LGBTQ Youth: The Journey to Homelessness and Potential Areas for Intervention
Katherine Duffy, MD, MPH
Background

• Gay, lesbian, bisexual and transgender (GLBT) youth face disproportionate health risks including:
  • homelessness
  • substance abuse
  • sexually transmitted infections
  • suicide
• Factors contribute to the increased risk for these negative health outcomes include:
  • familial abuse
  • school bullying
  • internalized homophobia.
• Disproportionate outcomes even more extreme in youth of color and immigrant youth
Background

• Research shows that frequent and consistent interaction with a concerned health professional can positively impact youth risk behaviors

• Despite the high level of need, many GLBT youth do not receive adequate health services.
Opportunities Lost

• Barriers to care for this population related to:
  • Reluctance of some GLBTQ youth to disclose orientation
  • Lack of providers competent and comfortable addressing GLBT issues
  • Lack of culturally appropriate services
Opportunities Lost

• Many of these youth express discomfort in discussing issues of sexuality and sexual orientation with their providers.

• 2006 study revealed:
  • 65% of surveyed adolescents did not disclose their sexual orientation to their physicians, despite the fact that they were “out” to most of the other people in their lives
  • Reluctance resulted from fears regarding stigma, breach of confidentiality, and/or potential negative or homophobic reactions by providers

Study Design

• This study will focus on the residents of a small homeless shelter for young GBLTQ youth in Chicago (age range from 18-24)

• Through structured interviews, this study will pursue the life stories of these young men and women, focusing specifically on:
  • Identity formation, including earliest memories of being different, non-heterosexual or gender normative
  • Disclosure to self and others, including ultimate internal acceptance GLBTQ identity and process of coming out to others
  • Disruption, including potential threats to safety, risk behaviors and eventual path to homelessness
  • Interactions with the health care system, including missed opportunities for intervention
Data Analysis

• Between 5-8 residents will be invited to participate in the interviews.

• The interviews will then be recorded and transcribed word for word.

• Transcripts will be analyzed according to the principles of Grounded Theory.
Confidentiality

• No names or directly identifying information will be used during the coding process.
• Participants will be ensured that their identities will be protected
• The information garnered through these interviews will be used in the context of research only.
Risks and Benefits

• Study participants will receive no direct benefit except a $10 gift card for their time
• Risks include emotional difficulty in reviewing past life events.
Benefit to Family Medicine

• This study will help providers understand key points in a young LGBTQ person’s life that impact negative health outcomes

• Also, will provide potential moments of intervention