests, because of the type of questions asked in the survey; some analyses included correlations for ordinal comparisons, or logistic regressions that calculated odds ratios.

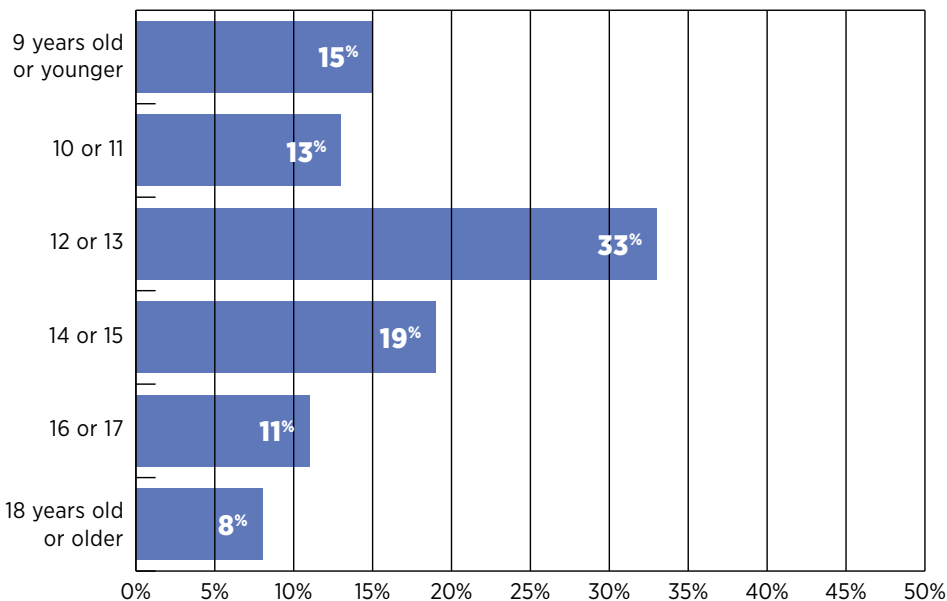
We describe:

- The LGBTQ2S youth in the survey;
- Their experiences of adverse events, such as violence and discrimination;
- Their health inequities;
- Their access to services and missed care;
- Resilience and protective factors that are linked to improved health or fewer health problems;
- The youths' recommendations for services and changes in their communities; and
- Implications for practice.

Who are the Indigenous LGBTQ2S Youth Experiencing Homelessness in BC?

In the 2014 BC HSIY survey, just over half the youth surveyed (358, or 53%) identified as Indigenous, and among these youth, 122 (34%) identified as LGBTQ or Two-Spirit. Among the LGBTQ2S Indigenous youth, 36% identified as Two-Spirit, 3% identified as transgender, more than half (56%) identified as bisexual, 7% identified as mostly or completely lesbian/gay, and 11% said they were questioning their orientation. Regarding the LGBTQ2S Indigenous youths' Indigenous status, 77% said they were First Nations, 27% were Métis, and a very small number said they were Inuit. (Youth could choose more than one response, which is why the total is more than 100%.) The most common ages for LGBTQ2S participants were 16 and 17 (43%) followed by 18 and 19 (38%). However, most youth surveyed had first become homeless or street-involved at much younger ages, most commonly around age 12 or 13 (see Figure 1). One-quarter of LGBTQ2S youth were surveyed in more rural areas, such as Chilliwack, Nanaimo, Nelson and Prince Rupert, but there were no significant differences between the percentages of LGBTQ2S youth in rural and urban communities.

FIGURE 1: AGE ABORIGINAL LGBTQ2S YOUTH FIRST BECAME HOMELESS



Source: 2014 HSIY Survey.

Among Indigenous LGBTQ2S youth, 40% had lived on a reserve at some point, and 18% said they had experienced homelessness on a reserve; there was no difference between Indigenous LGBTQ2S youth and heterosexual and cisgender youth in terms of ever or currently living on a reserve. More than two-thirds (69%) had been in government care at some point (foster care, group home or with a Youth Agreement), with foster care being the most common type of care (55%). Nearly the same number (62%) reported that one or more of their close relatives were survivors of residential schools; among these youth, 73% had at least one grandparent and 18% had a parent who had attended a residential school.

Nearly three in four Indigenous LGBTQ2S youth said they were currently in school, and most of these were attending an alternative school (59%). Similar numbers of Indigenous heterosexual cisgender and non-Indigenous LGBTQ youth also reported they were currently attending school.

About half the LGBTQ2S youth were engaged with Indigenous cultural practices to some extent, although it appeared that homelessness had created some challenges for maintaining connections to culture. Just over one in five reported they spoke an Indigenous language (21%). Nearly half the young people (49%) surveyed said they had participated in cultural or traditional activities before they became homeless, but this dropped to 39% who said they had participated in cultural or traditional activities after they became homeless. More than a third (39%) had approached an Elder for help in the previous year, and most of these youth (81%) said they found the Elder helpful.

Experiences of Violence, Discrimination, Precarious Housing and Government Care: Differences and Similarities to Heterosexual Cisgender Indigenous Youth and Non-Indigenous LGBTQ2S Youth

Only 70% of Indigenous homeless and street-involved youth gave reasons for why they were homeless or street-involved, but among those who gave answers, LGBTQ2S youth were more likely than heterosexual cisgender youth to say they were homeless or street involved because they did not get along with their parents (51% vs. 36%). They were also more likely to say they left home because of their sexual orientation, and because there was violence or abuse at home (34% vs. 16%). LGBTQ2S youth were more likely to have ever been sexually abused (61% vs. 27%). They were also more likely to report physical abuse, with 68% indicating they had been physically abused, compared to 50% of Indigenous heterosexual cisgender youth. Approximately one in three Indigenous LGBTQ2S youth (35%) had been sexually exploited, compared to 15% of heterosexual cisgender Indigenous youth.

Similar to previous research in Toronto, most Indigenous LGBTQ2S youth experiencing homelessness in BC reported discrimination in the previous year (75%). More than half reported discrimination because of physical appearance or people viewing them as different (see Table 1), and more than a third reported discrimination because of sexual orientation, with just under a third reporting discrimination based on gender identity. Indigenous LGBTQ2S youth were more likely than heterosexual Indigenous youth to experience any kind of discrimination (75% vs. 58%). Similar to what has been reported in research among Indigenous youth who are not homeless, most LGBTQ2S Indigenous youth who experienced homelessness or street involvement also experienced verbal or physical bullying, or being excluded from groups on purpose in the previous year, a significantly higher percentage than among heterosexual cisgender Indigenous youth (81% vs. 69%).

TABLE 1: TYPES OF DISCRIMINATION EXPERIENCED BY LGBTQ2S HOMELESS AND STREET-INVOLVED INDIGENOUS YOUTH IN THE PAST YEAR

| TYPE OF DISCRIMINATION | PERCENT OF YOUTH REPORTING |
|---------------------------------------|----------------------------|
| Age | 39% |
| Being homeless or street-involved | 30% |
| Being on income assistance | 10% |
| Disability | 20% |
| Gender identity | 31% |
| How much money you or your family has | 39% |
| People seeing you as different | 55% |
| Physical appearance | 54% |
| Race, ethnicity, or skin colour | 31% |
| Sexual orientation | 35% |

Source: 2014 HSIY Survey.

Indigenous LGBTQ2S youth differed from both heterosexual cisgender Indigenous youth and non-Indigenous LGBTQ youth in housing responses. They were more likely than heterosexual cisgender Indigenous youth to have ever lived in the most precarious housing, such as abandoned buildings or squats, hotels, cars, tents and on the street (77% vs. 61%). In particular, they were more likely than heterosexual cisgender Indigenous youth to have ever lived in a squat or abandoned building (25% vs. 12%) and on the street (45% vs. 27%). Compared to non-Indigenous LGBTQ youth, they were less likely to have ever lived in their parents' home, or to have lived 'nowhere or all over' (52% vs. 67%).

Indigenous LGBTQ2S youth were also somewhat more transient than heterosexual cisgender Indigenous youth: they were less likely to be from the community where they were completing the survey (53% vs. 66%). In addition, they were more likely to say they had been homeless in more than one community compared to Indigenous heterosexual cisgender youth (38% vs. 20%). Nearly two in three LGBTQ2S Indigenous youth had moved back home since first leaving (63%), which did not differ from Indigenous heterosexual cisgender youth. Among those who moved back home, 38% had moved back once, 24% twice, and 38% three or more times.

Health Disparities Between LGBTQ2S and Heterosexual Cisgender Indigenous Youth

Mental health issues were a key health disparity for LGBTQ and Two-Spirit youth compared to heterosexual cisgender Indigenous youth, but there were no statistically significant differences from non-Indigenous LGBTQ youth. LGBTQ2S youth were more likely than their heterosexual cisgender counterparts to have self-harmed once or more in the previous year (69% vs. 31%). Among Indigenous LGBTQ2S youth who had self-harmed, 83% reported doing so because they were lonely or depressed, 69% because they were feeling stressed, 59% because they were feeling angry, 42% because they were feeling rejected, 31% because they wanted to feel in control, 22% because they had problems with drugs or alcohol, 11% because they were bored and 7% to get attention. They were more likely than heterosexual cisgender Indigenous youth to report self-harm because they were lonely or depressed, or because they were feeling stressed. Indigenous LGBTQ2S youth were also more likely than heterosexual cisgender youth to have seriously considered suicide in the previous year (57% vs. 32%). About half (51%) of Indigenous LGBTQ2S youth had attempted suicide within the previous year, compared to 22% of heterosexual cisgender Indigenous youth.

Substance use was a common issue among all groups of homeless and street-involved youth. Nearly one in five (17%) Indigenous LGBTQ2S youth had consumed five or more drinks in a single session (heavy sessional drinking), at least 10 times in the past month, which was no different from heterosexual cisgender Indigenous youth or non-Indigenous LGBTQ youth. However, for drugs other than alcohol or marijuana, LGBTQ2S youth were twice as likely as Indigenous heterosexual cisgender youth to have used three or more substances within the past month (20% vs. 10%); they were more likely to have used crystal meth (17% vs. 8%), amphetamines (15% vs. 5%), inhalants (20% vs. 8%), mushrooms (20% vs. 8%) and ecstasy (16% vs. 7%).

More than half (55%) of LGBTQ2S youth reported three or more problems in the previous year because of substance use, such as blacking out, arguing with family about their drug use, losing friends or romantic partners, or trouble with the law, but this was similar for both the Indigenous heterosexual cisgender and non-Indigenous LGBTQ populations. Compared to Indigenous heterosexual cisgender youth, LGBTQ2S youth were more likely to have been injured (47% vs. 34%) or to have had sex when they did not want to (25% vs. 11%) in the previous year because of their alcohol or drug use.

Access to Services and Foregone Care

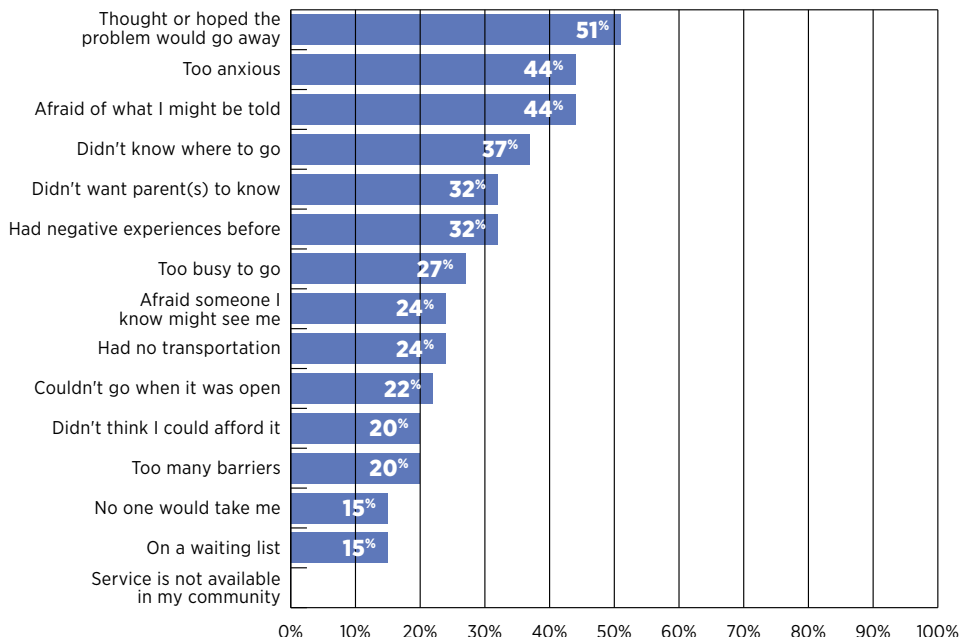
The survey asked youth about where they got health care, whether they had accessed a variety of different services in the past year, and whether these services were helpful. Just over half of Indigenous LGBTQ2S youth had a family doctor (54%), and nearly half got health care from walk-in clinics (49%). About one in five got their health care from an emergency department (19%), 11% from street nurses, 7% from after-hours clinics, and 17% said they did not get any health care. There were no differences between LGBTQ2S and heterosexual cisgender Indigenous youth in types of health care they accessed, except that LGBTQ2S youth were more likely to access after-hours clinics (7% vs. 2%).

Two in three Indigenous LGBTQ2S youth (67%) reported accessing a youth centre. More than half had stayed in a safe house, shelter or transition house (53%); 55% had used a food bank; 55% had gone to a youth clinic, 58% had accessed dental services; and 53% said they had received mental health support. Just under half (48%) said they had accessed job training and work experience, while 41% had taken life skills training programs. A total of 44% had used a soup kitchen; 40% accessed alcohol or drug treatment, counselling, or detox; 37% had received help from street nurses; 37% had accessed safe and affordable housing; and 30% had gone to a veterinarian for pet care. One in four (26%) had used the crack pipe exchange; and 19% had used a supervised injection site. One in five (21%) had accessed childcare or babysitting.

Compared to Indigenous heterosexual cisgender youth, Indigenous LGBTQ2S youth were more likely to report having missed out on needed medical care in the previous year (36% vs. 21%). However, there was no difference between Indigenous LGBTQ2S and non-Indigenous LGBTQ youth on foregone medical care. The survey included questions on the reasons for missing medical care: Indigenous LGBTQ2S youth were more likely than Indigenous heterosexual cisgender youth to report forgoing necessary medical care because they were too anxious (44% vs. 19%).

More than one in three Indigenous LGBTQ2S youth (38%) did not get mental health services when they felt they needed them, compared to 27% of Indigenous heterosexual cisgender youth. Reasons for missing necessary mental health services were not different in non-Indigenous and Indigenous LGBTQ2S youth, except that Indigenous LGBTQ2S youth were less likely than non-Indigenous LGBTQ youth to say they missed out on mental health care because they were too busy to go (see Figure 2).

FIGURE 2: REASONS INDIGENOUS LGBTQ2S YOUTH DID
NOT ACCESS NEEDED MENTAL HEALTH SERVICES
(AMONG THOSE WHO NEEDED THEM)



Source: 2014 HSIY Survey.

NR: The percentage for 'service is not available in my community' was not releasable.

Almost one in ten (9%) Indigenous LGBTQ2S youth reported being refused drug services because the program was full, 5% because of past experiences with the program, and a smaller percentage reported not fitting program requirements. More than twice as many Indigenous LGBTQ2S youth had been refused drug treatment services compared to their Indigenous heterosexual cisgender peers (15% vs. 7%).

Resilience and Protective Factors Among Indigenous LGBTQ2S Youth

While our study found that Indigenous LGBTQ2S homeless and street-involved youth were at higher risk for a number of health outcomes and risk behaviours than their heterosexual cisgender Indigenous peers, it is important to recognize this does not mean all Indigenous LGBTQ2S homeless youth experience those health outcomes, or engage in health-compromising behaviours. For many of the health outcomes we reported above, half or more

of LGBTQ2S young people did not have those health issues: for example, 51% reported a recent suicide attempt, which therefore means 49% did not attempt suicide in the previous year. Analyses described below consider some of the recommendations and assets identified in other studies, including increasing young people's cultural knowledge and involvement and supportive relationships, to see whether these appear to be protective factors against outcomes such as mental health problems and problematic substance use, or resilience factors that support positive health. For these analyses, we focused only on Indigenous LGBTQ2S youth.

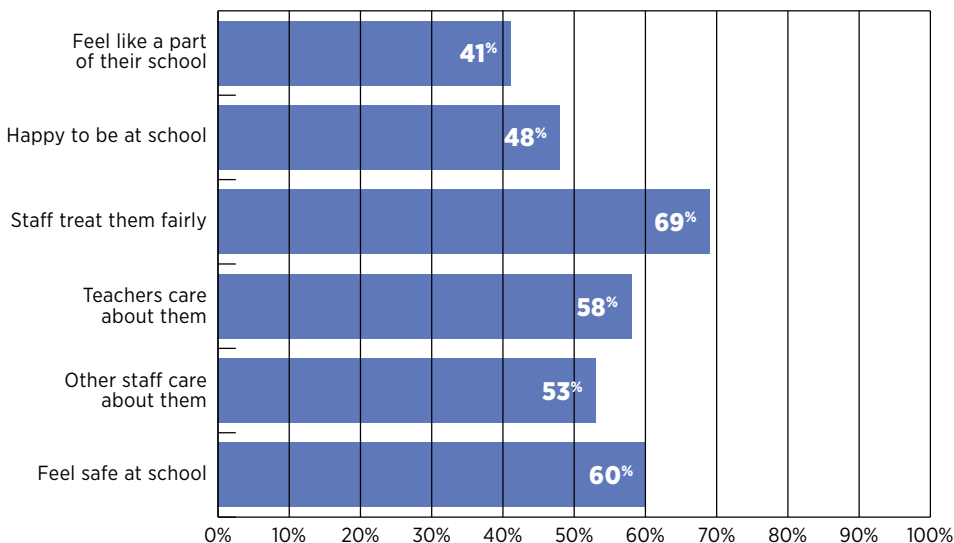
Connecting (or Reconnecting) to Culture is Protective

Speaking an Aboriginal or Indigenous language is one way of being immersed in and reconnecting to Indigenous culture. First Nations, Inuit and Métis communities across Canada have been working to revitalize Indigenous languages through their children and youth for decades; some of these efforts have been supported by the Government of Canada through their Aboriginal Peoples' Program–Aboriginal Languages Initiative (Department of Canadian Heritage, 2016). In the 2014 HSIY survey, we asked whether youth could speak an Aboriginal language. Of those who said yes, some specifically identified Haida, Sekani, Cree, Gitksan, Sm'algyax, and Nisga'a. Those who spoke an Indigenous language were much less likely to have considered suicide in the previous year (24% vs. 64%), or to have self-harmed in the previous year (47% vs. 74%). Those who spoke an Aboriginal language were also more likely to rate their mental health as good or excellent (59% vs. 33%).

We found potentially positive associations for health outcomes among Indigenous LGBTQ2S youth who reported involvement in traditional or cultural activities since becoming homeless or street-involved. The p-values were just over the usual .05 cut-off for the various analyses (.064 to .090). However, we found measurable effect sizes in the small levels of change range (ϕ =.202 to .239). These results should be considered with caution, but they provide some evidence that affirms previous focus group research findings, so we offer them here. Those who had participated in cultural activities since becoming homeless were less likely to have attempted suicide in the previous year, or to have self-harmed. They were somewhat less likely to have engaged in heavy sessional drinking on 10 or more days in the previous month. They were also more likely to rate their mental health as good or excellent, and to feel their current life circumstances were good or excellent.

School involvement may be protective, but results are inconclusive. School attendance has been identified as a protective factor for young people in a number of studies, including for LGBTQ non-Indigenous youth. However, this protective effect is primarily noted when young people feel safe at school, and report higher levels of school connectedness. In this survey of homeless and street-involved youth, 73% of Indigenous LGBTQ2S youth said they were currently in school, and most of these were attending an alternative school (59%). The survey also asked several different questions related to school connectedness (see Figure 3), and only about half of Indigenous LGBTQ2S youth attending school reported feeling positive about the various dimensions of school connectedness. They were less likely to feel happy to be there, compared to their straight cisgender Indigenous peers (48% vs. 65%). More positively, Indigenous LGBTQ2S youth who were street-involved or experiencing homelessness and currently attending school were twice as likely as those not in school to expect they would be living in a home of their own within five years (51% vs. 26%).

FIGURE 3: CONNECTED TO SCHOOL (AMONG INDIGENOUS
LGBTQ2S YOUTH CURRENTLY ATTENDING SCHOOL)

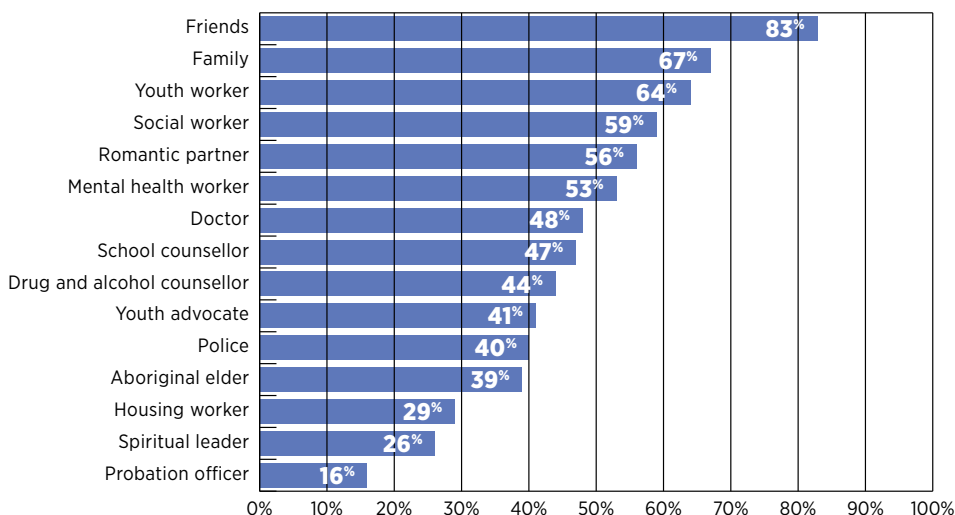


Source: 2014 HSIY Survey.

Supportive Adults can be Important, but a Relatively Small Number Turn to Adults for Help

While family relationships may be challenging for homeless and street-involved youth, they can still be an important source of emotional support or help with problems. Friends and supportive adults outside the family can also offer key support. The survey asked whether youth had sought help from a variety of different people in the past year, and whether those people were helpful or not (see Figure 4). Indigenous LGBTQ2S youth who asked for help from their family were less likely than heterosexual Indigenous youth to say their family was helpful. Similarly, Indigenous LGBTQ2S youth who asked for help from social workers and probation officers were less likely than Indigenous heterosexual cisgender youth to say those workers were helpful.

FIGURE 4: PEOPLE INDIGENOUS LGBTQ2S YOUTH APPROACHED FOR HELP IN THE PAST YEAR



Source: 2014 HSIY Survey.

Note: Youth could choose more than one answer.

Trust may also be an issue: while nearly all youth asked for help from friends in the previous year (83%), a smaller number asked for help from adults outside the family. Fewer than half the youth reported asking for help from adults other than youth workers, social workers and mental health workers. For example, only 39% had asked an Elder for help in the previous year. Compared to Indigenous heterosexual cisgender youth, LGBTQ2S youth were more likely to ask for help from a youth advocate (41% vs. 27%), a drug and alcohol counsellor (44% vs. 24%), or a mental health worker (53% vs. 25%), while they were less likely to ask

for help from a probation officer (16% vs. 26%). Among LGBTQ2S youth, Indigenous youth were less likely than non-Indigenous LGBTQ youth to have asked a youth worker for help (64% vs. 82%). Since only about half of LGBTQ2S youth asked for help from non-family adults, most of these analyses involve a relatively small number of Indigenous LGBTQ2S youth from the survey, and thus do not have enough statistical power for significant results, yet they offer some suggestive trends in effects that may be worth considering.

One finding that was statistically significant, despite the small sample size of the survey: Indigenous LGBTQ2S youth who could identify an adult outside their family they could turn to for support were more likely to see themselves in a job in five years compared to their peers without this type of support (55% vs. 29%).

Since so few youth asked an Elder for help (39%), most results were not statistically significant; however, the findings we examined had *phi* coefficients showing effect sizes that were moderate or at the upper end of small. While we felt these suggested potential relationships that could be worth testing in further research on specific interventions, it is important to interpret these results with caution. Among the Indigenous LGBTQ2S youth who asked an Elder for help, those who found this support helpful were more likely to feel their current life circumstances were good or excellent (*phi*=.323). They were somewhat less likely to have self-harmed in the previous year (*phi*=-.163), or to have missed out on needed medical care (*phi*=-.175). Indigenous LGBTQ2S youth who found an Elder helpful were also less likely to have engaged in heavy sessional drinking on 10 or more days in the previous month (among those who ever drank alcohol, *phi* =-.238). They were also somewhat more likely to rate their mental health as good or excellent, and to see themselves with a job in five years (both *phi*=.189).

Social workers are another group homeless and street-involved Indigenous LGBTQ2S youth may encounter, and from whom they get help. They were less likely than their heterosexual Indigenous peers to find a social worker helpful. However, the LGBTQ2S youth in the survey who found social workers helpful were significantly less likely to have self-harmed in the previous year (56% vs. 81%), and were less likely to report problems from substance use in the previous year (*phi*=-.285). They were less likely to forego needed medical care. They were also somewhat less likely to have attempted suicide in the previous year, or to have foregone needed mental health care (*phi* from -.200 to -.284).

Youth workers and mental health workers also appeared to be a positive resource. When Indigenous LGBTQ2S youth asked youth workers for help and found them helpful, they

were less likely to have missed out on needed medical care (27% vs. 60%), to have foregone mental health care ($\phi=-.243$), or to have self-harmed in the previous year ($\phi=-.251$). When Indigenous LGBTQ2S youth asked mental health workers for help, 63% found them helpful; those who found mental health workers helpful were more likely to see themselves employed in five years compared to those who did not find mental health workers helpful (62% vs. 30%).

Changing the Paths for Indigenous LGBTQ2S Youth Experiencing Homelessness: Youths' Recommendations, and Implications for Policy and Practice

Most Indigenous LGBTQ2S youth who participated in the survey said there were a number of services their communities needed in greater quantities (see Table 2). They were more likely than heterosexual cisgender Indigenous youth to say they needed more youth clinics in their community (45% vs. 28%). They were also more likely than heterosexual cisgender Indigenous youth to say their community needed more mental health supports (41% vs. 24%).

TABLE 2: SERVICES INDIGENOUS LGBTQ2S YOUTH SAID THEY NEEDED MORE OF IN THEIR COMMUNITY

| TYPE OF SERVICE | PERCENT OF YOUTH REPORTING |
|--|----------------------------|
| Safe and affordable housing | 52% |
| Safe house/shelter/transitional housing | 50% |
| Job training/work experience | 49% |
| Youth clinic | 45% |
| Life skills training program | 44% |
| Youth centre | 43% |
| Mental health support | 41% |
| Food bank | 39% |
| Alcohol and drug treatment/counselling/detox | 38% |
| Street nurses | 28% |
| Dental services | 24% |
| Soup kitchen | 24% |
| Needle/crack pipe exchange | 23% |
| Affordable childcare/babysitting | 23% |
| Supervised injection/Insite | 21% |
| Veterinarian | 19% |

Conclusion and Recommendations

Our findings echo the voices of Indigenous LGBTQ2S youth experiencing homelessness in other studies in Canada. We found that Indigenous LGBTQ2S youth experiencing homelessness and street involvement reported a number of disparities compared to Indigenous heterosexual cisgender homeless and street-involved youth, including higher rates of violence and discrimination, fewer sources of support and, as a result, significant health care issues, including mental health challenges such as suicide attempts and self-harm. Most of these youth have experienced significant cultural and family loss, and were dealing with the legacy of historical trauma; most have been in government care, and nearly two in three had relatives who had been in a residential school. Indigenous LGBTQ2S youth experienced more precarious housing, and were more likely to leave their reserve or community, yet end up homeless in other places. They were more likely to miss out on needed medical care and mental health care, and less likely to find some of the services they accessed helpful.

At the same time, we saw that Indigenous LGBTQ2S youth experiencing homelessness have a number of strengths and supports they draw on, and when they do access services or caring adults they find helpful, they report better health and more hope for their future. One of the key protective factors that appears to foster resilience is connection (or re-connection) to Indigenous culture, whether through language revitalization, participating in traditional cultural activities, or getting support from Elders. These protective factors have been recommended in other studies, but to our knowledge, this is the first multi-city survey of Indigenous LGBTQ2S youth experiencing homelessness to actually document the link between cultural connectedness and better mental health outcomes. Communities should support culturally based programs to reconnect Indigenous LGBTQ2S youth experiencing homelessness to their cultural heritage.

There are also a number of recommendations from the Truth and Reconciliation Commission of Canada (TRC) that may be relevant for Indigenous LGBTQ2S youth experiencing homelessness, though they are not specifically mentioned in the report (TRC, 2015). One of the most relevant is the first recommendation, calling on the federal government to reduce the number of Aboriginal children in care, especially the specific recommendation, “1.ii. Providing adequate resources to enable Aboriginal communities and child-welfare organizations to keep Aboriginal families together where it is safe to do so, and to keep children in culturally appropriate environments, regardless of where they

reside” (TRC, p. 1) and “1.v. Requiring that all child-welfare decision makers consider the impact of the residential school experience on children and their caregivers” (TRC, p. 1). The high proportion of Indigenous LGBTQ2S youth who have been in government care, and whose family members have experienced residential schools, helps explain some of the challenges these youth face, and the ongoing legacy of historical trauma that creates challenges for them and their communities.

Since nearly a third of Indigenous homeless youth in these communities reached by the survey were LGBTQ2S, all health care and mental health professionals and youth workers and social workers who work with homeless youth should be aware of and responsive to their needs. We recommend that providers who work with homeless youth engage in specific work on unlearning racism and homophobia/biphobia/transphobia, as well as learning how to foster culturally safe practices and environments for Indigenous LGBTQ2S youth. Professionals should also be trained in trauma-informed care, given the levels of trauma experienced by Indigenous LGBTQ2S youth experiencing homelessness.

With the importance cultural connectedness appears to have in fostering better health among Indigenous LGBTQ2S youth, and given that those who asked Elders for help and found them helpful reported better health as well, one of the other TRC recommendations is particularly salient, calling on the Church parties to the TRC to fund “61.iv. Regional dialogues for Indigenous spiritual leaders and youth to discuss Indigenous spirituality, self-determination, and reconciliation” (TRC, p. 7). In several of the studies of Indigenous homeless and street-involved youth, including this study, youth described a lack of both safety and acceptance in their communities that creates challenges for them, causes them to leave home and contributes to their ongoing homelessness. Communities may further benefit from Two-Spirit role models and leaders helping to raise awareness about historical elements of Indigenous culture that included respected roles for Two-Spirit people as a way to increase acceptance and support for LGBTQ and Two-Spirit youth (McNeil-Seymour, 2015).

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2.1 IT'S A KIKI...

Tina “TJ” Jones & Jermaine “Jlin” Ellis

Introduction

The Kiki Coalition is a group of LGBTQ+ youth-serving agencies in the five boroughs of New York City. The coalition meets monthly to identify opportunities for collaboration in serving LGBTQ+ youth in New York City. This case study will briefly describe the Ballroom Scene, the Kiki Scene, and the history and purpose of the Kiki Coalition, including the ways in which its members work to create safe spaces for LGBTQ+ youth of colour who come from underprivileged and underserved communities and often experience homelessness.

The Ballroom Scene

The house and ballroom scene/community is a multigenerational, autonomously organized community created originally by and for Black and Latino/Latina LGBTQ+ people. It functions as both a source of social support and as a creative collective. The history and legacy of the Harlem drag balls has been traced by numerous historians and cultural commentators to the notorious drag ball culture of Harlem in the 1920s and 1930s New York, preceded by and coming out of the great migration of African Americans from the southern part of the United States to the north. These drag balls, in many ways, were created as a safe haven for the Black queer population in Harlem, and grew out of resistance to homophobia.

The modern house and ballroom scene was established in 1967 in response to racism in New York’s drag ball circuit community. Between 1968 and 1973, ballroom houses were created. A ‘house’ is a socially configured kinship structure (Arnold & Bailey, 2009). Houses may also be called families, and they provide a home (sometimes literal, sometimes figurative) for their members. Houses are led by an appointed mother and/or father representing the House, and include a collective of other members called ‘the children.’ House parents provide guidance for their ‘children’ of various ages, races and

ethnic backgrounds. The first three houses were Labeija, The Brooklyn Ladies, which became The House of Dupree, and The House of La Wong. At present, most houses have chapters throughout the United States (Arnold & Bailey, 2009) and internationally.

Balls are events in which people come as both spectators and participants. A particular house or house representative hosts them and participants compete for cash prizes and trophies in a variety of competition categories. Balls typically involve fashion runway categories, voguing, and performances that transcend gender and sexual identities. Participants have the opportunity to walk in particular categories and win trophies. The more one wins, the more elevated one's social status within the community (Lemos, Hosek, & Bell, 2015).

The Kiki Scene

A subset of the mainstream house and ballroom scene, called the Kiki Scene, was created just over 10 years ago. Kiki is a ballroom term, meaning something to be taken lightly or something done as a joke. Kiki houses and Kiki balls began as less competitive versions of the ballroom scene. The Kiki Scene was created out of a need for a youth-only space that was more economically accessible and less competitive for youth. The Kiki scene mimics the Ballroom structure, but is led by young people in collaboration with community-based organizations and service providers. The Kiki Scene provides access to HIV/AIDS prevention and treatment information and services, personal and professional development assistance and a sense of peer-led community support. The Kiki Scene's population is majority (85 to 90%) African American and Latino American LGBTQ youth between the ages of 13 and 29. There are 10 to 15% of youth from other ethnic backgrounds who also participate.

Kiki Coalition: Mission and Program Philosophy

The mission of the Kiki Coalition is to provide safe spaces for LGBTQ+ youth where they can connect with their peers and allies and celebrate one another's diverse range of talents. Along with safe spaces, we support youth by connecting them with mentors and providing leadership and personal development opportunities for members of the Kiki community through the Youth Leadership Council, internships, community groups and other character-building activities related to salient issues including, but not limited to, social justice, education, and health and wellness.

A lot of the youth participants access services from multiple organizations involved in the Kiki Coalition. Many of these organizations receive funding from the same sources and have grant-related targets to reach in a specific time period. Instead of fighting over youth participants, we share the resources, since our goals are all ultimately the same. Linkage agreements are in place between organizations to help ensure we can effectively collaborate, and that young people's service needs are being met. All these organizations are familiar with the variety of services provided by member organizations, and are therefore better able to refer young people for appropriate assistance. For example, if a young person shows up to one organization and they are hungry and unable to access food, we know where to refer them for dinner and snacks. Similarly, if a young person needs clothing or wants to hang out and enjoy fellowship with other liked-minded teens or LGBTQ+ youth in general, we know where to send them. The same is true for young people who need medical treatment, those who are looking for work, young people who are experiencing homelessness, and young people who want to talk to a counsellor. The Kiki Coalition sees positive youth development as a foundation for building upon the resilience, talent and empowerment of LGBTQ+ youth to be stewards of not only their own personal life trajectories, but also the wellbeing of the communities they are from. We see a world without the structural and social inequalities that currently affect the health and wellbeing of LGBTQ+ youth. This world will be achieved by invigorating the Kiki community and empowering its members to live proudly with themselves, and to be able to make a lasting difference in the world.

Our Core Values

Pride

We believe everyone deserves a life in which they feel proud of who they are without fear of or experiencing discrimination and maltreatment, particularly as it concerns one's sexual orientation and/or gender identity and expression.

Resilience

The house and ball communities have thrived despite undergoing immense hardships, and we hope to support this same strength to support self-determination and for participants to live happy, productive lives.

Safety and Wellness

We believe everyone should have a safe space where they are free to express themselves and thrive with excellent physical, emotional and mental health.

Allyship

As a coalition of organizations working with a historically oppressed community, we believe our role is to support and aid the community and serve as allies, with a relationship founded on accountability.

Social Justice

We understand the intersectionality of many issues LGBTQ+ youth face in their daily lives, so we support social justice on every level and for everyone, regardless of race, religion, socioeconomic status, sexual orientation, gender identity and expression, or any other basis for wrongful discrimination.

What does the Kiki Coalition do?

In addition to coordinating services for LGBTQ+ youth, we also host events that provide youth opportunities to express themselves as whole people, however they identify on the gender and sexuality spectrum, and whatever their race and housing status. Because we are a collaborative of social service organizations, many of the youth we work with are either experiencing homelessness or are precariously housed. It is important that young people experiencing homelessness also have supportive spaces where they can express themselves.

One of the ways we enact our values is through the four events we host for LGBTQ+ youth aged 13 to 24. Through these events, we provide opportunities for youth to become leaders in their community—if they are not already—and to express themselves in healthy and holistic ways. All events are always free for the participants, and have a theme and a community spirit component to them. All the events hosted by the Kiki Coalition allow youth to participate in the planning and implementing of such events, gaining experience and building leadership skills through the KiKi Coalition's subcommittee called CoLAB (Community Leaders Advisory Board). For example, youth have participated in every aspect of the World AIDS Day Ball, from coming up with the categories to helping promote the event. The World AIDS Day Ball, also known as the RED Ball, is of paramount importance in the Kiki scene for many reasons. One important reason is that

it pays respect to our brothers and sisters who have died. During the event, a moment of silence honours those we have lost to HIV/AIDS, as well as those we have lost to violence. Anyone who was known and passed away is recognized at this event. Secondly, the ball is an opportunity to promote HIV testing and emphasize to youth the importance of knowing their status. Our mission is enacted through the RED Ball because we want to help every young person be healthier, have stronger self-esteem, and experience being in a place where they can be their true authentic selves. Young people are able to showcase their talents while gaining information about the services and supports that are available to them through the Kiki Coalition. Organizations usually have a table at the Ball, enabling young people to meet an organizational representative, learn about the organization, and receive items that they may need, such as water bottles, condoms or backpacks. In 2016, 550 young people attended the RED Ball.

Our summer event is Youth Pridefest, which provides another opportunity for youth to showcase their artistic talents. Young people sing, dance, or perform poetry in a supportive environment. Like the RED Ball, Kiki Coalition organizational members have a table at the event as a way to engage with LGBTQ+ youth and inform them about available services. We work very closely with different houses in the Kiki scene and with the leaders of those houses (i.e., the mother/father of the house), encouraging them to engage their house members not only in the events, but also in the services provided by the organizational members of the Kiki Coalition. Youth Pridefest typically draws around 350 youth. In 2016, we created a different theme called Field Day: KiKi Wars, which kept the competitive spirit of the balls, but engaged the youth and houses in different outdoor activities such as tug-of-war, relay race, voguing musical chairs and a host of other fun, creative and challenging games.

Expectations for Membership in the Kiki Coalition

The Kiki Coalition currently has 17 active organizational members. It is sometimes challenging to maintain engagement by all 17 organizations, due to organizational staff turnover. The short-term nature of nonprofit social service staff positions, due either to burnout or funding limitations, makes consistent representation from all organizations difficult to maintain. We are hoping to work with our organizational representatives on succession planning so all 17 organizations can remain engaged, even during staff turnover. Our member organizations include homelessness services, social support services, health

and HIV services, employment, arts and culture, academic enrichment, and our city's department of health. Our expectations for organizational members include:

- The baseline level of mandatory support is a donation of \$250 monetary or in-kind, to support "Youth Pride, which is primarily organized by member organizations of the Kiki Coalition-sponsored events.
- Participation in monthly Kiki Coalition meetings, which are hosted at the various member organizations on a rotating basis. Meetings are held on the third Wednesday of each month, generally lasting 2 hours between 1:00pm and 3:00pm.
- Participation in no fewer than one but no more than two Kiki Coalition subcommittees.
- Participation in mandatory Kiki Coalition-sponsored events, as chosen by the Kiki Coalition board.
- Adherence to guidelines established by the Kiki Coalition with respect to planning and execution of events attended by youth.

Conclusion

The Kiki Coalition is a model for community organizations that want to work in tandem rather than in competition with one another. We recognize that coordination is not always easy. Large caseloads, many administrative tasks and staff turnover can make this work difficult. However, we are all working toward the same goal—making sure the youth in our communities are safe, healthy and have the ability to express themselves holistically. It is our belief that we, as organizations, should share that responsibility. After all, we are developing the LGBTQ+ leaders of tomorrow, and coordinating services across organizations helps us to do that better.

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Jermine is a native New Yorker, who once worked in Corporate law but had a change of heart and a passion for giving back to his community. Jlin wanted to see youth thrive and started volunteering at the Hetrick-Martin Institute (HMI) before they realized what a great asset he would be and how much the youth adored him. It was there he started his position and grew to be an amazing youth advisor to many of the young people who grace the doors of HMI. Often called Mother, Jlin is very well respected and considered a comedian to most staff and youth alike.

3 PATHWAYS INTO AND OUT OF HOMELESSNESS FOR LGBTQ2S YOUTH

Coco Wheeler, Christa Price & Ian Ellasante

Introduction

Over a decade ago, youth homelessness advocates noticed a spike in the number of LGBTQ2S youth experiencing homelessness. Multiple causes for the disproportionate rate at which LGBTQ2S youth experience homelessness have been reported, including homophobia, transphobia, classism and racism, often resulting in increased involvement in the foster care and juvenile justice systems, individual and familial poverty and identity-based family rejection (Ray, 2006). This chapter focuses on how the single narrative of family rejection has influenced the movement to address LGBTQ2S youth homelessness. We will also discuss the importance of an intersectional approach to this issue, and then, using that intersectional lens, we will consider alternative pathways into and out of homelessness for LGBTQ2S young people.

History of Family Rejection

Historically, the fundamental narrative highlighted by community advocates, service providers and national organizations to describe the cause of LGBTQ2S youth homelessness has been that of identity-based family rejection. This narrative includes stories of young people who come out to their families or are forcibly outed to their families by others as LGBTQ2S and are subsequently kicked out of their homes, resulting in sudden homelessness. The narrative of family rejection is an accurate description of the path to homelessness for some LGBTQ2S youth, but not for all. For example, in an ethnographic study of Latino LGBT youth in New York City, Castellanos (2016) found that homelessness was not solely the result of conflict over sexual orientation for most participants in his study: 8 of 13 participants left home before disclosing their identity, and 10 of 13 returned home after disclosing their identity and maintaining family connections. The most common pathway to homelessness in Castellanos' study was preexisting family conflict that was heightened by a young person's sexual orientation, gender identity or expression (Castellanos, 2016). While participants may have been met with negative reactions about their identities, those negative reactions were rarely the sole precipitator of homelessness.

LGBTQ2S homelessness has been called an invisible issue, with little to no public awareness. This lack of awareness often results in limited resources and funding (Berg, 2016), but the family-rejection narrative increases the likelihood of raising awareness and generating funding for this severely underfunded problem (Price, Wheeler, Shelton, & Maury, 2016). It is also more palatable for the general public to see the cause of a young person's housing insecurity as a single person or family, giving the sense that there is definite cause and effect with an apparent solution. In truth, there is no easy and clear solution to larger societal problems such as the racism, classism and poverty that so often perpetuate experiences of chronic homelessness and housing instability (Simões, 2015).

The emphasis on the family-rejection narrative has resulted in serious consequences for LGBTQ2S youth and young adults experiencing homelessness, as well as for the advocates who represent them. By focusing on this one narrative, we have reduced the wide-ranging intersectional issue of LGBTQ2S youth homelessness to a single-cause issue, excluding other narratives and experiences by default. Focusing on individual family characteristics distracts from the structural issues and socioeconomic factors that produce and maintain homelessness and housing instability (Castellanos, 2016). Furthermore, because over 65% of young people experiencing homelessness are youth of colour (Bridges, 2007), continuously highlighting the family-rejection narrative has the potential to send an unintended message that families of colour are more homophobic and more likely to reject their children (Simões, 2015). It is harmful to uphold family rejection as the only narrative, because it distracts from recognizing poverty and racism as root causes of homelessness, and narrowly focuses strategies to prevent and intervene in LGBTQ2S youth homelessness on families.

Changing the Narrative

Research shows that LGBTQ2S young people experience homelessness for multiple reasons (Choi, Wilson, Shelton, & Gates, 2015; Ray, 2006). The issue can be resolved only if advocates, educators, researchers, service providers, elected officials and young people with lived experience of homelessness are focusing their attention on innovative solutions to all the possible pathways into homelessness. By centering the intersecting experiences of LGBTQ2S youth experiencing homelessness, advocates and service providers can begin to extend the conversation beyond the family-rejection narrative and highlight the structural inequities and systemic barriers faced by young people who experience or

are at risk of experiencing homelessness. The following sections explore some of these intersections and emphasize how they affect pathways into and out of homelessness for LGBTQ2S young people.

Economic Empowerment and Stability

In a survey of youth homelessness service providers, respondents ranked employment as one of the top needs of the LGBTQ2S young people they serve (Choi et al., 2015). LGBTQ2S youth and young adults are too often unemployed and underemployed, making it difficult for them to attain self-sufficiency. There are several reasons for this, most stemming from the effects of stigma and discrimination. Employment discrimination takes many forms, including failure to hire or promote fairly, reduction of work hours, harassment or bullying, and non-enforcement of existing anti-discrimination policies. When considered in the context of the myriad other disparities confronting them, it may not be surprising that LGBTQ2S young people also face discrimination in the workplace. However, economic discrimination, including limited access to stable and safe employment, comes with long-lasting consequences, which perpetuate cycles of poverty and prolong the threat of homelessness for many LGBTQ2S young people (Mallory & Sears, 2015).

The social and economic ramifications of unstable or insufficient employment are further complicated when young people who are attempting to enter the work force hold multiple marginalized racial, ethnic, sexual and gender identities; their experiences of discrimination are compounded at those intersections. For example, an American study found that 26% of African American and 15% of Hispanic or Latino/Latina employees reported having been unfairly treated at their jobs within the previous month, and more than 40% of LGB employees and 90% of transgender people in the work force experienced discrimination based on their sexual orientation or gender identity in the workplace (Mallory & Sears, 2015). Researchers at the Williams Institute found that, compared to just 9% of White employees, 27% of African American and 20% of Hispanic employees reported having been passed over for a job for which they believed they were qualified (Mallory & Sears, 2015). The same survey also found that LGBTQ2S employees filed complaints of discrimination on the basis of sexual orientation and gender identity at similar rates as workers who are people of colour filed complaints of racially motivated discrimination, and cisgender female workers filed complaints of sex-based discrimination. The burden of navigating workplace discrimination as a person of colour who is also LGBTQ2S is

further exacerbated by issues of age and class when an employee is also young and has a history of family poverty, which can affect their level of preparedness for the work force and raise the stakes when they do not succeed.

While there are outlined federal protections in the United States (U.S.) against both racial discrimination and ageism that target older employees in the workplace, the same cannot be said for similar protections covering sexual orientation, gender identity and ageism targeting youth. This lack of protection contributes to the unprotected economic status of LGBTQ2S young people, who can be fired or not hired simply for who they are and who they love. In the U.S., 28 states have no statewide employment nondiscrimination protections covering sexual orientation and gender identity. In fact, three of these states have passed laws prohibiting both the enforcement of any existing local nondiscrimination laws and the passage of any new such ordinances. This means more than half the states in the country do not offer protection to their residents against workplace discrimination based on gender expression, gender identity, or sexuality (Movement Advancement Project, 2016).

Some of the difficulties faced by LGBTQ2S youth attempting to enter the workforce and attain economic stability are mirrored by and attributable to hostile school environments. According to the *2015 National School Climate Survey*, over 70% of LGBTQ2S students in the U.S. report having been verbally harassed, 27% physically harassed, and 13% physically assaulted at school because of their sexual orientation. Similarly, 55% were verbally harassed, 20% physically harassed, and 9% physically assaulted due to their gender expression. LGBTQ2S students who experienced this kind of victimization were three times more likely (44% vs. 12%) to have missed school in the previous month and have lower grade point averages (3.1 vs. 3.4) than their heterosexual and cisgender peers. LGBTQ2S students are also more likely to drop out of high school, with 43% citing harassment at school as the reason (Kosciw, Greytak, Giga, Villenas, & Danischewski, 2016). When LGBTQ2S students must navigate these types of negative experiences in educational environments—environments in which they would otherwise be preparing for success in the workforce and gaining life skills—the risk of sustaining cycles of poverty and homelessness is increased.

Child Welfare Involvement

The consequences of chronic poverty and homelessness vary greatly, but one common outcome is involvement in the foster care system. Despite being designed to house and protect children and young people, the foster care system often effectively works as a pipeline into homelessness for LGBTQ2S youth (Berg, 2016). Similar to narratives about the catalysts for housing instability, some youth find themselves thrust into the child welfare system due to familial rejection of their actual or perceived gender and sexuality. While this experience accounts for a percentage of LGBTQ2S youth in the foster care system, there are multiple factors that can lead to foster care involvement beyond family rejection, such as poverty, neglect, physical abuse, criminal justice involvement and more. Once in the system, which is typically not set up to meet their unique needs (Mallon & DeCrescenzo, 2006), LGBTQ2S young people face housing instability upon leaving the system or ageing out of care.

The failures of the foster care system are the result of oppressive societal forces such as racism, classism and heterosexism that are inherently woven into the fabric of the system. These systems of oppression have led to a disproportionate representation of youth of colour, families living below the poverty line and LGBTQ2S young people in the system. Youth and families of colour live under close surveillance. One study, completed by the Yale University Child Study Center (2016) indicated that in pre-schools, Black and African-American boys are observed and monitored much more closely than their White counterparts (Gilliam, Maupin, Reyes, Accavitti, & Shic, 2016). This kind of over-surveillance through implicit bias affects the foster care system as well, and can lead to increased accusations of poor parenting and the forcible removal of a young person from the care of their parent or guardian. It is therefore no coincidence that in 2014, youth of colour made up 66% of those in the foster care system (Child Welfare Information Gateway, 2016), an overrepresentation when compared to their numbers in the general population, which is about 30% (Child Trends Databank, 2014).

Families living in poverty are met with similar scrutiny because of a lack of necessary resources available to meet their needs. This lack of support can sometimes lead to an inability to pay rent, resulting in eviction and a loss of housing, or survival crimes being committed by a young person's parent, leading to the parent's incarceration. Without a network of adults available to care for such young people, they may find themselves placed in foster care (Hook, Romich, Lee, Marcenko, & Kang, 2016).

Once they are in the foster care system, many LGBTQ2S young people are housed in environments that are not affirming of their gender identity or sexuality, leading to placement disruptions or running away from that home for their own safety (Berg, 2016). Statistically, the longer a young person is placed in foster care, the fewer chances they have of being adopted or entering a stable housing environment: “After spending 12 to 18 continuous months in foster care, children’s chances of leaving foster care rapidly decreased. After 36 to 42 months of continuous time spent in foster care, a child’s chances of leaving foster care are incredibly low” (Ringelsen, Tueller, Testa, Dolan, & Smith, 2013).

Juvenile Legal Involvement

When systems are not set up to meet the needs of LGBTQ2S young people, they look elsewhere for support and stability. For many young people, this can mean staying on the street with friends, or trading sex for housing. These behaviours, particularly sleeping in public parks and engaging in survival sex, are criminalized and lead to involvement in the juvenile legal system. Transgender and gender-expansive young women of colour are among the most targeted for these behaviours, and face increased rates of targeting and incarceration by law enforcement. In fact, transgender people are “3.7 times more likely to experience police violence compared to cisgender survivors and victims of police violence” (National Coalition of Anti-Violence Programs, 2016) and are “seven times more likely to experience physical violence when interacting with the police compared to cisgender survivors and victims” (National Coalition of Anti-Violence Programs, 2016).

Another player in the criminalization of LGBTQ2S young people are school systems. For many LGBTQ2S youth, schools are environments in which they face harassment, bullying and even violence. In addition, LGBTQ2S youth are often blamed for their victimization, face increased surveillance by school officials and are punished more harshly by school staff (Snapp, Hoenig, Fields, & Russell, 2015). LGBTQ2S youth are sometimes even pressured by school officials to drop out of school, as an attempt by schools to avoid responsibility for protecting young people from a transphobic and homophobic environment (Burdge Lacoma, & Hyemingway, 2014).

United States Federal Response

In 2015, the U.S. Interagency Council on Homelessness (USICH) released a report, *Preventing and Ending Youth Homelessness: A Coordinated Community Response*, highlighting the four core outcomes on which communities should focus to prevent and end youth homelessness: permanent connections; stable housing; education and employment; and social and emotional well-being. The following sections outline innovative solutions to LGBTQ2S youth homelessness using the USICH's four core outcomes (USICH, 2015).

Permanent Connections

Establishing permanent connections is one way LGBTQ2S youth experiencing homelessness can begin to enter stable housing environments. These connections can be formed through a variety of relationships: previous caseworkers, family, friends, teachers and foster parents—essentially anyone who has provided safety and stability at one time or another. These permanent connections can lead to financial support, access to resources and emotional support, all critical pieces to ending homelessness and housing instability.

LGBTQ2S youth who may not have these types of formal connections to rely upon for support may turn to their peers, forming chosen family systems that mimic traditional families in their roles and responsibilities. Chosen families showcase one of the many ways LGBTQ2S youth experiencing homelessness are resilient and resourceful. Supporting one another in ways that can encompass housing and financial assistance are just some examples of the benefits of chosen families; more than anything, for many LGBTQ2S young people, “the families that they construct are the first time they have experienced healthy and affirming family dynamics” (Price et al., 2016).

Education and Employment

As mentioned earlier in this chapter, economic empowerment is another pathway for LGBTQ2S young people to break free from cycles of poverty and chronic homelessness. While educators and employers have a role to play, so too do case managers and care coordinators at homelessness service agencies. These staff people are the front-line touch points for LGBTQ2S young people who are experiencing housing instability. They can

take active steps to ensure LGBTQ2S young people will be safe and affirmed when they make referrals or partner on their behalf with schools, employment training programs and employers. An effective and practical first step for case managers and care coordinators includes investigating a referral organization's history of working with LGBTQ2S young people before making a direct referral or establishing a partnership. When necessary, they can recommend, arrange or facilitate competency training for the organization's staff and volunteers, focusing on the specific needs of LGBTQ2S young people and guiding the organizations toward instituting LGBTQ2S-affirming best practices and policies.

Over 80% of LGBTQ2S students report being aware of LGBTQ-related discriminatory practices and policies in their schools (Kosciw et al., 2016). Nearly three-quarters of LGBTQ2S students are aware of these discriminatory practices and policies affecting other students; two-thirds have experienced this discrimination first-hand (Kosciw et al., 2016). School environments in which LGBTQ2S students are unprotected and unsafe can lead to negative educational outcomes for them. On the other hand, when students feel more assured of their safety at school, educational outcomes improve, along with significant and ongoing positive repercussions, including increased economic empowerment. There are a number of ways to ensure greater safety in the learning environment for LGBTQ2S young people. These include expanding access to and participation in Gay–Straight Alliances (GSAs); improving the quantity and quality of positive representations of LGBTQ2S people, history and issues in educational curricula; and increasing the availability and visibility of LGBTQ2S-supportive teachers and administrators (Kosciw et al., 2016).

When addressing employment discrimination and its impact on LGBTQ2S young people, the degree of legal recourse available to LGBTQ2S employees varies by state. However, despite a lack of legal protection, employers and employees can take steps to ensure they are creating a workplace that is free of harassment, safe and affirming for all employees, regardless of their age, sexual identity or gender identity and expression. An important step is identifying allies of LGBTQ2S people in the workplace. Non-LGBTQ2S colleagues have less at stake than their LGBTQ2S counterparts—particularly when considering employees with multiple marginalized identities, who are relatively new to the workforce—and are therefore exposed to less risk in the workplace when they speak up for equality and justice for LGBTQ2S employees. Adding explicit protections for LGBTQ2S employees to human resources policies and, when necessary, enforcing those policies, also sends a strong message of being a workplace that intends to uphold equality and safety for all employees. Mandating training for all new employees that includes LGBTQ2S awareness and sensitivity is another step to prevent discrimination in the workplace.

When LGBTQ2S young people strive for economic empowerment using the same means as their cisgender and heterosexual peers—most typically education and employment—their access to the same degree of empowerment is not guaranteed unless they can be assured of fair treatment in these environments. Because LGBTQ2S people experience poverty at higher rates, assuring access for LGBTQ2S young people to stable employment and safe, affirming educational environments is essential to ending the cycles of economic instability and homelessness.

Social and Emotional Well-Being

Social support and well-being is a critical component of preventing and ending homelessness for LGBTQ2S young people. Families can support the social and emotional well-being of LGBTQ2S youth experiencing homelessness, but they may need guidance to do so. Families in this context can mean biological, legal or chosen families. For LGBTQ2S youth who have strained relationships with their biological families, chosen families may be able to provide emotional well-being by constructing safe and affirming family structures. While these family structures are referred to as ‘chosen,’ they should be respected and considered to be as legitimate as biological families: “It is essential that service providers and advocates respect the families as defined by the youth they are working with, in the same way that they would respect a youth’s chosen name or pronouns” (Lowrey, 2016).

For LGBTQ2S youth who have maintained contact with their biological or legal families, or who wish to reconnect with them, family reunification or reconnection may be an option. Reunification is not the goal for every young person; however, for families who have the desire and capacity to be mended, it should be facilitated. Family reunification takes time and can be key in preventing future occurrences of housing instability and homelessness (Pergamit, Gelatt, Stratford, Beckwith, & Carver Martin, 2016). While reunification can happen informally within the family, the Urban Institute notes, “...reconnection with family can be more successful if the youth goes through the process while supported by service providers” (Pergamit et al., 2016).

Another factor in establishing permanent housing outcomes through social and emotional well-being is to ensure that LGBTQ2S young people have access to inclusive, affirming and holistic health care. A large proportion of LGBTQ2S youth experiencing homelessness have histories of trauma, stemming from their involvement with the juvenile justice or

foster care systems, family rejection, bullying or street involvement (Berg, 2016). To begin the healing process, LGBTQ2S youth require medical providers that are inclusive and non-pathologizing, who create an affirming space for young people to be open and honest about their feelings and experiences (Berg, 2016).

Stable Housing

With the introduction of the Runaway and Homeless Youth Act (RHYA) in 1974 came much-needed services for unaccompanied young people experiencing homelessness in the U.S. Over 40 years later, these services haven't changed much, though we have learned a considerable amount about the experiences and needs of young people experiencing homelessness. RHYA funds three different programs that make up the continuum for runaway and homeless youth services: 1) Basic center programs, which also include emergency shelters; 2) Transitional living programs; and 3) Street outreach programs (National Network for Youth, 2013). By comparison, the federal government in Canada introduced a homelessness strategy in 1999. The Homelessness Partnering Strategy provides program funding to communities to address issues related to youth homelessness; however, there is no direct youth homelessness funding stream or targeted strategy in Canada (Gaetz & Redman, 2016).

In both the U.S. and Canada, policies addressing youth homelessness need to be reconsidered to ensure that all subpopulations of young people experiencing homelessness are included (e.g., LGBTQ2S, racialized, and pregnant and parenting young people), and to move from the existing reactive temporary solutions to a more proactive sustainable model that also includes prevention, with a focus on permanent housing. Moving away from time-limited emergency housing to a long-term more sustainable housing model is essential if we are to reduce the number of young people experiencing homelessness (Gaetz, 2014).

The disparities confronting LGBTQ2S young people are rooted in discrimination, homophobia and transphobia. The effects of these systemic oppressions can lead to poverty and homelessness for LGBTQ2S youth in disproportionate numbers. In this chapter, we have outlined the negative consequences that a single family-rejection narrative can have when considering the issue of LGBTQ2S youth homelessness, including the exclusion of young people with different narratives who are often people of colour. We also discussed the ways the family-rejection narrative affects the solutions we consider, and thus the

policies we support, to address the issue of LGBTQ2S youth homelessness. In response to this narrative and its consequences for LGBTQ2S young people who experience homelessness or housing instability, we have offered three alternative ways to consider the causes, outcomes and solutions to addressing LGBTQ2S youth homelessness, by examining how economic empowerment, child welfare and juvenile justice involvement contribute to homelessness and housing instability. By investigating these issues using an intersectional lens, which takes into account multiple marginalized identities, it is clear that increasing access to pathways out of homelessness requires a holistic, systemic approach.

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3.1 RUTH ELLIS CENTER FAMILY PRESERVATION PROGRAM, DETROIT, MICHIGAN

Jessie Fullenkamp

Introduction

For the past 17 years, the Ruth Ellis Center (REC) has served LGBTQ2S¹ youth in the Detroit, Michigan area through its Second Stories Street Outreach, Ruth's House (residential foster care), and the recently added Health and Wellness Center. In October 2015, the Center began a pilot project designed to help LGBTQ2S children and youth who may be at risk for removal from their homes by the state when there is evidence that parental mistreatment may be related to the child's sexual orientation, gender identity or gender expression (SOGIE). This program's key goals are family engagement, preservation and support.

The program is being implemented as a collaboration between REC and Dr. Caitlin Ryan from the Family Acceptance Project at San Francisco State University. Dr. Ryan is working with REC staff to integrate The Family Acceptance Project's research-based family prevention and intervention strategies into a Family Group Decision Making model. In this established international model, staff engage parents, caregivers, youth and others (additional supports named by the youth or their primary caregivers or both) to develop a plan to provide intensive services with the goal of keeping children safe, preserving families and increasing family connections. For the first time, the Family Acceptance Project–REC collaboration adds an essential component for families with LGBTQ2S children: specific research-based Family Acceptance Project strategies that help families: 1) Understand their child's SOGIE in a cultural context; 2) Learn how to identify and modify specific rejecting behaviours that increase their LGBTQ2S child's risk for suicide, substance abuse, HIV, family conflict and other unhealthy outcomes; 3) Increase accepting behaviours that promote wellbeing, build interactional skills and help families to create an LGBTQ2S-affirmative environment (Ryan, 2016).

¹ REC works with American Indian Health and Family Services to facilitate two-spirit support and referrals. However, there have not been any families in the program so far who identify as two-spirit, First Nation or American Indian.

REC receives referrals primarily through the county's Child Protective Services (CPS) case managers for families where a child abuse or neglect investigation has been opened and involves rejecting behaviours related to a child's known or perceived SOGIE. Referrals can also come from juvenile justice, foster care, community mental health, service providers for runaway and homeless youth, primary health care, and other community-based agencies. REC has trained frontline protective service investigators on SOGIE, and core needs and experiences of LGBTQ2S children and adolescents. REC has also trained investigators with the Family Acceptance Project's research activities about the critical role of family support, and how to identify abusive and harmful behaviours related to a child's LGBTQ2S identity and gender expression. Within 48 hours of the investigation, staff at REC have a face-to-face meeting with the family.

This enhanced family-centred approach empowers families to support their LGBTQ2S children in a culturally congruent framework that helps families address pressing needs such as housing stability, food security, mental health, health care and other basic needs.

The work aims to reduce the number of LGBTQ2S youth placed in foster care, an experience that can increase the chances a young person will experience homelessness. One study found that 63% of LGBTQ2S youth had lived in a foster or group home and 39% were forced to leave their home because of their sexual orientation or gender identity (Center for the Study of Social Policy, 2016) and over 40% of males formerly in foster care reported contact with the criminal justice system (Child Welfare Information Gateway, 2013). REC has trained almost every CPS caseworker in the county, and is working to increase connectedness and support for families and their LGBTQ2S children, aged 5–18, through this project.

Positioning Family Preservation and System of Care Work in National LGBTQ2S Work

Historically, social services that are specific to serving LGBTQ2S youth have operated as nongovernmental, grassroots nonprofits. This limited scope was confirmed by a federally-funded LGBTQ2S work group known as 3/40 Blueprint, which surveyed the landscape of LGBTQ2S youth services in the United States that were focused on transitional living programs. Initially, REC was one of those identity-based agencies founded by the community in response to immediate crisis needs, and in its first seven years, it

operated primarily as a drop-in centre for LGBTQ2S youth experiencing homelessness. Eventually, REC plugged into U.S. federal programs for runaway and homeless youth, state-funded residential foster care and Medicaid dollars for outpatient community mental health services. This system of care now sustains services, along with a healthy mix of foundation, corporate and individual donor support.

REC started to see the benefits of working with local, state and federal systems of care for more than financial resources. Through these more established systems of care, youth and families were being referred to LGBTQ2S-specific services with which they would have been unlikely to engage otherwise. Additionally, the youth involved in these systems of care were younger than the youth coming to the REC drop-in centre. Working with different systems of care allows REC to provide services before youth are kicked out of their homes and have experienced compound trauma from family rejection and living on the streets. This is REC's primary work to prevent homelessness: engaging a family while youth are still in the home, mitigating harm youth experience from rejection and supporting families in staying together, if possible. After one year of REC's pilot work, the agency has learned a great deal from the families in the program. What follows are some of the stories of families working hard to provide for their children, young people trying to be themselves and REC building on these strengths to build safe and affirming homes.

Family Stories and Considerations When Doing Systems of Care Work

"I'm not gay"

This first story highlights an important lesson when working with systems of care. Front-line workers often need training and support to make referrals, since the need to refer youth who self-identify as LGBTQ2S can be clear, but it is also important for workers and investigators to refer families where primary caregivers are demonstrating rejecting behaviours toward a child's SOGIE, which includes gender expression. Ensuring that workers know a person need not identify as LGBTQ2S to be a good fit for services, and we need not name this social identity for an individual, is key to providing services for some of the most underserved youth. This also means reexamining literature, visual cues and the space in which family work happens in order to be inclusive of people who do not explicitly identify as LGBTQ2S. Agencies can find a healthy balance between meeting families where they are, while still showing LGBTQ2S pride.

The first family referred to this program included an 11-year-old, Deon, and his mother, Latrise.² Deon loved talking on the phone, karate and, most importantly, his mom. One of the first observations from the REC counsellor who met with the family was how responsive Deon was to his mom, looking for her cues and approval. Latrise, a mother of three children, had worked hard to keep her children at home after a removal by CPS previously; she had also recently become active in her church. CPS referred the family to the REC due to evidence related to neglect because of Deon's unmonitored phone and internet use, as well as an incident of physical discipline. When the family was referred to REC, Latrise and the CPS worker were very concerned about Deon posing as his 18-year-old sister online and attempting to date 40-year-old men. When first interviewed, Latrise shared more about her hopes, dreams and fears for Deon. She was worried about Deon's online safety, and described her son as a "fag," along with demonstrating other negative views of gay people. She recently had Deon baptized at church, with the promise that God would drive the demons out of him. During the same visit, in a separate interview, Deon said to the counsellor, "I'm not gay." In debriefing the session, the counsellor noted that of course Deon did not identify as gay. In his household, it was clear that if he wanted love from his mother, he could not be gay. The referral from the CPS worker did not state that Deon was gay, and the REC counsellor respected that Deon did not identify. In a 6-month period, following Deon's baptism, he was hospitalized three times due to self-harm. The work with this family focused on supporting the mother in understanding the power of her words and actions, especially the statements that were rejecting toward Deon's SOGIE. Currently, REC's protective work centres on Latrise's world view, while building options that help her reduce rejecting behaviours and increase accepting behaviours.

"No wrong door"

Referrals to programs that provide family preservation, homelessness prevention and homelessness services need to come from multiple sources. Different services will intersect with LGBTQ2S youth at different stages and areas of care and need. Funneling referrals to family work is potentially the most effective for housing permanency, health and safety.

Mohammed, age 15, was referred through a primary care physician who specializes in transgender health care at REC. He advocated excellently for his identity-based needs, and was seeking a doctor to prescribe testosterone so he could feel more like himself in his body. Mohammed was assigned female at birth. He was desperate to start taking

² Pseudonyms for all individuals described in case studies are used to protect confidentiality.

testosterone and believed this step was necessary to affirm his gender identity. He was continuously traumatized by experiencing female puberty (e.g., growing breasts and experiencing monthly menses) and knew testosterone would relieve those symptoms. Mohammed did extensive internet research on the effects of taking hormones and watched YouTube videos of other young people who were transitioning. After taking testosterone, he believed he would be much happier and more agreeable. Early on, he shared with the counsellor, “I know what T [testosterone] will do to my body and I understand the side-effects I might have...I’ve told my grandma that I will never be happy until I get the medication I need. And as long as I wait, I will remain this way.” Despite daily ridicule and rejection based on his gender identity, Mohammed still earned good grades. The referral he received from his physician stated that she worried Mohammed “will leave home and access street hormones, as well as become disconnected from his family.” Furthermore, she worried that the rejecting behaviours would cause Mohammed to hurt himself.

Mohammed lived with his grandmother, Jean, who was the primary caretaker of Mohammed, but his biological mother, Maya, was his legal parent. For the past few years, Maya’s struggle with addiction had not allowed Maya to always be available to care for Mohammed. The family stated they would never put Mohammed out; he would always have a home, food and clothing. The family said they love Mohammed and want him to be successful. Their hopes and dreams for Mohammed included graduating from high school, attending college, and being respectful, independent and employed as an adult. An accepting strength of the family, which is important to note, is that they provided him gender-neutral clothing. Additionally, the family agreed to participate fully in the REC family preservation program and extended family, friends and community members agreed to attend the family conference. Grandmother Jean shared with the counsellor that she believed “homosexuality is grotesque and against nature...my granddaughter drawing thick eyebrows and facial hair on her face is ridiculous and embarrassing.” This indicated that Jean conflated sexual orientation and gender identity. Jean was willing to concede that Mohammed’s interest in medically transitioning was “a thing one can choose to do without parental consent only after one turns 18.” All the family members use she/her pronouns and refer to Mohammed as their “daughter” or “granddaughter.”

Mohammed was clearly at high risk for suicidality and additional negative health and safety outcomes. His family might not have come to the REC family preservation program if not for the doctor’s referral. Additionally, Mohammed might not have been open to participating if the referral hadn’t come from a resource that affirmed his identity. The

doctor's referral opened the family up to a medical transitioning conversation they might not have had with a different referral source. While there were many barriers facing this family, they attended the family group conference and set goals that addressed: minimizing rejecting behaviours, accessing psychoeducational information and resources for LGBTQ2S identity; connecting with community support, including clergy; and encouraging Mohammed's school to support LGBTQ2S identities.

“Families you probably will not see at Pride festivals”

The LGBTQ2S community and ally communities should not make assumptions about the ‘type’ of family that is open to reducing rejecting behaviours and increasing accepting behaviours toward their LGBTQ2S child. Families that might benefit most from this work often show up at state services when the child is younger. Working with different systems of care reduces the number of missed opportunities to facilitate safety for LGBTQ2S youth.

The Spring family provided a generally safe and healthy home environment for their children. Sam, age 14, identified as gender neutral, was assigned female at birth and used she/her pronouns. She shared with the REC counsellor, “I like being called Sam...LGBTQ people are born that way.” Sam had a positive personal worldview regarding LGBTQ2S identity and expression, stating that it’s “kinda cool. People can express themselves in different ways...I’m pansexual; I don’t think about the gender of the person I like. I think I’m gender neutral. I don’t want to change my sex.” Sam’s parents showed their love for their child by verbalizing it and demonstrating it with affectionate behaviour. The referral for the Spring family to the REC family preservation program came from the Juvenile Justice detention facility Sam was in. Sam was placed in the detention facility because of truancy from school and having run away from home. Upon Sam’s return to the family home, her parents made significant adjustments to welcome her back. After returning to the community, Sam became successful in school and had many positive friends. The family spent time together hunting and camping. Sam’s mother and father were active in a conservative church, which they attended several times each week, while her father was an elder in their faith community. Sam’s parents were previously completely uninformed about LGBTQ2S identity and their rejecting behaviour reflected lack of knowledge. They frequently said, “she’s just confused,” and “it’s just a phase,” as their primary messages. These statements stopped very early in the family’s participation in the REC family preservation program once Sam had the formal space to state the importance of affirming who she was. The Spring parents began to buy clothing in the gender neutral style their child felt comfortable wearing. Accepting Sam’s desire to cut her hair short and participate in activities regardless of traditional gender

association were all new accepting behaviours the parents began to demonstrate. Finally, the parents reached a point where they accepted and affirmed their child's SOGIE identity and welcomed their child's LGBTQ2S friends into their home. Based on early indicators and stereotypes of who is likely to be affirming, it might have been easy for the REC counsellor not to engage in SOGIE conversations with Sam's parents. The Spring family dismantled preconceived notions of which parents are capable of learning about acceptance. Additionally, in examining Sam's Juvenile Justice involvement, we believe if the REC family preservation program had been involved earlier, Sam might have had a reduced risk of going into the Juvenile Justice system in the first place.

The last family's story also challenges assumptions of which parents are likely to be accepting. The Rogers family's story focuses on Makalah, age 15, and her mother, Candice. Makalah was very passionate about basketball and hanging out with her friends, and helped take care of her younger brother. Candice had two full-time jobs, kept both her children very focused on school, and was open to the REC family preservation services. The referral for the Rogers family came from CPS after Makalah reported being beaten by Candice. This incident was in response to Candice coming home from work to find Makalah kissing her girlfriend. Candice reported to the worker that she did not understand LGBTQ2S identity and didn't want to talk about it with Makalah. Candice frequently referenced the need for Makalah to focus on school, and used that to deflect any prompting of SOGIE conversations. Candice said she thought Makalah was confused about her sexual orientation because she was sexually abused by her paternal male cousin when she was younger. Makalah said she had always been attracted to girls. She had been reluctant to speak with her mom about it because her mom would bring up the abuse. After building a rapport with the family and focusing on psychoeducation, which helped Candice and Makalah understand that sexual orientation is not caused by nonconsensual sexual experiences, the REC counsellor was able to have SOGIE conversations with Candice. Makalah was also referred to a REC paid summer internship program focused on LGBTQ2S youth of colour. The counsellor reported that Makalah came to life once she was in an environment where who she was was celebrated. Candice came to the REC for Makalah's internship graduation. While she was visibly uncomfortable at different points, she smiled and clapped when Makalah received her certificate. Candice still had a lot of questions, but changed how she talked about Makalah's identity. The first steps of a longer process was started with the Rogers family, and Makalah's health and safety already showed more positive indicators as a result.

Initial Ruth Ellis Center Pilot Recommendations for Other Systems of Care Looking to Start Family Preservation as Homelessness Prevention

This case study shares considerations for systems of care and 2015 stories from the REC family preservation program, serving Detroit and Southeast Michigan. The agency understands the complex intersections of geography, and strengths and barriers specific to different communities, and is not suggesting other programs can cut and paste this model into just any county, state or province. However, there are steps REC took that could be helpful to other communities interested in this type of system of care.

One

Learn about all possible systems of care with which your agency could qualify to have a contract in your city, county, state or province. Based on your relationships within the care system, the availability of contracts, and the contract application or bid process, create a short list of systems and individuals to approach. REC built relationships with individual child welfare administrators who already had a record of caring for LGBTQ2S youth in care. These individuals will also understand the politics and funding structures, so that they can make recommendations about where and when an application for a contract would be most likely to succeed.

Two

Examine potential referral sources in the system of care that would connect the most vulnerable LGBTQ2S youth and families to your services. For REC, this was a family preservation contract set up to receive referrals through CPS or adoption cases at risk for disruption because of rejection based on a child's SOGIE. Initially, REC was hesitant to work with CPS due to perceptions of forced state involvement often resulting in families of colour disproportionately being separated. The goal of the contract for which REC applied was to keep children in the home with their families, with the REC program accepting referrals of families after CPS did an investigation to determine that the child could be safe at home with additional support services.

Three

Work within a system to ensure the safety of LGBTQ2S youth and preserve families. REC worked with people who knew the child welfare system at the state level, in order to learn more about models of service the State of Michigan currently funded or would consider funding within a family preservation model. Examples included Wrap Around, Families

First, and the model REC uses, Family Group Decision Making. REC embedded SOGIE work with the support of the Family Acceptance Project into the Family Group Decision Making model. Once the agency chose the model, REC set up meetings at the county level to ensure local child welfare leaders believed Family Group Decision Making was a good model for their county. When presenting the case for a need to be addressed, REC did not lead with the LGBTQ2S identity component of the work. Instead, REC presented stories and statistics relating to the safety of vulnerable children already in the system of care or children likely to end up in the system of care.

Four

Match the state or provincial contract money with a foundation grant, which may make the application for the contract more competitive. The Andrus Family Foundation co-funded the REC pilot. This allowed for two additional components of the pilot that were not paid through the state contract: development, implementation and evaluation of training for CPS workers; and working with families referred through systems of care other than CPS. These referral sources can include Juvenile Justice, foster care, community mental health, service providers for runaway and homeless youth, primary health care, and adoption or other community-based agencies. An unanticipated benefit of the training REC did with CPS workers was that the training was named as the primary incentive leading CPS workers to refer families. An unanticipated outcome of the first year of the programs was that most of the families who engaged in services were referred by CPS. Families referred through other sources have not been as likely to continue with services. One possible reason for this difference is that the families referred by CPS are compelled to engage in services to avoid further system involvement. Currently, none of the other referral sources include this component.

The Ruth Ellis Center and Family Acceptance Project will continue to evaluate the work of the REC family preservation pilot and share lessons and considerations moving forward. Family preservation to prevent or mitigate LGBTQ2S youth homelessness will look different in every community, but most agencies can engage in this vital piece of system work.

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4 DISCRIMINATION & MENTAL HEALTH OUTCOMES OF BLACK YOUTH EXPERIENCING HOMELESSNESS¹

Maurice N. Gattis & Andrea Larson

Introduction

Racial, sexual and gender minority youth who also experience homelessness must, during critical stages of development, simultaneously manage stressors that accompany racial minority, sexual and gender minority, and homelessness status. Evidence suggests that adolescents and young adults who self-identify with one or more of these marginalized statuses report higher rates of symptoms of depression and suicidality (Adkins, Wang, Dupre, van den Ord, & Elder, 2009; Edidin, Gamin, Hunter, & Karnik, 2012; Gore & Aseltine, 2003; Hatzenbuehler, McLaughlin, & Nolen-Hoeksema, 2008; National Center on Family Homelessness, 2011; Safren & Heimberg, 1999). A substantial body of evidence suggests that discrimination targeted at individuals with any of those statuses contributes to worse mental health outcomes (Almeida, Johnson, Corliss, Molnar, & Azrael, 2009; Brody et al., 2006; Kessler, Mickelson, & Williams, 1999; Paradies, 2006; Pascoe & Richman, 2009; Thoma & Huebner, 2013).

Although researchers are increasingly examining how marginalization affects adolescents and young adults, we continue to lack a clear understanding of how the combination of racial minority, sexual and gender minority, and homeless statuses may contribute to developmental outcomes. Though it is clear that these stigmatized statuses predict experiences of discrimination targeted at each status (Corrigan et al., 2003; Phelan, Link, Moore, & Stueve, 1997), it is less clear how the experiences of stigma and discrimination targeted at multiple statuses may, when experienced concurrently, be associated with mental health outcomes. This project seeks to improve knowledge of how Black racial status, sexual minority status and homelessness are associated with symptoms of depression and suicidality among adolescents and young adults, and to investigate how much of the association is accounted for by perceived discrimination targeted at each status.

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Status and Mental Health

Status variables have been empirically linked to mental health outcomes for over a century, with evidence suggesting that positions of marginalized social status are predictive of worse mental health (for a discussion see Muntaner, Ng, Vanroelen, Christ, & Eaton, 2013). Social stress models, outgrowths of the social causation hypothesis (Dohrenwend & Dohrenwend, 1969), suggest that the disadvantages and strains associated with any marginalized status create burdens capable of generating psychological distress (Pearlin, 1989; Schwartz & Meyer, 2010). In other words, individual and group positions in the social hierarchy affect the probability of experiencing particular external circumstances capable of producing stress, which then affect the probability of experiencing mental health problems.

Stress determined by social position is not necessarily an objective feature of circumstances, but instead results from discrepancies between the demands of the external environment and the resources of the individual or group (Aneshensel, 1992). Some circumstances that reflect status hierarchies may not reliably affect mental health outcomes, while other circumstances may be more damaging, despite available compensatory mechanisms. Homelessness is more likely to be damaging, not only because it is linked to severe economic hardship, but also because it is characterized by unpredictability, dislocation (Bassuk, 2010), disruption in social support systems, risks to safety and barriers to receiving adequate services (Kilmer, Cook, Crusto, Strater, & Haber, 2012; Nyamathi, Marfisee, Slagle, Greengold, Liu, & Leake, 2012). Homelessness often follows other preceding stressors (Ryan, Kilmer, Cauce, Watanabe, & Hoyt, 2000; Tyler & Cauce, 2002), resulting in ‘risk trajectories’ for youth who experience homelessness:

These trajectories begin with abusive and otherwise dysfunctional home experiences, with [homeless youth] tending to fall into more negative street experiences, including victimization and association with other youth experiencing substantial challenges [...] increasing the likelihood of depressive symptoms and suicidality
(Kidd, 2006, p. 395).

Research shows that people who experience homelessness exhibit higher levels of psychological distress than their housed counterparts (Cochran, Stewart, Ginzler, & Cauce, 2002; McCaskill, Toro, & Wolfe, 1998; Ritchey, Gory, Fitzpatrick, & Mullis,

1990; Weinreb, Buckner, Williams, & Nicholson, 2006; Wong, 2000). These findings have been replicated in younger population samples, with adolescents and young adults who experience homelessness showing an increased risk for a range of mental health problems (Edidin et al., 2012; Kidd, 2006; National Center on Family Homelessness, 2011; Nyamathi et al., 2012; Saperstein, Lee, Ronan, Seeman, & Medalia, 2014; Unger, Kipke, Simon, Montgomery, & Johnson, 1997), including substantially higher rates of symptoms of depression and suicidality when compared to the general population (Kidd, 2006; Unger et al., 1997). The quality of housing for people experiencing homelessness can also affect health outcomes, with those who are unsheltered or in unstable situations being at higher risk of victimization and less likely to use health care services (National Health Care for the Homeless Council, 2011; Stein, Nyamathi, & Zane, 2009).

Minority stress theory, a version of the more general social stress model (Meyer, 2003; Meyer, 1995), explicitly addresses psychological distress resulting from the experience of minority status (Brooks, 1981). Applied originally to sexual minority status, this theory posits that sexual minorities face unique and chronic stressors related to their sexual orientation, and these are associated with subsequent negative mental health outcomes. In line with other social stress models that consider social status, minority stress theory argues that “sexual minority status itself does not matter so much as the norms, values, mores, and related processes of the social contexts in which sexual minority individuals live” (Martin-Storey & Crosnoe, 2012, p. 1001). Research examining the link between sexual orientation and mental health overwhelmingly suggests that gay, lesbian and bisexual (GLB) youth are at greater risk of experiencing a range of negative mental health outcomes, including higher rates of symptoms of depression and suicidality, as compared to their heterosexual peers (Conron, Mimiaga, & Landers, 2010; Fredriksen-Goldsen, Kim, Barkan, & Hoy-Ellis, 2013; Galliher, Rostosky, & Hughes, 2004; Hatzenbuehler, McLaughlin, & Nolen-Hoeksema, 2008; Loosier & Dittus, 2010; Marshal et al., 2011; Safren & Heimberg, 1999; Savin-Williams, 1994).

While minority stress theory was first used to address the experiences of sexual minorities in a heterosexist society, and was then extended to address gender minorities in a cissexist society, the underlying concepts are based on stressors faced by minority populations, so are arguably applicable to other groups. For example, researchers have long considered the link between Black racial status and developmental outcomes to be due to the enduring negative association between racial minority status and indicators of physical health. However, an often clear association between race and physical health does not consistently

extend to mental health outcomes (Keyes, Barnes, & Bates, 2011). Although racial and ethnic minorities report higher levels of acute and chronic stress than their non-Hispanic White peers (Boardman, 2004; Boardman & Alexander, 2011), studies using adult samples report contradictory findings on racial status and psychological distress. Some studies indicate that mental health problems, particularly symptoms of depression and depressive disorders, are more prevalent among White than Black adults (Blazer, Kessler, McGonagle, & Swartz, 1994; Kessler, Mickelson, & Williams, 1999; Riolo, Nguyen, Greden, & King, 2005), while others report the opposite (González, Tarraf, Whitfield, & Vega, 2010; Jones-Webb & Snowden, 1993; Pratt & Brody, 2008; Taylor & Turner, 2002; Williams, Yu, Jackson, & Anderson, 1997). Findings are somewhat more consistent for younger populations, with multiple studies finding that symptoms of depression are more pronounced among Black adolescents and young adults compared to their White counterparts (Adkins et al., 2009; Boardman & Alexander, 2011; Garrison, Jackson, Marsteller, McKeown, & Addy, 1990; Gore & Aseltine, 2003).

Unlike sexual minority status, disparity in mental health outcomes between Black and White adolescents and young adults is confounded by the association between class and race in American society (Srole, Langner, Michael, Opler, & Rennie, 1960, as cited in Muntaner et al., 2013; Williams & Williams-Morris, 2000). The inverse association between marginalized socioeconomic status and mental health has been documented across racial and ethnic groups (Williams, Yu, Jackson, & Anderson, 1997), and socioeconomic variables are often used to explain health disparities. However, even when researchers consider socioeconomic characteristics, disparities in mental health status often remain. For example, while the impact of stress on symptoms of depression is similar for White and Black young adults, Black young adults are at an increased risk for symptoms of depression because they are more likely to be exposed to a range of stressors, including economic hardship (Boardman & Alexander, 2011). The association between socioeconomic status and symptoms of depression may also be different for Black and White adolescents: low socioeconomic status may be more harmful to Black adolescents (Adkins et al., 2009), which complements results from adult samples suggesting Black adults receive less health benefit from higher socioeconomic status than do White adults (Farmer & Ferraro, 2005).

Discrimination and Mental Health

Perceived discrimination, or unfair treatment based on perceived group membership (Thoits, 2010), has been highlighted as a stressor targeted at marginalized populations that leaves their more advantaged counterparts untouched (Kessler, Mickelson, & Williams, 1999). Research has long documented the negative effects of discrimination on measures of mental health (Gee, 2002; Karlsen & Nazroo, 2002), with results generally indicating a negative association between perceived discrimination and mental health that persists across indicators (Pascoe & Richman, 2009).

Some evidence suggests that racial discrimination is one of the most common, if not the most common, type of discrimination initiated due to perceived group status (Corrigan et al., 2003; Grollman, 2012). Experiences of racial discrimination are associated with poorer mental health functioning among Black population samples (Kessler, Mickelson, & Williams, 1999; Paradies, 2006; Ren, Amick, & Williams, 1999; Thompson, 1996; Williams & Williams-Morris, 2000; Williams et al., 1997). This pattern of findings extends to Black adolescents and young adults, with evidence indicating a positive association between perceptions of racial discrimination and a range of mental health problems, including symptoms of depression and suicidality (Sanders-Phillips, Settles-Reaves, Walker, & Brownlow, 2009; Seaton, Upton, Gilbert, & Volpe, 2014; Thoma & Huebner, 2013). Longitudinally, a preponderance of evidence suggests that as the perception of incidents of discrimination increases over time among Black adolescents and young adults, so does psychological distress (Brody et al., 2006; Greene, Way, & Pahl, 2006; Hurd, Varner, Caldwell, & Zimmerman, 2014).

Discrimination based on a target's perceived minority sexual orientation is also common (Corrigan et al., 2003; Kosciw, Diaz, & Greytak, 2008; Reck, 2009; Savin-Williams, 1994), and is positively associated with negative mental health outcomes (Balsam, Molina, Beadnell, Simoni, & Walters, 2011). Evidence suggests that stressful events, including victimization, and perceptions of poor social support largely explain the disparity in symptoms of depression and suicidality between sexual minority and heterosexual adolescents and young adults (Hatzenbuehler, McLaughlin, & Xuan, 2012; Safren & Heimberg, 1999; Toomey, Ryan, Diaz, Card, & Russell, 2010; Williams, Connolly, Pepler, & Craig, 2005). Multiple studies suggest the association between sexual minority status and poor mental health outcomes is moderated by the perception of discrimination based on sexual orientation, with sexual minority adolescents who report higher levels

of discrimination having poorer mental health than sexual minority peers who report less discrimination (Almeida et al., 2009; Birkett, Espelage, & Koenig, 2009).

Finally, stigma toward people experiencing homelessness, particularly in desire for social distance (Belcher & DeForge, 2012; Phelan, et al., 1997), remains pervasive in the general population. Qualitative research reports that perceived stigma is a barrier to young adults experiencing homelessness receiving services (Kozloff et al., 2013), but few studies have examined discrimination targeted at homeless status specifically. Kidd's (2003, 2004, 2007) work is a notable exception; in a series of qualitative and quantitative studies, Kidd reports that homelessness-related discrimination is related to negative mental health outcomes (e.g., suicidality, loneliness, self-blame) among adolescents and young adults experiencing homelessness.

Multiple Statuses, Discrimination, and Mental Health

Stress that is chronic (e.g., based on racial or sexual minority status), uncontrollable (e.g., homelessness), and unpredictable (e.g., discrimination targeted at any specific status) appears to be particularly harmful to health (Avison & Turner, 1988; Williams & Mohammed, 2009). Combining the stress related to each marginalized status with the stress of perceived discrimination directed at those statuses simultaneously makes managing adolescent and young adult development potentially overwhelming. As many adolescents and young adults occupy multiple positions of marginalization, and thus are targets of multiple forms of discrimination, ignoring this disproportionate exposure means that how status and discrimination contribute to mental health outcomes may be misunderstood (Grollman, 2012).

Sexual and gender minority adolescents and young adults appear at particular risk of experiencing homelessness (Corliss, Goodenow, Nichols, & Austin, 2011; Kruks, 1991; Ray, 2006), which places them at increased risk of negative mental health outcomes when compared to housed LGBTQ2S peers (Kruks, 1991; Rosario, Schrimshaw, & Hunter, 2012; Walls, Hancock, & Wisneski, 2007) and heterosexual and cisgender peers experiencing homelessness (Cochran, Stewart, Ginzler, & Cauce, 2002; Gangamma, Slesnick, Toviessi, & Serovich, 2008; Gattis, 2013; Gattis, 2009; Gafsky, Letcher, Slesnick, & Serovich, 2010; Noell & Ochs, 2001; Whitbeck et al., 2004). Members of sexual minorities report higher levels of homelessness stigma than heterosexual peers

experiencing homelessness (Kidd, 2007). Finally, though discrimination directed at sexual minority status has been associated with symptoms of depression among adolescent and young adult males experiencing homelessness, the association does not differ by racial/ethnic minority status (Bruce, Stall, Fata, & Campbell, 2014).

Although adolescents and young adults who identify with both sexual minority and racial minority statuses may experience discrimination targeted at perceived racial and sexual orientation group membership (Meyer, Schwartz, & Frost, 2008), only a few studies to our knowledge have specifically examined how these forms of discrimination affect Black adolescents or young adults. Evidence suggests that racial and sexual minority discrimination may combine to affect mental health outcomes over and above that resulting from a single stigmatized status (Grollman, 2012), a finding that has been replicated in adult samples (Grollman, 2014). For example, Thoma and Huebner (2013) analyzed data from a sample of Black GLB adolescents and young adults and found that perceptions of discrimination targeted at racial and sexual minority status independently predicted symptoms of depression and suicidality, and race discrimination was a stronger predictor of symptoms of depression.

In contrast to findings that multiple forms of marginalization contribute to worse mental health outcomes, especially with multiple forms of discrimination, evidence suggests that Black adolescents and young adults experiencing homelessness report lower rates of suicidal behaviour than homeless youth of other races (Unger, Kipke, Simon, Montgomery, & Johnson, 1997). Furthermore, although Black adolescents and young adults who experience homelessness report psychological distress following instances of discrimination (Milburn et al., 2010), they report lower levels of discrimination targeted at homelessness status than do their White peers (Kidd, 2007).

In summary, evidence suggests that Black GLB adolescents who experience homelessness face unique combinations of stressors that are particularly likely to affect their mental health (Reck, 2009). Although researchers have carefully considered the potential impact of stigma and discrimination directed at multiple statuses for a single individual (Corrigan, et al., 2003; Kidd, Veltman, Gately, Chan, & Cohen, 2011; Ren, Amick, & Williams, 1999), and this work has been tested empirically in adolescent and young adult samples, there is little research on how the combination of racial minority, sexual minority and homelessness statuses may affect mental health outcomes, particularly in contexts of discrimination.

Research Question

Our primary research question was: Are multiple forms of perceived discrimination, targeted at racial minority, sexual minority and homeless statuses independently associated with symptoms of depression and suicidality in a sample of Black adolescents and young adults experiencing homelessness? We defined a number of hypotheses based on the literature reviewed in the previous section of this chapter. First, we hypothesized that, while all forms of discrimination will be positively associated with symptoms of depression and suicidality, perceived racial discrimination will be the most pervasive form of discrimination, and thus will be more strongly associated than sexual minority discrimination or homelessness stigma with symptoms of depression and suicidality. Secondly, we hypothesized that persons reporting sexual minority status will report higher levels of symptoms of depression and suicidality than their heterosexual peers.

Methods

This study utilized a cross-sectional research design with structured face-to-face interviews with a convenience sample of 89 Black youth experiencing homelessness, aged 16 to 24 years ($M=20.06$, $SD=2.06$). Human subjects approval was obtained from the Institutional Review Board at the University of Wisconsin–Madison. The interviews took place between October 2012 and October 2013.

Sample

Recruitment Procedures

Potential subjects were initially approached to participate in the study when seeking drop-in services at an agency that provides services for youth experiencing homelessness in Milwaukee. A member of the staff explained the study to gauge interest and, if the person expressed interest, assessed whether inclusion criteria were met (aged between 16 and 24, homeless at least 7 days in the past month and Black). A staff member informed eligible individuals of the requirements, procedures and compensation for the study. If individuals were willing to consent to the interview, they were referred to a member of the research team who obtained consent and conducted the survey. Upon completion of the survey, each participant was given a \$15 honorarium.

Dependent Variables

Symptoms of Depression

These were measured using the Center for Epidemiologic Studies Depression Scale (CES-D) (Radloff, 1977), originally developed for epidemiology studies in the general population and previously used in a racially diverse sample of youth (Skriner & Chu, 2014). Respondents were asked 20 questions that inquired about their feelings and behaviour in the past week (e.g., “I was bothered by things that usually don’t bother me,” “I did not feel like eating; my appetite was poor”) and asked to respond on a scale from 0, “rarely or none of the time (less than one day)”, to 3, “most or all of the time (5-7 days).” The coefficient alpha for this sample is 0.89, indicating excellent internal consistency and replication of reliability levels noted in previous studies with similar populations (Littrell & Beck, 2001). A score of 16 or higher on the CES-D indicates risk of clinical depression, while a score of 21 or higher indicates the presence of major symptoms of depression (Bruce, Stall, Fata, & Campbell, 2014).

Suicidality

Suicidal ideation, planning and attempts were measured using three questions from the 2009 Youth Risk Behavior Survey, funded by the Centers for Disease Control and Prevention. The questions were: 1) “During the past 12 months, did you ever seriously consider attempting suicide?” (1=yes, 0=no); 2) “During the past 12 months, did you make a plan about how you would attempt suicide?” (1=yes, 0=no); and 3) “During the past 12 months, how many times did you actually attempt suicide?” (dichotomized for analysis, 1=at least one time, 0=zero times). These items were summed and averaged to create a composite suicidality measure ($M=0.19$, $SD=0.31$). This item was transformed into an indicator variable of any endorsement of past-year suicidality (1=yes, 0=no).

Independent Variables

Homelessness Stigma

Perceived stigma related to homelessness was assessed using the 12-item social stigma scale (Kidd, 2007). Items included: 1) “I have been hurt by how people have reacted to me being homeless;” 2) “People seem afraid of me because I am homeless;” and 3) “I feel that I am not as good as others because I am homeless” (for the full scale and factor analysis, see Kidd, 2007). Each item response was formatted as 4-point Likert-type scale (1=strongly agree, 2=agree, 3=disagree, 4=strongly disagree). The full scale ($M=2.53$, $SD=0.71$) evidenced strong internal consistency in our sample ($\alpha=0.86$).

Racial Discrimination

Perceived racial discrimination was measured using the 7-item race-ethnicity discrimination scale from the Alcohol Use Disorder and Associated Disabilities Interview Schedule-IV (AUDADIS-IV), which was modelled after the Experiences of Discrimination (EOD) scales and intended to measure experienced rather than perceived discrimination (for discussion of scale construction and reliability information from a random sample of respondents to the National Epidemiologic Survey on Alcohol and Related Conditions [NESARC], see Ruan et al., 2008). The scale was included to make it possible to examine how responses from members of the sample compared to national data on racial discrimination. Each respondent was read the following question stem: “Now I’d like to know about how often you have experienced discrimination, been prevented from doing something, or been hassled or made to feel inferior in any of the following situations because of your race. During the last 12 months, about how often did you experience discrimination...”. Items included: 1) “Ability to obtain health care/health insurance;” 2) “In how you were treated when you got care;” and 3) “Obtaining a job, on the job, or getting admitted to school or training program, or in the courts or by the police, or obtaining housing.” Responses were reported on a five-point Likert scale (0=never, 1=almost never, 2=sometimes, 3=fairly often, or 4=very often) and then summed and averaged to create a single racial discrimination score ($M=6.56$, $SD=5.32$, $\alpha=0.79$).

Sexual Orientation Discrimination

Perceived sexual orientation discrimination was measured using the sexual orientation discrimination scale from AUDADIS-IV, also modeled after the EOD (for discussion of scale construction and reliability information from a random sample of NESARC respondents, see Ruan et al., 2008). Each respondent who reported a sexual identity other than 100% heterosexual (straight) ($n=45$) was read the following question stem: “Now I’d like to know about how often you have experienced discrimination, been prevented from doing something, or been hassled or made to feel inferior in any of the following situations because of your sexual orientation. During the last 12 months about how often did you experience discrimination...” and asked to respond to the same items included in the racial discrimination scale, except answers pertained to sexual orientation discrimination rather than racial discrimination. After the question stem, the items were worded identically, except for item 5, which replaced “racist” with “homophobic.” For respondents who reported an identity of 100% heterosexual, values of zero were entered in order to retain our full sample. Responses were summed and averaged to create a single perceived sexual orientation discrimination score ($M=3.02$, $SD=4.86$, $\alpha=0.87$).

Sexual Identity

Sexual identity was assessed by asking participants to “please choose the description that best fits how you think about yourself.” Mutually exclusive response categories include: 1) 100% heterosexual (straight) ($n=44$); 2) mostly heterosexual (straight), but somewhat attracted to people of my own sex ($n=7$); 3) bisexual, attracted to men and women equally ($n=9$); 4) mostly homosexual (gay or lesbian), but somewhat attracted to people of the opposite sex ($n=9$); 5) 100% homosexual (gay or lesbian) ($n=16$); 6) not sexually attracted to either males or females ($n=1$); 7) man having sex with men (MSM) ($n=0$); 8) woman having sex with women (WSW) ($n=0$); or 9) pansexual ($n=3$). Because our small sample size would not allow investigation of each category, we created a dichotomized item that assigned the value of zero to respondents reporting a 100% heterosexual identity ($n=44$), and a value of one to respondents reporting any other identity ($n=45$).

Homelessness Severity

Because some evidence suggests that youth who sleep on the street fare worse than youth who use shelter services or sleep elsewhere (Patel & Greydanus, 2002), we considered whether youth reported ever sleeping on the street as a measure of homelessness severity. Participants who reported ever spending one or more nights on the street in an abandoned building or another place out in the open (Whitbeck et al, 2004) were assigned a value of one ($n=41$) and all others were assigned a value of zero ($n=48$).

Covariates

Mental health indicators have been shown to vary according to gender and age, with females and adolescent age associated with higher rates of symptoms of depression (Adkins, et al., 2009; Pratt & Brody, 2008). Both gender and age have been associated with perceptions of discrimination as well (Kessler, Mickelson, & Williams, 1999). Thus, we considered gender identity (male $n=35$, 36.84%, female $n=49$, 51.58%, or other [e.g., male to female, two-spirit] $n=5$, 5.26%) and age (continuous) as covariates in all models.

Analysis

After completing univariate and bivariate analyses, we tested a series of models to investigate the relative input of primary independent variables of interest (perceived racial, sexual and homelessness-related discrimination) on outcomes of interest, controlling for status, homelessness severity and personal characteristics. Although

our research question of interest would have been more thoroughly tested by using an intersectionality framework and a series of interaction terms in multiple regression models (Muntaner et al., 2013), this was precluded by sample and data limitations. Nonetheless, we tested whether the association between 1) homelessness stigma and mental health and 2) racial discrimination and mental health differed by sexual minority status. All analyses were completed using Stata v.13 and all multivariate models were adjusted using the Bonferroni correction.

Results

Univariate analyses indicated that approximately 70% of the sample ($n=66$) reported a CES-D score of 16 or higher and approximately 61% reported scores of 21 or higher ($M=26.13$, $SD=2.49$), indicating a high prevalence of symptoms of depression. Approximately 30% of the sample endorsed any measure of suicidality in the past year, with 22% reporting consideration of suicide, 18% reporting a suicide plan, and close to 14% reporting a suicide attempt. Finally, 41 respondents (43%) reported having ever slept on the street.

Bivariate Analyses

Results of our bivariate correlations are displayed in Table 1. In line with previous literature, symptoms of depression were positively correlated with suicidality, perceived homelessness stigma, racial discrimination, sexual orientation discrimination and time on the street. Suicidality was also positively associated with perceived homelessness stigma, racial discrimination and identifying with a sexual identity other than 100% heterosexual, though perceived sexual orientation discrimination showed no association. Time on the street was, as expected, positively associated with perceived homelessness stigma, and reporting a gender identity other than male or female was associated with perceived sexual discrimination. Females were more likely to report sexual identities other than heterosexual, and males were more likely to report ever spending a night on the street.

TABLE 1: CORRELATIONS BETWEEN INDEPENDENT AND DEPENDENT VARIABLES

| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |
|---|--------|-------|-------|------|--------|---------|-------|---------|-------|-----|
| Symptoms of depression | – | | | | | | | | | |
| Suicidality | .35*** | – | | | | | | | | |
| Perceived homelessness stigma | .46*** | .27* | – | | | | | | | |
| Perceived racial discrimination | .52*** | .31** | .33** | – | | | | | | |
| Perceived sexual orientation discrimination | .30** | .18 | .14 | .25* | – | | | | | |
| Sexual identity—other than heterosexual | .20 | .23* | .08 | -.07 | .65*** | – | | | | |
| Time on the street | .32** | .15 | .32** | .12 | .07 | .06 | – | | | |
| Gender—male | -.09 | -.14 | -.07 | .10 | -.16 | -.35*** | .27* | – | | |
| Gender—female | .04 | .07 | .04 | -.11 | -.0001 | .28** | -.25* | -.89*** | – | |
| Gender—other | .12 | .14 | .09 | .02 | .35** | .14 | -.03 | -.20 | -.27* | – |
| Age | .10 | .04 | .01 | .15 | .20 | .21* | .03 | -.08 | .06 | .04 |

* $p < .05$, ** $p < .01$, *** $p < .001$
 n ranges from 83–89 observations

Multivariate Analyses

Symptoms of Depression

We next completed a series of ordinary least squares (OLS) regressions to test the relative strength of the associations between stigma and discrimination with symptoms of depression, while controlling for potentially confounding variables. Results of these models are summarized in Table 2. Our models indicate that perceived homelessness stigma and racial discrimination showed consistently positive associations with symptoms of depression, after controlling for other factors, whereas perceived sexual orientation discrimination showed no association. Specifically, adolescents and young adults who reported levels of homelessness stigma one

standard deviation above the mean reported symptoms of depression approximately one-third of a standard deviation above the mean, relative to their peers in the sample. Model 3 shows that the association between homelessness stigma and symptoms of depression attenuated when controlling for homelessness severity, so that the association between perceived homelessness stigma and symptoms of depression was no longer significant. Though the association between time on the street and symptoms of depression was positive ($\beta = 0.42$, $t = 2.31$, $p = 0.024$) it was not statistically significant, using the 0.0025 corrected alpha level.

TABLE 2: OLS REGRESSION, ASSOCIATIONS BETWEEN PREDICTORS (STATUS VARIABLES, DISCRIMINATION, AND PERSONAL CHARACTERISTICS) AND THE OUTCOME SYMPTOMS OF DEPRESSION

| | 1 β (SE) | 2 β (SE) | 3 β (SE) | 4 β (SE) | 5 β (SE) |
|--|-------------------|-------------------|-------------------|-------------------|-------------------|
| Other than 100% heterosexual ^a | | 0.38 (.25) | 0.32 (.24) | 0.29 (.18) | 0.27 (.19) |
| Perceived homelessness stigma | 0.31* (.09) | 0.30* (.09) | 0.23 (.09) | 0.32 (.13) | 0.23 (.09) |
| Perceived racial discrimination | 0.30* (.10) | 0.35* (.10) | 0.35* (.10) | 0.34* (.09) | 0.28 (.14) |
| Perceived sexual orientation discrimination | 0.09 (.09) | 0.03 (.19) | -0.03 (.12) | | |
| Time on street | | | 0.42 (.18) | 0.44 (.18) | 0.43 (.18) |
| Sexual minority status x homelessness stigma | | | | -0.16 (.17) | |
| Sexual minority status x racial discrimination | | | | | 0.10 (.18) |
| Gender—female ^b | 0.13 (.18) | 0.03 (.19) | 0.17 (.19) | -0.04 (.20) | 0.18 (.19) |
| Gender—other ^b | 0.37 (.46) | 0.36 (.46) | 0.48 (.45) | 0.42 (.46) | 0.44 (.42) |
| Age | 0.02 (.04) | 0.01 (.04) | 0.01 (.04) | 0.03 (.04) | 0.01 (.04) |

* $p < .0025$

^aomitted group: 100% heterosexual

^bomitted group: Gender—male

$n = 86$

Model 1 $R^2 = 0.34$, M. 2 $R^2 = 0.36$, M. 3 $R^2 = 0.40$, M. 4 $R^2 = 0.41$, M. 5 $R^2 = 0.41$.

Coefficients and standard errors from ordinary least square regressions are presented, with standardized coefficients for predictors homelessness stigma, racial discrimination, and sexual orientation discrimination ($M = 0$, $SD = 1$).

Perceived racial discrimination was consistently associated with symptoms of depression, and this association did not attenuate when considering homelessness severity or personal characteristics. Specifically, adolescents and young adults who reported racial discrimination experiences one standard deviation above the mean also reported, on average, symptoms of depression approximately one-third of a standard deviation above the mean. We found no significant

associations between personal characteristics and symptoms of depression in any model. Finally, Model 3, which included all forms of discrimination, homelessness severity and personal characteristics, accounted for 40% of the variance in symptoms of depression in our sample.

Investigating Moderation

We tested whether the association between homelessness stigma, racial discrimination and symptoms of depression differed by sexual minority identity in Models 4 and 5 (see Table 2). Neither interaction term was significant, suggesting that the association between each respective form of discrimination and symptoms of depression was consistent across sexual orientation statuses in our sample.

Suicidality

We tested a series of logistic regressions to determine associations with any past-year endorsement of suicidality, and results of these models are summarized in Table 3. In contrast to our findings for symptoms of depression, we found no significant association between any form of discrimination, homelessness severity or personal characteristics, and suicidality.

TABLE 3: LOGISTIC REGRESSION, ASSOCIATIONS BETWEEN PREDICTORS (STATUS VARIABLES, DISCRIMINATION, AND PERSONAL CHARACTERISTICS) AND THE OUTCOME SUICIDALITY

| | 1 OR (SE) | 2 OR (SE) | 3 OR (SE) | 4 OR (SE) | 5 OR (SE) |
|--|--------------|--------------|--------------|--------------|--------------|
| Other than 100% heterosexual ^a | | 4.95 (3.89) | 4.77 (3.76) | 2.18 (1.26) | 2.04 (1.21) |
| Perceived homelessness stigma | 1.55 (.42) | 1.51 (.42) | 1.40 (.40) | 1.27 (.51) | 1.42 (.42) |
| Perceived racial discrimination | 1.69 (.46) | 2.12 (.66) | 2.16 (.69) | 1.82 (.52) | 1.49 (.68) |
| Perceived sexual orientation discrimination | 0.96 (.26) | 0.59 (.22) | 0.59 (.21) | | |
| Time on street | | | 1.59 (.90) | 1.55 (.87) | 1.61 (.90) |
| Sexual minority status x homelessness stigma | | | | 1.19 (.65) | |
| Sexual minority status x racial discrimination | | | | | 1.35 (.77) |
| Gender—female ^b | 2.12 (1.14) | 1.38 (.81) | 1.64 (1.03) | 1.86 (1.13) | 1.88 (1.15) |
| Gender—other ^b | 8.09 (11.05) | 7.54 (10.38) | 8.56 (11.80) | 4.78 (6.29) | 4.61 (6.07) |
| Age | 0.97 (.12) | 0.95 (.12) | 0.94 (.12) | 0.93 (.12) | 0.94 (.12) |

* $p < .0025$

^aomitted group: 100% heterosexual

^bomitted group: Gender—male

$n = 86$

Model 1 Pseudo $R^2 = 0.12$, M. 2 $R^2 = 0.16$, M. 3 $R^2 = 0.17$, M. 4 $R^2 = 0.15$, M. 5 $R^2 = 0.15$.

Odds ratios and standard errors from logistic regressions are presented, with standardized coefficients for predictors homelessness stigma, racial discrimination, and sexual orientation discrimination ($M = 0$, $SD = 1$).

Although reporting a sexual orientation other than 100% heterosexual was associated with an increased likelihood of endorsing past-year suicidality at an alpha level of 0.05, after controlling for all forms of discrimination and personal characteristics ($OR=4.77$, $z=1.98$, $p=0.048$), this association was not significant when accounting for multiple tests using the Bonferroni correction. The same is true for racial discrimination ($OR=2.17$, $z=2.43$, $p=0.015$), with the associated odds ratio suggesting that an increase of one standard deviation in racial discrimination was associated with twice the odds of reporting past-year suicidality, after controlling for other forms of discrimination, homelessness severity and personal characteristics. While neither of these associations was significant in our sample, we highlight the direction and strength of the associations here to encourage investigation of these associations in larger samples.

Investigating Moderation

Mirroring our approach to symptoms of depression, we tested whether the association between homelessness stigma, racial discrimination and suicidality differed by sexual minority identity in Models 4 and 5 (see Table 3). Neither interaction term was significant, suggesting the association between each respective form of discrimination and suicidality was consistent across sexual orientation statuses in our sample.

Open-Ended Responses

In addition to the standardized survey instruments that were administered, participants in the study were also asked about the three most important issues facing them, as well as an open-ended question about whether there was anything else they would like to add. Six of the 45 non-heterosexual participants mentioned their sexual orientation or gender identity as factors complicating their lives as they experienced homelessness. One respondent felt their gender identity had an impact on their ability to get a job and said, “Um, me being a transsexual, I felt like some employers won’t hire me because I’m a tranny. If I do get hired, I have to worry about word getting out and me being fired and being accepted as a female instead of a guy.”

Family relationships regarding sexual orientation were mentioned as an additional source of stress in the lives of the participants. One young woman commented that her mother and family don’t approve of her sexual orientation and she was pushed out of the house because of that. Another respondent said, “I lived with Mom, who says she loves me, but she taunts me about my sexual orientation—says she loves me but does not want to

accept my orientation, even when talking about sexual orientation, and doesn't like my boyfriend." Another participant said, "Relationship with stepmom has become strained fighting about my sexual orientation—stepmom is in a lot of denial, especially with religious difference." A youth participant stated, "Well, um, one [a counsellor] was trying to get my family to accept me, but they are so close-minded. It's one thing that bothers me. I do want to have a strong family bond, but they are close-minded about my lifestyle. They want me to conform to their lifestyle, be a robot. They know I'm gay, but they don't accept that I'm gender-nonconforming. That's it." Another youth commented, "You need to discuss some of the reasons why homeless LGBTQ are the way they are—because there are many reasons, like rape and especially childhood rape and molestation." Of the entire sample, 33 (37%) of the participants mentioned employment as one of the top three issues they are facing now.

Discussion

The results of the present study add to the existing literature on the link between perceived discrimination and mental health, and extend it to Black adolescents and young adults experiencing homelessness, half of whom identified as belonging to a sexual minority. Our results suggest that symptoms of depression and suicidality within the past year are common among adolescents and young adults experiencing homelessness. Furthermore, symptoms of depression are associated with homelessness and racial discrimination, providing support for social stress and minority stress models, as well as support for previous empirical findings (Kidd, 2007; Kidd, 2004; Kidd, 2003; Sanders-Phillips et al., 2009; Thoma & Huebner, 2013). The association between homelessness stigma and symptoms of depression attenuated once the severity of homelessness was included in the model, suggesting that certain experiences of homelessness may be particularly predictive of symptoms of depression. On the other hand, we found no evidence that sexual orientation discrimination was associated with symptoms of depression, in contrast to previous findings (Almeida et al., 2009; Balsam et al., 2011; Birkett, Espelage, & Koenig, 2009), though we note that heterosexual adolescents and young adults were assigned a value of zero on the sexual orientation discrimination measure, likely reducing actual variability and reducing our ability to detect significant associations. Though our results suggest that sexual minority status and racial discrimination may be associated with past-year suicidality, these associations were not significant after correcting for multiple tests. These findings contrasted with those from the models considering symptoms of

depression, suggesting that even though symptoms of depression and suicidality were correlated in our sample, they were actually associated with various sets of predictors.

Importantly, perceived racial discrimination showed the most consistent pattern of association with mental health outcomes in our sample, as compared to other forms of discrimination, homelessness severity and personal characteristics. This evidence provides partial support for the hypothesis that racial discrimination more robustly predicts symptoms of depression and suicidality than perceived sexual orientation discrimination or homelessness stigma, and confirms previous findings from the literature on the association between race, sexual orientation discrimination and mental health (Crawford, Allison, Zamboni, & Soto, 2002; Grollman, 2012; Paradies, 2006). Regarding social stress and minority stress models, we suggest that because racial status cannot be concealed, as sexual identity or homelessness status may be, perceived discrimination targeted at race may be especially stressful. In other words, avoiding the experience and associated detrimental effects of racial discrimination may be nearly impossible for Black youth, particularly in situations of homelessness. However, it is notable that homelessness severity did not attenuate the impact of racial discrimination on symptoms of depression, as it did in terms of homelessness stigma. This suggests that racial discrimination is not as dependent on indicators of homelessness that may make youth experiencing homelessness more accessible to members of the public who may initiate discrimination. This idea supports the long history of literature that suggests racial discrimination is pervasive and occurs across settings (Corrigan et al., 2003), making it nearly impossible for Black adolescents and young adults to avoid.

Limitations

The findings of this study should be interpreted through several limitations. First, the data are cross-sectional, and therefore the direction of causality in any association cannot be determined. While previous research documents that perceived racist and antigay discrimination is associated with symptoms of depression and suicidality in black GLB youth (Thoma & Huebner, 2013), and longitudinal and experimental research has found that perceived discrimination negatively affects mental health (Pascoe & Richman, 2009), other studies have found that depressed mood predicts homelessness (Fothergill, Coherty, Robertson, & Ensminger, 2012), and it is possible that mental health status

might have an effect on perceptions of discrimination as well. Indeed, evidence of the independent and joint action of social selection and causation processes on mental health outcomes suggests that both causal directions warrant consideration (for a discussion, see Muntaner et al., 2013).

Secondly, we relied on a small convenience sample of adolescents and young adults receiving services in order to access this largely hidden and invisible population. As a result, we cannot assume the sample is representative of Black adolescents and young adults experiencing homelessness. Black adolescents and young adults experiencing homelessness who are not accessing services may be more vulnerable, and thus experience different outcomes related to perceptions of discrimination, particularly if these adolescents and young adults also identify as GLB. There may also be differences in experiences of minors experiencing homelessness versus adults experiencing homelessness not identified in our study, as the age range in our sample was 16 to 24 years. Our small sample size also limited the nature of our analyses and prevented a full exploration of intersectionality, which would have been the analytic approach most supported by previous literature and theory. Though accessing people experiencing homelessness is difficult from a sampling point of view, future research should weigh the value of sample size against the desire to investigate combined or moderating effects.

Third, we note that our measures used are based on self-report, with no objective verification of the events reported and analyzed in this study. Furthermore, while perceived racial and sexual discrimination were measured over the previous year, perceived homelessness stigma was measured over the course of an individual's life. Thus, the data were collected retrospectively and therefore subject to recall bias, which may have led to inaccurate reporting of events. Despite evidence that the CES-D operates similarly across race and ethnicity in youth samples (Skriner & Chu, 2014), we urge caution when comparing the CES-D scores measured here to those for other groups. Fourth, we did not include a measure of identity salience, which would have helped gain a deeper understanding of how important racial, sexual and homeless identities were to individuals involved in the study. Fifth, it is possible that reports of one's own experiences of stigma or discrimination may be related to how long a person has been homeless, and that was not accounted for. Finally, there is a need for additional research to better understand the experiences of transgender and gender minority youth, as there was a small subset of transgender youth in the study, but the focus of the study was on sexual minority youth.

Implications and Conclusion

As Unger and colleagues (1997) stated more than a decade ago, interested parties “could benefit from an improved understanding of the mental health needs of homeless adolescents. This knowledge could be used to identify youths at risk of becoming homeless and to provide appropriate services to those currently homeless” (p. 377). Our results, in line with many previous findings, suggest that symptoms of depression and suicidality are present at alarming levels in Black adolescents and young adults experiencing homelessness. Additionally, racial discrimination and indicators of homelessness matter to the mental health of this population, providing support for Grollman’s (2012) assertion that a lack of attention to multiple forms of marginalization, and their accompanying multiple forms of discrimination, may limit attempts to appropriately study, prevent and/or adequately treat mental health problems in adolescents and young adults experiencing homelessness.

We support Kilmer and colleagues’ (2012) challenge for homelessness interventions to incorporate a “multilevel, ecological approach, rather than interventions aimed solely at distinct components of these [. . .] experiences, such as housing, parenting behaviors, mental health services, and the like” (p. 393), as adolescents and young adults experiencing homelessness are often linked to interventions and supports that do not address the comprehensive nature of their needs (Swick, 2005).

We identify two practice implications. First, because homelessness itself is a highly stressful experience, it should be addressed through primary preventions such as Housing First policies (Lanzerotti, 2004). These interventions, argued against by some housing researchers as a ‘distinct component’ of assistance, reduce the detrimental effects of the experiences of homelessness, including discrimination targeted at homeless status. Reducing exposure to this discrimination, particularly with interventions that prevent the most severe forms of homelessness, can do much to prevent the psychological distress associated with these experiences.

Secondly, we maintain that discrimination research has too often focused on single forms of marginalization and the experiences of the targets of discrimination. Our findings suggest that racial discrimination may be particularly harmful to adolescents and young adults, even in the contexts of homelessness and sexual minority discrimination. These results, and their alignment with a long history of research, point to the need for inquiry and interventions that address the initiation of discrimination. As stated above,

racial discrimination is pervasive and is experienced as being particularly alarming during stressful circumstances (e.g., homelessness) that occur during critical stages of development. Interventions to help Black adolescents and young adults who identify with any minority sexual identity and who experience homelessness should carefully consider how to prevent the negative effects of the chronic, uncontrollable and unpredictable stressors endemic to experiences of marginalization. Specifically, researchers and practitioners must shift their focus from assisting adolescents and young adults dealing with overwhelming amounts of stress to manage their distress, and instead focus on systemic interventions that reduce the occurrence of these stressors. Housing First policies and anti-discrimination efforts, particularly in the form of laws supported by aggressive enforcement, deserve sustained support.

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4.1 CENTRAL TORONTO YOUTH SERVICES

David Yeh, Lindsay Elin, LeeAndra Miller,
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Introduction

Since 1983, Central Toronto Youth Services (CTYS), an accredited children's mental health agency located in downtown Toronto, Ontario, has offered specialized, innovative services to support LGBTQ2S youth through its Pride & Prejudice Program (P&P).¹ P&P provides individual and family therapy, counselling, and group work to address the mental health needs of LGBTQ2S youth aged 12–24. Many of these are youth experiencing homelessness or precarious housing. P&P conceptualizes its individual, group and family-based services as homelessness prevention, and collaborates regularly with the CTYS Youth Hostel Outreach Program (YHOP), which provides support to youth struggling with mental health issues in Toronto's shelter system.

CTYS operates from a client-centred, anti-oppression framework, providing services that are evidence-based. P&P works to foster resilience, self-acceptance and healthy coping skills for youth dealing with the cumulative toll of systemic homophobia and transphobia, as well as everyday microaggressions. All work is based upon a sex-positive² and harm-reduction approach. Clinical services are attachment-based and trauma-informed, and can also be accompanied by case management and advocacy work. P&P regularly makes referrals to other LGBTQ2S services in the community as needed. P&P also actively engages in collaborations and partnerships with stakeholders, and provides leadership on relevant issues by producing publications, and participating in training, conferences, and committees. Through group programming, P&P creates opportunities for LGBTQ2S youth to break isolation, build community and develop leadership skills.

¹ During the 2016/17 operating year, the P&P program had 4.5 full time workers. In this chapter, the word 'worker' is used to include any professional serving the needs of LGBTQ2S youth experiencing homelessness (e.g., social workers, school counsellors, etc.). The words 'therapist' and 'therapy' are used to highlight the depth-oriented psychotherapy (understanding that 'psychotherapy' in Ontario is a controlled act) that is regularly integrated into P&P clinical services and programs.

² We use the term 'sex positive' to highlight the CTYS support of all sexual identities, expressions, behaviours and choices, founded upon informed consent and personal health and well-being. Using a critical, anti-oppression lens, CTYS encourages youth to be active agents in exploring and discovering their own authentic sexuality with self-awareness and integrity.

An Anti-Oppression Framework

CTYS recognizes that the youth and families it serves, as well as its own staff, are impacted by various oppressions as part of their daily lives. It is well documented that social determinants of health include such key factors as Aboriginal status, gender, race and disability (Mikkonen & Raphael, 2010). Oppression based on power differentials arising from these and other factors (e.g., ethnicity, class, gender identity, sexual orientation, mental health status, legal status, religion, age) are pervasive and systemic in Canadian society. They form systems of interlocking oppressions that are mutually enforcing and cannot be addressed in isolation. CTYS integrates an anti-oppression (AOP) framework into all its programs and services; this approach is especially relevant when treating LGBTQ2S youth experiencing homelessness. In a therapeutic context, an AOP lens considers and engages with intersections of homophobia, transphobia, transmisogyny, sexism, racism, ableism, classism, ageism and other forms of oppression. This allows a nuanced and more thorough understanding of youths' experiences and the complex factors affecting their mental and physical well-being. Such oppressions almost always negatively affect how youth view themselves and others in their lives. By exploring the impact of these oppressions on attitudes and beliefs, the CTYS worker may begin to unpack and reduce the shame that many LGBTQ2S youth have internalized. The worker also recognizes the ways in which youth have resisted and challenged oppression on an individual, family and community level. CTYS services build on existing client strengths and competencies that have helped youth navigate their world in an adaptive way. Youth are listened to and validated for what they have done, and may continue to do, to survive and cope. In this context, experiences young people have are addressed within a harm reduction framework, without negative judgement. For example, young people may discuss their involvement in sex work or talk about substance use.

An AOP practice also brings attention to the differences in power between the worker and youth arising from their social locations. The worker openly discusses how such disparities may affect the therapeutic alliance and how any challenges may be addressed. For example, a transgender youth would be invited to discuss how it feels to work with a cisgender therapist. At the same time, the worker looks for opportunities to use their own lived experiences to join and enhance their work with the youth, and to find common ground for shared empathy and rapport.³ Workers take the initiative to raise issues of power

³ All workers on the CTYS P&P team are LGBTQ2S-identified, as are most of the YHOP workers.

as a way to signal their willingness to engage in these conversations and to acknowledge the important role of power in the therapeutic relationship. When a client may not feel safe or ready to engage or is not interested in engaging in such conversations, the therapist proceeds with patience, openness and curiosity, at a pace the client is able to manage. If traditional talk-based therapy is challenging for the young person, therapists may draw from non-traditional approaches, such as sensorimotor psychotherapy or expressive arts therapy. Taking time to engage in this manner and working to build trust and safety within an AOP framework are critical to the clinical work. Not only do they contribute to a stronger, more integrated alliance with the youth, they also contribute to the youth's capacity to build a more positive relationship with themselves and others.

Finally, an AOP framework informs the worker's engagement in individual and systemic advocacy. CTYS workers may act as case managers, facilitating access to health care, emergency or transitional housing, legal aid, and other services. Workers may introduce youth to queer and trans-positive community spaces and service providers. If transphobic or homophobic spaces must be navigated, workers act as advocates on behalf of youth. For example, if an LGBTQ2S-identified youth is being harassed in a shelter, a worker may consult with the shelter staff about best practices in ensuring safety for the youth. CTYS staff also regularly advocate for broader systemic changes, through consultations, committee work and community-based education. P&P workers regularly provide psychoeducation, LGBTQ2S-sensitivity training and coaching to parents, correctional officers, teachers and other service providers.

In summary, an anti-oppression framework underlies all the clinical and advocacy work CTYS does in serving LGBTQ2S youth experiencing homelessness. CTYS workers adopt a client-centred approach prioritizing respect for the unique subjective lived experiences of each youth. An intersectional lens provides insight into how the daily accumulation of microaggressions and systemic oppressions may perpetuate and exacerbate personal trauma and mental and physical health issues. An AOP practice holds the therapist accountable for the inevitable power disparities within the clinical work itself. Lastly, an AOP lens strengthens advocacy work through a deeper, more comprehensive understanding of the social determinants of health affecting youth.

A Framework of Resilience

All CTYS programs and services are resilience-based, wherein personal resilience is understood to be a dynamic and multidimensional process that includes any supports, abilities or skills that can help a young person cope in positive ways with stress and adversity, and bounce back to a state of balance or equilibrium. For LGBTQ2S youth experiencing homelessness, building personal resilience is critical for survival, since the adversities of homelessness are compounded for them by homophobia and transphobia. These adversities are rooted both within broad systems of power (e.g., health care services and the justice system) and in daily microaggressions (e.g., when sharing a room in a shelter or attending a job interview).⁴ Research points to five areas that correlate with resilience in LGBTQ2S youth: agency, pride, coping skills, community and resources (Arnold, Anthony, & Frank, 2011; Asakura, 2016; Rotondi, Bauer, Scanlon, Kaay, R. Travers, & A. Travers, 2012; Singh, Hays, & Watson, 2011).

Agency

A developmental task for all youth is to feel they have an impact on their life and the world in which they live. LGBTQ2S youth experiencing homelessness often feel powerless over their circumstances, with little opportunity or agency to move forward. CTYS workers have noted how homelessness itself may present as a barrier to resources for some trans youth. For example, having no permanent address prevents trans youth from being able to legally transition through changes to their name or gender marker; youth seeking medical transitioning are often required to establish greater stability in their lives before they may be considered for hormone therapy or surgery. These dilemmas are frustrating at the very least, and for those who have already experienced a lifetime of disempowerment, they may be overwhelming, placing affected youth at even greater risk of depression, self-harm and suicide. CTYS works to strengthen a youth's sense of agency in a number of ways:

- CTYS recognizes that not all LGBTQ2S youth are out or automatically identifiable. From the point of first contact, workers are mindful of cisnormativity and heteronormativity in their interactions with youth. For example, a worker would not assume a youth's gender identity, but would ask directly what pronouns the youth goes by, and a worker would not ask a male-identified youth if he had a girlfriend, but instead might ask if he was in a relationship or had a partner. This allows space for youth to express their own authentic selves in an open and unhindered manner.

⁴At least one study shows a statistically significant difference in risk and protective outcomes between homeless sexual minority youth and homeless heterosexual youth across a range of variables, including: family, peer behaviours, stigma, discrimination, mental health, substance use and sexual risk behaviours (Gattis, 2013).

- LGBTQ2S youth are encouraged to name and define their own identities. At CTYS, a youth's preferred name and gender pronouns are always respected and acknowledged in any reports and documentation. In all P&P groupwork, participants are invited to share their chosen name and pronouns with group members at the beginning of each meeting.
- On CTYS premises, there is clear signage indicating the agency is a queer & trans-positive space. LGBTQ2S magazines and other publications are available in the reception area. All CTYS workers, including reception staff, have undergone LGBTQ2S sensitivity training to ensure a welcoming and supportive environment. An all-gender washroom is easily accessible near the reception area.
- The CTYS client-centred approach places the needs of the youth at the centre of all assessments, planning and service delivery. Every young person is treated as an equal partner in setting the pace and content of counselling and establishing service goals. Workers do their best to offer flexible service hours to accommodate the youth and family's schedules. All clinical reports are drafted and reviewed first with the youth, and are not officially filed until the youth is fully satisfied with their contents.
- CTYS is committed to integrating a youth engagement theory and practice in all its services and programs. To this end, a Youth Engagement Committee (including management, staff and youth) is dedicated to researching, developing and implementing youth engagement at CTYS in accordance with standards and recommendations set by The Ontario Centre for Excellence for Child and Youth Mental Health.
- Individual counselling and group work empower LGBTQ2S youth through psychoeducation on healthy living, life skills, activism and social justice. Youth in turn can begin to feel better equipped to effect positive changes in their own bodies and lives, as well as in the spaces and communities around them. Topics and themes contributing to a youth's sense of agency might include nonviolent communication skills, consent and boundaries in healthy relationships, goal-setting, budgeting skills, navigating bureaucratic systems (e.g., medical, mental health, legal and other systems), intersectionality and systems of oppression, and others.
- CTYS workers support youth to practice self-advocacy skills. Workers may help a youth write letters, make phone calls, practice effective communication, speak up in group discussions or sit on public panels or committees. Youth may be encouraged to participate in social justice communities and to join activist groups. In P&P's *Transcend* group, youth are given opportunities to self-advocate through making buttons, zines, videos, blogs, performance art and other products.

Pride

As a social determinant of health, early childhood development is critical in shaping how young people value themselves and their place in the world. LGBTQ2S youth have often faced years of teasing, bullying, ridicule and stigmatization; shame-based discrimination may lead to hate-based violence, marginalization and even ostracism. In Canadian society, despite progress in recent years, homophobia, transphobia and transmisogyny continue to find currency in mass media and social media. To varying degrees, LGBTQ2S youth internalize this negative and violent messaging, which places them at risk for low self-esteem, poor body image, anxiety and depression (Igartua, Gill, & Montoro, 2003; Meyer, 2003; Mustanski, Garofalo, & Emerson, 2010; Nadal et al., 2011). Consequently, fostering pride in one's identity is a core goal of all P&P services and programs. CTYS workers strive to do so in several ways:

- Psychoeducation in counselling and group work teaches youth how systemic homophobia, transphobia and transmisogyny influence sociocultural and political values and, in turn, influence personal beliefs, values and attitudes. Fostering such critical insight and analysis can offer relief to many youth who might otherwise take systems of oppression for granted as 'normal' and 'right,' and as youth gain critical thinking skills and knowledge, internalized shame is reduced.
- Individual counselling and group work help identify and unpack internalized homophobia, transphobia and transmisogyny, providing insight into how core beliefs influence negative self-talk, thinking and feeling. Psychotherapy explores more deeply the dynamics of shame rooted in a youth's developmental history, and seeks to recover a positive sense of identity based on self-compassion and self-valuation. Clinical approaches such as strengths-based counselling, cognitive behavioural therapy (CBT) and narrative therapy are especially helpful.
- P&P groups *Boyoboy* and *Transcend* incorporate educational components to teach about LGBTQ2S community leaders and role models. These may include historical figures, leaders and activists, celebrities in popular culture, and individuals across world cultures. When youth learn about others like themselves who have overcome adversity, they are inspired to reflect on their own potential, personal goals and opportunities to succeed.
- P&P's *Transcend* group is an annual art-based project for trans youth who gather weekly for 6 months to discuss and explore issues of gender identity and activism. The project culminates each year in a public showcase featuring participants' artwork. This celebratory event is attended by staff, family, friends and allies who bear witness to the youths' personal exploration of gender identity and expression.

- CTYS hosts an annual Pride event corresponding with Pride Week in Toronto, Ontario. Youth on the planning committee decide on a theme and activities, and spearhead all preparations. While this is an event organized by youth for youth, all members of the CTYS community—staff, clients, family and allies—are invited to attend and celebrate LGBTQ2S pride together.

Coping Skills

Managing the stressors of homelessness is difficult enough, without adding the daily oppressions and microaggressions faced by LGBTQ2S youth. It is well documented that LGBTQ2S youth are at increased risk for a constellation of complex coping behaviours such as smoking, problematic alcohol and substance use, disordered eating and other risky behaviours (Bontempo & Anthony, 2002; Cochran, Stewart, Ginzler, & Cauce, 2002; Marshal et al., 2008; McDermott, Roen, & Scourfield, 2008; Ryan, Huebner, Diaz, & Sanchez, 2009). All P&P and YHOP youth have experienced some degree of trauma in their developmental history. Where they continue to navigate unsafe spaces, LGBTQ2S youth are at chronic risk for re-traumatization. Before youth can begin to work on recovery from trauma, they need to develop tools and resources to adequately cope with the difficult emotions and current stressors in their lives. Stabilizing a client who is overwhelmed by mental health issues is the first priority of any worker. CTYS provides many opportunities to learn about self-regulation. For example:

- In individual counselling and therapy, a worker may use a variety of clinical approaches to strengthen personal coping skills, such as mindfulness-based CBT, acceptance and commitment therapy, strengths-based counselling, and trauma and narrative therapies. Time and care is taken to individualize self-care and safety plans for each youth, incorporating diversified and practical practices.
- CTYS group work offers many opportunities to talk and learn about coping skills and self-care. Topics and themes of P&P and YHOP groups may include sexual health, responsible drinking and drug use, mental health 101, mindfulness and meditation practices, and more. P&P's *ChillOut* (an anxiety-management group) and *Yo!Yoga* (a trauma-sensitive yoga group offered in collaboration with P&P and YHOP workers) are groups dedicated to fostering stronger coping skills for LGBTQ2S youth.
- From time to time, a worker and a youth may consider the risks and benefits of pharmacotherapy as part of an integrated self-care plan. In these instances, medical providers are consulted, such as a youth's family doctor and/or psychiatrist. CTYS also contracts with a psychiatrist, a psychologist and a family doctor who are available weekly for consultations with staff. It always remains the youth's informed decision whether to take medication.

Community

Social inclusion and a social safety network are two key determinants of health (Mikkonen & Raphael, 2010). All too frequently, LGBTQ2S youth experiencing homelessness are marginalized or rejected by their families, and often by their ethnocultural and religious communities as well. Friends and peers may not offer unconditional acceptance to LGBTQ2S youth. For a young person, this kind of rejection and isolation can be overwhelming and traumatizing. For healthy development, youth need to see their own identities reflected in and affirmed by peers, adult mentors, role models and community leaders. Through supportive connections CTYS provides with others, youth realize they are not alone, but are one of many, whose personal stories of oppression and achievement can be shared in solidarity. With its location in downtown Toronto, CTYS is able to provide many opportunities for youth to connect with supportive communities. For example:

- All CTYS groups offer spaces where youth can feel safe, understood, affirmed and supported by peers and adult mentors with whom they identify. Through supported group work, youth have the opportunity to meet others like themselves, building friendships that often endure and thrive beyond the group. In addition to the CTYS annual Pride Celebration, groups designed for LGBTQ2S youth include:
 - *Boyoboy*: a biweekly drop-in workshop series for LGBTQ2S youth exploring male identity, health, arts and culture;
 - *ChillOut*: an 8-week group designed for youth wishing to learn strategies and tools for managing anxiety;
 - *Transcend*: a 24-week group for youth exploring gender and identity through art and activism;
 - *Yo!Yoga*: an 8-week trauma-sensitive yoga group for youth with trauma histories.
- P&P works to prevent LGBTQ2S youth homelessness by supporting parents and caregivers, and strengthening familial bonds, ensuring a safer and more affirming home for all members. The P&P Family Support Program provides dedicated, targeted support to families struggling to understand, accept and support their LGBTQ2S children. (See “Supporting Parents and Caregivers”.)
- Trauma rooted in homophobia, transphobia and transmisogyny can negatively impact a youth’s current relationships with peers, friends, and especially partners. In individual counselling and therapy, workers establish a therapeutic alliance with youth as a model for healthy relationships in other areas in their life. Attachment-based and trauma-informed therapeutic approaches can mitigate trauma and attachment ruptures, and contribute to the recovery of healthy social, interpersonal and relationship skills.

- CTYS workers regularly provide information on safe drop-in spaces, culturally specific support groups, sports and recreational programs, special youth events, and other opportunities to connect with community. Much of this information is kept updated and is available on the agency website and in hard copies (posters, flyers, postcards) in the reception area. If needed, CTYS workers will accompany youth to other locations, and personally introduce them to new safe spaces and service providers.
- P&P participates in the Advisory Committee for the LGBTQ Youth Initiative, a collaborative composed of Toronto youth-serving agencies and youth. The goal of the initiative is to create a stronger, more integrated and better-aligned support system for the LGBTQ2S youth community in Toronto.

Resources

LGBTQ2S youth experiencing homelessness lack a constellation of basic needs, such as safe and affordable housing, nutritious food and access to transportation. These needs correlate directly with key social determinants of health, such as income and income distribution, education, unemployment and job security, employment and working conditions, food insecurity, housing, and health services (Mikkonen & Raphael, 2010). Without first tending to these basic needs, it remains difficult or impossible for a youth to begin to move forward with other life goals and tasks. For example, LGBTQ2S youth need access to up-to-date sexual health education; trans youth in particular need access to affirmative medical care and resources to cover expenses for legal and medical transitions. Deficits in any of these basic needs compromise the health of LGBTQ2S youth experiencing homelessness. CTYS works to strengthen and diversify resources in a variety of ways:

- All CTYS workers may act as case managers, supporting youth to access resources such as emergency shelters, housing services, food and furniture banks, addictions counselling, and other resources. P&P and YHOP workers have up-to-date knowledge of Toronto resources and programs that specifically work with LGBTQ2S youth experiencing homelessness.⁵ In the CTYS reception area, a youth resources information area includes a section dedicated to LGBTQ2S-related resources, services and events.
- To reduce barriers to accessing services, CTYS provides public transit tokens to youth who require them, and workers in the community also transport youth in their own vehicles and provide hot meals to youth as needed. In the reception area (and during all group work), healthy snacks are available. CTYS also maintains a supply

⁵ Some examples of Toronto resources include Children's Aid Society of Toronto, Out and Proud Program, Egale Youth OUTreach, Sherbourne Health Centre Supporting Our Youth (SOY), The 519, and YMCA's Sprott House.

of donated materials for daily living needs (e.g., clean seasonal clothes, shoes and accessories, toiletries, etc.). During the December holiday season, CTYS provides grocery gift cards to youth who have been identified as being particularly in need.

- Where mental health, substance use and addiction issues may be a barrier to resources, CTYS workers help youth clarify and organize their needs and priorities, and also help them create concrete goals and strategies for achieving those goals. In addition to strengthening coping skills, workers may apply motivational interviewing, strength-based counselling, and SMART goals in supporting a young person's access to available resources.
- CTYS maintains active relationships with stakeholders, often partnering with them in projects, on committees and in other efforts. To this end, CTYS maintains an up-to-date social media presence, marketing its services and programs not only to youth, but also to other youth-serving organizations, such as schools, hospitals and community centres.
- P&P workers regularly facilitate workshops and presentations at conferences and venues for youth and service providers, providing psychoeducation, literature and promotional materials that address the complex mental health needs of LGBTQ2S youth.

Supporting Parents and Caregivers

Driven by research indicating high rates of mental health problems, suicidality and homelessness among trans youth with low and moderate levels of parental support (Rotondi et al, 2012), P&P expanded its family program in 2015 to offer homelessness prevention and mental health supports geared particularly to trans youth and their parents.⁶ The P&P Family Support Program works from an attachment framework, which acknowledges that safe, supportive, loving and predictable caregiving relationships are important to the mental health and well-being of LGBTQ2S youth. In developing this program, P&P recognized how societal forces of heterosexism, cissexism, transphobia and transmisogyny inevitably shape caregivers' reactions to the news that their child is trans, as do cultural values, norms and religious beliefs. When a parent's reaction to their child's coming out is rooted in fear, misinformation or prejudice, both the parent-child relationship and the child's sense of security in the home can be damaged.⁷

⁶The words 'parents' and 'caregivers' are used interchangeably in this case study, representing sole and single parents, and caregivers.

⁷We recognize that for many young people, coming out is met with outright violence and abuse in the home, and we support youth in unsafe living situations to exit the family home with individual counselling and supports. The P&P Family Support Program is intended for youth and families who wish to work through relationship ruptures, repair family relationships and restore safety in the home.

To promote affirming and safe home environments, the P&P Family Support Program offers group programming to educate and support caregivers, and attachment-informed family therapy to repair and strengthen relationships between trans youth and their parents. The P&P Families in TRANSition (FIT) group is for parents who have recently learned of their child's gender identity; it aims to support participants to create gender-affirming family environments for their child. Over the course of the 10-week group program, caregivers gain trans and gender knowledge and vocabulary, unpack societal, cultural and religious beliefs about gender, learn about the mental health and relational impacts of transphobia, transmisogyny, family rejection and microaggressions (e.g., using the incorrect pronoun or name), and build their capacity to manage strong emotions while communicating with their child about gender.

Trans youth and their caregivers, siblings and other family members may also choose to take part in family therapy. This service is informed by Attachment-Based Family Therapy (ABFT; Diamond, Diamond, & Levy, 2014), an empirically supported family therapy model that aims to repair interpersonal ruptures and rebuild an emotionally protective and secure parent-child relationship. CTYS has adapted this model to reflect our commitment to an intersectional understanding of oppression and to account for the educational needs of many parents when they first learn about gender. For example, caregivers can be given several sessions of personalized psychoeducational counselling apart from their child, to explore how concepts related to gender, sexuality, transphobia and transmisogyny may intersect with other realities of race, class, ethnicity, culture, immigration experience, religion, age and sexual orientation in their particular family. They may also participate in the FIT group to learn more about social, physical and legal transition options, process their feelings with other caregivers, and build skills for emotional regulation and communication, to prepare them to have positive joint sessions with their children. After working with trans youth and their parents separately for weeks or months, joint sessions are held to process relationship ruptures. In the final stage of therapy, parents, youth and sometimes other family members come together to discuss issues such as how to support each other to deal with transphobia and transmisogyny from their extended family, religious community or school; family identity and resiliency in the face of issues such as racism, police violence, struggles with mental health and immigration; and how to create safe and LGBTQ2S-affirming home environments.

CTYS also hosts Transceptance, a monthly drop-in peer support group for parents of trans children. Organized and facilitated by parents themselves, Transceptance is a space where parents can come together to share their stories and experiences in a supported and affirming environment. A P&P therapist is always present as a co-facilitator to ensure a safe and effective situation. While guest speakers may be invited to present on various topics, the primary focus of Transceptance is to provide peer support.

Conclusion

There is no standard client at CTYS; the complexity of each unique young person calls for individualized and flexible plans of care. Queer and trans youth themselves are using increasingly sophisticated language to differentiate a flourishing diversity of identities (e.g., bigender, agender, aromantic, etc.). The last 10 years in particular have seen significant shifts in the demographics of LGBTQ2S youth who arrive at CTYS: more are younger, more are identifying as trans, more are from marginalized communities (e.g., youth of Caribbean or Muslim background), more are presenting complex psychiatric issues, and more are presenting with complex medical and health needs.

To meet this growing complexity, an AOP framework informs all CTYS operations. Within this framework, valuing youth engagement means actively integrating the skills, knowledge, and wisdom of the youth into all aspects of clinical services. Building resilience also requires tending to the needs of parents and caregivers, and offering multileveled services unmanageable for any single program to provide. The success of CTYS rests in its mandate and capacity to coordinate services with other community organizations and agencies, building a rich and dynamic circle of care. Through collaborations, intensive case management and an AOP framework, CTYS seeks to fully honour the lives of LGBTQ2S youth experiencing homelessness.

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5 THE YOUTH HOMELESSNESS CRISIS AND A PATH TO END IT: INTERVENTIONS TO BETTER SERVE LGBTQ2S YOUTH EXPERIENCING HOMELESSNESS

Larry Cohen, Colin McSwiggen, Ronald Johnson,
Kit Cali & Matthew Montelongo

Introduction

In the United States (U.S.), services for youth experiencing homelessness tend to operate on an emergency basis, providing food, shelter and other basic needs to young people who require them immediately. This is important work; however, we need additional solutions and an increased capacity to meet the additional needs, especially permanent housing, of youth experiencing homelessness. Moving from a shelter to permanent housing for these youth is often an insurmountable task without additional supports. For LGBTQ2S youth, it is more difficult, with even fewer having access to services that are tailored to their needs. The LGBTQ2S Homeless Youth Provider Survey found that while 94% of service providers surveyed have worked with LGBTQ2S youth experiencing homelessness and youth who have run away, only 24% of programs reported having services designed specifically for LGBTQ2S youth (Durso & Gates, 2012).

To be truly effective, any program to address youth homelessness must explicitly address homophobia, transphobia and the particular needs of LGBTQ2S youth (Maccio & Ferguson, 2016). We recognize that a one-size-fits-all strategy often does not accommodate the various needs of all youth experiencing homelessness, or the changing intensity of needs that youth experience, including how structural racism creates institutional barriers to both a program's success and the systems a youth must successfully navigate (Fulbright-Anderson, Lawrence, Sutton, Susi, & Kubisch, 2005). Drawing on our research and experience developing the Point Source Youth (PSY) Pilot in the Twin Cities (Minneapolis–St. Paul, MN), New York City, NY, and Baltimore, MD, this chapter defines the challenges facing LGBTQ2S youth experiencing or at-risk of homelessness, and the organizations that wish to serve them; identifies interventions that, particularly when integrated into existing systems of care or used together, have strong initial support to address the LGBTQ2S youth homelessness crisis; and explores how PSY is working to implement these interventions effectively in Minneapolis, Baltimore and New York City, as well as in other cities.

Challenges Facing LGBTQ2S Youth Experiencing or At-Risk of Homelessness and the Organizations that Wish to Serve Them

It is likely that anyone reading this book is well acquainted with the profound harms youth experiencing homelessness struggle with each day. All youth experiencing homelessness face a higher risk of physical abuse, sexual exploitation, mental health difficulties, substance use issues and death; they are also more likely to contract infectious diseases like HIV, and approximately 5,000 American youth experiencing homelessness die each year because of assault, illness or suicide (National Conference of State Legislatures, 2013). These risks are compounded by the severe challenges youth experiencing homelessness often face in gaining access to education and employment. When youth are on the streets and not engaged in education or employment, the economy suffers. It has been estimated that it costs the U.S. economy almost \$600,000 per youth in lost productivity and increased costs over their lifetime. Youth who cannot access stable housing are at risk of sliding down a continuum of increasing disconnection from family and public services, sometimes resulting in long-term homelessness as adults. An Australian study found that 35% of adults experiencing homelessness who were interviewed had first experienced homelessness when they were 18 years old or younger (Chamberlain & Johnson, 2011).

In addition to making up a disproportionate number of youth experiencing homelessness, LGBTQ2S youth face additional disadvantages compared with cisgender and heterosexual youth. Leaving home due to family rejection is the greatest predictor of future involvement with the juvenile justice system for LGBTQ2S youth (Majd, Marksamer, & Reyes, 2009). Lesbian, gay and bisexual youth were also more likely to report engaging in survival sex and to have a higher HIV risk than their heterosexual peers (Gangamma, Slesnick, Toviessi, & Serovich, 2008). Gay and lesbian youth experiencing homelessness were more likely to report having been diagnosed with HIV than their bisexual and heterosexual counterparts, and LGBTQ2S youth reported higher incidences of sexually transmitted infections (Rew, Whittaker, Taylor-Seehafer, & Smith, 2005). Youth experiencing homelessness, and LGBTQ2S youth in particular, often turn to alcohol and drugs as a way to cope (Ray et al., 2006) and experience a significantly increased risk for mental illness and suicide (Van Leeuwen et al., 2006).

Trans youth experience even higher levels of vulnerability, with one in five trans people facing homelessness during their lifetime, due to pervasive discrimination and family rejection (Grant et al., 2011). Unfortunately, trans people experiencing homelessness frequently encounter discrimination from agencies that should be helping them, with 29% turned away from shelters (Grant et al., 2011), due in part to structural barriers they encountered (Shelton, 2015).

Unstably housed LGBTQ2S youth report family violence as the second most common form of violence they experience (Marsiglia, Nieri, Valdez, Gurrola, & Marrs, 2009), with 48% of trans individuals with a history of homelessness experiencing some form of domestic violence (Grant et al., 2011).

Not only are LGBTQ2S youth at heightened risk of experiencing homelessness and all the vulnerabilities it entails, they are also often not well served by homelessness services available in their communities. Services in the U.S. for people experiencing homelessness are dominated by an emergency mentality, focused on providing food, shelter and other basic needs to people who require them immediately. This is important work; however, it does a poor job of meeting many of the specific needs of young people, especially in accessing long-term stable housing.

LGBTQ2S youth often experience homophobic and transphobic harassment, discrimination and physical violence within the child welfare and foster care systems, at emergency and short- and long-term shelters, and from health care providers, social services, law enforcement and other government institutions (NYC Commission on Lesbian, Gay, Bisexual, Transgender and Questioning Runaway and Homeless Youth, 2010). Youth service providers report that LGBTQ2S youth would rather engage in survival sex, which involves sex in exchange for a place to sleep, than risk experiencing the abuse and potential violence they sometimes face in youth shelters or foster care (NYC Commission on Lesbian, Gay, Bisexual, Transgender and Questioning Runaway and Homeless Youth, 2010).

The crisis of youth homelessness can be daunting in both its size and complexity. PSY aims to fill the gaps left by existing systems: gaps that—because of existing missions, limited funding and a lack of person-power—those systems simply cannot fill, a problem exacerbated by institutionalized racism, homophobia and classism, and the barriers they create for both youth and providers (Fulbright-Anderson et al., 2005). Where possible,

PSY supplements the work of existing advocacy organizations and funders, supporting the work of local organizations by providing cost-effective models of homelessness prevention and, where feasible, the tools, resources and expertise to fully implement these solutions, while acknowledging that significant additional work is often needed locally to successfully maintain these interventions. PSY builds on existing foundations by identifying models that work, and infusing on-the-ground efforts with research infrastructure, technical oversight, and a significant evaluation and research component to document and demonstrate existing successes.

The Point Source Youth Pilot

PSY launched a pilot in March 2016 in Minneapolis. PSY works to implement three scaleable interventions:

1. Family and kin strengthening;
2. Shelter diversion using short-term host homes; and
3. Rapid rehousing.

These interventions are all aimed at preventing or intervening early in the cycle of homelessness. One of PSY's goals is to increase local capacity, so communities gain increased resources to work at an early stage with both youth experiencing homelessness and precariously housed youth, as well as the ongoing capacity to assist youth as they develop independent living skills and strengthen their support networks to help them achieve stability and well-being over the long term. Those youth served by the three PSY interventions in Minneapolis, New York City and Baltimore are predominantly youth of colour. It is critical that PSY and our on-the-ground partners address the effects of structural racism on youth, to ensure youth can successfully navigate systems that may be racially biased. This includes working closely with the agencies to which youth are referred, to address barriers to make sure youths' needs are met.

To support these goals, PSY initiated a pilot project in Minneapolis. Our partners' diligent groundwork in Minneapolis made the city a uniquely fertile location in which to initiate the pilot. We have chosen additional cities for program expansion in 2017, including New York and Baltimore, with more participating cities to be announced shortly, where the interventions will continue to be implemented, refined and valued. The work in these additional cities will also incorporate *job training* and *systems strengthening*, which will

be added to as core interventions to the current three core interventions. Each of these program components is explained in greater detail below. Through collaboration, PSY's partners can offer youth a comprehensive, systems-based and tailored holistic approach to prevent and resolve homelessness. By integrating the expertise and infrastructure of these partners into its work, PSY aims to:

- Provide stable housing through family and kin strengthening, shelter diversion using short-term host homes and rapid rehousing;
- Help create permanent and supportive familial relationships—broadly defined to be judgement-free and inclusive—through family and kin strengthening and ongoing counselling to help develop sustainable and meaningful connections with extended family, peers and community;
- Provide stable housing as needed in an affirming, safe, inclusive short-term host home, providing space, privacy and affirming mentorship to youth;
- Provide longer-term permanent housing as needed through youth-centred, scattered-site, market-rate housing that provides youth with a lease in their own name, along with services they need that are tailored to and often led by them;
- Improve education and employment statuses through job training, intensive case management, counselling and advocacy for services for youth experiencing homelessness, with program components tailored to meet the specific needs of LGBTQ2S youth, including youth to youth peer mentoring;
- Provide job training that is tailored to youths' interests and needs, and meets them where they are, while providing a path to employment that pays significantly above the minimum wage;
- Enhance social well-being through lasting family reconciliation, teaching life skills and creating ongoing emotional support systems; and
- Improve service delivery through systems strengthening.

The following section explores each of these interventions in turn, explaining each intervention's role and implementation in assisting LGBTQ2S youth experiencing or at-risk for homelessness.

Family and Kin Strengthening

We use the concept of family and kin strengthening instead of the concepts of family reunification or family reconnection. Research and direct experience with queer and trans youth experiencing homelessness demonstrates that traditional family structures are not always conducive to successful outcomes (i.e., ongoing emotional, physical and housing stability). Recognizing the longstanding importance of ‘families of choice’ in LGBTQ2S communities (Walls & Bell, 2011), family and kin strengthening commits to supporting healthy development by nurturing the diversity of relationships queer and trans youth currently have and are developing, not just those based on blood or legal ties. Although family rejection and conflict are major contributing factors to homelessness among LGBTQ2S youth, there is a considerable lack of services aimed at reuniting families and building support and acceptance. More than 40% of agencies responding to the LGBTQ2S Homeless Youth Provider Survey did not offer programming that addresses family conflict (Durso & Gates, 2012).

This lack of family-centred solutions may result from a widespread but mistaken belief that all or most youth experiencing homelessness leave home because of irreparable ‘bad families’ from which they need to be rescued. Some youth do run away because of abuse at home, but this is not the norm (N. Abrams, personal communication, May 26, 2014). In fact, for most young people experiencing homelessness, a relationship breakdown, almost always with parents or stepparents, is the most common cause. Among British youth aged 16 to 17 experiencing homelessness, 70% reported being displaced due to a relationship breakdown, with 41% reporting that violence had been involved (Quilgars, Johnsen, & Pleace, 2008). Distinguishing between ‘bad families’ and relationship breakdown is critical, primarily because doing so allows family members to possibly take on roles in a system of support for the youth. Family and kin strengthening capitalizes on this distinction by focusing on repairing family systems that are not bad, but broken, and can be repaired to become safe environments for vulnerable youth.

PSY and our partners in Minneapolis, New York and Baltimore acknowledge and honour the many definitions of family that youth use to acknowledge sources of love, support and empowerment that have served LGBTQ2S communities for decades. Family and kin strengthening engages youth and those they identify as family—by biological, legal or chosen bonds—with respect and care. Our family strengthening work is modeled on the successful work being done by Eva’s Initiatives Family Reconnect Program in Toronto, ON, as well as work being done by Reclaim in Minneapolis. Reclaim has a long history of

providing mental health services to LGBTQ2S youth and, where appropriate, also works with their given or chosen families, providing individual counselling, group therapy and mediation for youth, as well as family counselling.

Family and kin strengthening uses mediation, family and individual counselling, and case management to strengthen family relationships, including relationships in a chosen family. Family and kin strengthening also supports family bonds that continue to exist even when the youth has left the home. The data bear this out: a framework developed by the National Alliance to End Homelessness (Kuhn & Culhane, 1998; Toro, Lesperance, & Braciszewski, 2011), shows a majority of youth experiencing homelessness fall into the categories of temporarily disconnected and unstably connected, rather than chronically disconnected. For most youth, a level of connectedness persists with at least some family members, despite conflict or displacement.

Family and kin strengthening works. Indeed, the Family and Kin Strengthening Program at the DePaul University campus in the United Kingdom (U.K.) prevented homelessness in 82% of clients who were referred in 2009; in many of those cases mediation sessions alone repaired family relationships (Insley, 2011). Leading policy researchers have championed family and kin strengthening as a critically important measure for preventing youth homelessness, particularly for the large population of youth experiencing homelessness who identify as LGBTQ (Insley, 2011; NYC Commission on Lesbian, Gay, Bisexual, Transgender and Questioning Runaway and Homeless Youth, 2010). Assuming an average three-month shelter stay at a cost of \$1,779.40 per month, Eva's Place in working with 32 young people saved Toronto's shelter system a total of \$619,231.20 in one year. In addition to cost savings, family and kin strengthening has been shown to result in positive outcomes in educational attainment, employment, self-esteem, avoidance of criminal behaviour and family relationships (Thompson, Pollio, & Bitner, 2000).

We have adopted other successful programs' crucial strategy of meeting youth where they are, rather than requiring them to come to an office or centre. Youth and their family members—such as parents who may be struggling with mental health issues or disabilities—are referred to additional services as appropriate. PSY and our local partners strive to work with extended family members, chosen family, and other trusted adults when it is appropriate and youth-directed to do so. PSY and our partners also work to provide short-term host homes for youth who need temporary housing; when it is possible and appropriate in such situations, family conflict is mediated. Otherwise, rapid rehousing is employed for those who need access to permanent housing.

Short-Term Host Homes

The achievable goal of short-term host homes is to provide a temporary welcoming space for 1 to 3 months, during which the youth may stay in the home of a well-screened and well-matched volunteer host. Once safely removed from the physical location and often highly-charged emotional environment of conflict—the home or the streets—the youth receives counselling for themselves and their parents or caregivers. This short-term intervention provides the family with space and time to reach a resolution, make decisions about what to do next and have the necessary breathing room to repair their relationship. Successful implementations of shelter diversion with short-term host homes have generally been volunteer-based host home programs. By preventing youth from entering the shelter system or living on the streets, we can improve their chances for successful independent or family living, while reducing their risks of harm.

DePaul Nightstop UK is the preeminent international example of successful shelter diversion with Short-term host homes. Nightstop is a U.K.-wide time-out housing program in which volunteer hosts agree to provide a youth in need with a bed, laundry facilities and a meal, for a flexible period based on the host's availability, ranging from one night to 3 weeks. Hosts in the program can feel good about giving back to their communities by accommodating a youth in an extra bedroom, often after the hosts' grown children have moved out. Nightstop's success has been growing, with more than 2,000 hosts providing more than 14,000 beds per year and covering 30% of U.K. communities in 2014 (M. Houghton-Brown, personal communication, October, 31 2014).

Avenues for Homeless Youth offers a short-term host homes program to youth, called the ConneQT Host Home Program. Building on Avenues for Homeless Youth's long-running and successful community-led GLBT host home program, the Avenues for Homeless Youth ConneQT Host Home Program has recruited a group of volunteer hosts to house youth for 1 to 3 months. After being screened and provided with a 2-day community-led host training session, volunteer hosts provide a place to sleep, a listening ear and youth mentorship. A key focus for PSY is to evaluate how shelter diversion with short-term host home programs can best be expanded to other cities, and what other housing formats, in addition to volunteer-based host homes, are best suited for short-term shelter diversion in the U.S.

Rapid Rehousing

Rapid rehousing, an intervention proven to end homelessness among adults, youth, and families who participate in it, places the highest priority on providing stable permanent housing, ideally within 30 days of housing loss or instability. Because of low vacancy rates, issues with credit history and other barriers, including racism, classism, homophobia and transphobia, this timeline often extends past the ideal 30-day goal. While host homes provide shelter to youth at-risk of homelessness who are in need of short-term support, rapid rehousing provides a long-term permanent housing option for youth. Rapid rehousing has three core components: housing identification, rent and move-in assistance; intensive case management; and services.¹ These three components are combined with an overall housing first orientation, in which stable permanent housing is provided to people experiencing homelessness first, before addressing other issues a client may be experiencing that require long-term support, such as problems related to substance use, trauma, criminal histories and mental illness. With a Housing First orientation, engagement in services is also primarily voluntary and client-directed. The receipt and continuation of housing assistance is not dependent on service engagement; instead, the burden is shifted to the provider to make services engaging, rather than on the client to engage in services to avoid losing assistance. Data suggest that stable housing allows an individual to develop and sustain healthier behaviours and to more effectively participate in the services and treatment they need (Einbinder & Tull, 2007).

Rapid rehousing, as it is currently promoted in national performance benchmarks and program standards developed by the National Alliance to End Homelessness, the U.S. Department of Veteran Affairs, the U.S. Department of Housing and Urban Development and the U.S. Interagency Council on Homelessness, places a priority on obtaining housing within 30 days of individuals and families experiencing homelessness. Rapid rehousing includes up to 24 months of tailored rental assistance and supportive services. Programs across the country have demonstrated that rapid rehousing works: examples include Northwest Youth Services in Bellingham, WA, Pathfinders in Milwaukee, WI, The Salvation Army in Central Ohio, Valley Youth House in Philadelphia, PA and The Link in Minneapolis, MN.

¹ A good resource that detail rapid rehousing's core components can be found here: <http://www.endhomelessness.org/library/entry/rapid-re-housing2>

Results from the largest study ever conducted on homelessness in the U.S. have recently revealed the most cost-effective way to reduce homelessness is, quite simply, to provide homes (Flaming, Toros, & Burn, 2015). Destination: Home in Santa Clara, CA, used a rapid rehousing strategy to house 400 of the people tracked in the study. Before being housed, each person experiencing homelessness accrued public costs of \$62,500 a year, compared with the annual price tag of less than \$20,000 to house a person experiencing homelessness. Destination: Home's efforts showed a savings of public funds of more than \$40,000 per person each year (Baer, 2015). The study describes similar successes in Washington, Colorado, Massachusetts and Utah, where rapid rehousing is credited with achieving the state's goal to end chronic homelessness (Flaming et al., 2015).

Not only are the results of rapid rehousing for families, individual adults, veterans, and those experiencing chronic homelessness encouraging, there is a growing body of evidence to support the value of rapid rehousing for youth experiencing homelessness. Many experienced providers of rapid rehousing for youth have consistently reported that, on average, 85% of youth they have supported are still stably housed one year after exiting their rapid rehousing programs (NAEH, 2016). A best practice PSY has seen is progressive engagement, where youth's employment and income plans are tailored to each youth and reviewed quarterly with them. The amount of the rental subsidy is also tailored to each youth based on their income plans. The rental assistance is provided for 8–14 months on average, with some youth needing a shorter subsidy and others needing a rental subsidy for a long period of time.

In the Twin Cities, The Link provides four rapid rehousing programs with a total of 90 units. One of these programs is specifically for young families, one is for youth experiencing homelessness in Minneapolis/Hennepin County, one is in the suburbs of Minneapolis, and one is specifically for LGBTQ2S youth experiencing homelessness, called Project Live Out Loud. This project is lead by eight LGBTQ2S youth, who are also co-founders of the program, and who have lived experience of homelessness. Through The Link's rapid rehousing programs, youth receive support to locate housing in scattered-site independent housing, as well as ongoing case management and youth-directed services. Effective landlord engagement is a critical component to a successful rapid rehousing program, as youth may have issues with credit or job stability that may pose challenges to signing a lease. The Link's rapid rehousing programs identify appropriate housing and provides move-in assistance, a rent subsidy, ongoing case

management and life skills support to youth. The Project Live Out Loud Program also provides culturally specific case management, leadership and career development opportunities, life skills, support groups such as the Gender Identity Group and Queer Sobriety Groups, art opportunities, such as a Photovoice Group, and culturally specific activities within the community.

Rapid rehousing programs, such as PSY's New York City rapid rehousing partner, Bailey House, and our Baltimore partner, Youth Empowered Society as well as the Project Live Out Loud Program, place emphasis on skill-building by providing training that addresses the daily challenges of living on one's own, including self-care, relationships, housing, personal finance, educational support and career planning. All skills training occurs using a rubric of intensive case management and a positive youth development model (R.M. Lerner, Almerigi, Theokas, & Lerner, 2005). A key component of the rapid rehousing model is creating the necessary support systems for youth to live, not only on their own, but sustainably and with an ever-increasing quality of life. For this reason, even after youth have been rapidly rehoused, the case managers continue to work with participants on critical life skills.

Job Training

Model programs, such as Northwest Youth Services in Bellingham, WA, have found that providing vocational training, educational and employment services ensures youth can achieve sustainable self-sufficiency and maintain housing for the long term. Though some youth experiencing homelessness have held jobs in the past, possibly having lost them due to the cascading consequences associated with experiencing homelessness (e.g., being unable to maintain hygiene or get enough sleep to perform to employers' expectations), many have not; many also have not completed either high school or an equivalency diploma, which greatly limits their employment options. There are specific employment concerns experienced by LGBTQ2S youth that need to be considered and addressed by providers. For example, trans youth often need assistance updating legal identification to match their gender identity and name.²

² A helpful resource on the employment and training barriers experienced by trans youth can be found on The 519 (Toronto's LGBTQ2S centre) website: <http://www.the519.org/education-training/lgbtq2s-youth-homelessness-in-canada/lgbtq2s-barriers-to-employment-and-training>

Youth often become trapped in a cycle of being unable to pay for housing without income, but find it extremely difficult to maintain employment or enter training or educational programs without housing. Though older adults experiencing homelessness face similar barriers, youth are less likely to have the educational qualifications, work history, professional skills and other resources that allow them to change their situation, and therefore require even more support.

Case managers and program staff working with youth must also work closely with job training providers, employers, case managers and other staff to ensure that programs are inclusive of LGBTQ2S youths' needs, and that youth have a supportive channel through which they can express those needs. For example, trans competency training may prevent staff from misgendering youth, and help staff to understand the additional support youth may need if local employment laws do not offer protection against discrimination. Specifically, a youth advisory board is needed to hear, support and advocate for youths' needs, while executive sponsorship from job training providers and employers is needed to ensure a direct avenue for communicating and effectively addressing concerns. Youth must also receive the necessary support and job training to secure employment that provides them with a well-paid path out of homelessness; for example, jobs in computer programming, construction, or culinary arts. It is also important to offer training for paid arts-oriented jobs, such as graphic design or decorative arts.

In November 2015, The Way Home in Houston, TX implemented the Income Now program to integrate the efforts of more than 100 partner agencies to enroll all individuals receiving rapid rehousing—projected to include more than 1,000 participants—in employment services. Though Income Now does not focus primarily on youth, we believe its coordinated and intensive response to the barriers individuals face in achieving employment, even after they are housed, serves as a model for meeting the specific needs of youth. Income Now relies on specialized employment counsellors and system navigators available to clients through coordinated access hubs. With a focus on flexibility and tailored solutions (both also effective in case management with youth experiencing homelessness) these specialists provide any and all activities that support participants in securing and maintaining income on an ongoing basis, including supportive services, such as coordinating transportation, enrolling clients in job training, coaching them on interview skills, and helping them secure essential supplies and clothing for work (The Way Home, 2015).

Building on the prior work of our partners, PSY will implement job training and allied services at our future site in New York, so that rapid rehousing can serve as the launch pad for each youth's ongoing financial and personal stability. This will include working with those training programs to ensure they meet the specific needs of LGBTQ2S youth experiencing homelessness, and matching youth with training programs that provide the necessary wages they need to pay for a rapid rehousing apartment. Examples of training include culinary training for line chefs, accounting training for entry-level bookkeepers, training for trades such as plumbers, carpenters and electricians, and training specific to higher-wage union jobs, such as medical technicians and unionized custodial work.

Systems Strengthening

Systems strengthening refers to the ecosystem of organizations providing services, rather than a specific intervention provided to youth. For example, the particular goal of PSY's future work in cities to which it plans to expand (and for its other collaborations around the country) is to implement new practices across organizations that will allow those organizations to provide a coordinated response to each youth's needs, with services provided as a complementary, holistic and comprehensive package, rather than being laboriously pieced together through interactions with many points of contact with different organizations and sites. Ideally, if systems strengthening succeeds in creating a coordinated community response, it may not even be evident to the youth that they are receiving services from multiple organizations. Systems strengthening work must also address how the housing system and support services often discriminate against youth of colour.

Creating an Effective Infrastructure

During the pilot period, we leveraged and learned from the existing infrastructure in Minneapolis, and built and then expanded new partnerships with Bailey House and Callen Lorde in New York City, and the Youth Empowered Society, the University of Maryland and St. Ambrose Housing Aid in Baltimore. Through a Memorandum of Understanding with each partner organization in each city, the infrastructure includes hiring LGBTQ2S, mental health, and family and kin strengthening counsellors, case managers and program managers; recruiting and training hosts; engaging with landlords and community organizations to provide additional rapid rehousing sites; establishing trusting relationships

with community partners, local community organizations and schools to help facilitate trusted referrals; identifying youth experiencing homelessness for program candidacy; implementing and refining all three interventions; evaluating and conducting follow-up; and determining recommendations for expansion to additional U.S. cities.

In the first nine months of the work in the Twin Cities by Avenues for Homeless Youth, Reclaim, and The Link, host homes were identified and trained, youth had successful stays with newly identified and trained hosts, LGBTQ2S youth were placed in their own scattered-site rapid rehousing apartments with a lease in their own name, and youth participated in youth-driven mental health supports, with all these activities supported by case managers, program managers, and staff with considerable experience addressing the needs of LGBTQ2S youth.

The work in each city is driven by the expressed needs of each youth. The services are designed to be respectful and inclusive of all youth experiencing homelessness, and LGBTQ2S youth provide input on service implementation. As previously described, services include counselling, mediation, life skills support, tailored youth-driven family and kin strengthening, shelter diversion with short-term host homes and rapid rehousing for LGBTQ2S youth. Additionally, the collaborations include a critical health and safety component as part of the case management.

The counselling, case management and mediation services take a comprehensive, systems-based approach in each city. Youths' family conflicts and difficulty in securing housing are often exacerbated by poor access to education, physical and mental health care, addiction counselling, and other services. An important component of the program is, therefore, to help youth and their family members, when appropriate, to navigate these systems, accompanying them and advocating for them whenever necessary, to ensure their needs are met.

In Practice: How the Work Occurs in Each City

In Minneapolis, the three participating service providers serve LGBTQ2S youth experiencing homelessness who are aged 18 to 24 years. In New York City, the program will also be LGBTQ2S-specific, while in Baltimore, it will serve all youth, but ensure the specific needs of LGBTQ2S youth are met. All program partners typically serve as the access points to the interventions. Referrals are made to one of the three access points

from other service providers, youth drop-in centres, youth shelters, and other programs and systems serving youth, as well as by self-referral; in Minneapolis, referrals are made through a central coordinated entry system. Once a young person is referred, a program partner conducts an initial screening. The intake consists of helping the youth fill out an application form. The same form is used by all partners, and it identifies youth housing status, age and service needs. During intake, youth are also administered the Transition Age Youth - Vulnerability Index - Service Prioritization Decision Assistance Tool (TAY-VI-SPDAT). The TAY-VI-SPDAT helps programs identify whether youth need a low level of service intervention, rapid rehousing, or more intensive interventions. There is no way to predict at an individual level who will succeed in which housing model, which is why having a scalable intervention that allows for progressive engagement like rapid rehousing is key to a successful systemic response. The expertise of local service providers and case managers provides guidance in using the assessment and intake tool.

In most cities, program partners typically hold case conferences to discuss any youth who was recently referred, and to jointly decide the combination of assistance that will be offered, taking into consideration all options for which the youth is eligible, those services of interest to the youth, and the type and level of need identified through the assessment process.

Most youth will receive a combination of services, all determined in large part through youth choice. For example, a young person might be provided with a host home placement, and then move on to rapid rehousing once they have had some time in a safe place with a mentor.

Tracking Outcomes and Progress

The outcomes of the pilot in each city are being tracked through a research study comprising a descriptive youth study and an implementation analysis carried out in collaboration with prominent youth homelessness researchers. The longitudinal study will examine the outcomes of LGBTQ2S youth experiencing homelessness who are being served across six domains: housing stability; education or employment; health; psychosocial well-being; self-acceptance and positive social relationships; and family relationships. The implementation analysis will describe the design and implementation processes for each city. The implementation analysis and formative evaluation will help us learn how the collaboration is being implemented, focusing on program components that are critical to successful implementation and thus important for replication elsewhere.

Conclusion

Though the LGBTQ2S youth homelessness crisis continues, our knowledge of effective interventions is expanding. We hope this chapter has provided readers with a sense of the extraordinary opportunities available to front-line service staff, practitioners, community members, youth and others, to work together, through a coordinated response, in building effective solutions to support LGBTQ2S youth who have experienced or are experiencing homelessness to attain permanent housing and long-term well-being.

Putting youth in the centre of their own lives, treating them with the respect they deserve, and embracing their own personal agency provide a critical foundation for effectively serving youth. If you or a loved one were experiencing homelessness, where would you want yourselves to be? Perhaps in a well-screened volunteer and mentor's home? In your own apartment with your own key, but with the supports you need? Or, with the support of mental health and case management services, living with a member of your extended family, chosen family or kin? By asking youth what they need, we often find these are the solutions appearing at the top of their lists.

Through careful evaluation, ongoing research, and the sharing of best practices, we will continue to demonstrate and work with local communities to scale up interventions to effectively address youth homelessness. Point Source Youth, and our partner organizations in Minneapolis, New York City and Baltimore, are only a few among the growing number of organizations across North America prioritizing solutions to ensure, in the words of one young man served by one of our partners in Baltimore, that: "Youth experiencing homelessness have the chance to become adults."

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5.1 YOUTH WISDOM, HARM REDUCTION & HOUSING FIRST: RAINCITY HOUSING'S QUEER & TRANS YOUTH HOUSING PROJECT

Aaron Munro, Vikki Reynolds & Marria Townsend

The way a lot of services I was in—foster care, group homes, detoxes, treatment centres and shelters—everyone looked at me like I was a problem. I was an issue and there was something wrong with me. It was different when I entered this program. I am not a problem. There's nothing wrong with me. I just needed love and some opportunities, rather than being seen as an issue.

S. T.

Introduction

This case study describes some of the ethical framework and liberatory practices of RainCity Housing workers, clinicians and queer and trans youth to create a housing project that aims to deliver housing without the professional imperative to either ‘fix’ young sexually- and gender-diverse people or tell them how to live. RainCity is not a queer organization: it is a housing organization, and this case study is presented to assist and encourage other housing organizations to take up the work of housing sexually- and gender-diverse youth who are at great risk because structural oppressions they face make their lives precarious.

This project embraces the tenets of Housing First (Tsemberis, 2010) and a radical approach to harm reduction with an ethic of doing justice (Reynolds & polanco, 2012), to create a living community for two-spirit, trans and queer youth who are chronically and episodically homeless. The definition we use encompasses youth who have lived on the street for six months or languished in shelters, not those who are couch-surfing. We will describe the ethics that are at the heart of our work, which provide our framework. This includes Housing First, radical harm reduction, culture and belonging as imperative to wellness, creating reciprocal relationships of respect, dignity and autonomy, and centring our work in our collective ethics, which are decolonizing and committed to not replicating the very oppressions that caused youth to be homeless.

I think the RainCity staff has a lot of lived experience. They know a lot of what's going on with you because they've experienced something similar. They aren't ignorant about homelessness, homophobia or bigotry, you know? They understand all the stuff that we are going through, and that makes them much stronger allies, so much more relatable role models.

A. B.

I'd take that, and add that they understand they haven't been through everything I've been through. Everyone's different. Everyone's experiences are different. It's not the severity of the situation, it's the emotions we take away from it that allows us to empathize with one another. It's really not our journey, but it's how we felt through our journey, that allows us to really unite and grow. It's how we felt, who we are, who we become and how we make sense of it all.

S. T.

It's not something you can learn in a textbook.

K. R.

Prioritizing culture as a tenet of wellness and belonging is a foundational piece of our work. Our project has a dedicated Cultural Worker whose time is devoted to making cultural connections. This is important structurally, as cultural work is often an add-on to a full workload, usually shouldered up by minoritized and marginalized workers as if it is their personal interest or hobby, and not a foundational piece of community-building, spirituality and health. We have been taught by youth (and by social justice movements) that the solutions are in reconnecting to people. We promote mentorship from the two-spirit, trans and queer communities to share our communities' capacities and care. This is a reciprocal process, where both mentors and youth are trans-formed and in-formed relationally. Our intention in this project is to move beyond 'serving' (Kivel, 2007) individual queer, trans and two-spirit youth and actually transform societal responses and the contexts of injustice that promote the suffering of all youth experiencing homelessness. We aim to resist charity while embracing justice-doing and a just approach to sharing resources and power.

Where We Begin: The Need

RainCity Housing is a non-profit organization that has been operating for over 30 years and is rooted in the ethics of harm reduction and Housing First. RainCity has a history of listening to needs and proposed solutions from people who access its services, and then building programs that respond to those needs. This is a radical orientation to the work, and in its best moments is in line with social change, and not social control (Kivel, 2007). We acknowledge the supportive leadership at RainCity that has allowed space for radical workers to take this work on at multiple sites with the organization's backing.

In 2008, RainCity opened a cold wet weather shelter in an area where there had not previously been a shelter. The shelter was located next to Vancouver's West End, traditionally known as the 'gay' neighbourhood. That year, we hired a lot of queer and trans staff to work at the shelter; this occurred in part because the shelter manager was out as trans, which provided some sense of safety and trust for users of this agency. We were surprised that about 40% of shelter participants spoke openly about being queer. For example, a young trans woman wore women's clothing for the first time, using clothes from the donation bin in the shelter. We believe this occurred largely because of the staff who worked at the shelter and the shelter's location. This made us curious about how many people experiencing homelessness are not out because of safety concerns when accessing the shelter system.

It seemed to us that enough research had been completed to demonstrate that youth had identified wanting a project created specifically for them. We began the work of fundraising and developing a model that we believed would address this need. We opened the housing program in January 2015, and this case study will share the story of the first 20 months of the project, both from our perspective and the perspectives of the young people being housed.

Funding requirements limited us to working with young people who are chronically or episodically homeless, which means they have been on the street or in shelters for at least six months. 59% of the young people we were working with were Indigenous, which is disturbing, but not surprising, given the oppressions of colonialism, poverty and other violence that young people face. The risks of violence and what is referred to as 'suicide' in the lives of Indigenous youth challenge our ethics to be accountable, and to structure whatever safety we can with this community (White, 2007). Indigenous Peoples make up only 5% of the population of British Columbia (BC).

Of our participants, 69% self-identified as trans. Since approximately 1% of the general population is trans, the fact that 69% of the youth experiencing homelessness we connected with identified as trans—most identifying as trans women—says much about who is left out of the LGBTQ2S movement, who is showing up on our streets, and who is staying outside.

Where We Stand: Unceded Indigenous Territory

This work and writing takes place on unceded territories of the Səlilwətaʔ (pronounced Tsleil-Waututh), Xʷməθkʷəy̓əm (pronounced Musqueam), and Sk̓wxwú7mesh (pronounced Squamish) Nations. Our aim is to engage in decolonizing practice and ethics in our work. For those of us who are not Indigenous, that requires unsettling ourselves as settlers (Regan, 2010; Manuel, 2015) and working toward accountable partnerships with Indigenous Peoples, and being led in the work of decolonization by Indigenous Peoples and knowledges. In this project with queer, trans and two-spirit youth, we have an Indigenous cultural worker whose role is dedicated to centring Indigenous cultures as a site of resistance and healing. This is important structurally because Indigenous workers are often required to do the cultural and spiritual work of social programs with no pay attached and no recognition of the professionalism and knowledge this work requires. We also hold an ethical stance for doing justice, which means we aim to avoid replicating oppression and abuses of power in all domains of identity and social interaction. This requires that we educate ourselves about colonization, meaning invasion, occupation, genocide and assimilation (Hill, 2010), and about the persistence of Indigenous resistance every day since occupation (Richardson & Wade, 2008). Informed by Tuck & Yang (2012), we understand that naming decolonization is not a symbolic gesture, but requires a commitment to working toward Indigenous governance and land reclamation.

Structural Homelessness and the Medicalization and Psycholonization of Suffering

I think the problem with a program that expects everyone to be in the same place is that everyone is going to be in different places in their journey, which is perfectly okay. At one point, I wouldn't have been able to comply with abstinence; that was not an option for me. But there are different places suited for people depending where they're at.

A. M.

They utilize that, they take you where you're at, and put you where you need to be, and they work with you there. I wouldn't be in this house if I wasn't where I am right now. No one's unworkable.

S.

The structural causes of homelessness are often obscured by individualism and the usual suspects: addiction, mental illness and trauma. Questions about how people end up homeless occur within a constructed dialogue around personal choice and individual failings. This obscures the reality of both structural poverty and structural homelessness. Because of the systemic oppressive nature of poverty and homelessness, we understand this as structural legislative violence. Canada is the only G8 country without a National Housing Strategy. Our province, BC, has the highest rates of child poverty in Canada, and our last provincial budget provided no measures to address this. In Canada, the federal government abandoned the project of social housing in 1993. Poverty activists assured all levels of government that we were building a homeless nation, and we have done so. By the 1980s, homelessness became a normalized part of life in Canada, and we need to educate our children and students that homelessness has not always been a significant problem in Canadian society. We built this, but we can do better.

Given the dire nature of the social context in which queer, trans and two-spirit youth are made homeless, using the languages of trauma, addiction and mental illness to describe the experiences of youth struggling with homelessness and the structural problems that underlie homelessness does some powerful things to allow society to abdicate its responsibility to provide human rights and the necessities of living to all citizens. Instead,

the powerful languages of psycholonization, criminalization and medicalization construct social problems as if they are the individual's failures, which serves to blame two-spirit, trans and queer youth for their own suffering. Psycholonization (Todd & Wade, 2004) is a neologism for the interface between the practices of colonization and psychology, which create the 'client' as deficient and give the power to describe what is normal, sane, and acceptable from a Eurocentric and power-holding perspective. Medicalization, psycholonization and criminalization make sense of the experiences of two-spirit, trans and queer youth as if they are personally responsible for them, more specifically, locating the problems as if they exist inside the youth, occurring only in the landscape of their brain. The medicalization of terms like 'trauma' obscures violence and oppression, and constructs the youth's identity as flawed and stigmatized. The responses to their lives and the acts of resistance against these injustices by queer, trans and two-spirit youth are thus easily framed as the youth exhibiting symptoms of mental illness, trauma and addiction. This hides the youths' intentional, intelligent and resourceful resistance to oppression (Richardson & Wade, 2008; Reynolds, 2010a). Much of what two-spirit, trans and queer youth experience can be better understood as responses to violence and oppression, which happen in the social world where power is wielded by others and youth are oppressed.

Imperfect Allies

Most people would understand this is a safe space, and bringing any type of racism, homophobia or transphobia into this place is an unspoken...

A. B.

If it does pop up the staff, with help, take care of it.

H. L.

There have definitely been people that have come into this program who were ignorant to a few things, me being one of those people. I think my politics have gotten a thousand times better moving from a [small town] to here, you know? In the language that I use, the way I see myself as a queer person. A lot of things have changed.

A.B.

We feel it is important to note that this project would not have been possible without the help of many allies. These allies included straight and cisgender people who recognized how important it was for two-spirit, trans and queer young people to be safe in a world that still has so much hatred toward them. In activist cultures, an ally is a person who belongs to a group that has particular privileges, and who works alongside people from groups that are oppressed in relation to that privilege. The hope is to create change and increase social justice in relation to this oppression (Bishop, 2002; Reynolds, 2013). Acting as an ally is something we do, actions we take, not an identity. It is more useful to talk about ‘acting as an ally’ than ‘being an ally.’

When we experience oppression, we accept allies because we need them, not because it is safe or we have good reasons to trust each other. We invite good-enough allies, despite past acts that were not trustworthy, as imperfect allies are required when the stakes are high and risk is near. This fluidity, which is informed by queer theory, makes more room for imperfect allies, momentary allies, and moment-to-moment alliances, which are flawed and not safe, yet required and useful (Reynolds, 2010b). Challenging the binary of ally–oppressor, these imperfect alliances bring some trust for a degree of solidarity, and allow more accountable ally relationships to grow.

Our allies in this project include one person who, when asked to assist with funds, replied: “If there is one thing I can do in this bureaucratic job it’s going to be to house queer and trans kids.” We also needed a landlord to rent a house to us. In Vancouver, there is a zero-vacancy rate for rentals, so this was a major obstacle. We negotiated with a landlord who is not a member of two-spirit, trans or queer communities. He asked: “Where are their parents?” He could not understand that parents might not help their kids just because they were two-spirit, trans or queer. He was not connected to queer issues: he was just a decent person and a good father who wanted to help out. He comes to community dinners, and the youth are fond of him and respect him.

This project also required members of two-spirit, trans and queer communities to volunteer their time. Doctors, nurses and social workers volunteered their time as in-kind donations, so we could have both culturally safe care for the youth and meet the matching funds to release the grant money we had raised. The goal of this project was to have many two-spirit, queer, trans and gender-diverse people involved and so we asked them, and they agreed. But they did this work for free, and there are politics attached to that. The doctors, nurses and social workers showed up because they have experienced the impacts

themselves of not having health care that is sensitive and culturally competent. Many of the people who have volunteered or worked at this project have backgrounds of growing up disenfranchised as young people, or where home was not a safe place. Bringing that lived experience to this project was invaluable. But once again this work is on the backs of our communities of choice, who participate because we know people want to see themselves reflected in the services that are provided to them.

Gender Diversity as Identity—Not Diagnosis

Ethical, accountable and competent care is essential for two-spirit, gender-diverse and trans youth, as it is for all youth. But these communities have experienced specific abuse, neglect and oppressions from medical systems and practitioners that are life-threatening and limiting of life choices and experiences (Spade, 2011) based on their gendered identities. Historically, physicians and psychologists have been required to label trans people with the diagnosis of Gender Identity Disorder or Gender Dysphoria in order for them to access services, and also as part of the history of medicalizing and pathologizing the profession's interactions with these communities (Strong & Busch, 2013). An ethic of this project is to move away from these labels and view gender diversity as identity and not diagnosis. This is necessary so that we are not pathologizing in our work with gender-diverse youth.

We recognize the 'policy of respect' (National Gay and Lesbian Task Force Policy Institute, 2003), which means that people self-identify in all their domains of identity, including gender. We are led by youth in this, and use and respect the specific words that fit for them. If we do not understand what they mean, we simply ask them. For instance, several youth use the term gender-nonconforming to describe themselves, but it means something very different to each of them. We are specific here about description and not definition, as we do not ask youth to explain or categorize themselves, but rather invite us into the language they are using (Hammoud-Beckett, 2007a, 2007b) and often co-creating within their communities to expand the realm of what is possible in identity for all of us. This policy of respect in action is an acknowledgement of potential power abuses that can cause us to objectify and invisibilize young people's identities and autonomy if we do not respect their language and identities.

Collective Ethics for Justice-Doing

The work of this project is radically collaborative, and our ethical intention is to be directed and informed by two-spirit, trans and queer youth in all aspects of the work. This requires that we construct collective ethics as a staff team, and work in solidarity to hold one another accountable to the ethics we value and claim (Reynolds, 2009; Reynolds & polanco, 2012). Collective ethics are those important points of connection that weave us together as community workers. Often collective ethics go unnamed, but they are the basis for the solidarity that brought us together and can hold us together. We have worked to name our collective ethics to invite a collective commitment to these ethics and create shared meanings and clearer agreements.

Just back on that cold detachment thing, when you have that 'us versus them' mentality, I think that's really damaging, especially growing up in foster care. When I was a kid of 10, 11, 12, not being able to be hugged as a kid because it's against the rules, I think that's really damaging, and I still kind of have intimacy issues. Sometimes it's hard to let people in and know it's okay to have real relationships.

A. N.

To kind of build off of that, one important thing is everyone here genuinely loves us, and it doesn't go unsaid either. There are times I've been hurting and Aaron at the end of a phone conversation says, "I love you buddy, you know that, right?" I feel that's a genuine statement. That's important. Other people won't be able to say that to people they care about and are working with because of institutionalism and professionalism.

A. B.

We wanted to develop a project that would be safer compared with the homophobia and transphobia youth were experiencing in general population shelters. It is very difficult to provide medical care or health care if young people are not housed. For trans and two-spirit youth, transitioning can be extremely problematic and risky, if not impossible, within a shelter setting. Experiencing homelessness often results in youth not being able to access health care. This should be viewed within the Canadian context as a human rights violation

because health care is supposed to be universally available to all Canadians. Youth have told us many stories of homophobia and transphobia they have experienced within the health care, housing and shelter systems. We wanted to create a project where youth could not only have a safe place to sleep at night, but also create community amongst themselves and two-spirit, queer and trans staff who might be able to demonstrate that maybe life can turn out okay, if you have the right supports in place. We wanted to wrap around them, give them those supports and use our personal experiences to assist in normalizing differences that are still ostracized and stigmatized in our culture. As one young person put it when visiting the project for the first time: “Wow, I’ve never been in a space where there were so many people like me.” The experience of being witnessed and seeing your identity reflected in the people who provide care can itself be healing.

The project was intentionally designed to be highly relational, meaning that the ethical stance of the work is centring our respectful and dignifying relationships with youth. Homelessness is often considered primarily an economic issue—a poverty issue—and is often simplified to frame poverty as a mental health or addictions issue, but young people have also taught us that homelessness is a social issue. Poverty plays a key role in homelessness, and it is important to note that housing these young people does not solve the poverty issue for them.

We are not all one paycheque away from being homeless: most of us have friends, family or social connections that, regardless of employment or income, protect us in material ways from homelessness. It is ingenuous to claim that because we might not be homeowners, “we are all one paycheque away from homelessness,” since preventing homelessness is not just a matter of simple economics. This myth obscures the privilege of hetero- and cisnormative social relations that provide a massive protection against homelessness. Black Lives Matter (2014) faces a backlash for not saying “all lives matter.” But the movement has taken its position to centre Black lives because anti-Black racism has a specific history, upheld by systemic patterns of slavery, lynching and impunity for murders, all of which requires a space of its own in which to speak to the complex history of oppression and violence. Likewise, there is a specificity about homophobia and transphobia that needs to be understood differently from other systems of oppression, and this requires unsettling hetero- and cisnormativity and making the violence of these normative forces visible. This complex analysis is directly related to the need for a two-spirit, queer and trans youth housing project because of the precarious lives this hatred constructs for these youth (White & Morris, 2010; Butler, 2004). Part of this precariousness is the context

of criminalization of two-spirit, trans and queer youth, which leads to their being “over-policed and under-protected” (Kushnick, 1999). We believe that changing the context of the lives of two-spirit, trans and queer youth experiencing homelessness will create more just options for everyone, as resistance in the margins always delivers more justice for everyone (Sin & Yan, 2003). Collective accountability for specific oppression of two-spirit, trans and queer youth is what we are inviting cisgender and heterosexual people to respond to as allies.

To protect two-spirit, trans and queer youth from homelessness we need to focus on building social connections and networked communities (Lacey, 2005), which are spaces of justice, and intentional communities with an ethic of belonging (Reynolds, 2002; Richardson & Reynolds, 2012). A key practice that enacts this commitment to the construction of a rich social fabric is community dinners. We have a community dinner each week at the communal house, and all youth in the program are invited, whether they live in the house or in an apartment across the Greater Vancouver Region. The youth are building relationships with one another, and creating street family and family of choice. We have had young people evicted, or whose housing did not work out for some reason, who did not have to go to a shelter while we found them new housing, because one of the other youth shared their apartment in the interim. This is proof that natural connections are necessary to protect youth in the long term from homelessness.

As workers, we need to have real relationships with youth, acknowledging that they are not just clients, but members of our community. As the Indigenous Cultural worker, Cori Kelly, said: “That old social work model, with boundaries that said you have to be way back here; we had to be really careful to not get too close and being too connected. Now we know that the danger isn’t being too connected. The danger is being too disconnected” (RainCity, 2014).

Housing First

For RainCity, Housing First (Tsemberis, 2010) is about removing barriers to housing and recognizing that it is very difficult for anyone to begin to change their life circumstances and respond to suffering, oppression and violence until they have safe housing. We do not view youth as broken or mentally ill and addicted—we understand them as unhoused and oppressed. Traditional housing approaches often require that people abstain from substance use or receive mental health care before having access to housing. Housing

First was a radical departure from that idea, but it was also a commonsense approach to responding to homelessness. It recognized that if we offered housing to people, they would then no longer have to spend all their energy struggling to live outside, and might begin to feel respected enough to want different outcomes in their lives. Housing First is increasingly being adopted and accepted as a valid and successful response to ending homelessness for adult populations, but it is still controversial for youth populations.

Most youth shelter and housing programs continue to require that youth abstain from substance use and adhere to regimented goal planning. This project does not create barriers to being housed. When we meet youth, we do not ask them to participate in psychiatric treatment or addiction care. We just ask them where they want to live, and where they would feel safe. Maybe they want to live with somebody else? Maybe they have a pet? And then they direct the outcomes. There are minimal choices in the housing market in Vancouver, but we offer as much choice as possible. Then we move them into housing and they do better. It works. Housing First allows people to make mistakes. This is an essential part of the program's usefulness. If a young person loses their housing, we have a conversation about what happened and then we house them again. We recognize that the loss of housing is their experience of loss and not ours (RainCity, 2014).

We humbly believe that we fundamentally do not understand how youth learn. Our society puts people in institutions where they cannot make mistakes. Youth have taught us that in their experiences of prison, and other institutional spaces, they do not learn life skills and autonomy, because their entire life is regimented. We do not see making mistakes as a bad thing, but rather as an opportunity to learn. For example, we have housed one youth five separate times. We just keep housing them, and every time they learn something new. Connected to our ethical position to trust youth with their own lives, we find that we are learning to be more useful alongside the youth, and this learning is exciting.

Our program utilizes a mixed model of housing that includes a communal house in a formerly working-class neighbourhood and independent rental arrangements. Youth can choose to live in the communal house or to live alone. We are being educated by witnessing the process of how youth have made the decisions about whether they want to live more collectively or individually. Some youth thought they would do well in one setting, but they have not, and some youth have had to move, but there has been learning in all of it for all of us. This aligns with a teaching from Housing First that there are no predictors of who will be successful in particular housing situations (RainCity, 2014).

Radical Harm Reduction: Resisting Barriers

The only reason I am clean now is because I was allowed to live my life and shoot up in the bathroom and everybody else was relatively uncomfortable about it. But it was understood. It's a huge fucking deal to be allowed to ask for what you need and go shoot up in the bathroom for 2 hours and then go nod off somewhere in a huge group of people. It's a huge gift. To have the space to do that.

K. R.

Being able to take the time, to take the step for yourself, not being forced to do something before you're ready.

A. B.

Yeah, like not being asked, When are you going to be clean? Have you thought about it yet? I thought that was going to be a prerequisite to being here, you know? The first time I was going to ask if I could go to the bathroom, I was so fucking scared, I thought I was going to lose my, like, eighth house in the past two years, you know?

K. R.

Can I just say that I think RainCity helps build a foundation for you to grow, mentally, spiritually and physically, in your own skin. Those three categories, I think they take them all into consideration.

S. T.

The barriers two-spirit, trans and queer youth face to access housing can be staggering, and can make housing difficult to keep. Requiring youth to be emotionally stable, substance-free, and involved in education or employment in order to get housing seems to us to be in the wrong order. First, you house youth, and then they can begin to make the changes they desire in their lives. What is often required of young people is that they have some treatment plans, some outcome goals, and are registered in education. There

are rigorous barriers in requiring youth to achieve all this while they are unhoused in order to get housed. Then youth have to behave in regimented, modulated measurable ways to keep their housing.

When two-spirit, trans and queer youth experience homelessness it is an issue of economic and social injustice. There is a lack of understanding of what two-spirit, trans and queer youth are dealing with that leads to expectations that youth be substance-free when they return to a shelter. If they are under the influence of substances, they are not allowed shelter, and have to sleep on the street. These are young people who have experienced extreme violence, oppression and loss. Of course some youth will respond to this suffering with substance use. We believe it is punitive to refuse housing because youth are responding to suffering in these ways. In order to access stable housing youth are often required, if they have been told they have a mental health diagnosis, to be in treatment or taking psychiatric medications or both. Every single youth in our project has at least one mental-health diagnosis, but not all of them choose to take or benefit from medication.

A large part of RainCity Housing's work has been with young people who were not able to access youth services because they were not able to meet the requirements for shelter. By the time they are old enough to show up at the shelters that we operate, the layers of suffering, trauma and loss are deep. It is irrational that society is so afraid of liability that we structure public shelters in ways that leave young people outside and sleeping on the streets until they are adults. Who is that safer for? How long does it take to get over being left outside, having people walking by you and often not seeing you suffer (RainCity Housing, 2014)?

This project centres work with youth from particular locations, but another solid outcome from the project is that it shows that Housing First ethics and practices work with youth. This expands the usefulness of the approach itself, which is generally used only with adults. This project was always exciting to us because it was about two-spirit, trans and queer folks, but that label partly hides what is actually happening here, which is that we are using Housing First and harm reduction strategies and philosophy with young people—and we are proving they work.

A Queer Orientation to the Work

It is both exciting and encouraging that, despite not being an LGBTQ2S organization, RainCity has created this project. RainCity is primarily a Housing First and harm reduction agency. This is a queer project, meaning we were intentional about centring queer culture and ethical ways of being as the frame for all our work. Everyone on our staff is Indigenous, two-spirit, trans and queer, which makes it very personal work. We are informed by intersectionality (Crenshaw, 1995), and so we know that despite the similarity of locations for both staff and youth being two-spirit, trans and queer, there are still important differences in access to resources and privilege, based on colonialism, racism, ableism, gender, economic class, migration status and family connection, to name a few. Within this intersectional analysis we create relationships through our points of connection, but we also work hard not to annihilate our differences, or smooth over the very real differences in privilege and disadvantage that still separate us.

Almost 50% of trans people will attempt what is referred to as ‘suicide’ at some point in their lives (National Center for Transgender Equality, 2010), and we are working with young people within that population who are further marginalized and oppressed. For us the language of suicide is problematic because we believe hate kills these youth. They do not take their own lives; their lives are stolen from them. Like much psychology language, the language of suicide blames two-spirit, trans and queer youth for killing themselves, when their deaths are better explained by the violence of transphobia and homophobia (Reynolds, 2016; Coates & Wade, 2004; 2007). This is risky work on many levels, especially personally, as our staff come from the same isolated and oppressed communities as the young people, and our workers are often personally connected to the same struggles as the youth. Therefore, it is essential to acknowledge that our workers are pretty amazing.

Immeasurable Outcomes

Nobody sitting here at the table wants to see anybody else here at the table going through any hard times or anything. They want to see everybody here succeed, right?

A. B.

I've had multiple people stay at my house in this program, because they were homeless, they were going to be homeless, or have been homeless.

H. L.

We work to track and name the immeasurable outcomes of our work, those outcomes not of interest to funders, but which speak to the heart of our work. The ineffable, intangible and untraceable influences of our collective work cannot be measured. Much of the work we do alongside two-spirit, trans and queer youth goes unmeasured for lack of an instrument of measurement, or because what we do achieve is not prioritized, or recognized as having value. This particularly includes our efforts to dignify youth, and foster safety and ‘unhappenings’—situations that do not get measurably worse because our work prevents them from getting worse (Vikki Reynolds, Keynote Address at Dignity Conference, Centre for Response Based Practice, Duncan, BC, May 2016).

In our relationships with two-spirit, trans and queer youth, we dignify them as people worthy of our respect. We repair dignity and co-create dignity. Dignity is something that we provide amongst ourselves as people. It is not something you have on your own (Allan Wade, personal communication, 2008), but occurs in social interactions, such as the community-building and relational centring so intrinsic to this project. It is difficult to measure a sense of connection, but we can point to 20 youth who are not alone: they are loved, and everyone involved in this project has contributed small acts to create a sense of belonging for these two-spirit, trans and queer youth.

We can measure risks, but safety is not a commodity that can easily be quantified. However, we can work towards ‘safe-r’ and ‘safe-enough’ (Bird, 2000, 2006). ways of being. In our work with youth, much changes in terms of their understanding of what they can do to be safe-r or safe-enough in the world. ‘Unhappenings’ are all those things that we cannot measure because they don’t happen, such as a trans youth who is no longer participating in survival sex work because he has six months free of substances, or a queer youth who does not consider suicide this time because they are belonged and connected within our community of care. How can we recognize these unhappenings that defy measurement? Our influence as community workers may be, not just immeasurable because it cannot be measured, but at times untraceable, and perhaps that is how it ought to be if our work is to remain truly youth-centred (Elaine Connolly, personal communication, 2008).

Interventions in line with the principles of Housing First, such as housing youth based on need of housing with no other barriers, cost less than police intervention. Without community responses such as this housing project, two-spirit, trans and queer homeless youth will be incarcerated and institutionalized, whether in psychiatric wards, prisons or visits to emergency departments. But having funding tied to desirable economic outcomes is frankly unethical, however effective it is as a strategy. We believe we should be housing all our children and young people because it is ethically required, not because it is cost-effective.

One of the youth in our program published a book. Another has a job working with kids. Social connections made it possible for these things to happen, and this is true for all of us. We cannot exist in isolation; that is what is killing our youth. And we cannot really make a chart that captures the profound meaning of these connections: loving two-spirit, trans and queer youth; putting a roof over their heads; offering health care that allows them to be who they are; offering culturally relevant engagement; and having communal dinners. They should have those things anyway, but they do not because of transphobia, because of homophobia, and because society did not value them because of who they are.

Hate Kills

*We are building a community here. We are actually building a community.
That's big.*

H.

“Homophobia and transphobia are so prevalent and powerful that they can actually convince parents to hate their own children.” (Aaron Munro, Keynote Address at Dignity Conference, Centre for Response Based Practice, Duncan, BC, May 2016). The power of hate is staggering, heart-wrenching and oppressive. The inspiration of Housing First principles and practices, a radical approach to harm reduction and the engagement with radical informed consent, which trusts two-spirit, trans and queer youth with their own lives, are foundational to our work. Our hope is that the imperfect responses we have had to two-spirit, trans and queer youth without homes are of use to others struggling to increase choices and access to the necessities of life for youth facing precarious lives in our society, young lives that were not provided with the promises of a just society.

Dedication

To the people we have worked with and been informed and transformed by, especially two-spirit, trans and queer people who did not have access to housing and respectful health care. To our Elders, whose often public and political suffering and resistance made it possible for us to take this action now. And, of course, to the young people who informed this project and survived this shit and who will make it softer for those who come after them.

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5.2 MESSY AND MAGICAL: A CLOSER LOOK AT THE GLBT HOST HOME PROGRAM

Raquel (Rocki) Simões & Khalid Adam

Introduction

The GLBT Host Home Program (GLBT HHP), offered through Avenues for Homeless Youth, provides a unique housing model for queer and trans youth who are experiencing housing instability, most of whom, in our area, are youth of colour. This program, based in Minneapolis-Saint Paul (known as the Twin Cities), Minnesota, is one of the longest-running LGBTQ2S-specific host home programs in the United States. Many communities across the U.S. and Canada have sought information on this model as they attempt to address youth homelessness. This case study illustrates key characteristics of the GLBT Host Home Program, and provides feedback gathered during two listening sessions held in August 2016, with current and past youth and host participants. The information gathered during the listening sessions highlights issues the program continually explores: namely, how do we cultivate a lens of intersectionality in this work, and support youth and hosts within the context of individual, systemic, institutional and historic oppressions?

Program History

The GLBT HHP was created at the end of 1997 after several years of community conversations and organizing around the issue of LGBTQ2S youth homelessness in the Twin Cities. An Advisory Council met monthly to discuss and research possible responses to the overrepresentation of queer and trans youth experiencing homelessness in our communities, as well as the lack of culturally competent and LGBTQ2S-specific services. A review of a host home program out of the GLBT Community Center in Denver (the only existing LGBTQ2S host home program at the time¹) and a feasibility study by a local research foundation, in 1995 and 1996, respectively, informed the initial development of the GLBT HHP. A few years prior to this, YouthLink (at the time called Minneapolis Youth Diversion Program) had started offering a support group for LGBTQ2S youth, facilitated

¹ By the time the GLBT HHP's program coordinator started her job in the fall of 1997, the host home program at The Center in Denver was no longer running.

by a psychiatric nurse and out lesbian, who then wrote a grant to the State of MN which enabled the organization to hire its first GLBT Case Manager. This new position—the first of its kind here in MN—had an Advisory Council that met monthly to support the work of the Case Manager. This is the group that then later guided the research and initial program design of the GLBT HHP.

During the years it was located at YouthLink, GLBT HHP housed approximately 100 youth. Due to funding deficits, and programming and staffing changes, GLBT HHP was on hiatus from 2004 to 2007. It was re-started in January 2007 at Avenues for Homeless Youth, a nonprofit agency in the Twin Cities; it has been a program offered through Avenues ever since. Although GLBT HHP began as a program for youth aged 16 to 21, the top of the age range was expanded to 24, in response to community need. The program has also made exceptions for several 15-year-old youth.

Key Characteristics of Our GLBT HHP:

- Small and community-driven;
- Not emergency housing, but instead more like a transitional living program (the average stay is approximately one year);
- Does not receive government funding;
- Does not license homes;
- The DOPA (Delegation of Parental Authority) document is used when minors participate in the program;
- Hosts are volunteers, but are able to request \$50 to \$100 per month to help with increased costs, such as groceries (introduced at the end of 2015);
- Youth in host homes receive a \$75 Visa card every month (also introduced at the end of 2015);
- Youth choose to be in the program (no one is ‘placed’ in it);
- Youth are referred by youth workers from outside or from the Avenues Program, and then work with the GLBT HHP case manager while participating in the program;
- The program is informed by a commitment to social justice and an awareness of systems of oppression.

Identifying Hosts

Hosts are recruited primarily through community engagement and organizing, social media, and with the help of the program's Advisory Council, which is made up of community members from other local organizations, as well as past youth participants, hosts and organizers. The size, make-up, and involvement of this group have varied greatly during its history; however, we prioritize the recruitment of queer and trans people of colour, and community organizers and leaders. There are currently only three members, and while they do not meet regularly, they keep in contact.

The program manager meets with potential hosts and interested parties throughout the year to explain how the program is structured and to answer any questions. The current application process for hosts involves completing paperwork and assignments, a background check, a series of interviews and 16 hours of training. Training² is conducted two or three times per year for those who choose to complete the application process.

The host training includes broad information about youth homelessness, and more specific information on LGBTQ2S youth homelessness, including trauma and resiliency; White privilege and anti-racism; an examination of trainees' values, boundaries, expectations and triggers; and conversations with current and past hosts and current and past youth participants. After training, hosts are selected and matches are made between potential hosts and youth. This process is youth-guided—the youth review files of potential hosts and identify who they would like to meet. A series of meetings between the potential host and the youth are facilitated, release of liability waivers are signed, and the youth moves in. Hosts receive ongoing support and training, including monthly community support groups, monthly home visits and further training opportunities.

Our current operational capacity is 20 to 25 homes in the program, which allows up to 10 young people to live in host homes at a time. Based on our experience, at least half the host homes will be 'on hold' at any given time, which means the hosts have had a youth in the home who has moved out, and they are taking time off before welcoming another youth.

² We often have guests from other states who are starting HHPs participate in our training, and we welcome the opportunity to share our materials and history.

Pros and Cons of Key Program Characteristics

| PROS | CONS |
|---|---|
| <p>Small and community-driven:</p> <ul style="list-style-type: none"> ■ Easier to maintain non-institutional ‘heart;’ ■ Easier to engage in the ‘magic’ and ‘messiness’ of authentic human relationships; ■ Easier to recognize and challenge power and privilege; ■ Easier to more effectively and quickly respond to changing community needs. <p>Volunteer-based and youth-driven:</p> <ul style="list-style-type: none"> ■ Hosts are not compensated (except for small stipends as requested)—this has powerful meaning to many youth who have come out of the foster care system; ■ Youth choose to apply, read the files of the hosts and let us know if they want to meet them, and no ‘placement’ language is used; ■ Youth have more information about prospective hosts than hosts do about youth, initially minimizing the inherent power imbalance. <p>Does not receive government funding:</p> <ul style="list-style-type: none"> ■ Fewer ‘strings attached;’ ■ Funding streams and trends do not shape the program; ■ Program staff and community are able to define and explore programming changes with much more freedom and flexibility. <p>Does not license homes:</p> <ul style="list-style-type: none"> ■ Program staff and community get to say who can and cannot become hosts, and what kind of physical space is appropriate to be a host home; ■ Program staff and community are able to say who can and cannot be a youth participant; ■ We can make exceptions about all the above, and thus be exceptional. | <p>Small, community-driven:</p> <ul style="list-style-type: none"> ■ Smaller program capacity. <p>Volunteer-based:</p> <ul style="list-style-type: none"> ■ Hosts are not compensated (except for small stipends as requested), which means that only certain people can afford to be hosts, typically in Minnesota, those who are White and middle-class. <p>Does not receive government funding:</p> <ul style="list-style-type: none"> ■ Funded solely through individual donations and private foundations. <p>Does not license homes:</p> <ul style="list-style-type: none"> ■ Minors can be in host homes only if a DOPA is signed by a parent or guardian; however, we have had a few minors in host homes without DOPAs (these have been rare exceptions, which depended on unusual circumstances); ■ The child welfare system does not see our program as an available referral housing option, though it does identify our host homes as the best place for many minors in its care, and occasionally asks if we have hosts willing to go through its foster care training to become foster parents for a specific young person. We are vocal about our frustration with this, but in working our hardest to find the best solutions for youth, we must deal with the system as it currently operates. |

GLBT HHP Evaluation

Avenues worked with the Wilder Research Foundation to develop assessment and evaluation tools using surveys to help us evaluate the quality of the experiences youth and hosts have in the program. The evaluation surveys were made available on our website a few years ago, allowing youth and hosts to complete them in their own time frame. The program manager also sends out occasional emails with the link to those surveys. However, we do not receive sufficient information through these tools. Most qualitative feedback we receive is through informal conversations and engagement with participants.

We report annually on the following quantitative outcomes:

- *Outcome 1:* Secure 5 additional host homes annually;
- *Outcome 2:* Support up to 10 youth in host homes at any given time;
- *Outcome 3:* Youth will transition into stable housing:
 - Measurement A: 75% will move into their own housing or other supportive housing;
 - Measurement B: 75% of those will continue to have stable housing at one-year follow-up.

In addition, GLBT HHP continues its commitment to the following two outcomes:

- *Outcome 4:* Support creation of host home programs in other communities by providing consultation and sharing information resources,
- *Outcome 5:* Seek to end homelessness through prevention strategies, such as community engagement and social justice advocacy.

Lessons Learned

The biggest mistake we made in 1997 was focusing solely on sexual orientation and gender identity, with minimal awareness of the intersectionality of identities and experiences. Since most queer individuals in leadership or organizing positions at the time were White, able-bodied and middle-class, this is not particularly surprising. Our community of stakeholders and potential hosts was mostly looking only at homophobia, transphobia and family rejection as pathways to homelessness, even though most queer and trans youth experiencing homelessness were also youth of colour, or were poor, or both.

The disproportionate focus on youth who were kicked out of their family homes because of their sexuality/gender identity meant that we were unintentionally creating a hierarchy of those who ‘deserved’ our support (youth kicked out of their homes) and those who did not ‘deserve’ our support (youth whose families were historically under-resourced, precariously housed, etc.). We did not centre racial and economic justice in our work.

Listening Sessions³

We intentionally invited people with a wide range of identities, and positive and negative experiences with hosts and/or the program, to take part in the August 2016 listening sessions. Four questions were asked on flip chart sheets that past and current youth (n=6) and hosts (n=4) responded to in small groups. The questions included:

1) What brought you to the GLBT Host Home Program? 2) What worked well for you? 3) What was challenging for you? and 4) If someone were to start a new Host Home Program, what information would you want them to consider?

A flip chart sheet was also added as a ‘Bike Rack’ for any additional information or thoughts people wanted to share. After small-group work, participants went around individually to each flip chart sheet and starred major points of consensus, check-marked shared experiences and added to the responses before they came back to a large-group debriefing. No program staff were present, to encourage complete honesty. Flip chart sheets were photographed and transcribed. The following section is a summary of flip chart and large-group responses.

Past and Current Youth Listening Session Summary

The six people in this group ranged in age from 20 to 36 years, and included a past participant from when the program was at YouthLink. It also included one of the authors of this chapter, who was a youth participant in 2008. Youth participants reported histories of personal and generational trauma, substance abuse and mental health struggles by

³ A special thank you to Angie Brown, a previous GLBT HHP Advisory Council member, for facilitating and recording the listening sessions, and deep gratitude to the past and present youth and hosts for sharing their insights and experiences.

parents, and abandonment, homophobia and transphobia as some of the key sources of their housing instability and homelessness.

When asked to recall how they were initially connected to GLBT HHP, participants identified youth workers or case managers, mental health providers, word of mouth and resource materials as the main sources of connection and information, which is consistent with the overall history of the program.⁴

The feedback regarding what worked well was also consistent, especially around the connection of shared identities, emotional stability, resources and self-care (“weed” and “I worked well for me!” were two of the responses), matching process (“I liked seeing their criminal record”), program support, the importance and novelty of day-to-day living with other queer folks and sharing respective communities. One youth stated that the hosts “being TBLGQ made them more trustworthy.”⁵ Another shared that it was “incredible being connected to an adult who was so much more stable/psychologically healthy than family.” Seemingly small gestures were also listed, such as the hosts inviting the youth to a Thanksgiving dinner and asking the youth if they wanted to bring a friend as well. One youth highlighted basic needs by succinctly writing, “a warm bed.”

The challenging elements of the GLBT HHP experiences that were shared through writing during this session similarly supported the anecdotal feedback we have heard throughout our history: navigating complex race, identity and power dynamics, differing expectations, perceived double standards and hypocrisy (“when you are over 18 and your hosts are smoking weed and they have a problem with you drinking beer”), differing communication styles (“passive-aggressive bullshit like host sending an email to remind me of rules, etc. rather than talking to me,” and “family’s style was explosive vs. hosts were pretty chill”), and dealing with financial hardships (“hosts taking youth to restaurants when youth is unable to pay and don’t want to rely on hosts to pay for them”).

⁴ Occasionally we hear from family members who are looking for resources for a young person. For example, in 1999, a mother contacted the program manager wanting to explore the possibility of her trans son moving into a host home in the Twin Cities. She and her husband, who lived in a small town about 5 hours away, knew very little of LGBTQ2S issues and identities, but knew their child needed to be somewhere where nobody knew him, free from the harassment and violence he was experiencing in his small community, where everyone knew he had been assigned female status at birth. The program was able to help the 15-year-old boy (who also had little awareness of LGBTQ2S communities) move into a host home in Minneapolis for 6 months, while his parents sold their home, quit their jobs, relocated to another state and then had their son move back in with them.

⁵ Hosts do not have to identify as LGBTQ2S to be hosts, but they must be allies.

Here are the remaining challenges identified by the participants that are pertinent to race, identity and relational power that need to be shared and heard:

- “Being black in a white family”;
- “Having a host who isn’t LGBTQP community”;
- “Being a different race/culture from my host; it was hard to have intercultural understanding”;
- “Lack of trans acceptance—they weren’t all nice/understanding”;
- “Time is something brown people are extremely flexible with”;
- “Any religious/spiritual intolerance [e.g., being Muslim in Christian household]”;
- “Sobriety and straight edge life [of their host]”;
- “Going from house to house because hosts don’t trust you”;
- “Being shown off like a homeless prize pig”.

The last question centred on what recommendations they would make to others thinking of starting an HHP, which engendered answers on the need to recruit hosts who can view hosting through a social justice lens. Hosts need to be intentionally anti-oppressive, anti-racist and LGBTQ2S-friendly and competent. Communities need to have an awareness campaign focusing on racial justice issues and the recruitment of people of colour as hosts. The program needs a strong training and educational component for White and non-queer, non-trans hosts.

Youth participants also talked about the need for a solid infrastructure, sustainable funding and donors, and strong community support. Lastly, there were recommendations for dedicated case management, social and support opportunities for youth in the program, effective connections and partnerships with trusted mental health and chemical dependency services, life skills programming (on communication, budgeting, listening, problem-solving), and a practice of revisiting progress and celebrating milestones for both hosts and youth.

The larger-group debriefings underscored the need to restructure *recruitment* of hosts (i.e., recruit more hosts of colour), as well as strengthen the *training* of hosts in White privilege and anti-racism, cultural competency and anti-transphobia. The *screening* of hosts also needs to be robust to ensure hosts will not create more harm than good, specifically around power and privilege. For several youth, coping mechanisms, such as smoking weed, were helpful in dealing with trauma and stress. Having hosts who understood *harm reduction* and were sensitive and accommodating was vital for youth in facilitating healing and gaining

stability. Most of the group participants also said that when hosts initially checked with them and asked questions, the youth would say yes to anything because they needed a place to stay. They recommended that hosts be ready to give youth the space and time to settle in, but also invite them to participate in events with family and friends, as that helped them feel welcomed and connected. Essentially, the message was that *trust-building takes time*.

Past and Current Hosts Listening Session Summary

When hosts were asked what brought them to GLBT HHP, they identified the program manager, media stories (e.g., a radio interview about youth homelessness), and information at a conference where GLBT HHP had a table. Hosts also identified connecting to the ‘simplicity’ of the concept of sharing resources, being in solidarity with the LGBTQ2S community and loving youth, but not wanting to parent. Furthermore, the awareness of the need for supportive housing for young adults and a connection to the issues that many LGBTQ2S youth experience (e.g., suicide rates) contributed to the reasons why people became hosts. One host wrote, “I was homeless at 18.”

When asked what worked well, the examples centred on programming support such as home visits, the monthly support group, social events for the GLBT HHP community (e.g., free tickets to various events), resources provided by the program, case management provided for youth, and staff’s flexibility to “experiment and adapt,” as well as staff’s experiences and perspectives. Being able to talk with other hosts (both before and during hosting) was also listed as something that worked well. Additionally, hosts said their own personal work helped, such as doing couples therapy with their partner, family night with youth (“forced fun!”), being clear about non-negotiables and how to communicate them, and being flexible. One host stated, “We actually really liked each other—when no drama present.”

The answers written down on the “What was challenging for you?” flip chart included: sharing and negotiating physical space and time with youth; relationships with youth; reactions to youths’ coping behaviours; stress of suicide attempts by youth; self-awareness (“learning our own triggers”) and self-care; feeling out of depth and ineffective; working on the relationship with one’s partner while hosting; and managing expectations. One host shared that one challenge was feeling “pushed into hosting before ready because a youth was on a housing deadline (wanted a few months after training).”

Below are some specific additional challenges recorded:

- “How to uphold house rules that I wished were non-negotiable in theory, but in practice weren’t/I didn’t want them to be the only consequence option was then moving out, no other nonparental way of enforcing (I didn’t want the role of parent/enforcer)”;
- “The amount of lying/fibbing”;
- “Watching as they self-sabotage”;
- “Youth issues beyond my scope, program’s scope, or youth’s ability or choice to deal with them”;
- “I was prepared for an aloof teen, and they were uber-attached”;
- “Answering their question of “Why can’t I just keep living here without the program? I’ll pay rent...””.

The last question elicited recommendations that touched on resources and services, training and support, expectations and assumptions, and solidarity and sustainability, such as:

- “More holistic support for the younger youth who haven’t lived independently yet”;
- “Pre-emptive mental health support for youth”;
- “Strong social workers for youth are crucial”;
- “Remember that a sense of solidarity is necessary for success”;
- “Training for hosts should be ROBUST”;
- “Support for hosts should be ROBUST”;
- “Support for youth/hosts—might be needed in off hours”;
- “Explain that young folks may not be excited to be in the program”;
- “I felt supported by and able to reach Rocki [program manager] in crisis, but didn’t feel like there was anyone else to take the problems for/from me, I was alone in implementation. Felt like something beyond what I signed up for.”;
- “Access to transportation and communication (bus/transit and phone)”.

During the group debriefings, current and past hosts expressed concerns about the sustainability of the program, as the current GLBT HHP manager, who was the founding staff member was vital to their success with the program, as both resource and support throughout. Discussion during the group debriefings also underscored the need for more training for hosts. Hosts discussed the shared training of hosts with the Minneapolis and Suburban Host Home Programs, and recommended either separating the training [this has been done], or having the hosts from the HHPs that are not queer- or trans-specific go through an additional day before the GLBT HHP hosts join for the 16-hour ‘deep dive’ training. Hosts expressed an interest in more training related to substance abuse, mental

health, assessing previous trauma, and the risk of connecting with the youth primarily through a shared sense or experience of trauma.

There was quite a bit of discussion about what role *HHP staff have in ‘ending the program’ for hosts*. Some hosts set clear timelines (e.g., “we are committing to one year; they have to be out by the end of the year”), and others were less specific about a time frame, but everyone agreed it was challenging to know whether they should be helping the youth apply for other transitional housing. To what extent hosts should be involved in goal-setting and post-HHP plans for the youth seems to be a confusing area for hosts, and sometimes it is unclear who has the onus to do this: is it only the case manager and youth working together, without the host’s involvement?

In addition to more training, all hosts recommended that HHP staff create a list of resources, including telephone numbers and contacts for *suicide hotlines, mental health resources and substance abuse support*. Everyone agreed the program manager was responsive when they called during a crisis, but also agreed a packet of this information during host training would have been helpful, to feel more equipped in the moment of crisis.

Questions to Consider if Starting an HHP

Over the last decade, we have had the opportunity to talk with many people who were exploring the idea of starting an HHP in their communities. Below are some of the questions we encourage considering.

Bigger Picture

- Who is doing most of the organizing? If it is White LGBTQ2S staff of social service and housing non-profits, how do we create a program that is not charity-based or about ‘saving’ youth from their families and circumstances? How do we create a program that recognizes and intentionally challenges systemic, institutional and historic oppression? White liberalism, though well intentioned, can often become a major roadblock to true change. In other words, how do we most effectively make sense of social services work as part of the solution, while at the same time acknowledging that it is also part of the problem?
- How do we best support youth and work with young people experiencing homelessness while minimizing the impact of power and privilege?

- How do we organize and engage within White queer and trans communities that are resistant to conversations about privilege and racism, but want to do something about youth homelessness?
- How can we support people of colour and Indigenous communities that want to host, but are under-resourced or mistrustful of the non-profit system?
- How do we talk to or challenge funders about all of this?

Smaller Picture

- How will the initial recruitment of hosts happen? How will ongoing recruitment happen?
- When youth are minors, and a DOPA cannot be signed, how can we work with them without engaging the child welfare system?
- What are the risks of having minors who are not in the child welfare system in host homes without a DOPA?
- Can a queer/trans-specific host home program be considered an option for youth in the system without being a licensed program? How can we partner with the system without becoming a licensed program?

Conclusion

Since the GLBT HHP inception in 1997, we have heard similar themes highlighted during the listening sessions. We have heard about lives changed, magical moments, messy relationships, and the relief and possibilities that come when basic needs are met, as well as about the challenges of building trust and communicating across different assumptions, expectations and identities. Though the main goal of GLBT HHP is to provide homes for youth who need them (the tangible expectations of hosts is that they provide food and shelter), what makes the experience of hosting and being hosted magical and messy is the stuff of human relationships, of hopes and dreams, beliefs and values, culture and commitment, vulnerability and power, and so much more.

Any response to queer and trans youth homelessness must examine and challenge oppression, especially in relation to Whiteness and racial disparities within our LGBTQ2S communities. It is essential that we minimize the mess that is borne out of unexamined power and privilege, such as allowing White applicants to become hosts if they are not willing and able to commit to racial justice. We must be vigilant about noticing the deep chasm that often separates good *intent* (sharing one's home with a youth) from its painful

impact (e.g., a youth feeling like a ‘homeless prize pig’ to be shown off). It is also crucial to continually examine the leadership and sustainability of our responses and organizations. It is our hope that the information shared here—past mistakes, ongoing struggles, and both the bigger philosophical issues and the smaller concrete ones—can assist individuals and communities who are interested in starting a similar program. Not doing anything because of all the pain, heartache and sweat is not really an option, right? The magic of connection and change still win.

About the Authors

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Rocki is a White Brazilian who came to the United States in the late 80s, fell in love with women and rice krispies treats (not necessarily in that order), and decided to stay. Most of her community organizing work has focused on queer youth, homelessness, and racial and social justice. Rocki has been at Avenues for Homeless Youth since 2007 and helped start the GLBT Host Home Program in 1997.

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5.3 YMCA SPROTT HOUSE: CREATING A BETTER SPACE FOR LGBTQ2S YOUTH IN TORONTO

Sprott House: Our First Year

Kate Miller

YMCA Sprott House – Walmer Road Centre, Toronto’s first and Canada’s largest housing program for LGBTQ2S youth aged 16 to 24, officially opened its doors on February 1, 2016. Twenty-five LGBTQ2S youth live at Sprott House, supported by a team of Case Managers and Youth Workers, and regularly scheduled skills-building and recreational programming.

The house itself is a three-storey red brick building on the outer rim of downtown Toronto, in the Annex neighbourhood, defined mostly by the University of Toronto’s St. George Campus. There are 25 individual units with their own washrooms, two shared kitchens, two shared lounges and two staff offices. The long hallways and staircases are lined with posters for community events and programs, and underneath a crystal chandelier in the high-ceilinged front entranceway is a table with pamphlets and a bowl of condoms. Adorning a wall near the staircase, a colourful mural painted by genderqueer artist Coco Guzman depicts a house being handed from trans and queer activists of the past to the youth of the present.

While people had been advocating for LGBTQ2S-specific housing for youth in Toronto for decades, the YMCA Sprott House story took shape when the 2013 Street Needs Assessment found that at least 21% of youth living in City of Toronto shelters identified as LGBTQ2S. For safety reasons relating to disclosing their sexuality or gender identity to survey volunteers, it is likely the percentage is much higher—closer to the 42% cited in a report by The National Gay and Lesbian Task Force. This, combined with several research reports about trans men and LGBTQ2S youth experiencing violence in the city’s shelter system, prompted the City of Toronto to make existing shelters safer, and to add 54 new beds designated for LGBTQ2S youth to the shelter system.

When the City put out a request for proposals for shelter and transitional programs specifically for LGBTQ2S youth, we (the YMCA of Greater Toronto) realized we had the opportunity to meet an urgent community need. The YMCA has provided housing for youth experiencing homelessness in Toronto since 1984, with a long history of and commitment to starting and sustaining relevant programs for youth experiencing homelessness. The YMCA was very excited to provide this program in partnership with many invested systems and communities. YMCA staff were aware of the high numbers of LGBTQ2S youth in their programs, the unique challenges those youth faced in securing long-term or permanent housing and the degree of violence in the shelter system. Adding Sprott House as an LGBTQ2S program underscores the YMCA's continued commitment to diversity and inclusion.

Due to overcrowding in the emergency shelter system, Toronto's high youth-unemployment rate, unaffordable rents and decades-long waiting lists for social housing, we knew the demand made this kind of program essential. Youth and staff at other agencies had been calling the program daily since the announcement was made that the YMCA would be opening a program for LGBTQ2S youth. We prioritized acceptance of program applications based on the level of safety/risk youth described in their applications. We knew there were young people living in housing programs, shelters, and with friends, family or in rooming houses who were facing immediate threats to their physical and emotional safety due to their sexual and gender identity. We also knew that for LGBTQ2S racialized youth, disabled youth, and young people who use substances these risks would be higher, and the barriers to securing safer housing would be increased.

While interviewing youth for Sprott House to evaluate their readiness to live independently and their need for housing, it became clear the level of trauma experienced by LGBTQ2S youth applying to our program was very high. It appeared that young people applying needed more support than the program had originally been designed to provide. This strengthened our belief that a transitional housing program would not be a one-size-fits-all solution for LGBTQ2S youth experiencing homelessness. Many youth identified that their need to live in a place where their gender identity and sexuality was affirmed took priority over all other needs. Our program was their first choice over programs that included intensive mental health support, food and supports for daily living, housing first for substance users, detox programs, or programs for young people with developmental disabilities, simply because those programs were not designed with the unique needs of LGBTQ2S youth in mind.

At this point, YMCA Sprott House – Walmer Road operates as a one-year transitional program for youth. This was a difficult programming decision for us to make, given that research shows there are more positive outcomes when youth stay in a transitional housing program for two or more years. However, the legal definitions in Ontario for program participation versus tenancy pose restrictions on length of stay. We constantly navigate this complexity, supporting youth to find supportive housing within a year, while trying to support their personal growth. We understand that a one-year program poses difficulties for youth who may not be ready to leave. We revisit this policy regularly, and continue to try to find ways to support youth who need a longer stay, while ensuring that the program remains available to as many youth as possible.

While we believe choice is the best solution, and all housing and support programs for young people should be safe, appropriate and accessible for LGBTQ2S youth, we made changes to our program in the short term in order to provide more support. We added staff to support youth, make referrals, run programming and manage potential crises. We created partnerships with other agencies, including community medical health centres, violence against women programs, programs for Indigenous youth, an organization that provides a mental health outreach worker onsite once per week, and two substance use support programs, including the YMCA’s Youth Substance Abuse Program¹ (YSAP). Our program was designed with youth independence in mind, and therefore some youth may feel there is less staff available for one-on-one conversations than they have experienced in other programs. Our hope is that within the year, youth become less reliant on staff and are connected to supports and build relationships that will last after their time in our program.

In addition to outside supports and structure, our program is always evolving to better serve the young people who live here. While many transitional housing programs require young people to be engaged in school or employment, we realized both school and work can be systemically inaccessible to LGBTQ2S youth—especially trans youth and racialized youth. We allow youth to move in with a range of self-defined goals, from “Wanting to stay safe and improve my mental health,” to “Having a safe place to medically transition,” to “Continuing to work and re-enroll in college.” Given the needs of the young people using our services, the first year has been geared more toward emotional safety and creating community and relationships than toward life-skill development (a term that usually refers to cooking,

¹ Learn more about YSAP: <https://ymcagta.org/youth-programs/youth-substance-abuse-program>

cleaning, attending appointments, completing school, working, etc.). Our belief is that by healing from trauma, experiencing safety and creating relationships, young people will have a firm foundation upon which to build their lives in a way that is true to what they want.

We have developed a program in which we regularly seek and receive a wide range of feedback from the youth, and our small staff team constantly strives to meet their needs with fairness and respect. For example, many youth complained their food was being stolen from the communal kitchen. We offered to lock the fridges, but some youth requested that we install security cameras in common spaces. We listened to their concerns in group and one-on-one meetings. Balancing fairness and respect, we felt installing cameras would significantly violate privacy and possibly damage relationships, and we therefore communicated our decision to install locks. When some young people objected to this solution, we continued to listen and talk with them, but ultimately stood by our decision. We try to be as transparent as possible and recognize that our decisions won't satisfy everyone. We strive to make decisions by taking into consideration the youth voice, safety, respect, funder policy and other priorities.

Another area of regular negotiation is around discharging youth from the program. Our goal is to never discharge youth; the pressure we feel as a staff team is exacerbated by our knowledge that they may face homophobic, transphobic or biphobic violence in the shelter system. We are aware of the destabilizing trauma of being discharged, and are committed to serving young people we feel will be able to stay in our program. We work very hard to clearly communicate norms, policies and expectations within the program, supporting youth to work with us to maintain an environment that is safe and respectful for all residents. For example, it is an expectation that all youth attend house meetings; we feel it is an opportunity to communicate any important information to youth, and also to address issues youth have brought to our attention.

Our staff members consist of individuals with formal education and work experience in residential programs, those with extensive community-based experience and staff who have lived experience in housing systems. This combination of backgrounds is ideal—staff members who have experience in residential programs bring ideas for structures they have seen work, knowledge of referrals and ways to make the system work for the youth we serve. This includes a deep understanding of legislation and policies that frame our program. Staff members coming from community-based programs are able to come up with creative and empowering solutions to youth concerns, and to expanding the limits of a transitional housing program.

Prior to submitting our proposal to the City of Toronto, the YMCA of Greater Toronto made a commitment to reviewing and improving the ways we serve LGBTQ2S youth. YMCA Sprott House has been very well supported, celebrated and learned from across the whole association. Programs that serve LGBTQ2S youth experiencing homelessness regularly reflect on policies and practices and how they impact LGBTQ2S youth, and have added cultural competency to job postings. Our human resources department has sought input and updated policies and procedures to better respect trans staff members. We have had camping, health and fitness, and newcomer youth programs reach out to us for ways they can best include and affirm LGBTQ2S people. Our CEO, Medhat Mahdy, is deeply committed to the YMCA of Greater Toronto's Diversity and Social Inclusion value: he has added his pronouns to his email signature and participates in the YMCA's annual Pride initiatives. YMCA Sprott House affirms the YMCA's commitment to diversity and social inclusion, and has also provided learning opportunities for many YMCA programs.

In addition to the support of the YMCA, we receive significant community support and recognition from individuals and other organizations. We regularly receive fundraising support from high school and college clubs, as well as from individuals and small LGBTQ2S-owned businesses. Glad Day Bookshop, the world's oldest LGBTQ2S bookstore, organized a book drive that resulted in a fabulous library for Sprott House, and a community group organized a walk that raised more than \$25,000 for the program. Additionally, projects such as the City of Toronto's employment support programs, as well as other housing and shelter programs, have reached out and asked how they can better serve LGBTQ2S youth, and have listened to our feedback and made changes.

As we evolve and grow into our second year, we have identified goals moving forward. We would like to work toward more culturally relevant services for Indigenous youth who make up 20% of those we serve. In our next year, we will engage youth in an empowerment and leadership model to formalize the excellent leadership and mentorship we see among youth within the house. We hope to continue to create change for LGBTQ2S youth experiencing homelessness in Toronto, and work with our partners to create change in the many systems that intersect with our transitional housing program.

Staff Member Reflection

Kavita Bissoondial

When I tell people I work at YMCA Sprott House, it is always met with excitement and curiosity about Toronto's first housing program developed specifically for LGBTQ2S-spectrum youth. The past year has been amazing to witness, and has also brought some of the most challenging experiences I've faced as a worker. In this reflection, I want to share some of the practices I have appreciated, the lessons we are learning as a frontline staff team and some of the areas we aim to continue growing in.

It has been the foundation of the program to approach youth work in a way that recognizes the diverse ways trauma impacts LGBTQ2S youth. We know young people respond and react to the various forms of violence they have experienced and that, often, being in the shelter system creates further violence. We aim to meet young people where they are at, and let them determine their own goals. When youth enter Sprott House, youth workers and case managers work with them to figure out what it is they want to accomplish while they are with us. Their goals can be related to many things: physical health, mental or emotional health, school, employment, journeys with gender or sexuality, developing skills or talents, and more. These nonjudgemental, supportive conversations lay the groundwork for developing relationships of trust and affirmation to help youth work toward their goals.

In terms of physical space, youth have expressed that it has been deeply transformative to have their own room as a stable space where they do not have to worry about keeping up an appearance to others, where they can retreat and also still be able to access staff for support in focusing on their goals. We have also been lucky in our partnerships with excellent mental health workers who, like the full-time staff at Sprott, are queer and trans and can meet with youth at the house or in the community.

Through supportive conversations, workshops, and knowledge and skills sharing, staff have made space for centring diverse gender expressions and orientations. Much of this work has been to affirm individuals in their own explorations, but also challenging youth living in the house about their own beliefs about sexuality and gender. There is often an assumption that LGBTQ2S-spectrum people understand all the issues that individuals in the community face, and that we do not oppress each other. This is simply not true. We see this in the ways residents gender and mis-gender each other, and in moments when residents are struggling to process emotions and use language that could be hurtful to

others. When residents move in, we encourage them to share their own gender pronouns and ask for the pronouns of other residents they meet. Through these conversations, we can assess residents' knowledge of issues affecting trans- and gender-expansive people. These are learning opportunities when we explore why someone's gender presentation is not an indicator of their identity or pronoun, and we can explain the importance of respecting people's gender pronouns and identities.

One of the core values of living at Sprott is an openness to learning about oppression and how our communities affect each other, and challenging that oppression. We explore this value in house meetings, in building contracts with youth, in our case management approach, and through workshops on topics such as self-accountability, anti-oppression, tenant rights and resident rights in the shelter system. We regularly make supportive interventions in everyday conversations about race, gender and healthy relationships, in order to establish learning moments with residents and to work toward a community where youth can live without fear of discrimination. When figuring out how to make an intervention, we take into consideration where that person is emotionally in the moment, and if they are in a place to be challenged or receive new knowledge, and explore situations or examples that are directly relevant to themselves (i.e., similarities and differences of struggles or experiences). Often, other youth are already engaged in this type of work, and both model and normalize the practice of being open to feedback, asking questions and trying your best.

Currently, more than 90% of youth living at Sprott identify as Black, Indigenous, and/or people of colour. Youth have expressed major support for our approach, as they have shared countless experiences of discrimination in housing programs. Black youth, racialized youth and Indigenous youth have been quite vocal about the challenges of having to survive in a housing system that views whiteness as the norm. Black and Indigenous youth speak regularly about the ways that racism has caused staff in other housing programs to perceive them as aggressive, scary, stupid or not valuable, resulting in their not seeking support, while being deemed simultaneously "independent" and "underachieving." Youth are combating racist stereotypes and ideas on a daily basis, and it is important for them to be able to take refuge in their home. They must be able to trust that they will be supported by a staff team that, at the very least, is actively anti-racist, but that ideally can also support them as racialized people themselves, in developing strategies for survival, healing and success on their own terms.

We intentionally make space for conversations about racism in house meetings, informal conversation and workshops, consistently affirming youth in their ability to speak freely in their own language without judgement or interruption. Staff also consistently make efforts to connect youth with programming and services that are led by Black and Indigenous people and people of colour who are also queer and trans or two-spirit. Representation and leadership by racialized communities is a vital part of how we connect with our residents. Staff aim to demonstrate anti-racist practice, not only in our interactions with youth, but also in our approaches to conflict and programming offered.

That being said, we are always trying to do better. Youth have consistently expressed the importance of having a staff team that represents their identities and lived experiences, including wanting more Black and Indigenous people on staff. Recognizing the specific needs of Indigenous youth, we hosted a barbeque with two Indigenous youth programs to build relationships with and introduce youth to different services, and the event was widely attended by participants of all programs. The majority of Indigenous residents were connected to Indigenous health and support services in the city prior to coming to YMCA Sprott House, and though some will access in-house support as needed, most have expressed feeling more interest and trust in Indigenous-centred and -operated services. Staff will continue connecting with local Indigenous organizations, bringing in relevant programming, and working to expand our knowledge as a team.

I am happy to share that most youth access staff on a regular basis, for support with jobs, housing, school, counselling, relationships and daily living. Most commonly, youth seek counselling and debriefing to talk about stresses in their lives, relationships, family dynamics and the world outside Sprott House. Staff have spent time talking with youth about gender and sexuality, but also about the Black Lives Matter movement, local politics and policies that impact low-income people, and many other issues youth express being impacted by. Often, we support youth navigating experiences of homophobia or gender discrimination that happen outside the house. Debriefing with them when they come home is vital in loosening the grip of the many forms of violence they encounter daily, including bullying, exclusion and harassment. Staff also support youth with the tough transition they face at the end of their year. Youth are faced with the difficulty of finding affordable housing in a city where rent continues to skyrocket, in a society where they face multiple forms of oppression. Staff struggle to support youth in finding appropriate living arrangements once their stay at Sprott House is over.

Overall, when things at Sprott House are great, they're fantastic. However, when things are hard, we all feel those lows. As young people navigating poverty, homophobia, transphobia, racism, mental illness and struggles with substance use, residents' crises have occurred regularly since the opening of Sprott House. Supporting youth through a crisis individually and dealing with the ways crisis can impact the larger group have been some of the greatest challenges to tackle as staff. Residents have reported experiences of abuse, assault, police violence, incarceration, forced institutionalization, overdoses and thoughts of suicide over this past year.

Improving our capacity to support individuals struggling with their substance use is a current area of growth for our program. Recognizing that substance use is neither good nor bad, we as a staff team invite open communication about substance use and work to challenge stigma towards substance users. We explore issues facing drug users alongside the issues of racism and poverty with residents. We also work to connect residents with YSAP substance use counsellors if they have any goals around their usage, be it to use less to save money, to learn how to test substances to ensure they are what they say they are or to work towards sobriety. In some emergency shelters, young people would be discharged for breaking rules around alcohol and substance use.

Additionally, youth expect to be punished for things like yelling, not doing their dishes and not returning at night. Our approach to most issues has been to have a conversation with the young person to determine why the issue is happening, make an agreement or contract with them in which they determine what the next steps are for them to change this issue or rebuild trust, and include what they and staff will do if this happens again. This has largely resulted in youth feeling able to approach us, feeling secure in knowing that they can make mistakes, and that their housing will not be jeopardized.

Over the past year, circumstances have arisen that necessitated medical and/or police services to attend Sprott House. The police have demonstrated a lack of understanding or empathy for residents, and a limited recognition of diverse genders and sexuality. Often, the ways LGBTQ2S youth have been impacted by trauma is re-engaged by interacting with paramedics, hospital workers and police. In these cases, we work with the young person to determine what they feel is an appropriate course of action. This might involve filing a complaint, advocating on the youth's behalf, intentionally checking in more regularly with staff, venting about their issue or connecting them to more peer-based services to receive further support.

The past year has been my first working in the housing system, and I feel like I still have so much to learn and accomplish in this role. I am reminded constantly that a one-year program is not long enough for young people who are on the margins to develop stability and security within themselves and their community to achieve independence.

While I am frustrated by these systems, I am also grateful for our team and the ways we have created a space where youth have expressed that they are finally able to be and explore themselves. I learn constantly about the barriers facing young people, and the ways they are creatively building strategies for navigating and overcoming them. As a worker, I have learned that my role is to build pathways with young people for them to exercise their independence and autonomy. As a frontline worker, I maintain consistency in the structure of our program, so that when things go awry, youth know there is somewhere and someone they can trust to support them. Most importantly, I work to create a space free from discrimination to provide respite from the everyday violence they face as the brilliant and brave queer and trans youth they are.

Youth Reflection

Morgan

I am a 21-year-old, masculine of centre, non-binary, trans person of colour who is Jamaican and happens to live at Sprott House, Toronto's transitional housing program specifically for LGBTQ2S youth. I chose to participate in this program reflection so that youth workers and other folks understand more about the good and bad things about transitional housing. My hope is that this will lead to changes or improvements in the services available to youth and those who provide them.

Recently, I learned that of youth who are homeless or at-risk of homelessness, up to 42% are LGBTQ2S. LGBTQ2S folks face a lot of difficulty in other shelters, this being my own experience, so it is important to have a specific service for youth who are queer and/or trans. There is homophobic and transphobic violence in shelters, even from staff members. Sprott House exists out of a real need to protect the many queer and trans youth who are at-risk of homelessness or who are homeless already.

Before I moved to Sprott House, I was living in a different transitional housing program. At the time, I identified as a lesbian, and I thought that Sprott House could be a positive space for me. I wanted to move to a place where I could get in touch with the LGBTQ2S community. For the most part, that has happened for me. Sprott House has helped me realize that I'm not alone.

I've been able to do some soul-searching through feeling comfortable enough in a positive space to reflect and grow as a person. It has helped me to become true to myself by being around those who are accepting of my identity—staff and youth. The fact that the staff at Sprott House aren't cis and straight has made such a difference for me. I've been able to see positive examples of trans men and non-binary people, and positive examples of masculinity in general. Given that I did not grow up around many good examples of masculinity, I found it difficult to imagine alternative possibilities of masculinity. Having queer and trans staff members who present this made me comfortable enough to be myself. At first I was jealous of how they embodied their identities, but then I was able to talk with staff about the complexities and nuances of my feelings around presenting in the way I always imagined, which helped me a lot.

Through the program, I've also met a lot of other queer people by going to drops-ins and other services. I feel more comfortable than I used to because the spaces I am referred to are specifically made for me (in terms of identity and experience and interests), which has helped me feel more comfortable taking up space. For example, I was in a musical, and I met Laverne Cox because of opportunities through Sprott. I also had a great experience at Toronto Pride, being in the parade with the YMCA. It was a significant memory of my time at Sprott House, just getting ready for it (we decorated t-shirts, made a banner, wore costumes), and feeling like it was a historical time because Prime Minister Trudeau was there and Black Lives Matter Toronto stopped the parade to demand support for Black-specific programming.

At Sprott, I've met some cool staff. I appreciate their dedication to helping each youth in the house. I appreciate the outreach, and I appreciate all of the support they give on a daily basis. Staff here are each so different, and they really do put in work. They have supported me in getting my goals met; many of the goals I set out to do when I got here they have helped me reach, like wanting to perform and find ways of connecting to the wider queer community. I've been able to work through some of the personal issues that have felt like ongoing barriers for me with the support of the staff at Sprott. Overall, I feel like I'm in a better space because of the support I've been given here.

One of the biggest challenges at Sprott is knowing that your one year goes by quickly, and that it is going to end soon, even from the first day. The limited time puts a lot of pressure on individuals living here. One year is not long enough for a youth coming out of homelessness to meet all their goals and be in a place to live independently. People should have supportive housing for as long as they need it. It is understandable that these policies

might exist in order to encourage people to move on, but the reality is that each individual grows at a different rate, and if they can't accomplish everything they need in that time, then it can feel like a failure. This can put a lot of pressure on anyone, let alone a youth who is trying to survive, make a career, go through a transition, or deal with any of the other challenges of being a youth living in poverty in Toronto.

In a previous program I lived in, staff could literally go with us anywhere, because there was a van to support residents. For example, if I needed to hand out resumes or had an interview, staff could accompany me, or if residents needed to move they could help; we also got to go on trips as a group. We also had tenant rights in that program that could be terminated for not following our program agreements, but we did have a certain amount of time for moving out. There was more structure, like a weekly house meeting, which worked because there were less people. In that program, there was a higher staff-to-resident ratio, which allowed for more one-on-one support with case management and counselling. It can be difficult to make appointments with Sprott staff sometimes, because there are so many people to support.

In terms of the bigger picture and what youth workers need to know about working with youth, I have a few reflections on those serving youth. First, never assume anything about a youth's identity or experiences. Staff should learn about the queer community, gender, sexuality, race and racism, and anti-oppression. This should be mandatory training. This is important because there are a lot of different kinds of people in the world, and if you have never worked with them and don't have an idea of their identity and why that's important, it could spark problems.

Second, staff should represent their youth. If the staff are majority straight and cis, or White, then it makes it less comfortable for people who don't share that identity. Being here myself, I became comfortable in myself by sharing living space with people who share my identities. We need more queer and trans folks everywhere in this field. In terms of those who are creating or structuring programs, there should be more people working on behalf of homeless youth who have lived experience. It's wrong that a lot of the people who make decisions on behalf of us, or that impact us have never been in our shoes. They expect to know what's best for us; we know what's best for us. People who have lived within the system know what needs to change. It doesn't matter if a person went to school to study this work. If they haven't seen it or lived it, it's not the same. The people who have the power to make the decisions should share some of our experiences.

Finally, it should go without saying that everyone should have housing. Things would be better if people didn't have to worry about rent. Especially in Canada, because it gets cold, it's not right that people should be out on the street or put into shelters that can feel like prisons. Everyone should have that basic need met, and it should be available to those who need it. It is important to work together as a community to change the housing system, and change its inaccessibility. We have to be courageous to do what is right, not what is profitable or easy or in the best interests of those who have the privilege and resources.

About the Authors

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Morgan has navigated housing systems in different cities for four years. They are a performer, facilitator, and they are hungry for justice, freedom, and affordable housing.

5.4 OZONE HOUSE: LGBTQ2S INCLUSIVE EMERGENCY SERVICES

Katie Doyle

Introduction

Ozone House is a community-based nonprofit agency located in Ann Arbor, Michigan that helps young people aged 10 to 21 lead safe, healthy and productive lives through intensive intervention and prevention services. Since 1969, we have actively developed unique, high-quality housing, services and support programs that provide intervention, training and services for youth who have run away, are experiencing homelessness or are at risk of homelessness, and their families. Through these support services, we help youth develop essential life skills, improve their relationships and enhance their self-image so they may realize their full potential for growth and happiness.

Since the early 1970s, Ozone House has reached out to and provided support for LGBTQ2S youth. Mirroring national statistics, at any given time, between 20–35% of youth who come to Ozone House identify as LGBTQ2S. Because not all youth at Ozone House identify as LGBTQ2S, we prioritize policies that promote inclusion for LGBTQ2S people, as well as policies and practices that ensure *all* youth and adults develop the skills necessary to reinforce equity and inclusion of all intersectional identities.

Ozone House does not approach this work in a vacuum; the historical context of violence, dehumanization and oppression that LGBTQ2S youth have faced is an ever-present consideration for the environment we create at Ozone House, and for understanding and mitigating these experiences that youth and their families have faced. As such, Ozone House bears a special responsibility to advocate for LGBTQ2S youth in the broader community and to soften the context in which LGBTQ2S youth live, work and interact with others. Providing services that help youth lead safe, healthy, and productive lives is our primary mission. To achieve this mission effectively for LGBTQ2S youth, we focus on four critical components: our responsibilities as an organization, the environment at Ozone House, community education and advocacy, and provision of exceptional services, supports and opportunities.

Responsibilities of Ozone House

Be Visible

In the early 1970s, some gay teens—primarily young men—participated in a support group at Ozone House. Fearful for their lives if anyone found out about their sexual orientation, they communicated about the meetings in a covert way, leaving notes about the dates and times of meetings under rocks. Group members would periodically check the rocks for updates. While our current support group for LGBTQ2S youth, *PrideZone*, posts meeting dates and locations publicly, we continue to honour and fiercely protect confidentiality for all youth. However, we want to be a visible beacon for LGBTQ2S youth to know where to turn for support, which is why we always identify ourselves as an organization where LGBTQ2S youth are welcome. Perhaps equally important, we make a point of being visible in the community as a way of standing up for LGBTQ2S youth, and as a declaration that LGBTQ2S youth are present in the community and deserve award-winning services, opportunities and supports.

Provide Unfettered Access to Support, Services and Opportunities

Wherever LGBTQ2S youth are, we want them to be able to access Ozone House with no barriers. To do so, we hire youth to reach out to their peers on the street, in schools and wherever youth hang out, to connect them with services in the community to meet their needs. Our crisis line is answered by a person 24 hours a day, 7 days a week, 365 days a year. Youth can come to both our Drop-In Center when it is open and to our emergency shelter at any time without prior notice or referral. We send staff to every middle and high school in the community, and we have a presence at the local community college and at a local university. We provide Ozone House literature and updates to first responders, youth-serving professionals, educators, faith communities, youth-friendly businesses, health care facilities, courts, juvenile detention centers and LGBTQ2S resource centers at all colleges and universities, as well as in the community. We have a presence on social media, including our mobile-responsive website, Facebook, Instagram and Twitter, and youth can access us through each of those platforms.

Partner with other Organizations to Leverage Core Competencies

Ozone House's core competency is cultivating leaders in social justice and youth development in a trauma-informed environment. Because we do not provide every service that LGBTQ2S youth experiencing homelessness need, we rely on partner organizations to provide their core competencies to help position LGBTQ2S youth for success. We

will not formally partner with any organization that does not support LGBTQ2S youth. Examples of successful partnerships include: our local food rescue and food bank that provides most of the food for our programs; a local nonprofit housing developer to manage housing properties where we place LGBTQ2S youth; a local teen health center that provides nonjudgmental services and has particular competence in health care for transgender and gender-expansive youth; and a local teen center that hosts an LGBTQ2S youth-led advocacy group.

Environment at Ozone House

Safety

Physical and psychological safety is a hallmark of Ozone House. Safety is especially important for LGBTQ2S youth because so many have experienced high rates of bullying, family rejection, violence and exploitation. Creating a culture of safety and inclusion for all youth requires that we train all youth to function safely in the environment, and hold all youth accountable—all the time—to strict standards of safety and inclusion. We train all youth to understand the value of inclusion, especially for LGBTQ2S youth who traditionally have been marginalized and not offered leadership opportunities.

Recruit, Screen, Hire, Train and Support Staff and Volunteers to Maintain an Environment of Safety and Inclusion for LGBTQ2S Youth

We specifically request that qualified LGBTQ2S members of the community consider applying for volunteer positions or employment at Ozone House. When screening prospective employees and volunteers, we use a lens of LGBTQ2S inclusion and affirmation, and require candidates to demonstrate the competencies necessary to support LGBTQ2S youth experiencing homelessness and those who have been traumatized. Once we bring new people into the organization, we provide additional training in LGBTQ2S youth work that caters to multiple learning styles. To foster a culture of accountability, we reinforce cultural humility and open communication between supervisors and staff, and encourage open discussion of lessons learned. These are difficult conversations that can be fraught with fear, shame, and sometimes self-righteous indignation that serves to shut down communication. It is incumbent upon everyone at Ozone House to push through what is uncomfortable in order to create authentic safety.

For example, recently a member of our leadership team acknowledged to the full staff that she had made a mistake in language she chose when requesting that a group of people identify which pronouns they use. The practice of asking everyone to identify their pronouns helps avoid the misgendering of people through inaccurate pronoun use. This leader had asked a group to name their “preferred pronouns” as opposed to their “pronouns.” (The use of “preferred” implied that gender identity is a choice.) To highlight the mistake as a lesson learned and reinforce that every one of us still has much to learn, the leader took responsibility for the misstep in front of the entire staff. This choice also reinforced that it is not only important to take responsibility for errors, but also possible to move forward after making a mistake.

***Uphold Policies, Procedures and Practices that Create and Maintain
an Environment of Safety and Inclusion for LGBTQ2S Youth***

Our operations incorporate several policies that specifically support LGBTQ2S youth and their intersectional identities and enable the most impactful services and supports for LGBTQ2S youth.

Our Hostile Language Policy reads: *We believe in the inherent worth and dignity of all people, and seek to ensure that youth experience Ozone House as a safe place, free from bigotry and injustice, where each person is respected and affirmed. To this end, we commit ourselves to addressing hostile, discriminatory, and anti-social remarks and behaviour that threaten the safety of youth, staff, and others. Similar to all our work with youth, we will address these behaviours in a caring, patient, and non-judgmental manner with the goal of creating internalized awareness and change.*

Enforcement of a policy like this comes as a welcome surprise for LGBTQ2S youth, who have endured a lot of bullying and name-calling.

Recognizing that disclosing information about one’s personal identity to clients always has consequences, Ozone House developed a lengthy self-disclosure policy, the preamble of which is excerpted here. To maintain the youth-focused nature of services and appropriate professional boundaries with youth, Ozone House’s Policy on Self-Disclosure directs staff to avoid personal disclosure in interactions with clients except: when it has been deemed integral to the therapeutic plan with a client; and in specific instances where to deflect or deny one’s personal identity may damage rather than protect the rapport, comfort, and authenticity of the professional relationship between staff and clients. We developed this

policy to include the potential for appropriate self-disclosure so that youth could come to know LGBTQ2S staff members. This benefits LGBTQ2S youth, who have had limited exposure to LGBTQ2S people, and it allows them to identify with safe adults.

We have a blanket ‘No Physical Contact’ Policy in all our programs (though exceptions are made for youth who style each other’s hair). This policy is upheld for the physical and psychological safety of all youth, the majority of whom have experienced physical or sexual abuse and exploitation. LGBTQ2S youth have witnessed their non-LGBTQ2S peers engaging in public displays of affection without experiencing formal or informal consequences. In contrast, nearly all LGBTQ2S youth have experienced negative consequences based on their perceived identity when they engaged in public displays of affection with a romantic partner. Therefore, like the hostile language and self-disclosure policies, our policy on physical contact protects LGBTQ2S youth from the potential for differential treatment in this area, since all youth are expected to follow the same policies. That said, it is important to note that equal treatment does not always mean equitable treatment, and we strive for equity in our programming. Our working definition of equity is: Giving everyone what they need to be successful. We differentiate equity from equality, which is treating everyone the same. The focus of equality is to promote fairness, but it can only work if everyone starts from the same place and needs the same resources. Because of a legacy of discrimination, violence, hate crimes, dehumanization and oppression, LGBTQ2S youth do not ‘start from the same place’ as their peers. LGBTQ2S youth of colour experience additional layers of oppression.

As such, we operate with multiple inclusion practices and policies, including using inclusive language on all our paperwork, written communication, social media posts and verbal exchanges with youth. We expect all youth (and staff) in our programs to use updated, inclusive language when referencing sexual orientation, sex, gender identity and expression, and romantic and sexual attraction, as well as other identities. We ask about and use youths’ gender pronouns and preferred names. All bathrooms are gender inclusive; indeed, the bathrooms are all private, and require no signage. After much advocacy with our licensing representative (and with new United States Department of Housing and Urban Development policy), our sleeping rooms are also gender inclusive.

***Implement Best Practices and Theoretical Approaches
that Affirm Intersectional Identities of Adolescents***

All our services are informed by a Positive Youth Development framework. Based on the literature, the Interagency Working Group on Youth Programs, a collaboration of 12 [United States] federal departments and agencies that support youth, has created a definition of positive youth development:

Positive youth development is an intentional, pro-social approach that engages youth within their communities, schools, organizations, peer groups, and families in a manner that is productive and constructive; recognizes, utilizes, and enhances youths' strengths; and promotes positive outcomes for young people by providing opportunities, fostering positive relationships, and furnishing the support needed to build on their leadership strengths (Interagency Working Group on Youth Programs, n.d.).

At the most basic level, we require all volunteers and staff to engage in active listening and to speak and act in a non-judgmental manner when interacting with youth and with each other. Not only is this a best practice for working with youth experiencing homelessness, we have found that youth have woefully limited experience with adults who listen and treat them respectfully. A lack of respect for their identities sends a deep and painful message to LGBTQ2S youth that they do not matter, and often encourages them to turn away from all adults to protect themselves. A sense of self, identity development and mattering are primary tasks of adolescent development, as is relationship-building. Active, non-judgmental listening is the foundation of creating an environment to affirmatively support LGBTQ2S youth, and youth of colour.

Similarly, all our services are trauma informed, which means we emphasize:

- Safety;
- Trustworthiness, authenticity and transparency;
- Helping youth place their traumas in context;
- Youth voice and youth choice;
- Collaboration and mutuality;
- Consistently assessing the impact of trauma, as well as cultural and historical realities across intersecting identities;
- Instilling genuine hope;
- Supporting and promoting positive, stable, reciprocal relationships.

Ozone House operationalizes these components in several ways, most notably in our approach to developing trauma-informed consequences when upholding safety and agency rules. There is an inherent tension between upholding a consistent structure and responding to each individual's needs in the moment. Structure and consistency help youth feel safe. However, too much focus on 'rules' can minimize the needs of a young person—sometimes to traumatic effect—and can neglect to consider a youth's unique developmental functioning or historical experiences with authority and oppression. Balancing structure and clear limits with a tailored response is at the heart of Ozone House's approach. In addition, when staff identities differ from a youth's identities, we name the added power differential and the impact this has on a youth's experience.

Trauma-informed consequences are most evident in our approach when youth display unsafe behaviour to such point that we need to restrict their access to the physical buildings in order to ensure safety for other participants. In such cases, youth are supported to stay in touch with Ozone House staff, including meeting in public places, until the youth has made progress on the issues that led to their unsafe behaviour. In short, Ozone House does not remove the most important aspect of a youth's healing; namely, their relationships with caring adults. Instead we directly provide, or help them access, services that meet their developmental needs and help them make safer choices. More often than not, these youth return safely and become more engaged in leadership opportunities than ever before. This approach meets the sometimes competing needs of the individual youth and the larger group. It is important that LGBTQ2S youth witness staff holding youth accountable for unsafe behaviour, including discriminatory behaviour. This trauma-informed approach holds youth accountable for their actions, and supports them to make appropriate and safe choices in the future.

Likewise, we use a harm reduction approach when framing options for youth and supporting them to make safe and appropriate choices. This framework is applicable to youth who are focused on their very survival each day. Using empathy, we support youth to slow down, weigh their options, and make choices that are less harmful than other options. One example is that traumatized youth often engage in self-harming activities. Staff use a harm reduction approach when they recognize and name that cutting is less harmful than attempting suicide, for example. Another use of harm reduction that is salient for LGBTQ2S youth is around sexually transmitted disease and HIV prevention, sex, sex work and hormone therapies. It is important not to reduce LGBTQ2S identities to sexual behaviour or gender identity, but it is equally important to provide safe, accurate

information and options. Few LGBTQ2S youth have had access to accurate sexuality education, so it is incumbent on Ozone House to stay informed, and to share clear, correct and sex-positive information with LGBTQ2S youth.

Community Education and Advocacy

Educate the Community

To soften the context in which LGBTQ2S youth live, we educate the broader community about LGBTQ2S youth. We do so by exposing the community to stories of triumphs and traumas that LGBTQ2S youth experience. We have found that most people in the community lack exposure to LGBTQ2S people, both their contributions to the community and the tremendous barriers they face in leading safe, healthy and productive lives. In some cases, this lack of exposure is the result of willful ignorance or bigotry. In many other cases, however, people simply don't know what they don't know. We take the opportunity to educate them whenever possible, including within the school systems, legal system, parent groups, collaborative associations and faith communities. Additionally, we use our social media platforms to educate about LGBTQ2S youth issues; while many in our 'audience' identify as LGBTQ2S, we do reach a large segment of the population unfamiliar with the needs of LGBTQ2S youth, and we use the opportunity to highlight information, stories, statistics and ways to help.

Advocate for Change

Regarding the barriers that LGBTQ2S youth—especially LGBTQ2S youth of colour—face, Ozone House works to soften the community context by advocating for changes in attitudes, behaviours and policies that impact LGBTQ2S youth negatively. In our licensed shelter, for example, we have successfully advocated for the affirming placement of transgender youth who seek shelter. State of Michigan Licensing Rule R 400.4177 (3) for Child Caring Institutions stipulates: *Residents of the opposite sex over 5 years of age shall not sleep in the same sleeping room.* Our licensing representative interprets this rule so that sex means sex assigned at birth. When interpreted thus, this rule conflicts with federal, local, and Ozone House's nondiscrimination policies, which prohibit us from discriminating based on gender identity. We requested a variance from this rule for the occasions when a young person is in transition from their sex assigned at birth to the gender with which they identify. We requested and were granted the discretion to make decisions about sleeping room placements in such cases. If we cannot place youth in

the bedroom of the gender with which they identify, they face discrimination based on their gender identity. They also face the possibility of being outed involuntarily by the very place that is charged with making them safe. Creating and maintaining a safe and supportive place is Ozone House's highest responsibility to youth, to their families, to our community and to our funders. All staff and volunteers at Ozone House advocate for the rights of LGBTQ2S youth in multiple settings, including schools, health care facilities, housing placements and jobs.

In 2016, Donald Trump and Mike Pence were elected to the offices of President and Vice President of the United States, respectively. Mike Pence spent much of his political career supporting 'conversion therapy' for LGBTQ2S people, as well as laws that discriminate against LGBTQ2S people. Shortly after the election, we received a donation to our Kicked Out Fund, which supports our LGBTQ2S-specific services. The donation was given in honour of Mike Pence. As is our custom, we notified the honouree of the donation, and we took the opportunity to advocate for LGBTQ2S youth by circulating the letter as an open letter on social media and our website. Parts of the letter are excerpted here:

*Imagine for a moment how distracted your children were when they were hurt. Or when they were afraid. No doubt you and their mother reached out to comfort and love them in their time of distress so that they could confidently move forward. More importantly, though, imagine the foundation of love, safety, and health that you had **already** provided them that **already** enabled them to move through the world without ever having to wonder whether they would have a place to sleep or a meal. Without knowing your family personally, I suspect that you instilled in them the assurance that they could achieve whatever they set their minds to accomplish.*

*Not all citizens of this country are born into that foundation of family, or of faith—that foundation of not having to struggle just to meet basic needs of shelter, food, or clothing. Not all families are as welcoming of their LGBTQ2S children as you were of your own children. Young people who come to Ozone House are teenagers, who, in a country as magnificent as ours, **should** have the opportunity to build and dream about happy and productive futures from a safe and healthy foundation. Instead, these remarkable young people focus all their energy on mere survival; their future plans and dreams are sublimated to the imperatives of finding a safe place to sleep, or a meal to eat.*

Imagine, for a moment, that all young people in this country were provided the vital, life-giving support, safety, and affirmation that you never thought twice about providing for your children—the kind of foundation that your parents provided for you.

*Since [the 2016 U.S. presidential election on] November 8th, hate crimes have spiked precipitously, including against LGBTQ2S people. When people are forced to live and operate from a place of fear, they cannot contribute all their talent to this great country of ours. Imagine if you, as Vice President of the United States of America, could reinforce the dignity and worth of **all** people in this country. Imagine if you could assure **all** youth of their safety and capacities, the way you undoubtedly have reassured your own children for decades.*

*Against conventional wisdom and evidence to the contrary, I am taking a leap of faith to imagine you standing up and declaring that there is no room in this country for hatred, violence, bigotry, or denigrating people based on their identity. I said at the outset that this letter is not one of protest, but rather of invitation. I invite you to take a similar leap of faith and **protect all of your fellow citizens from the deleterious effects of hatred and bigotry with the same vigor you have protected your own family.***

Train Youth-Serving Professionals

Advocacy is an imperative component of our work, but we also hope to be effective ‘further upstream’ by training professionals who work with youth. We provide training on LGBTQ2S youth for educators, child welfare and juvenile justice workers, other social service providers such as the Girl Scouts and community centers, employers, child advocates, health care providers and funders of youth services. As meticulous as we are at Ozone House about creating a safe and affirming environment, we are but one small environment where LGBTQ2S youth gather. As such, we attempt to expand the places where LGBTQ2S youth can feel safe and affirmed, and where they can access important services, supports and opportunities.

Gather the Community to Support LGBTQ2S Youth

Each year we host a fundraiser specifically for our services for LGBTQ2S youth experiencing homelessness. In addition to raising money for the organization, we hold the fundraiser for this specific population to educate the community that LGBTQ2S youth have individual needs. We also partner with two other youth-serving organizations who support LGBTQ2S youth to host a performance piece in which LGBTQ2S artists tell their personal stories. These events have two additional and important benefits: they provide a platform and venue for advocates to draw energy from each other and gain momentum to make change in the community; and they provide a space where LGBTQ2S youth can witness many community members—primarily adults—come together to support and affirm them. These events are powerful opportunities to instill hope.

Emergency Response Services

Here are three vignettes describing youth who access the services of Ozone House, followed by a description of emergency supports we provide and how these meet specific needs, as well as how they could meet the needs of the youth highlighted in the vignettes:

Titus – It’s 10:00 p.m. and 15-year-old Titus has just used the word ‘pansexual’ to identify themselves to their parent. To many at the colleges and universities that dot the landscape of the Ann Arbor area, this term rolls off the tongue as easily as ‘fraternity’ or ‘sorority.’ But to Titus’ mother, who has spent a lifetime trying to protect Titus from the trauma of racism, the vagaries of the streets and the disorientation of housing instability, ‘pansexual’ does not roll off the tongue. Instead, what screeches off the tongue is: “Get out. Get out of my house with that language.”

Jamie – It’s 4:00 p.m., and although their paper is due tomorrow, 16-year-old Jamie has not started writing. The school social worker called Jamie’s parent again today, worried about Jamie, who seems withdrawn and depressed. Jamie is not talking, and that is fine with Jamie’s mother. Her husband has taunted Jamie multiple times for “acting like a damn faggot” and has hinted that Jamie is no longer welcome in the house. Jamie’s mother begs Jamie to take off the make-up and high heels before their stepfather gets home.

Maria – It’s 7:00 a.m., and Maria is hungry, tired and almost out of money. At age 20, Maria has nowhere to go, and hasn’t had a place to live since age 15 when she left her last foster home. She could go back to her grade 11 teacher’s house, but she doesn’t like her teacher “like that” anymore. Her teacher wants to marry Maria, now that it is legal for two women to get married, but Maria prefers the independence that sex work offers, even though it is dangerous.

To help youth like Titus, Jamie and Maria lead safe, healthy and productive lives, Ozone House provides a continuum of services, opportunities and supports, ranging from brief interactions on our 24-hour crisis line or Drop-In Center to permanent supportive housing. These services are designed so that LGBTQ2S youth can reach out or drop in at any time and engage with whichever service they want and need to access.

Street Outreach

Our Street Outreach team consists of peer outreach workers and their supervisor. The team engages street-involved youth through conversation, crisis intervention, referral and prevention information, and survival kit distribution. In addition to the peer outreach workers, we hire a group of *PrideZone* (LGBTQ2S Support Group) participants to reach out to LGBTQ2S youth and educate the community.

We hope Titus, Jamie and Maria were three of the 2,500 youth that our Outreach Workers meet in the community each year.

24-Hour Crisis Line

All calls are confidential, unless the caller is in danger of hurting themselves, or is being hurt by someone else. Crisis intervention counselling is also provided on a walk-in basis at both our main site and Drop-In Center. Youth are able to call the crisis line for one-time crisis intervention, multiple times for support, or to schedule more intensive services. All crisis counsellors are trained in the needs of LGBTQ2S youth.

Titus, Jamie and Maria could use our telephone crisis line at any time, day or night.

The Drop-In Center

Here we offer regular activities and groups, hot meals, showers, laundry facilities, job information, crisis intervention services, counselling and case management, and intakes—all free of charge and voluntary. Youth are safe, welcome and comfortable, and free to express their identities in an affirming environment. Youth refer frequently to the “Ozone responsibilities” of respect, love, and encouragement, which means they hold each other accountable for welcoming and affirming all youth. Rights and responsibilities are posted and often referenced. The Drop-in Center hosts several groups and activities that provide vital prevention and education information. Our leadership training and development activities attract and allow youth to showcase their talents in productive ways. We opened the Drop-in Center in 1999 specifically to provide a safe refuge for African-American, mixed-race and LGBTQ2S youth from the Ypsilanti area who have historically been disenfranchised from mainstream helping institutions.

The Drop-In Center might be an important place for Jamie to feel welcome and affirmed, as well as to find support from adults to manage the conflict at home.

Specialized Services for LGBTQ2S Youth

PrideZone, our LGBTQ2S Youth Support Group, was one of the first of its kind in Michigan, and has served as a model for other agencies interested in establishing similar services. Held primarily at our Drop-In Center, this group gives peer support to youth who are experiencing isolation, oppression, violence or uncertainty over their sexual orientation or gender identity.

All therapists and case managers are trained to recognize and respond to the unique needs of LGBTQ2S youth. Our family therapists are trained specifically in the methods designed by Caitlin Ryan of the *Family Acceptance Project*, San Francisco State University. The Family Acceptance Project™ is a research, intervention, education and policy initiative that works to prevent health and mental health risks for LGBTQ2S children and youth, including suicide, homelessness and HIV, in the context of their families, cultures and faith communities. We use a research-based, culturally grounded approach to help ethnically, socially and religiously diverse families support their LGBTQ2S children.

Titus and Jamie might benefit from *PrideZone*, as well as from family therapy. Ozone House staff could help them navigate broaching the topic with their parents or guardians. Maria is also welcome at *PrideZone*, but her stated priorities are housing and income.

Emergency Housing for Youth Experiencing Homelessness

Emergency housing is provided through a contracted room with a kitchenette at a local hotel. Youth may stay in emergency housing for up to 2 weeks. Emergency housing is for youth who lack a safe housing alternative and for whom the adult homeless shelter would be too dangerous. The goal of emergency shelter is to provide safe housing while the youth works toward transitional or independent living, or while they explore other housing options. Case managers provide daily support.

This is an option for Maria. However, according to the agreement with the hotel, she would not be permitted to have guests during her stay, and so we could predict for her that this might be a difficult expectation for her to follow.

Rapid Rehousing

Instead of offering youth experiencing homelessness a bed in a homeless shelter, we offer short-term rental assistance so they can move into an apartment quickly. That way, they get a home of their own and skip a demoralizing and sometimes unsafe homeless shelter situation.

This project would be important for Maria, because it could offer her the independence she is used to, as well as the safety and stability she needs.

Temporary Shelter (Youth 10–17)

To ensure the immediate safety of youth who are experiencing or are at risk of homelessness, Ozone House provides temporary shelter, food and clothing. Ozone House has a six-bed shelter that is licensed by the state of Michigan. Youth stay for up to 21 days, receive three meals per day and are supervised by at least one paid trained adult staff person at all times. The overall goal of the shelter is to provide these youth with a safe and stable environment in which they can work with their families to reduce conflict and improve communication and functioning, so they can safely return home. In cases where a youth cannot safely return home, Ozone House works to find safe housing. During their shelter stay, youth participate in daily therapy sessions, daily therapy groups, daily life skills groups, twice-weekly family therapy, academic tutoring and educational support, intensive case management and crisis stabilization, daily youth development and recreational activities, physical activities, and supervised constructive and leisure time. Therapy continues when youth return home.

Both Titus and Jamie could benefit from shelter and the family therapy that is part of the program. In shelter, they would also have the chance to develop peer relationships and meet other youth in similar situations. Ozone House is often the first place where youths' identities are affirmed and where they can access accurate information and support.

Transportation

All our buildings are located within one block of a bus stop and less than a mile from the bus stations, including the Greyhound station. When youth are not familiar with public transportation, we provide access to transportation for youth in emergency situations. We have a contract with the local taxi company, and we have bus tokens at all sites for clients to use. Case managers transport clients to appointments.

No doubt Maria could use help with transportation, given her financial situation.

Youth Development Opportunities

One of our primary objectives is to offer youth development opportunities in the form of a participatory service delivery process and by involving youth in agency leadership and service provision. Through seats on our Board of Directors and on our youth advisory council, called *SpeakOut*, as well as through participation in program planning and full partnership and control of their own service planning, Ozone House involves youth in every aspect of the agency. *Youth Making an Impact* is a service-learning program that provides many youth with their first opportunity to give back and to be seen as leaders who can make a positive contribution to their community.

These opportunities could benefit all three youth—Titus, Jamie and Maria—by offering a platform where they can build their skills and identify as leaders. However, we would want to help alleviate their initial crises first.

Therapy

Youth experiencing homelessness may have come from chaotic and unstable home environments characterized by family conflict, violence, poverty, and/or mental illness. Simply to survive, youth experiencing homelessness may have developed creative coping skills that are no longer necessary or effective in a safe and stable setting. Such stressors and ineffective coping skills render therapy an essential component in helping them develop the emotional capacities needed to become healthy and self-sufficient. Ozone House therapists employ a strengths-based and trauma-informed model of therapy that encourages youth to

deal with past trauma and issues of grief and loss; enhance self-esteem and self-concept; develop healthy coping skills; and create positive relationships with peers and adults.

All three youth would benefit from therapy. Maria would probably be the least receptive to it until she can find safe and stable housing. Her history of abandonment, abuse and broken attachments would likely render her naturally skeptical of being vulnerable with a therapist.

Transitional Housing

A seven-bed program for youth experiencing homelessness between the ages of 16 and 20, this program provides youth with a safe place to live for up to 18 months while they work toward self-sufficiency. The program helps youth gain emotional stability, develop life skills, obtain employment and look for permanent housing. Residents participate in case management and weekly skills workshops, and they find and maintain employment or education or both, remain substance free, complete daily and weekly house chores, and follow through with mental health and substance-use disorder treatment when appropriate. Each resident works intensively with a case manager to reach their goals. Each youth submits a portion of their earnings to Ozone House, which we keep in a savings account and return to the youth to help pay for permanent housing, transportation and household items as they transition to independent living.

Transitional housing is an option for Maria, though we suspect that sharing a home with others and complying with curfews would curtail Maria's independence to an undesirable level. Titus could benefit from transitional housing, and could still work with family therapists to maintain and improve family relationships.

Case Management

All clients of Ozone House receive case management services. The duration and frequency of this service depends on the needs of each youth, and can range from multiple hours daily, to one hour every other week, to any frequency in between. Case managers work with youth to create, monitor and reevaluate goals, and provide needed support and assistance so that clients may achieve their stated goals. Case management generally includes case coordination, referral, advocacy and providing such concrete services as meals, transportation, education and employment support, and housing. The case manager's role is not to solve the client's difficulties for them, but to use their skills and knowledge to increase the client's access to a comprehensive array of services, all in the context of a respectful and affirming relationship.

With case management services, the focus is typically on removing external barriers to safety, health and productivity. Maria is most in need of case management to secure housing, education or employment or both, income, health care and other ancillary services.

Educational Assistance and Advocacy

Educational advocacy and formal tutoring are provided through our *Education Project for Homeless Youth*, the local McKinney-Vento School liaison. Supports include tutoring, connection to special education services and advocacy around discipline and school climate, especially for LGBTQ2S students. One young person who needed to enroll in a Generalized Education Development (GED) program at a local high school had difficulty from the outset, because the person doing the enrolment stated the youth was not a “good fit.” Our caseworker initially hoped the issue was related to test scores, but quickly realized the enrolment officer was discriminating based on perceived gender identity. The problem was exacerbated because the young person used she/her pronouns, but had recently been released from a juvenile correctional facility that was literally called a “boys training school.” Our caseworker supported the young person to talk with the enrolment officer, who said the school was a “traditional” setting, and because the youth was “alternative” she should not enrol. The youth was angry and discouraged, and considered leaving the program. Our caseworker approached the actual GED teacher to determine if the entire program was unsafe, or if the enrolment officer was acting alone. The caseworker learned the enrolment officer had developed a reputation for discriminatory behaviour. After meeting with the teacher, the caseworker was confident this youth’s intersectional identities as an LGBTQ2S youth of colour would be affirmed and respected in the classroom. However, the caseworker did not stop there. She supported the young person to meet with the teacher so the young person could decide for herself. The youth-teacher relationship grew over time, and the young person flourished in the classroom. While we would have preferred that the entire school environment was as welcoming as that teacher’s classroom, we know there are limited resources and the young person did not have a choice about where to go for the education she needed. As such, the caseworker did everything possible to advocate for the youth’s needs, to support her to advocate for herself, and to make her own decision about how to proceed. The young person did earn her GED.

As promising as individual situations like this can be—successfully advocating for youth and helping broker relationships like the teacher-youth relationship described above have become more frequent—this type of individual empathy and relationship-building does

not have much effect on the overall climate in the schools. We have not solved the problem of negative school climates for LGBTQ2S youth. Yet.

We also have an endowed fund to help youth pursue their educational goals by financing expenses that are not typically covered by financial aid and scholarships—books, supplies, technology, extra-curricular fees, housing deposits and others.

Titus and Jamie are in high school and may benefit from educational assistance. Though Ozone House recognizes the primacy of education in a youth's development, educational assistance may not be feasible until Titus and Jamie feel safe in housing.

Employment Training

Our employment training program, *WorkZone*, provides soft skills training, on-the-job coaching and paid internships, so youth can build their resumes, gain work experience, secure professional references and earn money. Many LGBTQ2S youth have experienced discrimination in hiring, and this program helps mitigate this problem. We use a mock interview format during training, and employers participate in 'speed-dating-style' interviews with *WorkZone* youth. This process helps mitigate youths' anxiety, and helps employers see these youth first and foremost as workers. When LGBTQ2S youth of colour go on their own for job interviews, employers often make an initial assessment of youth based on their perceptions of the youth's social identities, as opposed to their employability. However, when employers meet youth in the *WorkZone* program, they are primed to meet young people who are defined by their employment-seeking status, not their social identities. Employers in the *WorkZone* program participate in training that includes content about gender identity, gender expression and sexual orientation, and we screen out employers who discriminate overtly. Our job coach also goes to all employment sites as well, and is available by cell phone to all employers and youth if there are conflicts or other employment concerns. As with the schools, we have not yet solved the discrimination in hiring or employment practices, but the *WorkZone* program helps effect positive change in individual situations.

Maria, not having held legal employment, could benefit from this low-barrier way to gain work experience and confidence.

Health and Dental Care

Many youth experiencing homelessness place a low priority on health needs, due to their current living situation, lack of resources or fear of health care providers. Ozone House has found that having free care on site addresses all these issues. Our partner, the Corner Health Center, provides a Nurse Practitioner for Ozone House's clinic, and she can follow up with youth at the Corner Health Center. At present, we link with pro-bono dentists and surgeons who openly welcome LGBTQ2S patients.

Maria is likely the most in need of health care. Since Titus and Jamie are in school, we could presume they have had a physical in the past year, though they would both benefit from a health care provider with expertise and experience in LGBTQ2S needs.

Permanent Supportive Housing

To help youth experiencing homelessness with disabilities to obtain and maintain safe, stable housing, this program offers ongoing case management and counselling services, paired with rent subsidies. Support ranges from daily home visits and check-ins to monthly skills training. In addition to frequent visits, Ozone House staff are on call 24 hours a day for emergency or crisis situations that may arise for youth in placement.

Recommendations and Future Direction

Because youth do not live exclusively inside the walls of safe and affirming programs, programs should serve as models for how to position LGBTQ2S youth for success. While we track many outcomes, such as safe relationships, permanent housing, access to supports, and employment and education, our greatest success is realized when youth who pass through our environment—whether for two minutes or two years—experience equity and safety to such an extent that they are not satisfied in any other environment that is not as safe, inclusive or equitable. Most LGBTQ2S youth do not 'stumble' on those kinds of environments; instead, they participate in creating safety and equity. Programs are most successful when they continually take stock of their policies, environments and services by engaging in honest self-assessments and collecting feedback from youth. Any gaps between an organization's current state and best practices of safety, inclusion and equity for LGBTQ2S youth can then be addressed and ameliorated.

Organizations can amplify the voices of LGBTQ2S youth in their communities by advocating and educating the community. We have found two methods particularly effective in educating the community. First, of course, the authentic voices of youth themselves are most effective for changing hearts and minds. However, securing informed consent can be complex. It is never our practice to ask a youth in crisis to tell their stories to the community, because ameliorating their current situation is our highest responsibility. We sometimes approach youth to speak out once they experience more stability and safety, but only when their therapist or case manager determines they have not felt pressured to do so. Next, we talk with the youth at length about informed consent. Many give consent immediately for pictures, videos or speaking engagements. In the past, we erred on the side of not asking youth to give us pictures or videos for educational or fundraising purposes, but over time many youth helped us understand they wanted the opportunity to give back. However, they often do not have a full understanding of what it means to lose control of their likeness or story. The loss of agency for youth who have experienced trauma and for youth who are vulnerable to violence, bigotry or hatred because of their identities can be traumatizing in and of itself. We actively work to ensure youth have as much personal agency as possible. As often happens, if the audience draws its own conclusions about a youth in a photo or video, there is not much that youth can do to regain control of their story. Images or media shared or posted on email, websites or social media can be accessible indefinitely. A young person may be willing to give consent today, but it is hard for them to know how they will experience having personal information available to the public in 10 years. Informed consent is therefore a process, not an event, and we frequently check in with youth about their comfort level over time. All the same, serving as an authentic youth voice can provide a strong sense of both agency and mastery for a young person, and their voices can be a powerful method to educate and advocate.

The other method for education and advocacy that we have found to be extremely powerful is using simulations. We provide scenarios for community members to ‘inhabit,’ and then we lead them through a series of decisions and systems to navigate with limited resources. Audiences have consistently described experiencing a visceral sense of understanding of and empathy for youth experiencing trauma, bigotry and homelessness because of simulations. Every time we use simulations, we witness participants who do not share the same social identities as the youth we serve experience an aha moment in which they—often for the first time—understand how inequitable systems have impacted youth by creating barriers and removing choice from them. This shift in thinking is powerful: inevitably audience members shift the focus of the problem from the individual to the

systems that individuals have to navigate. In other words, the participants stop blaming the youth for their circumstances. These simulations are especially helpful for building empathy in teachers and other youth-serving providers. As with the complexity of obtaining informed consent, there are precautions to consider when using simulations. First, there is a risk that participants will reinforce their existing negative prejudices by projecting their own subjective impressions about identities of youth onto their scenarios. This can be remedied by careful and active facilitation. Second, there is a risk that participants will over-identify with their scenarios and later mistake their subjective experience of the simulation for lived experience. This, too, can be mitigated by facilitation and follow up.

At Ozone House, we have learned that we have some gaps between our current situation and best practices, and our strategic plan addresses these gaps. First, though our washrooms are private, we need to create individual sleeping rooms for all our residential programs. Individual sleeping rooms will provide more options for youth who have experienced complex trauma, as well as for transgender and gender-expansive youth. Second, recognizing that youth communicate increasingly by text messaging and social media applications, we will expand our crisis line to include opportunities for youth in crisis to reach us by text or online. Third, we will seek more transitional housing and housing subsidies to house more youth. Finally, research on adolescent brain development and social-emotional developmental milestones for LGBTQ2S youth has convincingly shown that youth as a life stage persists into the mid-20s. There are scant services for youth older than 21, and we plan to offer services and supports for youth up to age 25.

Reference

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6 BLACK QUEER YOUTH, UNSTABLE HOUSING AND HOMELESSNESS: UNDERSTANDING THE IMPACT OF FAMILY CONFLICT, SCHOOL AND COMMUNITY-BASED VIOLENCE ON RACIALIZED LGBTQ2S YOUTH

Lance T. McCready

Introduction

LGBTQ2S youth face numerous challenges that make them particularly vulnerable to homelessness, such as:

- Alienation from families, school and peers. A national study of LGBT students in the United States found 61% and 38% felt unsafe at school due to their sexual orientation and gender presentation, respectively. Students experiencing victimization also exhibited more risky health behaviours, such as smoking, drug and alcohol use, unsafe sex, and suicide attempts (Kosciw, Greytak, Palmer, & Boesen, 2014).
- Higher rates of physical, sexual and substance abuse from family members, as compared to heterosexual youth (Cochran, Stewart, Ginzler, & Cauce, 2002).
- Psychological challenges and sexual risk-taking, with concordant health problems.

Research has also shown LGBTQ2S youth experiencing homelessness experience higher rates of violence, HIV infection, substance abuse, suicide risk, and mental illness than heterosexual and cisgender youth experiencing homelessness (Cochran et al., 2002; Kruks, 1991). Additionally, anti-gay and anti-transgender stigma and internalized homophobia and transphobia can contribute to LGBTQ2S youth homelessness and exacerbate the risks queer and transgender youth face when experiencing homelessness (Cochran et al., 2002; Kruks, 1991).

Recently, while distributing a paper-and-pencil evaluation survey to participants in a drop-in program serving LGBTQ2S youth experiencing homelessness in the Greater Toronto Area, I was struck by the seeming difference between White and non-White youth experiencing homelessness. For example, White youth discussed living on the streets of Toronto, while racialized youth I talked to never mentioned living on the streets. Some of the drop-in program staff I spoke with prior to distributing the survey wondered whether as many racialized LGBTQ2S youth as White youth experienced homelessness. This led me to think more deeply about the ways queer youth of colour¹ experience homelessness, and this chapter is the documentation of these thought processes.

¹ Queer of color and queer youth of color are terms used primarily in the United States that describe LGBTQ2S people who are racialized or non-White. The Canadian spelling of 'colour' is used when these terms are used in a general sense in this chapter.

This chapter features the voices of gay, bisexual and transgender young Black men who are the subjects of much of my research and scholarly writing. Their stories offer important insights into the challenges facing LGBTQ2S youth who are unstably housed and experiencing homelessness, and the strengths and limitations of LGBTQ2S programs and services in meeting the needs of racialized youth. The first section of the chapter describes the conceptual framework I used to understand the lives of racialized LGBTQ2S youth: *queer of color analysis* (QOCA). The second section discusses academic literature on LGBTQ2S and racialized youth experiencing homelessness, which describes the prevalence of racialized youth experiencing homelessness and the general circumstances that lead to youth homelessness. The third section continues the discussion of academic research; however, it focuses on qualitative inquiry, including my study of the educational trajectories of young Black men, some of whom identify as gay, bisexual and/or transgender. This section contains important insights on the intersections of racial identity and homeless identity for racialized youth as compared with White youth. The concluding section discusses implications of research on the lives of racialized LGBTQ2S youth for LGBTQ2S youth community programs and services, and specifically on how these can better meet the needs of queer and trans youth of colour.

Queer of Color Analysis

A burgeoning body of work has attempted to disrupt the stigmatization of queers of colour by investigating their experiences of multiple forms of oppression and agency in responding to their marginalization across kindergarten to grade 12, and in postsecondary, alternative and community settings (Brockenbrough, 2013). This scholarship uses queer of colour epistemologies, such as ways of knowing that are rooted in queer of colour political struggles, cultural traditions and lived experiences, as lenses through which knowledge is produced in broadly defined education and youth studies (Brockenbrough, 2013). This scholarship also builds on scholarship that goes beyond education and youth studies, centring queer of colour epistemologies (Aguilar-San Juan, 1998; Decena, 2011, Ferguson, 2004; Gopinath, 2005; Manalansan, 2003; Moraga & Anzaldúa, 1983; Rodriguez, 2003). This body of scholarship is most often referred to as *queer of color critique* (QOCC).

The tensions between hegemony and resistance discussed in QOCC scholarship mirrors the relationship between intellectual work and lived experience in Indigenous studies (L. T. Smith, 1999), Black feminism (B. Smith, 1983), and other academic discourses grounded in the struggles of historically oppressed peoples. QOCC challenges dominant

scholarly and cultural narratives on power, identity and belonging by bringing queer of colour ontologies and epistemologies from the margins to the centre, and by making them the source and site of anti-oppressive knowledge production (Brockenbrough, 2013). QOCC names and puts into context the marginalization of queers of colour, and differentiates strategies of resistance to account for the shifting exigencies of the lives of queers of colour (McCready, 2013). This dual concern for the sociohistorical construction of queer of colour marginalization and the resistance strategies employed by queers of colour makes QOCC a compelling heuristic for investigating queer of colour encounters with and resistance to multiple systems of power in urban contexts (Brockenbrough, 2013; McCready, 2013). In this chapter, I use QOCC to put into context the academic literature on youth homelessness and the narratives of racialized LGBTQ2S youth who have experienced homelessness and housing instability.

Academic Literature on Racialized LGBTQ2S Youth

What do we know from Surveys?

Some surveys of youth experiencing homelessness in the United States and Canada contain large samples of racialized LGBTQ2S youth, and thus can be used to discern how their experiences may differ from those of White LGBTQ2S youth. For example, according to a Congressional Research Center survey of youth homelessness in the United States, 32% of youth experiencing homelessness identify as Black (more than double the proportion of Black youth in the total population), 51% identify as White, 2% are American Indian or Alaska Native, 2% are Asian, Native Hawaiian or Pacific Islander and 4% are multiracial (cited in Diaz, 2013). However, survey research about race and youth experiencing homelessness can also be confounding or contradictory. For example, some studies indicate that youth experiencing homelessness reflect the racial makeup of their surrounding area, while other studies indicate people of colour, regardless of the area, are disproportionately represented (Diaz, 2013).

One of the reasons survey analyses may offer confounding findings related to the numbers of racialized youth who experience homelessness is that racialized youth, in order to avoid further stigmatization at the intersection of racial and housing discrimination, may avoid either identifying as homeless or engaging in activities that are typically associated with homelessness (e.g., panhandling or holding a sign that identifies them as homeless). Shahera Hyatt, project director for the California Homeless Youth Project, explains that,

“One of the challenges that researchers have had, is that a lot of times, even if youth of color are identifying as homeless, they aren’t presenting as homeless. That might be why the numbers aren’t catching them. They’re presenting like other young teenagers, but I think people are expecting traveler kid with a backpack and dreadlocks” (cited in Diaz, 2013). I explore the idea of racialized LGBTQ2S youth identifying as homeless and embodying that identity differently than White youth in the qualitative research section of this chapter.

Racialized LGBTQ2S youth face additional challenges related to racism and stigma in health, safety and human service systems. The California Homeless Youth Project surveyed 54 young people experiencing homelessness and found that 61% of Black youth were in the foster care system compared to 23% of White youth. Additionally, Black youth who participated in this survey reported experiencing homelessness because of poverty-related housing instability and inadequate social services, as compared to White youth, who more frequently reported independently leaving home because of family problems. This may partially explain why Black youth who reported experiencing homelessness were more likely to be involved in sex work and survival sex as a way to mitigate the effects of poverty, as compared to White youth (cited in Diaz, 2013). The findings from this survey also showed that it is common for racialized youth suspected of being sex workers to be approached by police when they have broken no laws.

What do we know from Ethnographies and Interviews?

Qualitative research offers further insights into the ways queer youth of colour experience homelessness as compared to White youth (Castellanos, 2015; Hickler & Auerswald, 2009). Hickler and Auerswald’s (2009) work, in particular, offers intriguing findings that explain why some racialized LGBTQ2S youth may embody a homeless identity differently than White youth do. The authors conducted participant observation and ethnographic interviews with 54 youth primarily recruited from street venues in San Francisco. They found that most White youth reported sleeping outside, but the housing status of African American youth was different. Because they often moved from place to place, it was common for them to say they had stayed with their parents or other family on recent nights; however, on further questioning, it was determined that most did not have a consistent place to sleep.

Additionally, both African American and White youth emphasized the importance of ‘hustling’ or ‘having a good game’ to survive on the streets. Both Black and White youth sold drugs, particularly marijuana; however, there were differences in the youths’ survival strategies. Street survival strategies employed by White youth consisted of a wider range of

strategies for making money, getting food, or acquiring drugs and alcohol. These included panhandling and asking for leftovers on a busy commercial street, accessing services available in the area, selling crafts, selling drugs, survival sex, ‘boosting’ (stealing), ‘dumpster diving’ (scavenging garbage containers for food or items to re-sell), and ‘ground scoring’ (finding change or other valuables on the streets). Strategies for dealing with a night without shelter included staying up all night, walking the streets (sometimes with the help of drugs), riding public transportation, napping at fast food restaurants, finding sexual partners who would provide them with shelter, and hustling enough cash to rent a room in a single-room occupancy (Hickler & Auerswald, 2009).

Another interesting difference Hickler and Auerswald (2009) found was how youth labelled their housing situation. Though White youth recognized that homelessness is stigmatized by society at large, they did not necessarily reject the label ‘homeless.’ In fact, many youth wore it as a badge of honour, even though they were not satisfied with their current housing situation. African American youth had a dramatically different set of priorities regarding self-presentation. Though they met the inclusion criteria for the study, they did not identify as homeless, seeing homelessness as shameful and something to be hidden at all costs. African American youth in the study not only rejected the homeless identity, they commonly asserted the importance of looking financially prosperous. Due to the stigma African American youth associated with the word ‘homeless,’ Hickler and Auerswald (2009) instructed their research assistants to remove it from the study’s informed consent form and screening instruments. The term ‘unstable housing,’ was used instead, and seemed to resonate more positively with African American youth.

In my own study of the educational trajectories of young Black men in Toronto and Montreal, the young men I interviewed and with whom I conducted focus groups did not mention the word ‘homeless,’ but described several family and school incidents that served as precursors to their experiencing unstable housing. For example, Kat², a multigenerational Canadian who identified as a biracial and gay cisgender male, said:

I actually ran away in grade 3 from my school. I just told my mom that we were having a naptime and whatever. I packed a blanket, a bunch of food because we were having a picnic also. And mom was like “oh, okay.” She knew the school and they knew her, so it wasn’t a problem, she’d just go with

² I used pseudonyms for the young men I spoke with to protect their identities.

the flow. And I took one of my best friends, Ingus. He was going through some home family problems and he was the only person who could relate to my struggles, kind of, because he was having home problems. I was having the world problems. We were both getting picked on and so we ran away for, like, two and a half hours.

This quote suggests that as early as grade 3, Kat was thinking about leaving home because of the world of problems he was experiencing at home, and later at school:

Grade 9, I was, like, 'whatever.' I just didn't respond. People would push me, shove me. They'd try me in numerous ways. Even when I went to summer school, a group of 17 kids from the middle school, middle school while I was in high school, decided to try me. And I know they had bats because I got hit in the back of my left calf...

Most of the young men I interviewed experienced violence and marginalization in school, due to conflicts with teachers and peers over their racial identity or being gender-nonconforming, or both. Charles, a second-generation young transgender man of African and Caribbean descent, recounted how much he hated school:

I hated the other kids. I hated the fact that the teachers didn't care whether or not I learned. I hated being in special education. [...]

I hated being at school. I hated being Black. I hated being me. I hated being African. I learned to hate my mother. I hated my dad. I just hated.

Later in the interview, Charles discussed how the marginalization he experienced in school and his parents' inability to intervene in the multiple prongs of violence he experienced as a racialized, gender-nonconforming young person led him to leave home and enter a prolonged period of unstable housing:

To a lot of people, when they see me, they probably think I have everything. But in reality, I'm probably in a deeper recession than most people are. It's just what, what keeps me every day is God and my faith and everything will work itself out somehow, some way. That's all I can go on. There are days when I don't know how I'm gonna eat, but that's not new to me. I've dealt with

that before. I've been homeless, I've had no food, I've had nowhere to sleep. I've slept in the streets, I've slept in bus shelters, stairwells, whatever. So that doesn't really bother me. I'm used to walking around for hours delirious from not eating because I haven't eaten in days and I have no money in my pocket and nothing in my fridge. I'm used to that. I honestly don't even notice a lot anymore because I'm just, like, I've been through it. It could be worse.

Interestingly, just as Hickler and Auerswald (2009) witnessed in their study, Charles never used the word 'homeless' to describe his experiences when he had nowhere to sleep and slept on the streets. Hickler and Auerswald's (2009) findings and my own research raise important questions about the ways queer youth of colour, who experience a particular form of marginalization and discrimination at the intersection of race, class, gender and sexual identity, make sense of, label and subsequently identify with the word 'homeless'. If queer youth of colour experiencing homelessness are reluctant to label their experiences as such, will they see themselves as the target of services for homeless youth? Though rejecting a homeless identity may lead to being overlooked for services, can it also be interpreted as a sign of resilience, a rejection of the objectification and negative self-image that being a person experiencing homelessness can bring?

Another situation that emerged in my educational trajectories study that illustrates the complicated ways queer youth of colour identify as homeless is when biological parents who were born in another country decided to return 'back home' to their country of origin, leaving the young men I spoke to with a difficult decision: return with their parents, stay with relatives or other caregivers in the family, or live precariously, independent from parents or caregivers. The parents' decision to undertake reverse migration was often precipitated by family conflicts related to race, ethnicity and gender identity. For example, Randall, a second-generation cisgender gay man of Caribbean descent, described the moment when his mother tried to move the family to the US to give him another, more pro-Black, heteronormative perspective on his identity:

She [mother] found out that I was gay and she sort of like went crazy or something, and she wanted to move to the States...and if one person moves, everybody has to. (Laughs) That the way my family operates. (Laughs) [...] I decided to stay and tell Mom, "I'm not going to freakin' the States. I have a job here at least, right. I've already left school. At least I have a job here, I'm not going to the States to start all over." So, I stayed here. She was in

the States for like about eight months. I stayed here and I rented a room and then stayed with my aunt. And she moved back, and then we all moved back together and it was always the same thing, right.

What I find both compelling and instructive, using QOCC as a heuristic for investigating queer of colour encounters with and resistance to multiple systems of power in urban contexts, are the ways Randall's narrative illustrate how queer youth of colour encounter multiple forms of oppression in both school and family, and the ways these youth resist such marginalization, which can lead to experiencing unstable housing. School-based Gay-Straight Alliances (GSAs) may have difficulty addressing these complexities, in part because teachers who serve as advisors to those groups view the needs of queer youth of colour, stemming from the sociocultural contexts of their lives, as being beyond the mechanisms of social support the groups regularly provide. Like Charles, Randall never uses the word 'homeless' to describe his experiences of unstable housing while his mother lived in the US. I speculate that Randall does not make sense of the situation that led to his housing instability as being associated with common representations of youth homelessness that revolve around living on the street. Both Charles' and Randall's experiences raise important questions about the strengths and limitations of LGBTQ2S community resources and spaces for youth experiencing homelessness, and how these are addressing the immediate needs and future aspirations of racialized LGBTQ2S youth, who may not label their experiences of housing instability as homelessness.

Conclusion

Academic literature on youth homelessness and QOCC narratives of gay and bisexual young Black men in my study of educational trajectories suggest the ways racialized LGBTQ2S youth describe the circumstances that lead to their homelessness, and the ways they experience and label these circumstances are qualitatively different from how White LGBTQ2S youth do. Access to supportive social networks through LGBTQ2S community resources and spaces could help racialized LGBTQ2S youth form meaningful relationships that could mediate or reduce the structural conditions leading to their housing vulnerability, but can these organizations address the complex intersectionalities of their identities and interactions with multiple health, human service and safety systems? For example, the youth I interviewed for the educational trajectories study often faced the dual dilemma of homophobia in their ethnic communities and racism in White gay communities. Many

describe demands from each community that they give primacy to one identity over the other. These factors contribute to their seeking supportive spaces that recognize the experience of living simultaneously as sexual and racial minorities. However, because young people experiencing homelessness have social identities that stigmatize them in dominant cultures, being young, urban, a member of a racial-ethnic minority, and poor, those who are racialized may continue to be stigmatized in LGBTQ2S community spaces.

Reck (2009) explored the difficulties LGBTQ2S youth of colour experiencing homelessness experience while navigating the Castro district in San Francisco, a global icon of LGBTQ2S rights and safety. In the Castro, LGBTQ2S youth of colour experiencing homelessness and youth who were unstably housed experienced acceptance of their sexual orientation and gender identity. But by virtue of being non-White, they experienced invisibility, police and community harassment, sexualization and commodification. Adult White men's dominance enabled them to be 'normal' and move freely within the Castro, while youth, trans people, and people of colour were shown they did not belong, a message affirmed by the lack of visible supports for their identities. Their experience of homelessness also placed them in a lower-status position than that of White gay men.

Overall, because LGBTQ2S youth experiencing homelessness and unstable housing are not all the same, it seems that a one-size-fits-all model for services is doomed to fail. The narratives of racialized LGBTQ2S youth presented in this chapter show that these youth define their needs differently as compared to White LGBTQ2S youth. Service providers need to understand how youth view themselves, and the stigma associated with certain labels and practices, so that services can be devised in which youth recognize themselves as the target population. Some LGBTQ2S youth who are experiencing housing instability may reject the 'homeless' label, but still need services. In these situations, there may be additional opportunities for intervention to help change the life trajectories of racialized LGBTQ2S youth who are unstably housed, including more tailored approaches to interventions specific to the needs of distinct populations of youth experiencing homelessness.

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6.1 THE BLACK QUEER YOUTH INITIATIVE: CHALLENGING RACISM, STIGMA & EXCLUSION

Adam Benn

Introduction

The Black Queer Youth (BQY) Initiative is a group for Black, African, Caribbean and multiracial youth, aged 29 and under, who also identify as LGBTQ2S. For over 16 years, BQY has been one of the only spaces exclusively for youth who are both Black and queer-identified in Canada, and has grown from a monthly group facilitated by Black queer community volunteers into a fully-fledged project of the Supporting Our Youth Program at the Sherbourne Health Centre in downtown Toronto, Ontario. Over these years, BQY youth and facilitators have devised a safe space for their community, where Black queer identities are celebrated and honoured while simultaneously facing the challenges of racism, stigma and exclusion—issues that have plagued the program’s participants and other Black queer youth from before BQY’s inception until today. This case study provides information on the BQY Initiative.¹

History: The Emergence of Racialized LGBTQ2S Organizations in Toronto

In 1985, readers of the magazine *The Body Politic*, at the time Canada’s oldest—and one of North America’s most prominent—lesbian and gay publications, found “a lengthy article exploring highly charged questions of racial and sexual politics” (Churchill, 2003, p. 114). The debate was sparked by a personal advertisement submitted by a gay White man requesting “a young well built BM [Black man] for houseboy” (Body Politic Collective, 1985). With these 31 words, Toronto’s LGBTQ community was embroiled in a debate around race, sexuality and identity.

¹ The author of this case study would like to give a special thanks to Elisa Hatton, who documented much of the early history of the group, and to King, Ki, Verlia, MJ, Keith, Sapphire, Datejje, River, Anaya and Jason - past and present BQY facilitators.

In the early days of the LGBTQ2S rights movement in Toronto, gay organizations grappled with shifting conceptual approaches to public visibility, “gay identity” and the creation of a unified LGBTQ2S community. Nash (2006) outlines this history, arguing that since the late 1960s, Toronto’s gay and lesbian population has been given “an increasingly more tolerant reception,” with the gay village at the intersection of Church and Wellesley in downtown Toronto evolving as “its cultural and social centre” (Nash, 2006, p. 2). However, behind the tolerance exists “a highly contested and much critiqued urban landscape— a location deeply scarred by myriad battles fought over the social, political and cultural meanings attributed to the existence of individuals interested in same-sex relationships” (Nash, 2006, p. 2).

It can be argued that the early Toronto LGBTQ movement privileged the issues and needs of White, middle-class gay men, and excluded lesbians, trans, gender-expansive and two-spirit individuals, and communities of colour. The emerging gay neighbourhood at Church and Wellesley was largely dominated by gay men in the 1970s, and gay organizations were run by gay men, focusing primarily on issues that concerned gay men, such as the policing of gay men’s spaces and the need for better-quality gay-friendly businesses in the city (Nash, 2005). However, mainstream messaging of the gay movement’s activities presented gay activists as speaking on behalf of both gays and lesbians. This is one of the earliest examples of marginalization and exclusion in the history of Toronto’s LGBTQ2S community, with the result being “the formation and maintenance of a gay district and a gay movement in Toronto publicly associated with both gays and lesbians, even though largely White, middle-class and gay interests dominated both” (Nash, 2005, p. 116).

Similarly, gay organizations and the growing LGBTQ2S community constructed “gay identity” and the “gay community” around White, middle-class and gay interests and ideologies. Nash (2005) highlights this, asserting that “social categories of identity that structure social organization and social relations, such as ‘gay’ or ‘black,’ are neither fixed nor inherent” (Nash, 2005, p. 117). At any given time, there are a number of competing discourses in circulation, but “one particular meaning about the nature and characteristic of a subject or an identity comes to dominate within relations of power” (Nash, 2005, p. 117).

In line with Canadian notions of “colour-blindness” and liberalist ideas that do not acknowledge race, and dismiss its impact, gay organizations formulated constructions of “gay identity” and “gay community” that were raceless and mainstream. However, in Canada, “racist ideology” has become so deeply rooted (Brigham, 2013), though often ignored, that Canadian society is “racialized;” that is, racism “has become a taken-for-

granted way of doing things” and “whiteness” has been positioned as the norm (Brigham, 2013, p. 121). Toronto-based gay liberation movements adopted political approaches that were “race-blind” and “gay-centric” (Catungal, 2013), which excluded racialized LGBTQ2S individuals from constructions of the gay community. The association of “gay identity” and “gay community” with White, middle-class and gay identities are also the root of deeply held assumptions of the Toronto Church-Wellesley village and other gay spaces: social spaces that normalize and naturalize the Whiteness of the community, while excluding racialized LGBTQ2S individuals.

Debates such as the one that emerged from the advertisement posted in *The Body Politic* reflected the tensions within the LGBTQ2S community when it came to looking at race within that community. Richard Fung (1985), a Toronto writer, artist and videographer connected with the Gay Asians of Toronto, in responding to *The Body Politic* debate, argued that a previously published statement that claimed “we as lesbians and gays understand homophobia, but we don’t understand racism,” failed to consider the experience of racialized LGBTQ2S individuals who experienced both homophobia and racism every day; and underscored the “ontological Whiteness of the imagined lesbian and gay communities” (as cited in Churchill, 2003).

Responding to this failure of the mainstream gay movement to include them and their concerns, “lesbian[s] and gay men of colour began to organize as a way of disrupting the ubiquitous whiteness of queer public culture” (Churchill, 2003, p. 125). During the 1980s, the political landscape of lesbian and gay organizing shifted in response to racism within the community, and organizations such as the Asian Community AIDS Services (ACAS), the Alliance for South Asian AIDS Prevention (ASAAP) and the Black Coalition for AIDS Prevention (Black CAP) were born. Lesbians and gay men of colour established organizations that “explicitly linked issues of race, ethnic difference, and sexuality,” and were part of a “a larger transnational political, intellectual and literary movement that linked issues of race, sexuality, belonging and class with questions of identity, citizenship and power” (Churchill, 2003, p. 124).

A Community Responds: LGBTQ2S Youth Homelessness in Toronto and the Birth of Supporting Our Youth

From 1969 to the early 2000s, gay men and lesbians made extraordinary gains securing legal protection, equity and visibility within mainstream Canadian society (Lepischak, 2004). Canadian lesbians and gay men became “more comfortable being out in large numbers, creating visible communities and taking on new challenges” (Lepischak, 2004). One of the outcomes of this visibility was an increased awareness of struggles around gender identity and sexual orientation for LGBTQ2S youth at younger ages. For many youth, this happened at a time when they were financially and emotionally dependent on biological families, which made them extremely vulnerable in the face of the homophobia, transphobia and stigma that continued to pervade Canadian society (Lepischak, 2004). High housing costs, low youth employment and eroded social supports left many LGBTQ2S youth marginalized, underhoused or homeless, and while services existed in the 1990s, many of these services failed to address the particular needs of LGBTQ2S youth.

Ontario elected a conservative government in 1995, and there were “major cuts to health, social services, public housing, education and other relevant programs” (Lepischak, 2004, p. 89). These cuts had a “profound impact on the lives of queer and trans youth and the services they used” (Lepischak, 2004, p. 89), resulting in the LGBTQ2S community exploring possible responses that would not rely on government support.

The Supporting Our Youth (SOY) program began in 1998 as a community-based intervention to facilitate contact for youth with positive adult role models and for youth seeking peer supports (Lepischak, 2004). While the SOY program facilitated spaces for LGBTQ2S youth to connect, there was still an important need for a space dedicated to addressing the impacts of homophobia, transphobia and racism. Life was more challenging for racialized LGBTQ2S youth, who also experienced discrimination based on race and culture (Lepischak, 2004). A United States (U.S.) nationwide study of schools revealed that most LGBTQ youth of colour reported experiencing victimization because of their race or sexual identity, while half of LGBTQ youth of colour reported victimization because of both race and sexual identity (Bridges, 2007). Over a third of LGBTQ youth of colour had experienced physical violence as a result of their sexual orientation (Bridges, 2007). LGBTQ youth of colour were forced to contend with homophobia from the broader society, as well as systemic racism both outside and inside the LGBTQ community.

These issues came to the forefront in 2002, when a group of concerned members of the Black queer community began a process of engagement within the community. There were still few safe spaces for LGBTQ2S youth, and virtually none that offered safety on the basis of a Black queer identity. LGBTQ2S spaces were still spaces where individuals experienced racism. The Black community was not only seeking to create a queer space where Black queer and trans youth could engage without experiences of racism, but also sought to conceptualize a space that mirrored the disruption of mainstream LGBTQ2S spaces that flourished in the 1980s, and brought issues of race, ethnic difference and sexuality to the forefront.

BQY Beginnings

BQY began as a community response to a lack of space and inadequate resources for the Black queer and trans community, especially for youth. The beginnings of BQY very much mirrored the birth of the SOY Program, and it is where BQY found a home in 2002. SOY's and BQY's beginnings reflected the community's response to a challenging time for LGBTQ2S youth, and also how the community mobilized to be responsive and take action.

The BQY initiative was created after a group of Black queer youth connected with members of the Black community to approach SOY about creating a program for Black queer and trans youth in Toronto. Virma Benjamin and Cassandra Lord are credited as the volunteer founder facilitators of BQY; however, volunteers like Michele Clarke, Karene Browne, Trevor Gray and Ahkaji Zakiya were also instrumental in building the program in the early days of BQY. In its early incarnation, BQY was a group for “LBGTTQ youth who identified as Black, who identified with the Black diaspora and/or youth who had links or identity with Africa and the Caribbean” (Elisa Hatton, personal communication, September 2007). Youth who attended the group came from all walks of life—some were street-involved or experiencing homelessness, or both, and some lived at home with families, while others lived on their own and were either working or in school. The group was developed to create a space for peer sharing, support and education. Each week brought new topics for discussion, organized workshops and opportunities for community-building.

Some of the challenges of the early model included the group's reliance on volunteers and unpaid labour for facilitation. As an initiative that grew from community, there was significant investment from the Black volunteers from the community to ensure that the

space continued. BQY met monthly for a short period before becoming a bi-weekly group. An administrative and coordination support person was hired in 2002 for BQY and other SOY groups, and after one year, BQY began meeting weekly. This, however, meant the group required additional support and, as a result, the administrative and coordination support person began taking on more group facilitation. BQY Youth members were also continuously invited and supported to try their hand at facilitation. There were requests that volunteers be given honoraria and that SOY consider hiring a facilitator, due to the difficulty of sustaining the group without consistent support. There were also concerns regarding time, caseload and support. Between 2004 and 2006, coordination and facilitation shifted, so that volunteers began maintaining a limited presence, no longer as official facilitators, but as allies. This period was an opportunity to train youth members in leadership and facilitation skills, and to share group leadership. For most of 2006, members successfully ran the group meetings. By the end of 2006, new positions were created, including a community programs coordinator and a full-time and a part-time facilitator, and BQY became fully supported by the SOY program.

Frameworks: The BQY Model

BQY is a safe space for Black, multiracial, African and Caribbean youth under 29 years of age who identify as LGBTQ2S. BQY operates as an anti-oppressive, trans-inclusive, participatory, youth-centred space that is responsive to and defined by the needs of its participants. All BQY groups start with a check-in, where individuals have an opportunity to share their name and pronoun, ensuring that everyone is known by a name and all individuals are given a chance to speak. Youth participants work together with staff to create a respect agreement that guides how people will engage in the space. SOY maintains a respect agreement that is universal across SOY programming. The facilitators of BQY have developed additional comfort rules to support the respect agreement, and these are reflective of the specific needs of the group. The comfort rules focus on the importance of BQY as a space of “intersectional healing” by regulating other identities (constructed around gender, gender identity, class, status, etc.) that participants bring into the space, reminding people where the power and privilege reside, and encouraging them to respect others. Although participants share commonalities through their Black queer and/or trans identities, there are still numerous differences within the group. Even within the LGBTQ2S spectrum, there are divergent needs and perspectives; the needs of Black trans individuals in the group differ widely from those of Black gays and lesbians.

The framework of BQY has been informed by a number of theories and ideas. Most importantly, BQY is predicated on theories of intersectionality, which explores the interdependence between multiple identity categories (e.g., race, ethnicity and sexuality) and social inequities and exclusion (e.g., racism and homophobia) (Logie & Rwigema, 2014; Collins, 1991; Crenshaw, 1989; Logie, James, Tharao, & Loutfy, 2011). Intersectionality looks at the intersection of racial oppression with other oppressions based on “class, gender, ethnicity, age, citizenship and sexual orientation” (Brigham, 2013, p. 122). When looking at issues of discrimination, “addressing one system of oppression in isolation of others is theoretically inadequate and sorely ineffectual” (Brigham, 2013, p. 122). Messaging and programming for LGBTQ2S youth of colour, and Black youth in particular, need to be culturally competent, but also need to address issues that focus on social and psychological health (Brooks, Etzel, Hinojos, Henry, & Perez, 2005; Celentano, 2005).

BQY is a community development project, and through the creation of a Black queer and trans space, individuals are able to reimagine and re-conceptualize their identities outside of the dominant narrative. BQY is a space that is exclusive to youth who identify as Black and queer and/or trans, and is animated by staff who are Black and queer and/or trans. As a community development project, individuals in BQY are able to intersect and alter “different notions and projections of space” (Foroughi & Durant, 2013, p. 218). Individuals engage with others in the space, each rooted in their own social location and, through community development, can collectively critique everyday spaces. These critiques support revelations of the “hegemonic nature of space” and give way to “countering hegemonic space” (Foroughi & Durant, 2013, p. 218). This process supports the development of “collective experience” and “critical awareness,” which brings attention to who is and is not in the space (Foroughi & Durant, 2013, p. 218; p. 219). Community development can serve as a “tool of resistance” (Foroughi & Durant, 2013, p. 218), with space and social change critically reimaged, thus supporting “the possibility of moving from individual experience to collective experience” (Foroughi & Durant, 2013, p. 218).

BQY is also a manifestation of critical race theorists Solorzano and Yosso’s (2009) definition of a counter-space, which serves as a safe space and a regenerative space for people of colour to be free from racial discrimination, and where experiences of racism are validated. Counter-space is a place where counter-stories or counter-narratives are shared, as tools “for exposing, analyzing, and challenging the majoritarian stories of racial privilege” (Solorzano & Yosso, 2009, p. 32). Participants are affirmed when sharing their experiences, and can rest assured that others are also experiencing similar oppressions.

BQY is very much a space to talk critically about race and sexuality. Themes and topics include racism in the LGBTQ2S community, critiques of queer spaces, mental health and wellbeing, self-care, employment, education systems, post colonialism, social media and popular culture, all balanced with occasional chill nights, where members can come in and simply take up space. BQY programming is not limited to the Sherbourne Health Centre (where it is primarily situated); members of BQY also enjoy planned events in the community; for example, attending relevant plays and movies (e.g., *Buddies in Bad Times*, the Toronto LGBTQ Inside Out Film Festival), and go to the Art Gallery of Ontario or the Royal Ontario Museum. BQY always provides a meal prepared by youth volunteers and facilitators. The meal ensures that all participants in the group have dinner, an important component that has continued since the group's inception, and is in line with BQY's and SOY's commitment to providing basic needs for group members. The meal is an opportunity to recreate the sense of family and community through sharing food. The cultural aspects of food are very significant for the group, and much of the cuisine is heavily influenced by the Caribbean.

Stigma

One of the major challenges that participants of BQY face is stigma. Stigma is a pervasive force within both the Black and LGBTQ2S communities. Stigma can be described as a mark of disgrace or reproach and a perceived negative attribute that causes someone to devalue or think less of the whole person. Stigma associated with an LGBTQ2S identity within the Black community is a major barrier, and also acts as a deterrent for Black youth to come out to their families. Youth of colour are significantly less likely than White youth to come out to their parents (Bridges, 2007). A study of LGBTQ youth reported that within the White LGBTQ community, 80% were out to their parents, compared with only 61% of African-Americans (Grov & Bimbi, 2006, as cited in Bridges, 2007). Similarly, African-American LGBTQ youth reported feeling their religion and church viewed homosexuality as "wrong and sinful" (Battle, 2000, as cited in Bridges, 2007). Numerous BQY participants still live at home and avoid conversations regarding sexual orientation and gender identity with their families, due to the stigma associated with LGBTQ2S identities. Stigma is also a challenge within the BQY program itself. Participants often struggle with issues around mental health, poverty or housing. Most of the youth find it challenging to disclose personal issues to the group or to ask the facilitators for support. By the time participants finally reach out to facilitators, it is often after issues have been ongoing for some time.

Many of the youth at BQY value privacy, and prefer that their personal business is not discussed within the group. Even with the SOY respect agreement and the BQY comfort rules, participants continue to make judgements of others in the group around class, economic status and ethnicity. Participants are often reluctant to talk about mental health or the effects of poverty. Unfortunately, this silence perpetuates the stigma, leaving those who may be suffering to suffer in silence. It is also challenging to understand the complexity of issues facing Black queer and trans youth if the youth are not able to engage in the conversations. Given the numbers of Black LGBTQ2S individuals who are struggling with mental illness and addictions, there is an immense need for such conversations. BQY creates a safe space to re-establish a strong support system and build a strong, self-sustained and empowered community. While we must look within the community and acknowledge it as a strong and empowered community, we must also recognize the vulnerabilities and the work that remains to be done.

Conclusion: Continuing Challenges

In 2011, BQY youth curated the program's first stage for Toronto Pride, creating a unique and much-needed space *for* Black queer and trans youth *by* Black queer and trans youth. Since then, the BQY stage has been an annual event that has grown each year. That space, however, came under threat with changes at Pride Toronto. In autumn 2015, the Executive Director of Pride Toronto met with the BQY Coordinator and staff at SOY, and informed them that the BQY stage, which was in its fourth year, would have to be relocated because of completed construction at its previous site. This began an almost yearlong process of negotiation with Pride Toronto around securing a new space for Black queer and trans youth. Many of the youth at BQY were angry with the way Pride Toronto had treated them, and felt excluded from the decision-making process.

While negotiations between Pride Toronto and BQY continued, Pride Toronto announced Black Lives Matter Toronto as one of the honoured guests for the Pride Parade 2016. This confused and angered the youth at BQY, who felt, although Pride Toronto was honouring the grassroots community organizing of Black Lives Matter Toronto and its significant representation from the LGBTQ2S community, Pride Toronto was also eliminating spaces for queer and trans Black youth, and replicating power structures endemic in the LGBTQ2S community; in fact, silencing the voices of Black queer and trans-identified youth.

For Toronto Pride 2016, BQY was given a stage, but this stage was not in the proximity of the other Pride events, and the youth were left feeling marginalized and insignificant as a result of Pride's actions. However, many youth from BQY decided to join Black Lives Matter Toronto in the parade, and took part in disrupting the 2016 Toronto Pride parade. Many of the BQY youth had never participated in the Pride parade before this; for many at BQY, Pride's treatment was the spark that ignited their social activism, and served as an important reminder of the need for BQY to take up space in the LGBTQ2S community.

This is one of BQY's greatest challenges: How does a program that started as a community initiative and has become part of one of Canada's largest LGBTQ2S youth-serving agencies continue to remain connected to community? And how does a program like BQY continue to adapt to meet the changing needs of its community? The group is continually grappling with questions like these as the community changes and the solutions may not be clear. What is clear is that critical conversations regarding race will continue to emerge in Toronto's LGBTQ2S community. From advertisements, to *The Body Politic*, to sit-ins during Pride: individuals within the community will continue to bring these issues and other issues to the forefront. These conversations are rarely easy and not always comfortable, but spaces such as BQY ensure that Black queer and trans youth can have these conversations in a safe and supportive environment, where divergent views are heard and respected and all individuals are given an opportunity to contribute. Most importantly, spaces like BQY ensure that youth can bring their whole selves to the table—to a space where queerness and Blackness are celebrated.

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6.2 UNAPOLOGETIC: THE YOUNG BLACK GAY MEN'S LEADERSHIP INITIATIVE

DaShawn Usher, D'Angelo Morrison,
Kahlib Barton-Garçon & D'Angelo Cameron

Introduction

Young Black gay men have been invisible for centuries, an invisibility rooted in societal forbiddances, cultural silences and religious shields. The resiliency and hard work of Black gay leaders to remain visible and leave lasting imprints, and to prove they existed all along, continues to happen today. The cultivation of the next generation of Black gay men continues to evolve. We are now able to turn on the television and see a range of Black gay portrayals, like Jussie Smollett on *Empire*, Freddie Ross on *Big Freedia: Queen of Bounce*, and Julian Walker on *Being Mary Jane*. While the new 'Black gay' imagery seems to be going mainstream, the realities of modern-day Black gays are often filled with disparities and inequalities rarely talked about on primetime television or within our communities.

One of the major issues facing Black gay men around the world is a lack of physical space. We must often convene, assimilate and operate within other systemically oppressive spaces that were never intended for us. The lack of physical space isn't always exclusive to the social sphere, but frequently extends to our lack of physical homes. This leads many Black gay men to create our own spaces and in turn our own homes in which to meet, convene and live. This frequently occurs without our ever acknowledging our own homelessness or housing instability.

This case study of the Young Black Gay Men's Leadership Initiative (YBGLI) will demonstrate how leadership development can equip youth of colour, particularly young Black gay men, with key skills to combat homelessness and live successful lives. The development of these skills is facilitated by other young Black gay men, with skills including advocacy training, professional development, networking, leadership and mentorship opportunities. Having experienced similar disparities and inequalities, these young adults are shaping critical long-term survival techniques for their peers. This peer-driven model is easier for young Black gay men to relate to, since the skills are being taught by peers who share similar experiences. The stories of YBGLI leaders are featured throughout the case study, which also highlights the history of YBGLI and YBGLI Policy & Advocacy Summits.

YBGLI connected me to a network of individuals that ultimately met my needs when I was experiencing homelessness. I was introduced to the initiative after expressing interest in being involved in LGBT advocacy. At the time, I was new to the work of HIV prevention, and after travelling to Baltimore for the 2015 YBGLI Policy and Advocacy Summit, I was embraced by a group of young Black men who said they were my brothers, although this was the first time we'd ever met. It wasn't until much later that I understood what that would mean.

While experiencing homelessness, it became very difficult for me to access my HIV medication. I would miss doctor's appointments and eventually my doctor refused to write prescriptions. In reality, it wouldn't have made a difference if she did prescribe my medication, because I never knew where I would end up sleeping and whether my medication would be near me. It became very difficult for me to adhere to the regimen I had become accustomed to.

I was exhausted. My body, soul and mind were all affected by not having a stable place to lay my head each night, and I needed to remedy this issue fast. This is where my YBGLI brothers stepped in. The network that I was able to establish assisted me during that difficult time. My brothers gave me shelter and navigated me through the system, helping me to eventually secure my own housing.

Kahlib, Washington, DC

History of YBGLI

Birthing from the alarming rates of HIV among Black men who have sex with men (MSM), particularly young Black MSM, a community-driven initiative for young gay men of colour was formed. YBGLI is a national collaborative of committed young Black gay, bisexual, same-gender-loving (SGL) and other MSM between the ages of 18 and 29 that works to address the HIV epidemic in the United States. YBGLI is the only national initiative that is peer-led by young MSM of colour, with an innovative approach to curb the HIV epidemic amongst their peers by focusing on community mobilization, research, advocacy and leadership development. First launched in 2012, the YBGLI Policy and Advocacy Summit brings together young Black gay, bisexual, and SGL men from various parts of the U.S. to help them become better advocates and leaders within their communities.

Since 2012, four YBGLI Policy and Advocacy Summits have occurred across the country, in the epicentres of HIV in Black MSM (Washington, DC; Atlanta, Georgia; Baltimore, Maryland; and Baton Rouge, Louisiana), bringing emerging young Black MSM leaders together for a 4-day intensive personal development and community-building summit.

While YBGLI's work is centred on the disproportionate incidence of HIV in our community, it is not the only driving force of our work. We understand that HIV and the increased risk for HIV within our communities go hand-in-hand with other social determinants of health. Through our Policy and Advocacy Summits, we are able to expand the conversation to focus on key factors affecting young Black gay men. While an important task is training participants in those specific areas previously mentioned, we also concentrate on current issues the community is facing. In 2015, the main focus was to increase the visibility of young Black gay men and instill self-appreciation in participants.

Homelessness is a national issue that requires a collaborative approach led by community members taking a stand for outcomes to benefit those who are affected, the majority of whom are young people. Homelessness is a symptom of multiple issues that affect our communities nationwide, and it is an issue directly addressed by YBGLI's mission. Homelessness affects young Black gay men at alarming rates. YBGLI comprises a collective of organizing committee members working to find regional and national solutions, even if it means providing resources to our peers using our own means. The U.S. is under a tremendous amount of pressure with regard to the increase in racial disparity, inequality, homophobia, bullying and family rejection. These issues coexist in the experiences of young LGBT individuals of colour, and often result in homelessness.

For over a year, at the age of 17, I became homeless. I struggled with my sexual identity for several years, and coming out did not help with the process. The struggle ultimately put my family and me at odds, which landed me on the streets, homeless. I reacted to the situation the same way any average teenager would: I was left hungry, alone and feeling hopeless. During this time, I began hanging out with other LGBT homeless teenagers who were also struggling to survive on their own. It was at this point that I was introduced to sex work as an option for survival. I began meeting guys (older men mostly) to go home with, so that I could have a place to sleep and food to eat.

I have learned multiple things about myself as a result of attending the summit. The most valuable lesson for me is that I am worthy of a seat at the table. I work hard, and I have dedicated the last 6 years of my life to the LGBTQ community. Other people may have multiple degrees and lengthy resumes, but I have passion, love and experience on my side. My voice deserves to be heard, and I intend to speak as loudly as I have to in order to make a difference in someone's life.

YBGLI seeks to empower and assist young Black men on their journey to becoming leaders in both their community and the professional field of their choice. Many of our members have experienced homelessness and have dedicated their work toward finding ways to put an end to this problem. YBGLI offers the space for young people to come together, find common bonding experiences, plan, organize and take action. Homelessness will continue to be a priority issue for YBGLI until solutions are developed to keep our brothers off the street.

D'Angelo, Richmond, Virginia

When we talk about the homelessness of lesbian, gay, bi-sexual, transgender, queer, and two-spirit (LGBTQ2S) youth of colour, visibility and self-appreciation are often absent in the conversation. Visibility is often absent because of the stigma and stereotypes that are associated with homelessness. People then choose to opt out of being a part of 'that community.' Similarly, young Black gay men don't always instantly connect with the construct of the larger 'gay community,' and may not yearn to be part of it. By increasing the visibility and expanding the networks of young Black gay men, YBGLI Summit participants are able to engage with and experience other young Black gay men in a professional setting. This is something they may not see in their local communities. We believe that if we can show other LGBTQ2S youth of colour experiencing homelessness the different types of housing instability that exist, we will be able to better meet the needs of this invisible population that does not always identify as 'homeless.'

I remember a time when YBGLI didn't exist, a time when there wasn't a national movement to bring together young Black gay men. I was actually part of one of the first attempts in 2008 as a participant in the Creating Responsible Intelligent Black Brothers (CRIBB) fellowship through NAESM, Inc. Prior to

that, my outlook was limited by what I experienced and what I had access to.

After graduation from middle school, I got the ultimate graduation gift of being homeless at the age of 12. At the time, I didn't realize I was homeless because my sister and I ended up staying with my older brother in his one-bedroom apartment in Queens. I thought you were homeless only if you didn't have a 'home' to go to. Since my high school was in the Bronx, I had to wake up at 4:45 every morning to make the 2-hour-and-15-minute commute to school. I was often late, and at some point my grades started to suffer. There were days I wanted to give up. Days I didn't want to wake up. Days when I felt like it was too much for a teenager to deal with. My temporary living situation seemed to become permanent when I finally realized, by my sophomore year in high school, that I was homeless. I started to spend a lot more time in school and partake in after-school activities and clubs, often not getting home until after 10 p.m. I managed to pass my classes and graduate from high school.

While most college students wanted to live on campus for college, I needed to live on campus so I could finally have stable housing. My college years were my most transformative years, when I was able to gain my independence out of state. I started working in the field of public health during college. When I attended the first YBGLI Summit in 2012, it was the first time I gained tangible skills from a conference that could be applied to my everyday personal life. By the conclusion of the summit I knew I wanted to be involved with the organizing efforts. YBGLI was a way for me to take what I had learned along the way and instill that knowledge and skill set in my peers. If YBGLI existed when I was a teenager experiencing homelessness, I wouldn't have rushed the process to become an adult. I know for sure I would have made better decisions, because I had no one to talk to that I could relate to, and no one who could explain to me that things would truly get better with time.

DaShawn, Bronx, New York

YBGLI Policy and Advocacy Summits

The third Policy and Advocacy Summit was held in Baltimore, Maryland in March 2015, and brought together 70 young Black gay men between the ages of 18 and 29. The YBGLI Organizing Committee made sure the intensive 4-day leadership meeting was filled with learning, coalition-building, leadership training and personal development. While the 2015 cohort did not know what to expect, they were challenged to step outside their comfort zone, let their traditional shade guard down, and become vulnerable to strangers. Since we are often guarded and judged within our own communities, YBGLI makes it a critical point to create an inclusive environment where everyone is on the same level. In order to ensure that those invited are able to attend the summit, YBGLI removes the often cost-prohibitive registration fee and provides housing and transportation to everyone accepted into the summit. Meals and social events are also included in the 4-day summit that fosters fellowship and organic bonds among participants.

This organic vulnerability typically occurs early in the summit, setting the tone for the rest of the conference. As participants sit in a room full of other young professionals who are also their peers, the summit serves as a reminder that they are no longer alone. They have a community to support them. This was made possible in the 2015 Summit by the opening session, led by Dr. Robert Miller, who tasked participants to unpack and confront the pain in their lives. For many participants, this was the first time they were able to see they were not alone, and no matter how established someone seemed to be, they were also dealing with their own issues. We view this experience as a revolutionary act of love—one that existed throughout the 4-day summit as participants received positive affirmations about having been selected to attend the summit. Certain sessions focused on the work that participants had done in their own communities, while other sessions focused on the information that would help them personally and professionally in the future. Once the summit concluded, most attendees felt appreciation for the contributions they have made in their own communities, acknowledged that there is more work to do, and realized irrevocably that they are young, gifted and whole. The 2015 cohort experienced self-love and the opportunity to take pride in, and be a part of, the Black excellence that has continued to carry our community forward.

YBGLI Summit Reflections

Concluding the 2015 Summit, participants were asked to reflect on their experiences and explain what the summit meant to them. Below are four unique accounts of young Black gay men's experiences from across the U.S. as they explain the impact of the YBGLI Summit on their lives:

Love means seeing and embracing the humanity of all people because they deserve it now. I know that I struggle with accepting love and affection from others because I have an insecurity that unconditional love cannot exist. This conference was the first time that I was confronted with my fear of loving Black gay men, accepting their affection, and being okay with showing my own. I am always so guarded, even with the people I love the most. Even when I think I am giving all of me, I know that I am still guarded. These men helped me realize I can show my emotions, show that I care, show that I am scared, and be okay at the end of the day. There is no reason to withhold these feelings, especially with the community that has the ability to understand me the most. Without the lens of HIV/AIDS advocacy work I could not see the humanity of my community, my Black gay men community. Now those walls of oppression have been shattered, and I can see now that my world of isolation was fuelled by the missing love I needed from my community. There is no one flavour of Black gay men, and we ALL deserve love and support from one another.

Prentiss, Fairborn, Ohio

Through my experiences during this conference, I have learned to love me so much more. It was the last day when I learned my greatest life lesson thus far. All weekend we had been told how brilliant we are, but it wasn't until that last day that God gave me the power to accept that I was a part of the brilliance that had been exhibited all weekend. Often, we forget to give ourselves our own flowers, and in that moment I began crying tears of joy. I had found a new love within me and for me. And I thank all my brothers and sisters from the #YBGLI2015 Summit for helping me achieve this.

Christopher, Rochester, New York

The summit made me realize that I'm not as open as I should be, especially toward people with open arms. During the spirituality session, I was looking my soul right in the face and I had confronted everything. I discovered that being bullied throughout middle school and being ridiculed in my own home really took a toll on me, and I've been holding on to it this whole time. It's what has been holding me back from being vulnerable and trusting of others. But it's time to knock that 20-foot wall down. The summit knocked it down to about 3.7 feet. Meeting the lovely people at the summit helped me overcome that barrier. I feel like they are family, and that I can show some emotion and will be understood and comforted. And for that, I'm forever grateful.

Breonte, Charlotte, North Carolina

Before the conference, I had very little interaction or training with HIV advocacy. From my perspective, advocacy meant supporting those who were positive. I thought that a positive status meant bed-stricken days, restless nights and an untimely death sentence. At the summit I had to refocus my lens. I learned the key issue of advocacy is stopping the dramatic increase of the incidence of HIV, especially for Black MSM. That essential piece, the undying commitment to fighting HIV, and the unequivocal love for our Black brethren, was what I witnessed from each and every person at the YBGLI Summit. It was because of those ideals that 70 strangers from all over the country came together like family. My refocused plan is to leverage the knowledge learned and the strong network of individuals from YBGLI to better educate those at risk of HIV. Care begins with prevention, and care begins with me.

Therlow, New York, New York

2016 Policy and Advocacy Summit and Beyond

YBGLI utilizes a peer-driven model to develop the leadership skills of young Black gay men. As such, YBGLI populated the 2015 and 2016 summit organizing committee with 10 participants from previous summits. The collective dynamic of the organizing committee brought together expertise in various backgrounds including research, policy, community organizing, business development, program management, health services and

entertainment. In addition, this was the first time the organizing committee had five serving committee members who had previously experienced homelessness or housing instability.

Recognizing the national climate around issues of race, gender and sexuality, the 2016 Policy and Advocacy Summit had a strong focus on racial equity, arts, culture and social justice. The meta-goal for YBGLI's 2016 summit was two-fold: 1) To enhance the leadership and managerial skills of those engaged in pertinent advocacy on a local, regional and national level; and 2) To develop a movement that shines light on the structural, political and social realities that may hinder or impair the ability to succeed for young Black gay men.

Despite billions of dollars in federal funding for HIV prevention, and decades of HIV-related interventions and research, the disparity in infection rates for different populations—with young Black MSM being particularly affected—only seems to be getting worse. Much of this can be attributed to various social determinants of health, such as lack of access to services, institutional and structural barriers, and homelessness.

YBGLI can serve as a model for LGBTQ2S youth of colour facing other disparities, such as homelessness, through the initiative's direct focus on peer-led capacity-building and programming implementation. YBGLI works to bridge social justice platforms to begin to break down the silos that exist, through programming that provides gay, queer, SGL and other MSM of colour with personal and professional development, in addition to fostering a mentorship model to continue relationships after the summit ends.

Most importantly, every summit participant leaves with a larger network of access. The 2016 Policy & Advocacy Summit specifically showed that participants' basic needs are paramount to personal development. YBGLI raised over \$265,000 to convene the four previous summits. YBGLI has also provided housing and transportation during each summit to participants, approximately 300 young Black gay men to date, to elevate social and structural barriers.

YBGLI Summits highlight national efforts to bring together a community often classified as 'marginalized' to build organic coalitions and support networks. The summits continue to convene a diverse group of young Black men from various class and educational backgrounds. In addition, the summit continues to attract a range of men in various fields, including politics, finance, policy, higher education and health.

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DaShawn Usher is a health communicator and HIV prevention advocate, who has worked in the field of public health for the past ten years. He has extensive experience in HIV prevention services, recruitment, program coordination, community mobilization, and community engagement locally, nationally, and internationally.

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D'Angelo Morrison is a young Activist/Advocate from Atlanta GA, who has been working for over 7 years on issues that disproportionately affect the LGBT community. Within YBGLI, D'Angelo currently holds the position of the Regional officer, working towards expanding YBGLI's reach and impact with black gay men nationwide. In addition to his work with YBGLI, D'Angelo is also a member of the National Youth Forum on homelessness and he works at NAESM as the PrEP Coordinator.

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Kahlib Barton-Garçon is a proud Black gay unicorn who lives unapologetically in the intersections of feminine and masculine. They are an advocate for queer liberation within the Black gay community and feel that in order to achieve this, it requires a commitment to social justice across Black institutions; church being the first.

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D'Angelo Cameron, 23, is a community organizer for LGBTQ youth issues living in Brooklyn, NY. Originally from Philadelphia, PA, he is chair of the Young Black Gay Men's Leadership Initiative, a committee of young leaders who organize at the local, regional, and national level to address issues affecting their peers with a focus on HIV/AIDS.

7 ADDRESSING THE VOCATIONAL NEEDS OF LGBTQ2S YOUTH EXPERIENCING HOMELESSNESS WITH SUPPORTED EMPLOYMENT¹

Kristin M. Ferguson

Introduction

Prior research suggests that unemployment rates among youth experiencing homelessness range from 66–71% (Ferguson & Xie, 2008; Whitbeck, 2009). Low educational levels, combined with histories of diagnosed mental illness and substance use disorder, can hinder their employment success (Cauce et al., 2000; Whitbeck, 2009). The employment outcomes of LGBTQ2S youth experiencing homelessness are considerably poorer than those of their heterosexual and cisgender counterparts, often a result of their higher school drop-out rates due to school-based discrimination regarding sexual orientation, gender identity and gender expression (Mottet, 2004). In addition to experiencing the same employment barriers that heterosexual and cisgender youth experiencing homelessness face (e.g., housing instability, food insecurity and lack of transportation), LGBTQ2S youth experiencing homelessness also encounter discrimination in the workplace due to their sexual orientation, gender identity and gender expression (Mottet, 2004). Transgender and gender nonconforming youth experiencing homelessness may have a particularly difficult time if they lack legal documents and photo identification that matches their gender identity, or if their existing legal identification does not match their chosen name, gender expression and/or gender pronoun. They also encounter additional challenges in the workplace, including difficulty accessing workplace restroom facilities on the basis of their gender identity (Mottet, 2004).

Employment is particularly important to LGBTQ2S youth experiencing homelessness, as it contributes to their identity formation, links them to conventional institutions and provides income that facilitates economic self-sufficiency (Gaetz & O’Grady, 2002). Since many LGBTQ2S youth experiencing homelessness are emancipated from the child welfare system and their biological families, or have been rejected by their families at rates higher than their heterosexual and cisgender counterparts, they need to achieve

¹ Funding for this study was provided by the Columbia University Center for Homelessness Prevention Studies (CHPS) Scholars’ Program.

economic self-sufficiency to survive (Cochran, Stewart, Ginzler, & Cauce, 2002; Mallon, 1999). Similarly, since many LGBTQ2S youth experiencing homelessness also have rates of diagnosed mental illness that are much higher than those of their heterosexual and cisgender counterparts (in particular, depression, post-traumatic stress disorder [PTSD] and substance abuse; Tyler, 2008; Van Leeuwen et al., 2006; Whitbeck, Chen, Hoyt, Tyler, & Johnson, 2004), they need integrated employment and clinical services to thrive in competitive employment settings.

Without employment access in combination with mental health support in their transition to adulthood, LGBTQ2S youth experiencing homelessness are disadvantaged in achieving economic self-sufficiency and independent living. Their transition to adulthood thus requires customized, long-term and integrated employment and clinical services. Without these targeted supports, this population remains at risk for economic hardship, labour exclusion, exacerbation of mental illness and chronic homelessness (Cochran et al., 2002).

Theoretical Underpinnings of the Individual Placement and Support Model

The Individual Placement and Support (IPS) model is one example of a customized and long-term evidence-based intervention that assists individuals with severe mental illness to gain and maintain competitive employment (Drake, Bond, & Becker, 2012). The IPS model follows eight principles: 1) *Zero exclusion*: All clients who want to participate are eligible; 2) *Integration of vocational and mental health treatment services*: Vocational and mental health treatment staff are co-located, and frequent communication between them is essential; 3) *Competitive employment*: Clients are assisted to obtain employment in integrated work settings in the open job market at prevailing wages; 4) *Benefits counselling*: People who receive government benefits need personalized benefit planning when considering employment, in order to understand how employment might affect receiving government benefits; 5) *Rapid job search*: The job search process begins within 1 month of the client meeting with an employment specialist and beginning a vocational assessment; 6) *Follow-along supports*: Individualized assistance to working clients is available for as long as needed; 7) *Preferences*: Client preferences influence the type of job sought and the nature and type of support offered; and 8) *Systematic job development*: Employment specialists build an employer network based on clients' interests, developing relationships with local employers by making systematic contacts.

Collectively, these principles draw from theories of psychiatric rehabilitation and recovery in individuals with severe mental illness (Anthony, Cohen, & Farkas, 1990; Deegan, 1988). The basic theory of psychiatric rehabilitation using supported employment is that individuals' functional adjustment can be improved by creating a supportive environment and enhancing their skills or abilities (Anthony et al., 1990). Likewise, the basic theory of recovery is that individuals can see improvement in their symptoms of illness and pursue meaningful life goals, such as employment (Deegan, 1988). Rehabilitation and recovery are achievable for individuals with mental illness and can be promoted by both mental health systems and communities. For instance, mental health systems can stimulate rehabilitation and recovery by integrating services into natural, community-based settings. Similarly, supportive communities can facilitate rehabilitation and recovery by creating opportunities for employment, education, housing and social support. Identifying a job that is a good fit between the individual and the work setting and responsibilities, as well as offering access to ongoing clinical support during job tenure, can be enabling, normalizing and health-promoting for persons with mental illness (Drake et al., 2012).

IPS principles also correspond with the internal developmental assets proposed by Benson (1999), which include positive values, social competencies and positive identity. The assets framework proposes empirically grounded internal and external assets in youth that help protect them from high-risk behaviours and improve positive outcomes in adulthood. This is important for LGBTQ2S youth experiencing homelessness transitioning to adulthood, since their decisions and behaviours in the present can directly affect their future opportunities and experiences (Maughan & Champion, 1990). By strengthening these youths' internal developmental assets in the present, the IPS model aims to protect them from engagement in high-risk behaviours, thus increasing the likelihood of positive outcomes in adulthood. Enhancing internal assets of LGBTQ2S youth experiencing homelessness is crucial, as they have frequently been exposed to multiple, significant and often chronic developmentally adverse traumatic events, both in their biological families and on the streets (Cook et al., 2005; Whitbeck et al., 2004). Due to complex trauma, which can be exacerbated by their homelessness, these youth may have developmental delays, which can lead to lasting impairment across multiple levels of functioning (e.g., affective, cognitive and behavioural; Whitbeck et al., 2004). Researchers and practitioners who work with youth experiencing complex trauma recommend an integrated treatment approach, which demonstrates promise to help these young people recover and thrive (van der Kolk, 2005).

The IPS model described here with LGBTQ2S youth experiencing homelessness addresses issues related to multiple diagnoses and complex trauma by identifying their symptoms early in the treatment relationship and by developing an individualized, integrated and holistic treatment plan. For instance, through the IPS mental health component, IPS mental health clinicians work with youth to exercise *positive values*, such as responsibility and restraint. The clinicians work with the young people to prioritize their areas of need and take personal responsibility for their actions. Similarly, using harm-reduction strategies, LGBTQ2S youth experiencing homelessness practice the positive value of restraint around their high-risk behaviours. The IPS clinicians meet weekly with the youth to identify, assess, prioritize and treat their target areas of need. The clinicians tailor the intensity and focus of the services to the severity of the youths' conditions. The functional support offered by trained clinicians can enhance the youths' self-regulatory and coping skills as well as their resilience, thus increasing their likelihood of achieving positive mental health and behavioural outcomes (Buckner, Mezzacappa, & Beardslee, 2003; Wills, 1991).

The IPS model is also designed to promote *social competencies*, particularly planning, goal-setting and decision-making, by engaging LGBTQ2S youth experiencing homelessness in the decision-making aspects of their job search and mental health treatment. For example, youth establish goals with the IPS employment specialists, case managers, and clinicians related to their employment search and mental health treatment. Planning for supportive relationships, concrete resources, and educational and vocational goals has been shown to enhance employment and educational outcomes for vulnerable transition-aged youth (Pecora et al., 2006).

Finally, the IPS model is designed to promote *positive identity* in LGBTQ2S youth experiencing homelessness by affirming their capacity to obtain and maintain competitive employment, which in turn strengthens their motivation and personal power. Through employment, LGBTQ2S youth gain knowledge and skills, thus strengthening their personal power. Furthermore, by combining employment and clinical services, the IPS model supports LGBTQ2S youth experiencing homelessness in developing motivation to pursue greater housing stability, in order to make better-informed life and employment choices. Integrating clinical and vocational services for people with mental illness to support them to find employment that is fulfilling can help empower and motivate them in their recovery from mental illness (Drake et al., 2012).

IPS Evidence Base

Prior research has examined the IPS model's effectiveness in adults with severe mental illness (Becker et al., 2001; Bond et al., 2007; Drake et al., 1999; Mueser et al., 2004), in homeless adult veterans with psychiatric or addiction disorders (Rosenheck & Mares, 2007), and in housed young adults with first-episode psychosis (Nuechterlein et al., 2008; Rinaldi et al., 2004). Collectively, available evidence suggests that IPS participants report improvements in relationships, self-esteem and life satisfaction, and in income, work hours, and employability (Bond et al., 2001; Gold et al., 2005; Lehman et al., 2002; Mueser et al., 2004). Despite demonstrated effectiveness with housed adults and young adults with mental illness, the IPS model has limited use to date with youth experiencing homelessness who also had diagnosed mental illness.

Thus, from 2009–2010, the author collaborated with two agencies serving homeless youth in a large, west-coast city in the United States to adapt and implement the IPS intervention with LGBTQ2S youth experiencing homelessness and diagnosed mental illness. This pilot study used a pre-post self-comparison quasi-experimental design with 36 young people experiencing homelessness and diagnosed mental illness. All youth were between the ages of 18 and 24 and had a variety of identities, including LGBTQ2S, heterosexual, and cisgender. Two research questions guided the study: 1) How do the existing IPS components designed for adults apply to LGBTQ2S youth experiencing homelessness and diagnosed mental illness? That is, which IPS components require adaptation for working with this population (e.g., pursuing education and/or technical training prior to working; adopting a community development approach to prevent occurrences of discrimination based on sexual orientation and gender identity), and 2) How do the IPS and control groups differ at follow up on five employment outcomes (i.e., ever-worked rate, working-at-follow-up rate, monthly work rate, weekly work hours and weekly income)? With respect to the latter question, in comparison to the control group, after receiving the 10-month IPS intervention, the five study hypotheses were: that the IPS group would be expected to have a significantly greater improvement in their: 1) ever-worked rate, 2) working-at-follow-up rate, 3) monthly work rate, 4) weekly work hours and 5) weekly income.

Methods

Research Settings and Participant Eligibility

The two host agencies consisted of nonprofit multi-service organizations that offer LGBTQ2S, heterosexual and cisgender homeless, runaway and at-risk young people a comprehensive system of care, including health care, mental health counselling, educational and employment services, and basic subsistence items. The agency hosting the intervention group was a mission-specific organization serving LGBTQ2S youth experiencing homelessness with both a drop-in centre and short- and long-term housing services. The control-group agency offered integrated services to LGBTQ2S, heterosexual and cisgender youth experiencing homelessness exclusively through drop-in centre services. Youth requesting shelter services at the control-group agency were referred to local housing resources by agency clinicians.

Young adults experiencing homelessness who were clients of either agency were eligible to participate if they met four criteria: 1) Aged 18-24 years; 2) English-speaking; 3) Met the criteria for diagnosis in the past year using the Mini International Neuropsychiatric Interview (MINI) for one of six mental illnesses (Generalized Anxiety Disorder, PTSD, Major Depressive Episode, Mania/Hypomania, Antisocial Personality Disorder, and Alcohol/Substance Use Disorders); and 4) Currently working or wanting to work. For those working at baseline, IPS services were offered to help them maintain their current employment, transition from one job to another, or terminate employment in a professional manner.

Sampling Procedures

Participant recruitment took place from March–April 2009 in each agency. Using convenience sampling, 36 youth experiencing homelessness (ages 18–24) were recruited using flyers and materials developed for this study. The principal investigator (PI) and trained research assistants conducted a 30-minute diagnostic screening interview for mental illness with youth at each host agency using the MINI, a structured interview that generates diagnoses based on DSM-IV criteria (Sheehan et al., 1998). Prospective participants who gave affirmative answers to screening questions and enough positive responses to symptom questions were considered to have met the criteria for diagnosis. Participants were compensated \$10 for the screening interview. Ethical approval was received from the PI's university's human subjects review board.

Sample Size

At the agency hosting the IPS intervention, program staff approached and screened 22 youth, two of whom did not meet the diagnostic requirements. All 20 eligible participants self-identified as LGBTQ2S. At the agency hosting the control condition, clinicians conducted pre-screening based on their clinical work with the youth, referring eligible youth for screening. During the two month screening period, clinicians were able to locate only 16 young people who met the screening criteria and were interested in study participation. All 16 who were screened for inclusion were eligible. Six of the 16 participants (37.5%) self-identified as LGBTQ2S.

IPS Intervention

The eight IPS principles for supported employment were adapted for LGBTQ2S youth experiencing homelessness in a nonprofit homeless youth agency (Drake et al., 2012). For the principle of *zero exclusion*, all youth who met the screening criteria were eligible.

For the principle of *integration of vocational and mental health treatment services*, the host agency employment specialist, case managers and clinicians began meeting weekly with the PI, using a case-conference format to openly discuss active client cases. To facilitate more frequent internal communication among agency IPS staff, the employment specialist developed a spreadsheet of IPS client case notes and hosted the document on the agency's shared computer drive. Each staff member who met individually with the study participants updated the case notes following their meetings.

For the principle of *competitive employment*, the IPS employment specialist worked with study participants to find community-based jobs at competitive wages. Supported education and employment models were combined to assist participants who wanted to complete degree programs or training certificates before working, or for those who wanted to work and study. Previous studies have demonstrated that combining supported education and employment for housed youth with first-episode psychosis has shown success (Nuechterlein et al., 2008; Rinaldi et al., 2004).

For the principle of *benefits counselling*, the IPS case managers worked closely with the Department of Public Social Services and the Department of Rehabilitation to educate IPS participants on the impact of paid employment on their governmental assistance, including Social Security Disability Insurance (SSDI), Supplemental Security Income (SSI), and

Food Stamp benefits. Additionally, for undocumented youth, case managers also worked with the United States Citizenship and Immigration Services (USCIS) to help eligible youth obtain citizenship, green cards and asylum.

For the principle of *rapid job search*, the IPS employment specialist worked with participants to begin the job-search process within one month of the youths' initial vocational assessment. For the principle of *follow-along supports*, the host agency IPS staff continued to provide individualized assistance to participants who were working throughout the study. For the principle of *preferences*, the IPS employment specialist used the participants' vocational assessment to guide the type of job sought and nature of support needed.

Lastly, for the principle of *systematic job development*, the employment specialist spent 40% of his time each week in the community, developing relationships with local employers and connecting youth to employers based on the youths' identified interests. The employment specialist also developed and strengthened relationships with local LGBTQ2S-allied employers and establishments. For instance, the employment specialist used LGBTQ2S business networks and trade publications to recruit employers who were sensitive to LGBTQ2S issues (e.g., offering diversity training to employees, enacting workplace non-discrimination policies and hiring transgender youth whose legal documents did not match their gender).

The IPS mental health treatment components were developed in this study for work with LGBTQ2S youth experiencing homelessness who also had diagnosed mental illness. First, for those experiencing depression, mania/hypomania, or anxiety disorders, the clinicians on the IPS team used cognitive behavioural therapy, coupled with referrals to collaborating psychiatrists for medication. For those experiencing trauma and/or PTSD symptoms, the clinicians provided individual and group trauma intervention services (e.g., cognitive behavioural therapy and referrals for medication). To address high-risk sexual and substance-use behaviours, the clinicians used motivational interviewing to identify high-risk behaviours and help the youth move toward change. The clinicians also used various harm reduction strategies (e.g., safe-sex practices, STD prevention, HIV testing/counselling, and substance abuse referrals) to reduce the youths' harmful behaviours.

In this study, we used host agency staff, who were already known and trusted by the study participants, to implement the IPS model. One host agency employment specialist, three case managers and two clinicians were assigned 20 cases among them for this pilot study. Agency staff handled these pilot cases in addition to their regular (non-IPS) caseloads. All study participants met individually and at least weekly with the employment specialist, one case manager and one clinician. The IPS clinicians and case managers held their meetings at the host agency's location, whereas the employment specialist held meetings at both the host agency and in the community. Regarding job development in the community, the IPS employment specialist also spent about 40% of each week in the community, building relationships with new and existing employers.

Staff were trained in the IPS model over two days by an experienced IPS trainer. Creative job-search strategies by the host agency were incorporated into the training, such as publicizing the IPS in the monthly newsletter mailed to donors, approaching donor companies and the agency's board of directors for job leads, scheduling field trips to donor companies for IPS job-seekers and partnering with the local chamber of commerce. The IPS trainer also held biweekly conference calls with staff during the 10-month study to ensure the intervention was being managed at a consistently high level. IPS study participants had access to all other agency services throughout the study. We utilized a rolling-start procedure over the two month recruitment; that is, once participants were deemed eligible and had provided consent, they completed the baseline interview and began IPS.

Control Condition

A control group of 16 youth experiencing homelessness was followed at a separate agency. An attempt was made to match these youth with the IPS participants on age, sex, and ethnicity. During the 10-month study, the control group received usual-care services, consisting of basic needs services, case management and therapy, health education, academic services, employment services and creative arts services. To ensure consistency of staff contacts with the IPS intervention participants, the control group also met individually and at least weekly with agency staff (i.e., employment specialist, clinical case managers and dayroom staff).

Data Collection and Measures

Data collection consisted of the diagnostic screening interview and pre- and post-intervention interviews. Once the youth were screened into the study, the PI and trained research assistants conducted a 1-hour semi-structured, retrospective, baseline interview. The follow-up assessment occurred after 10 months. All interviews were conducted at the host agencies' premises in private rooms. Participants were compensated \$15 for the baseline and \$25 for the follow-up interviews.

Employment outcomes were adopted from existing IPS studies (Bond et al., 2001, 2007; Gold et al., 2005; Mueser et al., 2004; Lehman et al., 2002). To determine the youths' *ever-worked rate*, employment specialists reported during the final study month whether the youth had worked in any type of paid employment during the 10 months. Youth were considered to be "working at some point" if they had shown a pay stub to the employment specialists during the 10 months (0=never held paid employment and 1=held paid employment). In prior IPS studies with adults, the average ever-worked rate is 61% (Bond & Drake, 2008).

A second variable, *working-at-follow-up rate*, was used to complement the staff-reported ever-worked rate. Youth were asked at baseline (*work1*) and at the 10-month follow up (*work2*) whether in the past month they had any form of employment, including both competitive and all forms of paid employment (0=no and 1=yes).

Monthly work rate refers to whether the youth were working during a particular month over the 10-month study. Employment specialists were asked each month whether the study participants were working. Youth were considered to be working if they showed the employment specialists a pay stub (0=no and 1=yes). The proportion of monthly work rate was calculated as the total number of months worked over 10 months, divided by 10. In prior IPS studies with adults, the average monthly work rate is 35–45% (Twamley et al., 2003).

Weekly hours worked is a continuous variable measuring the total hours per week worked at follow up as reported by the youth. *Weekly income* is a continuous variable measuring the total income per week reported by youth from all forms of paid employment at follow up.

IPS Pilot Study Findings²

Table 1 presents participants' characteristics between the IPS group (N=20) and control group (N=16) at baseline.

TABLE 1: SAMPLE BASELINE CHARACTERISTICS FOR IPS AND CONTROL GROUPS

| VARIABLE | INTERVENTION (IPS) YOUTH (N=20) | | CONTROL YOUTH (N=16) | |
|----------------------------------|------------------------------------|--------|-------------------------|--------|
| | N | % | N | % |
| Selected Demographics | | | | |
| Age | M=20.6 | SD=1.5 | M=22.4* | SD=1.4 |
| Living on the streets (baseline) | 1 | 5.0 | 7* | 43.8 |
| Foster care history (yes) | 10 | 50 | 4 | 25 |
| Self-identify as LGBTQ2S | 20* | 100 | 6 | 37.5 |
| Sex | | | | |
| Male | 14 | 70 | 11 | 68.8 |
| Female | 6 | 30 | 5 | 31.2 |
| Race/Ethnicity | | | | |
| African American | 5 | 25 | 7 | 43.8 |
| Hispanic | 9 | 45 | 7 | 43.8 |
| Caucasian | 3 | 15 | 1 | 6.2 |
| Other/mixed | 3 | 15 | 1 | 6.2 |
| Educational Status | | | | |
| Currently in school (yes) | 9 | 45 | 6 | 37.5 |
| Less than high school | 6 | 30 | 6 | 37.5 |
| High school diploma/GED | 10 | 50 | 4 | 25 |
| Some college | 4 | 20 | 6 | 37.5 |

²A more extensive reporting of the findings from this pilot study are available in Ferguson, Xie, & Glynn (2012).

| VARIABLE | INTERVENTION (IPS) YOUTH (N=20) | | CONTROL YOUTH (N=16) | |
|--|------------------------------------|-------------|-------------------------|-------------|
| | N | % | N | % |
| Employment Status | | | | |
| Working at baseline | 9 | 45 | 4 | 25 |
| Weekly work hours at baseline | M=30.3 | SD=11.6 | M=14.8 | SD=8.8 |
| Weekly income at baseline | M=\$347.78 | SD=\$212.82 | M=\$275 | SD=\$106.06 |
| Mental Illness Diagnosis (Per MINI) | | | | |
| Major depressive episode | 19 | 95 | 13 | 81.3 |
| Drug abuse/dependence | 13 | 65 | 9 | 56.3 |
| Antisocial Personality Disorder | 11 | 55 | 12 | 75 |
| Manic Disorder | 10* | 50 | 2 | 12.5 |
| Post-Traumatic Stress Disorder | 10* | 50 | 2 | 12.5 |
| Generalized Anxiety Disorder | 10 | 50 | 8 | 50 |
| Alcohol abuse/dependence | 6 | 30 | 3 | 18.8 |

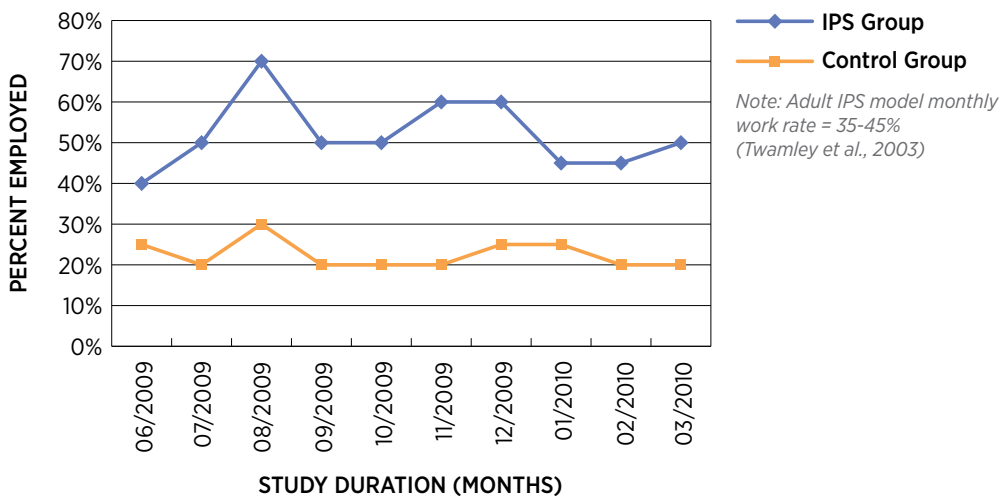
Note: M=mean; SD=standard deviation; * $p<0.05$

Analysis of baseline differences reveals that, compared with the control group, the IPS group was younger (20.6 vs. 22.4 years; $t=3.62$, $p=.001$), less likely to live on the streets (5 vs. 43.8%; $X^2=7.72$, $p=.012$), and more likely to self-identify as LGBTQ2S (100 vs. 37.5%; $X^2=17.31$, $p=.000$). They were also significantly more likely to meet diagnostic criteria for Manic Episode (50 vs. 12.5%; $X^2=6.42$, $p=.024$) and PTSD (50 vs. 12.5%; $X^2=5.63$, $p=.032$). Attrition analysis, used to understand the possible impact of study drop-out on outcomes, reveals a significant difference between the IPS and control groups on the rate of study drop-out ($X^2=7.09$, $p=.011$): 90% of the IPS group (18/20) and 50% of the control group (8/16) were available at follow up.

Chi-square tests, independent t-tests and logistic regression were used to test the five hypotheses. In comparison with the control group, IPS youth were expected to have greater improvement at follow up in their: 1) Ever-worked rate, 2) Working-at-follow-up

rate, 3) Monthly work rate, 4) Weekly work hours, and 5) Weekly income. Regarding the ever-worked rate reported by employment specialists, IPS youth were more likely to have worked at some point during the 10-month study ($\chi^2=8.69$, $p=.003$, $OR=9.4$): 85% (17/20) of the IPS group and 37.5% (6/16) of the control group worked at some point during the study. For the youth-reported working-at-follow-up rate, while only significant at the $p=0.10$ level, the odds were 7.83 greater that the IPS group would be working at follow up than the control group ($p=0.06$, $OR=7.83$) using logistic regression with adjustment for baseline working status and agency site. Two-thirds (66.7%) of the IPS compared with 25% of the control group reported working at follow up. For the monthly work rate, IPS youth worked significantly more months during the study ($t=-2.83$, $p=.008$, $d=0.95$). The IPS group worked on average 5.20 months ($SD=3.33$) compared to 2.19 months ($SD=2.97$) for the control group. Between 45–70% of IPS youth and 19–31% of the control group were working during any one month of the study (see Figure 1).

FIGURE 1: PERCENT OF LGBTQ2S YOUTH EXPERIENCING HOMELESSNESS WHO WERE EMPLOYED BY STUDY MONTH



Since there were no significant differences in weekly working hours or weekly income at baseline between the IPS and control groups, these two outcomes were directly compared at follow up. No significant differences existed between groups. The IPS group averaged 33.43 hours per week ($SD=3.95$), whereas the control group averaged 32.50 weekly hours at follow up ($SD=10.61$). The effect size of Cohen's d for weekly work hours was 0.12. Regarding weekly income at follow-up, the IPS group averaged \$263.57 ($SD=\147.61), whereas the control group averaged \$192.50 ($SD=\116.67). The effect size of Cohen's d for weekly income was 0.53.

Discussion

This study is among the first to adapt an evidence-based, supported-employment intervention for adults to work with LGBTQ2S youth experiencing homelessness and diagnosed mental illness. Findings provide deeper understanding of the initial feasibility of the IPS model with this population. Youth who participated in the IPS intervention had significantly better work outcomes, in particular for ever-worked and monthly work rates, than the control group, which received standard agency services (including vocational services). The IPS group was significantly more likely to have worked at some point over the 10-month study and to be working in any particular month. While only marginally significant, the IPS group was also more likely to be working at follow up. We found large effect sizes for the ever-worked, working at follow-up, and monthly work rates. These mirror the moderate-to-large effect sizes reported in IPS studies with adults (greater than 0.50, see Bond et al., 2007; Twamley et al., 2003). Small-to-moderate effect sizes were found for weekly work hours and weekly income. The effect size measure is a useful complement to statistical significance and enables practitioners to better interpret the practical importance of intervention effects.

Given the possibility of the positive outcomes found here being attributed to factors other than the IPS intervention, there are at least three possible alternative explanations for the greater employment outcomes among IPS youth. First, the positive employment outcomes achieved by the IPS participants may be attributed to the program's ability to retain these young people in the intervention. As noted, 90% of the IPS group compared with 50% of the control group were available at follow-up. Research indicates that while clients may remain in ineffective programs for other reasons (e.g., social support, incentives), those participating in ineffective services often drop out of those services altogether (Mueser et al., 2004). This suggests that client retention in vocational services is an important focus for practitioners and researchers in improving the employment prospects of youth experiencing homelessness, yet retention rates alone do not suffice as an indicator of employment success. In our study, the IPS intervention was associated with improved retention rates and employment outcomes.

Second, greater employment outcomes among IPS young people may be attributed to baseline differences between groups. In comparison with the IPS group, the control group was significantly older and more likely to reside on the streets than in shelters. Both age and street-living status may have been impediments for gaining and maintaining employment.

It is possible that youth experiencing homelessness who were older encountered greater employment barriers than their younger peers, who may have had access to a larger job pool, including youth-specific employment types (e.g., temporary seasonal positions often filled by youth) and federal-stimulus-funded youth employment programs (e.g., the local city's Youth Summer Employment Program). Likewise, the control group was more likely to live on the streets, which may also have impeded their ability to gain and retain competitive employment. Prior research suggests that the longer youth experiencing homelessness spend on the streets, the more likely they are to engage in criminal activity and drug use, and to experience estrangement from conventional activities such as employment (Baron, 1999). Living on the streets creates daily challenges inherent to homelessness, such as maintaining personal hygiene, securing transportation and getting enough to eat (Dachner & Tarasuk, 2002). Each of these barriers may marginalize youth experiencing homelessness and decrease their chances for competitive employment.

Third, the more favourable employment outcomes among IPS youth may be attributable to the IPS intervention having been tailored specifically for LGBTQ2S youth and administered by an LGBTQ2S mission-specific organization. The adaptations included tailoring several of the IPS principles to the employment needs and challenges of LGBTQ2S youth (e.g., developing relationships with local LGBTQ2S-allied employers and establishments, offering diversity training to employers and employees to address workplace discrimination, and seeking political asylum for transgender youth). Since 100% of the participants in the IPS group self-identified as LGBTQ2S, while only 37.5% of the control group did, it might be that the IPS adaptations provided a better fit and stronger employment outcomes for the IPS group than the regular programming did for the control group, which included LGBTQ2S, heterosexual and cisgender youth.

This study also contributes in several ways to available research about youth experiencing homelessness. For example, researchers and practitioners were successful in engaging and retaining youth experiencing homelessness who also had diagnosed mental illness in both a vocational research study and competitive employment. Most of the IPS participants (90%) remained active in the intervention over 10 months. By implementing the IPS model in an agency that had a drop-in centre, emergency (30-day) shelter, long-term shelter, and supportive apartments, IPS participants were able to move along a continuum of housing options to support their employment needs and goals. For instance, while only one IPS participant reported living on the streets at baseline, others initially reported precarious housing situations (e.g., living with abusive parents, with a

partner's family, or with friends). Still others left shelters for the streets during the study. However, involvement in the IPS intervention for many young people sensitized them to the importance of stable and supportive housing as a prerequisite to accomplishing their work goals. IPS case managers worked alongside the IPS team to provide housing options to the young people as part of their IPS case plan. IPS clinicians worked with the participants on mental health issues (e.g., depression, substance abuse, PTSD) that frequently hinder homeless young people's success in gaining and maintaining employment (Cauce et al., 2000; Whitbeck, 2009).

Limitations

The study's findings and conclusions should be interpreted with caution due to several limitations. First, the sample size was small, leading to limited statistical power. The small sample, which was further reduced by attrition, also limited our ability to conduct multivariate analyses. Similarly, due to our quasi-experimental study design, non-random assignment, and non-equivalence of groups, it is impossible to determine whether our study outcomes can be attributed to the IPS model components or to other factors, including the baseline differences between groups. However, matching the intervention and control groups on age, sex, and ethnicity, as well as adjusting for baseline working status and agency site in the logistic regression analysis, allowed us to strengthen our findings despite the study design.

Additionally, our 12-month funding period prevented us from both focusing more extensively on engaging harder-to-reach youth experiencing homelessness and increasing our sample size. To ensure that we were targeting young people in different stages of street-engagement (versus those living exclusively in shelters or transitional living programs), we purposely chose to develop and conduct the IPS in a multi-service agency that had a drop-in centre, a temporary overnight shelter, and a long-term residential facility. Our IPS intervention sample was drawn from each of these three settings within the host agency. However, as our findings suggest, in the control group, whose members were largely non-sheltered, there was an association between street-living status and attrition. Although there is some evidence to suggest that clients participating in ineffective services often drop out altogether from these services (Mueser et al., 2004), it is impossible to determine, because of our study design, whether clients in the control condition were more likely to drop out for this reason.

Implications of IPS Study for Policy and Practice with LGBTQ2S Youth Experiencing Homelessness

This study has several implications for policy and practice with LGBTQ2S young people experiencing homelessness, as employment must be an integral part of any long-term plan to address homelessness in this population. First, findings from this study demonstrate that existing agency staff can be successfully trained in an evidence-based supported employment intervention (in this study, the IPS) and convert their existing agency employment services to an evidence-based intervention. Over the 10-month study, the host agency restructured its practice by using a case-conference approach among employment, clinical, and case-management staff. IPS staff held weekly meetings with the PI and bi-weekly phone calls with the IPS training consultant to discuss and collaborate on cases. The integration of vocational and clinical services in this study is novel, as existing mental health and employment services for young people experiencing homelessness remain largely separate (Lenz-Rashid, 2006; Rashid, 2004). Based on the success of this pilot, policy-makers and funders should prioritize funding for evidence-based vocational models that integrate employment, clinical and case management services when working with LGBTQ2S youth experiencing homelessness. Policy-makers and funders should also make technical assistance available to agencies that adopt new evidence-based practices (EBPs) and/or convert existing agency services to EBPs. Representatives from agencies that have hosted research studies on the adoption of new EBPs and/or the conversion of existing services to EBPs should be invited and compensated to consult on technical assistance teams for new agencies undergoing these processes.

Second, findings from this pilot underscore the importance of honouring the inherent practice wisdom of host agency staff when converting their existing agency employment program to the IPS. At the host agency, we used a seasoned employment specialist with over two years of experience working with youth experiencing homelessness and diagnosed mental illness. The employment specialist invested considerable effort in helping study participants to attend weekly meetings, since these young people were not regular service users and were not accustomed to weekly meetings with staff. Initially, we used monetary (i.e., gift card) incentives to compensate youth for their time when meeting with the employment specialist. Later in the study, the youth began to value more direct employment-related assistance (e.g., support during a phone interview, video-taped mock interviews with feedback and job-search field trips to local strip malls), which replaced the initial monetary incentives. The employment specialist needed to work at a very

basic level with many of the participants, since they had never held a job and had limited educational attainment. Strengths-based tools such as the IPS vocational assessment and career mapping (see Shaheen & Rio, 2006) were instrumental in helping participants begin to identify and market their employment interests, skills and experiences. The employment specialist also found creative ways to stay in contact with a highly transient population, including using cell phones, emails, social media and regular visits to the youths' job sites (if approved by the youth). Drawing from the experiences of this pilot, when working with LGBTQ2S youth experiencing homelessness, it is key that employment staff utilize strengths-based vocational assessment tools that identify the transferable skills (e.g., street survival skills) of this population that could be beneficial in competitive employment settings. By using the youths' strengths versus deficits or problem behaviours as the departure point of the relationship, the employment staff and youth were able to develop a strong foundation based on the youths' work-related skills, preferences and goals.

Similarly, in our pilot study, the IPS employment specialist recognized the negative impact of workplace discrimination, harassment and violence on LGBTQ2S youths' ability to both obtain and maintain competitive employment. Accordingly, the employment specialist identified and trained allied employers in workplace rights and protections for the LGBTQ2S community (e.g., workplace non-discrimination policies and diversity training). Developing relationships with LGBTQ2S-allied employers in the community also enabled IPS staff to build a job bank of open positions in LGBTQ2S-affirming establishments to match with IPS participants' preferences. It is crucial that employment programs that serve LGBTQ2S youth experiencing homelessness adopt a community-development approach in which employment staff work in the community as well as in the agencies. When in the community, employment specialists' main tasks should include developing relationships with allied employers, educating employers about the strengths and challenges of working with LGBTQ2S homeless young people, dispelling societal myths and stereotypes of LGBTQ2S youth experiencing homelessness, and preventing instances of discrimination, harassment and violence in the workplace through diversity training for employers and employees.

Finally, one of our study aims was to explore how the existing IPS components apply to LGBTQ2S youth experiencing homelessness and diagnosed mental illness, and which components require adaptation for this population (e.g., pursuing education and/or technical training prior to working). Findings from this study suggest that IPS principles can be extended to integrate both supported employment and supported education in

one treatment program. In our pilot study, several participants pursued technical training offered through local community colleges (pharmacy technician certificate), Job Corps (culinary arts certificate), and Goodwill Industries International (forklift training program certificate) prior to securing competitive employment. When working with LGBTQ2S youth experiencing homelessness, who often have limited educational and employment experience due to school and workplace discrimination and harassment, employment staff should simultaneously explore the youths' educational and employment goals. Integrating supported education and supported employment into one treatment program enables LGBTQ2S youth experiencing homelessness to identify and work toward accomplishing their educational and employment goals in their preferred order. Academic degrees, certificates and technical training can greatly enhance the youths' competitiveness in gaining and maintaining employment. At the same time, working in competitive positions allows LGBTQ2S youth experiencing homelessness to both explore career interests that can be furthered by additional education and finance their additional education with earned income. By combining supported education and employment programs, agencies serving LGBTQ2S youth experiencing homelessness are better facilitating the youths' economic self-sufficiency, independent living and transition to adulthood.

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Dr. Ferguson is an Associate Professor at the Arizona State University School of Social Work. Her research focuses on understanding and mitigating the environmental and psychosocial factors that contribute to youth homelessness. Her intervention research is largely participatory and community-based, in which she partners with social service organizations to design, implement, and evaluate the feasibility and effectiveness of interventions for homeless youth that integrate employment and clinical services, including supported employment and social enterprises.

7.1 LEAP INTO ACTION: PREPARING LGBTQ2S YOUTH FOR THE WORKFORCE

Natasha Jones & Michelle Dugan

Introduction

Youth who are experiencing homelessness face increased barriers to employment as a direct result of unstable housing. Young people experiencing homelessness may be living in a constant state of distress and fear. This stress affects their ability to put energy toward anything other than searching for housing, as shelter and security are an immediate concern. If youth seek housing through a shelter or non-profit, they are often required to go through the time-consuming process of securing a bed, which often involves several steps, and the bed may not be guaranteed for more than one night. This leaves little time and even less mental and emotional energy to search for jobs.

Unstable housing, lack of a permanent address, and homelessness make it challenging for young people to maintain reliable contact information (phone number, email address, mailing address), which can affect their ability to apply for jobs, contact employers, and receive and respond to interview requests. These circumstances also make it difficult for young people to access facilities such as showers, laundromats and pharmacies. This can affect their ability to maintain optimal hygiene and acquire and preserve professional attire. Youth experiencing homelessness also face challenges accessing and maintaining possession of documentation necessary for employment. Frequent moving, theft, family estrangement and limited space for carrying supplies can make it hard for youth to find and carry their identification (ID), including birth certificate, social security card and other necessary paperwork.

Experiencing homelessness affects a young person's financial stability. Youth without permanent addresses or IDs struggle to open bank accounts, and unexpected housing loss can result in overdrafts, missed payments and debt accrual. Young people often struggle to afford transportation, and unreliable transportation make it hard for them to attend interviews or arrive to work on time.

LGBTQ2S youth experiencing homelessness face increased barriers in the professional world, resulting from homophobia, transphobia, ageism and racism (Abramovich, 2016). Additional barriers to obtaining employment include challenges with government-issued identification. Even if a young person's documents are accessible, they may not accurately reflect their name and gender, which causes complications when applying for jobs and completing official forms. LGBTQ2S youth can struggle with the conservative requirements of business attire, which promotes a rigid gender binary, and they can face homophobia and transphobia in many different aspects of the workplace. Access to bathrooms, interactions with co-workers and customers, and un-affirming or even intolerant workplace environments all add additional challenges for young people. Daily occurrences of homophobia and transphobia make it difficult, if not impossible, to successfully perform one's job. In addition to employment challenges related to housing instability, LGBTQ2S youth may experience discrimination during the hiring process or on the job. This is especially true for transgender and gender-expansive youth. According to the United States (U.S.) Transgender Discrimination Survey (James et al., 2016), only 19% of the 27,715 survey respondents reported being employed in the year prior to the survey and 30% of those respondents reported being fired, denied promotion, or experiencing gender-identity-related mistreatment on the job. Additionally, 77% of those who had been employed in the year prior to the survey reported doing things to avoid being mistreated on the job, like hiding their gender, delaying gender transition or quitting their job (James et al., 2016).

The LEAP Program

The New York City LGBT Community Center (The Center) and the Ali Forney Center (AFC), a provider of housing and supportive services for LGBTQ2S youth in New York City, collaborate on creating and executing a comprehensive work-readiness curriculum called LEAP (Learning, Education, Advancement and Placement). LEAP offers wraparound support with measures geared toward life skills, education and employment for LGBTQ2S young people experiencing homelessness. Our organizations have operated this program together since 2013. We have established a solid foundation for providing employment-related services to the community. The approach is client-centred and designed at a literacy and developmental level that is suitable for each young person. For example, because many of our youth are interested in fashion, entertainment and other creative and artistic fields, our partnerships with businesses and post-secondary entities in

the community match those passions and interests. These partnerships include the clothing companies H&M, Banana Republic, GAP and Old Navy, and educational entities Parsons School of Fashion, Fashion Institute Technology and many others.

The Center's Youth Program provides LEAP participants with a meaningful internship experience. LEAP participants are also able to join in the Center's youth programming, designed to build leadership and social awareness for all LGBTQ2S youth. Through a partnership with AFC, young people are provided work experience opportunities—paid and unpaid—which are crucial for young people to acquire job skills and build their resumes. As part of this program, The Center Internship and Career Developer is on site at AFC to co-facilitate workshops with AFC staff members. These workshops are part of a six-week career readiness training curriculum for youth engaged in our meaningful work program to help identify the interests and skills of each youth participant. Each cycle will host 15 to 20 LGBTQ2S youth experiencing homelessness, with the goal of reaching at least 150 youth per year.

The Center's Internship and Career Developer gets to know each youth participant and their goals, and then identifies internship opportunities. In addition, the Career Developer concurrently identifies and interviews potential employers to determine their level of LGBTQ2S cultural competency, identifies potential supervisors, and obtains a signed agreement regarding an internship supervision plan outlining the responsibilities and expectations of the young person and the site supervisor. The Career Developer also provides individual weekly support to each participating youth, follow-up engagement with employers to ensure internships are running successfully, addresses any issues or problems that arise during internships and works with employers to complete post-internship evaluations about the employers' experiences with youth from our program. Youth who complete the four weeks of training must also pass the National Work Readiness Assessment and receive the National Work Readiness Credential. The assessment measures the foundational skills of value-creating relationships and uses real-life scenarios in four different modules: situational judgement, oral language, read with understanding and use math to solve problems. This credential demonstrates to potential employers that young people are more prepared for the work world. Participants also complete a placement assessment meeting with The Center Internship and Career Developer or their AFC counterpart. Youth are then placed in an external internship placement with one of our prescreened employers. These internships last between four and six weeks, offering 80 to 84 hours of meaningful work.

Dedicated support services are offered to youth who wish to pursue formal high school education, and they are referred to Test Assessing Secondary Completion (TASC) and High School Equivalency (HSE) programs that fit their individualized needs. Bi-weekly fieldtrips to open houses at potential programs encourage clients to explore their educational options. Volunteer mentors also play a role and offer young people one-on-one tutoring and engagement to help them prepare for the TASC and reach their educational goals.

LEAP is funded through the New York State Department of Labor. Additionally, donations from Time Warner Cable enable life skills workshops to be offered on site at the AFC Drop In Center's state-of-the-art Career and Educational Learning Lab. The life skills curriculum is offered through support groups, volunteer life skills mentors, one-on-one training with staff and through our corporate partners. The training is divided into two core components: 1) Soft Skills, which focuses on goal-setting, professional communication, problem-solving, understanding/mitigating stress and time management; and 2) Hard Skills, which addresses topics like resume- and cover-letter-building, email and phone communication, workplace math, workplace computer technologies, and other professional skills.

Starting a Program Like LEAP

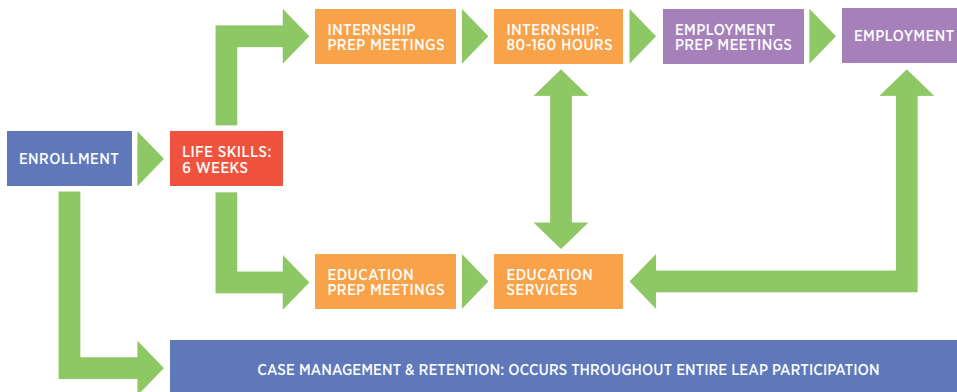
We think the LEAP program is a good model of providing holistic job training opportunities and supports for LGBTQ2S youth experiencing homelessness. Here are the basics of how and why we do what we do:

- The LEAP program offers a four-pronged approach to job development, while also offering holistic housing services. This holistic approach is critical to success for LGBTQ2S young people experiencing homelessness. Our program works with these youth who are between the ages of 18 and 24, and are disconnected from employment, education and housing. In order to help them succeed, the program offers stabilization in the form of housing, case management, counselling, physical and mental health care, and peer-to-peer support. Once young people feel independent and secure that their basic needs will be met, they can begin to engage in career-readiness training and the development of career-readiness goals. It is difficult to think about career goals when one isn't sure where one will sleep.

- The LEAP program includes a Life Skills component, which aims to provide LEAPers with the foundational knowledge necessary to secure and sustain employment and live independently. A main draw to the program is that its goal is to help young people become financially independent. Aside from housing and supportive services, the LGBTQ2S youth experiencing homelessness that we work with are looking for ways to obtain and maintain employment. The Life Skills programming meets each youth where they are; we work with each young person to identify what their needs are, and make an individualized plan for how their needs will be met. Examples of skills taught include resume-writing, budgeting and developing a three-minute pitch about one's skills. The goal of the program is not to connect youth to low-paying jobs that offer little to no opportunity for advancement, but to work with them to identify possible careers that will provide long-term employment that will enable individual young people to sustain themselves financially.
- The Education/Vocation component provides LEAPers with trainings, certification opportunities and support seeking high school diplomas, HSE, and college degrees. Additional certifications and educational opportunities help reach the goals of identifying achievable career paths, and obtaining and maintaining sustainable employment in a competitive market.
- The Internship portion provides LEAPers with a paid and meaningful work experience in a field related to their long-term career goals. Meaningful work experiences that are connected to young people's career goals are a critical part of the program. In addition to building their resumes, these internships enable young people to put the skills they've learned into practice and to test out careers in the professional area they've identified, in a supportive environment. Internships also allow us to engage with the community. We build partnerships with local businesses that are close in proximity to the program sites. We bring local businesses into the programs to introduce them to our programs and to the young people. Bridging the gap between community organizations and local businesses is a necessary step in creating job opportunities for LGBTQ2S youth.
- The Employment portion of LEAP involves career exploration opportunities and connections to open positions with partner companies. Ideally, young people will be hired by the business where they served their internship after their internship is completed. This is not always possible. When career goals are identified, program staff connect with local business partners to see if there are open positions matching the young person's skills and interests. If a young person decides a specific career is not the right path for them, they can create a new individualized plan.

- LEAPers also receive ongoing support once they have a job. LEAPers have at least three months follow-up once they obtain a job. This follow-up is meant to help support their success on the job. Program staff make sure LEAPers are doing what they need to do to maintain employment, that they are maintaining their daily needs (e.g., child care, health appointments), communicating with their employer and going to work on time. Staff support the young people around any problems that arise during their first few months on the job.

Program Successes and Challenges



As different challenges arise for program participants, the LEAP team responds. The following example demonstrates how the LEAP team continues to learn from and respond to the needs of LGBTQ2S young people experiencing homelessness as they work with the program and navigate professional environments.

G, age 23, enrolled in LEAP while living in AFC housing. They excelled in the life skills courses and sought an internship that would enhance their existing skills in design, marketing and fashion, and help launch their own career in fashion. LEAP was able to partner with a fashion styling company, and G was offered an internship as a fashion assistant. LEAP provided \$10/hour compensation, a weekly transit pass and professional attire as needed. AFC continued to provide G with housing, access to meals, case management and healthcare. When G was struggling to communicate with their supervisor because they did not have a phone, the fashion company and LEAP were able to work together to create a system to support G and enable them to continue the internship. This also compelled LEAP to begin providing LEAPers with temporary cell phones

during their internships to ensure they were able to communicate effectively and maintain their position. G completed their internship and graduated from the LEAP program successfully. After their graduation, the fashion company was so impressed with their work that they offered them a permanent position with their company. G now works as a paid assistant for the company.

LEAP has celebrated the successes of many program participants. One thing that works well about the program is the ability we have to provide internship opportunities for LGBTQ2S young people experiencing homelessness within their service provider organization. For example, the following scenario describes a culinary internship that exists at the AFC drop in center.

L, age 23, was living in a family shelter and enrolled in LEAP to gain job experience. She was a dedicated participant and completed the life skills portion quickly. L was interested in a career in the food industry and applied for a position in the Culinary Internship offered in the kitchen at AFC. This internship provides practical culinary experience and prepares interns for taking their food handler's license exam. L excelled at this internship and impressed her supervisor so much that she was offered a long-term position in the kitchen. While working in the kitchen and receiving mentorship from both LEAP staff and her internship supervisor, L decided to pursue her HSE diploma. She worked with LEAP staff to connect to an HSE program and enroll in classes. L continues to work in the AFC kitchen and pursue her HSE.

Conclusion

LGBTQ2S youth experiencing homelessness need specialized employment supports and a unique combination of wrap-around services. These youth face the challenges of experiencing homelessness compounded by widespread discrimination and harassment in the job market. These barriers disproportionately affect transgender and gender-expansive youth. While experiencing homelessness, LGBTQ2S young people may have few available resources and little energy to focus on education and employment, especially if they do not know where they will sleep or when they will be able to eat. LGBTQ2S young people experiencing homelessness may also need additional supports identifying potential careers and accessing credentialing programs or the education they need in order to move forward in their identified profession.

The LEAP program addresses these issues through our collaboration, which includes a housing provider and a supportive services provider. This collaboration allows for a holistic program that centres the basic needs of LGBTQ2S youth, provides wrap-around supports and stabilization, and then engages them in career readiness training and the identification of career goals. Our program works to connect youth to careers, rather than just jobs. We want young people to obtain and maintain employment that will earn them a living wage, feel meaningful, and eventually lead to financial independence. LEAP staff spend time exploring career opportunities with young people and making individualized plans for how they can reach their professional goals. Our partnerships with local businesses create internship placements and job opportunities where young people can gain skills and obtain meaningful work experiences.

Anyone wanting to start a successful employment program for LGBTQ2S youth experiencing homelessness must recognize that this process takes time, and a successful program must include a wide range of services to address the unique and varied needs of the youth with which the program will work. Programs must be prepared to address the basic survival needs, educational and vocational goals, career readiness preparation and ongoing employment support of each young person in their program. They must also connect with local businesses in their community to build a wide range of educational and vocational opportunities to offer participants. When adequately supported, LGBTQ2S youth experiencing homelessness can be successful in the job market and can find meaningful and sustainable careers.

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Natasha Jones began her employment at The Center as a Youth Program Coordinator in May 2010 before becoming the Director of Youth Leadership and Engagement. She has served as a liaison between several community based organizations and the NYC Department of Education to provide children and families with support and guidance. At Center Youth, Natasha provides supervision to staff overseeing our Peer Leadership Internship programming and continues to support young people in their educational and career goals, artistic creativity and development of their whole selves.

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8 ADDRESSING THE LEGAL NEEDS OF LGBTQ2S YOUTH EXPERIENCING HOMELESSNESS

Emily Chan & Julia Huys

Introduction

The legal issues facing youth experiencing homelessness are complicated and multi-faceted. When the legal problems of LGBTQ2S youth experiencing homelessness are neither identified nor addressed, the consequences that exacerbate or cause homelessness persist. For illustration, if a young person loses their employment due to discrimination based on sexual orientation, they may be unable to pay their rent. Or if a young person is assaulted by a roommate who learns they are transgender, and both are charged by the police, they will be given a bail condition that does not allow them to be within 100 metres of each other, and they may become homeless if they have no other resources to rely upon. Addressing the underlying legal needs of LGBTQ2S youth experiencing homelessness is a vital step in removing the barriers to access and maintain stable housing. Ideally, legal steps are taken early enough to prevent homelessness from occurring in the first place.

This chapter will provide an overview of the most common legal issues experienced by LGBTQ2S youth experiencing homelessness, and will cover a rights-based framework of how to identify and meet the legal needs of this population. The information and case studies contained in this chapter have been collected through the ongoing work of the Street Youth Legal Services program of Justice for Children and Youth.

Justice for Children and Youth and Street Youth Legal Services

Justice for Children and Youth (JFCY) is a legal aid clinic based in Toronto, Ontario that has protected and advanced the legal rights and interests of children and youth throughout Canada for almost 40 years. The clinic engages in public legal education, law reform and casework at all court levels to ensure compliance with Canadian legislation, the Canadian Charter of Rights and Freedoms and the United Nations Convention on the Rights of the Child (UNCRC).

JFCY has provided the Street Youth Legal Services (SYLS) program for over 16 years. It is a collaborative and community-based program designed to establish a trusting relationship with street-involved youth, to assist them to understand their legal rights, resolve their legal difficulties and take control of social barriers in pursuit of meaningful participation in the broader community. In a coordinated partnership with more than 30 agencies, the SYLS lawyer provides legal information, advice and representation to street-involved youth by reaching out to the youth through a variety of programs and at locations where they spend their time—at service agencies, drop-ins, youth shelters and health clinics.

Over the years, some of the most frustrating moments for the SYLS lawyer have been to meet a young person experiencing homelessness in a legal rights workshop or in conversation on-site at a partner agency, and discover the youth had a legal issue that went unaddressed and subsequently harmed both their housing situation and—of equal importance—their dignity as a person. These legal issues may be related to employment, access to education or immigration. Examples of those issues and others are provided in this chapter. Sometimes the legal problem can still be dealt with, but not when it occurred too far in the past to address (e.g., evidence has been lost or limitation periods have expired). It is disheartening to hear a young person say, “I wish I had known that earlier,” particularly when they have experienced human rights violations, victimization or a lack of advocacy that caused or exacerbated their homelessness situation. This chapter is designed to raise awareness and identify ways to prevent these situations from occurring.

JFCY and SYLS encourage lawyers and non-lawyers to familiarize themselves with the legal issues that affect LGBTQ2S youth experiencing homelessness, learn how to identify these issues, and then ‘put the wheels in motion’ for preventive and proactive measures. We believe many different actors are required to ensure these needs are met. For academics, this includes gaining knowledge and expertise through research to understand the legal needs of LGBTQ2S youth experiencing homelessness, and best practices to meet those needs. For agencies and government, this includes creating targeted policies and space for appropriate learning and development. For front-line workers, this means seeking out LGBTQ2S-appropriate legal services for the young person. The authors of this chapter stress that non-lawyers must not provide legal advice or act as legal representatives for youth; doing so would be both irresponsible and illegal in many circumstances. Instead, service providers should refer youth to LGBTQ2S-appropriate legal services. ***Due to the nature of this last challenge, we have set out specific “Tip” sections in this chapter that we hope will be helpful to front-line workers.***

Legal Issues of LGBTQ2S Youth Experiencing Homelessness

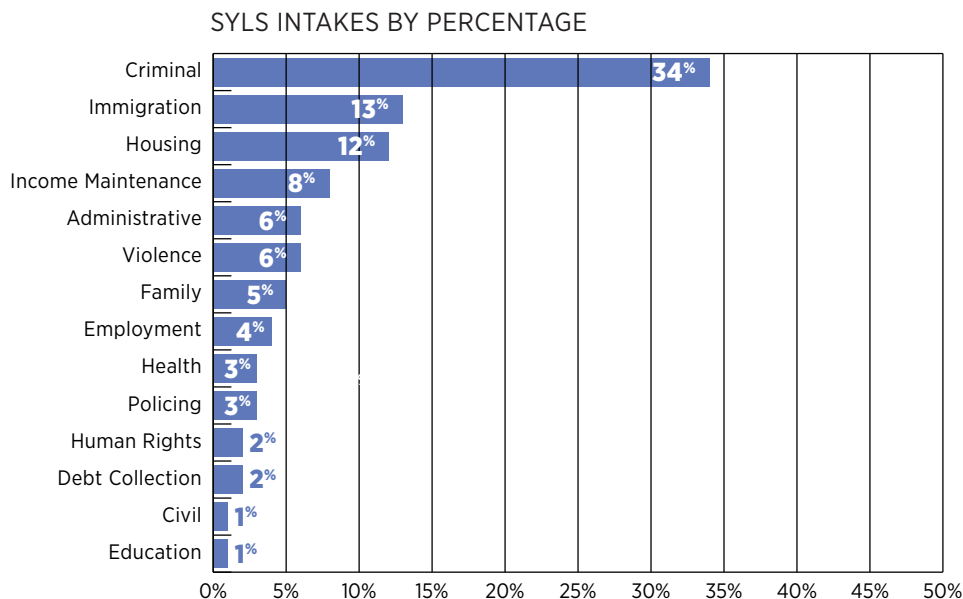
This section will provide an overview of the most common legal issues that affect LGBTQ2S youth experiencing homelessness. These youth face discrimination, criminalization, engage in survival economies, have high rates of negative police interactions, will often receive by-law fines or tickets, experience violations of their housing rights, may not have valid immigration status, face challenges of income security, and struggle to secure employment that adheres to employment rights standards.

For illustration, the SYLS program intake statistics for 2016 are:

| SYLS INTAKES BY AREA OF LAW/SUBJECT* | NUMBER |
|--------------------------------------|------------|
| Criminal | 103 |
| Immigration | 39 |
| Housing | 36 |
| Income Maintenance | 24 |
| Administrative | 18 |
| Violence | 18 |
| Family | 15 |
| Employment | 12 |
| Health | 9 |
| Policing | 9 |
| Human Rights** | 6 |
| Debt Collection | 6 |
| Civil | 3 |
| Education | 3 |
| TOTAL | 302 |

**Many intakes have overlapping categories; for these statistics, the intake is categorized by the primary area of law involved.*

***Discrimination is often identified in the intake process, but for these statistics, the intake is categorized by area of law (e.g., discrimination by law enforcement will be categorized under policing).*



Many of the legal issues affecting LGBTQ2S youth experiencing homelessness directly or indirectly affect other areas of the young person's life, and specifically their housing situation. As such, addressing the legal needs of this population is key to combating their circumstances of homelessness.

While youth will experience overlap across these areas of law, this chapter will address the following in turn:

- Discrimination
- Criminal Justice
- Immigration and Refugee status
- Housing
- Income Security and Employment

Discrimination

Many LGBTQ2S youth experiencing homelessness will have experienced overt discrimination. But discrimination can also be subtle and difficult to discern. We often struggle to name the unequal treatment that occurred or to gather the necessary evidence that allows us to ‘call out’ discrimination with confidence. Whether it is overt or covert, identifying discrimination is the first step in taking legal action to address discrimination.

LGBTQ2S youth experiencing homelessness face discrimination based on numerous factors, including their sexual orientation and gender identity, as well as intersecting identities such as age, race, ethnicity or receipt of social assistance. They may face discrimination in their interactions with law enforcement, by-law officers, employers and housing providers, or in accessing services such as transportation, social assistance and education. Such discrimination creates barriers that affect a young person’s ability to obtain and maintain housing. It also deeply affects a young person’s dignity and sense of self-worth.

Discrimination is any form of unequal treatment on specified grounds that results in disadvantage, and includes treatment that may deny benefits to or impose extra burdens on an individual; it may be intentional or unintentional.¹ Exact factors or ‘grounds’ will vary from jurisdiction to jurisdiction. In many jurisdictions, these grounds include: age, ancestry, colour, race, citizenship, ethnic origin, place of origin, creed, disability (including mental health), family status, marital status (including single status), gender identity, gender expression, sex and sexual orientation.² To understand and alleviate discrimination, it is essential to become familiar with the applicable human rights or anti-discrimination legislation in your area.

To illustrate, in Canada, the Canadian Human Rights Act prohibits discrimination on the basis of race, national or ethnic origin, colour, religion, age, sex, sexual orientation, marital status, family status, disability, or record of offences³ for all federally regulated

¹ The Ontario Human Rights Commission (OHRC) defines “Discrimination” as “any form of unequal treatment [...] that results in disadvantage, whether imposing extra burdens or denying benefits. It may be intentional or unintentional. It may involve direct actions that are discriminatory on their face, or it may involve rules, practices or procedures that appear neutral, but have the effect of disadvantaging certain groups of people. It may be obvious, or it may occur in very subtle ways. Discrimination needs only to be one factor among many factors in a decision or action for a finding of discrimination to be made.”

² These grounds are common in many North American jurisdictions. Others may also be included, for example, in Ontario, Canada, the Ontario Human Rights Code also protects individuals for the receipt of social assistance (in housing contexts only), or for record of offences (in employment only).

³ Record of offences applies to a conviction for an offence for which a pardon has been granted or in respect of which a record suspension has been ordered.

activity in the country (Canadian Human Rights Act, 1985). In 2016, the Canadian government introduced an amendment to include “gender identity and expression” on the list of protected grounds. Non-federally regulated services, facilities, housing, places of employment, and membership in unions, trades and professional associations are protected under provincial legislation, such as the Ontario Human Rights Code. These services and provisions are commonly referred to as “protected social areas,” and services such as housing, shelter services, educational institutions, police services, public transportation and health care fall under this purview.

In the United States, the Civil Rights Act of 1964 is the central piece of legislation that prohibits discrimination on the basis of race, colour, religion, sex and national origin in several areas, including many services, public facilities, housing, employment and federally funded educational institutions (Civil Rights Act, 1964). In a 2012 case (*Macy v. Holder*), the Equal Employment Opportunity Commission (the authority that oversees employment-related complaints under the Civil Rights Act), ruled that employment discrimination on the basis of gender identity was prohibited under Title VII of that Act. With respect to housing rights, the Fair Housing Act prohibits housing discrimination based on race, colour, national origin, religion, sex, disability and familial status (Fair Housing Act, 1968). The Fair Housing Act also prohibits discrimination on the basis of nonconformity with gender stereotypes, which can be interpreted to encompass lesbian, gay, bisexual or transgender persons (United States Department of Housing and Urban Development, 2017).

Individual state laws may also help protect against discrimination in specific social sectors, and may enhance the protections already in place under federal law. For example, in California, the Fair Employment and Housing Act of 1959 protects against discrimination by employers, labour organizations, employment agencies and apprenticeship programs on the basis of disability, medical condition, marital status, sexual orientation, age (with respect to persons over the age of 40), pregnancy, and childbirth, in addition to race, colour, religion, national origin or sex (Fair Employment and Housing Act, 1959). And in Illinois, the Bill of Rights for the Homeless Act protects individuals experiencing homelessness from discrimination on the basis of their housing situation (Bill of Rights for the Homeless Act, 2013).

To effectively provide services for LGBTQ2S youth experiencing homelessness, service providers must become familiar with the anti-discrimination laws in the area in which they work.

Tip

Front-line workers should ask themselves these questions during their conversations with LGBTQ2S youth experiencing homelessness:

- Has this young person been treated differently or had different rules applied to them?
- If yes, do they fall into a protected group of individuals, for example, identification as LGBTQ2S?
- If yes, can I link the differential treatment to one of the protected identity groups?

Even if the answer to the final question is not clear, it is advisable to obtain legal advice as early as possible. A lawyer can assist in determining the different ways in which the youth was treated differently. Note that the young person may not be aware that what they were experiencing was discrimination.

The following is an example of the discrimination faced by LGBTQ2S youth experiencing homelessness when accessing the shelter system.

Case Example

A.W. is a 20-year-old transgender man experiencing homelessness. He was kicked out of his family home shortly after his family learned of his transition. At one point, A.W. stayed at a shelter in the small city where he was from for a couple of weeks. A.W. was initially placed on the men's side of the shelter, but the shelter staff moved him to the women's room when they discovered that he was a transgender man. Though he asked the shelter staff not to share his gender identity with other residents because he feared aggression, a staff member announced A.W.'s gender identity in front of all shelter residents. A.W. subsequently learned of a shelter in a neighbouring city that he thought would support his gender identity. When he went to the shelter, the staff told him they could not place him in the men's shelter because he was a transgender man. A.W. tried to go to the women's shelter, but was not admitted there either. A lawyer in this situation could have advocated to the shelter to remind them of their obligation to provide services that are not discriminatory against his gender identity. If that were unsuccessful the lawyer could have pursued other legal mechanisms. For example, in Ontario, the lawyer could have assisted A.W. to make a complaint to the Human Rights Tribunal of Ontario.

LGBTQ2S youth experiencing homelessness may also experience discrimination when administrative rules seem to treat everyone the same, but result in a barrier amounting to discrimination.

Case Example

B.R. is a transgender woman who required a change of gender marker on her citizenship documentation; however, her home country did not permit a change of gender marker on birth certificates, and without an amended birth certificate, Canadian federal rules did not permit her to amend her citizenship. This created barriers to employment and housing opportunities for her, as her identification did not reflect how she presented in person. B.R. sought the assistance of a lawyer who obtained a court order that legally declared her female. B.R. then used the court order to apply for a change of citizenship documentation. Without this legal help, B.R. would have continued to face barriers that deeply affected her housing security.

Although Canadian federal regulations have changed, this is an example of the discriminatory administrative barriers that confront LGBTQ2S youth experiencing homelessness. Front-line workers are particularly well suited to identify similar forms of discrimination, as they often assist their clients to navigate local administrative systems, such as obtaining identification or registering for school. As soon as a barrier arises that a housed, cisgender or heterosexual individual would not face, a lawyer should be consulted for legal advice.

Criminal Justice

LGBTQ2S youth experiencing homelessness may find themselves involved in the criminal justice system as the accused, the victim, or both. In many cases, but not all, involvement with the criminal justice system is connected to being an LGBTQ2S youth experiencing homelessness. Experiencing homelessness typically means spending a lot of time in public places, and some jurisdictions have responded by enacting legislation or deploying law enforcement in a targeted way to try to restrict the use of public space by individuals experiencing homelessness (Bill of Rights for the Homeless Act, 2013). The resulting ‘criminalization of homelessness’ is a phrase used to describe situations where jurisdictions have used the criminal justice system or law enforcement as a response to the high visibility of homelessness (O’Grady, Gaetz, & Buccieri, 2013). The lack of

awareness about the consequences of this criminalization, as well as other criminal justice system involvement with LGBTQ2S youth experiencing homelessness, often continues and exacerbates situations of homelessness.

While statistics for the population of LGBTQ2S youth experiencing homelessness in Toronto seeking legal services has not been gathered, the 2015 data on the broader group of youth experiencing homelessness reveals that 28% of youth experiencing homelessness seeking legal services are doing so because of a criminal legal matter. A further 7% seek legal services for quasi-criminal matters related to the province of Ontario's Safe Streets Act for incidents relating to panhandling or squeegeeing, or for other 'street tickets' associated with homelessness, like sleeping in a public space, loitering, drinking in public or failing to pay transit fare (Justice for Children & Youth, 2015). These statistics represent only the legal issues for which youth experiencing homelessness sought the advice of a lawyer, and do not include unreported legal issues or instances of victimization. This research demonstrates that youth experiencing homelessness experience high levels of victimization for which they do not seek assistance (Gaetz, 2002, at 25, 31, 41, 44), and we can extrapolate that many more LGBTQ2S youth experiencing homelessness would fall into this latter category (O'Grady, Gaetz, & Buccieri, 2011). Furthermore, some LGBTQ2S youth experiencing homelessness engage in sex work, which makes them vulnerable to both criminal charges (depending on the jurisdiction) and victimization by pimps, johns and by law enforcement.

Case Example

A.T. is a queer youth who is unstably housed and has been sleeping on the streets periodically for many years. A.T. has mental health issues stemming from a childhood of neglect and poverty. A.T. is not out, and struggles with their sexual orientation and gender identity. A.T. was harassed on public transit by another rider and called a "fag". A.T. reacted strongly, got into an altercation with the other rider, and was subsequently charged with assault. The arrest, bail process and pending criminal charges caused A.T. to lose their job, and as a result they could not pay their rent.

We believe that were it not for A.T.'s intersecting identities as an impoverished queer young person, they would not have come into contact with the criminal justice system and consequently suffered greater housing insecurity.

Identifying Criminal Law Issues

Criminal law-related legal issues are often the most obvious to identify, since a LGBTQ2S youth experiencing homelessness who has been charged clearly has a legal problem that needs attention. They are required to make court appearances, are given disclosure of the allegations against them and, notably, must make a decision on how to proceed with their charges. Navigating this system is undeniably easier with representation by a lawyer, and can result in a positive outcome, such as a withdrawal of the charges if the allegations cannot be proven (this requires a decisive opinion by a lawyer) or advocacy for an appropriate diversion.

Many LGBTQ2S youth experiencing homelessness may avoid dealing with the criminal issue and thus have outstanding warrants for their arrest. If they have been a victim of crime, they may decide not to report instances of victimization. They may also hesitate to approach the police to report a crime. This decision is, in part, because they may have had negative police interactions in the past, have a general and often well-founded fear of authority, and already feel marginalized. Previous interactions with police may make youth too fearful to attend a court appearance or turn themselves into police when they are aware of an outstanding warrant. A conversation with a criminal defence lawyer about the criminal justice system and its processes and consequences may be useful in helping the young person make informed decisions. A lawyer could also help ease fears and make appropriate arrangements with police. The long-term effects of criminal justice involvement on the youth's housing, employment and other stability-related factors should be emphasized to all involved.

Impact of Criminal Justice Involvement

Involvement in the criminal justice system can carry serious consequences for LGBTQ2S youth experiencing homelessness, including criminal records that interfere with gaining housing or employment. In addition, bail conditions imposed on an individual could require them to leave their home. For example, a bail condition may require that the young person have no contact with someone who lives at their home, or no attendance at a specific property (sometimes that property is the homeless shelter where the youth has been staying). For marginalized LGBTQ2S youth, these types of bail conditions may cause a long period of housing disruption, effectively putting them back on the streets or increasing their reliance on the shelter system.

Tip

Front-line workers assisting LGBTQ2S youth experiencing homelessness with issues related to criminal law should:

- Be aware of the consequences of criminal legal issues, including the different ways a criminal charge may affect the person's housing situation.
- Assist by raising the housing concerns with the young person's lawyer and the Crown Attorney (prosecutor), so they can ensure bail conditions don't result in homelessness.
- Provide support letters to the court that may help the young person avoid bail conditions that affect their housing.

Another consequence of involvement in the criminal justice system is the increased risk of victimization for transgender youth who face the potential of being incorrectly placed in all-male or all-female jail cells or prisons upon arrest, while waiting for trial, or while serving a sentence. This raises the risk of violence perpetrated against them by other inmates or correctional staff, as well as other forms of discrimination. Advocacy by correctional staff, front-line workers, lawyers and others is necessary at these points to ensure the youth is appropriately placed and has a guarantee of safety.

Immigration-related legal issues will be discussed in further detail below; however, criminal charges have a unique impact on non-citizens. It is important for those who work with LGBTQ2S youth experiencing homelessness to inquire into a young person's immigration status as soon as they present with a criminal issue. Flagging immigration status early and seeking the assistance of an immigration lawyer can mean the difference between the devastating result of being deported to a country where the young person may face discrimination or persecution, and gaining legal status in the host country, which keeps them safe from persecution and provides the necessary stability to become housed.

Immigration and Refugee Status

Immigration and refugee laws will vary depending on the jurisdiction where immigration status is being sought. Generally, someone may be classified as citizen, permanent resident, protected person or refugee (often inferring permanent resident status); or as visitor, student or worker (implying a temporary stay); or without any immigration status.

It is important to recognize that some LGBTQ2S youth experiencing homelessness may have precarious immigration status, meaning they may not have immigration status at all, or may not be citizens of the country where they are residing. A study conducted on youth experiencing homelessness in Toronto showed that nearly one-quarter of youth surveyed had been born outside the country (Gaetz, O’Grady, & Buccieri, 2010), and another study revealed that nearly 20% of newcomer youth experiencing homelessness identified as LGBTQ2S, while 17% were questioning, did not know, or preferred not to disclose (Centre for Addiction and Mental Health & Children’s Aid Society of Toronto, 2014, p. 9). LGBTQ2S newcomer youth have often fled their home country to escape persecution and discrimination based on their sexual orientation, gender identity or gender expression. A total of 145 nations are parties to the United Nations 1951 Convention relating to the Status of Refugees (The 1951 Refugee Convention) and 146 countries are parties to the Convention’s 1967 Protocol.⁴ The 1951 Refugee Convention and 1967 Protocol both place an obligation on the signatory countries not to return a refugee to the country where they fear persecution or a threat to their life. Canada is a party to both the 1951 Refugee Convention and the 1967 Protocol. The United States is a party to the 1967 Protocol (United Nations High Commissioner for Refugees, 1976). Some LGBTQ2S youth who are fleeing discrimination or persecution may not realize that refugee protection is available to them.

Consultation with a trusted immigration lawyer is integral to determining what options might exist for a young person in such a situation, though young newcomers may be hesitant to speak about their status or to seek the help of a lawyer. Newcomer LGBTQ2S youth experiencing homelessness may not know that what is said to a lawyer is confidential, or they may have a deep and often well-founded distrust of the authorities. They may also fear for their own safety or for the safety of family members in their home or host countries.

⁴The 1951 Convention relating to the Status of Refugees defines a refugee as someone “who has a well-founded fear of persecution for reasons of race, religion, nationality, membership of a particular social group or political opinion, and is outside the country of his nationality and is unable or, owing to such fear, is unwilling to avail himself of the protection of that country; or who, not having a nationality and being outside the country of his former habitual residence as a result of such events, is unable or, owing to such fear, is unwilling to return to it.” Membership in a political social group has often been used to include individuals who fear persecution on the basis of gender, sexual orientation or gender identity.

It is important to help the youth understand that speaking to a lawyer for legal advice is a protected conversation that is confidential, covered under solicitor-client privilege and should not result in being reported to the authorities. Language barriers for newcomers to North America also pose an additional challenge. The use of interpretation services will likely be necessary to ensure that legal nuances can be properly explained and understood.

Tip

Front-line workers should:

- Ease any fears of reporting the youth may have by letting them know that all information will remain confidential, and that the front-line worker has worked with the lawyer before, or by speaking to a lawyer for information about the youth's options without disclosing the identity and location of the youth.
- Identify and inform the lawyer about any interpretation needs or arrange to have an interpreter attend with the youth during meetings with the lawyer.

Even if a young person has a strong claim for immigration status, they may be too frightened to seek status, afraid of a negative result on their immigration application, feel uncertain about the court processes, or fear additional scrutiny from state authorities. Each of these concerns must be acknowledged and met with patience.

Case example

A.G. is a gay youth from a nation that is in political turmoil. He fears for his life should he return, based on his sexual orientation as well as his refusal to join a local rebel group (the rebels threatened him after he refused to join them). He came to Canada on a student visa that expired 2 years ago. He has been living in shelters ever since, and relies on the little his mother can send him from his home country. He is too afraid to seek work or housing, knowing he may be asked for identification. A.G. knows a claim for refugee protection is a possibility for him, but he is too afraid to make the application. He fears he may lose his claim and be sent back home. Eventually, A.G. builds a strong trust relationship with a shelter staff member and a lawyer who comes to the shelter. With their support, he makes a claim for refugee protection and is then eligible for a work permit, for which he applies. Thanks to these steps, he has been able to seek housing of his own.

Obtaining stable housing is very difficult for LGBTQ2S youth experiencing homelessness who also have precarious immigration status, as they will often not have national identification and will not qualify for social assistance, and can therefore work only informally and precariously ‘under the table.’ They will not have the financial resources necessary to obtain housing, and may not be able to find a landlord who will rent to someone without proper identification. The young person may also refrain from seeking housing or accessing any social services for fear that someone will report them to authorities. These factors result in a significant risk of long-term homelessness, victimization and abuse. Consultation with a trusted immigration lawyer and ensuring strict confidentiality of the young person’s status are integral to allowing the young person to try to obtain legal status, thereby affording them the stability to access and maintain stable housing.

Tip

Front-line workers who work with non-status LGBTQ2S youth experiencing homelessness should:

- Establish a trusted relationship with a knowledgeable and competent immigration lawyer who can be consulted by staff and meet with the youth upon request.
- Develop an ‘emergency plan’ with the young person, including the names and phone numbers of any family or friends in the country, or contacts for any possible sureties who may be contacted if the young person is detained by immigration authorities.

Housing

Toronto-based research on youth homelessness shows that having an agreement for an apartment or room is no guarantee of stable housing (Gaetz, 2002). LGBTQ2S youth experiencing homelessness who at some point obtain housing continue to face a range of legal issues that affect their housing stability, such as evictions, illegal fees, illegal entry by a landlord, or a landlord failing to maintain the property (Gaetz, 2002). These legal issues result in precarious access to housing and increased instability of housing that LGBTQ2S youth may have established. In some cases, being an LGBTQ2S-identified young person can cause some of these issues.

Case example

E.K. is a transgender man with limited financial means. He moved into an apartment with a roommate, signing the lease. Because his identity documents had not yet been amended to reflect his gender identity and chosen name, the landlord was aware that E.K. was transgender. Soon E.K. began receiving harassing texts messages from his landlord, who also entered the unit illegally on several occasions. When E.K. told the landlord the text messages were discriminatory, the landlord referred to him as “little girl” and made other transphobic remarks. E.K. left the apartment not long after, feeling unsafe in his home, and began couch-surfing and staying in shelters.

Legal issues in housing have a direct effect on young people’s ability to successfully and sustainably exit street life.

Tip

Front-line workers should:

- Be alert to these issues and be well informed about applicable housing law in the area in which they work, and
- Know the rules for when a landlord can legally enter a unit, increase rent and evict tenants, as well as a landlord’s obligations for maintenance and repairs.

Income Security and Employment

Secure and stable income is an essential element in a long-term housing solution for LGBTQ2S youth experiencing homelessness. Addressing the legal issues related to income security and employment has a direct impact on a young person’s housing situation.

Front-line workers will often know to canvass the availability of social assistance for a young person. They should also be aware that if a young person is denied social assistance or disability benefits, or they are not receiving the benefits to which they may be entitled, a mechanism to appeal the denial of benefits often exists. In Canada, appeal boards for social benefits have a provincial mandate. In Ontario, the Social Benefits Tribunal hears appeals for individuals who have been refused social or disability assistance, or who disagree with

the amount or type of benefits they receive (Social Justice Tribunals Ontario, 2017). In the United States, the Office of the Disability Adjudication and Review (ODAR) performs a similar function and has a federal mandate (Social Security Administration, 2017). A positive outcome in an appeal can often open new housing opportunities. In Canada, LGBTQ2S youth experiencing homelessness are also protected from discrimination by social assistance workers through local anti-discrimination laws.

Tip

Front-line workers should:

- Familiarize themselves with these programs and their related appeal bodies;
- Refer youth to trusted and experienced lawyers; and
- Support youth through the process.

Child support may be another income source for LGBTQ2S youth experiencing homelessness. Most jurisdictions in both Canada and the United States impose a general obligation on parents to provide necessary clothing, food and shelter for their children who are under the age of majority. This obligation may not cease for children who have been forced to leave their home because the parents do not accept their sexual orientation or gender identity. In Canada, for example, a child can bring a child support application against their parent(s) in these situations. For youth who wish to attend post-secondary institutions, parents may be forced to provide financial support throughout their child's time at college or university, even if the young person is over the age of majority. In the United States, parents may be forced to pay a legal guardian or reimburse the county where that child resides for their costs (American Bar Association, 2003, p. 38).

Case Example

R.K. is a queer youth who came out to her parents at the age of 16. Her parents did not accept her sexuality and she was forced to leave home. She lived on the streets for a year before she met an informed social worker who referred her to a legal aid office that helps youth seek financial support from parents who are no longer caring for them. With the help of the legal aid office, R.K. secured regular support payments from her parents throughout her teen years, which allowed her to pay for rent, as well as throughout her years of post-secondary education, something she could not have done without child support.

Issues related to employment law are of enormous concern for gaining and maintaining income security. Stable, paid employment has a clear link to both prevention and alleviation of homelessness. The most common employment-related legal issue for youth experiencing homelessness is non-payment of wages, and for LGBTQ2S youth experiencing homelessness, it is harassment and discrimination in the workplace. There are employers who seek to take advantage of young people experiencing homelessness because of their age, inexperience and the precariousness of their living situations, often by skirting employment and anti-discrimination laws, counting on the young person to be in too much financial need to complain, or too limited in resources to have access to legal recourse, or both.

Case Example

D.N. is a young transgender woman of colour living in a downtown shelter in Canada. Through a work placement program she obtained employment at a large chain pharmacy and department store for a designated period of time, with potential to be employed permanently after the placement was completed. D.N. submitted a request to work in the cosmetics department of the store. She was initially told her requested position would be given to her. Shortly afterwards, she was told her presence in the cosmetics department might make some customers feel “uncomfortable,” and she was ultimately placed in a position where she was not interacting with customers. The lengthy ‘probation’ period of the placement program left her feeling powerless to complain or to make further requests. She was also unaware of legislation designed to protect her in these circumstances, or that legal recourse would have been available to her. D.N.’s experience is typical for many LGBTQ2S youth experiencing homelessness. As an individual experiencing homelessness, she benefited from a specialized employment program. However, she felt limited in her ability to exercise her rights because of her precarious situation. This example highlights the importance of being well versed in anti-discrimination rules. Understanding these rules will serve to protect employment rights and prevent violations of legal rights.

Tip

Front-line workers must:

- Be alert to employment law issues and be well informed about local employment laws.
- Know the rules about minimum wage, overtime and termination, to be able to identify related legal issues.
- Make a referral to a trusted lawyer.

Providing Law-Related Support to LGBTQ2S Youth Experiencing Homelessness

This section provides guidance on how to assist LGBTQ2S youth experiencing homelessness who are faced with legal issues that affect their housing situation. The goal is to alleviate the legal problem that is causing homelessness or preventing housing security. This section will include information on:

- Identifying legal issues and gaining knowledge of the law;
- Finding legal help; and
- Providing support during the legal process.

Identifying Legal Issues and Gaining Knowledge of the Law

In order to identify legal issues, front-line workers must know what the law is. That is not to say that non-lawyers need to know all the practical steps in solving legal issues, but they must know enough about the law to identify—or at least develop a gut feeling—that something is amiss, and then take steps to seek legal information and appropriate supports.

This begs the question: What is the applicable law? The answer, as described in the first part of this chapter, is that it depends on where the young person is, since municipal, provincial or state and federal laws may differ significantly. Service providers should therefore become familiar with the laws in their jurisdiction; if that is not feasible, they should at least become familiar with the ways in which LGBTQ2S youth experiencing homelessness are confronted with legal issues, and consult with a trusted lawyer each time a young person presents with a problem.

Tip

Front-line workers can help identify the legal issues of LGBTQ2S youth experiencing homelessness by:

- Being attentive to legal issues in their conversations with youth;
- Attempting to identify legal issues with the affected youth;
- Giving basic information to the youth on why a legal right may exist; and
- Connecting the young person with a trusted lawyer.

Finding Legal Help

The next step is to find trustworthy and competent legal help. This includes gaining familiarity with local legal aid services and their limitations, and locating different or additional legal services where gaps may occur. Depending on where the young person is located, this may be easy or challenging. Nevertheless, establishing these essential connections is vital to addressing and remedying both the legal issues and the housing consequences those legal issues cause or exacerbate.

While legal services and programs designed for street-involved youth, such as SYLS in Toronto, are not common, most Canadian provinces and territories have some form of publicly funded legal aid that provides free legal assistance for a limited number of issues to low-income individuals. In the United States, the Legal Services Corporation (2017) funds legal aid clinics throughout the country, with ‘Judicare’ providing funding to pay lawyers in the private bar to represent low-income clients for a variety of legal issues in some states, while the public defender system is available for low-income individuals who need assistance for criminal matters. In addition, the American Bar Association has a division dedicated to youth experiencing homelessness (American Bar Association, 2013). Other examples of local legal aid initiatives include the Urban Justice Center and the Sylvia Rivera Law Project, both in New York City.

Securing trustworthy and competent legal support requires doing some homework. As marginalized individuals, LGBTQ2S youth experiencing homelessness may be at greater risk of retaining legal counsel who do not approach each case in a culturally sensitive way or through an anti-oppression lens, or may not provide competent representation. Lawyers must be understanding and approachable to gain the trust of their clients, so youth are comfortable explaining their situation.

Tip

The front-line worker should:

- Be aware that some lawyers may not be able to effectively represent an LGBTQ2S youth experiencing homelessness.
- Build relationships with trustworthy and competent lawyers and individuals in the justice system before the need arises, to have contacts in place when necessary.

Providing Support During the Legal Process

Finally, the role of front-line workers in supporting LGBTQ2S youth experiencing homelessness with legal issues does not end on the date a referral to a lawyer is made. LGBTQ2S youth experiencing homelessness need support throughout the legal process, as it can be long and stressful. Front-line workers are also an important point of contact for lawyers working with particularly marginalized youth, as these youth will continue to access services such as housing, meals or healthcare, but may not be able to communicate with their lawyer regularly. Having the worker seek consent early from the young person to speak to the lawyer may avoid the lawyer having to drop the case due to a lack of communication, and can also provide a conduit for messages from the lawyer to the client.

In summary, a lawyer is often not the first contact for an LGBTQ2S youth experiencing both homelessness and a legal issue. Front-line workers should become familiar with the common legal issues that LGBTQ2S youth experiencing homelessness face. This allows workers to provide appropriate support to the young person during the various stages of the legal process.

Conclusion

In our experience, key elements missing from the prevention of legal problems that cause or exacerbate LGBTQ2S youth homelessness are that:

1. Legal issues are not identified at an early stage;

2. Youth are not connected or referred to a lawyer who can help them deal with legal issues before their housing stability is affected; and
3. Youth are not supported through the legal processes that ensue.

This chapter provides practical steps that both lawyers and non-lawyers can use to address legal issues encountered by LGBTQ2S youth experiencing homelessness, along with information on the most common legal issues these youth face. This marginalized population needs access to a responsive justice system that is rights-respecting and non-discriminatory, and takes into account their intersecting identities. We hope this chapter is a valuable tool to open the doors to justice for LGBTQ2S youth experiencing homelessness.

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8.1 THE PETER CICCHINO YOUTH PROJECT & THE REALITY OF STREET-INVOLVED YOUTH & YOUTH EXPERIENCING HOMELESSNESS IN NYC

Lee Strock & Joey Lee

Introduction

The Peter Cicchino Youth Project (PCYP) at the Urban Justice Center provides legal services, policy advocacy, and case management services aimed at interrupting the cycles of poverty and criminalization that prevent LGBTQ+ street-involved youth and youth experiencing homelessness from living fulfilling lives free from discrimination, abuse and oppression.

While accurate data on street-involved youth and youth experiencing homelessness are difficult to obtain, the best estimates project between 3,000 and 20,000 youth experience homelessness in New York City (NYC) on any given night (Ray, 2006). According to a 2012 national report surveying youth homelessness service providers, about 40% of youth experiencing homelessness and seeking services are LGBTQ+ (Durso & Gates, 2012). Most of our clients also experience oppression because of the intersections of race, class, disability, educational status and immigration status. Roughly 95–98% of our clients are youth of colour. As a result of harmful ‘broken windows’ policing, which targets youth of colour and criminalizes homelessness and poverty, many youth experiencing homelessness are also caught up in the criminal justice system.

The need for legal advocacy for this community is tremendous. Marginalized young people experiencing homelessness, police violence and bureaucratic nightmares when dealing with welfare agencies, foster care agencies or immigration authorities do not have the time or resources to adequately fight these systems. There is a need to ensure that police, systems of confinement, the court systems and their staff are held accountable for their treatment of vulnerable young people. Transgender youth whose identity documents do not match their preferred names or gender presentations are essentially required to out themselves, making them vulnerable in every situation where identification is required. They often have difficulty accessing schools, employment and shelters because of transphobia. On the streets, they are targets of police or community violence. LGBTQ+ youth who are undocumented often face the prospect of deportation to countries where they have never felt at home, or where being queer, transgender or gender-expansive may subject them

to abuse and torture. Undocumented immigrants who are able to remain in the country are ineligible for legal work, public assistance or financial aid for school. PCYP provides legal solutions for these complex and overwhelming issues. Our goal is to advocate for our clients in spaces where their voices are not being heard or respected, and to help our clients develop the knowledge and skills necessary to be powerful self-advocates.

Below is an overview of PCYP's approach to providing holistic, client-centred legal and case management services, and supporting broader systemic policy advocacy on behalf of NYC's LGBTQ+ youth experiencing homelessness. Supported by selected case profiles, this overview also illustrates how PCYP is a vital part of the network of service providers striving to ensure that all youth are afforded the opportunity to transition safely into adulthood.

The core of our program is the delivery of critical *direct representation* legal services to young people living in crisis to ensure their access to the basics in life. As described below, these services include support for clients requiring:

- Access to accurate and affirming identity documents;
- Assistance to navigate the criminal justice system;
- Access to and preservation of legal immigration status;
- Access and maintenance of social security insurance, public assistance, food stamps and medical assistance; and
- Holistic overall case management services.

In conjunction with and informed by our direct service work, PCYP also continues to engage in long-term *systemic advocacy* work, including strategic coalition-building, to reform the systems and institutions in which our clients struggle to survive. Current advocacy projects include:

- Advocacy to improve services and increase resources for our youth navigating and escaping homelessness;
- Advocacy to enhance the capacity of trans or gender-expansive youth to obtain accurate government-issued identification;
- Advocacy to address the effects of criminalization and the criminal justice system on youth poverty and homelessness; and
- Advocacy to improve NYC's foster care system, which has long failed LGBTQ+ adolescents.

1. PCYP's Direct Representation Services

In order to support NYC's LGBTQ+ youth experiencing homelessness, PCYP addresses the most common legal issues standing in their way: accessing accurate and affirming identity documents (through legal name changes and document replacement); obtaining and maintaining legal immigration status (through asylum, Special Immigrant Juvenile Status, visas for survivors of trafficking and victims of crime, and other forms of relief); navigating the criminal justice system (by representing clients in criminal court cases ranging from violations to low-level felonies, obtaining clients' criminal histories, helping resolve warrants, advocating for alternatives to incarceration, advocating for improved conditions of confinement and partnering with public defenders); and maintaining sources of income support and medical assistance (such as Social Security benefits, public assistance, food stamps and Medicaid). By working with clients to remove these barriers, we can greatly increase their access to social, income, and health supports, and improve their chances of avoiding criminal justice involvement. Our goal is to increase opportunities for youth to participate in the community and live fulfilling and enriching lives, by ensuring their basic needs are met.

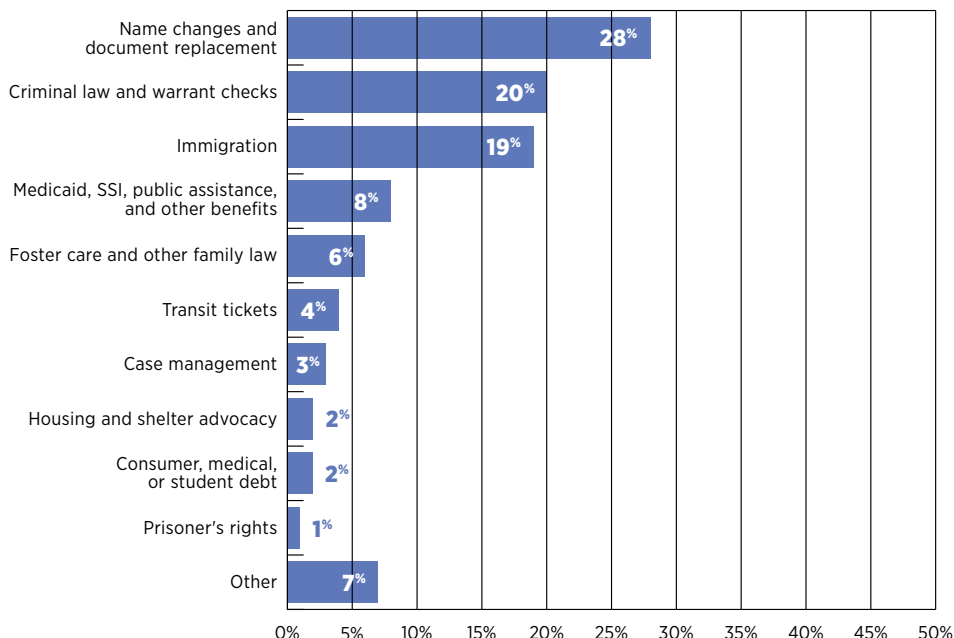
This year, PCYP continued our long-running legal clinics at NYC community-based organizations that provide direct services and support to youth experiencing homelessness, such as the Ali Forney Center, Streetwork Project's Harlem drop-in center, Streetwork Project's Lower East Side drop-in center, and the Hetrick-Martin Institute. With the launch of our Criminal Justice Initiative, our new criminal defense attorney started a twice-monthly legal clinic at Covenant House New York—NYC's largest shelter for youth experiencing homelessness. On the weeks when he is not operating the legal clinic, our defense attorney offers Know Your Rights trainings at Covenant House.

PCYP continued its relationships with other attorneys, community-based organizations and youth-serving agencies, which extended our capacity to reach youth experiencing homelessness. This year, PCYP built on strong referral and collaborative relationships with NYC's youth-serving organizations to ensure our collective efforts are as effective and comprehensive as possible.

Between January 1 and December 31, 2016, with four staff attorneys and one case manager/interpreter, we opened 532 new cases (a 23% increase from 2015) and our total ongoing caseload was 709 cases (a 25% increase from 2015). PCYP staff assisted clients with a wide variety of legal issues.

Of the cases we worked on during the grant term, the primary issues we encountered were as follows:

FIGURE 1: PRIMARY ISSUES ENCOUNTERED



Access to Accurate and Affirming Identity Documents

A large proportion of PCYP's clients come to us with the goal to obtain government-issued identification (ID), or to obtain ID that reflects their preferred name, and with a gender marker that affirms their gender identity and presentation. Without ID (or with inaccurate ID that makes clients vulnerable to profiling, violence and discrimination), youth experiencing homelessness find it difficult or even impossible to access medical care, enroll in school, apply for a job, maintain public assistance, secure stable housing, or safely navigate encounters with police. PCYP seeks to remove these barriers by obtaining legal name changes and assisting clients to acquire accurate and gender-affirming identity documents. Most of the clients PCYP assists with name changes identify as transgender and want their name to reflect their gender identity. For many others, however, they have experienced violence or rejection from their families and want to claim a new name and fresh start for themselves, leaving behind and moving away from past traumas. In the final months of 2016, PCYP experienced a surge in the number of transgender youth experiencing homelessness who wanted name changes and to update their passports and social security cards to reflect their new name and corrected gender marker. There is concern among transgender people that the

new United States (U.S.) administration will make it difficult or impossible to update gender markers on these types of ID, so we have worked hard to push through an increased number of name changes to avoid the possible risk of being unable to meet this need in the future.

Case Illustration:

Maliya¹, a young trans woman from Jamaica, came to PCYP through one of our legal clinics at a drop-in centre for youth experiencing homelessness. Maliya was brought to the drop-in centre and directed to our legal clinic by a friend who had worked with PCYP in the past. Undocumented and afraid, Maliya exhibited a lot of strength as she slowly unfolded her story. At age 15, she was living in Jamaica with her mom and grandparents when her grandmother saw her playing with makeup. Maliya was told by all the adults in her household that she was a boy and boys do not play with makeup. Maliya hid her passion for makeup for the next two years, but at school she was still seen as different. Harassment and bullying became an everyday occurrence during Maliya's last year at school. When bullying became violent, Maliya was forced to drop out. While Maliya's mom did not understand her child's 'lifestyle,' she was deeply concerned for her safety and survival. Maliya's mom gave her the money to travel to the U.S. Maliya met a 'friend' on Facebook who said she could stay with him. When Maliya was asked to trade sex for housing, she did not know what to do. She felt stuck and afraid because the man threatened her with deportation. She ended up leaving and sleeping on the subway, where she met other youth experiencing homelessness who helped her navigate the streets. Once Maliya made contact with PCYP, our attorneys were able to help her with a name change, and our case manager helped her update her identity documents with the accurate name and gender marker. This affirmation of her gender identity was incredibly uplifting for Maliya and aided her application for asylum. The asylum application process forced Maliya to relive a lot of trauma, but with the trust established with PCYP staff through the name change process and the support of her friends, Maliya fully participated in her asylum application. She now holds a green card and a part-time job that allows her time to study for her GED. PCYP cannot wait to help her apply for American citizenship when the time comes!

¹ Pseudonyms used throughout to protect client confidentiality.

Navigating the Criminal Justice System

The criminal justice system can be a source of great fear, frustration, violence and confusion for youth experiencing homelessness, many of whom are targeted by the NYC police department daily due to survival-based quality of life infractions, or racial, gender and class-based profiling. To interrupt the direct and collateral consequences of entering the criminal justice system, we provide advice, facilitated referrals, court accompaniment and expert letters of support to assist in the favourable resolution of our clients' criminal cases. For immigrant clients, we also ensure that each client's public defender understands the immigration consequences of each charge and the importance of advocating for alternatives to incarceration for our clients, who are highly vulnerable to abuse and harassment in jail, based on their age, sexual orientation or gender identity. For clients who are incarcerated in city and state facilities, we provide direct advocacy to improve their conditions of confinement, and monitor their safety and access to appropriate medical care through legal visits and letter-writing.

Even though we have cultivated great relationships with many of the public defense agencies in NYC, PCYP found that many of our clients still had trouble staying engaged with their defense attorneys and making it to court dates and appointments that would be necessary to resolve their cases in the most advantageous manner. Public defense agencies rely largely on government-funding contracts requiring high caseloads, so even the most dedicated public defenders must represent upwards of 80 to 100 clients at a time. For our clients, who may have more difficulty staying in touch or remembering court dates, this structural challenge can lead to their falling through the cracks. In addition to the large caseloads public defenders must carry, they are not appointed as counsel until the first court appearance. For our clients, the best outcome is often obtained when an attorney can intervene before arrest or at least before police interrogation. Recognizing this unmet need, PCYP sought the support of a generous donor to hire a full-time criminal defense attorney, as noted above. In the brief time he's been with PCYP, our criminal defense attorney has had a huge impact.

PCYP clients who think the police are looking for them or have a warrant out for them can now access an attorney before arrest. This can be invaluable, as it empowers the client to make critical decisions about their safety and their property, which are all too often taken away at the moment of arrest. Because of our strong relationships with agencies that serve youth experiencing homelessness, PCYP's attorney is in a better position than most public defenders to make a compelling case that our clients should be released while their case is

pending, rather than having bail set. Most of our clients cannot afford even a very low bail, so having bail set means our clients spend the duration of their case in jail. Our defense attorney, however, can get letters of support and prove community connections to show the client is not a flight risk.

Aides to the U.S. president who took office in January 2017 have issued new guidelines to expand efforts to deport immigrants who have even low-level criminal convictions, creating a climate of fear and chaos among immigrant communities. Since youth experiencing homelessness are targeted with low-level charges for things like accessing public transportation without paying the fare, it will be even more important going forward for our criminal defense attorney to secure dismissals and keep immigrant youth from having their immigration status imperilled.

Case Illustration:

PCYP's criminal defense attorney met Shawna at a drop-in legal clinic. Shawna was told the police were looking for her because of an alleged fight with a neighbour. PCYP's attorney answered Shawna's questions and listened as Shawna explained her concerns about being arrested. The attorney called the police precinct and was told Shawna was wanted for questioning and there was probable cause to arrest her. At that point, the attorney faxed a letter to police invoking the client's right to remain silent, and asking to be present for any identification procedure, such as a line-up. The attorney also arranged a time when Shawna had no other obligations to go to the precinct and turn herself in. Unlike most arrests, which are entirely out of a client's control, this pre-arranged surrender gave Shawna some agency and reassurance in the process. Shawna was able to make arrangements for where her property would be, who would be at the place where she was staying if and when she was released, and who could pay for bail if it was set. The attorney also reached out to Shawna's caseworker at the drop-in centre to write a letter of support for her, which would strengthen his argument for her to remain free pending the disposition of the case. People like Shawna, who are accused of crimes when they are young and experiencing homelessness, are often seen as unlikely to come back to court, and therefore have a stronger chance of having bail set. By having forged the relationships with the agencies serving youth, PCYP was able to show that Shawna is in fact very well connected to services and community, and should therefore be released.

On the day of the surrender, Shawna met her attorney and they took the subway together to the precinct for the surrender. He then met her at the courthouse to make his argument that Shawna should be released, rather than having bail set. PCYP's argument was a success. Shawna was released after spending less than an hour in central booking. Most people accused of crimes, waiting for assigned counsel to be appointed, would spend a night in jail waiting to meet their attorney for the first time. Shawna was in touch with her attorney throughout the day, and he was able to explain what was happening during the pre-arraignment. After she was released, he met regularly with Shawna to discuss her case, how to assess her options, and to explain the potential civil consequences of any plea deal. He was able to negotiate a plea that will not affect Shawna's ability to apply for jobs or housing, and which allowed her to avoid jail time.

Access to and Preservation of Legal Immigration Status

Many of the youth experiencing homelessness we see at PCYP are either undocumented immigrants or their immigration status is in jeopardy because of their disproportionate contact with the criminal justice system. Over the past few years, PCYP greatly increased our immigration resources, training and staff competency to build a comprehensive immigration support program for youth experiencing homelessness. PCYP works to identify the best forms of immigration relief for our clients, provides full immigration representation, helps immigrant youth navigate the criminal justice system to avoid adverse immigration consequences, and supports our immigrant clients through case management and referrals to appropriate mental health and social service supports. In the last six weeks of 2016, after the U.S. presidential election, there was a spike in the number of immigrant youth who wanted help obtaining immigration status before the new administration had the chance to detrimentally change the laws that give survivors of trauma a route to permanent residency and citizenship.

Case Illustration:

In July 2016, after over two years of difficult work, PCYP's client Camila was granted asylum! Camila, a transgender woman, grew up in a Central American town where she was the victim of childhood sexual abuse and domestic violence. After a very traumatic childhood, she was trafficked into sex work by a gang, and witnessed other trans women who were her friends being murdered. Camila was also the target of vicious police violence. Fearing for her own life, Camila fled to the U.S. She was picked up near the Texas border by U.S. immigration

authorities and placed into deportation proceedings, where she claimed asylum as a defence against being sent back to her birth country. Immigration set bail for her release. She was able to rally friends to pay her bail and buy her a bus ticket to NYC. That's when Camila first met with PCYP. Over the next several months, with the support of her PCYP attorney and social worker, Camila was able to tell her story so we could help her file supplemental materials and evidence for her asylum claim. After her attorney gathered compelling evidence and related Camila's story to the applicable asylum law, PCYP filed an asylum application and Camila waited for her hearing to be scheduled. Before the hearing, PCYP's attorney negotiated with the opposing immigration attorney to narrow down to exactly what Camila would need to testify. Camila was an excellent self-advocate at her asylum hearing and was granted asylum on the spot. After this momentous victory, Camila is working with her attorney to apply for the benefits and supports for which she now qualifies as an asylee.

***Accessing and Maintaining Social Security Benefits,
Public Assistance, Food Stamps and Medical Assistance***

Although public assistance, supplemental security income (SSI), Medicaid and food stamps can be much-needed sources of income support, the NYC welfare system and SSI are structured so that it is virtually impossible for youth experiencing homelessness to access and maintain benefits. From the moment a young person tries to obtain benefits, they are faced with hostile staff, burdensome documentary requirements and appointments that can be more work than a full-time job. For youth who attempt to access benefits, PCYP works to overcome bureaucratic denials and discontinuances of benefits by providing advice and counsel, and representation in administrative hearings.

Case Illustration:

Social Security Administration (SSA) funding is being cut by the federal government (a trend we expect to continue under the administration that assumed office in January 2017). PCYP's clients who receive SSI because of medical disabilities are being forced to absorb the impact of these cuts by being charged with overpayments by SSA to recover money that they usually did not receive and therefore do not owe: often, young people who are no longer living with their parents do not even know they were receiving SSI benefits for mental health or physical limitations. PCYP's SSI expert met with Tammy, a young trans woman with developmental delays from childhood lead

poisoning. While Tammy's mother does not accept her gender identity, Tammy occasionally visits her mom in Pennsylvania. Tammy was at her mother's house one day when her mom was not there. She found mail with her old name on it, and opened it. She contacted PCYP to tell us that she has an SSA hearing coming up to cut off her benefits and try to claw back money that was supposedly overpaid to her. PCYP was able to have the hearing adjourned to have time to gather records and build Tammy's case. We worked with her to get medical records from her former medical providers to show that she was and is qualified for benefits. It took four months of advocacy, but Tammy's attorney won the hearing and got her benefits reinstated without Tammy having to pay a dime.

Case Management

PCYP's effectiveness relies in large part on the availability of consistent case management services accessed by clients at our clinic sites. Through our work, we recognize that youth who have access to comprehensive case management services are often more stable and better able to participate in their legal case, which leads to more successful outcomes. While many clients come to us through drop-in centres that offer social services, approximately one-third of PCYP clients were unable or unwilling to access those services. For this reason, and to improve the legal outcomes for our clients, PCYP provides on-site case management services to support clients throughout their time working with us.

PCYP's case manager has three primary areas of responsibility, helping our clients with: access to services; navigating the criminal justice system; and access to trauma-related services. She helps our clients access basic human rights, such as health and mental health services, and education and foster care, so their social and health needs are met sufficiently to allow them to participate in their legal case. She partners with our clients to navigate the criminal justice system by accompanying clients to court, visiting them in jail, and encouraging them to resolve open warrants which reduces the legal barriers clients face in obtaining immigration status and legal name changes. Our case manager also interviews clients regarding sensitive, trauma-related experiences to assist in drafting legal affidavits, and trains PCYP staff and interns on providing supportive legal services to survivors of trauma.

PCYP's case manager has allowed us to expand our reach to street-involved youth and youth experiencing homelessness who are otherwise not connected to youth services. She assists clients at all stages of their legal case. Before cases begin, she helps clients remove

the barriers to fully participating in their case. During their case, she supports the client, particularly those clients who need help dealing with trauma. Finally, after the legal case is concluded, the case manager follows up with the client to ensure that any legal victory has a meaningful impact on the client's life.

2. PCYP's Systemic Advocacy Work

Homelessness Initiative

In 2016, as in too many years past, the community of service providers working with LGBTQ+ youth experiencing homelessness has had to struggle to maintain city and state resources for this population, resources that are already paltry in comparison to the level of need. With approximately 4,000 youth experiencing homelessness on any given night, there are only about 750² youth-specific shelter beds in NYC (City of New York, 2016). PCYP has continued to be a staunch advocate for LGBTQ+ youth experiencing homelessness. Our expertise as legal advocates committed to providing legal and other institutional support for LGBTQ+ youth experiencing homelessness has allowed us to lend an important voice to the community of homeless youth service providers that advocate for improved services and increased resources for our youth. We support our partners at youth shelters in their efforts to secure more funding for beds and, at the same time, advocate with the Department of Homeless Services to make the adult shelter system safer and more accessible to youth experiencing homelessness. As the de Blasio administration folded the Department of Homeless Services into the Human Resources Administration (which administers NYC's welfare programs), PCYP staff, as experts in youth homelessness, were invited to participate in meetings with Human Resources Administration Commissioner Steven Banks and other stakeholders to make sure the needs of our clients were considered during the agency merger.

Through our Homelessness Initiative, PCYP continues to fight for the rights of LGBTQ+ youth in NYC to have access to needed shelter and public benefits programs. To continue our contribution to relevant shelter-based advocacy, we maintain strong relationships with the Coalition for the Homeless, the Legal Aid Society's Homelessness Rights' Project, the Ali Forney Center, and Safe Horizon's Streetwork Project.

²This is more than a 100% increase in the number of youth shelter beds available before the de Blasio mayoral administration began, but the growth in beds is not close to catching up with the need.

Access to Government-Issued Identification

Navigating or escaping homelessness is often contingent on having accurate government-issued ID. Young people are frequently required to show government-issued identity documents to access government buildings, shelters, benefits and other services, or to identify themselves when stopped by the police. And yet maintaining government-issued ID can be nearly impossible for LGBTQ+ young people experiencing homelessness.

PCYP continued our work with a coalition of community organizations, the mayor's office, and city council to guide the implementation of NYC's new municipal ID program, IDNYC. When the program was being developed, we worked with the Sylvia Rivera Law Project and New York Legal Assistance Group's (NYLAG) LGBT Project to ensure that IDNYC would be accessible for transgender and gender-expansive New Yorkers, by pushing the city to allow applicants for the ID to self-attest to their gender, rather than forcing them to provide invasive and sometimes-inaccessible medical documentation of gender transition. This year, our efforts were focused on expanding access to municipal ID and increasing its acceptance among private and public entities. We worked with experts at the New Economy Project to push large financial institutions to reverse their current policies around not accepting IDNYC to allow individuals to open accounts. This work is ongoing, but PCYP had productive meetings with fellow advocacy groups and a large financial institution early in 2016.

Criminal Justice Initiative

Because the vicious cycles of poverty, homelessness and criminalization affect almost every client we see, and because the criminal justice system is so present in the lives of our clients, advocacy in this area has been a critical part of our work for the past few years. As noted above, PCYP was able to greatly expand our Criminal Justice Initiative this year by hiring a criminal defense attorney. In addition to directly representing clients who have contact with the police and criminal courts, PCYP's defense attorney and project director have begun meeting with partner agencies (including our clinic partners and Covenant House) and elected officials in NYC to make them aware of his work and to bring feedback to them about the experiences of our client population. In the years ahead, we will be able to bring our clients' perspectives to the table in discussing criminal justice reform and addressing the rampant violence perpetrated by the New York Police Department.

In addition to this work, PCYP also continued to advocate for safer conditions for those clients who are incarcerated in jails, prisons or detention centers. Two of our attorneys worked with a coalition of other LGBTQ+ groups to improve the safety of trans and gender-expansive people held in city jails. Another attorney contributed to an amicus brief challenging the conditions under which immigrant minors are held by the Office of Refugee Resettlement.

Foster Care Initiative

NYC's foster care system has long failed LGBTQ+ adolescents. The Administration for Children's Services (ACS) has consistently resisted accepting older adolescents into care, warehouses LGBTQ+ young people in group homes, fails to ensure a safe and supportive environment for LGBTQ+ young people living in these homes and discharges youth into homelessness. It is often quite difficult to find supportive permanent placements for LGBTQ+ youth in foster care, diminishing their chances of achieving permanency. In 2016, 33% of PCYP clients had been involved in the foster care system. We continued to advocate with ACS to allow our older adolescent clients to access care. In one particularly difficult case, PCYP attorneys worked with allies in the NYC Council to get ACS to take a 17-year-old into care after her family kicked her out because of her sexual orientation and gender expression. We have facilitated access to care and protective services for youth who did not have family members available to care for them, or who felt unsafe in their living situations. We have also worked to ensure that undocumented LGBTQ+ youth in care have access to any immigration relief for which they are eligible. PCYP has become the go-to agency representing youth in care seeking immigration relief through Special Immigrant Juvenile Status.

Conclusion

Youth experiencing homelessness are forced to interact with legal systems and government bureaucracies to move forward in their lives and achieve stability. Over the past two decades, PCYP has developed a model to help these young people overcome barriers and successfully navigate legal systems. We do so by meeting young people (both literally and figuratively) where they are, ensuring they are able to define their own goals and vision of success, and staying with them—sometimes for years—when mainstream legal aid agencies are unable to do so because they are struggling to address large caseloads and limited capacity.

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9 POLICY INTO PRACTICE: HOW GOVERNMENT CAN PLAY A ROLE IN SUPPORTING LGBTQ2S YOUTH

Stephen Gaetz

Introduction

As a society, we often express our desire that all young people will feel loved, included and have the opportunity to move into adulthood in a way that contributes to their wellness and success. We hope that no one would want any young person to become marginalized, drop out of school or, worse yet experience homelessness. Yet as we all know, these hopes are not always fulfilled. Many young people experience discrimination, exclusion and threats to their safety and well-being. Many, too, experience homelessness. In Canada, 20% of all people experiencing homelessness are between the ages of 13 and 24 years, and on any given night, between 6,000 - 7,000 young people are experiencing homelessness.

For many young people who identify as LGBTQ2S, the chance to live as a teen and grow into adulthood in a safe and healthy way is often undermined by the persistence of homophobia and transphobia, which can occur in the home, the community and schools, and through many of the public and private services that are intended to support young people.

Homophobia and transphobia lead to many LGBTQ2S youth being in situations where it is no longer safe or tenable for them to remain in their homes, schools and communities. In other words, homophobia and transphobia are major contributing factors to youth homelessness (Abramovich, 2012, 2016; Choi, Wilson, Shelton, & Gates, 2015; Cochran, Stewart, Ginzler, & Cauce, 2002; Durso & Gates, 2012; Kipke, Weiss, & Wong 2007; Ferguson & Maccio, 2015). While LGBTQ2S youth make up 5 to 10% of the general population, it is estimated they make up 20–40% of the overall homeless youth population (Crossley, 2015; Josephson & Wright, 2000; O'Brien, Travers, & Bell, 1993; Quintana, Rosenthal, & Krehely, 2010).

What is and should be the role of public policy in this? There are many ways to think about what policy can and should achieve, and what its role should be in furthering public interests at the government, community and institutional levels. If the goals of good public policy include justice, the defence of human rights, and the enhancement of inclusion,

respect and well-being for individuals and communities, a question to be asked is how does—or, more importantly, how should—policy address the needs and interests of LGBTQ2S youth, in particular those who are at-risk of or experiencing homelessness? In this chapter, we will explore the relationship between homophobia and transphobia, and the experience of youth homelessness, and provide a way of thinking about how sound public policy may enhance the inclusion and well-being of all young people, especially LGBTQ2S youth.

Tracing the Link Between Homophobia, Transphobia and Youth Homelessness

There is a considerable body of research identifying that LGBTQ2S youth are overrepresented in the youth homelessness population (Abramovich, 2012, 2013, 2016; Choi et al., 2015; Cochran et al., 2002; Gaetz & O’Grady, 2002; Gaetz, O’Grady, Kidd, & Schwan, 2016; O’Brien et al., 1993).

The recent first national survey on youth homelessness in Canada, *Without a Home*, revealed that 29.5% of youth experiencing homelessness identify as LGBTQ2S (Gaetz et al., 2016, p. 31). While transgender people make up less than 0.5% of the Canadian population, transgender youth and gender non-binary youth are considerably overrepresented in the population of young people experiencing homelessness, at 1.8% and 2.5%, respectively (Bauer et al., 2015). Compared with heterosexual and cisgender young people experiencing homelessness, research demonstrates that LGBTQ2S youth typically face more adverse circumstances contributing to their homelessness. “Transgender and LGBTQ2S youth are more likely to leave home at an early age. These youth are also much more likely to report parental conflict and childhood physical, sexual and/or emotional abuse as contributing factors to their homelessness” (Gaetz et al., 2016, p. 8).

So, what is the link between being young and experiencing homelessness, and identifying as LGBTQ2S? Clearly, the experiences of homophobia and transphobia have an impact on the lives of young people in communities across Canada, the United States, and elsewhere. Such experiences can lead to important ruptures in the family, in some cases resulting in emotional abuse and outright rejection by other family members (Ray, 2006). LGBTQ2S youth in general, and transgender youth in particular, may also experience threats to their inclusion and safety in the community and at school (Higgins, 2016; Taylor & Peter,

2011). Discrimination may result in challenges to accessing health care and mental health and social supports. Discrimination can also lead to barriers in obtaining employment, education and housing. All these factors limit opportunities, lead to distress and exclusion, and undermine housing stability, with the result that it may be undesirable, unsafe or even impossible for a young person to remain at home or in their communities. With limited supports and nowhere to go, many young people eventually wind up homeless.

For LGBTQ2S youth, things don't necessarily get better once they are on the streets. Abramovich (2016) notes that: "Compared to their heterosexual and cisgender counterparts, LGBTQ2S youth face increased risk of physical and sexual exploitation, mental health difficulties, substance use, HIV risk behaviours, and suicide (Denomme-Welch, Pyne, & Scanlon, 2008; Durso & Gates, 2012; Ray, 2006)" (Abramovich, 2016, p. 87). The *Without a Home* study found that LGBTQ2S youth reported more mental health concerns, including depression and attempted suicide (Gaetz et al., 2016 p.65). They were also more likely to experience criminal victimization while homeless, including physical and sexual assault (Gaetz et al., 2016, p. 81).

Given the clear overrepresentation of LGBTQ2S youth in the population of youth experiencing homelessness, and the considerable adversity they experience on the streets when compared with their heterosexual and cisgender counterparts, it is worth exploring how the community and the youth homelessness sector have responded to their needs.

Unfortunately, the homophobia and transphobia that young people have experienced in their past often continue in the service environment. This process begins with what Abramovich (2016) calls the "institutional erasure" of sexual and gender minority youth through policies and practices that make heteronormative and cisnormative assumptions (Abramovich, 2016; Namaste, 2000; Serano, 2007). Crisis services for youth experiencing homelessness, from emergency shelters to day programs to health care services, often operate on these assumptions. The outcome is that LGBTQ2S individuals, and their needs and unique circumstances are ignored "by not including them in key forms, reports and the day-to-day operations of programs, institutional rules and policies that do not consider or include LGBTQ2S identities, particularly transgender identities" (Abramovich, 2016, p. 88). Transgender and gender-expansive youth face additional barriers when attempting to access and successfully engage in housing-related services and programs. Service institutions are often rooted in cisnormative assumptions (Shelton, 2015). For instance, shelters, services and day programs are often segregated based on a binary male and female

service dichotomy, without policies and practices to accommodate or even acknowledge the experiences and needs of young people who do not fit heteronormative or cishnormative categories. Abramovich argues that the exclusion of LGBTQ2S identities from key forms and processes (e.g., intake, assessment, case management) further reinforces for staff the invisibility of LGBTQ2S identities and the idea that the needs of LGBTQ2S youth are not a priority. In environments where youth may be exposed to encounters and experiences with young people and staff that undermine their dignity, safety and well-being, it is possible that those in helping professions are not positive supporters or even neutral observers, but instead a significant part of the problem. If homelessness services actively participate in reproducing the homophobia and transphobia that contribute to youth homelessness in the first place, we have to ask ourselves: What is the necessary policy context that will ensure all young people, regardless of their gender and sexual identities, get what they need to help them move forward in their lives in the safest, healthiest and most inclusive way possible?

The Role of Inclusive Public Policy in Addressing the Needs of LGBTQ2S Youth

Let's begin by talking about what we mean by policy. Simply put, policy provides guidance and direction for the delivery of services and programs for the public. Procedures follow to describe how policy will be put into action and what methods of accountability will ensure follow-through. Most people associate policy with the actions of government, but policy also applies to how communities and institutions address issues and problems.

Policy decisions take into consideration a wide range of factors, including existing laws and the constitution, values, tradition, public opinion, current circumstances and expediency, emerging and existing national and local priorities, research and evidence, and the ideological predisposition of elected officials (Anderson, 2015; Davies, 2004). The point is, there is no singular goal for public policy, and the factors that influence its development and implementation vary.

In this context, it is fair to say the very role of public policy in advancing an inclusive or social justice agenda is contested, as there is not widespread agreement on the role of public policy in furthering these agendas (Craig, Burchardt, & Gordon, 2008). However, if both human rights and homelessness are areas of concern for public policy in Canada and the United States, let us make the claim here that policy should also be a key consideration in addressing youth

homelessness. That is, the goal of good public policy should include justice, the defence of human rights, and the enhancement of inclusion, respect and well-being for individuals and communities. There are four lenses through which we should view effective and inclusive policies addressing the needs of LGBTQ2S youth: Human Rights, Equity, Positive Youth Development and Youth Voice. These should become the key pillars of an effective policy.

- **Human Rights:** Inclusion and a participatory approach to decision-making give those directly affected a seat at the table with decision-makers, while a focus on accountability and accessing remedies helps to distinguish roles and responsibilities. We begin with the assertion that youth homelessness exists because basic human rights of young people have been denied and this must be remedied through effective policy, laws and practice.¹ Our approach to meeting the needs of LGBTQ2S youth should also be framed in terms of international human rights obligations,² and be grounded in a human rights framework that will inform all stages of policy development, implementation and evaluation. A human rights approach requires a paradigm shift, so that instead of creating laws that discriminate against or punish youth, especially LGBTQ2S youth, all levels of government must urgently address the systemic causes of youth homelessness and provide legal protections for their human rights, including the right to housing.
- **Equity:** The word equity refers to the principle of fairness. This should seem obvious, but it is often misunderstood. In my conversations with service providers, I have often heard this claim made: “We don’t have a problem with LGBTQ2S youth because we welcome everyone—we treat everyone the same.” While on the surface laudable, this kind of thinking reflects a common confusion between equity and equality, assuming they mean the same thing. Equality means treating everyone the same, regardless of differences. Equity means acknowledging privilege versus the marginalization that some individuals experience, and then ensuring that people are not only actively included, but also have their needs met based on their experiences and circumstances. Equity also acknowledges that structural factors such as racism, sexism, heterosexism, cissexism, homophobia and transphobia exist, and create unique challenges and exclusionary practices that must be acknowledged and directly addressed through policy and practice. Rather than simply treating everyone the same, an equity framework therefore demands a more proactive approach to inclusion.

¹ For more information about a human rights approach to youth homelessness, see *Youth Rights, Right Now! Ending Youth Homelessness: A Human Rights Guide* (2016), published by Canada Without Poverty; A Way Home Canada; Canadian Observatory on Homelessness; Feantsa. <http://homelesshub.ca/sites/default/files/YouthRightsRightNow-final.pdf>

² A number of international human rights agreements, signed by Canada, define rights relevant to homeless youth. Four core United Nations documents are the International Covenant on Civil and Political Rights (ICCPR), the International Covenant on Economic, Social and Cultural Rights (ICESCR), the Convention on the Rights of the Child (CRC) and the International Convention on the Elimination of All Forms of Racial Discrimination (ICERD).

- **Positive Youth Development:** Adolescents and young adults go through many developmental changes. This can include physical, cognitive, social and experiential changes. A *Positive Youth Development* approach means that in our effort to enhance the skills, abilities and opportunities of young people, our consideration goes well beyond risk, danger and challenges, and also builds on strengths and assets that young people possess. Policies, programs and practices should focus on increasing protective factors and resilience. For LGBTQ2S youth, this means their varied gender and sexual identities must be seen, not as problematic and connected to negative outcomes, but positively, so that LGBTQ2S identities, spaces and environments are created and supported. The goal of policy, then, is not simply to protect LGBTQ2S youth from harm, but to create a context where they are respected for who they are, and their identities are celebrated and welcomed.
- **The Youth Voice:** Developing and implementing effective policy and quality assurance practices must involve the voices and input of LGBTQ2S youth. It needs to be acknowledged and understood that LGBTQ2S youth have both a unique understanding of the factors that contributed to their homelessness and what the homelessness sector can do to offer a more supportive and effective response. In thinking about the youth voice, it is also important to consider diversity among LGBTQ2S youth. This is not a homogeneous population. For instance, trans youth will have different experiences, concerns, needs and challenges than lesbian, gay, and bisexual youth. Some young people will be doubly and triply marginalized as racialized youth, young women, Indigenous youth or because they are newcomers. A thoughtful and inclusive approach to engaging young people in a meaningful way will take this into account.

Policy into Action

In thinking about how to respond to LGBTQ2S youth homelessness, we must tie it to a broader vision of how to address homelessness. There are three things we can do to address homelessness. First, we can prevent it from happening in the first place by addressing the drivers of homelessness. Second, we need emergency services of some kind, because no matter how good our prevention strategies are, some people will slip through the cracks, and some will be in crisis situations and require emergency services. Third, we need to help young people move out of homelessness as quickly as possible, by providing appropriate housing and supports to ensure they do not experience homelessness again.

Government Policy

The role of government in addressing the needs and circumstances of LGBTQ2S youth who experience or are at risk of homelessness begins with an acknowledgement of the rights of such young people to housing, safety, dignity, access to education, health care, and other supports and freedom from discrimination. Government can support the development and implementation of institutional policy at the community and organizational level. But government can also play a much bigger role. If we want to shift from simply ‘managing’ the crisis to preventing and ending youth homelessness, we need to consider the role of higher levels of government. This shift is key, because for gender-expansive and sexual-minority youth, it makes more sense to work to support young people and their families, so they can build natural supports and stay in place in their communities until they choose to leave in a safe and planned way—in essence, avoid homelessness altogether.

The prevention of youth homelessness must involve policies, programs and practices designed to reduce the risk of youth becoming homeless. This may involve working upstream through policies and legislation that are considered universal in scope because they address discrimination in general, and homophobia and transphobia in particular. It means ensuring that government does not make matters worse through policy and legislation that, in practice, promotes or enables homophobia and transphobia. These are considered universal prevention strategies because they apply to the population as a whole, while not designated “homelessness prevention,” can have the intended or unintended outcome of reducing the risk of homelessness for many youth.

Selected prevention involves more targeted strategies aimed at institutions with which young people regularly engage, including, among others, the educational system, community programming and services, health care and employment. This is key, because it is known that LGBTQ2S youth often experience “barriers and challenges to accessing health care and support services due to a lack of LGBTQ2S culturally competent staff and homophobic and transphobic discrimination” (Abramovich, 2012). School is particularly important because this is the institution that virtually all youth attend at some point, and it can be either a place that is supportive and inclusive, or sites of discrimination and bullying. School-based anti-discrimination and anti-bullying programming must specifically and explicitly address homophobia and transphobia, and schools should be mandated to implement strategies of inclusion.

For young people at imminent risk of homelessness, there are a range of early intervention strategies that focus on preventing young people from becoming homeless, and if they do experience homelessness, ensuring the experience is as brief as possible. Targeted and place-based early intervention and place-based case management, such as *Youth Reconnect* programs, provide young people and their families with supports once a young person has been identified as being at risk of homelessness. Government funding and policy to support such programming helps young people stay in place in their communities and obtain the supports they need. *Family First* approaches are critical, because family breakdown and the rejection of young people based on their gender, sexual orientation, or both, are key drivers of homelessness. There are early intervention programs of this type in several communities in North America that involve family mediation and supports, and efforts to help parents shift from rejecting to embracing their youth. Early intervention may also involve shelter diversion strategies, such as *Host Home* programs to provide short- or long-term sanctuary for LGBTQ2S youth in their communities, so they can remain connected to school and the natural supports they may have in their local area. A condition of funding for all such programming must be that services are LGBTQ2S-positive, safe and affirming, with ongoing training and support for staff, and accountability measures in place to ensure compliance.

Higher levels of government often provide funding for local community services. Again, government policy must ensure funding goes to institutions and organizations that proactively address homophobia and transphobia through institutional policy, practice and training (more on this below).

Finally, there is no way to predict where a young person will show up in the system, so it is imperative to make sure there is no ‘wrong door’ for young people seeking help. Government policy and funding must be aligned in a way to ensure LGBTQ2S youth have access to targeted supports if that is what they want, but the system must also be equipped to support all young people in a manner that is competent, positive, and affirming of LGBTQ2S youth. If homophobia and transphobia are drivers of youth homelessness, it is incumbent on government—municipal, provincial, territorial, state and federal—not to directly or implicitly support programming or institutions that further harm, through discriminatory practices, the very young people they putatively want to support.

Organizational and Institutional Policy

In most North American communities, the response to homelessness can be characterized as a crisis response, which relies largely on emergency services, so let's start there. Emergency services can include emergency shelters, day programs, transitional housing, and targeted services and supports, including health care, employment, housing supports, life skills, and others. It is these services young people experience first-hand, so the role of inclusionary institutional policy at the community and organization levels must be considered.

An inclusionary policy to support LGBTQ2S youth should include service standards that require service providers to develop and implement non-discriminatory policies, practices and training as a condition of funding. Such policies will support organizations to provide inclusive and LGBTQ2S-positive services and environments. A good resource to support this work is the National Learning Community on Youth Homelessness' *LGBTQ2S Toolkit*.³ This comprehensive toolkit identifies institutional standards for organizations working with youth experiencing homelessness. The toolkit argues that organizational policy should acknowledge LGBTQ2S youth and, from a practice perspective, should address their needs in compliance with the four pillars of inclusion. All organizations—including shelters, day programs, transitional and *Housing First for Youth* programs—need to put in place standards and practices that focus on the dignity, safety and inclusion of youth. This means that where possible (acknowledging that smaller communities may not have an extensive infrastructure) young people have options, including facilities that specifically target and cater to the needs of LGBTQ2S youth. At the same time, all other services should also conform to inclusive standards, because LGBTQ2S youth may prefer those other options. Finally, the unique needs of transgender and gender non-binary youth must be acknowledged and addressed.

From a practice perspective, this means providing welcoming, affirming and safe spaces for all young people, regardless of their gender and sexual identities. As part of this strategy, organizations need to work toward designing and implementing intake, assessment and case management processes that respect gender diversity, and provide gender inclusive programs, washrooms and service areas. Organizations should put in place appropriate and diverse resources, including program and support options that target the needs of LGBTQ2S youth and help young people access similar resources outside each organization.

³To access the toolkit visit <http://lgbtq2stoolkit.learningcommunity.ca/>

The *LGBTQ2S Toolkit* also highlights the importance of ongoing commitment to training and professional support for staff. This includes how to address homophobia and transphobia on the part of both clients and staff, and a basic understanding of how “LGBTQ2S youth interact with their environments and how their environments interact with them” (National Learning Community, 2016). Training must be comprehensive and ongoing, not one-time only, because many service environments may have numerous part-time staff and considerable staff turnover.

Finally, a key feature of any inclusive policy and strategy is accountability. Organizations need to put in place accountability measures to ensure compliance, including employment standards, ongoing evaluation and a formal complaints/grievance procedure that is safe and responsive to the needs of LGBTQ2S youth.

Conclusion

It is well established that LGBTQ2S youth are overrepresented in the youth homelessness population, and that this is largely an outcome of the persistence of homophobia and transphobia in our society. Understanding the causes and drivers of youth homelessness suggests that, not only do we know what to do, but that as a society we are compelled to do it. Sound public policy can support and direct the development and implementation of solutions that attend to the needs of gender and sexual minority youth, but it can also ensure the system as a whole does not replicate or amplify the homophobia and transphobia that young people experience leading up to their homelessness. The case study presented following this chapter offers examples of what an inclusive government policy can look like. Organizations working with young people must address these issues from a policy, practice and training perspective. Failure to do so means that services and institutions become part of the problem.

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9.1 A PROVINCIAL RESPONSE TO LGBTQ2S YOUTH HOMELESSNESS¹

David French

Introduction

Alberta is a western province in Canada with an estimated population of 4,268,929, as of October 1, 2015. It is Canada's fourth most populous province and the most populous of Canada's three prairie provinces. Alberta's two largest municipalities, Edmonton and Calgary, make up just under half the province's total population, with a combined population of 1,999,447. The Edmonton–Calgary corridor is the most urbanized region in the province, and one of the most urbanized regions in Canada, covering approximately 400 kilometers north to south. It is also one of the fastest-growing regions in the country. Alberta has experienced success in addressing homelessness through *A Plan for Alberta: Ending Homelessness in 10 years* (known as the 10-Year Plan). Since the plan's inception in 2009, more than 13,458 Albertans experiencing homelessness have received housing and supports, and approximately 73% remain successfully housed, but we can do more. The 10-Year Plan states that Albertans from some specific groups, including youth experiencing homelessness, are dealing with particularly challenging issues, and require targeted responses to help them be rehoused. *Supporting Healthy and Successful Transitions to Adulthood: A Plan to Prevent and Reduce Youth Homelessness* (Youth Plan) aligns with the Housing First response, integrated service delivery and client-centered approaches from the 10-Year Plan. The Youth Plan represents the next step in the 10-Year Plan, and is a targeted response to a specific population.

Why a Plan for Youth?

Understanding the factors that lead to youth homelessness is not easy, considering the complex issues affecting that population, and the many possible pathways to homelessness. The Youth Plan was developed to address the unique needs of youth, and emphasizes

¹ Some material from this case study appeared first in the Government of Alberta's *A Plan for Alberta: Ending Homelessness in 10 years* and *Supporting Healthy and Successful Transitions to Adulthood: A Plan to Prevent and Reduce Youth Homelessness*, to which this author was a contributor. The original publications are available online (see references).

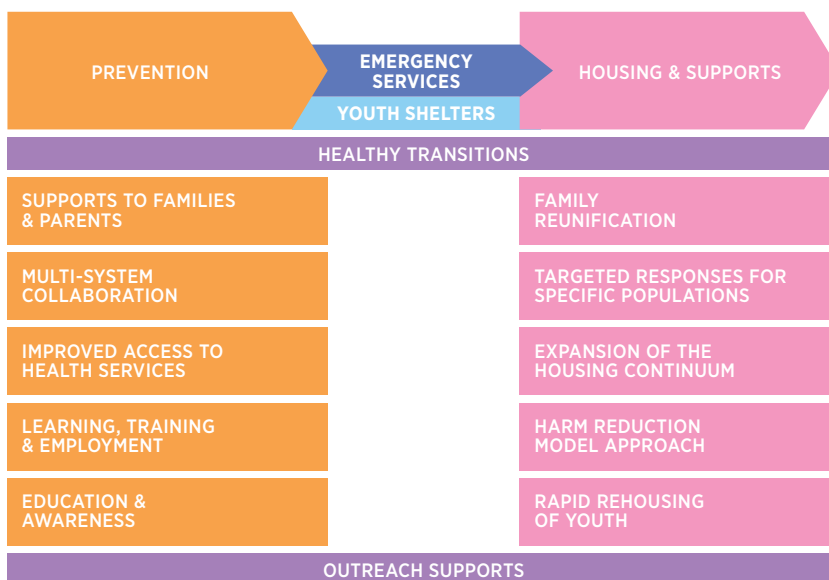
strengthening families first, as well as ensuring that youth experience healthy transitions across the system of care. Preventing youth homelessness and reunifying families when possible are the top priorities. The Youth Plan, guided by the principles of Alberta's Social Policy Framework, was designed to align with other government programs and systems.

Before the development of the Youth Plan, the Government of Alberta's response to youth homelessness placed much of the emphasis on the emergency response. While emergency services are important and necessary, we cannot rely on these as 'the system' to deal with youth homelessness. The strategies presented in the Youth Plan suggest a new way to address youth homelessness that builds on three existing components: 1) Prevention 2) Emergency services and 3) Housing and supports. However, the Youth Plan shifts the emphasis, making prevention and housing and supports greater priorities. Emergency services are still provided, with expanded supports, to facilitate this shift in Alberta's response.

CURRENT RESPONSE



FUTURE RESPONSE



The Youth Plan represented an opportunity to refine specific responses and align ongoing work being led through the 10-Year Plan. Ensuring healthy transitions across the system needed to be emphasized to help us achieve our goal of preventing and reducing youth homelessness as we changed our approach to how we responded to youth at risk of homelessness or experiencing homelessness. The Youth Plan builds on effective existing community-based services and introduces new evidence-based actions to address the complex issue of youth homelessness. It was the first provincial response to homelessness for a specific population in Alberta, and was guided by a vision and mission (see below).

Vision

An Alberta where all youth have a safe, supportive and nurturing home.

Mission

To reduce the number of youth experiencing homelessness in Alberta and prevent further youth from becoming homeless by ensuring that youth and their families have the services and supports they need.

The overarching goals of the Youth Plan are two-fold:

- Prevent youth from becoming homeless, using family supports and education;
- Rapidly rehouse homeless youth, using family reunification or supportive living in a client-centred approach.

The Youth Plan defines homeless youth as those Albertans who are between the ages of 13 and 24 and:

- Are without a permanent place of residence;
- Live on the street, in shelters or in places that are not intended or suitable for permanent residence;
- Are ‘couch-surfing’ or temporarily living with others for short periods of time.

During the development of the Youth Plan, research and community conversations led to significant insights about the paths into and out of homelessness for youth. These community conversations included meaningful discussions with youth experiencing homelessness, which clarified that the paths into homelessness are relatively predictable and generally include some of the following factors:

- Experience with the Child Intervention system, particularly for those placed in care;

- A history of family conflict or instability;
- One or more mental health conditions in the youth or a family member;
- Alcohol and/or substance abuse in the youth or a family member;
- Belonging to a family experiencing poverty;
- Exposure to abuse or other victimization;
- Previous episodes of temporary homelessness.

With one or more of these factors as a precursor, youth are at risk of experiencing a crisis or incident that leaves them without a permanent residence. Sometimes parents or guardians may decide they are no longer able to care for the youth, or cannot afford to pay for the youth's basic needs. Or youth may make the choice to leave, which often occurs in the case of abusive or otherwise unsafe home situations. However, it is important to note that even when homelessness begins this way, as a youth's 'choice,' the element of choice vanishes once the youth becomes entrenched in homelessness.

Alberta Data

Although seven municipal centres in Alberta conduct homeless counts bi-annually, the scope and prevalence of youth homelessness across the province has been unclear. Homeless counts represent a snapshot in time for municipalities; however, depending on the methodologies and definitions used, they may not provide accurate data for the youth population. Moreover, the data collected by Alberta's municipalities was not consistent, making it difficult to make comparisons across communities. Before 2012, youth experiencing homelessness were often not specifically counted, except when they were identified as belonging to a family experiencing homelessness. In October 2014, the first provincially coordinated and unified homeless point-in-time (PiT) counts were conducted in the province's seven major municipalities: Calgary, Edmonton, Red Deer, Grande Prairie, Fort McMurray, Lethbridge and Medicine Hat. The counts were coordinated by the community-based organizations that administer Human Services' Housing First wraparound support dollars (through the Outreach Support Services Initiative) and implement community plans in support of Alberta's 10-Year Plan. The data shows an overall reduction in homelessness from 2008 to 2014 of 15.6%, and a 3.7% decrease in homelessness compared with the counts conducted from 2012 to 2013. However, since the methodology changed for the 2014 count, and Red Deer and Medicine Hat did not conduct counts in 2008, the data on youth homelessness in the report from the 2014 count will be

used as the baseline to which future counts can be compared. A total of 6,653 individuals were counted and 20.2% (1,343) of these were youth under the age of 24.

Based on emerging Canadian research (Raising the Roof, 2009; Abramovich, 2012) it was clear that LGBTQ2S youth are overrepresented in the homeless youth population. Therefore, the Alberta Government endeavored to conduct focused, evidence-informed research to use in developing recommendations about LGBTQ2S youth homelessness, which could serve as a direction-setting, integrated approach across the province.

Focusing on LGBTQ2S Youth

With the Youth Plan still under development and moving towards policy approval, work began to refine the targeted responses identified within it. Given the range of youth at risk of homelessness or experiencing homelessness, ending youth homelessness in Alberta would require targeted responses for specific subpopulations. Critical attention was given to meeting the needs of youth with mental health and/or addictions issues, youth with Fetal Alcohol Spectrum Disorder (FASD), Indigenous youth, youth who were new to Alberta, and LGBTQ2S youth. These subpopulations are disproportionately represented among homeless and street-involved youth.

The actions, as identified in the Youth Plan, are as follows:

- Develop strategies and responses based on research and promising practices that reflect the unique needs of diverse youth, including Indigenous people, immigrants and the LGBTQ2S community.
- Develop a common understanding of the unique causes of homelessness, such as discrimination and inequality, for these subpopulations.
- Monitor and evaluate targeted responses for continuous improvement in serving subpopulations of youth.

Rather than adopting the common ‘one size fits all’ approach, it was seen as crucial that programs and policies in the Youth Plan that focused on the LGBTQ2S population reflect the diversity of that population’s experiences. The early emphasis on this work was to develop:

- Short-term opportunities: solutions that could be implemented immediately to streamline and prioritize service delivery for LGBTQ2S youth;

- Medium-term opportunities: solutions that required system planning and negotiations with funders and agencies to adopt;
- Long-term opportunities: solutions that required policy change or legislation reform to ensure that responses and service delivery are tailored to LGBTQ2S youth.

The effectiveness of these efforts relied upon the openness, collaboration, and partnership of communities and experts to ensure policies and programs were capturing the most important elements. Leaders within the Alberta government knew this work must be grounded in research to influence other provincial governments to prioritize the needs of LGBTQ2S youth. Dr. Alex Abramovich from Toronto, Ontario was identified as the best candidate to support this work. Dr. Abramovich had been working in LGBTQ2S youth homelessness for years, and was a recognized leader in the field, as well as being one of only a few Canadian researchers studying the issues of queer and trans youth homelessness.

Engaging the Community

Beginning in October 2014, Dr. Abramovich, the Government of Alberta and community partners worked on a report, *A Focused Response to Prevent and End LGBTQ2S Youth Homelessness* (the Report), which provided to the Government of Alberta six key recommendations developed over the course of 10 months with the support of the provincial LGBTQ2S working group. The recommendations align with and support the Youth Plan, and reflect the current needs of the youth-serving sector, including housing programs and shelters, across the province.

Informal and formal data were collected during the early engagement phases of the work, using surveys, group activities and questions. The goal was to learn more about staff training in LGBTQ2S cultural competency and anti-homophobia and anti-transphobia material; community stakeholders' level of comfort addressing homophobia and transphobia in services and programs; and community stakeholders' perspectives and understanding regarding LGBTQ2S youth homelessness. The provincial LGBTQ2S working group (the Working Group) was established in response to the data collected, to encourage interagency collaboration and partnership-building between services; support the development of policy recommendations; and implement program strategies for responding to the needs of LGBTQ2S youth at risk of or experiencing homelessness in Alberta.

The short-, medium-, and long-term opportunities identified in the Report provided an outline and agenda to begin to prioritize LGBTQ2S youth homelessness in Alberta. Before the Report was released, many efforts were already taking shape or being implemented. They included: 1) Developing an Alberta LGBTQ2S resource list providing youth and agencies with a comprehensive list of LGBTQ2S-specific services, programs, workshops and events; working group members have reported using the resource list for referrals and have uploaded the list onto agency websites; 2) Identifying local organizations (the Edmonton Pride Centre and the Calgary Sexual Health Centre) in Alberta to lead the delivery of comprehensive LGBTQ2S province-wide training; 3) Several youth-serving agencies independently securing LGBTQ2S cultural competency training from the Edmonton Pride Centre, the Calgary Sexual Health Centre, and the Institute for Sexual Minority Studies (iSMSS); 4) Developing local and out-of-province partnerships (e.g., The 519 Church Street Community Centre, Toronto, Ontario, Edmonton Pride Centre, Edmonton, Alberta and Calgary Sexual Health Centre, Calgary, Alberta), and interagency collaboration; 5) Increasing opportunities for Working Group members to learn how to meet the needs of LGBTQ2S youth experiencing homelessness, and how to better support one another; 6) Developing internal agency LGBTQ2S working groups.

Recommendations

The recommendations provided in the Report foster a standardized model of care for government and all youth-serving agencies, which is necessary in creating accepting, affirming and supportive environments for youth. The core recommendations of the Working Group to the Government of Alberta included:

1. Support the delivery of LGBTQ2S-specific housing options (develop new housing options and/or refine existing housing options), including:
 - Emergency shelter beds available to LGBTQ2S youth;
 - Transitional housing programs;
 - Supportive housing programs (Housing First) that are choice-focused and place-based (e.g., Host Homes).
2. Support the delivery of population-based programs for LGBTQ2S youth that foster an intersectional approach (develop new programs and/or add to programs provided by existing services), including:
 - Drop-in programs that offer arts, social, cultural and recreational activities;

- Mentoring programs;
 - LGBTQ2S health clinic hours;
 - Skill-building and employment support;
 - Population- and/or cultural-specific programming to provide cultural connectedness and access to cultural traditions and practices, including newcomer/immigrant LGBTQ2S youth, LGBTQ2S youth of colour and two-spirit Indigenous youth.
3. Create provincial housing and shelter standards that focus on working with and meeting the needs of LGBTQ2S young people by providing:
- A standardized intake process (see Appendix C in the Report for questions regarding gender and sexual identity);
 - Respect and acceptance by service providers for each client's self-defined gender identity and gender expression, including chosen name and pronoun;
 - A gender-inclusive washroom policy that ensures all services are equipped with single-stall, gender-inclusive washrooms (this may be in addition to gendered washrooms in some service locations) and providing the tools, such as signage, required to convert washrooms;
 - Guidelines for mandatory and ongoing training, during the first three months after hiring, for all front-line staff, management and volunteers in youth-serving organizations across the province, as well as for foster parents and families fostering LGBTQ2S youth;
 - The continuation of the existing provincial LGBTQ2S Working Group;
 - Appropriate and diverse resources, including pamphlets, fliers, wall posters, and information on coming out, LGBTQ2S health, safe sex and local LGBTQ2S services and events, to be available at all shelters, housing programs and youth-serving organizations, with a recommendation that staff be made aware of available LGBTQ2S-specific programs, so they can refer youth to appropriate services as needed;
 - A separate standard regarding access to services for transgender, two-spirit, and gender non-conforming individuals, stating that all shelters/housing programs and youth-serving organizations must accommodate all transgender, two-spirit, and gender non-conforming residents/clients according to their self-identified gender. Services should also be equipped with the appropriate resources and knowledge to refer youth to transition-related treatment (e.g., hormone therapy, legal name change, counselling), and funding and support should be made available for transition-related needs;
 - A formal grievance/complaints process that will be implemented by all shelters and housing programs to allow clients/residents to lodge formal, anonymous complaints.

Clients must be informed of the procedure during intake, and the grievance/complaints process must be posted in a conspicuous area of the service location.

4. Develop integrated provincial training solutions for expanded staff training for all aspects of LGBTQ2S cultural competency, by:
 - Expanding LGBTQ2S youth homelessness training in Alberta for all youth serving-organizations by supporting partnerships between the Calgary Sexual Health Centre and the Edmonton Pride Centre, as well as other local or out-of-province organizations (e.g., The 519 Church Street Community Centre, Toronto, Ontario), and by borrowing key principles from best-practice guidelines and successful training models;
 - Promoting the delivery of immediate training to organizations and communities, such as rural and remote communities, that lack specialized LGBTQ2S resources and have requested support to meet the needs of LGBTQ2S youth;
 - Ensuring that LGBTQ2S cultural competency training includes, but is not limited to, the areas described below (depending on the population served):
 - *Language/terminology*: Help staff develop more understanding and clarity regarding LGBTQ2S language and terminology, and navigate discussions with comfort and ease.
 - *Homophobia and transphobia*: Increase understanding and awareness of the causes of homophobia and transphobia and the importance of intervention, as well as the needs and experiences of LGBTQ2S homeless youth and the barriers they have faced. Training will help participants identify and intervene when homophobic and transphobic incidents occur, as well as learn how to create safe, secure, and affirming spaces for LGBTQ2S youth.
 - *Transgender awareness*: Help staff understand how to support transgender youth, provide a private space for staff to ask questions regarding working with transgender youth, help organizations create a transgender inclusion policy and develop trans-inclusive and trans-affirming services, become more knowledgeable and develop strategies to reduce barriers for trans service-users.
 - *Two-spirit/Indigenous*: Increase understanding and awareness of two-spirit identity, Indigenous cultures and traditions, and of Indigenous people who identify as LGBTQ2S. Training will help service providers create culturally sensitive programs and spaces, and help reduce stigma and discrimination towards LGBTQ2S-identified Indigenous youth.
 - *Systems Navigation*: Ensure that staff members are aware of all local LGBTQ2S resources and programs available for client referrals and education.

5. Develop a prevention plan that emphasizes strategies for early intervention, raising awareness, and programming for children, youth and families, including:
 - Preventing LGBTQ2S youth from becoming homeless, preventing LGBTQ2S youth from becoming adults experiencing chronic homelessness, supporting family first/family reconnection (when there is a supportive family member), and encouraging schools with a Gay–Straight Alliance (GSA) to explore the role of the GSA in supporting LGBTQ2S students;
 - Working collaboratively in a multi-system approach to promote awareness and provide families, teachers, support workers, health care professionals and communities with resources and outreach information, and sharing programs, so that when young people come out as LGBTQ2S, they are provided with the support they need;
 - Placing more emphasis on prevention to help shift the current response to LGBTQ2S youth homelessness from an emergency approach to a longer-term approach, thus aligning with Alberta’s Youth Plan.

6. Develop the capacity for research that frames new approaches and solutions to LGBTQ2S Youth Homelessness, through:
 - Investigating LGBTQ2S youth homelessness in rural Alberta;
 - Evaluating new and emerging LGBTQ2S programs across the province, which will allow for future LGBTQ2S housing services to operate from an evidence-based model;
 - Reassessing LGBTQ2S-specific questions on measurement procedures and point-in-time counts;
 - Ensuring that volunteers conducting counts and surveys receive sensitivity training before asking questions of youth about their gender and sexual identity, and ask every respondent about gender identity, not only those respondents that volunteers perceive as transgender or gender-nonconforming;
 - Integrating LGBTQ2S youth with lived experience and LGBTQ2S organizations into the design and execution of counts, which will improve outreach, especially to those youth who are not accessing services;
 - More accurately measuring LGBTQ2S youth homelessness in Alberta, which may help us better understand how LGBTQ2S youth move through programs and systems, and which interventions are working;
 - Focusing research on prevention strategies to identify those that are successful and should be used.

Early Results

The Report was formally released by the Minister of Human Services, the Honourable Irfan Sabir, in March 2016. The release of the Report allowed its findings to be shared across government departments and through various stakeholder channels. The Working Group remains operational, and its membership continues to grow, along with its responsibilities to support implementation.

Recommendations currently being implemented are:

Recommendation #1 – Support the delivery of LGBTQ2S-specific housing options:

In February 2015, the Calgary Homeless Foundation issued a request for proposals for programs addressing youth homelessness. The Boys and Girls Clubs of Calgary was one of the applicants approved for funding. Their Aura Program, which is the first dedicated LGBTQ2S housing program in Alberta, launched in June 2015. With additional funding from Human Services, both the Calgary Homeless Foundation and Homeward Trust Edmonton are working to develop targeted LGBTQ2S-specific housing options for implementation in 2016–2017.

Recommendation #3 – Create provincial housing/shelter standards that focus on working with and meeting the needs of LGBTQ2S young people:

Development of recommendations related to LGBTQ2S Housing and Shelter Guidelines is being led by the Working Group and is to be completed in the near future. Current housing and shelter programs for youth do not have a comprehensive reference guide for how to implement programming for at-risk LGBTQ2S people. The recommended guidelines will seek to increase awareness of promising practices in supporting LGBTQ2S people, and identify specific measures that must be taken to ensure inclusive housing and shelter spaces for LGBTQ2S people are available. The recommended guidelines will also identify options for an integrated application of best practices, and provide options for guideline compliance, as well as an enhancement to current accreditation, licensing and approval of housing and shelter programs.

Recommendation #4 – *Develop integrated provincial training solutions for expanded staff training in all aspects of LGBTQ2S cultural competency:*

The Calgary Sexual Health Centre was granted funds to lead this work. The training is being developed in collaboration with the Pride Centre of Edmonton and the Working Group, with the goal of providing information to staff on how to support LGBTQ2S youth to achieve housing and housing stability.

Recommendation #6 – *Develop the capacity for research that identifies new approaches and solutions to LGBTQ2S Youth Homelessness:*

- A review of the gender-specific questions on the Human Services Homeless Management Information System (HMIS) Youth Shelter Data Collection System is underway to ensure that questions align with best practices as identified in the Report. The review and required changes will be completed by March 31, 2017.
- A Youth Needs/Risk Assessment has been developed in collaboration with government and community partners. The assessment includes specific questions about the gender and sexuality of a youth. The assessment is intended to provide a holistic understanding of the needs of and risks facing a young person, in order to effectively match them to appropriate supports.

Recommendation #2 – *Population-based programs for LGBTQ2S youth that foster an intersectional approach* and ***Recommendation #5*** – *Develop a prevention plan that emphasizes strategies on early intervention, awareness raising, and programs for children, youth, families,* have not been prioritized for implementation by the LGBTQ2S Youth Homelessness Working Group at this time.

Acknowledgements

The leadership demonstrated by Dr. Alex Abramovich and Alberta's youth serving community in developing and submitting this report to government should not go unnoticed. A careful blend of advocacy, evidence and risk-taking was needed to ensure the Government of Alberta accepted the recommendations and acted to implement them.

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10 CONCLUSION: THE WAY FORWARD

Alex Abramovich & Jama Shelton

All young people, regardless of sexual orientation or identity, deserve a safe and supportive environment in which to achieve their full potential.

Harvey Milk

The Canadian and American federal governments have increased their efforts to address youth homelessness in recent decades, primarily through funding direct service programs that are responsive to the needs of youth experiencing homelessness. These national responses are valuable and necessary, yet they are not sufficient, for the following reasons:

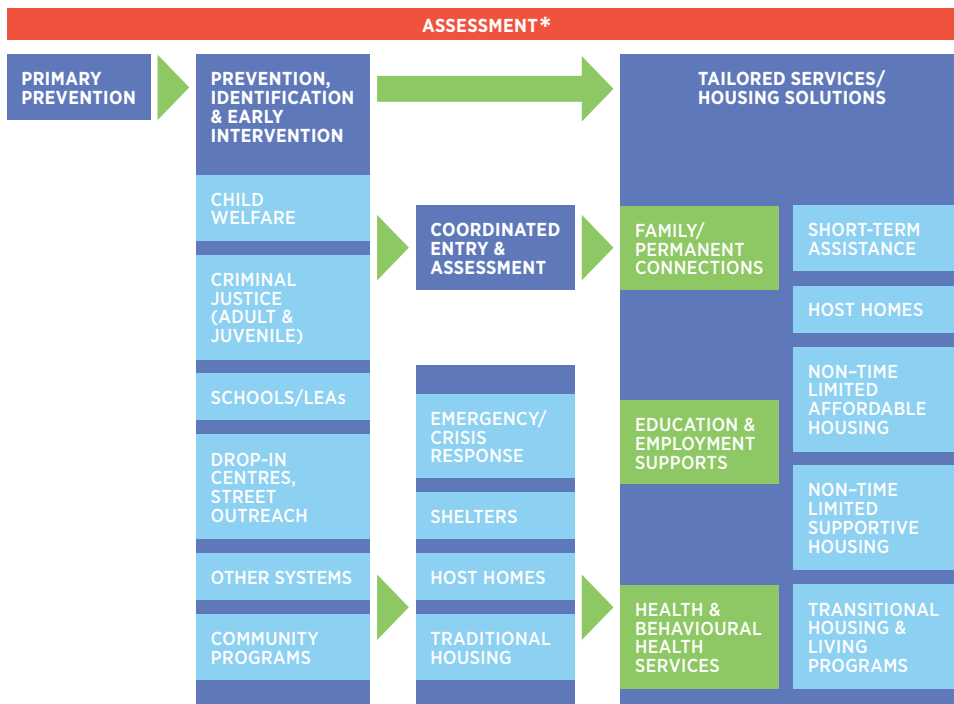
- Programs often lack a targeted, specialized response to LGBTQ2S youth, who face a unique set of challenges both before and during their experiences of homelessness, as well as when attempting to exit from homelessness.
- In their failure to enact non-discrimination policies inclusive of sexual orientation, and gender identity and expression, federal funding mechanisms do not ensure access to homelessness intervention programs for LGBTQ2S youth.
- Many program staff are not knowledgeable about the experiences of transgender youth, and as a result are not able to work with transgender youth in an affirming manner.
- Most funded programs focus on responding to the needs of youth once they are out of their homes, rather than preventing them from experiencing homelessness in the first place.
- Youth homelessness programs often do not address poverty, which is inextricably linked to homelessness and long-term housing stability.

The programs featured in this book, and others in Canada and the United States (U.S.), save the lives of LGBTQ2S youth experiencing homelessness. They often work with insufficient funding, sometimes in hostile local and national political climates, to meet the needs of far too many LGBTQ2S young people who are reliant upon them. They are leaders in addressing homophobia, transphobia, heterosexism, cissexism, colonialism, racism, and poverty. They are brilliant when it comes to engaging young people and in crafting plans, together with LGBTQ2S young people, to improve the chances that those young people will exit homelessness.

However, programs are not enough.

Programs alone will never adequately address LGBTQ2S youth homelessness. Programs should be part of a comprehensive, coordinated system that works to prevent LGBTQ2S youth from becoming homeless, and if homelessness occurs, quickly moving them into housing with appropriate supports.

COORDINATED, COMPREHENSIVE COMMUNITY RESPONSE TO ENDING YOUTH HOMELESSNESS



*Throughout the provision of services, assessment will be ongoing. Source: Hunter, S. (2016)

The system must include focused responses for LGBTQ2S youth. Focused responses, including targeted prevention tactics, specialized housing programs and building the capacity of existing housing programs to serve LGBTQ2S youth in a safe and affirming manner, are crucial components in developing a strategy to meet the needs of LGBTQ2S youth and promote social inclusion and acceptance of all young people accessing services (Abramovich, 2016).

That's when I feel homeless. Cuz they ain't no box for me. I'm Ahmed, ain't no box. And so that's when I felt homeless. When people will try to categorize me, felt they couldn't. So you're just some thing. Go somewhere. Because I don't want, I don't have the time to think beyond the shallow box and the shallow binary bullshit. I don't have time to think deeper.

A, 23 years old

Now is the Time to Act

Youth homelessness has been recognized as an issue warranting local, regional and national attention for decades. Likewise, the disproportionate rate of homelessness among LGBTQ2S youth has been common knowledge among advocates for youth experiencing homelessness and the LGBTQ2S community for over 20 years.

When I think about home, I think about a place...a relaxation place. A place where you can't be judged. A place where everything is perfect, your own perfect domain. A place where you can just be yourself. A place where you're surrounded by love, you know what I'm saying...a place...home, oh my god, oh...I can't wait until I have a home.

R, 21 years old

All Youth Deserve a Safe Home

The newly released *Youth Rights! Right Now!* guide (2016) places the issue of youth homelessness in a human rights framework, asserting that all youth have a fundamental, legal right to be free of homelessness and to have access to adequate housing. Situating LGBTQ2S youth homelessness within a human rights framework is a promising strategy for recognizing this group of young people as deserving of equal rights and a life with dignity—both as LGBTQ2S people and as people experiencing homelessness. Solutions to LGBTQ2S youth homelessness must include identifying a strategy for addressing the systemic cissexism and heterosexism that further relegate LGBTQ2S youth experiencing homelessness to the margins.

LGBTQ2S Youth Homelessness Requires a Specialized Response

If we are going to adequately respond to youth homelessness, we need targeted strategies for specific subpopulations that are disproportionately represented in the population of youth experiencing homelessness. Preventing, reducing and ending LGBTQ2S youth homelessness requires specialized responses and targeted strategies that carefully consider the unique and diverse needs of queer and trans youth. A one-size-fits-all approach will not work. LGBTQ2S youth must also be considered in the context of their membership in an oppressed and socially stigmatized group. The lives and experiences of LGBTQ2S people have historically been devalued through the passing of legislation relegating them to second-class citizenship. In fact, LGBTQ2S identities were criminalized and pathologized outright until relatively recently. Laws have not only explicitly restricted the rights of LGBTQ2S people; they have also systematically erased LGBTQ2S people through exclusionary practices.

Discrimination against LGBTQ2S people continues to be a sanctioned activity in American society. The U.S. does not currently have federal non-discrimination protections that are inclusive of sexual orientation and gender identity; such protections vary state by state. At the time of writing, only 19 states and the District of Columbia prohibited discrimination based on sexual orientation, gender identity or expression in public accommodations, employment and housing. In addition to the lack of federal non-discrimination protections, LGBTQ2S youth in the U.S. have recently been subjected to a barrage of state and local level challenges to the rights of queer and trans people in public accommodations, housing and employment. This is particularly true for transgender people. In Canada, a 1996 amendment to the Human Rights Act included sexual orientation as one of the prohibited grounds of discrimination. In 2016, the Federal Government announced legislation (Bill C-16) to enshrine the legal and human rights protection of transgender and gender diverse people across Canada. This means that, for the first time, the Canadian Human Rights Act will explicitly protect people from discrimination and hate crime on the basis of gender identity and gender expression. Governments can support the equitable treatment and inherent worth of all people by including sexual orientation, gender identity and gender expression as protected classes in non-discrimination laws.

Understanding the societal oppression of LGBTQ2S people through the lenses of cissexism and heterosexism allows us to broaden the analysis of the harassment and discrimination faced by LGBTQ2S youth experiencing homelessness from looking only

at the micro level of interpersonal interactions to include the macro level of institutional structures that produce and maintain this group's marginalization (Shelton, 2015). This understanding directs our attention to the ways our systems have failed LGBTQ2S youth, and calls us to redesign our systems to meet the needs of all youth.

LGBTQ2S Youth Homelessness Requires a Strategically Developed Response That Focuses Less on Reacting to the Problem and More on Prevention and Long-Term Solutions

In addition to a strategy to identify and address the systemic marginalization of LGBTQ2S young people, this approach would include policies and service systems that prioritize prevention and long-term solutions (i.e., adequate housing and support), supported by emergency services that bridge the gap (Gaetz, 2013). The goal of services should be preventing homelessness from occurring, but when it does occur, making it a rare, brief and one-time event.

A prevention plan should emphasize strategies for early intervention and place particular value on strengthening and reunifying families whenever it is safe and possible to do so. It is important to understand that family reunification for LGBTQ2S youth is not always possible. One strategy for expanding the possibilities of family reunification is to broaden the definition of family. Family reunification efforts should be open to including adults other than birth parents or guardians, to increase the chances of identifying at least one supportive family member. Additionally, LGBTQ2S youth experiencing homelessness may create their own families as a way to care for themselves and each other. Created families function as kinship networks; they are constructed by LGBTQ2S youth to enable caretaking and mutual support, safety, and a sense of belonging. It has been noted that an LGBTQ2S person's created family is often viewed as a stronger source of support than their families of origin (Connolly, 2005; Cooper, 2009). These created families step in when the families of origin have failed—often providing consistency, care and support. Beyond meeting the presenting needs of LGBTQ2S youth experiencing homelessness, one of the most important things service providers can do is to ask LGBTQ2S youth about their chosen families, and listen to and respect the ways that LGBTQ2S youth construct family. These created families can be integral supports to a young person, increase their sense of wellbeing and be key allies in helping them remain connected to program supports (Lowrey, 2016).

Youth-Serving Systems Need a Standardized Model of Care for Working With LGBTQ2S Youth Experiencing Homelessness

In order to design an effective systemic response to LGBTQ2S youth homelessness, youth-serving systems need a standardized model of care. Such a model will enable shelters and youth-serving organizations to provide an accepting, affirming and supportive environment for LGBTQ2S youth. A standardized model of care will also let LGBTQ2S youth know what to expect when entering services (e.g., questions that will be asked during intake, access to bathrooms, etc.).

The intake was so shitty in terms of trans stuff. There's just no room for trans or even LGBTQ stuff on their intake. I tried to incorporate it in, 'cause they are like, 'do you need subway tokens to go to your appointments?' and I'm like 'yes! I'm going to this trans program Monday, this trans program Tuesday...' and they just kind of ignored that.

J, 26 years old

A standardized model of care will help meet the needs of LGBTQ2S youth at risk of or experiencing homelessness, and ensure that this population of young people is served more appropriately. Some components of a standardized model of care include: mandatory LGBTQ2S cultural competency training for all staff; inclusive intake forms that are consistent across programs and systems; close consideration of the physical environment of services (e.g., private and semi-private rooms with washrooms increase access by improving safety); non-discrimination policies, consistent across programs and systems, that are inclusive of sexual orientation, gender identity and gender expression; and specialized LGBTQ2S housing programs, which we know are absolutely necessary for some young people.

These recommendations emphasize the importance, in building solutions, of working across youth-serving systems, government and social support sectors, as well as engaging with the communities and young people affected most by these issues.

LGBTQ2S Youth Must be Included in Crafting Solutions to LGBTQ2S Youth Homelessness

As soon as you're seen as homeless, you're seen as someone who's not able to collaborate. Whose voice doesn't count. And that is absolutely regardless of any kind of background that you might've come from.

J, 24 years old

LGBTQ2S youth experiencing homelessness must be engaged in the creation of solutions to improve their lives and to address LGBTQ2S youth homelessness more broadly. It is up to the adults working with LGBTQ2S youth to be intentional, communicative and aware in forming partnerships with LGBTQ2S youth experiencing homelessness (Pucci-Garcon, 2016). Talburt (2004) calls on adults to expand the possibilities of who LGBTQ2S youth are and who they can become, rather than relying solely on the knowledge cultivated *by* adults *about* LGBTQ2S youth. Ageism and adultism can make this a difficult task. Ageism and adultism occur when youth are presumed to know less than adults because they are younger, and adults are presumed to know more, simply because they are older.

In the U.S., the National Youth Forum on Homelessness (the Forum) is one example of authentic youth engagement that is inclusive of LGBTQ2S youth. Following a national conference in 2015, participating youth said they wanted a more robust, consistent presence in national conversations about youth homelessness. Co-hosted by the National Alliance to End Homelessness and the True Colors Fund, the Forum is creating youth-led change in the national movement to end youth homelessness. The Forum ensures that strategies to end youth homelessness are generated by youth and the national conversation is informed by and filtered through the perspectives of youth with lived experiences of homelessness.

Members of the Forum:

- Identify and analyze policies that impact youth at risk of or experiencing homelessness,
- Assess the effectiveness of current and proposed interventions to assist youth experiencing homelessness,
- Provide input to national organizations working to address youth homelessness,

- Advocate for strong policy and practice at the national, state, and local level, to support youth experiencing homelessness and to make their experiences of homelessness rare, brief and one-time.

Historically, youth experiencing homelessness may have been taken advantage of and tokenized in multiple ways. Youth are often asked to share their stories on panels, in the media or at fundraising events. Though well-intentioned, these opportunities are limiting, in that they often do not include young people's ideas about solutions, and may position young people as victims. Authentic youth engagement is about more than inviting youth to share their past experiences: it's also about providing an opportunity for them to share their vision for the future (Pucci-Garcon, 2016).

The Way We Talk About LGBTQ2S Youth Homelessness Matters

You think we don't see what they put on their website about us? What they say about us? We do. We visit the website. We see what they really think about us. How do you think that makes us feel? Terrible. Just terrible.

M, 22 years old

Without meaning to, advocates, researchers and organizations serving youth experiencing homelessness may perpetuate stigma in their public messages. We need to talk about LGBTQ2S youth homelessness through an intersectional and multi-dimensional lens. This means that our messaging does not solely portray risk and danger, but also potential and opportunity. It means that when we talk about family rejection, we must also talk about how certain laws, policies, and belief systems help parents think it is okay to reject their LGBTQ2S kids. We need to publicly ask for more than additional beds in homeless shelters; we must also ask for support in preventing LGBTQ2S young people from needing those beds in the first place. When we shift the message to include more holistic portrayals of LGBTQ2S youth and their experiences of homelessness, we open up the possibilities for their success in the following ways:

1. We demonstrate that we see them for all of who they are. We can hope this counters some of the stigma they face in their daily lives.

2. We recognize and are subsequently able to focus on their strengths and potential, rather than solely on the experiences that we assume make them victims.
3. Focusing on their strengths in public messaging can alter public perception and support. Shifting from a message of victimhood to a message of resilience has the potential to change how young people experience existing programs, the kinds of services and supports that are made available to young people, and how the public engages with both LGBTQ2S youth and all youth experiencing homelessness.

We Need Better Data to Help Us Talk About—and Act to Address—LGBTQ2S Youth Homelessness

Data play a key role in addressing social issues. We need data to better understand how to successfully prevent and intervene in LGBTQ2S youth homelessness. This includes ensuring LGBTQ2S representation in PiT counts and street needs assessments, evaluating the impact of programs and systems on the lives of LGBTQ2S youth, deepening our understanding of the prevalence, needs and barriers associated with homelessness for LGBTQ2S youth, and examining the ways in which LGBTQ2S youth move through various youth-serving systems, to determine which interventions are working. Researchers can take several actions to improve the available data about LGBTQ2S youth homelessness:

- Allow youth to self-identify their gender when participating in research. The Williams Institute recently released a guide for gender-related measures, including a two-step method for asking about an individual's gender identity and their assigned sex at birth (2014).
- Include LGBTQ2S youth with lived experience and LGBTQ2S organizations in the collection of data, to help improve outreach to those who are not accessing services.
- Ask LGBTQ2S youth who have experienced homelessness what they think needs to change, and together with them, create a research project to address the issues most salient to them.
- Include holistic representations of LGBTQ2S youth in research, focusing on more than risk, but also illuminating their strengths, resilience and potential.
- Develop intervention research projects and cost-benefit analyses to further develop knowledge about what is working.
- Fill in current gaps in the research, including examining the experiences of rural LGBTQ2S youth experiencing homelessness, and the experiences of racialized LGBTQ2S youth, who must navigate cissexism, heterosexism and racism in their daily lives.

Limitations

While this book provides critical information for service providers, policy makers, students of social work and human services, and others interested in learning about LGBTQ2S youth homelessness, several limitations must be noted. First, despite our efforts, we were unable to include a case study on a program offering specialized services to Indigenous LGBTQ2S youth experiencing homelessness. As a result of historical trauma, racism, discrimination and oppression, Indigenous people are overrepresented in the population of people experiencing homelessness. For those seeking to work with Indigenous LGBTQ2S youth experiencing homelessness through an intersectional lens, highlighting such a program would have been of great service.

Additionally, this volume does not include research or programs specific to rural communities in Canada or the U.S. Rural communities tend to experience higher rates of poverty than urban communities, and therefore may have fewer resources to dedicate to serving youth experiencing homelessness, or to invest in training staff of youth-serving programs and systems to work with LGBTQ2S youth. The experiences of LGBTQ2S youth experiencing homelessness in rural areas cannot be easily mapped onto the experiences of LGBTQ2S youth experiencing homelessness in urban areas.

We did our best to include a range of voices and experiences in the chapters and case studies included in this book, and to incorporate the voices of young people with lived experiences of homelessness.

Although it has taken many years to convince key decision makers to take action, we have witnessed innovative practice and policy changes. LGBTQ2S youth experiencing homelessness are being seen and heard as never before. Though progress is occurring, there is still much work to be done. Let us continue this work together, in our local communities, within our regions, and across our countries. We can effectively prevent and end LGBTQ2S youth homelessness globally.

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EPILOGUE

So many LGBTQ2S young people who have experienced homelessness are finding ways to carve out safe and meaningful lives, despite the barriers placed before them. They are survivors, creators and educators. They are thoughtful and strong. Below are the stories of two such young people. Imagine what would be possible if they, and others like them, were affirmed by the individuals in their lives and supported by the institutions in their communities.

I Have Complete Creative Control

Christian Carmen Olivia Jane

I was unaware of programming and resources that could help me. Identity-based support networks are so few and far between, and once you find one, it's still a challenge, because they are not made one-size-fits-all. It's like shopping for a neighbourhood in which to raise your family: you don't go to just any suburb because it's a suburb; or if you're an urban-living person, you don't move onto just any block because it's in the city. You have to find a place that provides the right balance and fit for you. As a queer person, I can find a few resources that may help, but as a black trans woman, the margins are even more narrow. I don't enjoy playing the woman card or the black card, but the fact is, acknowledging my blackness and gender is relevant and important because my life is directly affected by those identities. "The most disrespected person in America is the black woman. The most unprotected person in America is the black woman. The most neglected person in America is the black woman" (Malcolm X, 1962, as cited by Beyoncé, 2006). *The black trans woman is perhaps the most vulnerable human on the planet*. And now, as a 24-year-old woman, I must decipher whether an agency or organization is competent enough to understand my needs and oppression and provide me with adequate guidance. It's a difficult position to be in: young and inexperienced with minimal resources, but forced to grow up and understand the world so quickly and often so mercilessly.

The lack of resources and proper representation in my own life is the reason I created my blog, *The Cis Jungle* (thecisjungle.com). My blog is a near-completely unfiltered analysis of my life and many of the circumstances I navigate through in real time. It began as a surrogate for me to tell my story fully and unapologetically. For the first time in my life, I was able to tell my story the way I wanted it to be told. *I have complete creative control*.

I don't know how to navigate the world as an adult. I just know how to navigate the world as me—Christian Carmen Olivia Jane. And while there is no roadmap to adulthood for anyone, the experience is even more different—vastly more—for queer-and LGBTQ2S-identified youth. A friend and I often chat and kiki about the strategies and nuanced ways in which I navigate. She tells me regularly I taught her so much, and that listening to my stories and me thinking aloud about my experiences (which were often comical and unbelievable) caused her to reevaluate both her ways of navigating as a black trans woman herself and her privilege (a term she hated from the moment I threw it at her). She began to acknowledge her fortune in not having to experience what many black trans women, and queer youth in general, must experience. There is a need for specific programming and resources dedicated to LGBTQ2S youth navigating homelessness. Because their oppression is disproportionate in comparison to the rest of society, adequate and competent programming is necessary to accurately serve these marginalized communities.

Today My Life is Beautiful

Ryan

I remember hunching over the desk at the largest shelter in Toronto, weeping and defeated, trying to warm up from the freezing night outside. There were no more beds in the city, I didn't know what to do, and the staff told me I had to calm down. Although I didn't know it, I was becoming increasingly powerless to deal with the mental health crisis boiling up inside me. I didn't sleep that night.

Addiction and bipolar disorder came together in a fury, and pushed me down a path that I could never have imagined. It was swift, relentless and cruel. Seemingly, no one knew how to help me or where to put me. With my life in crisis, I found it impossible to follow the long list of rules at the shelter, the detox, the rehab. As a gay young man, it was easy to find the wrong kind of friends, inside the shelter and out. I found comfort in the night, in drugs, in selling my body, in stealing. If I wasn't privileged enough to have parents who didn't give up on me, I would be dead. I would never have ended up at CAMH [Centre for Addiction and Mental Health], where I finally got better.

I remember finally getting out of the shelter system and having my own key around my neck: the cold steel pressed against my chest wrapped my whole body in safety. It's coming up on 6 years since I got off the street, and the experience that we lived through still crosses my mind every day—I think especially about my friends who are left behind, sinking deeper into the cracks.

Today my life is beautiful—it has given me back everything I had and more. I'm living my dream. I can't say the same for the friends that I shared shelter rooms with. Some have died, others are still struggling to get housing and manage their substance abuse. Some days I pass them on the street and instinctively avert my eyes. What would I say to them? Who is looking out for *them*?

About the Contributors

Christian Carmen Olivia Jane

Christian is a self-identified trans woman of color, feminist, advocate and blogger and recent transplant to New York City. She created a blog in March of 2015, The Cis Jungle at www.thecisjungle.com, to talk about her experiences navigating a cis world at the intersections of race, class, gender, gender identity and religion.

Ryan

Ryan is a 26 year old film producer living in Toronto. He has two younger brothers, one lovey Husky, and an incredible boyfriend. He started his own production company in Toronto that aims to gather the best storytellers and imaginations from around the world.

CREATIVE PIECES

Homesick

Alex Abramovich

Imagine the heat of a Toronto summer day, you are young and in love for the very first time. You are aware of your every heartbeat and you are learning what the true meaning of desire is. Every love song and movie tells you that it is beautiful to be young and in love, but this feels anything but beautiful because your family tells you that your feelings are not normal and that you are not normal. They tell you that you can no longer live with them because of who you have “chosen” to love. You feel terrified every time you enter your home because of what awaits you. Imagine what it feels like to discover that there is no such thing as unconditional love, just as you fall in love for the first time. Imagine feeling like a disease that cannot be cured, unless you no longer existed. So, you begin to wish that a car would hit you every time you leave the house.

Imagine the prospect of the streets or an alleyway feeling safer than your own home. But then being met with the same threats outside, because of the way that people stare at you and the homophobic slurs that are sent your way. Imagine discovering that your house is not a home, but just a house. No place feels like home anymore, because you do not have a home. This is when you realize that you are homeless. You begin to feel paranoid in the world. You become homesick and you cry yourself to sleep at night remembering when everything was fine and you were happy.

Imagine being told repeatedly by your parents and the rest of the world that you are not normal, but that if you were normal, you would be loved and you would have a home. Imagine what it feels like to not feel at home in this world. To feel so hopeless because there is no cure for you and you have no place to go. So, you spend every dollar you have just to ride the subway all day because that is where you feel safest and because that is where you can be away from the people who hurt you. Imagine feeling locked up by other people’s words.

This is the kind of hate that starts in the home and ends on the streets. This is the kind of hate that leads young people into institutions that are ruled by homophobic and transphobic policies. This is the kind of hate that turns to suicide. This hatred and the devastation that it results in is an emergency situation.

I Felt Homeless

Spoken by queer and trans youth experiencing homelessness, arranged by Jama Shelton

I feel homeless now
For the past 2, 3 years
So unstable in my environments
Mistake
I believe a lot of transgender women do
No support system
On the street, on the stroll
Can't go back home to my mom
She's not stable
She doesn't have a place
Everybody's homeless in my family
We don't talk anyone
Not an option for me
I feel homeless at my peak now
I don't have support when it comes to my family
They can't do anything for me
I've removed myself from those people
They're very negative
They don't support the fact that I'm transgender
They feel like I'm better off as a boy
They feel that I'm better off being what they want me to be
It just never, never would've worked out anyway

My first phone got cut off
When my phone got cut off
I'm like, I'm homeless
I don't work the stroll nothing like other girls
My phone was my life
I can't call nobody
All my friends that know me know my phone been on forever
That number means a lot to you
That number
I just want the number
My phone got cut off
I got depressed
I was like, oh my god, I'm homeless
My whole world ended
Oh my god I just, I'm homeless
I'm homeless, honey
That's when I realized I was homeless

I was never black enough to be black
And I'm not white
I'm not quite one or the other, to a lot of people
I'm one of your own and you're gonna treat me that way
I straddle the line between boy and girl too
I'm the yin and the yang
I'm everything and nothing
At the same time
Being biracial, and then being trans
It's like you're caught in the middle
Bam! Being religious and queer, that's another
You're either queer or you're religious
Like you can't have that combination
I got every fucking combination on this planet
That's when I feel homeless
When people will try to categorize me
So you're just some thing
Go somewhere

This past weekend
I heard “he’s a big fucking he-she”
Two days I was on the street
I was gonna overdose
I was tired of everything
The people I was hoping to depend on they were like, we can’t let you stay
I was just done with everything

Sleeping on a bench
Spoken to my mother about wanting to make the change and she flipped
Got kicked out of there
You can’t stay here
Didn’t feel like I could go to my father with this
So I was homeless
Didn’t have anyone to turn to

Whenever I felt really, really homeless is whenever I had to sell myself
To buy my hormones or to afford to buy food
And I would still have no place to go and have to go sleep on a park bench

When I was 15
My mother was always out working
It’s that feeling that if I come out to her she might disown me and everything
She doesn’t really want me anymore
I am homeless and my mom doesn’t really want me to just be myself around her
It makes her feel embarrassed
It just dims me down

Sleeping on stoops and benches and trains but I never felt homeless
Until one morning – they each threw a beer can at me
I know how it feels now
It hurt
I wanted to go back to every homeless person I ever hurt and apologize
It’s lonely
People don’t know what you’re going through
I don’t think they realize

GLOSSARY OF IMPORTANT TERMS

Biphobia

Feelings of rage, hate and disapproval toward bisexuality and bisexual people. Biphobia can be manifested in numerous ways, such as verbally, emotionally and through physical attacks.

Cisgender

When a person's gender identity matches with their body and sex assigned at birth.

Cissexism

The belief that transgender people are inherently inferior to cisgender people.

Cisnormative

The assumption that all, or almost all, individuals are cisgender, unless otherwise specified.

Coming out

The process of coming to terms with one's sexual orientation and/or gender identity and disclosing it to others. Others typically assume heterosexuality and fixed gender states that fit into the binary of female and male; therefore, coming out is an ongoing process.

FTM

A person who was assigned female at birth, but identifies as male. Also known as trans man or transgender man. FTM is the acronym for Female-to-Male.

Gender expansive

An umbrella term sometimes used in place of 'gender non-binary' or 'gender nonconforming' to describe individuals with gender identities and expressions that expand and broaden definitions of cisnormative and gender-normative identities.

Gender fluid

Refers to a gender identity that varies and fluctuates over time. A person who identifies as gender fluid may have an identity that alternates between female, male and any other gender identity.

Gender identity

Gender identity is a person's subjective experience of their own gender. It is a deep internal feeling of whether they are female, male, genderqueer or anywhere else along the gender spectrum. A person's gender identity may be the same as or differ from the sex assigned to them at birth.

Gender non-binary

A term used to describe individuals who do not subscribe or conform to the gender binary. Gender non-binary is also used as an umbrella term for those who do not identify exclusively as female or male.

Gender normative

Refers to people conforming to what is considered culturally appropriate feminine and masculine behaviour.

Gender queer

A self-identity category/term used to describe individuals who do not subscribe or conform to the gender binary, but identify as neither, both, or a combination of male and female.

Heteronormative

The belief that heterosexuality is the 'normal' sexual orientation. Also refers to the belief that female and male gender roles are fixed.

Heterosexism

A system of attitudes, biases, and discrimination in favour of opposite-sex sexuality and relationships, including the assumption that all people are heterosexual or that opposite-sex attractions and relationships are superior.

Homophobia

Feelings of rage, hate and disapproval of homosexuality. Homophobia can be manifested in numerous ways, such as verbally, emotionally and through physical attacks.

LGBTQ2S

Acronym for lesbian, gay, bisexual, transgender, queer, questioning and two-spirit people.

MTF

A person who was assigned male at birth, but identifies as female. Also known as trans woman or transgender woman. MTF is the acronym for Male-to-Female.

Pansexual

When a person is sexually, romantically and emotionally attracted to people of all gender identities and sexes.

Queer

A term that has been reclaimed by LGBTQ2S people as a self-identity for those who do not identify with binary terms that describe sexual, gender, and political identities.

Sexual identity

How a person identifies to whom they are sexually and romantically attracted (e.g., lesbian, gay, bisexual, heterosexual, etc.)

Transgender

A term used to describe people whose gender identity does not match with the sex they were assigned at birth. Transgender is also used as an umbrella term and can encompass those who identify as gender queer and gender fluid and whose gender identities challenge gender norms. Transgender is an adjective, and should never be used as a noun. For example, say “Chris is a transgender person,” not, “Chris is a transgender.” It is never necessary to add an ‘-ed’ to the end of ‘transgender.’

Transition

When a transgender individual begins to live life in the gender with which they identify, rather than the sex they were assigned at birth. For some, this includes changing one’s first name and/or other legal documents (e.g., health card, driver’s licence, etc.), dressing differently, taking hormones and/or undergoing surgery. Each person’s transition is different and deeply personal.

Transmisogyny

The confluence of misogyny and transphobia. Negative attitudes, expressed through individual and state violence, harassment and discrimination directed toward transgender women and trans and gender-expansive people on the feminine end of the gender spectrum.

Transphobia

Feelings of rage, hate and disapproval toward transgender people or people who are gender-nonconforming. Transphobia can be manifested in numerous ways, such as verbally, emotionally and through physical attacks.

Two-Spirit

This term is culturally specific to people of Indigenous ancestry and refers to Indigenous Peoples who identify with both a male and a female spirit. This term is not exclusive to gender identity, and can also refer to sexual orientation.

Where Am I Going to Go? Intersectional Approaches to Ending LGBTQ2S Youth Homelessness in Canada & the U.S. is an effort to address LGBTQ2S (lesbian, gay, bisexual, transgender, queer, questioning and two-spirit) youth homelessness in both countries. It includes an examination of the identity-related structural barriers LGBTQ2S youth experiencing homelessness face while accessing adequate services and transitioning out of homelessness, as well as program models that successfully address those barriers.

Each chapter addresses a specific need and its associated barriers, accompanied by a case study of a successful program that acts as a solution. It will share new knowledge, inform the development of LGBTQ2S-inclusive and affirming systems and service provision at the local, regional and national levels.

Through our work, we have found that factors such as institutional erasure, homophobic and transphobic violence and discrimination that is rarely dealt with, or even noticed, make it difficult for LGBTQ2S youth experiencing homelessness to access shelters and supports they need. The result is queer and trans youth feeling safer on the streets than in shelters and housing programs.

We hope this book will motivate the readers to make changes in the part of the world they live in. The issue of LGBTQ2S youth experiencing homelessness can no longer be denied. Our youth can no longer be silenced and ignored.

It is time to take action.

