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Brittney Connery

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# LGBT Homeless Youth in Boston MA: Experiences Regarding Resources and Potential Barriers

BRITTNEY CONNERY



Brittney Connery is a senior in the Social Work Department at BSU. She conducted her research during the summer of 2013 with funding from an Adrian Tinsley Summer Research Grant, under the mentorship of Dr. Kathleen Bailey (Social Work). During the fall 2013 semester, Brittney concluded her research and submitted it in the form of an honors thesis, for completion of Departmental Honors in Social Work. Her work was also accepted for presentation at the 2014 National Conference on Undergraduate Research in Lexington, KY. Upon graduation in May of 2014, Brittney will begin working toward her Master's degree in Social Work.

**L**GBT youth are at an escalated risk of leaving home, mental health concerns, victimization, substance abuse, and risky sexual behavior. However, research shows a lack of LGBT-specific resources. This raises concern as LGBT youth comprise 20 to 40 percent of homeless youth – disproportionate to the general youth population which is only 10 percent LGBT. The purpose of this research was to gain a deeper understanding of the experiences of LGBT homeless youth in Boston, Massachusetts regarding their use of resources and any potential barriers they may face. Furthermore, this study examined whether or not current resources are safe, welcoming and productive for LGBT homeless youth. Data were collected using a semi-structured interview guide at a drop-in center for homeless youth, located in Cambridge, MA. Interviews were audio recorded, transcribed, and analyzed for themes. Findings indicate that LGBT youth tend to become homeless as a result of being runaway, throwaway, or systems youth. Then, guidance toward resources is gained from peers on the street or “systems referrals”, with an overwhelming majority being peer referrals. Drop-in centers were found to be the most viable and effective resource in comparison to shelters. Participants reported that accessing resources was difficult for them due to their identification as LGBT youth. Reported barriers included: disrespect, lack of comfort, differential treatment, judgment, staff conduct, and safety concerns and were categorized as either program-level, staff-related, or peer-related barriers. The concern is that LGBT youth are left to struggle with the stress, frustration, and anger associated with being both homeless as well as being LGBT. Wherein, the cycle of homelessness is not broken and homeless LGBT youth are at risk of walking away from resources and/or giving up all together. This study implies that all current resources need to become as safe, welcoming, and productive as possible so as to better serve this vulnerable population and modifications need to happen on all levels, including: direct practice, programming, and policy.

## Introduction

According to the U.S. Department of Health and Human Services, the estimated number of homeless youth in the United States ranges between 575,000 and 1.6 million annually (Ray, 2006). The exact number of youth experiencing homelessness in our nation is unknown. Because estimates vary depending on the definition of homelessness (United States Interagency Council on Homelessness, 2010), many if not most of our homeless youth presumably go uncounted (United States Interagency Council on Homelessness, 2010).

According to the National Gay and Lesbian Task Force, between 20 and 40 percent of all homeless youth self-identify as lesbian, gay, bisexual and/or transgender (Ray, 2006). The National Alliance to End Homelessness (n.d.), reports 10 percent of youth in the general population self-identify as lesbian, gay, bisexual or transgender. Therefore, LGBT youth seem to be significantly overrepresented in the homeless population (National Alliance to End Homelessness, n.d.).

The National Alliance to End Homelessness reported that in 2005 the total number of individuals in Massachusetts experiencing homelessness was estimated at 14,700 encompassing adults and children (Fact Sheet: Homeless lesbian, gay, bisexual and transgender (LGBT) youth in Boston, Mass., n.d.). According to the National Gay and Lesbian Task Force, the city of Boston had over 750 individuals between the ages of 18 and 25 engaged with emergency shelter providers in the year 2002 (the most recent data available) with an estimated 150 to 300 who were LGBT (Fact Sheet, n.d.).

LGBT homeless youth face not only the challenges of survival and vulnerability while out on the streets, but also the stigma and discrimination attached to and experienced by sexual minority groups. Therefore, while the very nature of being a homeless youth entails multiple risk factors, many if not all of those factors are significantly increased by also identifying with the LGBT community (Van Leeuwen, Boyle, Salomonsen-Sautel, Baker, Garcia, Hoffman, and Hopfer, 2006). Cochran, Stewart, Ginzler, and Cauce (2002) found indication of negative outcomes concerning multiple domains for LGBT homeless youth. Those outcomes included more frequent departures from home, more mental health concerns, greater vulnerability to both physical and sexual victimization, higher rates of substance abuse, and riskier sexual behavior in comparison to their heterosexual counterparts.

At this time, there is no federal funding allocated for LGBT-specific resources. Nevertheless, lack of funding has not been the only obstacle for LGBT homeless youth in receiving necessary services. In 2002, President George W. Bush permitted federal funding for faith-based organization (FBOs) to provide social services. But, overall funding levels for homeless youth services did not increase at all. It is possible FBOs, which typically oppose legal and social equality for LGBT people, do not offer an environment that is accessible, safe, or nurturing for LGBT youth (Ray, 2006). In addition, the potential stigma faced by homeless LGBT youth may limit their ability to access or utilize available resources.

For the purpose of this study “LGBT” was defined as an acronym and umbrella term standing for and encompassing lesbi-

an, gay, bisexual, and transgender individuals. Specifically, the terms lesbian, gay, and bisexual describe one’s sexual orientation which is a person’s emotional and sexual attraction to others based on their gender, while the term transgender describes a person who’s felt sense of being either male, female, neither, or somewhere in between differs from their biologically, birth-assigned, sex (Hulstein, 2012).

“Homeless” was defined as a lack of familial support, living in shelters, on the street, in the homes of others for short periods of time or any other place that is unsuitable or unintended for human habitation such as cars, abandoned buildings, or similar settings (Incidence and Vulnerability of LGBTQ Homeless Youth, n.d.). This population can and may be comprised of numerous subgroups. These subgroups include ‘runaway youth’ who have made the choice to leave their home, ‘throw-away youth’ who have either been abandoned by or made to leave by parents or caregivers, ‘systems youth’ who have spent the majority of their lives in either foster care of the juvenile justice system, or ‘orphaned youth’ who have been left alone due to the death of their family and/or caregivers – all of which are often referred to as ‘unaccompanied youth’ in various forms of literature (Dorsen, 2010).

Finally, “youth” was defined as individuals between the ages of 18 and 24 years old. Typically, homeless youth are defined as unaccompanied individuals between the ages of 12 and 24 (Incidence and Vulnerability of LGBTQ Homeless Youth, n.d.). The parameters of the term are potentially vague; nonetheless, in general, it refers to a population left underestimated by categories such as children and adults. Furthermore, and most importantly, by focusing on youth between the ages of 18 and 24, this research was less confined by ethical limitations pertaining to the study of legal minors.

The purpose of this research was to gain a deeper understanding of the experiences of LGBT homeless youth in Boston, Massachusetts regarding their use of resources and any potential barriers they may face. Interviews were designed to gain first hand data on what LGBT homeless youth perceive to be helpful, productive, and available resources as well as inform the public of barriers to resources and how to better address them in the future. This thesis will build upon this topic’s limited field of research, outline the methods used in conducting the study, discuss both the findings as well as their implications, and acknowledge the limitations of the research.

## METHODOLOGY

### Approach

This study was guided by a grounded theory approach. As explained by Kathy Charmaz (2006), “grounded theory methods consist of systematic, yet flexible guidelines for collecting and analyzing qualitative data to construct theories ‘grounded’ in the data themselves” (p.2). By adopting these methods, it was possible to direct, manage, and streamline the collection of data before constructing original analysis (Charmaz, 2006). Sociologists Barney G. Glaser and Anselm L. Strauss proposed, in their book *The Discovery of Grounded Theory* (1967), that this type of systematic qualitative analysis has its own logic and can generate its own theory (Charmaz, 2006). Therefore, given the limited amount of research regarding LGBT homeless youth and their experiences with resources, this study utilized grounded theory methods as opposed to deducting a testable hypothesis from other existing (or non-existing) theories.

Ultimately, this approach was utilized because (1) it offered a way to learn about the lived experiences of LGBT homeless youth as well as (2) provided a method for developing a model with the potential to enable society to better understand those experiences and best serve this population. It is unequivocally assumed that any rendering is simply an interpretive portrayal of the population’s experiences and, most likely, not an exact picture of the experiences themselves.

### Sample

Eight in-depth interviews were conducted with male and female participants between the ages of 18 and 23. All participants identified as lesbian, gay, bisexual, and/or transgender and were experiencing or had experienced homelessness in the Boston area within the last five years. Interviews took place at Youth on Fire in Boston, MA. Youth on Fire – a program of AIDS Action Committee of Massachusetts – is a drop-in center for homeless and street-involved youth, ages 14-24, and is located in Harvard Square.

### Procedure

A semi-structured interview guide was created for the purpose of inquiring about the first hand experiences of LGBT homeless youth – specifically what they perceived to be helpful, productive, and available as far as resources; but also to identify any perceived barriers to current resources. The interview guide consisted of open-ended questions.

Six different Boston-area LGBT social support organizations, community centers, and drop-in centers for homeless or street-involved youth were contacted via email. Initial contact requested assistance with identifying possible participants and permission to distribute IRB-approved recruitment flyers in

their respective spaces. Ultimately, contact was only established with one of the six agencies, after multiple attempts were made via e-mail and phone. The respondent agency was Youth on Fire. After communication was solidified, a meeting was held with the agency’s Safe Spaces Coordinator in order to explain the study and distribute recruitment flyers.

Recruitment was carried out via convenience and snowball sampling, on-site at Youth on Fire. Subsequently, interviews were scheduled and then also conducted on-site, in a private room which interviewees were familiar with. Before interviews began, all participants were asked and agreed to sign an Informed Consent Form. Further, upon the signing of an Audio Consent Form, all interviews were audio recorded and then transcribed in order to interpret the qualitative data. All participant names included in this thesis have been changed to ensure confidentiality.

### Data Analysis

Participant experiences brought forth during interviews were simplified through a process known as ‘coding’ in order for results to be organized into themes and later communicated effectively (Bentz & Shapiro, 1998; Padgett, 2004; Padgett, 1998). According to Charmaz (2006), “Coding means categorizing segments of data with a short name that simultaneously summarizes and accounts for each piece of data” (p. 43). The coding process shaped an analytical frame from which to build by creating a pivotal link between data collection and data analysis (Charmaz, 2006).

This study consisted of three phases of grounded theory coding: initial coding, focused coding, and axial coding. During initial coding, line-by-line codes were assigned in order to identify the embedded concerns as well as plain statements of participants. During focused coding, the most significant or frequent initial codes were utilized in order to sort, synthesize, integrate, and organize the data from all eight interviews (Charmaz, 2006). Throughout this focused phase, a constant comparison method was used wherein data was compared to data. By comparing data to data, themes began to reveal what participants viewed as problematic as well as productive in terms of resources. Finally, during axial coding, categorical dimensions were specified by using the categories of data from the focused phase and relating them to subcategories. Essentially, axial coding served to reassemble the data that had previously been broken down during the initial phase in a way that resulted in clear and logical emerging analysis (Charmaz, 2006). Each transcript was re-read multiple times in order to assure accuracy of the themes and analysis ultimately revealed an emerging model.

**Table 1. Demographics**

Participant	Age Identity	Gender Orientation	Sexual	Race	Ethnicity	Language Grade Level Completed	Highest Status	Employment
1	23	Female	Bisexual	African American	Non-Hispanic/Latino	English	Some College	Unemployed
2	18	Female	Bisexual	African American	Non-Hispanic/Latino	English	HS/No-Diploma	Unemployed
3	19	Male	Gay	Caucasian (White)	Non-Hispanic/Latino	English	GED	Unemployed
4	21	Male	Gay	Caucasian (White)	Hispanic/Latino	English	HS Diploma	Unemployed
5	22	Transgender F to M	Bisexual	Bi-Racial	Hispanic/Latino	English	Bachelor's Degree	Employed (Part-Time)
6	18	Female Verdean	Bisexual	Cape	Non-Hispanic/Latino	English	HS/No-Diploma	Unemployed
7	21	Male	Gay	African American	Non-Hispanic/Latino	English	N/A	N/A
8	23	Female	Bisexual	Caucasian (White)	Non-Hispanic/Latino	English	Some College	Unemployed

**Demographics**

Participants' ages varied from eighteen to twenty-three with a mean age of twenty-one. Reported gender identity was fifty percent male and fifty percent female. Forty-three percent reported at least some higher education with one participant gaining a bachelor's degree as well as part-time employment. Of particular interest may be the fact that more than half of the participants identified as belonging to minority ethnic groups and all female participants identified as bisexual. Both characteristics may imply more specifically unique lived experiences and are worth acknowledging for future purposes.

**Available Resources**

There are two primary types of resources that LGBT homeless youth are accessing or attempting to access in Boston: shelters and drop-in centers. Shelters provide homeless individuals with shelter, food, clothing, meals, and safety, along with access to a wide range of support and services - all designed to help young people overcome difficult circumstances, become self-sufficient, and obtain transitional or permanent housing.

Beds are available both on an emergency basis and for longer periods of time as "contract beds" for individuals who are actively working toward independence. At this time, there are no LGBT-specific shelters in the Boston area.

Drop-in centers are establishments that are open during certain hours of the day and provide support services to address a variety of needs; however, they themselves do not supply shelter outside of business hours which is typically 35-40 hours per week at best. Their primary goals are to respond to the basic and urgent needs of homeless and street-involved youth at highest risk of disease and victimization, connect homeless and street-involved youth to age-appropriate services including on-site mental health and medical care, partner with community and civic organizations, local businesses, public officials, and advocacy groups to address the short and long-term effects of youth homelessness, and foster a space for youth to meet friends, talk to staff or participate in formal personal development programming. At this time, there are at least three LGBT-specific drop-in centers in the Boston area.

## Results

Collected data depicts an emerging model via grounded theory techniques (See Figure 1). According to participant responses, there were three different avenues by which these LGBT youth became homeless. Those avenues were comprised of the aforementioned subgroups: runaway, throwaway, and systems youth. In the cases of runaway youth, individuals made the choice to leave their home. Conversely, throwaway youth were either abandoned by or made to leave by parents or caregivers. And, systems youth had spent the majority of their childhood in either foster care or the juvenile justice system.

Once participants became homeless, they naturally had the choice not to pursue resources. However, all participants did attempt to find and access resources. There were two reported ways in which they did so – either by following peer referrals or by following “systems referrals” (ie: previous case managers). Peer referrals consisted of referrals to both drop-in centers as well as shelters while systems referrals only consisted of referrals to shelters.

## Finding Resources

Five of the eight participants (63%) reported that it was difficult to find or locate resources once they became homeless. The reason most frequently reported was simply a lack of knowledge as to where to go, who to talk to and/or what to ask for.

*“I was about seventeen when I was like, ‘I don’t know what to do. I don’t have anywhere to go.’” – Jaishon*

*“I did not know who to talk to, or who to ask, or how to ask for the things that I needed....There’s not a real guideline for being homeless.” – Aida*

Notably, four of the eight participants (50%) directly referenced obtaining initial information and guidance from their peers out on the street – meaning individuals who had already found resources themselves.

*“[Resources are] hard to find in regular populace. You have to go to the people who you think might know the answers and they’re not necessarily the people who work [at them]. They’re the ones who [go] and use the space[s].” – Aida*

*“[I asked] kids on the street that I ran into.” – Finn*

One of the eight participants (13%) reported that it was easy for him to find or locate resources once he became homeless. This individual’s experience differed in that he received a systems referral – supplying him with a place to go for emergency

shelter, guidance with employment, and the means to obtain health insurance.

*“When I first became homeless, I had [a case manager from a group home I had previously lived in] who [told me about a youth shelter]. So, I found somewhere right away. She [also] helped me find a job [and] get my MassHealth.” – Duncan*

## LGBT-Specific Drop-In Centers

When describing their lived experiences at drop-in centers, participants described an environment that was knowledgeable, respectful, comfortable and safe. More specifically, participants described the space and people as open, understanding, welcoming, and free from stigma. They also pinpointed the fact that there were people to relate to and staff who were accessible.

*“There are plenty of programs that don’t run themselves as well as this place – as politely. Everyone’s human here. Not everywhere you go, everyone’s human.” – Aida*

*“When I went to [an LGBT-specific drop-in] it was kinda easy because it was like –you know - you see a lot of different kinds of genders and how they identify and what their sexual preference is and it was just very – it was - it wasn’t like, it wasn’t scary...so it made me feel welcomed.” – Tamicka*

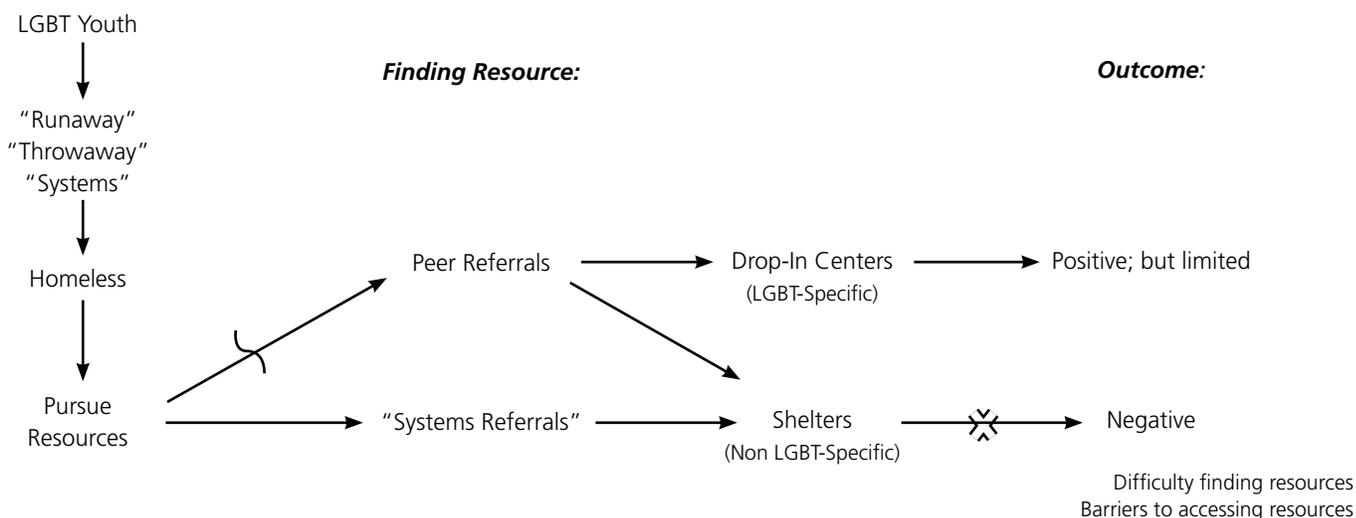
*“There’s openness here. Everyone’s non-judgmental...it’s refuge.” – Finn*

*“Here, I talk to a lot of the staff. I get along with all of them. I feel comfortable with everyone.” – Duncan*

**Non-LGBT-Specific Shelters and Potential Barriers** In describing their lived experiences at shelters, participants described an environment with a severe lack of knowledge, ability and respect for LGBT youth. All participants reported that accessing these resources (ie: shelters) – wherein they were actually able to make use of the services – was difficult for them as LGBT youth. Numerous barriers were reported including: disrespect, lack of comfort, differential treatment, judgment, staff conduct, and safety concerns. Many of these barriers are a result of program-level issues, staff-related issues, and peer-related issues.

**Program-level barriers.** Participants reported frustration regarding incorrect recommendations, wherein they were led to believe a shelter was LGBT and/or youth friendly only to find that it was not – making them uncomfortable and unsure of their safety.

Figure 1.



*“I’ve been to shelters that they call ‘youth shelters’ and it hasn’t actually, like, been youth around...they also have flyers [that direct you to] shelters for LGBT youth and the shelters I’ve been in that they recommend are not LGBT youth...They’re not friendly but they try to say it is.” – Nick*

Others reported that shelters do not know where to place transgender individuals and/or are unable to confidently assure one’s safety.

*“I’ve been in shelters that would accept me for being trans[gender] and some that won’t. Um, recently I just got an interview for a shelter that’s willing to work with me because I’m trans[gender]; but they’re kind of ‘iffy’ about it because they don’t know, like, where I should be, if I’m gonna be safe, and all that.” – Nick*

**Staff-related barriers.** Participants frequently reported that poor staff conduct was a barrier to accessing resources. The poor conduct included being unfriendly, unaccommodating, and unsupportive toward LGBT youth. Most specifically, numerous participants reported staff routinely used incorrect pronouns and names as well as provided incorrect personal care supplies to LGBT youth.

*“They’ll call you the wrong pronouns even though you’ve told them thirty times. Or they’ll, like, give you the wrong [supplies]. And you’re like, ‘I already told you, I’m not that.’ And they’re like, ‘Oh, we have to go by what your legal name is.’ [eventhough] that’s not the name I go by... it’s been really stressful.” – Nick*

Numerous participants also reported feeling as though staff were unknowing, under-equipped or simply unable to relate to them and their realities as LGBT homeless youth.

*“I feel as though everyone says that they’re gonna help; but they really just don’t know how to do it yet because it’s hard.” – Jaishon*

*“I don’t [want to] talk to [a] straight man about all my problems. [T]hey can’t understand. They don’t really know how.” – Duncan*

**Peer-related barriers.** The most commonly reported peer-related barrier for participants was fear. Numerous participants expressed fear of judgment as well as fear for their personal safety with regards to other individuals accessing the same resources.

*“I don’t like tellin’ [the kids] what [or who] I like because it’s like a lot of people are judgmental about that...and I feel bad because I don’t want to be judged.” – Tamicka*

*“When you walk into a place, when you’re readin’ people, it’s just like they’re gonna judge me, they’re gonna think this about me, they’re gonna think that about me – even if they don’t. We come from two different worlds. So, when you talk to a person like me, it’s not necessarily someone that [you see] on a daily basis and it’s not something that [you’re] used to. [So,] I guess I approach [resources] being nervous and being doubtful.” – Jaishon*

*“There are some [shelters where], if I went there, I’d probably get messed with or beat up.” – Duncan*

### Significance

According to this study, these lived experiences have resulted in LGBT youth preferring to access drop-in centers - meaning that they live and sleep outside only to utilize these provided spaces when they are open.

*“I’m trying to find [shelters] that are LGBT youth friendly and not finding any. With [this drop-in space] you can sleep here during the day, when they’re open. But, like, they’re [only] open until five. So, if I don’t sleep at night – which I usually don’t because it’s kind of weird sleeping on the street with people walking by you – I’ll sleep here and then stay up all night.” – Nick*

Therefore, the cycle of homelessness is not broken. In fact, it may be perpetuated. Furthermore, participants reported feeling stressed, frustrated, and angry after continual short-comings were experienced in shelter settings. So, LGBT youth are left depressed, with low self-esteem, walking away from resources and/or giving up all together – again, perpetuating the cycle of homelessness.

*“[Kids] turn away. They give up. They do. They take darker paths because the one that seemed like and should have been the right path didn’t end up working out so well for them.” – Aida*

### DISCUSSION

The purpose of this study was to gain a deeper understanding of the experiences of LGBT homeless youth in Boston, Massachusetts regarding their use of resources and any potential barriers they may face. All participants were candid in discussing their lived experiences with homelessness, available resources, and barriers to those resources. During interviews, participants were able to indicate both positive and negative experiences with available resources. They were also able to identify what they perceived to be the biggest obstacles to resources and went so far as to suggest what might be helpful for service providers to do differently in the future.

The findings of this research indicate that LGBT youth tend to become homeless as a result of being runaway, throwaway, or systems youth. Once they find themselves homeless, they experience difficulty with initially locating resources. It was reported that participants either obtained guidance from peers on the street or past case managers (ie: systems referrals). An overwhelming majority of the time, LGBT homeless youth

are tasked with guiding peers to safe, welcoming, and productive resources. Drop-in centers were found to be more viable and effective for resource assistance in comparison to shelters. However, shelters are more often referred by systems referrals. In describing their lived experiences at shelters, participants reported that accessing resources was difficult for them due to their identification as LGBT youth. Reported barriers included: disrespect, lack of comfort, differential treatment, judgment, staff conduct, and safety concerns and were categorized as either program-level, staff-related, or peer-related barriers. These findings are important because participants reported feeling stressed, frustrated, and angry after continual shortcomings were experienced in shelter settings. Therefore, LGBT youth are left to struggle with the stress, frustration, and anger associated with being both homeless as well as LGBT. Notably, the cycle of homelessness is not being broken. Instead, these youth are at risk of walking away from resources and/or giving up all together.

Clearly, the findings of this research indicate that LGBT-specific resources offer more knowledge, respect, and safety when servicing LGBT homeless youth. However, given the limited amount of LGBT-specific venues and the restricted reach of their services, all current resources need to become as safe, welcoming, and productive as possible so as to better serve this vulnerable population.

### IMPLICATIONS

**Direct Social Work Practice Implications** A true commitment from social work practitioners as well as policy analysts and advocates alike toward increasing their understanding of the realities and concerns of LGBT youth and the struggles associated with homelessness could go a long way in terms of intervention endeavors. This study has shown that LGBT homeless youth experience significant discomfort and difficulties while attempting to access resources. Social workers are likely to come across LGBT homeless youth - given the reported prevalence - and it has been shown that special considerations may need to be taken when this happens.

Crisp & McClave (2007) advised social workers to employ a culturally competent and affirming approach when working with LGBT youth in an attempt to avoid further reinforcement of the stigma they already experience (Gattis, 2009). The bottom line is that licensure alone is not sufficient in order to assure cultural competence regarding LGBT youth and this truth expands and compounds when working with LGBT homeless youth. Therefore, professionals and agencies that are in a position to respond to and work with LGBT homeless youth ought to be required to demonstrate that they have been

properly trained regarding the needs of the population (Gattis, 2009).

### Policy and Programming Implications

Hunter (2008) suggested numerous modifications to the regulation of resources for homeless youth in order to deem them more welcoming, more productive, and safer for LGBT youth (Gattis, 2009). Those suggestions included: prohibiting discrimination against LGBT youth in the provision of services, requiring nondiscrimination and sensitivity training, and promoting the creation of LGBT-specific homeless youth programs (Gattis, 2009; Hunter, 2008). Perhaps the most fundamental and necessary policy change would be the addition of sexual orientation, gender identity, and gender expression to the list of categories which shelters are prohibited to discriminate by (Gattis, 2009; Hunter, 2008).

The National Gay and Lesbian Task Force recommended the establishment of funding, at both the state and local level, toward the provision of resources for all homeless youth. However, the task force also recommended that any and all recipients of such funds be required to display full commitment to the respectful, competent, and safe treatment of LGBT homeless youth (Gattis, 2009). This study has confirmed the need for resources to be held to a high standard of competence and nondiscrimination. In fact, when asked what they felt would be helpful for service providers to do, the most common participant response regarded staff and their abilities.

*“Hire people that can understand what [we’re] going through or [who can] comprehend what [we’re] trying to say – like pronouns and what [we] go by. At least listen!”*  
– Nick

Overall, these findings imply that LGBT-specific resources offer more knowledge, respect, and safety when servicing LGBT homeless youth. However, it is important to acknowledge that the development of LGBT-specific youth shelters may only serve as a band-aid and create a “separate but equal” scenario. So, realistically, the ultimate goal should be for current resources to become as safe, welcoming, and productive as possible so as to best serve this vulnerable population. This will require thorough training and reliable regulation. As these measures are introduced, systems referrals ought to include more drop-in center involvement, enabling LGBT youth to benefit from more specific service types as well as the more positive experiences reported at such resources. Also, because LGBT homeless youth are often tasked with guiding peers to safe, welcoming, and productive resources, LGBT-specific resources need to increase their visibility and youth need to be well-informed about available resources.

### Limitations

Perceived limitations of this study include a small sample size as a result of some initial recruitment difficulties and a narrow focus of location – given that recruitment and interviews were held at one resource site which also happened to be a drop-in center. Additionally, there was a lack of saturation especially in reference to participant demographics like sexual orientation and ethnicity. However, this research can be of use by (1) supplementing the extremely limited amount of research relating to the topic of LGBT homeless youth and (2) informing the public of barriers to resources so that they can better address them in the future.

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