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LGBTQ Emerging Adults: Their Experiences with Homelessness

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ABSTRACT

Using a qualitative method, this study explored the experiences of emerging adults (ages 18-24) who are LGBTQ and homeless in the Charlotte/Mecklenburg area of North Carolina. Emerging adults who are homeless and identify as LGBTQ are shown to have different health and safety concerns compared to peers. Because of these unique factors, researchers suggest these individuals require specific social services that cater to their needs. Nine face-to-face interviews were conducted which resulted in a total of 9 hours of collected data. In order to ensure that research results are as accurate as possible, grounded theorists suggest that one have at least fifty hours of collected data (Charmaz, 2006). Therefore, this study uses a grounded theory method as a guide to explore the experiences of emerging adults who identify as LGBTQ and are homeless. Questions in this study were designed to explore participants' experiences with community-based outreach services and their overall experience with homelessness. This paper addresses three major themes found within the data: unsafe shelter conditions for LGBTQ individuals, couch surfing, and resiliency. Participants who had access to organizations such as RAIN (REGIONAL AIDS INTERFAITH NETWORK) which provided social support systems, were in college, and living a healthy lifestyle. Data suggests that those with a strong social capital are more likely to be successful (in their definition of the word).

Keywords: LGBTQ, homelessness, emerging adults, couch surfing, resiliency, social capital

INTRODUCTION

This paper examines the experiences of emerging adults who are LGBTQ and homeless using a qualitative method approach. In the beginning, I explore the fairly new concept of emerging adulthood, and how this theory can help to explain the transitional phase that these young adults undergo. Youth who are LGBTQ represent 40% of all homeless youth. Moreover, many of these youth who are “couch surfing” are not considered homeless because they are not “roofless.” In the literature review I discuss the concept of couch surfing. Later, I discuss how couch surfing played a major role in many of the participants experiences with homelessness.

Emerging adults who identify as LGBTQ face many more challenges during this developmental stage than their heterosexual counterparts. This paper examines many of the risks that this population encounters; risks include: poor mental health, higher rates of substance abuse, higher chances of being physically, verbally, emotionally, and sexually

abused, and higher rates of HIV/AIDS. Nonetheless, many of these individuals remain resilient despite the added stressors that they face. These individuals rely on their strengths and strive to live life in the way they see fit.

Another major theme seen within this paper is the concept of resiliency; and how resiliency allows these individuals to become the person that they see within themselves. I also examined the differences between participants who had social support systems in place and those who did not and determined that, in many cases, social support in and of itself affected the individual's experience with homelessness. Lastly, I recount participants' experiences with shelters in the Charlotte/Mecklenburg area, and how these experiences oft' depict heinous and unsafe environments.

LITERATURE REVIEW

Emerging Adulthood

Emerging adulthood is a phenomenon that has only appeared in the last few decades.

Jeffrey Arnett proposed emerging adulthood as a new theory of development for the period that spans from late teens, through the twenties, with a focus on ages 18-25 (Arnett, 2000). The term “emerging adult” is generally characterized by “young adults” who live in developed countries, do not own a home, do not have children, and do not have sufficient income to become fully independent (Arnett, 2000). However, when using the term “young adult” we imply that adulthood has been reached. Arnett argues that because this group does not see themselves as either an adolescent or an adult, but somewhere in between, there must be a separate developmental theory in place for this group (Arnett, 2000). Emerging adulthood is a period of life that is culturally constructed and by no means universal. For instance, it is normal for those from Western cultures who have aged out of adolescence and into a more autonomous role, but have yet to enter into normative adulthood routines, to have more time to explore their options in life (eg. career, education, love & relationships). However, other cultures place a heavy value on “settling down” early. In America, emerging adulthood is defined as a period of exploration and the only period of life in which nothing is normative demographically (Arnett, 2000). For instance:

During adolescence, up to age 18, a variety of key demographic areas show little variation. Over 95% of American adolescents aged 12-17 live at home with one or more parents, over 98% are unmarried, fewer than 10% have had a child, and over 95% are enrolled in school (U.S. Bureau of the Census, 1997). By age 30, new demographic norms have been established: About 75% of 30-year-olds have married, about 75% have become parents, and fewer than 10% are enrolled in school (Arnett, 2000).

However, Arnett argues that in between these two periods, especially ages 18-25, a person’s age is not enough to predict demographic status in these areas. Because emerging adults have a wider variety of possible activities than individuals in other age periods, they are less likely to be “constrained by role requirements,” which makes their

demographic status unpredictable (Arnett, 2000).

As described by Arnett, emerging adulthood can be defined as an: age of identity exploration, age of instability, age of self-focus, age of feeling in-between, and age of possibilities (Arnett, 2000; Munsey, 2006). Freed from parents, young people are figuring out who they are and what they want out of school, work, and love. Many emerging adults will successfully traverse the confusing path into adulthood. However, because of a lack of financial resources, instability, and a multitude of possible paths to take, many will struggle along the way. Because of these struggles, Arnett argues that we need to expand our efforts as a society to help these young people navigate the transition into adulthood. LGBTQ emerging adults encounter far more struggles than that of their heterosexual counterparts. These young people face stigmatization when exploring life and forming a sense of “self” that is conceptualized around their sexual orientation. Fears of not being accepted by family and peers can sometimes lead these young people to feel guilty and often times self-blaming behaviors emerge as a result of not being accepted. Obviously, being homeless adds an extra burden on LGBTQ emerging adults who are trying to find their place in a world where they feel unwelcome. Many of these young people that live on the street have no family support simply because they identify as LGBTQ. Barriers such as lack of guidance, lack of education, and lack of services keep these young people from successfully crossing over the blurred lines of adulthood. Because of the self-awareness that is developed within the twenties and this age groups’ openness to change, Arnett argues that our efforts to help guide these individuals would pay off (Arnett, 2000; Munsey, 2006). “If you provide them with resources, they’re much more likely to say, ‘How can I improve my life?’” Arnett says (Arnett, 2000; Munsey, 2006).

Disproportionate Statistics

Youth homelessness is a pervasive problem seen in all parts of our country. In fact, approximately 1.7 million young people under the age of 24 call the streets of America

home. Current research suggests that roughly 40 percent of all homeless youth identify as Lesbian, Gay, Bisexual, Transgender, or Questioning (Ray, 2006). Considering that only 5 percent of the population identifies as LGBTQ, it is obvious that these youths experience homelessness in greater proportions than that of their heterosexual counterparts (Ray, 2006). According to a 2014 Point-In-Time count conducted in Charlotte, NC there are roughly 151 emerging adults between the ages of 18-24 who are homeless in Mecklenburg County (North Carolina Coalition to End Homelessness, 2014). Research indicates that 40% of these emerging adults identify as LGBTQ, which means that on any given day, it may be estimated that around 60 LGBTQ emerging adults are living on the streets in Charlotte, NC (Ray, 2006).

Furthermore, there is grounds to believe that the number of homeless LGBTQ emerging adults may be higher than we think; those who are “doubled up” or “couch surfing” do not fit the federal definition of chronic homelessness, which is defined as:

An individual who lacks housing, including one whose primary residence during the night is a supervised public or private facility that provides temporary living accommodations; an individual who is a resident in transitional housing; or an individual who has as a primary residence a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings (Net Industries, 2015).

Since these individuals do not meet the federal definition of “homeless,” they are not counted, and many services are not provided for them (McLoughlin, 2012). Although there is a scarce amount of research on the subject of “couch surfing”, it is clear that this phenomenon has the potential to create similar problems as traditionally defined homelessness (McLoughlin, 2012).

Often times, emerging adults’ experiences of homelessness involves moving frequently between temporary living arrangements with local households, including friends, friends’ parents, extended family, and

acquaintances (McLoughlin, 2012). “Commonly referred to as couch surfing or hidden homelessness, this practice is defined as a type of ‘secondary’ homelessness (McLoughlin, 2012). Although these individuals are not “roofless,” (a term used to describe those who live on the streets), they do lack stable living arrangements and are forced to live from home to home. McLoughlin stated: “we might think of the couch surfing relationships these young people rely upon as distinctive, in that they are sourced from their own social connections and involve typically rent-free living arrangements” (McLoughlin, 2012, p. 522).

Risks

Emerging adults who are homeless and identify as LGBTQ have greater safety and health hazards than that of their heterosexual counterparts. For decades, there has been a stigma attached to being associated with the LGBTQ community. From anti-gay marriage campaigns to laws allowing businesses the ability not to serve gay individuals, the LGBTQ community has witnessed pervasive discrimination which includes hate crimes that range from assault to murder. A vast percentage of LGBTQ emerging adults who have homes and social support systems in place still suffer from anti-gay discriminatory behaviors. According to Ford, (2013) lesbian and male drag queens often suffered frequent rapes and sexual assaults which were committed by officers in the 1950s and 1960s (Ford, 2013). Moreover, police were no help when LGBTQ individuals were beaten or raped by civilians. One of the most frightening cases of oppression seen within the LGBTQ community is job discrimination. There was once a time when LGBTQ individuals were seen as a threat to national security and could not be employed in government positions. To this day, in many states, an individual can be fired because of their sexual orientation. In fact, according to Sangha, a recent study of 6,500 transgender people found that 90 percent of the individuals surveyed indicated that they experienced harassment and mistreatment at work, or, to avoid such treatment, believed they were forced to hide

their identity as transgender (Sangha, 2015, p. 58). In addition, she reports that “nearly half of the transgender individuals surveyed reported they were fired, not hired, or denied promotion because of their gender (Sangha, 2015, p. 58).” Additionally, many LGBTQ individuals are denied housing because of their orientation or gender expression.

According to Friedman, “Federal fair housing laws, seeking to ensure equal access to housing, prohibit housing discrimination based on race, color, religion, national origin, sex, familial status, and disability (Friedman, et al., 2013).” However, the Fair Housing Act does not include sexual orientation or gender expression as protected classes. Homelessness is also a critical issue for transgender people; According to The National Center for Transgender Equality, “one in five transgender individuals have experienced homelessness at some point in their lives. Family rejection and discrimination and violence have contributed to a large number of transgender and other LGBTQ-identified youth who are homeless in the United States (National Center for Transgender Equality, 2015).” In order to break the cycle of homelessness that is so prevalently seen within this population, we must work to ensure that each person is treated fairly regardless of their sexual orientation or gender expression.

Given the statistics and the history of oppression seen within the LGBTQ community, it is apparent that LGBTQ emerging adults who lack a stable living environment and adequate social support systems will encounter more risks than their heterosexual counterparts. In fact, research suggests that these individuals are more likely to suffer from mental health issues, substance abuse issues, victimization issues, and engage in risky sexual behavior, which leads to higher HIV risks (Keuroghlian, Shtasel, & Bassuk, 2014).

Mental Health

Anti-homosexual attitudes and stigmatization of the LGBTQ community in Western culture has resulted in added stressors for members of this population. Due to lack of support and social isolation that stem from the

stigma attached to the LGBTQ community, many emerging adults who are homeless may internalize feelings of guilt and shame because of their situation. In fact, emerging adults who identify as LGBTQ and homeless are more likely than their heterosexual counterparts to have a current major depressive episode (41.3% vs. 28.5%), posttraumatic stress disorder (PTSD; 47.6% vs. 33.4%), suicidal ideation (73% vs. 53.2%), and at least one suicide attempt (57.1% vs. 33.7%) (Keuroghlian, Shtasel, & Bassuk, 2014).

Substance Abuse

Emerging adults who are homeless and identify as LGBTQ are more likely than their heterosexual counterparts to abuse crack, cocaine, and methamphetamines (Cochran, Stewart, Ginzler, & Cauce, 2002). In regards to survival, it is notable to keep in mind that these individuals experience substantially greater challenges on the streets than their heterosexual counterparts. Some researchers indicate that the higher rates of substance abuse seen within the LGBTQ homeless population may be a coping mechanism that is used to deal with the numerous stressors that they encounter. (Cochran, Stewart, Ginzler, & Cauce, 2002).

Victimization

Many studies suggest that LGBTQ emerging adults who disclose their orientation may receive furious and violent responses from family, community members, school employees, and peers (Saewyc, et al., 2006). Although some of these individuals leave home on their own because their families use abusive tactics to try to change their orientation, many are forced into living on the streets by unaccepting family members. LGBTQ runaways are much more likely than heterosexual runaways to have been sexually abused by caretakers or close family members (Keuroghlian, Shtasel, & Bassuk, 2014). In fact, 35% of females and 65% of males have dealt with violence in the past. Furthermore, once on the street, LGBTQ individuals face greater chances of being both physically and sexually victimized.

Survival Sex and HIV

Emerging adults who are homeless have limited legal ways of supporting themselves, and often turn to survival sex as a way to survive on the street (Walls & Bell, 2011). Many studies suggest that homeless gay and bisexual males engage in survival sex at remarkably higher rates than their heterosexual male counterparts (Walls & Bell, 2011). However, when comparing the rates of lesbian and bisexual females to heterosexual females, there is minimal statistical difference in survival sex behaviors (Walls & Bell, 2011). Emerging adults who engage in survival sex are at an increased risk of contracting sexually transmitted infections. One study revealed that more GLB (gay, lesbian, and bisexual) emerging adults reported that they were diagnosed with HIV than their heterosexual counterparts (35.2% vs. 3.5%) (Rew, Whittaker, Taylor-Seehafer, & Smith, 2005). Although condom use can significantly lower chances of contracting sexually transmitted infections, many studies have found that homelessness is directly linked to decreased condom use in the LGBTQ population (Keuroghlian, Shtasel, & Bassuk, 2014). Studies suggest that decreased condom use may be a result of the inability to set stringent boundaries due to internalized depression, grief, poor self-esteem, purposefulness, and feelings of anxiety (Keuroghlian, Shtasel, & Bassuk, 2014). Furthermore, when engaging in survival sex, these individuals are more easily coerced into not using a condom by partners.

Resiliency and Social Support

According to Chang et al., “Resilience is the ability to survive and thrive in the face of overwhelming life changes. Resilience is a dynamic process that is the outcome of positive adaption in the face of significant adversity, stress, or risk (Chang, Scott, & Decker, 2013, p. 39).” Resilience is an important factor that must be considered when examining the overall well-being of LGBTQ emerging adults, especially those who face homelessness.

Many studies have been conducted that show the weaknesses and negative aspects of young people who identify as LGBTQ;

however, few of these studies portray the strengths of the population. Even fewer studies have analyzed resiliency within the homeless “subculture” of this population. Even though this population encounters pervasive marginalization throughout their lives, they still exhibit a great deal of resiliency. In a recent article, Herrick et al. stated: “Self- acceptance of sexual minority status and integration of sexual identity into an overall self- concept are the first steps in combating the cultural onslaught that sexual minority youths are likely to experience, and these steps count as forms of resilience in and of themselves (Herrick, Egan, Coulter, Friedman, & Stall, 2014).” Basically, self-acceptance in and of itself is a form of resiliency because it allows these individuals to be comfortable with their selves and their identity, which according to Hershberger and D’Augelli, can create a buffer against the stressors that have an influence on mental health. Self-acceptance empowers these individuals to not only claim their identity, but to embrace it, which also creates a buffer against the stigmas that are attached with identifying as LGBTQ+.

LGBTQ young people often times feel isolated because of their sexual identity. They are often times rejected by family member and peers, which can cause internalized homophobia and shame (Doty, Willoughby, Lindahl, & Malik, 2010). Doty et al. terms this as “*sexuality stress*,” that is, additional stressors that are related to ones’ sexuality. Social support is a crucial protective factor needed by LGBTQ young people in order to develop positively. Social support can shield against a variety of stressors: victimization, parental conflict, and natural disasters (Doty, Willoughby, Lindahl, & Malik, 2010). Furthermore, evidence suggests that sexuality specific forms of social support may be particularly meaningful for LGBTQ young people (Doty, Willoughby, Lindahl, & Malik, 2010). Social support services, such as support groups, that link LGBTQ individuals with others who also have similar identities has been proven to be a crucial component in building resilience within this population (Ozbay, et al., 2007).

METHODS

In order to ensure that research results are as accurate as possible, grounded theorists suggest that one have at least fifty hours of collected data (Charmaz, 2006). This study uses a grounded theory method as a *guide* to explore the experiences of emerging adults who identify as LGBTQ and are homeless. According to Charmaz, “grounded theory methods consist of systematic, yet flexible guidelines for collecting and analyzing qualitative data to construct theories ‘grounded’ in the data themselves” (Charmaz, 2006).

Study Design and Research Questions

There were four major phases of this study: research advertisement, participant selection, one-on-one interviewing, and data analysis. Once my proposal was accepted by the Winthrop Institutional Review Board, I began the initial stage of promoting the study. Since this is a difficult population to locate, I enlisted the help of several agencies in the Charlotte/Mecklenburg area to advertise and promote the study. These agencies include: Regional Aids Interfaith Network (RAIN); The Powerhouse; Beatties Ford Road Family Counseling Center; and Carolinas Care. The staff at RAIN stepped up and helped me secure seven interviews within just a few weeks of receiving my flier. I asked each participant if they knew other individuals who met the criteria and may be willing to participate in the study. One participant was able to connect me with the Powerhouse who then connected me to Beatties Ford Road Family Counseling Center and Carolinas Care where I was able to find two other participants for a total of eight. Six participants were African American, one was Latino, and one Caucasian. Six were enrolled in college, one had a high school diploma but no college degree, and one had no high school diploma or college degree. Five of the participants were employed and three were not. Seven of the participants were HIV positive while one was HIV negative. The high number of participants with HIV can be attributed to the high number of referrals from RAIN (Regional Aids Interfaith Network). Seven participants were referred through the RAIN organization.

In order to take part in the study each participant had to meet certain requirements: They must identify as LGBTQ, be between ages 18-24, and have an experience with homelessness that lasted more than six months. Each interview took place in public settings, mainly at the organization that the participant had an affiliation with. However, two interviews were conducted at a meeting area in Johnson Hall, which is located on the campus of Winthrop University. Interviews were audio recorded and lasted between 15-45 minutes. Each participant was compensated with a twenty dollar VISA gift card for the interview regardless of full participation.

Mainly, the study focused on experiences that these individuals had with community-based outreach organizations. Because of many anti-LGBTQ policies and the history of oppression seen within the community that I discussed earlier, I initially based this study on the hypothesis that this marginalized population was receiving inadequate services that were a direct result of their sexual orientation. However, once the data collection process began I noticed that very few cases of inadequate service was based on direct discrimination. Instead, I found that there were limited out-reach programs that provided the specific services that this marginalized and unique population require. After this realization, I opened my questioning process up in order to better gauge what services are needed and how current services are lacking or excelling to meet the specific needs of this population.

Data Gathering Procedures

During the initial interview, I asked participants to describe their situation in regards to how they first became homeless. From there I guided the conversation with a core set of open-ended questions that were designed to explore each individual’s unique experiences. Questions were designed in a way that would not influence participants’ answers in any way. They were neither positive nor negative in nature. I inquired about their experiences with out-reach services and asked them to share any experiences that were positive and negative. After discussing these experiences, I asked participants how these encounters might

influence future decisions to use or refer others to community-based outreach organizations. Once this was discussed and any other questions that I had were answered, I asked participants to tell me how they were currently doing so I could get a sense of what was presently going on their lives and if they have seen any improvement in their situation.

Ethics

In order to ensure that participation was completely voluntarily, I thoroughly went over an informed consent at the beginning of each interview, which was then given to participants. Participants were informed that this was a voluntary study in which they had the right to withdraw at any time. Participants were also informed that interviews would be audio-recorded and they had the option to stop recording at any point in the interview in which they felt uncomfortable. Throughout the interview process, I took every precaution possible to ensure the confidentiality of participants. Before starting and recording interviews, participants were given the option to choose a pseudonym, which would be used throughout the interview and transcription process. All audio files were secured in a locked file on a USB drive, which was stored in a locked container. Participants were provided with an informed consent statement and given the chance to ask any questions before starting the interview. Participants were also informed that they could request that audio-taping be stopped at any point during the interview and informed that they did not have to answer any question that made them feel uncomfortable. I also reinforced the fact that skipping any question or asking to turn off audio-recording would not impact their compensation.

Data Analysis

For this study, I used grounded theory as a guide to analyze and interpret data. I have summed up grounded theory using this quote by Strauss and Corbin:

If someone wanted to know whether one drug is more effective than another, then a double blind clinical trial would be more appropriate than grounded theory study. However, if someone wanted to know what it was like to be a

participant in a drug study, then he or she might sensibly engage in a grounded theory project or some other type of qualitative study (Strauss & Corbin, 1998).

Elements of grounded theory include: question formulation, interview transcribing, data coding, analytic memoing, theoretical sampling, and constructing theory. After formulating my questions and gathering data, I collected roughly six hours' worth of interviews, which I transcribed. Once the transcription process was over, I coded all of the collected data and developed concepts based on thematic similarities. According to Charmaz, "grounded theory methods consist of systematic, yet flexible guidelines for collecting and analyzing qualitative data to construct theories 'grounded' in the data themselves" (Charmaz, 2006). After looking at similarities within the data I worked with my mentor, Brent Cagle, to better ensure objectivity when analyzing data and constructing theories.

Researcher Role

Many research studies stem from the human drive to learn about and improve the unknown. Personally, I have faced many hurdles throughout my life that has led me to the field of social work and this particular study. Because of my experiences as a young gay male who has faced chronic homelessness, I wanted to study the experiences that other LGBTQ youth have with homelessness and the challenges that they encounter when trying to better themselves in order to get out of poverty. As an identifying gay male who has experienced homelessness as a young adult, there is the possibility that bias could have influenced the data gathering process. My experiences may have also influenced the way I analyzed and interpreted the data. As a social worker, and researcher, I must continually work towards my own self-awareness, and separate my experiences from that of the participants and the research project as a whole. Throughout this study I consulted with my mentor, Dr. Brent Cagle, to ensure that my work was as non-biased as possible.

FINDINGS

Since this is exploratory research, these findings will begin to open doors for future research. When asked how they became homeless, participants gave three reasons: because they were kicked out of their home due to their sexuality (3), because they aged out of foster care (3), or because they left home by their own choice and could not support themselves (2). Three major themes caught my attention that I would like to explore more: unsafe shelter conditions for LGBTQ individuals, couch surfing, and resiliency. Couch surfing was the primary form of shelter for ALL participants, however 7 participants talked about living on the street, 3 talked about living in a car, and 3 talked about staying in shelters.

Unsafe Shelter Conditions

Many of the participants spoke about Charlotte's shelters as being unsafe for LGBTQ individuals. Reasons for their concerns about safety varied. When I asked Tye to tell me about his experiences with the shelters in Charlotte, he laughed and told me:

Tye: "So, I mean, I didn't want to go to the shelter and different stuff like that because like I was raped and that's how I caught HIV due to being on the streets at a younger age. So, I mean, I was just house hopping."

When asked about his experience with homeless shelters Dave stated:

Dave: "Um, while I was there I didn't know what to do. I didn't have a bed ready. I didn't have ... I couldn't find no place to sleep. And I was scared to go to sleep because I was scared that something might happen to me. The homeless shelter I went to was on Lord Tryon and it has a reputation of people being raped."

Mario: "The shelter down there is dirty. There's a lot of people there and you got gay men, straight men. You get harassed by the people because you're gay. Or you get hit on by the older men you know, and stuff like that. Your stuff is stolen."

Couch Surfing

Individuals who couch surf have no permanent address or stability, which makes it hard to get ahead. Mario describes couch surfing as:

Mario: "Like, uh, one minute be here then the next minute be there and change of address, change of work, change of school. Like, everything changed."

Quenn describes many different occasions in which he has had to couch surf. Quenn describes couch surfing as:

"Um, more couch surfing was, um, while, while I was with my mom, um, you know, going from couch to couch, you know, being on a couch in a track house, being on a couch in, uh, roach infested places ... Um, like I said, there was even a point of time where I wasn't on a couch. I was living in someone's shed."

Quenn also talks about living with twelve other people in a one bedroom apartment:

Quenn: "It was, oh my gosh, yeah there was one point in time where I lived in a one bedroom apartment with twelve other people. That was a, yeah, I'm not saying that was the worst experience I had because I have had worse but it was a really good struggle and it was, like I said, a one and only experience in my life that I could look back on and say "Hey, uh, I came out of it, how long did I make it through it but um, like I said, I think I was in the same situation or maybe I was still living with a friend girl or something like that, I can't remember cause there is so many times."

Resiliency

I found that almost all of these participants had come out of their situation in positive ways. 6 out of 8 were enrolled in colleges, 7 out of 8 had some form of a diploma, and 5 out of 8 were employed. Furthermore, 6 out of 8 were no longer homeless at the time of the interview. These individuals' perseverance along with Community Resources played a major role in their resiliency.

Taye: “Um, I mean, I used a good bit of my support system, um, RAIN (Regional Aids Interfaith Network), you know, up here. Um, they helped me get into housing. I used different sources to try and get to where I'm at now. So I mean, as I look back over all of that it just made me stronger. And now I'm much more ahead in life at this point. I'm happy where I'm at now because I mean I done hit a whole 360.”

Mario: “Life is Way better, way better. I'm in school. I've been at my current location for three years now. Um, doing volunteer stuff here and trying to get the position working as peer navigator. Um, working, I work at Queens Pedicure, bar-tending and at the Baseball Park. So, everything is moving like ever since I got the house even though it was like my first step, that was like the root of the plant. It was like everything just grew from there. Because I had a permanent address. I could go to school and I can go to work from there and not worry about getting put out or worry about where is the next meal going to come here from.”

Quenn: “I feel like I'm doing pretty well, I've had a lot of great jobs, and, like I said, I'm still working on school and working at my current job. I'm moving forward in life and building as I go.”

Limitations

One particular challenge this study portrays, is a small and non-diverse sample size. However, the small sample size allowed in depth one-on-one interviews that is required for a qualitative study. Also, according to Charmaz (2006), in order to ensure that research results are as accurate as possible, grounded theorists suggest that one have at least fifty hours of collected data. Since I only had 6 hours of data, I would need conduct more interviews in order to reach saturation, and have conclusive results. Also, due to my inability to locate members of this population, many participants were referred to me through RAIN (Regional Aids Interfaith Network),

which is why there is such a high number of participants who are HIV positive. Moreover, since most of the participants were gay or bisexual African American males, who were HIV positive, this survey does not portray the entire LGBTQ population.

DISCUSSION

Prior research has shown that LGBTQ young adults may face many challenges and stressors throughout their lives, more so than their heterosexual counterparts. Moreover, studies that examined LGBTQ young adults who are homeless reveal that there is a lack of services for these individuals across the nation. While there are agencies that offer specific services designed to assist this population, they are scattered throughout the region in a way that makes it hard for those without access to transportation to receive services.

Previous studies have shown that sexuality specific programs such as STD services that include HIV testing and counseling are a necessity for the well-being of these individuals. Many of my participants were referred from RAIN (Regional Aids Interfaith Network). RAIN is a local organization in Charlotte, NC that provides a plethora of services to the HIV/AIDS community. These services include: advocacy, case management, prevention education, and support groups. All participants who were referred to me from RAIN talked about how much of a positive impact the organization has had on their life. Moreover, these participants were also the very ones who maintained a strong sense of resiliency and were no longer homeless and living life in a way that they saw fit. Many of my participants had a strong sense of self-acceptance in terms of their sexual identity. It turns out, that these were the very ones who had social support systems in place. Also, all individuals who had a high sense of self-acceptance remained resilient, with low mental health issues, and higher achievement attainment. While I cannot conclusively say that this is because of RAIN, I will say that I think this had a lot to do with their progression. RAIN provided crucial social support programs that provided these individuals with the tools

they needed to become the person they saw within themselves.

Also, during my study I noticed that there was a lack of research dedicated to the “couch surfing” or “doubled up” phenomenon. An extensive search on many popular databases yielded just a handful of results regarding couch surfing. Many of these studies were conducted in other countries and have incomparable variables than those in America. In future research, I would like delve in and study this phenomenon in-depth.

While this study opened new doors for future research, such as couch surfing, it also revealed the deplorable shelter conditions in the greater Charlotte area. Participants described experiences involving rape, sexual and physical harassment, and theft; all participants seemed uneasy when discussing the living conditions of these shelters. According to section 6.01 of the NASW Code of Ethics:

Social workers should promote the general welfare of society, from local to global levels, and the development of people, their communities, and their environments. Social workers should advocate for living conditions conducive to the fulfillment of basic human needs and should promote social, economic, political, and cultural values and institutions that are compatible with the realization of social justice (Workers, 2008).

As social workers, and people, we have a responsibility to ensure the safety of those who are in our care. Moreover, we should be researching and advocating for better conditions for all who face homelessness.

REFERENCES

- Arnett, J. J. (2000). Emerging Adulthood: A Theory of Development From the Late Teens Through the Twenties. *American Psychologist*, 55(5), 469-480. doi:10.1037//0003-066X.55.5.469
- Cagle, B. E. (2007). *Gay Young Men Transitioning to Adulthood: Resilience, Resources, and the Larger Social Environment*. Unpublished dissertation.
- Chang, V. N., Scott, S. T., & Decker, C. L. (2013). *Developing Helping Skills A Step-by-Step Approach to Competency*. Belmont: Cengage Learning.
- Charmaz, K. (2006). *Constructing Grounded Theory A Practical Guide Through Qualitative Analysis*. California: Sage Publications Inc. .
- Cochran, B. N., Stewart, A. J., Ginzler, J. A., & Cauce, A. M. (2002). Challenges Faced by Homeless Sexual Minorities: Comparison of Gay, Lesbian, Bisexual, and Transgender Homeless Adolescents With Their Heterosexual Counterparts. *American Journal of Public Health*, 95(5), 773-777.
- Doty, N. D., Willoughby, B. L., Lindahl, K. M., & Malik, N. M. (2010). Sexuality Related Social Support Among Lesbian, Gay, and Bisexual Youth. *Journal of Youth Adolescence*, 1134-1147. doi:0.1007/s10964-010-9566-x
- Ford, M. (2013, May 14). *A Brief History of Homosexuality in America*. Retrieved from Grand Valley State University: <https://www.gvsu.edu/allies/a-brief-history-of-homosexuality-in-america-30.htm>
- Friedman, S., Reynolds, A., Scovill, S., Brassier, F. R., Campbell, R., & Ballou, M. (2013, June). *An Estimate of Housing Discrimination Against Same-Sex Couples*. Retrieved from U.S. Department of Housing and Urban Development: http://www.huduser.gov/portal/Publications/pdf/Hsg_Disc_against_SameSex_Cpls_v3.pdf
- Grafsky, E. L., Letcher, A., Slesnick, N., & Serovich, J. M. (2011). Comparison of treatment response among GLB and non-GLB street-living youth. *Children and Youth Services Review*, 569-574.
- Herrick, A. L., Egan, J. E., Coulter, R., Friedman, R., & Stall, R. (2014). Raising Sexual Minority Youths' Health Levels by Incorporating Resiliencies Into Health Promotion Efforts. *American Journal of Public Health*, 104(2), 206-210.
- Keuroghlian, A. S., Shtasel, D., & Bassuk, E. (2014). Out on the Street: A Public

- Health and Policy Agenda for Lesbian, Gay, Bisexual, and Transgender Youth Who Are Homeless. *American Journal of Orthopsychiatry*, 84(1), 66-62.
- McLoughlin, P. J. (2012). Couch surfing on the margins: the reliance on temporary living arrangements as a form of homelessness amongst school-aged home leavers. *Journal of Youth Studies*, 16(4), 521-545.
- Munsey, C. (2006). Emerging adults: The in-between age. *Monitor*, 37(6), 68.
- National Association of Social Workers. (2008). *NASW Code of Ethics*. Washington, DC: NASW Press.
- National Center for Transgender Equality. (2015). *Housing & Homelessness*. Retrieved from National Center for Transgender Equality: <http://www.transequality.org/issues/housing-homelessness>
- Net Industries . (2015). *Homeless Person - Shelter, Economic Assistance, Education, Voting, Antibhomeless Legislation, Further Readings*. Retrieved from <http://law.jrank.org/pages/7397/Homeless-Person.html>
- North Carolina Coalition to End Homelessness. (2014, January 29). *CONTINUUM OF CARE REPORTING FORM: HOMELESS COUNT* (. Retrieved from NCCCH: <http://www.nccch.org/files/4177/>
- Ozbay, F., Johnson, D., Dimoulas, E., Morgan, C., Charney, D., & Southwick, S. (2007). Social Support and Resilience to Stress. *Psychiatry*, 4(5), 35-40.
- Ray, N. (2006). *Lesbian, gay, bisexual and transgender youth: An epidemic*. Retrieved from New York: National Gay and Lesbian Task Force Policy: http://www.thetaskforce.org/static_html/downloads/reports/reports/HomelessYouth_ExecutiveSummary.pdf
- Rew, L., Whittaker, T. A., Taylor-Seehafer, M. A., & Smith, L. A. (2005). Sexual Health Risks and Protective Resources in Gay, Lesbian, Bisexual, and Heterosexual Homeless Youth. *Journal for Specialists in Pediatric Nursing*, 10(1), 11-19.
- Saewyc, E. M., Skay, C. L., Pettingell, S. L., Reis, E. A., Bearinger, L., Resnick, M., . . . Combs, L. (2006). Hazards of Stigma: The Sexual and Physical Abuse of Gay, Lesbian, and Bisexual Adolescents in the United States and Canada. *Child Welfare League of America*, 195-213.
- Sangha, K. K. (2015, July 16). LGBT Protection in the Workplace—A Survey of State. *Employment Relations Today*, 42(2), 57-68. doi:10.1002/ert
- Shelton, J., & Winkelstein, J. (2014). Librarians and Social Workers: Working Together for Homeless LGBTQ Youth. *Young Adult Library Sources*, 20-24.
- Strauss, A., & Corbin, J. M. (1998). *Basics of Qualitative Research: Techniques and Procedures for Developing Grounded Theory*. SAGE Publications.
- Van Leeuwen, J. M., Boyle, S., Salomonsen-Sautel, S., Garcia, J., Hoffman, A., Hopfer, C. J., & Baker, N. D. (2006). Lesbian, Gay, and Bisexual. *Child Welfare League of America Homeless Youth: An Eight-City Public Health Perspective*, 151-170.
- Walls, E. N., & Bell, S. (2011). Correlates of Engaging in Survival Sex among Homeless Youth and Young Adults. *Journal Of Sex Research*, 48(5), 423-436. doi:10.1080/00224499.2010.501916