

# TWENTY 10

## ***"It may not be fancy..."***

Exploring the service needs of homeless gay, lesbian, bisexual and transgender young people



**A report prepared by the  
Twenty-Ten Association Incorporated**

As part of the  
Service and Regional Research Program of the Supported Accommodation Assistance Program,  
a joint Commonwealth and State/Territory Program

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Thank you to Meredith Turnbull, Iain Kaan and the staff of Twenty10 for their ongoing support to GLBT young people, and for facilitating this research project, and to the other Supported Accommodation Assistance Program (SAAP) funded service providers who also participated in this study. Thank you to Claire Drake and Raina Jardin for their feedback and proof reading.

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## **EXECUTIVE SUMMARY**

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GLBT young people have been identified as being more likely to be homeless or at risk of homeless compared to their heterosexual peers due to the potential for family estrangement or breakdown of support relationships as a result of a GLBT identity. They are also more likely to find the cost of sustaining independent and stable housing difficult to meet and may face challenges in sustaining ongoing, stable accommodation due to limitations to employment and education opportunities (Fopp, 1989 in Irwin et.al., 1995:15).

In 1995, Twenty10 GLBT Youth Support commissioned a report to identify the housing and related service needs of GLBT young people who were homeless or at risk of homelessness. The research was the first such study in Australia, and estimated that there were between 5 000 and 6 250 homeless lesbians and gay youth at any one time in Australia.

This study seeks to build on the findings of the 1995 report to examine the strengths and gaps in SAAP service provision in responding to the complex and changing needs of GLBT young people who are homeless or at risk of homelessness.

The key research questions are:

1. What gaps and/or barriers do GLBT young people say exist in service delivery for GLBT young people in accessing Twenty10 and other SAAP funded organisations?
2. What strengths do GLBT young people say exist in service delivery?
3. What are the identified issues for NSW SAAP organisations in relation to GLBT young people that access their services?

The research design used semi-structured in-depth interviews with 18 GLBT young people who are homeless or at risk of homelessness in Sydney and rural NSW. The report also includes the findings from structured questionnaire interviews with 26 SAAP funded service providers. A summary of these findings are outlined below:

### **Provision of Services by SAAP-Funded Service Providers**

SAAP-funded service providers interviewed provided a range of services to support homeless youth including crisis, supported and semi-supported accommodation, brokerage and a combination of these. They also provided a range of complementary services for clients including counselling, peer support, referral, assistance with employment and income support, case

management, advocacy, emergency relief, family mediation, alcohol and drug counselling, living skills, outreach and similar activities. Service providers reported that between one and 25 per cent of their clients were GLBT, although most services interviewed did not provide GLBT specific services. The most common reason cited for this was funding restrictions. The presence of specialised service providers, namely Twenty10, saw services relying heavily on referral as a method of responding to GLBT clients. A minority of services were limited in their capacity to attend to GLBT clients, or to refer them on.

Service providers noted that a key issue faced by GLBT young people accessing their services was discrimination from other young people, and a lack of understanding from service staff. This was particularly the case in rural areas. Other issues identified by service providers relating to GLBT clients was the high level of drug and alcohol use among GLBT young people, issues around maintaining friendships, health issues, acceptance, image maintenance, poor life skills, family issues including breakdown and reconciliation.

### **Key Themes to Emerge From Interview With GLBT Participants**

**Accommodation** – Accommodation issues were identified by young people interviewed as a key concern. Participants identified issues including locating appropriate and safe places to sleep (on the streets or in temporary accommodation), accessing food and looking for work or accessing government assistance.

The issue of stability emerged as a key determinant for participants in finding appropriate accommodation. The Twenty10 medium to long term accommodation is popular as it provides stability, support and peer-based interactions but some are frustrated with waiting for a unit to become available.

**Mental and other Health Issues** – The main mental health issue experienced by the young people interviewed was depression, and some also identified as having anxiety. These mental health issues can be linked to suicide ideation and self harm and can impact on access to accommodation as well as perceived stability in accommodation. Young people cited that mental health issues impacted on their ability to maintain accommodation as well as to seek employment or education opportunities.

**Relationships** – Young people identified relationships to be an area of stress and instability, and resulting in a feeling of being out of control. Young people in rural areas were particularly concerned about the impact of relationships, with some participants remaining in unstable

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relationships to ensure access to accommodation. Participants identified issues including how to maintain same-sex relationships with limited role models and limited access, stress caused by relationship-breakdown. Young people identified that a counsellor could be useful in assisting managing relationship problems.

**Alcohol and other Drugs** – Drug and alcohol issue emerged as a key concern amongst participants, particularly young men. Reasons for drug use cited included temporary relief from depression, acquired optimism and that it required the additional energy required to complete daily tasks. Young people differed on whether there were appropriate and accessible support mechanisms available to provide support on drug and alcohol issues. Many participants noted their appreciation for the opportunity to socialise with non-drug using peers at Twenty10.

**Family** –Participants cited conflict resolution or brokering reconciliation was identified as key challenges, as well as the ostracism resulting from a GLBT identity. In general, participants are frustrated with family conflicts, and many have bad relationships with step-parents, or have been ostracised due to their sexuality. The support offered by Twenty10, particularly by the counsellor, was identified as a major enabler in assisting young people in managing family relationships and reuniting with families where possible.

**Education and Study** – Most young people cited previous barriers to access as a lack of information about entrance requirement, the benefits the course would provide, including the work that could be gained after completion. An additional barrier which was cited was the complexity of balancing education with managing mental health issues. Similarly participants cited the Twenty10 counsellor as having been instrumental in brokering access to education and training opportunities.

**Employment** - Employment was identified as a major area of concern for five participants. Some of the concerns cited included how to get a job and not be discriminated against, how to shift from unskilled to skilled work, how to get time to organise job hunting, how to find a suitable career path, what courses are needed to enter an industry, whether they appear suitable for a job and accessing on-the-job training. Most participants were being assisted in these concerns through case managers and counsellors, both at Twenty10 and other locations. The area in which participants have gaps in information seeking is around that of perceived barriers to certain jobs and professions based on appearance or sexuality.

**Social Networks** - Two participants identified this as a major area of concern, with participants seeing it as important to generate social networks. Specifically, they wanted to make friends with

other GLBT young people, and need to meet GLBT young people that are not drinking or using drugs, or ones that are more like them. This need for a social peer network was especially important for the rural based participants, who did not have a Twenty10 style service to address this need. The Twenty10 participants largely have these needs met at Twenty10, and appreciate the social outings and excursions.

**Sexuality** - Two participants said sexuality is a major concern, and the rural participants were especially concerned about this issue. The participants from rural areas had experienced a lot of discrimination. The concerns around sexuality were where to meet peers or get services in the country, concerns over mental health and sexuality, wondering if they are straight or gay, and how to meet GLBT young people with similar interests. Many were keen to point out that they didn't choose to be GLBT, and have often had deep guilt and shame. The Twenty10 clients have found the counsellor invaluable in discussing this issue. Twenty10 has also helped GLBT young people to have a sense of pride in their sexuality, and there is a pressing need for similar service for rural based GLBT young people.

**Ethnicity and Culture** - Some of the seven participants from culturally and linguistically diverse backgrounds (CALD) had experienced racial discrimination when growing up in Australia. A CALD specific group would be appreciated at Twenty10, and others spoke of the need to acknowledge the specific needs of CALD clients, without having to isolate each cultural group. The stigma of being GLBT figures largely for CALD families, and there is a service gap in accessing the CALD young people that are too ashamed to approach services.

## **Recommendations**

### **R1 Increase service provision to GLBT young people who are homeless or at risk of homelessness in outer metropolitan, regional, rural and remote NSW**

The research has illuminated a significant gap in service provision to GLBT young people in regional, rural and remote NSW. This has been echoed by the responses of rural service providers who often report a lack of facility for GLBT young people in their areas. Twenty10 is uniquely placed to assist in providing direct services to these areas. A capacity building approach, in which Twenty10 would provide training, support and assistance to local service providers, would be most effective. Raising the awareness of GLBT young people in the country to Twenty10's services is also an important strategy in easing a possible transition to the city. The Twenty10 support hotline is also an important resource for supporting these young people. There is an identified need to further the links with rural based SAAP funded services, and consider ways of informing rural

based GLBT at risk young people of Twenty10 services. This would only be possible with adequate funding, and Twenty10 may want to consider conducting targeted research with rural GLBT at risk young people to further explore the needs of this client group. The research would also include an assessment of the number of GLBT at risk young people in rural areas, and the number that move to Sydney due to the lack of services in their areas.

**R2 Create programs that provide culturally-appropriate support to CALD/NESB GLBT young people who are homeless or at risk of homelessness.**

The research did not suggest any urgent need for CALD/NESB programs, although a few CALD/NESB participants would appreciate NESB specific strategies, or activities. Based on the feedback from participants, Twenty10 could consider having a NESB specific ‘group’ on a regular basis. It is recommended that this group include all NESB peoples, rather than separate groups.

**R3 Conduct further research into Aboriginal and Torres Strait Islander GLBT young people who are homeless or at risk of homelessness to assess barriers to accessing existing services**

The research project was not able to engage any Aboriginal or Torres Strait Islander GLBT young person to participate in the study. It would be instructive to assess any real or perceived barriers that Aboriginal and Torres Strait Islander GLBT young people face in accessing Twenty10 and other SAAP services and to develop strategies to address these.

**R4 Develop integrated and coordinated case management to respond to the complex mental health needs of GLBT young people who are homeless or at risk of homelessness.**

Mental health emerged as a major area of concern for the participants and service providers. It is recommended that Twenty10 liaise more fully with other SAAP services and mental health service providers to develop effective case management strategies.

**R5 Strengthen interagency links to build sector-wide capacity to respond to the unique drug and alcohol-use related issues experienced by GLBT youth who are homeless or at risk of homelessness.**

Alcohol and other drugs are another area of concern for the participants, and also noted by other service providers. Twenty10 could develop further relationships with relevant AOD services, and as in mental health, instigate a program for identifying and assisting GLBT young people with alcohol and other drug issues. This entails equipping the service providers with further strategies for dealing with GLBT young people in a sensitive manner.

**R6 Increase provision of services to GLBT young people so that a continuum of care exists from crisis accommodation through to long term supported accommodation and exit point housing.**

Participants reported that they were not always able to find accommodation that was safe. Currently there are limited accommodation options for GLBT young people as they move from crisis back in to the community. A continuum of care would provide opportunities for young people to develop their resilience and life skills in affirming and safe environments.

**R7 Develop and disseminate sexual and gender diversity training and anti-homophobia training and resources to the SAAP sector.**

Service providers reported that they needed to increase their understanding of GLBT issues and required resources to support their work. At present there is no training specifically targeting the SAAP sector.

**R8 Develop and disseminate resources that affirm sexual and gender diversity among young people who are accessing SAAP services.**

Participants reported that homophobic attitudes and behaviours from other service users impacted their capacity to work with some SAAP services. Resources that encourage understanding and affirm difference amongst young people may contribute to a more accepting environment for GLBT young people.

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## **CHAPTER 1: INTRODUCTION TO THE STUDY**

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### **Background**

GLBT youth homelessness had emerged as a particular concern in Sydney in the early 1980s, when growing numbers of GLBT young people began presenting at inner-city welfare services. These young people presented with complex needs. Most were homeless, and concurrently experiencing unemployment, drug and alcohol misuse or engaging in street-based sex work. In many cases, these young people had experienced a break-down of family and peer-support mechanism as a result of their GLBT identity and, as a result, required an integrated suite of service provision.

In recognition of the complex needs of these young people and the limitations of existing service providers to respond effectively, a group of concerned welfare workers formed the Twenty10 association. The service began in a voluntary capacity, providing support services to homeless or at-risk GLBT young people. In 1984, Twenty10 began its accommodation services, beginning as a single refuge and growing to incorporate a range of accommodation options coupled with outreach support services and case-management.

In 1995, Twenty10 commissioned a report to identify the housing and related service needs of GLBT young people who are homeless or at risk of homelessness. *‘As Long as I’ve got my Doona’* (Irwin, Winter, Gregoric and Watts, 1995) was the first such study in Australia, and involved interviews with service providers and 27 GLBT young people. The report estimated that there were between 5 000 and 6 250 homeless gay and lesbian youth at any one time in Australia, and that resources to assist them were minimal. Through exploring the experiences and service needs of these young people, the report recommended increased provision of accommodation, health, recreational and other services; the development of supported employment and training programs and the development of training for workers in related services.

The report also identified that GLBT young people were more likely to be at risk of homelessness due to the potential for family estrangement or breakdown of support relationships as a result of a GLBT identity. Young people who were unemployed and do not live with their family may find the cost of housing difficult to meet and may face challenges in sustaining ongoing, stable accommodation (Fopp, 1989 in Irwin et.al., 1995:15). In 1989, Fopp (1989 in Irwin et al, 1995:15) found there were approximately 50 000 young people in Australia, aged 12-25, who were homeless or at risk of homelessness, consisting of 8 500 aged 12-15 and 41 000 aged 15-24.

Youth homelessness figures have continued to increase on a national scale, (Anglicare Sydney ‘New Voices’, 2003). However, it is difficult to estimate figures on GLBT youth homelessness, due to limited disclosure of sexual identity when accessing services. Twenty10’s growth and expansion, and that it continues to turn away hundreds of clients each year for which it doesn’t have the capacity to provide accommodation or case management, is testament to the continuing service needs of GLBT youth. In 23 years, Twenty10 has grown to become a specialist state-wide organisation funded by the Supported Accommodation Assistance Program (SAAP) and the Reconnect Program from the Department of Families, Community Services and Indigenous Affairs (FACSIA), which seeks to ensure homeless and marginalised GLBT youth have equitable access to appropriate support and assistance services. Twenty10 provides services including medium term supported accommodation, case management, counselling, support and advocacy, groups and activities.

Over time, the client-base of Twenty10 has increased in diversity and complexity. Many young people experience multiple marginalisation, including being culturally or linguistically diverse (CALD), coming from a non-English speaking background (NESB), or presenting from a regional, rural or remote area. Young people are also presenting with diverse levels of educational attainment.

The experiences of homelessness that young people present with have also become more complex. Changes in service provision models and changes to welfare provision and employment legislation have led to increased transience and instability for many young people. The Human Rights and Equal Opportunity Commission’s 1989 definition of homelessness (cited in Irwin 1995) remains useful in describing the experiences of these young people “a lack of shelter that is permanent, adequate and secure, and a vulnerability, as a result of this lack of shelter and of the lifestyle it imposes, to exploitation and abuse” (HREOC, 1989:43 in Irwin et.al., 1995:14).

This study seeks to build on the findings of the 1995 report to examine the strengths and gaps in SAAP service provision in responding to the complex and changing needs of GLBT youth who are homeless or at risk of homelessness.

## **Research objectives**

The research aims to assess the gaps and strengths in service delivery that exist for GLBT young people to access medium term SAAP services in NSW. The key research questions which the study seeks to address are:

- What gaps and/or barriers do GLBT young people say exist in service delivery for GLBT young people in accessing Twenty10 and other SAAP funded organisations?
- What strengths do GLBT young people say exist in service delivery?
- What are the identified issues for NSW SAAP organisations in relation to GLBT young people that access their services?

The research findings will assist the service planning, delivery and monitoring of Twenty10 and other SAAP services to better meet the needs of GLBT young people. It will also enable a better and broader understanding of the needs and realities of GLBT young people; collecting new data on the realities of homeless GLBT young people from diverse backgrounds and validating their experiences.

The research will also facilitate continued interagency collaboration, encouraging other SAAP funded organisations to work effectively with GLBT homeless youth, and will build on the limited research-base on service provision to GLBT youth who are homeless or at risk of homelessness.

## **CHAPTER 2: LITERATURE REVIEW**

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There is an overwhelming evidence base which demonstrates the un-met service provision needs of GLBT young people. Same sex attracted youth are up to six times more likely to attempt suicide (Remafedi 1999 in Brown et al 2002) and have significantly higher rates of contributing psychosocial problems including alcoholism, illicit drug use, homelessness, involvement in sex work, and experience elevated levels of verbal and physical violence from both parents and peers (Brown 2002). GLBT young people report higher use of drugs and alcohol and are more vulnerable to the development of mental health problems (Hillier et al 2005). In GLBT populations in general, there is a higher rate of psychiatric morbidity and a higher prevalence of anxiety mood disorders and substance abuse disorders (Jorn et al 2003).

The development of a GLBT identity may leave some young people feeling isolated from peers and family, or from previous support structures. Thus, it may erode the possible benefit of what might be protective factors for most youth (Sullivan and Wodarski 2002). GLBT youth experience significant discrimination which seriously hinders their perceived level of access to existing services. In 2002, only 28% of NSW youth services actively implemented access and equity policies for young gay men, lesbians, bisexual or transgender people (Youth Action and Policy Association).

International research (Dunne, Prendergast and Telford, 2002) has indicated that many accommodation service providers suspect there are increasing numbers of young people experiencing periods of homelessness due to issues related to sexual identity. Dunne et al found that for a ‘sizeable minority’ of homeless young people, sexual identity had played an important triggering role for their homelessness and that for up to a third of GLBT young people a crisis was prompted by family responses to their sexuality. However, these young people largely remain invisible, choosing not disclosing their sexual identity issues for fear of abuse and harassment. Dunne et al cite that mainstream hostels can be unsafe places for GLBT young people, particularly if appropriate controls are not in place.

In a comprehensive report on the sexuality, health and well-being of same sex attracted young people, a research team from La Trobe University’s Australian Research Centre in Sex, Health and Society (Hillier, Turner and Mitchell, 2004) found that, in relation to homophobic violence, a significant number of young people – 38% - reported unfair treatment on the basis of their sexuality and 44% reported verbal abuse and 16% physical abuse. This compares with the general SAAP data (refer SAAP report 2000-2001), in which males under 25 years cited domestic violence as a

reason for seeking assistance by only 1.2%. A major finding of Hillier et al was the significant relationship between experiences of abuse and health deficits. Young people who experienced homophobic violence and discrimination had more health deficits than those who had less experience of homophobic violence.

In relation to sexual identity, Hillier et al (2004) found that overall more young people were prepared to state that they were attracted to the same sex and to identify as gay, homosexual or lesbian than in their previous study in 1998. Research indicated that young people chose to disclose their sexual identity for a range of complex reasons including perceived peer-group norms and acceptance.

GLBT young people living in non-metropolitan areas may face particular difficulties in relation to sexual identity disclosure. While urban contexts provide greater anonymity and access to alternative cultures, young people in regional, rural or remote areas can face greater challenges in accessing GLBT culture and forming a positive sexual identity (Phillips, Watt and Shuttleton, 2000). The Hillier et al (2004) research also found that rural GLBT youth feel less safe in social situations than urban young people however there were no major differences in health deficits such as drug and alcohol abuse. Rural youth reported more difficulty accessing information through gay media and concerns about isolation and fear of exposure.

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## **CHAPTER 3: METHODOLOGY**

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### **Research Design**

The survey research design used qualitative and quantitative methods to investigate the service need of homeless and GLBT young people and those at risk of homelessness. The primary research method was in-depth interviews with GLBT young people. It also includes a questionnaire to SAAP funded service providers to further investigate the service need for the target group. While the existing SAAP service clients range from 12 to 24 years, the research was contained to interviewing those aged 16 and over as young people aged 16 to 17 are deemed legally responsible for their shelter and Twenty10 staff acts as a caregiver or guardian to young people in this age group.

Twenty10 data also indicates a number of GLBT youth in rural areas of NSW. As such, the sample included interviews with five rural based participants. These interviews were conducted via an appropriate SAAP service in a selected rural location. The report provides separate chapters on the analysis of SAAP funded service provider questionnaire and the findings from the in-depth interviews with GLBT young people.

#### **THE INTERVIEW**

The primary research method was semi-structured taped in-depth interviews. The design involved a non-random, purposive sample of 18 GLBT young people who are homeless or at risk of homelessness. The research did not seek to generalise to the broader population of GLBT homeless youth. However, it aims to be representative of the population in terms of gender, age, geography, ethnicity and sexual identity. There is however most likely an under representation of Aboriginal and Torres Strait Islander young people which is discussed further throughout this report. All participants received a \$20 gratuity for their time and to cover expenses. The study was open to any young people aged 16 to 24 qualifying for Twenty10 and SAAP service provision. The researcher did not interview any young person that was visibly intoxicated from substance abuse, or who was unable to understand the purpose of the study. While committed to including the experiences of culturally and linguistically diverse (CALD) young people, the researchers did not have the resources to interview those without a reasonable comprehension of the English language.

In total, there were 18 participants in the study. 13 participants were recruited via Twenty10 and five participants were recruited via a rural based SAAP funded agency, and interviews conducted

in cafes and outdoor areas. Potential metropolitan participants were approached by Twenty10 staff, specifically the client support officer and the counsellor, and taped interviews conducted by the researcher. Participants were interviewed with informed consent and the appropriate confidentiality and anonymity protocols (see Appendix). The participants were also asked background questions including age, sex, country of birth, ethnicity, occupation/current studies, plans for future studies, postcodes of parents/current postcodes, highest level of education, sexual identity,

The interview guide was pilot tested with a young person at the offices of Twenty10 in Sydney, and further refined by the researcher and Twenty10 staff. The interview guide (see Appendix) was developed in accordance with the time line interviewing technique used in qualitative research. The technique involves asking participants to detail the last time they used an accommodation service, or to outline the service need/s of greatest concern to them such as housing, employment and the like. The researcher then asked what particular questions they wanted to find out, know or understand the answers to, and asked how they found the answers to each of these questions.

The topic areas developed for the interview guide were:

- Availability of relevant information for service needs – were they able to find the information and resources they sought and where did they find them / gaps in information seeking and service delivery requirements
- Experiences of homelessness and where help was sought and found
- Direct experiences with Twenty10 and related services
- Experiences of bullying, abuse or harassment as a result of their sexuality
- Family – parents and sibling relationships
- Questions and areas of concern including employment, study, money, health – both mental and physical, social networks, ethnicity, relationships, religion, drug and alcohol use and sexual identity
- Description of an ‘ideal’ service for GLBT young homeless people

The interview transcripts were analyzed using a thematic analysis and extracts from participants’ transcripts are included in the report. These extracts have been chosen so as not to identify the young person being interviewed, rather to allow the voice of the participants to be validated. A coding frame was devised by the researcher and the transcripts coded in relation to certain themes and topics that arose from the interviews.

## THEMES FROM INTERVIEWS WITH GLBT YOUNG PEOPLE

The interviews with young people sought to elicit the prior and current service needs of GLBT young people who are homeless or at risk of homelessness. As stated in the methodology, some of the participants are current Twenty10 clients and others are based in rural areas – specifically the far north coast of NSW. The participants were asked at length about their accommodation issues and concerns, and these are outlined in chapter 6. They were then asked to nominate up to two major areas of concern or need from the following list:

- Accommodation
- Education and study
- Job hunting and work
- Social networks
- Relationships
- Sexuality
- Ethnicity
- Family
- Health / Mental health
- Alcohol and other drugs

For each of these areas, the participants were asked to nominate the questions, or needs that they had in relation to that issue. From chapter 6 onwards, this report lists examples of specific questions and needs, and looks at how participants address those needs, and where they have gaps in information seeking. The list includes questions and needs that were not on the ‘top two’ list, as many discussed these as general concerns. After accommodation, the areas of greatest need are employment and mental health.

## QUESTIONNAIRE FOR SAAP FUNDED YOUTH ACCOMMODATION SUPPORT SERVICE PROVIDERS

The survey of SAAP funded service providers involved administering a structured questionnaire to relevant SAAP service providers listed in the *Youth Accommodation and Other Youth Services in NSW Directory (YAA) 2006/07*. The questionnaire replicated – in parts – the questions asked to service providers in the 1995 survey (Irwin et al, 1995). There were also additional questions on the issues facing GLBT young people. The questionnaire is a brief, structured questionnaire that canvasses the service type, the services offered for homeless young people, the discrimination policies in place, the services for GLBT young people, experience with this client group and Twenty10 and barriers to service delivery for this client group. The questionnaire was refined after a pilot survey of five or so organisations revealed a need to further explore the experience of GLBT young people with these organisations. A copy of the final questionnaire and Information Statement for Service Providers is contained in the Appendices.

The questionnaire was initially sent by fax and email to 80 SAAP funded agencies listed in the directory, namely those with email and/or fax numbers for contact. In total, there are 165 organisations listed in the directory (refer Chapter 4). The ‘mail out’ resulted in only six completed questionnaires. As a follow up, the researcher contacted agencies by phone and completed the questionnaire with the service coordinator or other appropriate staff member. This resulted in 24 SAAP funded listed agencies being interviewed for the study.

## **Ethical Issues**

In a study of this nature, it is of paramount importance that the confidentiality and anonymity of the participants be protected. The study was fully approved by the Ethics Review Committee (RPAH Zone) of the Sydney South West Area Health Service. In accordance with the committee requirements, each participant was given an information sheet for participants (see Appendix). In addition, the participants were informed verbally about the nature of the study and of their right to withdraw at any time. Potential participants were invited by Twenty10 staff to be interviewed. There was no pressure to be interviewed if they did not want to participate. The interviews took place in a private room at Twenty10 and were taped by the researcher.

To ensure anonymity, the participants were invited to provide a pseudonym. The participants were referred to by the pseudonym throughout the interview, and the pseudonym was used for interview tapes and related material. The participants were assured that only the researchers had access to the interview tapes and that the staff of Twenty10 did not listen to the tapes or identify participants from the transcripts. The participants were further assured that the individual participants would not be identified in the research report or related publications. In accordance with ethics committee protocol, the tapes were kept fully secured at the office of the researcher, and destroyed on completion of the study. The participants were given \$20 to compensate for their time and expenses associated with being interviewed. This amount was seen as appropriate to acknowledging the value of participation, but not large enough to encourage participation in its own right.

As acknowledged in the 1995 report ‘As Long As I’ve Got My Doona’ there is the possibility that young people will discuss sensitive issues that provoke a strong emotional reaction. For example, a young person may speak of sexual abuse, drug use or family breakdown. In anticipation of this possible situation the researcher informed the young people of any services and the counselling options available at Twenty10. It is largely for this reason that the interviews took place at the service provider’s office, so as to have appropriate support on hand if issues should arise.

## **Limitations of the Research**

A key limitation of a research project of this kind is the lack of demographic data on GLBT young people. Therefore, it is difficult to ensure that the sample is sufficiently representative. Through accessing research participants who are connected to SAAP service providers, there is a risk of not capturing those young people who experience the most severe barriers to service provision and have not made contact with a GLBT specific or mainstream SAAP service provider. There are obviously practical limitations to accessing and interviewing this demographic.

A particular limitation of the research is the lack of Aboriginal and Torres Strait Islander GLBT young people who are homeless or at risk of homelessness. The study includes seven participants from non-English speaking backgrounds.

## **CHAPTER 4: PROVISION OF SERVICES FOR GLBT YOUNG PEOPLE BY SAAP FUNDED SERVICE PROVIDERS**

80 SAAP funded service providers were asked to complete a structured, two page questionnaire. The organisations were listed in the 2006-07 YAA (Youth Accommodation and other Youth Services in NSW) Directory. This directory contains 165 SAAP funded organisations from both rural and urban areas. The organisations provide for crisis, medium and long term accommodation and support services for young people who are homeless or at risk of homelessness. The breakdown of SAAP funded youth services listed in the directory is as follows, followed by the number of in the sample:

TABLE 1. Youth Accommodation and other Youth Services in NSW

<b>SERVICE TYPE</b>	<b>SAAP FUNDED SERVICES</b>	<b>SAMPLE</b>
<b>Crisis Accommodation – Metro</b>		
East – Inner West – North – West – South West	27	5
<b>Crisis Accommodation – Rural</b>		
Hunter – North – West – South	28	3
<b>Accommodation and Support Services - Metro</b>		
East	12	5
Inner West	12	3
North	13	0
West	25	2
South West	15	1
<b>Accommodation and Support Services - Rural</b>		
Hunter	4	2
North	10	2
West	8	0
South	9	1
<b>Non-Accommodation Youth Services</b>		
Legal, AOD, Health, Mental Health etc	2	0
<b>TOTAL</b>	<b>165</b>	<b>24</b>

Overall, only six questionnaires were returned by fax or email. To encourage a higher response rate, the researcher contacted service providers by phone and obtained another 18 questionnaires. As shown above, the total sample was 24 SAAP funded service providers. The phone survey allowed the researcher to probe more fully on the services provided for GLBT young people, and to canvass the specific issues facing GLBT young people accessing the service. This section summarises the findings from the survey.

## **Overview of Organisations**

Of the 24 organisations that participated in the survey, 23 were accommodation services and one was a non-accommodation service. The non accommodation service provided a range of services including alcohol and other drug (AOD) services, legal services, health services to young people who are homeless or at risk of homelessness.

**14 services identify as being in an urban area.** The majority of these are in inner Sydney and a few in the outer Western suburbs. Ten services identify as rural or regional, and include service in Katoomba and the Central Coast. Most of the rural/regional services are in the Hunter region, far north coast and Central West NSW.

**The majority are small services with 11 having between 1 and 5 staff.** Of the remainder, six services have between 6 and 10 staff, five services have between 11 and 20 staff and only one service has over 21 staff.

## **Service Provision for Young People who are Homeless or at Risk of Homelessness**

Service providers were asked what type of service they provide. Most services provide a combination of accommodation service types e.g. medium and long term accommodation. Nine services provide long term accommodation, six provide medium to long term, four provide medium term, ten provide short term and three provide crisis accommodation. Six services said they provide gender specific accommodation i.e. women only, transgender only.

Services were also asked for the model used for their service. Ten identified a crisis model, six provided brokerage, 13 provided supported accommodation, seven provided semi supported accommodation, and three provided unsupported/independent accommodation. 14 services offered a combination of these models.

Services were asked what specific services they provided for young people who are homeless or at risk of homelessness aside from accommodation. Almost all the services provided a combination of the listed services, and many added other types of services provided on a generalist basis. 12 provided counselling, eight provide peer support, 17 provide referral services, four provided services for NESB clients; 11 provided services for Aboriginal and Torres Strait Islander clients (including referral); 16 provided assistance with employment and income support and 18 provided assistance with health issues and services. Other services provided are case

management, advocacy, shelter support, emergency relief, groups, early intervention, family mediation, AOD support, living skills, service needs/practical assistance, anger management, specific projects, outreach, community education and translators for NESB clients.

## **Discrimination Policies and Issues for GLBT Young People**

Rather than having specific discrimination policies, it is more common for services to have a general ‘umbrella’ policy which covers all forms of discrimination. To this end, **14 services say they have a ‘general’ policy on discrimination**. Some services point out that the policy is read by all new residents, and that staff try to enforce it. Some services have found that there is a gap between the policy rhetoric, and the behaviour of other residents toward GLBT clients. Of the 18 service providers that were asked what the issues are for GLBT young homeless and at risk of homelessness people, eight service providers spoke of the discrimination against GLBT young people from other residents and clients, and talked of verbal abuse and bullying from other clients. They observed that these clients are often homophobic and can be older than the GLBT residents and clients. As one provider put it:

*“homophobia with other residents in the house/they usually end up leaving the house because of verbal abuse or bullying”.*

Five service providers said that drugs were an issue among GLBT young people, especially party drugs like methamphetamine, and the peer pressures to be part of party drug sub-cultures.

Other issues perceived by the service providers were maintaining friendships in services, health issues, lack of acceptance in mainstream society, image maintenance, poor life skills, family issues, lack of understanding service staff – *“Discrimination from service providers that limit their access to services/limited understanding from staff providing case management/limited resources available or no knowledge of resources available”*, sexual abuse issues, mental health issues and perceived or real discrimination.

## **Services for GLBT Clients**

**18 services cited that between one and 25 % of their clients are GLBT. Although most service providers have GLBT clients and residents, 16 services do not provide GLBT specific services.** Of those that provide GLBT services, it seems that some of these are actually referring to generalist services. Others say it is part of their service platform to have equality for all residents.

For those service providers with no GLBT specific services, the most common reasons are that they link up with appropriate services (six services), or refer to Twenty10 (seven services). Some of these made a point of saying that they find Twenty10 to be a great service.

The service providers were asked what barriers they perceived in their agency to providing generalist and/or specific services for GLBT young people. Some seven providers said no barriers, three said resources/funding, and the remaining responses around lack of GLBT services to refer to, lack of access to Twenty10 (two), elitism of providing GLBT services (“*Most young people are dealing with identity and sexuality issues*”) and discrimination from other clients and residents.

## **CHAPTER 5: DEMOGRAPHIC PROFILE OF PARTICIPANTS**

### **Place of interview**

The majority of participants were interviewed at the offices of Twenty10 (72%). A further 28% were interviewed in the Far North Coast of NSW.

### **Gender**

10 participants were male (55.5%) and 8 were female (44.5%).

### **Age**

The average age of participants was 19.7 years, and median age was 19.5 years. The age range of participants was 17 to 23 years.

### **Ethnicity and culture**

The majority of participants (89%) were born in Australia. There were a large number of second generation participants, with some 7 participants (39%) having a parent or parents born in a non-English speaking background country. Participants were not specifically asked about religion, though it was established that one participant was Jewish, at least one was Muslim and one identified strongly as a Christian.

### **Location**

The majority of participants (78%) had parents that lived in rural areas or outer metropolitan areas. Many participants grew up in rural areas, and moved to Sydney in later years. This is reflected in the high number of participants (67%) that now live in Sydney.

TABLE 2: Where Parents of participants live

Region	Number	Percent % (rounded to nearest whole number)
Sydney	4	22
Outer metropolitan e.g. Central Coast	2	11
Non-metropolitan e.g. rural	12	67

TABLE 3: Where participant lives now

Region	Number	Percent % (rounded to nearest whole number)
Sydney	12	67
Outer metropolitan e.g. Central Coast	1	5
Non-metropolitan e.g. rural	5	28

## Employment

The majority of participants were studying or studying and working part time (61%). A minority were not working at present.

TABLE 4: Employment status of participants

	Number	Percent % (rounded to nearest whole number)
Study	6	33
Unemployed	5	28
Study and part time work	5	28
Not stated	2	11

## Education

A large number of participants were currently studying at TAFE (44%). The rest were doing the HSC or Year 10 (16.5%), university (5.5%) or no study (28%). A few had deferred their university or TAFE courses, and a large number (67%) intend to study in the future. Some 44% of participants had completed Year 10 or less, and 28% completed HSC. This reflects the young age of the participants, and many intend to undertake tertiary studies. Some 22% had completed TAFE or some university.

TABLE 5: Current study status of participants

	Number	Percent % (rounded to nearest whole number)
Year 10	1	6
HSC	2	11
TAFE	8	44
Tertiary	1	6
None	5	28
Not stated	1	6

TABLE 6: Highest level of education achieved by participants

	Number	Percent % (rounded to nearest whole number)
Year 9 or less	2	11
Year 10	6	33
HSC	5	28
TAFE	2	11
Tertiary	2	11
Not stated	1	6

TABLE 7: Participants' planning for further education in future

	Number	Percent % (rounded to nearest whole number)
Yes	12	67
No	1	5.5
Don't know	3	17
Not stated	2	11

**Sexuality**

44% of participants identify as gay, 39% as lesbian, 11% as bisexual and 5.5% as transgender.

TABLE 8: Sexuality as defined by Participants

	Number	Percent % (rounded to nearest whole number)
Gay	8	44
Lesbian	7	39
Bisexual	2	11
Transgender	1	6

## **CHAPTER 6: ACCOMMODATION AND HOMELESSNESS**

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This chapter outlines the reasons for leaving home and the experience that GLBT young people have had of homelessness. Although all the participants qualify, or have qualified as homeless or at risk of homelessness, many now reside in supported accommodation through Twenty10 and other services.

### **Reasons for leaving home and experience of homelessness**

It is common for participants to have left home at an early age – often between 13 and 17. Many participants were from rural areas, especially from the Central Coast and mid-North Coast NSW. The most common reason for participants to have left home was family unrest. Derek, for example, had a difficult time with his step-father: *I was 15; my step father was homophobic and actually got pretty violent. That's what happened; my mother took his side [Derek].* Derek's experience is not uncommon. As is shown in the following extract, this can lead directly to a period of homelessness, especially when there is no time to prepare for leaving:

*My family was a bit homophobic and when I told them about being gay I had to go to a refuge. I was on the street for two or three days as I was too scared to go to a refuge because I knew there was going to be straight kids there [Bailey].*

The participants cited significant experience of sexual discrimination, and were particularly hurt by that experience from other family members. In some cases, participants cited the parent/s were in denial about the young person's sexual orientation.

Other participants lived in alternative family structures with relatives or extended family members, with continued instability leading to the young person making a decision to leave home. Daisy for instance, found growing up with her uncle and aunty to be unstable, compounded by their issues with immigration: *I was living like that from 13 to 17 and it wasn't like a home environment at all, like cook my own dinner, my own washing, went to bed [Daisy].*

Participants like Daisy that have left home voluntarily often feel a pressing need to do so. Other participants talk of the ongoing conflicts with family and how they grabbed opportunities to move out with friends. If this didn't work out, then they either moved back home, or became homeless. Some participants took responsibility for the conflicts at home. For example, if they used drugs at home or acted aggressively they were not surprised that their families want them to move.

## **“It may not be fancy...”**

Whether they left home voluntarily or not, those participants that identify as having been ‘technically homeless’ – a term which they tend to equate to sleeping outdoors or in shelters – the experience is traumatic. Bubbles was suddenly made homeless when the share-house he was living in was evicted:

*“...so as of that Saturday I had no place to stay, no money or clothes ...I had one friend who offered me a place to stay but ... I could only stay for three days and was technically homeless for about two weeks ... on the street. Sleep wherever [I: What was that like?] It was terrible, the worst experience I’ve ever been through. It’s so cold and you have nowhere to go and you’re so tired but you can’t risk going to sleep because someone might take something or in my case somebody might see you ...” [Bubbles]*

Bubbles reveals a lot about the trauma of being homeless, being taken unawares, and no knowledge or experience of homelessness. With this came the sleep deprivation, the hunger and humiliation. These experiences are echoed by other participants like Ari who was sleeping in parks and a tree. Ari reflects on her experience: *It really made me realise how much I had and didn’t take it for granted. Although it was a traumatic experience and I hated every minute of it,.. [Ari].*

For others, the experience is not all bad. While a ‘typical day’ can be hard going, Angie reveals another picture:

*You get up and steal money because you have to buy cigarettes. Cause you’ve got no money to start off with and no roof over your head, but you’ve still got addictions you have to feed. .. on top of that you have to get food. [I:And then at night, what’s that like?] Usually bumming around, having coffee or alcohol and on drugs. That’s when you usually have your fun for the day [Angie 18 y.o.]*

In all, **five** participants identified as being homeless. For them, being homeless occurred when they slept outside, in parks and the like. The other participants did not identify as homeless, considering that having a roof over one’s head qualifies as a home – whether it be a friend’s couch or a crisis refuge. For example, Brodie says: *Haven’t been homeless but I got kicked out of home by my grand parents. I was previously living with my mum. Then my grandparents kicked me out because I was gay. Then I was staying with a girlfriend. [Brodie]* It is clear that these participants experienced the uncertainty of homelessness when ‘kicked out of home’, compounded by the psychological impact of sexual discrimination. These participants used words such as ‘stress’ and ‘panic’ to describe their feelings, but rarely frame it as homelessness. This is explored further in the following sub-section.

## **Knowledge of homelessness and BEING at risk of homelessness**

Definitions of homelessness have been expanded to include the condition of being transient or insecure in accommodation. This condition of being at risk of homelessness makes young people vulnerable to exploitation and abuse. Given this, it is interesting to look at the participant’s interpretations of homeless and at risk of homelessness. For example, Nathan says he has never been homeless, and it is clear that Nathan also equates homelessness with the conventional idea of having no shelter or roof over one’s head: *I can’t say I’ve been really homeless as such...Never lived on the street [I: Have you had temporary accommodation?] ...Mostly boarding houses and stuff, just having own room and sharing facilities... [Nathan]*

Some participants were asked what is meant by ‘at risk’ homeless. In general, they had a fairly good understanding of the term. This was particularly the case for Twenty10 clients who were aware of ‘at risk’ homeless from Twenty10 staff or other services. For example, the following definition of at risk of homelessness by Drake (Twenty10 client) is fairly representative: Means *the situation has got to a point where there’s potential for you to get kicked out of home [Drake]*. Drake then goes on to say that he has never been at risk of homelessness, although his past accommodation experiences are certainly those of a young person who is homeless or at risk of homelessness. Bubbles also has a good understanding – almost text book – of at risk of homelessness, though clearly distinguishes this from the actual experience of being homeless:

*[I: Do you know what is meant by at risk of homelessness?] Factors in people’s lives that have a high probability of making them homeless in the near future such as trouble at home, domestic violence at home, peer pressure, social violence and things like that...feeling like you’re on borrowed time (Bubbles)*

What this suggests is that some participants were not aware of the vulnerability of temporary living situations. However, they were able to differentiate between a living situation that felt ‘stable’ and one that didn’t. For example, Bubble’s sense of ‘borrowed time’ is an indicator of instability, and ultimately this is the divider between being at risk of homelessness and homeless.

## **Current accommodation experience**

Most of the participants had stable accommodation at the time of being interviewed. In particular, the participants that were currently housed in medium to long term housing reported feeling safe and secure in their present accommodation. Most of this accommodation was supplied by Twenty10 or community housing services in inner city units where they paid for lodgings and bought their own food. Typical of the experience of Twenty10 accommodation is Bubbles, who lived alone in one of their inner west units: *It may not be fancy, it may not be what I want to be in five years but for what it is it's an amazing block of units...It's great I feel comfortable there.* [Bubbles]

A few reported experiences with practical issues such as leaking water taps and the like. They generally didn't report the problem, and saw it as their own responsibility. Others were in more of a supported housing situation, and seemed to be content with this arrangement. Other participants were living back at home with their family, after a period of temporary accommodation. The few participants living at home report a fairly stable situation, as they were having their basic needs met. And a few are living away from home in a share house, or with a partner. The experiences had been more mixed, and it was evident that some do not feel so secure in this arrangement. For example, Holly seemed frustrated with her older flat mate: *I've been really sick and she just thinks I'm being slack with my chores* [Holly 17 y.o.].

Others have a more positive, stabilising experience of sharing a house, but need to feel comfortable. Nathan, for example, was looking to move out as he felt uncomfortable having a room in a share house. The theme of stability in accommodation was a recurring one. For the participants, stability meant having one's own place or space, without the feeling of encroaching on other people. Similarly, the participants needed to feel comfortable in their living environment, thus equating to the levels of comfort they feel with those they are living with. They generally enjoy being self-sufficient, and even living alone is preferable to living less comfortably with other people. This is expressed well by Brodie who is currently living with her partner: *I'm living there now but I want somewhere stable. [I: What do you mean by **stable**?]... Somewhere I can call my own and won't have to move every week...get my life back on track.* [Broody]

For participants, the best living situation is where they feel stable *and* comfortable with other people. These sentiments are experienced more broadly; however GLBT youth have an increased focus on stability compared to other young people. It seems that the style of accommodation offered by Twenty10 and community housing services is most appropriate for the participants' needs, and some are waiting eagerly for a Twenty10 housing unit to become available.

## **Questions and needs around accommodation and homelessness**

Nine participants had particular questions or needs about accommodation, or had had in the past 12 months. Of these, only three participants saw accommodation as one of the most important concerns. Presumably, this is because most of the participants are satisfied with their current accommodation – often through Twenty10. The actual questions and needs regarding accommodation (as both general and major concern) are:

- [Can you get me] a place to live that’s pretty stable?
- How much support do you get there? Do you have to pay board or rent? What’s the actual place like?
- [Can I get] secure accommodation during the time doing my final year of school and financial support for books?
- I explain that I know how to clean; I don’t need anyone to show me how to clean. But sometimes when I get really down I just can’t do anything.
  - How to maintain cleanliness during periods of depression?
- How to go about finding accommodation and that sort of thing? [How do I get] help with cheaper housing as I’m only on youth allowance?
- Getting forms done and accepted like the application I made to Centrelink- [Am I doing it right?].
- I needed somewhere else by myself, I can’t really live at home
- I didn’t have money I couldn’t make phone calls; I didn’t know where to go. [when homeless]
  - the things I needed to know when I was homeless was A) ‘Where do I get food’ because I was so hungry. B) Where do I sleep? Because I was so tired c) How do I get a job? I’m not one of the people that doesn’t like to work
- The house is old and the water pressure is bad
- I don’t know where I’m going to live
- :I didn’t know I was [unclear] on a lease....and how to budget

Most participants had had questions or concerns around housing and accommodation prior to contacting Twenty10. Similarly, other participants have had assistance with their housing needs from their caseworker at Twenty10, or elsewhere. Brodie had also used a number of sources to answer accommodation needs: *I was looking into Department of Housing by myself and I brought that up with her and she said we can do that together. [I: How did you know you can go to DHH?] One of my gay friends lives in Housing Commission and told me about it [Brodie]*

## **“It may not be fancy...”**

As with other participants, the advice of friends was crucial to understanding what they needed to know about housing and related services. One participant worked through her issues around cleaning with the caseworker, and ultimately saw that she needed a routine. The following dialogue with Daisy shows how the case worker helped her with a cleaning obsession: *I have obsessive compulsive tendencies and clean as much as I can but don't know when to stop. [I: How can she – the caseworker - assist you?] Come around and check up, see the house is in good order and maintenance [Daisy]*

It seems that many of the participants have had their questions and needs around housing and accommodation met using active information seeking of government services, then working through the accommodation process with a caseworker. Many participants found out information from their friends and people they know. The participants become very self-directed in their information searching when helped by a caseworker, or someone similar. Still, they can be stopped from pursuing all the avenues. For example, Brodie can get depressed, and this stops her from putting in more effort: *“...now I'm depressed and stuff about having nowhere to live. It makes it a lot harder to find somewhere to live, you don't want to get out of bed. You just think 'I'll never get somewhere to live' or move or get a job or live in a nice place. [Brodie]*

Simba also feels he can address the practical living issues without imposing on the service provider, and says: *But I'm lazy and if I wanted to get it (water pressure) fixed I could [Simba]*. He doesn't see it as the service providers responsibility to fix the water pressure, and instead lives with it. And Derek, for example, gets blocked from seeking help to pay bills, and figures it out himself. Like some other participants, he chooses not to worry about future accommodation needs, and to focus on the present.

## **Image of an ideal accommodation service for GLBT young people**

The participants were asked how they would envisage an 'ideal' accommodation service for young GLBT people. The following suggestions were made: things for young people e.g. music, graffiti on the walls; internet; to help with every day living e.g. health, money; GLBT refuge; Twenty10; support / understanding; guaranteed housing.

A service with support, caring and understanding emerges as important for young people, a sense that a service was there to support the young person and which understood the issues facing young people who were homeless or at risk of homeless and GLBT. For example, Nathan saw an understanding service worker as: *“I suppose being in that situation or being open minded” [Nathan]*.

Those participants that had grown up in country areas were asked how they would envisage an ideal GLBT service for young people in country areas. Of these, the participants said: Twenty10 style service wouldn't work – too much homophobia; a hotline; GLBT youth Drop in centre; groups / meetings; somewhere to stay if need to; link with Twenty10 and meet other GLBT young people.

Some participants that are current Twenty10 clients with experience of rural living would like to see a Twenty10 style service in the country. Brodie seems excited by the prospect of such a service in her home town (north coast): *Oh yes, it would be a place for gay youths to go. A place for them to come out, no one has to know except for Twenty10. It would take pressure off them, and a lot of kids that are gay kill themselves as well because they can't tell their parents* [Brodie].

Others feel it would need to be more clandestine, as there is too much homophobia in the country and GLBT youth would be exposed and singled out. Despite this misgiving, it is seen as important that GLBT young people in the country have the opportunity to meet with others. For Simba, a solution is based on the 'Camp Queer' model in Campbelltown NSW: *I know there is a group in Campbell town called Camp Queer and that's a service in the country that I've experienced myself. I think it was good for people in the country...when in the country you don't realise there is a peer community and stuff.* [Simba]

For the rural based participants, an ideal service is a drop in centre for GLBT youth. It would also offer the opportunity to meet with other GLBT young people, and help to break some of the social isolation they feel so keenly.

## **CHAPTER 7: MENTAL AND OTHER HEALTH ISSUES**

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### **Mental Health**

It is apparent that health issues, particularly mental health issues are an area of major concern. Six participants nominated health as areas of major concern or need. Mental health issues identified included depression, anxiety and obsessive compulsive disorder.

The questions young people raised in relation to mental health were:

- How do I manage depression?
- How do I manage the problems that arise with depression?
- I was looking for opinions on where to go and what to do and coping mechanisms with depression and anxiety and
- How to get out of the self-harm pattern
- Just someone to talk to and get it all out, it's just really hard keeping it all in and it just boils up

Participants reported having attempted to answer these questions, specifically through Twenty10 counselling or with other health professionals. For some, mental health is temporary and tied up with other issues like accommodation. For others it is linked to drug use or discrimination for being GLBT, either from family or others. When asked how depression feels, the participants speak of: *“Really bad...hard to describe. A really bad gut feeling” [Nathan].* For Bailey, it feels *‘horrible’* like *“It’s horrible. Takes it away from me and I cry too much and I can’t get over it. It’s there all the time” [Bailey].*

For others, it is a serious condition and one that is tied up with suicide ideation. For example, Ari recalls: *“... started feeling really nauseas and really anxiety and a panic attack, and that’s how it usually starts for me I get really panicky then slip down into this suicidal crap.” [Ari]* Some have been on anti depressants in the past. The following transcript from Brodie shows the gravity of the condition: *I went on anti-depressants and off then till 19, then I tried to kill myself in 2004....then I went on them again, but I have to go to hospitals every couple of weeks and I don’t really think I dealt with it. [Brodie]*

For Ari, she ended up dealing with it herself as there was *“no one else to kind of help me out.”* Ari concluded that she doesn’t need answers now that she has learnt from observing and speaking to

people in life rather than “talking about life”. This sophisticated understanding is revealed in this quote:

*I've had huge bouts of depression which kind of leaves me confused and unknown... I have days when I don't get out of bed. I had agoraphobia for a really long time...six weeks and I had to go to my mums and didn't leave the bedroom [I:How have you dealt with the depression?] A:I sort of don't really deal with it. I choose to either ignore it or, if I have a full on depressed day I do things like get out of the house. [Ari]*

One of the revealing aspects of Ari's depression is the sense of being “confused and unknown”. It is in this state that some GLBT young people face their accommodation issues, and are most likely less able to make rational decisions. Depression is sometimes combined or associated with drug use. For example, Bubbles found that party drugs: *... because I can easily become very very depressed it was a very good mood stabiliser and everything is so optimistic.* [Bubbles]

Some participants cited an experience of obsessive compulsive disorder. For Daisy, this manifests in every day activities: *Checking if my stove was off and electricity cords were out of the socket before I left the house.* [Daisy] Daisy has been assisted with this via counselling and a doctor, but is not clear if it had improved. She felt through continuing to see a health professional, she is at least “doing something about it”. Of interest here is the process through which participants like Daisy self-identify or seek out diagnosis for mental health disorders. They have a good knowledge of these conditions, and their symptomology, yet rarely challenge the classifications. For example, a lot of people check the stove and electricity cords before leaving a house without defining it as an obsessive compulsive disorder. For participants that have not tried to answer the questions around mental health issues, there are various reasons including waiting to see a counsellor.

## **General Health**

Some participants speak of general concern around health problems. The extent to which these health concerns were addressed varied for participants. The questions include:

- Why is it going to take so long [for an operation]... every couple of weeks with tonsillitis, like I'm in bed for four days straight
- What are the symptoms of sexually transmitted infections? What are the practicalities of it, the cost of treating it?

One participant had concerns around sexual health, having been exposed to possible infection. For him: *There are things you are not sure how to find about, where to go and what to ask. It's good to*

**“It may not be fancy...”**

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*know how much something will cost, so you are always wondering, have I contracted something. I need to find out about practicality.*

This participant also wanted to know about the symptoms for certain sexually transmitted infections, and found that one service had been helpful in answering this by showing him graphic pictures. These encouraged him to be safe, but ultimately he had to figure out how to negotiate the use of a condom with a partner. This participant also felt ‘embarrassed’ when asking service providers about sexual health issues, and tended to find things out on his own. For others, there is a separation between the services offered by Twenty10 and the health care sector. As such, they may be ignorant about the process for getting an operation or similar. Other health issues are minor, and it is the area of mental health that is of main concern to participants.

## **CHAPTER 8: RELATIONSHIPS**

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Three participants nominated relationships as a major concern and both of these participants were female. Generally, this was considered less of a concern than other areas such as health and family. For those that nominated relationships as a major concern, they were generally in a relationship at present, and finding it a source of stress and instability. For some participants, there is a feeling of being trapped in a relationship which has been used to secure accommodation. For others, the issues are complex and relate to trust and betrayal and are clearly tied up with their mental health. Ari for example, feels this is the one area where she has no control over the outcome: *Relationships...The only thing playing on my mind is the friendships and the relationships going on in my life...it concerns me that current girlfriends and ex-girlfriends are becoming close because that's how it fucked up in the past and like I see it inevitably happening...I can't do anything about it. [Ari 18]*

For Ari, the pain of relationships has manifested in obsessive compulsive behaviours and occasional drug use. The impact of relationships on health is pronounced, with one participant experiencing a 'breakdown'. Holly also claims her health is affected by the stress of a recently finished relationship: *“... a breakdown. Because I had a big falling out...my first relationship too...just threw me over. [Interviewer: How did it throw you over?]I don't know, I didn't even realise it was throwing me over, I just had a full on stress episode”*.

The questions facing participants are:

- How do I maintain my relationship given the distance she lives and that I'll be working?
- “I'm really confused about why it ended, why did it end?”

While Holly initially took a lot of drugs, she has since tried to deal with the relationship by reflecting on it, and *“kind of followed my intuition and looked after myself”*. She hasn't found out why it ended, but concluded that her ex-partner doesn't know either. Like Ari, she speaks of the importance of trust in a relationship, and how this has been disavowed in the past. This is compounded by the fact that the GLBT community is quite small in their area, and they are all part of the same small social network. To this end, they also depend on each for friendship, so the constant seeing of ex girlfriends with new partners is a real source of stress.

## **CHAPTER 9: ALCOHOL AND OTHER DRUGS**

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Alcohol and drug use figure heavily in the lives of some participants, and three participants named it as a major concern or need. Several participants have either been heavily involved with drugs, or heavily exposed to the drug scene. Most of the participants with previous drug use claim that they are now off drugs, though some continue to use on occasion. A few say they still have current addictions, but also speak about it in the past tense. There are quite a few ambiguities in their stories of drug use.

The most widely used drugs are methamphetamine (ice), ecstasy and cannabis, the first two being strongly associated with the party scene in Sydney, which is heavily patronised by GLBT young people. Some participants say they feel more optimistic and energetic when on ice, but also see a down side to their drug use. Some participants have a good understanding of why they use drugs, or what the environmental and social contexts were for their initial drug use. For example, one participant said the *fear of getting laughed at because you sound like a girl or act like a girl [Bailey]* had led to an addiction to ecstasy, and eventually resulted in sex work. Drug use also seems to be strongly linked to depression and anxiety.

The specific questions and needs associated with alcohol and other drugs are:

- In the sense I take too many drugs ... it gets you a label
- [I want to] stop drugs, I still have a lot of past issues to deal with and I haven't
- I don't understand how people can get that addicted
- Why are people using it? [i.e. Ice, Ecstasy]
- Alcohol: [ I needed to cut down at the time]
- Why do I keep doing it [smoking cannabis]?

A few participants feel they know enough about drugs, having read a lot of information on them. Samba, for example, observes that he doesn't need to know anything else about drugs because: *My drug paraphernalia is fabulous. I know a lot about drugs.* Some participants also discussed the advantages of the internet for seeking information about substance use.

At least one participant was more interested in the bad reputation he acquired by using drugs, and how to ameliorate that, rather than stopping drugs themselves. Others have tried to have their AOD needs met through special services. Some participants feel they know a lot about drugs, and do seem well informed. They can be critical of interventionist approaches, as shown in the following quote re: an AOD counsellor at Twenty10: ... *I knew more about drugs than him,*

*basically. And he just wasn't warming toward me,...there was no connection....he was really unhelpful. And I was saying I didn't want rehab,. I just wanted to stage myself and he was saying he thinks I needed rehab.*

They also want support from people with whom they can establish a rapport. Some appreciate a lack of intervention from Twenty10, observing that Twenty10 are *there to listen to what I say...they haven't questioned me [Samba]*. Another participant revealed that he would prefer to be counseled by someone with a drug using background, who can be 'easy going' about it. Another participant had found her rural based AOD counsellor 'useless', and claimed to have stopped drug use on her own. As this participant explained: *I didn't really look for services I did it on my own, I was sick of being addicted to drugs and thought 'this is gross, I'm over it'. [Ari]*

When asked if they would try group work, or a self help program for AOD issues, one participant was in favour, and two were against. One participant had heard of a self-help program through a friend. When asked if a friend is a good information source, he said: *Depends on the friends, some friends listen to for different reasons [Simba]*. Another participant had had a positive experience in a therapeutic community, and the participant found it validated him, saying: *And they said I was a good person and they loved me... and I loved it, no one judged me, no one spat at me, no one talked bad to me. [Bailey]*

With some participants, it was hard to find out the extent of their drug use as they often gave anecdotes about friends 'addictions'. They would then speak about themselves in the third person, or make a detached judgment about drug users. For example, Bailey identified as a 'drug addict.' However, he observed that: *You don't know with drug addicts because they lie and lie until they get what they want. [Bailey]*

The participants that identified drugs as an issue spoke freely about it, and it was clear that some participants needed ongoing support in this area. Picachu noted that: *In a way it's making my problems more of a problem, because the more I smoke I become more socially isolated.*

A different issue emerged from those participants with parents who had drug and alcohol problems or addictions. In these cases, the needs were more related to conflicts within the family and how to negotiate these. It is clear that drug use was a prominent issue for those involved with it, and the gay party drug scene is seductive. Many participants appreciate the opportunity to socialise with non drug users at Twenty10, and the chance to lessen their usage.

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## **CHAPTER 10: FAMILY**

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Two participants nominated family as a major area of concern, and spoke freely about the issues they have in relating to some family members. The actual questions posed by participants were:

- “I would like to know about reconciliation type issues”

Others spoke about family issues, but did not nominate family as a major area of concern. Nevertheless, the issues around family still emerged as important to them. Some said that they got on well with their family, but find areas of conflict. Some participants have bad relationships with step-parents, or have been ostracised from their family due to their sexuality. Many had left home due to issues with family, and a few have experienced sexual, physical or emotional abuse. Others maintain good relationships with their family, and are fully supported. Many are close to their mother and siblings, and have been helped in addressing their concerns. Others had forgiven their parents for past conflicts and misunderstandings. Take Anaris who has become close to her biological father: *So I kind of look at it from his perspective, even though he fucked up he learnt his lesson and lost his family...I don't think I should punish him any more. [Anaris]* Family issues are a strong undercurrent for many participants, and clearly some want to heal the rifts. Others have established good relationships with their families, while others see it as ‘too complicated’.

## **CHAPTER 11: EDUCATION AND STUDY**

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Some participants are currently enrolled in TAFE courses, studying courses like photography. Other participants are in high school, while a further two are at university. The majority of participants were planning further studies, or had deferred courses of study. A few participants nominated education or study as a primary area of concern in their lives. Often, this is linked to the need to gain a qualification for a job. The specific questions or confusions expressed by these participants are as follows:

- What are the requirements to get into an art course at TAFE?
- What are the requirements or ways to get in as a disadvantaged student? [i.e. financially disadvantaged]
- What will happen when I have anxiety [as it could be difficult to learn sometimes]?
- What sort of work I can get with the education I have, and whether the work offers training

For some participants, the questions are answered by speaking to the relevant officers at TAFE, or case workers. Through actively making inquiries, one participant [Daisy] found answers via a Centrelink officer, and found she could apply through the TAFE disadvantaged student program. To answer her concerns about having anxiety attacks, Daisy also consulted the TAFE disability officer and found that the teachers will be informed about her condition. For Daisy, the point of empowerment came when she found out exactly what was required to enter the course, and how she could do this. Daisy was not afraid to contact bureaucratic officers to assist in what she needed to know, whereas other participants are more suspicious of the bureaucracy, and less open to contacting them.

Others wanted to know what sort of work they can get with their education, and whether the work offered training. Angie, for example, had not actively pursued an answer to that question, rather assuming that you need a school certificate: *I wouldn't really ask, I gather that you need Year 10* [Angie].

Some participants – whether currently studying or having previously studied -had experiences with being discriminated against in the education environment, while others had negative experiences with school or university counsellors, and saw them as part of a larger bureaucracy. For example, Bubbles had all his university material stolen from a share accommodation, and ended up homeless. He approached the university counsellor to discuss his situation, and found them unsupportive: *When my stuff got stolen I had nothing to study with, no books...I had to put in an*

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*emergency deferment form, something so crazy and extraneous happens ....Dealing with the uni administration which is exceedingly aloof and hierarchical from the student body. [Bubbles]*

For Bubbles, the education system was unable to meet his needs, other than assisting with course deferment. The participants placed a lot of importance on dealing with a person, or organisation, which demonstrated ‘care’. This aspect of service provision is discussed further in the report, though it is worth noting how participants experienced dealing with a bureaucracy as ‘aloof and hierarchical’. Another participant spoke of the pressure on her to remain a “top student” at school, and how her recent depression was affecting her school performance, although the school was impervious to her emotional needs.

## **CHAPTER 12: EMPLOYMENT**

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Many participants talked about their needs in relation to job hunting, and looking for work. Work was nominated by five participants as an area of major concern or need, making it the highest priority area. By way of explanation, many participants are settled in their accommodation, and several are currently studying. Looking for suitable work and earning decent money becomes a priority once accommodation is sorted out. For participants like Anne, it is part of a ‘stepping stone’ in the life they want to advance: *After that it’s a matter of getting a job and with more income and then getting to different places from there [Anne].*

Some of the questions and service needs around work and job hunting were:

- What sort of work I can get into with the education I hold? Whether they train on the job or you need experience; what the pay is like; stuff like that.
- I’m worried about my appearance, whether they will take me on [for apprenticeship]
- Trying to discover what sort of work path to take
- Find out about the courses, how much they are, that sort of thing and also where they are available and how hard it is to get into the industry
- How do I get the time and the space to organise job hunting?
- How do I shift from unskilled work to another area?
- How do I get a job without the discrimination I’ve always had?

Many participants were being assisted in their job hunting through case managers and counsellors, including those at Twenty10. For example, Brodie would like to do body piercing and is being assisted by her caseworker: *I emailed a few places and they said to try to get apprenticeships, they didn’t have any available but to go and have a look. As yet I haven’t...my caseworker is also going to try to find out...prices and courses [Brodie].* Those less inclined to deal with bureaucrats are fairly self-directed, and try to find things out on their own, or through the internet. Some, like Warren are particularly independent in this regard: *I just haven’t done it [used a counsellor] and when it comes to looking for work I’d preferably rather do it all my own. At the same time I will be using them [Twenty10] to get ideas and stuff like that [Warren].*

Another issue around work is finding employment or training that will accept GLBT young people, and not discriminate against them. Although discrimination is not always overt, as Angie puts it, *it’s just something you know by the way they treat you [Angie].* Similarly, Bailey has found that: *I’ve always wanted to work, and had discrimination always.* Related to this are perceived barriers to

## **“It may not be fancy...”**

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entering certain professions. For example, Nathan would like to join the police force, but feels he is ineligible because of past infringements.

For others, perceived barriers to access are also linked to not feeling like they can be themselves. For Brodie, a job in which she can be herself is a goal— regardless of the nature of the job: *And I think it's a job where I can be myself, not worry about people telling me to take my piercing out or how to dress. I don't think its [unclear] easy for me to do that ... I have worked in a position where I can't be myself. It's just a choice that I don't want to do that [Brodie].* It is also important that Brodie feels she has the choice to do this, and perhaps that sense of choice has been fostered by her case manager at Twenty10.

Others say they know how to get a job, but lack the motivation to do it. As Warren puts it: *it's really complicated, I don't know I always seem to be occupying myself, doing something else, it's crazy.* For Warren, the process of looking for work is self-directed, so he does not ask Twenty10 or other services for assistance. Warren is currently seeking the help of the Twenty10 counsellor in addressing this issue.

## **CHAPTER 13: SOCIAL NETWORKS**

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Two of the participants identified social networks as a major area of concern. Some participants' concerns over social networks exacerbate other conditions such as health. For example, Holly said *I've just kind of withdrawn from all my friends*, this being a consequence of her stress and depression. The specific questions in relation to social needs are:

- I just wanted to like find out if there's people, is there a place I can meet other people without having to go to a pub?
- When I go to Twenty10 some young people are really rude...why are they like that? Certain people are more like that than others.
- Is there somewhere I can meet other young queer people that aren't stoned and drunk?
- The service here I really need to make friends

Participants that are Twenty10 clients value the opportunity to meet other GLBT young people. The importance of this is observed by Nathan: *Having somewhere to go during the day rather than sitting at home. Give some sort of social need [Nathan]*. Clearly, Nathan is quite social by nature, and appreciates the opportunity to socialise in groups at Twenty10 which offer the perspective of other young people. While this is appreciated by many Twenty10 clients, there is also the possibility that not everyone relates well to others. For example, Nathan feels uncomfortable around some of the GLBT young people that are different to him, specifically the “girly guys”. If nothing else, Nathan's comments show how variegated the client group is at Twenty10, and the need to accommodate differences between GLBT young people.

Some outgoing participants have had their social needs met through Twenty10, and found suitable networks. These were the main reasons Daisy came to Twenty10 as well as to find suitable accommodation. At Twenty10 she was able to link into a peer group of people that were not into alcohol or drugs, which she claims are rife in the gay and lesbian scene. Some participants spoke of the need for wider social networks with their peers, specifically other GLBT young people. This was particularly the case for rural-based GLBT young people, who say they would benefit from the services available to GLBT young people in the city. Some rural-based participants spoke of the need for a similar service to Twenty10 in their areas, or at least having a drop in centre for GLBT youth.

## **CHAPTER 14: SEXUALITY**

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Two participants nominated sexuality in itself as a direct area of concern, while for many others it was a contributing factor to more pressing issues such as accommodation or employment. The majority of participants discussed it in a general sense. It is evident that rural based participants have the greatest concerns and confusion in this area, often questioning their sexuality and feeling embarrassed about approaching local services. The Twenty10 participants are far more comfortable in this area, probably reflecting the fact they are with their peers, and have appropriate professional support at hand.

For most participants, issues around sexuality arise from episodes of discrimination. The specific questions and needs in relation to sexuality are:

- Services that can help you in the country [unclear]
- To meet people of my own kind (GLBT)
- Depression and being homosexual, not being able to cope.
- ‘Yeah, I could be with a guy’ then other days I’m like ‘Could I really every day be with a guy?’ – very confused
- I just wanted to like find out if there’s people, is there a place I can meet other [GLBT] people without having to go to a pub?
- Is there somewhere I can meet other young queer people that aren’t stoned and drunk?

Many participants were keen to point out that they didn’t choose to be GLBT, as it produces profound feelings of difference with other young people. For example, Drake noted that: *When I hit puberty and went to school, I started to realise that something was really wrong, because all these people were acting like this and I was acting like this.* For Holly, realising she was in love with another girl was “full on”. For participants for whom sexuality is a concern, there are very ingrained fear and shame, which may be exacerbated by family dynamics, or cultural beliefs. For example, Derek grew up in the country, and had to hide his sexuality. He had had bad experience with his step-father, and the first coming out was traumatic. As he describes it:

*Depression and being homosexual, not being able to cope. Fear of my step father. That sort of thing. Basically my sexuality and fear [I:What was it like, having that sort of fear?] Horrible. She [school counsellor] was the first person I ever came out to. Had to draw her a picture to make her understand, I was so scared. I couldn’t tell anyone, couldn’t say it [Derek]*

Other participants have had hostile reaction from a step parent, such as Holly. Here she describes the reaction of her mother, and her step father’s feelings about homosexuality:

*My step dad told me that gays are dangerous, mentally ill, socially fucked up, likely to do drugs, rape people, get bashed, just do all the things you associate with really bad people. He associated it with alcoholics and murderers. [Holly]*

Others have had more acceptance from their family and peer networks about their sexuality but feel less validated than ‘straight’ family members. Warren, for example, came out to his family as a teenager. He was involved with a lover at the time, and didn’t want to move away from this person, though his family was planning to move. According to Warren, his parents *didn’t really care how I felt, they just said ‘too bad you’re going [Warren]*. Ari also spoke of her mother’s indifference, and how her mother saw it as *‘just a stage’*. Others feel direct disapproval from grand parents, with one having to leave the family home, for that reason. Many of the Twenty10 clients have found counselling invaluable for working through these issues. In particular, the Twenty10 counsellors and case-workers were noted as being especially helpful.

In one case, a participant had grown up in a gay family. She was starting to wonder whether she was straight or gay, and identified as bi-sexual. She had sex with a few men, an experience she mostly found unsatisfying – and stressed that this was common practice for same-sex attracted young women in a rural area. For Anaris, this uncertainty over her sexuality led to profound confusion. As she puts it: *For a long time I was confused about my gender, really really confused and didn’t tell anyone about it till last year I told my ex [Anaris]*. The ultimate confidant for most participants is a close friend, or a counsellor – someone they are not emotionally connected with. For some, counsellors – whether Twenty10 or elsewhere – have been invaluable in assisting with seeking information on their sexuality.

Participants identified that a major advantage of Twenty10 was the opportunities it provided to meet other GLBT young people. This was seen as the most common way to alleviate concerns around socialising with other GLBT in a safe environment. For others, the service provided by Twenty10 gave them a sense of pride or acceptance in being GLBT. For rural based participants the access to services was limited. One participant – Anaris – found that ACON provided a local gay PRIDE group, which partially fulfilled that need.

Clearly, the point at which the participant has acceptance of their sexuality is a point of empowerment. For most, this comes with the help of peers and GLBT specific services like

Twenty10. One participant explained that the way she addressed her concerns re: her bisexuality is : *I've been trying not to label it. I think that's what I need to start doing, not analyzing it too much.* By not taking society's labels on sexuality too seriously, she said she felt more relaxed. What is clear from the participants is the extent to which their family's response to their sexuality has affected their sense of self-worth. For most, there are strong emotional connections with family, and extended family members – including step- parents, aunts and the like.

## **Discrimination**

A big area of discrimination is experience with other service providers –specifically alcohol and other drug services, and youth services including refuges. The discrimination is often from other clients of these services, rather than the workers. For example, Nathan found that some of the AOD services are: *“Probably, some are disapproving... Just in rehab come across people...other clients [I: They say anti gay things?] Yeah” [Nathan].*

One of the important themes around discrimination is the rural and urban divide. All the rural-based participants experienced overt discrimination or had seen it applied to others. On a covert level, this discrimination can take the form of subtle innuendo, and as Angie points out, you have to *“suss out that sort of thing...just a vibe” [Angie]* from service providers. According to her and other participants, GLBT people are less likely to ‘come out’ in the country. Angie explains that *“some workers out in the country can be a bit discriminatory toward that thing so you can't be yourself”*. Extending on this, Angie explains that she feels “frustrated” when hiding her sexuality, and it makes her angry. Some services are clearly well-meaning, but still represent a threat to the GLBT young people. On an overt level, the discrimination is in blatant insults, even violence. As Drake describes his experience in a country town *“I used to get beaten up and death threats and that sort of thing” [Derek].*

For these rural based participants, many ultimately make plans to leave home and move to the city, where there is less perceived discrimination. Others are still living in the country, and it is interesting to hear from GLBT participants living in the liberally minded far north coast of NSW talking about the homophobia in their communities. There is clearly a need for GLBT youth services, or at least safe environments for GLBT young people, in these areas.

## **CHAPTER 15: ETHNICITY AND CULTURE**

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Seven participants had one or more parents born overseas and one participant born overseas. The range of backgrounds are: Italian, Hungarian, Thai, Spanish, Filipino, Lebanese, Mauritius, German, Maori (New Zealand) and Laotian. Some of the participants identify more with their ethnicity than others, while others talk more about culture and religion. It is difficult to assess the specific needs of CALD GLBT young people in relation to service provision. Very few participants discussed their ethnicity as a major issue, and didn't seem to identify strongly with their second generation ethnicity.

None of the CALD participants said ethnicity and culture were major concerns, and had no particular questions or needs about it.

Of the participants that discussed their ethnicity, they tended to have both parents born overseas, or have been born there themselves. Their experiences growing up in Australia included confusion about identity and discrimination on the basis of ethnicity. For example, Daisy recalls: *all these people not wanting to pair up with us or to hold hands with us, line up for assemblies or something, and being accused that we don't take baths or showers [Daisy]*. Another issue for Daisy was the instability of family life as she lived with extended family members, and watched the anxiety her parents went through over visa extensions and other issues.

The participants have differing experiences in terms of the attitude from their family to their sexuality. One participant found that his NESB father was less receptive to it than his Australian mother, and attributed this partially to culture. As Kurt put it:

*I had one cousin that was gay and they always talked about him, made jokes about him, I don't know. I didn't want to be like that so I never really told them. They tried to but they didn't make it a welcoming environment to come out...A pride, they don't want their sons or daughters to be like that, I suppose. [Kurt]*

GLBT young people from CALD backgrounds often face increased stigma related to cultural expectations. The stigma is from the religious ethos of the family, rather than the ethnicity per se. For example, Warren found that his Islamic parents, who are very religious, tended to ignore his sexuality. As he put it: *They're Islamic and they just don't like me going out at night and stuff like that. There's not too much conflict with my actual sexuality but at the same time they don't really*

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*acknowledge it as much. It's kind of just ignored [Warren].* Warren's family was not hostile about his sexuality, but didn't embrace it either. At the same time, he noted they had 'died down about it' in recent years, and realised they have to accept it.

As observed by Kurt: *I guess other cultures are not as accepting and would make you feel like you didn't want to expose yourself, you want to hide that or kill that or pretend you are not [Kurt].* Participants observed that some cultures attached a great deal of shame to GLBT identities. Some participants had met GLBT people from CALD backgrounds, and noticed how much more shame they exhibited over their sexuality. Similarly, another participant with a CALD background, Ari, observed that Aboriginal people in her rural area were different in their experience of homelessness, and she didn't relate to them: *there is a really large Young aboriginal homeless group in [area] but they seem to like the lifestyle...they say it's living true to our culture. A lot don't enjoy it but I don't think they'd change it given the chance.*

Some CALD participants had very religious upbringings, and later rejected the religion for its stance on homosexuality, while one Anglo-Australian participant had ongoing conflict with his commitment to Christianity and his homosexuality. This participant was currently seeking out gay friendly churches, and having mixed success.

There was some support from the participants for more consideration of ethnic and cultural groups at Twenty10. Daisy, for example, recommended a whole group approach for CALD people, rather than separating them as 'Asians', 'Aboriginal' etc. like gay Asian PRIDE etc. She thinks Twenty10 are better as advocates for a whole group approach, but also thinks they need separating from mainstream: *but then again I think Australians (sic) can't be included, so there's still a dilemma [Daisy].* Another participant suggested more social activities for CALD participants, or CALD based outings. Warren had attended an Islamic gay group in his area for a while, and found that: *They had a social meet up for an hour every second Thursday, a very small group, pretty cool at first but dies down a lot, started getting smaller and smaller [Warren].* He offers this as a possibility for Twenty10.

## CHAPTER 16: TWENTY 10

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### Previous knowledge of Twenty10

Participants have mostly heard about Twenty10 through word of mouth. Some participants said they had heard of Twenty10 via a friend, a family member, an information brochure and in other ways such as via a work client. Of the five rural-based participants, none had actually used Twenty10. It was established prior to the interview that most had heard of Twenty10, but lacked detailed knowledge. In some ways, Warren’s experience is typical of the way that participants hear of Twenty10: *I was referred to it by ... my brother’s fiancé, she told me about it and said ‘go in there and sign up and they’ll help you with whatever you need’. Yeah, it’s a great service.* (Warren)

### Experiences with Twenty 10 from clients

The participants reported positive experiences with Twenty10. In particular, they were impressed with the counselling and case management services, and also enjoyed the interaction with other GLBT young people.

When asked what they wanted, or expected from Twenty10, the following needs were expressed:

Accommodation – crisis and medium to long term

Case management; Counselling for issues on sexuality; Counselling for financial management; Counselling for health issues, Counselling for depression and/or anxiety issues, Counselling for alcohol and drug issues, Counselling for issues with family, Assistance with filling out Centrelink forms, Assistance with filling out forms for training and study, Assistance with getting a job, Social networks, Empathy from workers and other clients, Somewhere to hang out, Support with problems or concerns, Internet access.

Most participants have had their needs met by Twenty10. In terms of accommodation, most of them are satisfied and stable, such as Daisy who finds it important: *Knowing I can come home to somewhere for a period of time and not having to worry about finding accommodation [Daisy]*

Some participants pointed out that Twenty10 offered a more ‘caring’ approach than other services. This theme of caring is common, and it is interesting to look at what constitutes a less caring service, this often being an abrupt response on a phone, or nonchalance about a young person’s situation.

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Related to this was the strong sense of validation that young people experienced in accessing services at Twenty10. As one participant put it: *Feeling appreciated when I come in the door. [I: In what way do you feel appreciated?] If you come from like a broken family home it's really good sometimes to feel appreciated from these kinds of services, even though there are still boundaries. [Daisy]*

Many participants have been heavily assisted by Twenty10, and found this made a huge difference to their life in general. Bubbles, for example, observed that:

*Twenty10 has been amazing,...I walked in and they got me in touch with homeless persons to get crisis shelter which is a big thing, sleeping outside is bloody cold. They gave me a gift card to buy food, they sat me down and did the whole interview and looked for a medium term housing solution, they made sure I had a place to stay at night, they got me food, they made sure I had a bus pass to get back and forth from Twenty10 to wherever I stayed at the time, to get a phone card if I had to call them which is more than I got from even the best of my friends. So it was given to me with no expectation of repayment. To me, to find people that were willing and really open to helping for no reason other than I needed it. [Bubbles]*

For Bubbles, the practical assistance from Twenty10 was invaluable. However, there was a more subtle element that he had not found in other services, or his personal relationships – the unconditional, and the evidence that they were there to help, had “changed my entire life to date”. This is echoed by a few other participants, and is clearly an important part of the service provision for these young people.

Others have found the social aspect to be invaluable to building self-esteem and confidence. For example, the camps away, the team sports and film or art exhibitions provide avenues for self-expression. Daisy found the art exhibition “...it really made me believe in myself more, and built up my self esteem a little.’ [Daisy] and being involved has encouraged her to pursue art.

The specific instances where participants’ needs are **not** met are in relation to counselling for drugs, where one participant complained that the generalist counsellor at Twenty10 was “*not suited to that type of thing*” (specific alcohol and drugs counselling). Mostly, they are happy with the general counselling provision. It seems that the counselling was useful for working through particular issues, but that sometimes participants need further assistance with alcohol or drug issues.

For others, they felt Twenty10 have at times been too ‘lenient’ with allowing other accommodation residents to make noise and have lots of visitors. Some participants had not asked for Twenty10’s assistance with certain things, often practical issues they think are not part of Twenty10’s remit. Overall, the participants were really happy with the service provided by Twenty10, and saw it as a very close approximation of their ideal GLBT accommodation service.

## **CHAPTER 17: CONCLUSION AND RECOMMENDATIONS**

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This section provides a summary of the key issues to emerge from the interviews with young GLBT people. It addresses each of the research objectives, and takes a broad interpretation of the term ‘service delivery’. For Twenty10 and other services, service delivery includes finding supported accommodation for their clients. It also encompasses a range of other services such as counselling, case management, groups, social activities, assistance with study and employment, health service backup, internet provision and the like. As such, the gaps and strengths of service delivery are considered in relation to the major concerns that emerged for the participants during the course of the interview. The gaps are based primarily on the identified questions and needs they have in relation to each concern. The areas to emerge as major concerns for participants were employment, followed by mental health. There were also a number with current issues around sexuality, relationships and alcohol and other drug use.

### ***WHAT ARE THE GAPS AND STRENGTHS IN SERVICE DELIVERY FOR YOUNG GLBT PEOPLE WHO ARE HOMELESS OR AT RISK OF HOMELESSNESS IN ACCESSING TWENTY10 AND OTHER SAAP FUNDED SERVICES?***

**Accommodation** - The participants equate homelessness with a conventional idea of having no shelter or sleeping ‘out’. The concept of being at risk of homelessness is one that is understood by some participants, particularly the Twenty10 clients, but not necessarily seen in relation to their living situation. Instead, stability emerges as a core indicator of whether they see themselves as at risk of homelessness. Stability comes from secure accommodation, and being self-sufficient or having one’s own place. The Twenty10 medium to long term accommodation is popular as it provides this stability, but some are frustrated with waiting for a unit to become available.

Prior to contacting Twenty10 about housing, the kinds of things participants want to know are about stability of accommodation available, levels of support, costs of accommodation, maintaining cleanliness and how to do it, how to maintain a broken down property, how to budget and to fill out Centrelink forms. When homeless, the participants’ needs are more immediate and include where to get food, where to sleep and how to get work.

The participants that are currently housed in Twenty10 accommodation feel stable in their accommodation, and seem to enjoy living there. They enjoy the camaraderie with other residents, but still have their own space. It seems to be a successful accommodation model, though the supply of more units is recommended.

The participants felt like they had their questions around housing answered by the Twenty10 caseworker or counsellor, or by other service providers. They also actively seek information on government services via the internet, or with a caseworker.

The areas where the participants get ‘stopped’ in pursuing their accommodation needs are around the demarcation between what is the responsibility of the accommodation provider e.g. in property maintenance, paying bills, and what is their responsibility. Some participants also find the process of making government applications too tedious, and give up when they get depressed or anxious in the process.

Responses from participants indicate that the Twenty10 caseworkers and counsellor do a commendable job in assisting with accommodation needs and support, staff could be more aware of the preconception of clients about responsibilities and some of the less obvious sources of stress such as cleaning and property maintenance.

**Mental and other Health Issues** - Mental health was cited as a major area of concern for participants, and affected their ability to pursue other activities. It was often linked to alcohol and other drugs use, with some seeing drugs as a way to alleviate depression. The participants had a good understanding of their condition, perhaps through their self directed information seeking. They also seem to have absorbed the concepts and models used in counselling and health services, and could frame their condition via these models. The main mental health area identified was depression, and some experienced anxiety, issues that could be linked to suicide ideation and self harm.

The questions and needs in relation to mental health are how to manage depression and the problems arising from it were where do I go to manage it, how do I stop self harm patterns?

Participants reported that the Twenty10 counselling service had been very helpful in addressing these concerns, as had other health professionals. For more isolated participants, they attempt to answer these concerns by themselves. This had been successful to a point, but the counselling process was identified as having made a huge difference in this area.

For health issues in general, participants may not see Twenty10 and similar services as places to address general health concerns. Again, it is the more isolated, rural participants that are embarrassed to seek help on these issues. There may be scope for services to consider their partnerships with general and sexual health service providers.

**Relationships** - The area of relationships was more a concern for female participants, and those that were currently in a relationship. It could be an area of stress and instability, and one where they felt out of control. The stress could manifest in mental health issues like stress and compulsive disorder. Rural based participants were more concerned about this area than Twenty10 clients, but this could reflect the fact they are all in a small, intimate clique. The concerns and needs raised were around how to maintain relationships with limited time or access, or confusion as to why they ended and why people behave the way they do. They often tried to address these questions alone, while some take drugs to disguise their feelings. It was an area that participants said they discussed with counsellors, but not all have easy access to this option.

**Alcohol and other drugs** - This is a significant issue for a number of participants, especially males. Some participants have been, or are currently, involved with drug use such as methamphetamine (ice) and cannabis. For some participants, there are social pressures to use these drugs, and for others, they assisted with alleviating the short-term symptoms of mental health issues. The specific questions and needs around drugs and alcohol that were identified were why do I take them, how to stop using and why do other people get addicted.

The preferred support mechanism was an empathetic response, and they feel they get this from most Twenty10 staff. Participants concerns were addressed through self-directed information sources such as pamphlets, the internet and the like. Participants were well informed to a point, but less clear about their therapeutic options. They held strong opinions about self-help programs and interventions, and were often resistant to being advised about, or recommended, these. They were less likely to understand the link between drug and alcohol use and mental health, this being an area that could be further embraced in service provision.

**Family** – Concerns with family related to conflicts around sexuality and other issues. Some had experienced sexual and physical abuse, and there were often problems with step-parents. The questions young people had were around reconciliation issues, and how to achieve this. Some participants had made amends to their family or had healed the rifts. The Twenty10 participants were satisfied with how these issues are addressed in counselling. The rural based participants were more in need of direct support.

**Education and study** – Some participants were currently enrolled in TAFE courses, school and university, or had deferred their studies. Others were eager to study at some stage in the future. The questions and concerns in this area were around knowledge of the requirements for certain courses, the entry requirements for disadvantaged students, how to handle anxiety when studying and what sort of work is available through study. The questions were answered through speaking

to relevant officers at educational institutions, and they were often helped through counsellors and case workers, such as Twenty10. The participants that were more likely to want to know about courses, entry requirements and the like are the ones that were wary of the bureaucracy, and try to find out without seeking help.

***WHAT ARE THE IDENTIFIED ISSUES FOR NSW SAAP ORGANISATIONS IN RELATION TO GLBT YOUNG PEOPLE THAT ACCESS THEIR SERVICES?***

The majority of services said that between one and 25% of their clients are GLBT, but most of these do not provide GLBT specific services. The most common reason for this was funding restrictions, and that they found it sufficient to refer to appropriate services like Twenty10. A minority of services were limited in their capacity to attend to GLBT clients, or to refer them on.

The majority of services had an umbrella policy on discrimination which included homophobia, gender equity and racism. However, the policy was not always enforceable. Some services acknowledge that their clients could be homophobic, and cause discrimination against GLBT young people in the service. This experience was echoed by many of the participants interviewed for this study. The discrimination took the form of verbal abuse or bullying, even though staff tried to alleviate the situation.

Several service providers identified drugs as an issue among GLBT young people. This was reinforced by the interviews with the participants, some of whom were forthcoming about their substance abuse. The service providers also identified issues around maintaining friendships, health issues, acceptance, image maintenance, poor life skills, family issues and lack of understanding from service staff. Again, many of these were spoken about by the participants in this study, particularly in relation to family, socialising, health and acceptability. There were also indications that the lack of understanding from staff may be more paramount in rural services than in Sydney based ones.

## **Recommendations**

The recommendations have been developed in consultation with Twenty10, and need to be considered as justification for additional funding, either through SAAP or other dedicated funding sources. Twenty10 has done a commendable job in assisting their client group, and there is benefit in expanding their services to rural areas, or at least establishing greater links with rural services, and working generally with services to lessen the discrimination against GLBT young people. The general recommendations are as follows:

### **R1 Increase service provision to GLBT young people who are homeless or at risk of homelessness in outer metropolitan, regional, rural and remote NSW**

The research has illuminated a significant gap in service provision to GLBT young people in regional, rural and remote NSW. This has been echoed by the responses of rural service providers who often report a lack of facility for GLBT young people in their areas. Twenty10 is uniquely placed to assist in providing direct services to these areas. A capacity building approach, in which Twenty10 would provide training, support and assistance to local service providers, would be most effective. Raising the awareness of GLBT young people in the country to Twenty10's services is also an important strategy in easing a possible transition to the city. The Twenty10 support hotline is also an important resource for supporting these young people. There is an identified need to further the links with rural based SAAP funded services, and consider ways of informing rural based GLBT at risk young people of Twenty10 services. This would only be possible with adequate funding, and Twenty10 may want to consider conducting targeted research with rural GLBT at risk young people to further explore the needs of this client group. The research would also include an assessment of the number of GLBT at risk young people in rural areas, and the number that move to Sydney due to the lack of services in their areas.

### **R2 Create programs that provide, culturally-appropriate support to CALD/NESB GLBT young people who are homeless or at risk of homelessness.**

The research did not suggest any urgent need for CALD/NESB programs, although a few CALD/NESB participants would appreciate NESB specific strategies, or activities. Based on the feedback from participants, Twenty10 could consider having a NESB specific 'group' on a regular basis. It is recommended that this group include all NESB peoples, rather than separate groups.

**R3 Conduct further research into Aboriginal and Torres Strait Islander GLBT young people who are homeless or at risk of homelessness to assess barriers to accessing existing services**

The research project was not able to engage any Aboriginal or Torres Strait Islander GLBT young person to participate in the study. It would be instructive to assess any real or perceived barriers that Aboriginal and Torres Strait Islander GLBT young people face in accessing Twenty10 and other SAAP services and to develop strategies to address these.

**R4 Develop integrated and coordinated case management to respond to the complex mental health needs of GLBT young people who are homeless or at risk of homelessness.**

Mental health emerged as a major area of concern for the participants and service providers. It is recommended that Twenty10 liaise more fully with other SAAP services and mental health service providers to develop effective case management strategies.

**R5 Strengthen interagency links to build sector-wide capacity to respond to the unique drug and alcohol-use related issues experienced by GLBT youth who are homeless or at risk of homelessness.**

Alcohol and other drugs are another area of concern for the participants, and also noted by other service providers. Twenty10 could develop further relationships with relevant AOD services, and as in mental health, instigate a program for identifying and assisting young GLBT with alcohol and other drug issues. This entails equipping the service providers with further strategies for dealing with GLBT young people in a sensitive manner.

**R6 Increase provision of services to GLBT young people so that a continuum of care exists from crisis accommodation through to long term supported accommodation and exit point housing.**

Participants reported that they were not always able to find accommodation that was safe. Currently there are limited accommodation options for GLBT young people as they move from crisis back in to the community. A continuum of care would provide opportunities for young people to develop their resilience and life skills in affirming and safe environments.

**R7 Develop and disseminate sexual and gender diversity training and anti-homophobia training and resources to the SAAP sector.**

Service providers reported that they needed to increase their understanding of GLBT issues and required resources to support their work. At present there is no training specifically targeting the SAAP sector.

**R8 Develop and disseminate resources that affirm sexual and gender diversity among young people who are accessing SAAP services.**

Participants reported that homophobic attitudes and behaviours from other service users impacted their capacity to work with some SAAP services. Resources that encourage understanding and affirm difference amongst young people may contribute to a more accepting environment for GLBT young people.

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## **APPENDICES**

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### ***Pathways to Independence***

#### **INFORMATION FOR PARTICIPANTS**

##### **Introduction**

You are invited to take part in a research study which will explore the accommodation and welfare needs of young gay, lesbian, bisexual and transgender homeless young people, or those at risk of being homeless.

The study is being done by the Twenty10 gay and lesbian support service, although its staff will not be conducting the interviews. This will be done by Michelle Toms, a social researcher, and Sarah Redshaw, social researcher .

##### **Study Procedures**

If you agree to participate in this study, you will be interviewed by the researcher in a private office at [service provider] for up to one hour. The researcher will begin with a couple of background questions, such as your age and cultural background, just to help us get a good cross-section of young people in the study. You will then be interviewed about your experience of being homeless, what your needs are, how you get information, and how your needs are met or not met and also about your experience with services like Twenty10. The interview will be taped by the researcher, and you will not be identified on the tape by your real name. The researcher will not disclose anything you say to anyone else, and reports from the research will not name or identify you in any way.

##### **Risks**

The questions have been designed to explore the experience of being homeless and let young people have a say in service delivery. This is not an exam, psychology test or counselling session. However, if you feel upset or disturbed by the interview, you can ask to speak to the counsellor at Twenty10 [or other service] or another appropriate staff member.

##### **Benefits**

The research will help design and improve service delivery to gay, lesbian, bisexual and transgender young homeless people in NSW. It may be of direct benefit to you.

##### **Costs**

Participation in this study will not cost you anything, but you will be paid \$20 to compensate for your time and any expenses incurred in visiting the Twenty10/ [other service provider] office.

##### **Voluntary Participation**

Participation in this study is entirely voluntary. You do not have to take part in it. If you do take part, you can withdraw at any time without having to give a reason. Whatever your decision,

## **“It may not be fancy...”**

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please be assured that it will not affect your relationship with the Twenty10 [other provider] staff who are caring for you.

### **Confidentiality**

All the information collected from you for the study will be treated confidentially, and only the researchers named above will have access to it. Please be assured that the staff of Twenty10 will not hear any of the interview tapes or read the interview transcripts. The study results may be presented at a conference or in a research report, but individual participants will not be identifiable in such a presentation.

### **Further Information**

When you have read this information, Michelle / Sarah will discuss it with you further and answer any questions you may have. If you would like to know more at any stage, please feel free to contact Michelle on 0413 279 792 or X (Sarah) or Meredith Turnbull at Twenty10 on 8594 9556. This information sheet is for you to keep.

### **Ethics Approval**

This study has been approved by the Ethics Review Committee (RPAH Zone) of the Sydney South West Area Health Service. Any person with concerns or complaints about the conduct of this study should contact the Secretary on 02 9515 6766 and quote protocol number X06-0073.

Version No. 2

Date: 22/04/2006

## ***Pathways to Independence***

### **Interview Guide**

#### **‘Pathways to Independence’**

Exploring the service needs of young homeless gay, lesbian, bisexual and transgender young people.

#### **Preliminary**

- Discuss Information Statement and ethics requirements i.e. confidentiality and anonymity
- Offer the participant a chance to use a pseudonym during the taped interview
- Fill out demographic profile form

#### **Preamble**

I am interested in your experience of using services for young homeless people. By services for young homeless people I mean services that XXX. I am also interested in your information needs around services for homeless young people. I am particularly interested in the use and access to these services from a gay/lesbian/bisexual/transgender perspective.

In this interview I will ask you about your experience of service use while homeless [particularly in the last 12 months?] and where you have been helped and where you have not.

I will write down some of the questions that you had when needing help and I will come back to them.

At times, the interview may seem repetitious. This is so I can get a complete picture of what is going on.

#### **Interview questions**

Q1. Background: culture etc?

Q2a. To start with, could you briefly describe your experience of homelessness, when you became homeless, what led to you being homeless? How long have you been homeless for?

Q2b. What is your current experience of homelessness? Where are you living now, who do you hang out with, are you in assisted accommodation at present? Explore. Could you describe what that is like on a daily basis, what is a typical day like?

[ALTERNATE: ESTABLISH QUESTIONS/EXPECTATIONS ABOUT HOMELESS IN GENERAL. HOW DID YOU GO ABOUT FINDING THE ANSWERS TO THESE ETC; COULD ALSO HAVE LIST OF SERVICE NEEDS – WHICH OF THESE DO YOU HAVE?]

Q3. Now think back to when you were first homeless or at risk of homelessness, which of the following services have you used or approached since being homeless?

Q4. [For each used in the last 12 months]. Starting with XYZ, how did you hear about this service? What made you approach them? What did you want from this service?

**“It may not be fancy...”**

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Q4a. What were the specific questions you had of this/these service/s? What did you want to know, find out or understand? [RECORD EACH QUESTION OR EXPECTATION].

Q5. Please look at this card and tell me which of these have been the two biggest areas of concern for you in the last 12 months (accommodation, employment, study, health, family, relationships, sexuality, ethnicity, money, alcohol and other drugs) What are the questions or needs you have had for each of these concerns?

Q6. What led you to have this question/expectation? How did you answer this question? Did you get an answer? Was your need met? Who else did you ask? Why them?

Q7. How hard or easy was it to get this? Who or what blocked you? Who or what helped you? How did the answer help you or hinder you? What emotions or feelings did you have about the situation? Did this have consequences or impacts? In an ideal world, how else would you have been helped?

[REPEAT FOR EACH QUESTION/EXPECTATION].

Q8. [IF NOT ACCESSED SERVICE IN LAST 12 MONTHS] Why have you not accessed or used a service in the last 12 months? What else do you do, or where else do you go? What image do you have of homeless services? What comes to mind? What has stopped you from accessing one in the last 6 months? [Interview: explore for ‘blocks’ in access] Tell me about your previous experience with these sorts of services?

Q9. In general, what are your experiences of accessing Twenty10/other service? What are your general requirements from this service? What needs do they meet? How? What needs do they not meet? What else do you want to know, find out or understand?

Q10. What do you understand by a homeless service (if not answered Q.8)? What image comes to mind? What should it contain? What would you like to know, find out or understand about homeless services? What about other services that you may use? Are they promoted in your community? How? Does it make you want to use them or not? Interview: explore. Do they cater to GLBT people? How? What else could they do?

Q.11 Do you use ethnic or cultural services [e.g. indigenous]? Which ones and what do you use them for? How involved are you in your ethnic community? Explore. What knowledge or information is available to people in your ethnic community on homelessness or other issues e.g. drugs, health? Have your family tried to help you? Do you identify with your ethnic community? Which culture do you identify with? Explore.

***Pathways to Independence***

**INFORMATION FOR SERVICE PROVIDERS**

Twenty10 have been funded by the Service and Regional Research Program to conduct research to explore the current service needs of gay, lesbian, bisexual and transgender (GLBT) homeless and at risk of homelessness youth. The definition of homeless includes young people that are at risk of being homeless through lack of employment or family security. The wider study involves conducting in-depth interviews with GLBT young homeless about their experiences of homelessness, their service needs and provision and where they seek information on service provision. We are also interested in what specific services are provided for GLBT young people in other SAAP funded organisations, and the perceived gaps in service provision.

You are invited to take part in the research by completing the attached questionnaire and returning it to Twenty10. The information is confidential and will only be seen by Twenty10 executive officer or the researchers. You do not have to identify your organisation on the questionnaire and your responses are collated with those of other service providers. Your organisation will not be identified in any presentations or publications to emerge from the study, and cannot be identified to SAAP or other government services.

Participation in this study is entirely voluntary and you do not have to complete the questionnaire. The questionnaire also asks for contact details of service providers that are able to recruit young GLBT homeless or at risk of homelessness young people to be interviewed for the wider study. You are under no obligation to provide this information, and should only do so if you are happy to be approached by the researchers with a view to setting up interviews at your premises. Please note that we will not need to contact every service provider that agrees to participate in the wider study.

Further information on the study can be obtained by contacting Meredith Turnbull, executive officer at Twenty10 on 8594 9556. The study is being carried out by two research consultants: Michelle Toms, Social Research Consultant and Dr. Sarah Redshaw, Research Consultant. Both have extensive community and academic research experience, and will be primary contacts for the research. Michelle can be contacted on 0413279792.

The research will help design and improve service delivery to gay, lesbian, bisexual and transgender young homeless people in NSW. Twenty10 greatly appreciates your support in this important research project.

**Please return the questionnaire to Twenty10 by Fax to Michelle Toms, Researcher c/o Twenty10 02-8594 9559 or by email: [mtoms@d2.net.au](mailto:mtoms@d2.net.au).**

This study has been approved by the Ethics Review Committee (RPAH Zone) of the Sydney South West Area Health Service. Any person with concerns or complaints about the conduct of this study should contact the Secretary on 02 9515 6766 and quote protocol number X06-0073

Version No. : 1  
Date: 22/04/2006

**Pathways to Independence**

**QUESTIONNAIRE FOR SERVICE PROVIDERS**

It is important to read the attached Information Statement before completing the questionnaire. The questionnaire is being sent to NSW based providers of services to homeless people. The questionnaires remain confidential to the Twenty10 researchers and service providers will not be publicly identified in any way. Please tick the answers that most apply to you, and as many as apply where the question allows it.

**Service Provision for Homeless People**

- 1) *What type of service do you provide? (circle as many as apply)*
  - a) Mainstream
  - b) Long term
  - c) Short term
  - d) Other (specify)
- 2) *What model do you use to provide your service? (circle as many as apply)*
  - a) Brokerage
  - b) Crisis
  - c) Supported accommodation
  - d) Other (specify)
- 3) *Where is your service located?*
  - a) Urban area
  - b) Rural area
  - c) Regional area
- 4) *How many staff work in your service?*
  - a) 1-5
  - b) 6-10
  - c) 11-20
  - d) 21 plus
- 5) *Apart from accommodation, what specific services do you provide for homeless young people? (circle as many as apply)*
  - a) None
  - b) Counselling
  - c) Peer support
  - d) Referral service e.g. alcohol and other drug
  - e) Assist with employment and income support
  - f) Assist with health issues / application for health services
  - g) Services for non-English speaking background clients

- h) Support for Aboriginal and Torres Straight Islander clients
- i) Case Management
- j) Other

- 6) *Do you have specific policies to address the following forms of discrimination?*
  - a) Homophobia
  - b) Racism
  - c) Gender inequity
  - d) Disability discrimination
  - e) General Policy

**Service provision for Gay, Lesbian, Bisexual or Transgender (GLBT) clients**

- 7) *What percentage of your client group do you perceive to be lesbian, gay, bisexual or transgender (GLBT)?*
  - a) None
  - b) 1 – 25%
  - c) 26 - 50%
  - d) 51 – 75%
  - e) 76 – 100%
- 8) *What specific services do you provide for lesbian, gay, bisexual or transgender (GLBT) clients? (circle as many as apply)*
  - a) None [GO TO Q 10]
  - b) Counselling
  - c) Peer support
  - d) Referral service e.g. alcohol and other drug
  - e) Assist with employment and income support
  - f) Assist with health issues /application for health services
  - g) Translation / interpretation for non-English speaking background clients
  - h) Support for Aboriginal and Torres Straight Islander clients
  - i) Other

9) *For each of the above services that you have for GLBT young people, why do you have this/these services?*

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10) *In your experience, what are the issues for GLBT young people ?*

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11) *Finally, do you perceive any barriers to providing general and/or specific services to GLBT clients?*

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**THANKYOU FOR YOUR ASSISTANCE**

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As part of the wider research study into the current service needs of GLBT homeless and at risk of homelessness youth, Twenty10 are seeking to interview young people in other locations. If you are able to provide access to GLBT young people and a quiet place to conduct an interview, then please provide your organisation and contact details. (Note: There is no guarantee you will be contacted by the researchers)

Organisation: \_\_\_\_\_

Contact person: \_\_\_\_\_

Contact number or email: \_\_\_\_\_