

Executive Summary

The Coalition for Radical Advocacy and Empowerment (The Coalition) completed its 2024 Community Assessment in May 2024, and is pleased to offer this report on data analysis and key findings. The Coalition conducted an online survey, a focus group, and one-on-one interviews to explore the intersection of homelessness and substance use among LGBTQ+ youth and young adults (age 16-30) in New York City. The findings support what research on this community and 40+ years of practice wisdom at The Lesbian, Gay, Bisexual, & Transgender Community Center (The Center) have taught us about the discrimination, mistreatment, disparities, health inequities, and access barriers this community faces. LGBTQ+ people are overrepresented among youth experiencing homelessness, and those experiencing homelessness have high rates of substance use, which can lead to numerous long-term negative health effects.

Of 214 Community Assessment survey respondents, all of whom were experiencing homelessness or housing instability, 83.42% reported using substances in the last 30 days. This finding points to the ongoing need for the Coalition's work to understand the intersection between LGBTQ+ youth and young adult homelessness and substance use, increase collaboration and access to identity-affirming services in New York City, and understand how service agency policies are affecting service access and outcomes in this community.

Based on the findings of the Community Assessment, The Coalition has four primary recommendations:

1. Focus increased engagement strategies on reducing harm
2. Expand improve LGBTQ+ specific shelter services
3. Empower LGBTQ+ youth to advocate for themselves
4. Enhance anti-discrimination training for shelter staff

The four recommendations and anticipated action steps are outlined in the conclusion of the report.

Background of The Coalition

The Center formed The Coalition for Radical Advocacy and Empowerment (The Coalition), formerly The Coalition for Radical Advocacy and Empowerment, in July 2022. The coalition's work focuses on the intersection of LGBTQ+ youth/young adult (ages 16-30) homelessness and substance use to create strategies for prevention, increase resources and access to services for this community, and inform policy advocacy efforts.

The Coalition responds to program participants' needs. In 2020, The Center's youth team saw an increase in youth and young adults (YYA) reporting homelessness and unstable housing. Community members struggled to meet basic needs while the city was shut down during the COVID-19 pandemic. Most programs that served LGBTQ+ youth and young adults were running at limited capacity with longer wait lists. The demand for Center services, especially in mental health counseling and outpatient substance use treatment, increased by as much as 40% from pre-pandemic levels. Of the 2,016 community members accessing The Center's mental health and substance use services from January 2019 to May 2024, around 13% reported homelessness or housing instability.

The Coalition works to create environmental changes that support LGBTQ+ youth, thereby reducing the trauma experienced by members of these communities and reducing the need to use alcohol or other drugs as a coping mechanism. The Coalition explores the intersection between LGBTQ+ youth homelessness and risk factors around substance use, seeking answers and solutions to questions such as:

1. How are homeless LGBTQ+ youth and young adults finding and accessing resources and services in New York City?
2. What barriers do they face accessing New York City services?
3. Are there identity-affirming and accessible resources available to LGBTQ+ youth to address substance use?
4. What resources and services are needed to create better outcomes for this community?

The Coalition also explores intersectional factors such as race, ethnicity, and immigration and disability status and how these affect the experiences of those without stable housing.

New York City organizations and agencies with an interest in the LGBTQ+ community, homelessness, and substance use attend monthly Coalition meetings, as well as community members with lived experience of homelessness and substance use.

Steady Meeting Participants

Safe Horizon, Streetwork Project
National Harm Reduction Coalition (NHRC)
NYC Prevention Resource Center (PRC)
Staten Island Partnership for Community Wellness - Tackling Youth Substance Abuse (TYSA)
Coalition
Hetrick Martin Institute (HMI)
Good Shepherd

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THE CENTER



Streetlives
Coalition for Homeless Youth
New York State LGBT Health And Human Services Network
NYC Department of Youth & Community Development (DYCD)
NYC Department of Homeless Services (DHS)
NYC Department of Health and Mental Hygiene (DOHMH)
Queer Code members
The Center

The Coalition centers youth voices by creating a model of leadership that empowers homeless LGBTQ+ youth and young adults to advocate for their community. The Coalition's six-member youth council, Queer Code, allows youth who have experienced homelessness or have been unstably housed to voice their concerns and advocate for their needs. Queer Code is a subdivision of The Coalition and operates under the same principles, guidelines, and mission as The Coalition. Consisting of six members from 18 to 30 years old, the Queer Code has its own leadership, goals, youth-related events, policies, and procedures. Queer Code helps guide the work of the main coalition through their input and organizing.

Purpose of the Assessment

The purpose of The Coalition for Radical Advocacy and Empowerment's Community Assessment is to engage LGBTQ+ youth/young adults (YYA) experiencing/have experienced homelessness to learn about their experiences surviving homelessness in New York City and how they navigate the different systems to receive services.

The goals of the Community Assessment are:

1. To learn more about resource utilization by LGBTQ+ YYA experiencing homelessness in New York City, including what resources they access, how they find them, and which resources/services they engage with the most and why. This information informs the development of better resources and services by suggesting partnerships with agencies/organizations that support the LGBTQ+ YYA community experiencing homelessness that might better serve members.
2. To understand the intersection between homelessness and substance use within this community. With this understanding, The Center can collaborate with service providers, shelters, drop-in programs, food kitchens, etc, to create safer spaces for homeless LGBTQ+ YYA who may struggle with substance misuse.

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3. To learn how resource policies and practices affect the utilization of services that YYA experiencing homelessness receive in New York City. By understanding how policies and practices in different organizations and agencies directly affect experiences and outcomes for LGBTQ+ YYA experiencing homelessness, The Center can create relevant strategies for advocating for policy changes.

Involvement of Coalition Members and LGBTQ+ youth and LGBTQ+ BIPOC youth in plan development and data collection

Queer Code developed the Community Assessment survey questions, and the main coalition reviewed them to include in the final survey. Queer Code's members are all youth of color.

Description of Existing Data Sources Used

In addition to the data collected by The Coalition for the Community Assessment, The Center relies on other sources of existing data to understand the scope of the intersection of homelessness and substance use among LGBTQ+ youth and young adult community members.

Among these are:

Martinez O, Kelle G. Sex Trafficking of LGBT Individuals: A Call for Service Provision, Research, and Action. *Int Law News*. 2013 Fall;42(4).

Morton, M. H., Samuels, G. M., Dworsky, A., & Patel, S. (2018). *Missed opportunities: LGBTQ youth homelessness in America*. Chicago, IL: Chapin Hall at the University of Chicago.

New York City YHDP Planning Committee. (2022). *Opportunity Starts with a Home: New York City's Plan to Prevent and End Youth Homelessness*. New York City, NY: New York City YHDP Planning Committee.

Price, C., Chanchan, D., Wheeler, C., Seip, N., & Rush, J. (Eds.). (2019). *At the Intersections: A collaborative report on LGBTQ youth homelessness*. (2nd Edition) True Colors United and the National LGBTQ Task Force.

National Alliance to End Homelessness, (July 24, 2020), *Transgender Homeless Adults & Unsheltered Homelessness: What the Data Tell Us*.

Substance Abuse and Mental Health Services Administration. (2023). Lesbian, gay, and bisexual behavioral health: Results from the 2021 and 2022 National Surveys on Drug Use and Health (SAMHSA Publication No. PEP23-07-01-001). Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration.

<https://www.samhsa.gov/data/report/LGB-Behavioral-Health-Report-2021-2022>

The Trevor Project, February 2022, Homelessness and Housing Instability Among LGBTQ Youth.

According to a report by the Center for American Progress, as many as 4.2 million young adults in the United States experience homelessness. A disproportionate number of these individuals are LGBTQ + community members (Morton et al., 2018). LGBTQ+ youth have a 120% higher risk of being homeless than heterosexual youth, according to a brief prepared by the University of Chicago. Youth who are black and LGBTQ reported the highest rates of homelessness. A recent survey of 354 agencies that work with homeless youth found that nearly 40 percent of their clientele identified as LGBTQ+.

A recent report compiled by the Substance Abuse and Mental Health Services Administration (2023) confirms a well-established fact: adults who identify as lesbian, gay or bisexual have a high chance of struggling with substance abuse disorders and mental health conditions compared to adults who identify as heterosexual. Several factors contribute to this trend. Many of them are likely the same shared life experiences that drive LGBTQ+ homelessness, including familial rejection, abuse and neglect. The Center on Addiction cites these environmental influences as significant risk factors for developing an addiction.

A 2019 report by True Colors United and the National LGBTQ Task Force (A Collaborative Resource on LGBTQ Youth Homelessness) stated:

- LGBTQ+ youth and young adults are 120% more likely to experience homelessness than their straight and cisgender peers.
- Service providers estimate anywhere from 20-40% of youth experiencing homelessness identify as LGBTQ+.
- LGBTQ+ homeless youth are more than twice as likely to use substances as their cisgender and heterosexual peers. The reasons for increased substance use may have to do with familial rejection, social conditions, and survival needs.
- The stresses of discrimination and prejudice play a significant role that often more deeply impacts LGBTQ people of color.
- Shelter violence, and other structural harms, also create conditions where substance use can be a coping mechanism.

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LGBTQ+ youth are disproportionately represented in runaway and homeless youth shelters. Research has shown that while only 4.5% of the general population identified as LGBTQ+, as many as 40% of the homeless youth population identify as LGBTQ+, nearly ten times higher. Among all LGBTQ+ youths surveyed by the Trevor Project in 2021, 28% reported experiencing homelessness or housing instability at some point in their lives, and those who did had two to four times the odds of reporting depression, anxiety, self-harm, considering suicide, and attempting suicide compared to those with stable housing (The Trevor Project, 2022).

LGBTQ+ youth homelessness often follows rejection by families during the coming out process or aging out of the foster care system. The best estimates are that 42% of youth experiencing homelessness identify as queer or LGBT, and 50% of those youth were kicked out by religious parents or families (Parity NYC, 2022). Once homeless, many LGBTQ+ youth are coerced into sex trafficking in exchange for shelter or food. According to a study published by the National Institute of Health, “LGBTQ minors who are homeless are at the highest risk for sex trafficking and sexual exploitation.” Trafficking also increases the LGBTQ+ youth’s risk of physical or sexual assault, drug and alcohol use/abuse, and STI/HIV transmission.

Per the Ali Forney Center (2019), an organization serving LGBTQ+ youth experiencing homelessness in NYC, and various studies, 40% of the homeless youth population in New York City identify as a member of the LGBTQ+ community (1,600/4,000 youth). LGBTQ+ youth experiencing homelessness are more likely to experience violence or trauma, leading to mental health difficulties and substance use. Some turn to survival sex or drug dealing to survive. Affirming housing resources in the city are very limited for transgender and gender-expansive (TGE) YYAs. There are two to three month long wait lists for affirming housing programs, especially for young adults aged 21-24.

According to a 2020 report by the National Coalition to End Homelessness, homelessness and unsheltered rates among transgender people are increasing at an astounding pace. The number of adult transgender individuals experiencing homelessness increased by 88% since 2016, and the number experiencing unsheltered homelessness increased by 113% during the same period. Transgender individuals are disproportionately unsheltered. Sixty-three percent are living in such situations. For comparison, 49% of cisgender people experiencing homelessness are unsheltered.

Data Collection Methods and Participant Recruitment

The Coalition’s youth council, Queer Code, developed the 42 questions used for the assessment with input from the main coalition. They created the outline and timeline of the data

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collection, utilizing the main coalition meeting to workshop ideas and questions to ensure that all coalition members had a chance to add input.

The Community Assessment focused on homeless and unstably housed LGBTQ+ YYAs between the ages of 16 and 30 in all five boroughs of New York City, with the primary focus on youth who engage in substances and BIPOC youth. The Coalition used three methods to collect data for the Community Assessment: an online survey (via Survey Monkey), a focus group, and one-on-one interviews.

Outreach for the survey was conducted at various drop-in centers and youth shelters throughout the five boroughs of New York City with the support of coalition members, youth leaders, and Center staff. The online survey reached 214 LGBTQ+ YYA experiencing homelessness throughout the five boroughs. Participants received a \$20 gift card.

In May 2024, a two-hour focus group session was held at The Center in Manhattan, with six young people talking about their experiences navigating resources and services in New York City as a person experiencing homelessness. Outreach for the focus group was mainly conducted through word of mouth. The focus group was conducted by youth leadership and a Center intern. Participants received a \$50 gift card.

The Coalition conducted six one-hour one-on-one interviews with LGBTQ+ YYAs with lived experience of homelessness and substance use recruited from community partners and through word of mouth. The purpose was to have a deeper conversation with LGBTQ+ YYAs who have experienced homelessness and who also engage in substance use. Participants received a \$100 gift card.

Data Analysis

Description of Survey Participants - Demographic Characteristics

Survey respondents were aged 16 to 30, with most (90.2%) between 19 and 29. Twenty-one % were not U.S. citizens, with 13% of these being refugees/asylum seekers. Of the 214 survey respondents, 80% identified as a member of the transgender and gender expansive (TGE) community, providing a robust look at how homelessness and substance use affect members. Forty percent have lived experience of foster care, and 45% have aged out of foster care.

Of 214 survey participants, 69.12% identified as a person of color, with 58.82% identifying as Black/African American.

“It’s hard enough being black, but when you add being trans and queer and homeless onto it, it feels like everything and everyone is against you.” ~24-year-old black trans adult

Table 1: Racial Characteristics of Survey Respondents

Race	Percentage	Number
Black or African American	58.82	120
Hispanic or Latinx	9.31%	19
White	30.88	63
Asian	0.98%	2
Middle-Eastern or North African	0.98%	2
Native Hawaiian or Other Pacific Islander	0.49%	1
American Indian or Alaskan Native	0.98%	2
More than one race	2.94%	6
Prefer not to say	1.47%	3
Race Not Listed	0%	0
TOTAL		218

Housing Status

Of those reporting homelessness or unstable housing, the majority reported street homelessness (43.35%) or staying with a relative or friend (24.14%), with the rest utilizing a transitional independent living program (4.43%), crisis shelters (8.87%), drop-in centers (5.91%), or couch surfing (7.39%).

Service Utilization

The following figures show the utilization of NYC housing services and access to services by survey respondents.

Figure 1. Type of Housing

Q9: What type of housing are you receiving?

Answered: 198 Skipped: 16

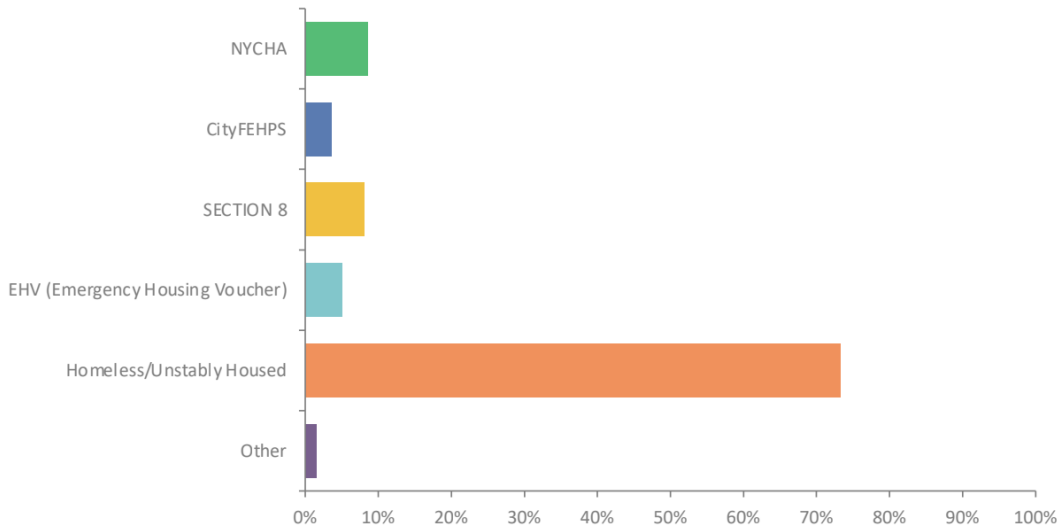


Figure 2. Current NYC-based Program Service Utilization

Q14: Are you currently receiving any services or resources from a NYC based program (including, but not limited to, HRA, DYCD shelters, DSH shelter drop-in program, ect)?

Answered: 202 Skipped: 12

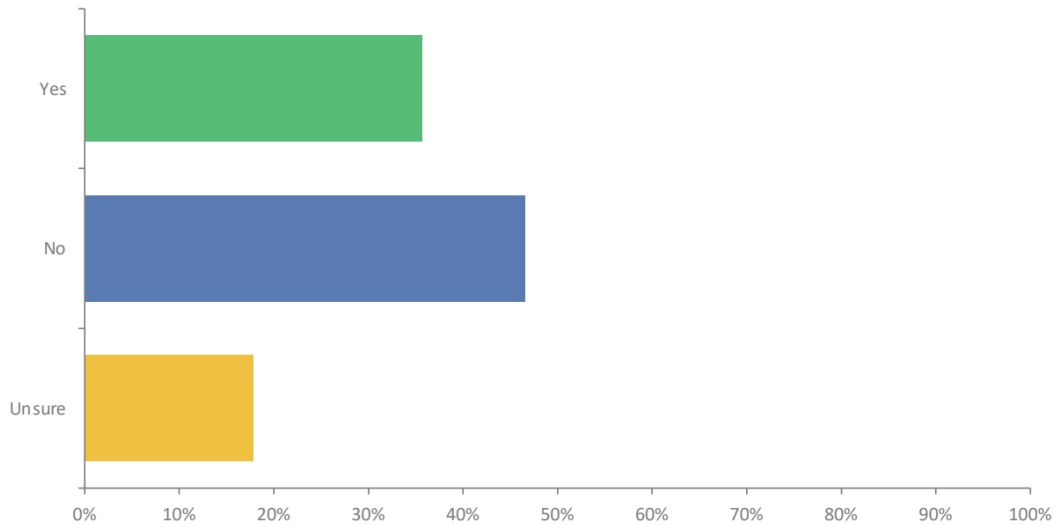
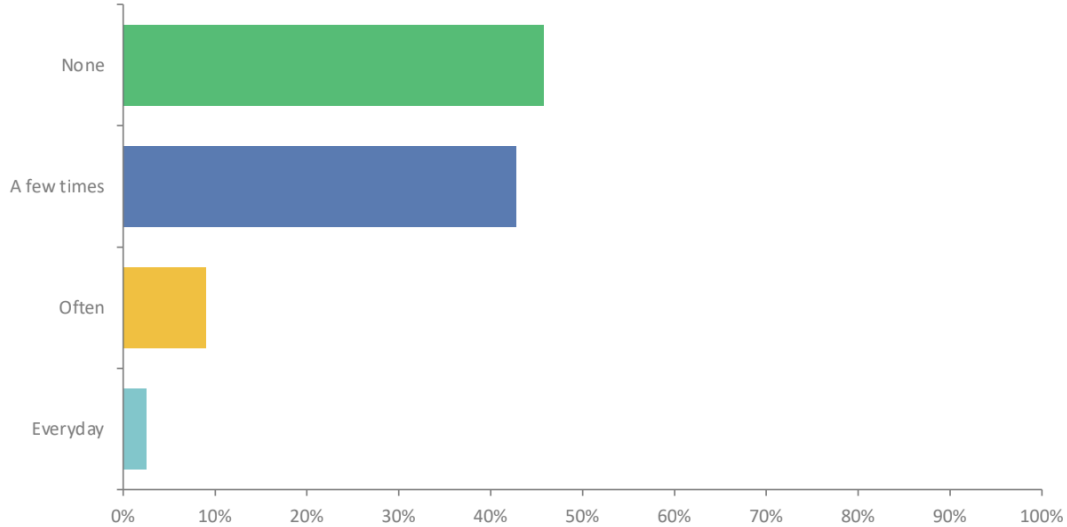


Figure 3. NYC-based Program Service Utilization in the Last 30 Days

Q15: How many times in the last 30 days have you used a service or resource program in NYC (including, but not limited to, HRA, DYCD shelters, DSH shelter drop-in program, ect)?

Answered: 201 Skipped: 13



Mental Health Status

Over half (56.50%) of survey participants reported having a mental health diagnosis.

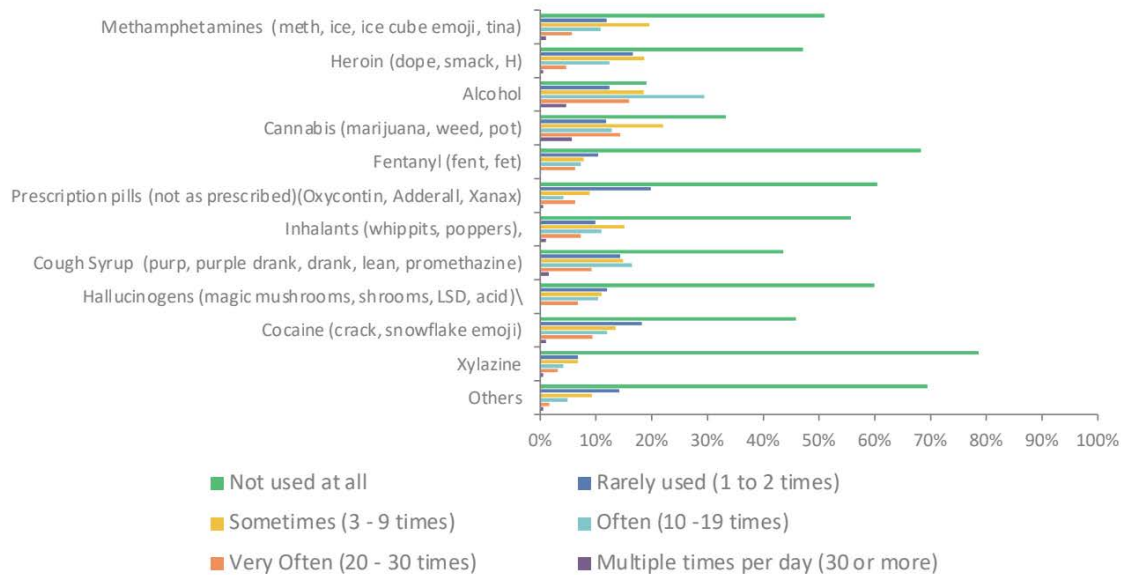
Substance Use Patterns

Over 83% of survey participants reported having used substances in the last 30 days, with the most often used substances being alcohol, cannabis, heroin, methamphetamines, fentanyl, cocaine, and cough syrup. About one out of four indicated they are receiving treatment for substance use.

Figure 4. Substance Use in the Last 30 Days

Q28: Check off any substances that you've used in the past 30 days

Answered: 200 Skipped: 14



Strengths and Limitations of Assessment

The strengths of The Coalition’s Community Assessment lie in the incorporation of community voice into the assessment by involving Queer Code in the development of survey questions and through focus groups and one-on-one interviews with LGBTQ+ youth and young adults with lived experience of the issues The Coalition seeks to understand and address. By these methods, The Coalition can focus on what the youth are asking for at the moment to capture a snapshot of the rapidly evolving landscape of youth homelessness and substance use.

One limitation of the Community Assessment was our inability to reach youth outside of service programs. Although 43% of respondents identified as experiencing street homelessness, the majority of participants were located at various drop-in programs and youth shelters throughout New York City.

Key Findings

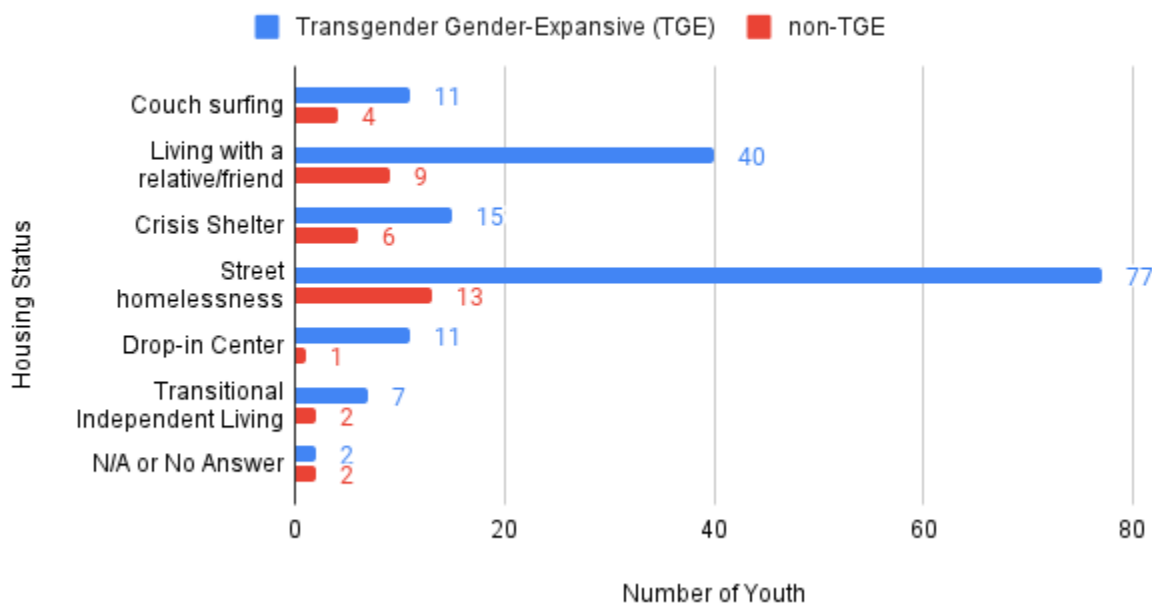
The key findings of the 2024 survey center around:

- housing status by TGE/non-TGE respondents;
- experiences at shelters and the quality of services received;
- the safety of those accessing shelters;
- mental health status and lack of support;
- reasons for substance use; and
- advocacy and case management.

1. Transgender and Gender Expansive (TGE) survey participants reported disproportionately higher rates of homelessness/unstable housing statuses compared to non-TGE participants.

Figure 5. Comparison of TGE vs. non-TGE Housing Status for Survey Respondents

Comparison of TGE Housing Status with non-TGE



Experiences at Shelters

2. Most respondents reported low-quality services and poor conditions within NYC shelters and drop-in centers. On average, more youth reported poor conditions and low-quality services at the sites they accessed for assistance.

“I have stayed in a DHS shelter that was disgusting. I didn’t want to eat there or go to the bathroom.” ~M., age 23

"I wish we at least had access to cleaning supplies; these places are so disgusting. No one should live like this." ~E., age 28

Table 2: Site Conditions and Quality of Services

Site or Service	Score	Number Responding
On a scale of 1 through 10, how would you rate your current housing situation? (1 being low quality and 10 being high quality)	3	202
In the last 30 days, how often do you feel your needs were met? Including access to hygiene products, clean clothes, daily meals, showers, a safe place to sleep, etc.	Not at All - 25.25% Sometimes - 58.91% Often - 11.88% Every Day- 3.96%	202
On a scale of 1-10, how would you rate the quality of service you are currently receiving from a service or resource program in NYC (including, but not limited to, HRA, DYCD shelters, DSH shelter drop-in program, etc.)? (1=non-consistent quality/inconsistent accessibility, 10=excellent quality/consistent)	4	194
Unsanitary Conditions within shelters, programs, or drop-in centers?	YES - 58.91% NO - 41.09%	202
Have you faced any form of retaliation in a program, shelter, or drop-in center in NYC for reporting unsafe or unsanitary conditions?	YES - 31.19% NO - 68.81%	202

3. Two out of three respondents (67.33%) reported feeling unsafe all of the time, most of the time, or sometimes as an LGBTQ+-identified person.

“Most of the shelters I have stayed at didn’t feel safe,” said K., a 25-year-old. “I would rather be outside or on the trains; at least people don’t bother you”

Figure 6. Perception of Safety within DHS and DYCD Shelters

Q20: Do you feel safe as an LGBTQ+ identified person within DHS and DYCD Shelters?

Answered: 202 Skipped: 12

ANSWER CHOICES	RESPONSES	
Not at all	28.22%	57
Sometime	51.98%	105
Most of the time	13.86%	28
All of the time	1.49%	3
N/A	4.46%	9
TOTAL		202

Mental Health

4. Forty-two percent of survey respondents indicated their mental health has caused them to experience service barriers, and 51.50% reported they do not have the support they need to manage their mental health. When asked if the social services they encountered have been able to support them with their mental health, the average score was a 4 out of 10 (1 meaning non-consistent quality/inconsistent accessibility, 10 meaning of excellent quality/consistent).

Substance Use Patterns

5. The top three reasons that survey respondents indicated they use substances are self-medicating (44.68%), coping mechanisms (23.94%), and lack of confidence/low self-esteem (13.30%). These results indicate the level of stress and negative social conditions experienced by this community.

"I used Meth to cope. I was homeless, doing sex work, and had nobody and no support." I., age 24

Advocacy and Case Management

6. About half (56.72%) reported self-advocacy when they needed help, with others reporting advocacy from family and friends (17.91%) or case workers (10.45%), and 13.43% indicating no one advocates for them.

"I thought case managers were advocates, that they would walk me through the processes. All case management has been is someone giving me information I don't know what to do with or understand." ~ C., age 24

"I have been homeless for four years, and I don't think I have ever had real case management." ~ I., age 24

Recommended Next Steps for The Coalition

The Coalition will use this community needs assessment to guide our mission statement and strategic work for 2024/25. We will release an official report of our findings to coalition members in the summer of 2024, aiming to create an action plan that aligns with the community's needs.

Recommendation 1: Reducing Harm

To better support homeless LGBTQ+ youth, we must change our engagement strategies. Access to care can be improved by:

- Shifting barriers.
- Revising policies.
- Educating service providers to offer more affirming care.

Many youths expressed a lack of advocacy, directly affecting the quality of services and resources they receive. Therefore, we recommend increased funding for programs that provide direct services, enabling them to:

- Hire additional social workers and case managers.
- Pay staff a living wage, reducing burnout and turnover.

Improving staff longevity and stability will enhance outcomes for the community, providing better case management and advocacy.

Recommendation 2: Expanding and Improving LGBTQ+ Specific Shelter Services

LGBTQ+ youth often avoid shelters due to safety concerns. To address this, shelters must:

- Ensure clean and sanitary living conditions.
- Provide affirming environments.
- Train staff in clear boundaries and affirming care.

We recommend implementing an annual review process for shelters receiving city and state funding to ensure they meet these standards. Additionally, increasing the number of LGBTQ+ shelter beds, especially for those aged 21-29, will reduce waiting lists and help youth stabilize more quickly.

Recommendation 3: Empowering Advocacy

With adequate care, services, and resources, homeless LGBTQ+ youth can achieve better outcomes. Empowering them to advocate for themselves is crucial. The Coalition will:

- Expand its QUEER Codel to support and empower homeless LGBTQ+ youth.
- Examine policies and practices of service providers to develop strategies that better support this community.
- Provide training to programs and organizations to create more affirming resources.

Recommendation 4: Enhancing Anti-Discrimination Training for Shelter Staff

All LGBTQ+ youth, regardless of where they seek shelter, should feel safe and affirmed. We urge the city and state to:

- Expand anti-discrimination training to include LGBTQ+ affirming practices.
- Ensure that every shelter provides an inclusive environment for LGBTQ+ youth.

Moving Forward

The Coalition, guided by the QUEER Code, will continue developing strategies to support homeless LGBTQ+ youth and young adults. Our QUEER Code will play a pivotal role in utilizing the data and information gathered to grow the Coalition and enhance our support for this community.