Human Services for Low-Income and At-Risk LGBT Populations: Research Recommendations on Programs for Youth

This brief presents recommendations created as part of the Research Development Project on the Human Service Needs of Lesbian, Gay, Bisexual, and Transgender (LGBT) Populations. The project identified the knowledge base and research needs related to LGBT people’s socioeconomic circumstances and risk and protective factors, their current participation in human services funded by the Administration for Children and Families (ACF) in the U.S. Department of Health and Human Services, and strategies for serving these populations effectively. Methods included a literature review, secondary analyses of data sources, and consultations with experts and service providers.

In the area of programs for youth, the project focused on two types of services that are funded by ACF and may be especially relevant to youth who are LGBT: (1) assistance for runaway and homeless youth (RHY) and (2) sexual health education for adolescents. It addressed three topics:

1. The risk of homelessness or adverse sexual health outcomes among LGBT youth (and those who are questioning their sexual orientation and/or gender identity)
2. LGBT youths’ service preferences and experiences in RHY and sexual health education programs
3. Strategies for providing RHY and sexual health education services effectively to LGBT youth

For each topic, the project team identified research needs and recommended key questions and possible approaches for future research. Table 1 summarizes these recommendations.

A companion report to this brief, Human Services for Low-Income and At-Risk LGBT Populations: An Assessment of the Knowledge Base and Research Needs (Burwick et al. 2014), available at www.acf.hhs.gov/opre, provides details on existing research related to these topics.

A Note on Data Sources for Studying LGBT Populations and Human Services

The Research Development Project identified a general need to increase the number of population-based surveys and administrative data sources on human services that include measures of sexual orientation and gender identity. Implementing many of the research recommendations presented in this brief would require new data collection or the addition of items on sexual orientation and gender identity to existing federal and state surveys and administrative systems.

The collection and analysis of data on sexual orientation and gender identity pose a range of challenges. These challenges include the willingness of respondents to accurately report their sexual orientation or gender identity, differences in conceptualization of sexual orientation and gender identity across racial and ethnic groups and age cohorts, and small sample sizes when such data are available. Nevertheless, researchers in a range of disciplines have successfully implemented sexual orientation and gender identity measures in surveys and other data collection efforts.
Table 1. Programs for Youth: Recommended Questions and Possible Approaches for Future Research

<table>
<thead>
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<th>Possible approaches</th>
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<td><strong>Topic 1: Risk of homelessness or adverse sexual health outcomes among LGBT youth</strong></td>
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<td>What proportion of homeless youth identify as LGBT?</td>
<td>• Analysis of local surveys/counts of homeless youth*</td>
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<tr>
<td>What are the characteristics of LGBT homeless youth?</td>
<td>• Analysis of local surveys/counts of homeless youth*</td>
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<tr>
<td>What characteristics are associated with reduced likelihood of homelessness or risky sexual behavior among LGBT youth?</td>
<td>• Analysis of national and state/local population-based surveys*</td>
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<td><strong>Topic 2: LGBT youths’ service experiences</strong></td>
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<td>What proportion of youth accessing ACF services identify as LGBT?</td>
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<td>What are service pathways for LGBT youth involved in multiple systems?</td>
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<td>What service access barriers do LGBT youth perceive?</td>
<td>• Focus groups/interviews with service providers</td>
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<td>What are options for collecting accurate information on sexual orientation and gender identity in administrative data?</td>
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<td><strong>Topic 3: Strategies for providing services</strong></td>
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<td>To what extent have providers adopted practices to improve services for LGBT RHY?</td>
<td>• Focus groups/interviews with service providers</td>
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<td>How effective are RHY or sexual health education services for LGBT youth?</td>
<td>• Demonstration evaluationb</td>
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*Assumes surveys or administrative data systems include or add items to identify the sexual orientation and/or gender identity of respondents.

b Including implementation and impact studies.
TOPIC 1: RISK OF HOMELESSNESS OR ADVERSE SEXUAL HEALTH OUTCOMES FOR LGBT YOUTH

Research Need:

The size, composition, and needs of the LGBT homeless youth population

Studies in local areas and reports from service providers strongly suggest that a disproportionate share of homeless youth are LGBT, although estimates of the size of the LGBT homeless youth population vary widely. Moreover, LGBT homeless youth may experience problems related to mental health, victimization, and substance abuse at higher rates than their non-LGBT counterparts. Additional research is needed to improve understanding of the size and characteristics of the LGBT homeless youth population and the distinctive risks these youth may face.

Questions and Possible Approaches for Future Research

• What proportion of homeless youth in local areas and nationally identify as LGBT?

Future local surveys of homeless youth should adopt promising practices for gathering information on the sexual orientation and gender identity of respondents, such as those identified by YouthCount!—a federal interagency initiative that aims to develop new approaches to counting unaccompanied homeless youth. Multi-site surveys may also provide opportunities for more precisely estimating the proportion of homeless youth who are LGBT nationwide and collecting data on the demographics of this group.1

• How are the characteristics and needs of LGBT homeless youth similar to or different from those of non-LGBT homeless youth?

Researchers could gather details on the circumstances and experiences of homeless youth, including LGBT youth, through local and multi-site surveys that employ purposive sampling methods to generate a large sample of homeless youth. Analyses could explore differences between LGBT and non-LGBT youth related to physical and mental health, risk behaviors, housing instability, reasons for homelessness, human trafficking and commercial sexual exploitation, and other topics. With improvements to administrative data collection in programs for homeless youth, it may be possible to use these data to compare needs of LGBT and non-LGBT youth as identified by providers.

1 The Youth Count! Process Study final report (Pergamit et al. 2013) recommends options for conducting a national survey to gather information on the number and characteristics of homeless youth.
Research Need:

Protective factors for LGBT youth

LGBT adolescents appear to engage in risky behaviors at higher rates than non-LGBT adolescents, including behaviors that increase the likelihood of pregnancy and sexually transmitted infections. Studies also suggest that LGBT youth are more likely to suffer from depression and have suicidal thoughts or behavior than non-LGBT youth, and that large proportions of LGBT youth experience harassment at school because of their sexual orientation or gender expression. Researchers have begun to explore individual, family, and community characteristics that support positive outcomes or buffer the effects of negative experiences among LGBT youth, but more study is needed to identify protective factors for these populations.

Questions and Possible Approaches for Future Research

- What individual, family, and community characteristics, including policy environments, reduce the likelihood that LGBT youth will become homeless or engage in risky sexual behavior? Do types or levels of protective factors differ among subgroups of LGBT youth?

Analyses of population-based surveys of youth, such as the Youth Risk Behavior Survey, could help identify characteristics that are associated with reduced likelihood of homelessness, health risk behaviors, and negative sexual health outcomes. Alternatively, a longitudinal study including LGBT youth could examine changes in health and well-being over time to identify general and LGBT-specific protective factors. Focus groups or in-depth interviews with LGBT youth who exhibit relatively high or low levels of risk could also inform efforts to identify characteristics that may differ between these groups. Studies focusing on key subpopulations of LGBT youth, including transgender youth, youth of color, and youth living in rural areas could explore whether protective factors differ for these subpopulations.


TOPIC 2: LGBT YOUTHS’ SERVICE PREFERENCES AND EXPERIENCES IN RHY AND SEXUAL HEALTH EDUCATION PROGRAMS

Research Need:

LGBT youths’ participation in RHY and sexual health education services

The research base on LGBT youths’ use of homelessness or sexual health education services is very limited. Existing studies suggest there may be some barriers to service access, including fears of discrimination among LGBT youth and providers’ lack of knowledge or resources related to LGBT issues. Studies of LGBT youths’ service preferences suggest that they are interested in LGBT-specific sexual health education, peer support, and help coping with stresses related to their sexual orientation and gender identity, among other services. More study is needed to understand whether LGBT youth are able or willing to access services they may need. Research is also needed to shed light on the experiences of LGBT youth who may be involved in multiple systems, including programs addressing homelessness, child welfare, and juvenile justice.

Questions and Possible Approaches for Future Research

• What proportion of youth accessing RHY or sexual health education services is LGBT, and what are the characteristics of these youth? How does service use by LGBT youth differ across providers and locations?
  A survey of ACF-funded RHY or sexual health education providers could offer initial estimates of the proportion of youth served who are members of sexual minorities. More accurate estimates could be developed through entry and exit surveys of youth accessing services. A self-administered survey might minimize youths’ potential concerns about responding to questions on sexual orientation and gender identity.

• Do LGBT youth perceive barriers to participating in RHY or sexual health education services? If so, what types of barriers exist? How does the extent or nature of these barriers differ across service locations or among subpopulations of LGBT youth?
  Focus groups and interviews with LGBT youth and professionals serving youth in multiple locations could explore perceptions of the accessibility and relevance of RHY and sexual health education services. Participants could include youth who currently use these services and those who are eligible but do not currently participate. Surveys administered during counts of homeless youth in local areas could ask whether LGBT youth use shelters or other homelessness services and why they do or do not access this assistance.

• What are the service pathways of LGBT youth involved in multiple systems? How are these similar to or different from those of non-LGBT youth? What are LGBT youths’ perceptions of safety or inclusiveness of services across these systems?
  A qualitative study of a sample of LGBT and non-LGBT RHY could use in-depth individual interviews to explore participants’ history of involvement in RHY, child welfare, and/or juvenile justice programs and their experiences in these programs. The study could compare responses of LGBT and non-LGBT youth to identify differences in experiences or perceptions that may be related to sexual orientation.

• What are options for enhancing collection of administrative data in ACF programs for youth to include questions on participants’ sexual orientation and gender identity?
  Through a literature review and consultations with providers and youth, researchers could identify promising questions and protocols for collecting and managing data on sexual orientation and gender identity in RHY and sexual health education programs. A pilot test of these protocols could inform refinements and recommendations for wider adoption.
TOPIC 3: STRATEGIES FOR PROVIDING SERVICES EFFECTIVELY TO LGBT YOUTH

Research Need:

The implementation and effectiveness of homelessness and sexual health education services for LGBT youth

According to researchers and other experts, improving services for LGBT runaway and homeless youth requires establishing policies to prohibit discrimination and ensure the safety of sexual minority youth, increasing staff members’ LGBT cultural competency, and addressing the unique shelter and service needs of LGBT youth. To make sexual health education services more relevant to LGBT youth, experts have suggested such steps as discussing sexual orientation and gender identity during sexuality education programs, describing romantic relationships in terms that do not assume heterosexuality, addressing the specific sexual health concerns of LGBT youth, and adopting peer education models. Research is needed to assess these strategies and the effectiveness of services designed specifically for LGBT youth.

Questions and Possible Approaches for Future Research

• **To what extent have ACF-funded providers of homelessness or sexual health education services adopted practices intended to improve services for LGBT homeless youth?**

A survey of ACF grantees providing RHY or sexual health education services could examine whether and how providers have attempted to make services accessible or relevant to LGBT youth. Follow-up interviews with a subset of providers could explore their reasons for adopting recommended practices and any successes and challenges they have encountered.

• **How effective are RHY or sexual education services for LGBT youth?**

A demonstration project could identify RHY or sexual health education program models that target both LGBT and non-LGBT youth or LGBT youth exclusively. Research on these models could include implementation analyses to document key program features and target populations (for example, sexual health education in programs for homeless youth or youth in foster care). Experimental or quasi-experimental evaluations could assess whether the interventions improve outcomes for LGBT youth and compare the effectiveness of models that are LGBT-specific with those that target both LGBT and non-LGBT youth. This research should explore a range of outcomes that may affect sexual health outcomes, including mental health status and experiences of victimization.
REFERENCES


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For more Information about this project, please contact Andrew Burwick at aburwick@mathematica-mpr.com or Seth Chamberlain at seth.chamberlain@acf.hhs.gov.