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Homing geographies : sexuality and community among homeless youth in Los Angeles

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Homing Geographies: Sexuality and Community among Homeless Youth in Los Angeles

Abstract

Scholarly literature on sexuality and homeless youth has focused almost exclusively on young people nested within a culture of risk on the streets. This study broadens the body of work on this population by exploring how homeless and runaway youth in Los Angeles make meaning of their sexualities. While these individuals are extremely vulnerable and fragile, they also display remarkable resilience. Researchers conducted two sets of in person, semi-structured interviews with six homeless youth at a homeless service agency in Los Angeles as part of an HIV peer intervention project. The interviews focused on sex education and messages about sexuality, as well as the youths' participation in the project. Five additional interviews were conducted in which the youth interviewed one another, which took the form of testimonial videos about their sexual experiences. Sexual identity, sexual activity, family norms about sexuality, STI and HIV prevention, and substance abuse were salient themes in the sexual lives of many youth. The youth discussed issues of homophobia, family abuse, and situations of extreme risk, but they also focused on supportive peer relationships, processing and understanding sexuality, and the importance of using protection when engaging in sexual behaviors. Nuanced descriptions of sexuality among homeless youth is crucial in order to help social workers and other professionals understand the complex and difficult realities weathered by this population on a regular basis.

Keywords: Homeless youth, sexuality, LGBTQ issues, family norms, sexual health, substance abuse.

HOMING GEOGRAPHIES: SEXUALITY AND COMMUNITY AMONG HOMELESS

YOUTH IN LOS ANGELES

A project based upon an independent investigation, submitted in partial fulfillment of the requirements for the degree of Master of Social Work.

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2011

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First and foremost, this thesis is dedicated to the young people who will call the streets their home tonight, and for nights to come in the future. May your passage to a stable living situation be swift and safe. Your resilience is truly inspiring.

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CHAPTER 1

Introduction

Tonight in Los Angeles, there will be 4200 homeless youth on the streets (Rabinovitz, Desai,

Schenir, & Clark, 2010). Some of them will literally sleep on the streets, some will stay in

shelters, and some will crash on their friends' couches. None of them have a permanent place of

residence, although some have jobs or attend college, and some still maintain connections with

family or friends with whom they were in touch prior to becoming homeless (Rice, Milburn, &

Rotheram-Borus, 2007). All of them are at increased risk for HIV and other STI transmission,

mental health issues, substance abuse, and interpersonal violence (Kipke, Simon, Montgomery,

Unger, & Iverson 1997: Rabinovitz et al., 2010). Many of them are survivors of abuse

perpetrated by a parent or other caregiver, and a disproportionate number come from fragmented

family backgrounds (Whitbeck & Hoyt, 1999; Whitbeck, Hoyt, & Bao, 2000; Tyler, Whitbeck,

Hoyt, & Yoder, 2000). Many of them experience irreconcilable conflict with family members

over issues of sexuality. In some cases, these very issues precipitate their leaving home and force

them to begin living on the streets.

The lives of homeless young people are infinitely complicated, and do not easily lend

themselves to a linear analysis of lived experience. The major issues with which homeless youth

are wrestling are deeply intertwined. For example, one of the main trajectories into

homelessness for young people is family conflict (e.g. Whitbeck & Hoyt 1999; Finkelstein 2004;

Milburn, Ayala, Rice, Batterham, & Rotheram-Borus, 2008. Often this conflict is between a

parent and a child over sexuality issues. The experience of being thrown out of the house due to

sexuality can cause serious mental health problems, which can intersect with substance abuse

issues, and also raises concerns about safer sex. This is just one example of how this population

is dealing with a multiplicity of intra and interpersonal, structural, and systemic factors, all of which have an impact their ability to thrive.

The data for this project consists of qualitative interviews collected as part of an HIV prevention intervention at a drop-in center that serves homeless youth in Los Angeles. Dr. Eric Rice at University of Southern California's School of Social Work conceived of and undertook the research, which occurred during the summer of 2009. I analyzed the interviews, and through my exploration of the data, answered the question "how do homeless youth navigate the lived experience of sex and sexuality on the streets?"

The academic literature about homeless youth is growing as the population of homeless youth increases. One omission from the clinical literature on this topic is the material experiences of sexuality among homeless young people. Though many scholars have written about aspects of sexuality such as HIV and STI prevention and survival sex (e.g. Greene, Ennett, & Ringwalt, 1999; Rice, Monro, Barman-Adhikari, & Young 2010; Swart-Kruger & Richter, 1997), researchers have paid little attention to the need to holistically study the sexual lives of homeless youth. About forty percent of currently homeless youth identify as lesbian, gay, bisexual, or transgender (Rabinovitz et al., 2010). Sexuality is a key dynamic that overlays and interfaces with other critical factors in the lives of homeless youth. It is crucial for clinicians, policy makers, and scholars to develop a rich understanding of the meaning they make of their sexualities in the context of their homelessness.

Clinical social workers are the professionals who most often work with homeless youth in an agency context. Although there are many barriers to services and challenges to working with homeless youth, social workers can be central to their wellbeing and ultimate transition out of homelessness (Kurtz, Lindsey, Jarvis, and Nackerud 2000; de Winter and Noom, 2003).

Homeless youth are a population at increased risk for suicide and other mental health issues, physical health issues, abuse, and victimization (e.g. Cauce, Paradise, Ginzler, Embry, Morgan, & Lohr, 2000; Milburn et al. 2008;). They have also experience deep-rooted attachment disruptions and traumatic circumstances (Stein, Milburn, Zane, & Rotheram-Borus, 2009; Tyler, 2006) that require empathic and therapeutic attunement.

This is a population in immense need of skilled clinicians and advocates. This study attempts to make a contribution to the existing literature on this topic by delving deeper into the layers of the sex lives of homeless young people and connecting them to other issues of clinical relevance. It is my hope that providers will be able to develop a more nuanced understanding of the intersections of sexuality and elements such as housing, mental and physical health, and race. Sexuality is an integral part of the puzzle of human experience, and clinicians would benefit greatly from considering its meaning and metaphor in the context of their therapeutic work with homeless youth.

CHAPTER 2

Literature Review

Introduction

For the purposes of my study, I will approach this literature review in four parts. I will begin by providing an overview of relevant literature about homeless youth and the issues they face in their daily lives. I will also review literature on public sex, meaning sex that is conducted in a public space or semi-public space, as youth often navigate these spaces for sexual activity. I use queer theory in order to frame my analysis of the lived experiences of sex and sexuality among homeless youth in Los Angeles. Lastly, I will situate the reader in the geographic context in which my participants reside—the streets of Los Angeles—in order to provide a multi-dimensional picture of my study.

When I use the term "queer" in this paper, I do it in two ways. Firstly, I use it as an umbrella term to encompass all different types of non-heteronormative sexual identities, including gay, lesbian, bisexual, and polyamorous. I also use it to suggest a collectivity among individuals who eschew heterocentric norms of community, desire, identity, and activity, and instead engage in a reconfiguration of these categories. I am aware that the term "queer" is loaded with debates over its exclusivity and use in academic circles that privilege white, middle class subjects. However, I feel that the term best applies to the participants of this study because of the changing ways in which they self-identify in terms of their sexuality. Also, many of them are engaging in many types of non-normative sexual practices and are involved in behaviors that do not align with their sexual identity in order to put a roof over their heads. In this paper, I may use "queer" and "LGBTQ" interchangeably to describe sexual identity. Several of the youth in this study self-identify as heterosexual, and though the term "queer" does not describe their

primary sexual identity, they often reject normative social structures, so the theoretical applications can still be useful in thinking about these youth.

Methodologically, I struggle with using a term that my participants may not use to describe themselves, and I am aware of this contradiction. Homeless youth occupy liminal spaces in cities and within social institutions, and by the nature of being homeless, are always redefining and repurposing social categories of identity, of home, of sexuality, of family, and of work. Homeless youth are also frequently in motion as they navigate the sociogeography of the urban environment. Queer theory, which arose as a critique of constructionist discourses of gender and sexuality is helpful in understanding how to further trouble these categories so that they are always open to an iterative process. Queer theory offers that identities are not fixed; rather, they exist to be critiqued and deconstructed, and even the notion of "identity" itself must be called into question (Butler, 1990; Halberstam, 2004). Like homeless youth themselves, queer theory is concerned with motion and movement and is an apt theoretical framework to use when considering this population.

When I discuss "public" sex, I am not speaking exclusively about sex that occurs outside, in an unprotected public space. I am using this term to look at a range of sexual activities that happen in different spaces, like shelters, drop-in centers, commercial venues like bars and clubs. I am, however, distinguishing "public sex" from "survival sex," which refers to "selling of sex to meet subsistence needs—exchange of sex for shelter, food, drugs, or money" (Greene et al., 1999). I do this in order to broaden the conceptualization of the sex lives of homeless youth, so that I do not place the reader at risk of making certain assumptions about my participants.

Defining Homeless Youth

There are currently between 1.8 and 2.1 million youth estimated to be homeless in the United States (California Research Bureau 2008, Ringwalt, Greene, Robertson, & McPheeters, 1998). Young people become homeless for many reasons, including leaving home because of impossible family environments, running to something outside of the home that they perceive as more exciting or adventurous, being forcibly expelled from the home by their families, or being "forsaken," meaning that the family and the system cannot support the young person. (Kurtz et al., 2000; Zide & Cherry 1992). When they leave home, youth often go to shelters, friends' houses, cars, vacant buildings, transitional housing, or institutions (Bernstein & Foster, 2008). Some young people do literally sleep on the street, as one might imagine when one thinks of what it means to be "homeless," but more often homeless youth stay with friends or family (aka "couch-surf"), sleep at a shelter, or engage in some type of survival sex or transactional work in exchange for housing. (Finkelstein, 2004; Greene et al., 1999; Thompson et al., 2001). The particular youth engaging in these types of behaviors largely depends on their age and gender, with younger females tending to utilize social services (shelters, drop-in centers) more frequently and older male youth spending more time on the streets (Kipke, Simon, Montgomery, Unger, & Iverson, 1997; Ringwalt et al., 1998; Toro, 2004). This data begs the question of how policy makers define homelessness among youth. The Runaway Homeless Youth Act defines a homeless young person as "not more than 21 years of age … for whom it is not possible to live in a safe environment with a relative and who have no other safe alternative living arrangement." (Runaway Homeless Youth Act, 2008). There are several other extant definitions that qualify what it means to be a homeless young person, including homeless youth as those lacking a stable or permanent address. The McKinney-Vento Homeless Assistance Act, which focuses on

education for homeless children, defines homeless young people as those who "lack a fixed, regular, and adequate nighttime residence." This definition does not exclude youth who are nested in family units, and while useful, does not pertain directly to my study as none of the youth interviewed were living with their families. This definition is useful as youth who are thusly defined become part of the system, and are bodies earmarked by the state for services. The California Research Bureau defines homeless youth as "young people sleeping in shelters, on the street, in parks, in cars and buildings, and "couch-surfers" who find provisional or intermittent shelter with friends or, less often, family members, but lack a permanent or stable home." (California Research Bureau 2008).

The CRB definition is the one that I will be using in my study as it best integrates the federal definitions with other pertinent concerns faced by my participants. It also best speaks to the experiences of my participants as they are not able to reside at home, lack a stable residence, and are not homeless with their families (although some have children).

Life on the streets

Many homeless young people are at risk for sexual exploitation, HIV/AIDS, substance abuse, interpersonal violence, and the general health hazards of being homeless (Arnold & Rotheram-Borus, 2009; Greene et al., 1999; Kipke, 1997). It is important to note that risk factors are not all that youth face when they are homeless; many of them are still in contact with family members, or peers from their home lives or school. Some of them still attend school, some have jobs or volunteer at agencies, and some are able to maintain protective social networks through use of the Internet. (California Research Bureau 2008; Rice, Milburn, & Rotheram-Borus, 2007; Rice et al., 2010b). Risk behaviors among youth are often associated with problematic peer groups and behaviors, as well as turbulent family environments, but in one study, 80% of young

people had never been arrested nor had interactions with the law (Rice et. al, 2007). These facts may be surprising to readers due to the powerful negative stereotypes of homeless young people, as wayward, lazy, disrespectful, and "lost causes." Many youth do in fact successfully transition into stable living situations, with homelessness often being more episodic than chronic (Milburn, Ayala, Rice, Batterham, & Rotheram-Borus, 2008; Ringwalt et al., 1998). A key determinant of transitioning out of homelessness is the use of social networks and "prosocial peers" who are able to provide emotional support and possibly a form of shelter for their friends (Milburn et al., 2008; Rice et al., 2007). It is also important to note that when youth spend time on the streets, they form subcultures and subgroups that often serve as containing environments and stand-in families for one another.

The stereotypes of homeless youth and the risks inherent in living on the streets allow for further invisibility of these young people. Current urban environments in the United States have become increasingly gentrified, and people who possess financial means are sticking evermore to their comfort zones and not venturing into other parts of the city. In Los Angeles, a city notorious for its homage to the automobile and its paltry public transportation system, it is easy for homeless young people to stay in their own enclave. Hollywood, California is where homeless young people tend to congregate. The neighborhood differs from "skid row," where the adult homeless population tends to congregate (Witkin, 2005). Most of the agencies and drop-in shelters that serve homeless youth are located in Hollywood.

California has also seen the worst budget cuts on record and is facing a major fiscal crisis, with a budget shortfall for 2012 of 21.3 billion dollars, the largest in the nation (Center on Budget and Policy Priorities, 2009). These budget cuts have been felt statewide in many arenas, but the social service sector has suffered drastically, particularly in regard to agencies serving

youth. The efficacy of social service agencies in working with young people is therefore stunted due to its funding issues (Brooks, Milburn, Rotheram-Borus & Witkin, 2004). While service networks are undeniably helpful to this population, there is no one-stop shop for all services that are needed. The fragmentation in services can contribute to feelings of disenfranchisement and more invisibility among runaway and homeless youth (Rice & Barman-Adhikari, 2010b). Additionally, homeless youth are least likely to ask for help through traditional pathways and often under-utilize available resources (Pollio, 2006). By and large, youth are deriving information about health behaviors from peers, television, or the Internet (Malow, Kershaw, Sipsma, Rosenberg & Devieux, 2007). The experiences of being homeless vary across the population, and their needs shift in regard to service provision. (Brooks et al., 2004; Thompson et al., 2001).

A disproportionate number of homeless young people identify as lesbian, gay, bisexual, questioning, queer, and/or transgender (LGBTQ), and face discrimination due to their sexual identities from family members, friends, and service providers (Desai, Schneir & Clark, 2010New York City's Homeless Report, 2005; Milburn et al., 2008; Rabinovitz et al., 2010). This population may fear further discrimination from service providers and so may avoid seeking help from local agencies (Milburn et al., 2008). Additionally, developing relationships with social workers and doctors can often be fraught with ambivalence for young people (Brooks et al., 2004; de Winter & Noom, 2003; Rice & Barman-Adhikiri, 2010;), as these service providers can be subconsciously viewed as stand-ins for parental figures and trigger many of the attachment issues facing the youth (Whit beck & Hoyt, 2000).

Irreconcilable family conflict is one of the main trajectories into homelessness (Rabinovitz et al., 2010; Stein et al., 2009; Tyler, 2006; Whitbeck, 2009), and youth may reenact

their feelings about their parents and early attachment experiences with service providers, friends, or other authority figures (Kurtz et al., 2000; Stein et al., 2009). A recent study about homeless youth in Los Angeles found that there are two key reasons why youth become homeless: family breakdown and system failure. 78% of the youth surveyed selected family as one of the primary reasons for leaving or being forced out of their home, including conflict, parental incapacity, physical or sexual abuse, turning eighteen years old, or foster care (Rabinovitz et al., 2010). These results support the literature findings that many young people cite family conflict as a primary reason for leaving home (Brooks et al., 2004; Finkelstein, 2004; Tyler, Whitbeck, Hoyt, & Yoder, 2000; Whitbeck & Hoyt, 2000). Some examples of youth leaving home include aging out of the foster care system, living with a parent who is misusing substances, being sexually or physically abused by a stepparent, or being kicked out because of sexuality issues (Rabinovitz et al., 2010; Tyler, 2006).

Sexual Identity, Sexual Practices, and Homelessness

Lesbian, gay, bisexual, and transgender youth (LGBTQ) are among the highest risk groups for HIV/AIDS, mental health issues, violence, and substance abuse (Savin-Williams & Cohen, 1996), regardless of housing status. In a study of youth exiting homelessness and discrimination, Milburn et al. (2008) state that being LGBTQ:

> leads to more discrimination than race/ ethnicity; that is, in many cases, a more visible social marker. Overt prejudice against LGB continues to be more socially acceptable than overt prejudice against other devalued social statuses such as ethnic and racial minorities (p. 8).

Many of the youth who become homeless are kicked out of their houses simply for being LGBTQ, or they are bullied at school, which may cause them to want to leave home (Bontempo & Augelli, 2002; Rabinovitz et al., 2010; Savin-Williams & Cohen, 2007). LGBTQ youth who

have left home are statistically more likely to: engage in survival sex, use cocaine, heroin, and/or methamphetamine, to have been victimized while homeless, and to have a history of sexual and/or physical abuse (Cochran et al., 2002; Rabinovitz et al., 2010). It is difficult to gain estimates of an exact number of LGBTQ homeless young people: current statistics range from 6-40% of the homeless population (Cochran et al., 2002; Rabinovitz et al., 2010). An exact count of LGBTQ homeless youth is difficult because youth may fear coming out to service providers or researchers. Also, the United States Census currently does not count LGBTQ people as a separate category, meaning that estimates of LGBTQ people all over the country are conservative. The lack of available data to capture the experiences of LGBTQ people show the levels of structural discrimination that LGBTQ young people face on a daily basis.

The fluidity that many young people experience with their sexual partners may not be adequately captured by the moniker "LGBTQ" and so youth may choose not to identify that way. Shelton (2008) posits that "queer young people continue to be a marginalized group in American society, denied public language with which to articulate their experiences, to name themselves, and to frame their needs" (p. 70), which makes serving this population even more difficult.

The intersections of sexuality with other identities and categories of risk like race, religion, gender, dies/ability, and health status cannot be overlooked. The prevalence of HIV positive young people is very high, and ranges from 2-11%, compared to 1.2% in the general population (Pfeifer & Oliver, 2002; Rice et al., 2010c). Ray (2006), as cited in Rice et al. (2010a) note that homeless youth are:

> more likely to engage in unsafe sexual and drug use practices that render them more vulnerable to HIV and other sexually transmitted diseases relative to their home based peers. It has been estimated that homeless youth are 7 times as likely to die from AIDS and 16 times as likely to be diagnosed with HIV as the general youth population (p. 6).

While HIV/AIDS is no longer thought of as a "gay disease," young people who are engaging in receptive anal sex and other high-risk behaviors are more likely to contract HIV. Many of the young people who contract HIV are gay, and many homeless young people, despite their sexual orientation, are forced to engage in sex work, or "survival sex" in order to obtain money for shelter, food, or other subsistence needs, putting them at further risk for HIV and STIs (Greene et al., 1999; Kipke, 1997). No matter how the youth describe their sexual identities, they may engage in sexual activity with people of many different genders and sexual identities for the purposes of their survival (for example, a young person who identifies as lesbian having sex with a male-identified person in order to buy food). Additionally, sexual activity with different partners is a large part of a young person's sexual identity, which tends to develop in adolescence and early adulthood (Subrahmanyam et al., 2004).

Despite this disquieting information, homeless queer young people have lives that are rich and complex. The social categories they occupy, "homeless," "young," "queer," are not necessarily static identities: rather they are fluid and evolving. One day, they will no longer be considered young; one day, they will hopefully no longer be homeless (Milburn et al., 2008). Their sense of themselves as sexual beings will continue to develop across their life courses. Youth who are forced to leave home are still in the throes of adolescent development, and their emergence of adulthood does not escape them. Sex and sexuality has particular import for adolescents because during this time, sexual maturation and peaked interest in sex is occurring (Subrahmanyam et al., 2004; Weinstein & Rosen, 2001). Adolescents spend more time talking with their peers about sex, telling jokes, and presumably, engaging in sexual activity (Subrahmanyam et al., 2004) than they did when they were children. Youth who are forced to

leave home inscribe themselves as sexual beings in the landscape of the cities, just as their peers who have stable housing situations are exploring their sexualities in more private situations.

Substance Abuse

In general, homeless youth report significantly higher rates of substance abuse when compared to their non-homeless peers (Cochran et al, 2002; Greene, Ennett, & Ringwalt, 1997; Rabinovitz et al., 2010). Substance use is often related to coping with the stressors of being homeless for young people (Bungay et al., 2006; Finkelstein, 2004). In particular, LGBT youth are more likely to suffer from addiction and substance abuse issues than their heterosexual peers (Cochran et al., 2002; Rabinovitz et al., 2010). Substance abuse issues within the family of origin also constitute one of the reasons why youth leave home, which can either be related to a parent's addiction and resultant family violence, or a young person's own addiction issues (Finkelstein, 2004; Robertson, Koegel, & Ferguson, 1990).

There is a strong correlation between crystal methamphetamine use among young gay men and HIV prevalence (Diaz, Heckert, & Sanchez, 2005; Halkitis, Shrem, & Martin, 2005; Semple, Patterson & Grant, 2002). Gay men often access this drug in club or party settings (Slavin, 2004) and taking the drug can lead to increased feelings of euphoria and greater sexual stamina, as well as impaired judgment (San Francisco AIDS Foundation, 2010). A 2004 study revealed that crystal meth users were twice as likely as non-users to engage in unprotected anal intercourse while under the influence (Centers for Disease Control, 2004). There are also extremely high comorbidity rates between crystal meth use, HIV transmission, and transmission of other STIs, including Hepatitis C, Gonorrhea, and Syphilis (CDC, 2004).

Methamphetamine use tends to be high among homeless or street involved youth, though little research has been done on this issue (Bungay, Malchy, Buxton, Johnson, MacPherson, &

Rosenfield, 2006; Rawson, Anglin, and Lin, 2002). Substance use is related to street-involvement, including staying awake to protect belongings, using drugs for a place to stay, and coping with strong emotions (Bungay et al., 2006). Other uses of methamphetamine among homeless youth may be related to sexual behavior, particularly if youth are engaging in exchange sex that involves substance use (Bungay et al., 2006). Young men who have sex with men were almost three times more likely to have used methamphetamine in the past year compared to other young men (Rabinovitz et al., 2010), suggesting a strong correlation between sexual identity, sexual activity, HIV transmission, and substance abuse.

Sexual Publics

Living and exploring sex and sexuality in the context of homelessness presents its own unique experiences and set of challenges. There is essentially no literature that focuses on the concept of adolescents navigating sexual publics, and due to increased gentrification in American cities and the shifting landscapes of how young people experience their sexualities, much of what was considered "public sex" has now shifted into the private realm. While homeless youth may be literally engaging in sex in public spaces, they may be more likely to engage in survival sex, or trade in sex for a place to stay, a hot meal, and a shower.

One way in which the literature on public sex may be relevant to the population of homeless youth is that sex in public has allowed for the emergence of queer subcultures and visibility around sexual identity and practices (Berlant & Warner, 1998; Warner, 2000; Wollin, 2009). Research on public sex sites suggests that the spaces are not only useful for sexual gratification, but also that these spaces provide sites of collectivity and community for those who use them (Wollin, 2009). Homeless youth may find a sense of community through the use of

public sex spaces, whether virtual or literal, and with the increased use of the Internet, homeless youth may find themselves connecting with others in unexpected ways.

"Public" sex has largely disappeared from streets and public spaces in the urban environment, with the advent of cruising for sex on the Internet and the gentrification of many American cities. Rice & Barman Adhikiri (2010b) found that a significant number of runaway homeless youth use the Internet to access information about sex, sexual health, HIV, and other health related issues, rather than using traditional help-seeking pathways and reaching out to service providers for this information. LGBTQ youth were much more likely to use the Internet for this purpose. Just as LGBTQ males are more likely to look for sexuality-related information online (Pascoe, 2009), they are also more likely to seek sex online (Rice, 2010). With the advent of sites like "Adam-for-Adam," Grindr," "Manhunt," and "Sugar Daddy," engaging in sex with strangers via the Internet is freely available. The likelihood that homeless youth who use these sites have sex in public places or engage in riskier behaviors than they would under different circumstances is unknown, but the options for sex are available just at the click of a finger (Pascoe, 2009). Adolescent sexuality itself is taboo, especially in light of the rise of abstinence only sex-education in schools over the past decade (Daillard, 2000). When adults think of homeless young people, generally the concern is not over the establishment of a healthy, pleasurable sexual life, but rather over their subsistence, and how to help them transition out of being homeless. Due to the presumption of risk around adolescent sexuality on the streets, the sex lives of homeless young people may largely go unnoticed by policymakers. This perpetuates a culture of silence and power. This silence constructs a risk environment that endorses behaviors that put young people at greater risk for HIV/AIDS, STIs, violence, substance abuse, and mental health issues. While service providers attempt to prevent risky sexual behaviors by

handing out condoms and encouraging young people to get tested, theorizing sexual publics does not enter in to the realm of service provision. The disappearance of public space in urban settings, particularly in a place like Los Angeles, raises the question of where homeless youth are actually engaging in sexual activity. Some of them are engaging in "survival sex," for money, but some are engaging in sexual activity for pleasure and for partnership. When sex and sexuality are such prominent features of adolescents' lives, it is unrealistic to expect that they will not engage in sexual activity simply because the luxury of "private" sex is not afforded them. The use of public space for sexual activity is considered to be "improper," but the fact that adolescents may be engaging in such behaviors demonstrates a subversiveness that is disruptive to social and geographic norms. Adolescents are not "supposed" to be having sex, let alone bringing sex into the public realm.

Geographies of Impossibility

In order to gain a multi-dimensional view of the lives of these homeless adolescents, literature on the geographic context in which they are nested is important. The City of Los Angeles is home to 3,849,378 people, and Los Angeles County is home to 9,848,011 (United States Census Bureau, 2010). Los Angeles has been marked as a city of neighborhoods, each one struggling to establish its own identity and unique flavor. A first-time visitor to Los Angeles might be struck by its balmy weather, a landscape that encompasses oceans and mountains all at once, and the reign of the automobile over the city. Historians and writers about Los Angeles have expressed ambivalence in their rendering of the city, as does Mike Davis (1992, p. 23) "Here is the ultimate city of capital, lustrous and superficial, negating every classical value of European urbanity." Davis argues that city building in Los Angeles has happened in a haphazard fashion that better benefits industry than public welfare. The history of the city, like many other

cities in the United States, is based upon a culture of racialization and domination over the indigenous groups who once occupied the city (Halle, 2003). As in other large cities, race and class are often factors in policy decisions, leading to social segregation and zoning (Davis, 1992; Hise, 2004). Los Angeles county, however, displays one of the largest income disparities of anywhere in the country. As of 2007, 1.47 million, or 15%, of the county's approximately 10.4 million residents are living in poverty, which means an annual income of $22,000 for a family of four (United Way, 2007). Close to 100,000 of those families are surviving on less than $10,000 a year (United Way, 2007). 30% of all full-time workers earn less than $25,000 per year (United Way, 2007). The percentages of county residents who live in poverty or are counted among the working poor markedly exceed the national averages (United Way, 2007). Additionally, Los Angeles has lost many jobs in the industries of radio, television, and film, and traditional manufacturing industries. High-school graduation rates are among the poorest in the country and show no sign of improvement (Rutten, 2010). Davis (1992, p. 6) calls Los Angeles "eutopic," meaning literally "no-place," and other writers speak of Los Angeles as a "border city" (Hise, 2004) made up of heterogeneous groups who create hybrid cultures. This is the world that homeless youth in my study navigate. These streets inform the realities of their daily lives and their efforts to create home in a city that is (literally) undergoing tectonic shifts.

Hollywood is a neighborhood in Los Angeles known mostly for its affiliation with the entertainment industry. Hollywood also has a hidden side, as it serves as an enclave for runaway and homeless youth. Most of the social service agencies for homeless and runaway youth in Los Angeles are located in Hollywood within a three-mile radius of one another, which means that homeless youth tend to congregate there. Homeless youth in Hollywood are more likely to be

English speaking, over 18, and male. About 40% of youth identify as LGBT (Rabinovitz et al.,

2010)

The neighborhood of Hollywood has a population of 85,489 (Los Angeles Department of

City Planning, 2008). It is one of the most densely populated in the city and county of Los

Angeles. It is a neighborhood that is highly diverse for both city and county, and has a median

household income of $33,694, low for both city and county (United States Census Bureau,

2000). 41,876 (53.8%) of residents are foreign born. Mexico (21.3%) and Guatemala (13.0%) are

the most common foreign places of birth (United States Census Bureau, 2000). It is worth noting

that the neighborhood of Hollywood Hills, just adjacent to Hollywood, has a median household

income of $69,277 (United States Census Bureau, 2000). The percentage of white people in

Hollywood Hills is high for the county at 74.1%, in contrast to 41% in Hollywood (United States

Census Bureau, 2000). Rabinovitz et al. (2010) note that in their study of 389 homeless youth in

Hollywood, African American youth were overrepresented, and Latino youth were

underrepresented. These demographics differ from the overall population of the neighborhood,

but are consistent with the demographics of the overall homeless population. Geographies of

segregation play an important role in the psychological rendering of the city and the ways in

which homeless youth are able to experience their worlds mirrored back to them. Hollywood can

serve as a container for homeless youth, with services in convenient location, but it also

demonstrates the ways in which homeless bodies are forced into smaller and smaller spaces

(Kawash, 1998) and how geographies of power are consistently reproduced.

Theoretical Perspectives

I am most concerned with outlining theoretical perspectives that focus on how the

subjectivities of homeless youth are embedded in specific social systems of power. Foucault

suggests that sexuality is part of the foundation of our human subjectivity, yet it is beyond our control, and can often control us. Sex embodies "a general and disquieting meaning that pervades our conduct and our existence, in spite of ourselves" (1978, p. 69). Sex and sexuality are also inseparable from extant power structures like family, institutions, and law. Foucault asserts that by whatever means, we must take steps to understand our sexuality and where it comes from, lest we submit to the terrifying destructive force of our sexuality (Foucault, 1978). I have chosen to focus on discourses around bodies and public social space because they have direct relevance to the lives of homeless youth. These discourses provide a unique understanding about the social world that homeless youth inhabit because they span avenues of inquiry that range from micro to macro processes, beginning with the body, moving through sex and sexuality, all the way up to institutional power. Connell (1995) states:

> bodies, which are certainly surfaces to be written on…are busy growing, aging, reproducing, getting sick, feeding well or badly, getting aroused/turned off, and so on. All these are social processes and all are hard to separate from sexual practice and sexual signification (p. 389).

Current theoretical perspectives on bodies and public space outline how the tightly controlled nature of these spaces make it increasingly impossible to engage in any type of "deviant" behavior in public (Deutsche, 1996; Kawash, 1998; Puwar, 2004). The increase of the number of police in cities across the world automatically create the threat of surveillance, and the arrest and incarceration rates for young, non-white, non-conforming (homeless) people is disproportionate to the rest of the population. In California alone, the general adult prison population has risen from 66,975 in 1987 to 171,444 in 2007 and the percentage of inmates of color has risen from 67.3% to 73.4% (California Department of Corrections, 2010). While the percentage of juvenile incarceration has declined over the past 15 years (California Department of Corrections 2010),

youth of color are 6.2 times more likely to be tried as adults and 7 times more likely to be sentenced to prison (Males & Macallair, 2000). The gentrification in the 1980s and 1990s of places like New York City's Times Square, and Hollywood Boulevard itself, once playgrounds for adult public sexual activity and now mega-malls, has seen a regression back to "family values" and "normalcy" (Warner, 2000; Wollin, 2009). Where do homeless, queer bodies belong in such environments?

Homeless individuals are always and already posited in direct opposition to a "public" that is essentially "spectral" but has material effects of exclusion, such as the policing and control of city parks, streets, transit stations, and public space in general (Kawash, 1998). Roslyn Deutsche (1996) argues that, "Protecting public space [is] equated with evicting homeless people from city parks" (1996, p. 276). According to these authors, homeless people are thus forced into physical, social, and psychological spaces that are ever smaller and more controlled. Additionally, certain bodies are assigned a type of (in)visibility based upon their privilege. Puwar (2004) argues that this invisibility is a "privileged position that is reserved for those who are not bedraggled by the humble shackles of nature, emotion, and in effect, the bodily, allowing them to escape into the higher realms of rationality and mind" (p. 57). Thus, the bodies of homeless youth are made highly visible and highly surveilled, as they are forced into ever tighter and smaller social spaces, with evermore limited opportunities for places to stay and services to access (Kawash, 1998). It would be impossible not to notice, in certain areas of Hollywood, young people spending time on the streets. Yet these young people occupy a certain typology of homeless youth—they are known as "gutter punks" or "street kids." They are more likely to be white, and have left home seeking adventure and thrill, in contrast to youth who have left home due to system failure or family conflict. Homeless youth often try to hide the fact of

their homelessness to avoid harassment from the police, yet their practices can often be highly visible, while their struggles and past histories remain largely invisible.

Paradoxically, homeless youth are also rendered invisible by the very fact that the "public" does not view them as having individual identities. What is visible about homeless youth, at least when they are squatting or dwelling on the street, is their homelessness, which is precisely what the public attempts not to see. Following Gayatri Gopinath (2003) and Andil Gosine (2008), homeless youth occupy "spaces of impossibility" in which they are seen and yet unseen: cast out of the world of "home," heteronormativity, and privacy, and into a spectral public. I argue that this space of impossibility and cultures of repression and power creates an environment into which risk is deeply embedded. As outlined above, the possibility for risky sexual behaviors, substance abuse and addiction, health hazards, and being a victim of physical violence are all part of the culture of being a homeless young person. It is important to consider the social and environmental nature of these conditions that create and reinforce hazardous situations and to understand that the behaviors in which youth engage are not solely predicated on individual choice and motivations.

This "space of impossibility" has its own artifacts of cultural and material production—just because it is an impossible space does not signify it as a space devoid of life. Through looking at the navigation of sex and sexuality on the streets among homeless (queer) youth, I intend to unpack some of the material realities of everyday life among this population, with the hope that a greater understanding of these processes will beget policy and service efforts that directly benefit homeless youth.

This study will make a contribution to the existing studies of homeless youth by exploring the navigation of sex and sexuality in their worlds. The extant qualitative literature on

this topic does not delve in to the material processes of sex and the ways that it interfaces with questions about identity, home, family, and the physical body. I intend to give voice to the unique challenges and circumstances faced by this population as they make meaning of their sexualities on the streets of Los Angeles in order to contribute to the discourses on sexuality among this population.

CHAPTER 3

Methodology

Project Overview

The purpose of this study is to explore how homeless youth in Los Angeles make meaning of their sexualities while living on the streets. I am using qualitative interview data and analyzing the data using thematic analysis. The data for this study consists of seventeen interviews with youth ages 18-25. Researchers conducted interviews as part of a peer-led HIV prevention outreach program in Hollywood, California, which took place in the summer of 2009. The project was undertaken with IRB consent from the University of California, Los Angeles and the University of Southern California. Dr. Eric Rice, the principal investigator, led the four-person research team (of which I was not a part). The project entitled "Have You Heard," was named by the youth involved in the creation and dissemination of the HIV prevention videos studied in the research. The project was funded by a grant from the National Institute of Mental Health (Grant K01MH080605).

The objective of the project was to "design and assess the acceptability of a youth-led, social networking HIV prevention intervention online for homeless youth" (Rice et al., 2010). The intervention involved training youth as peer leaders to work with their homeless peers in the creation of digital media around HIV prevention and education. The digital media included videos that were posted on MySpace and YouTube, as well as other viral marketing. The peer leaders and the youth directly involved in the project also recruited youth online through MySpace and Facebook communities to discuss the digital media disseminated. Studies have shown that HIV prevention efforts for runaway and homeless young people tend to be costly,

hence the piloting of an internet-based HIV prevention campaign (Arnold & Rotheram-Borus, 2009; Rice et. al, 2010a).

   All peer leaders were recruited at a single community-based drop in agency serving homeless youth ages 13 to 25 in Hollywood, California (Rice et al., 2010a). Any youth receiving services was eligible to participate. Peer leaders were recruited through referrals from agency staff, based on their perception of youth who they thought had potential to be positive role models, and who would be interested in a HIV prevention program involving digital media production and online dissemination (Rice et al., 2010a). All peer leaders were screened for interest and consented privately. Peer leaders were compensated $8 for every hour of training or participation, $80 maximum/week, plus a weekly bus pass ($17 value). The project began with seven peer leaders, but one went to jail during the course of the project and thus was unable to participate (Rice et al., 2010). Three peer leaders were African American, two were White, and one was Native American. Two Peer Leaders self-identified as men who have sex with men and two peer leaders self-identified as lesbian. The remaining peer leaders self-identified as heterosexual. One was HIV-positive. All were between 18 and 25 years old (Rice et. al, 2010a).

   163 total youth participated in the project. 52 participated in face-to-face workshops at the agency, and 103 participated online. The "face-to-face" youth were invited by peer leaders to participate in workshops at the agency. A member of the research team obtained informed assent for minors and a waiver of parental permission from university IRB. At least two researchers co-facilitated trainings and workshops along with the youth.

   The research team conducted two sets of semi-structured interviews and one set of peer-led interviews with the peer leaders. In the first set of interviews, conducted after the first 30 days of the intervention, youth were asked about their experiences learning about sex and

sexuality, and answered questions like "how did you first learn about sex?" and "What were representations in the media that made you feel good, strong healthy about sex and relationships?" The researchers conducted this set of interviews in order to gain an understanding of young peoples' experiences with sex education and their experiences providing peer sexual health education themselves. After the first five weeks of the project, "testimonial videos" were made with the peer leaders, which consisted of the youth interviewing one another about why they were involved in the program and why they continued to struggle with issues around HIV prevention. One peer leader, a heterosexual African American female, was not available to participate in the testimonial interview. (Rice et al., 2010a)

In the second set of interviews, at the end of the 11 weeks, researchers asked the peer leaders about their experiences with the project. The researchers asked them questions like "what was your favorite thing about the work this summer?" and "if you were to do this again, what would you have done differently?" These interviews were conceptualized as "exit interviews" and served as a debriefing tool for the research team in order to evaluate the success of the intervention. Both sets of interviews were semi-structured, and each lasted about between one and two hours. The interviews were filmed and then transcribed into word documents (Rice et al., 2010a).

Data Management and Analysis

For the purposes of my study, I will be using all of the interviews and testimonials obtained during the study. This is a total of seventeen interviews; six of the participants were interviewed twice and five interviewed three times. This small number of interviews provides a glimpse into a specific group of youth, and their lived experiences of sex and sexuality on the streets. Like most qualitative data, the results of the study are not generalizable to a larger

population, but instead offer "thick description" about the experiences of this small sample of young people (Geertz, 1973). Many homeless youth in Los Angeles are forced to leave their parents' homes because of conflict or abuse over issues of sexuality, be they heterosexual or not. This begs the question of how homeless young people are navigating their sexuality in the context of a conflict-ridden family environment and the culture of risk in which young people are involved when they become homeless. The number of participants is small, but they are interviewed multiple times. This perspective allows for richer details among my participants than if they were only interviewed once, which will be helpful for my analysis.

I am working with Dr. Eric Rice and his colleague at the University of Southern California, Dr. Julie Cederbaum, to code the data. All researchers read two transcripts and then individually coded them. Then the team met and looked at which particular themes overlapped from the data and which differed. Based on those results, the three of us developed a codebook with themes we felt were important to both of these projects. There are many reasons to use a codebook, one being that "[t]he codebook functions as a frame or boundary that the analyst constructs in order to systematically map the informational terrain of the text." (McQueen, McLellan, Kay & Milstein, 1996, p. 3). Major themes in the data included: sexual identity, sexual activity, HIV/STI prevention, body image, violence, sex and drugs, family norms, and self efficacy. I initially coded the data by hand, and then used the qualitative software program, Atlas TI, in order to refine and organize the data. Since coding is an iterative and subjective process, our research team will engage in discussion about our rationale for making certain analytic choices. McQueen and colleagues (1996) argue that the research questions are clearly delineated through the use of a codebook, and the analysts' biases are brought forth in plain sight. A copy of the codebook is attached to this document.

I am conducting a descriptive qualitative study and undertaking thematic analysis of the data. Thematic analysis provides an open and theoretically flexible manner of understanding data (Braun & Clarke, 2006). I am using queer theory as my predominant theoretical framework, and this method is congruent with my interdisciplinary approach. Thematic analysis showcases the rich details of the data and also allows the researcher to make meaning of the process (Braun & Clarke, 2006; Denzin & Lincoln, 1998).

Since I am engaging in secondary data analysis with a relatively small sample, I do not possess ethnographic details about what working with this population might be like. Even though I would not use my own sensory details and countertransference in data analysis, I cannot ignore my positionality. To that end, I am a white, queer, middle-class woman who has never been homeless, engaged in sex-work, or been at high-risk for HIV. However, I do understand the struggle of navigating a queer sexuality in a heterosexist system that privileges normativity and conformativity. I say this not to equate my own life with that of the participants, but to inform the reader of my perspective.

CHAPTER 4

Findings

Five major themes occurred most frequently in the data through the process of open-ended coding. They were: family norms, sexual identity, sexual activity, HIV and STI prevention, and substance abuse consequences. I then identified several sub-themes for each major theme, and I began the process of "focused coding," (Charnaz, 1995, as cited in Tyler, 2006) which brought excerpts and quotations from each interview together according to theme. The sub-themes that correlated with family norms were: judgment about a young person's sexuality and physical, sexual, or emotional abuse; the sub-themes for sexual identity were the young people's relationship to their peer group, processing their sexual identity, and gender identity; the sub-themes for sexual activity were partnering and intersections with sexual identity; the sub-themes for HIV and STI prevention were condom use and prevention and lack of awareness about risk; and the sub-themes for substance abuse consequences were using drugs for survival and safer sex and drug use. This section will outline the themes in detail and give voice to the experiences of my participants.

Family Norms

Judgment about a young person's sexuality

Every family has norms, spoken or unspoken, about sexuality. Young people are privy to the way that their family feels about sexuality, and in this population of young people, conflict over sexuality and sexual identity contributed to a young person's homelessness. All of the youth that identified as LGBTQ experienced homophobia on the part of their family members. One respondent explained: "My mom came to me and asked me like, "Do you like girls?" and I was like, "Yeah," and she was like, "Well I don't want a dike [sic] living in my house." (Misty).

Another spoke of his experience with his parents: "I moved out like to the day on my eighteenth birthday. [Sexual identity] actually had a lot to do with my leaving home." (Phillip). Heterosexual youth also experienced judgment around sexuality: "I was sexually active and my family's a very complicated family and I had a lot of problems because of that. 'Cause then after I guess from then on, my family was like "[Respondent's] promiscuous" and blah, blah." (Gwen). Parental or family judgment about youths' sexuality caused much conflict in the family environment, which was one of the reasons for their homelessness. Some of the respondents' parents threw them out of the house because of their sexual identity and some chose to leave of their own volition. The entire sample reported that in their families, there was a great deal of repression around sex and sexuality. One respondent noted, "my grandma's really religious, so it's a forbidden type thing. It's completely censored in my family." (Misty). Phillip grew up with a father who was a "homophobic Mormon police officer." It was a norm in his family not to discuss sexuality in any dimension, let alone be accepted for being gay.

Child Maltreatment

Many of the youth in this study experienced some form of child abuse. These findings are consistent with the literature on what homeless youth experience prior to leaving home. More of the young people reported experiencing emotional or verbal abuse rather than physical abuse. One respondent reported:

> Say for instance I peed on my cover, she would put my cover outside on the porch [so everyone could see]. She would do stupid shit like that it's just like, "You don't know what you're doing to me on the inside. You don't know how you're messing me up emotionally," and she just did not care, she didn't.

Another discussed being victimized by multiple family members, showing that leaving one abusive situation does not mean other situations will be better:

> My father beat me every day for the three years I lived with him. And then I lived with my grandma and with her doing what she was doing, it was just another form of abuse, you know? So it was just like I kept going from different bad situations as I was growing up.

Experiences of abuse in childhood can lead to many mental health issues in adulthood, like self-esteem issues, post-traumatic stress disorder, depression, and anxiety. Gwen candidly discussed the impact of the abuse she suffered in childhood on her adult life, "I have a lot of relationship and sexual stigmatisms that I'm trying to recover from in my life because I realize I'm an adult and I can't let what has happened to me as a child make me decide on things about my future." Tyler (2006) notes that physical abuse may become a pattern for these young people and increase their chances of becoming violent or associating with others who are violent. Homeless youth who have histories of sexual abuse are more likely to be re-victimized while on the streets, and may also engage in other behaviors like exchange sex or substance abuse (Melander & Tyler, 2010). Continued exposure to abuse has a negative impact on the mental health of these adolescents and can cause deep-seated trauma that persists into adulthood. Parental and/or caretaker judgment about sexuality creates a conflict-ridden environment where it is not safe for a young person to explore his or her sexuality. It can be correlated with abuse, and both of these factors contribute to young people becoming homeless.

Sexual Activity

Partnering

The young people in this sample negotiated finding sexual partners in multiple ways. Their modes of partnering were related to their sexual identities, attachment issues, and the practice of safer sex. They were also related to their early histories of sexual activity. For example, "I actually started messing around with my brother's best friend…he taught me having

a relationship or a boyfriend was actually meeting up, having sex, and leaving. That's pretty much what he taught me" (Phillip). Many of the youth described themselves as promiscuous, regardless of their sexual identities. For example, "Out of the hundred people, hundreds of people I've slept with, I'm not joking…Hundreds. I've only loved maybe, let's see, maybe about five." Additionally, partnering with multiple people was related to negotiating using protection when they engaged in sexual activity. "I got really attached to the people that I was promiscuous with. It ended into relationships and thus ending up to having unprotected sex a lot" (Grizz). Attachment issues were a strong theme in how the youth chose sexual partners. Especially for LGBTQ adolescents, finding sexual partners was often bound up with a sexual experience that was related to sex only. Phillip said, "I would have sex with them and then as soon as they got attached, I would drop them."

Intersections with sexual identity

For many of the youth in this study, sexual activity intersects with how they articulate their sexual identities. While this does not differ from a general developmental trajectory of sexual development, the LGBTQ youth in particular experienced having sexual partners who ran the gamut in terms of their sexual and gender identities. For example, "I've had sex with guys. I mean like a lot of studs will lie and say that they've never been with a man. They've always been on girls. No, it's not the case." (Ashlee). Sexual identity, sexual activity, and gender identity are closely related categories. Due to social norms around sexuality that often force people into heterosexual partnerships, and the homophobia and discrimination that many of these youth have faced related to being LGBTQ, a number of them have had sexual or emotional relationships with opposite-sex partners. Misty described the process she went through:

> I didn't want to just lose my virginity to anybody so and I was a lesbian so I was like really trying not to talk to guys but when you're pretty or like, when you have like assets that they like, they're gonna be on you like really tough until they figure that they're gonna get what they want.

This process is further complicated by the fact that some of the young people were engaging in survival sex or exchange sex, regardless of their sexual orientation or the gender identity of their partner. Rabinovitz et al. (2010) note that LGBTQ adolescents are much more likely to participate in exchange sex than their heterosexual counterparts. This may be related to issues of self-esteem and self-worth related to growing up in a homophobic and heterocentric culture. It can also create confusion about sexual identity. Misty said, "I don't even like telling people that I was a prostitute. It's like it doesn't even look right like I'm messing with girls and I was a prostitute?" As outlined above, the homophobia that LGBTQ homeless youth experience within their families and the subsequent relational trauma of these dynamics can lead to extremely low self-esteem and reckless behaviors. It also makes the process of figuring out their sexual identity and finding fulfilling partners more difficult for LGBTQ youth because of the deep discrimination and attachment issues they have faced in their lives.

Sexual Identity

Sexual identity represents a separate category in this study because of the ways that the youth were able to articulate their sexual identities as somewhat separate from sexual activity and gender identity. Uncoupling the categories of sexual identity, sexual activity, and gender identity is important because it gives more depth and volume to the meaning young people assign to their sexuality.

Processing Sexual Identity

Like most individuals, the youth in this study went through a process of figuring out their sexual identities.   For LGBTQ youth, this process seemed to be more involved than for the heterosexual young people because of the discrimination that they faced.   Phillip said, "I would sneak into the gay chat rooms and stuff like that and email through those."   Some youth knew that they were queer while living at home, and others became more involved in the gay scene upon leaving home. Jason became homeless when he aged out of the foster-care system. He had lived in small towns until he moved to Los Angeles, and talked about the impact that moving to the city had on his sexual identity. He said, "that's where I really fell into like the whole gay kind of thing and the whole… And I started doing some stuff they did too and I would go hang out…" Although Jason does not say this explicitly, he is referring to alcohol and drug use and exchange sex. For Jason, coming into contact with a larger LGBTQ community while being homeless led to some risky behaviors like substance abuse, exchange sex, and unprotected sex, but also helped to establish a network of peers who identified similarly.

Relationship to Peer Group

 The peer group in adolescence is given much importance by youth, particularly if they are homeless and do not have contact with their families of origin (Subrahmanyam et al., 2004; Whitbeck & Hoyt, 1999). Many of the youth surveyed in this study reported positive reactions from their peers about their sexuality. Of his peers in his home community, Jason reported, "they just didn't really like… I guess they were more accepting to like wanting to know who like my personality and stuff and getting to know me rather than, "Well, I want to know you 'cause you're gay." Heterosexual youth who participated in the project were also supportive of their LGBTQ counterparts. Gwen talked about some friends' reactions to another participant in the

project. "So they're like, she's a lesbian eh.   I'll be like I don't care. I can't hate no people who appreciate me in return." While LGBTQ youth are extremely likely to experience discrimination based on their sexuality from their peer group (Milburn et al., 2008), this sample did not reflect that, suggesting a possibility that this particular group of young people provided a strong basis for social support regardless of sexual identity.

Gender Identity.

Gender identity was not directly addressed in this study, and only one participant, Ashlee, spoke about her gender identity as somewhat separate from her sexual identity. None of the youth in this study identified as gender non-conforming or transgender. Gender non-conforming and transgender youth exist within the homeless youth population and are extremely vulnerable (Rabinovitz, 2010). It is important to give voice to these young people as they are so often silenced and marginalized, even when they are not homeless (Grossman & D'Augielli, 2006; Ryan & Rivers, 2003). Ashlee discussed her sexual identity and her gender identity and how they intersect, "I was always picking boy clothes. But I thought it was more so like a tomboy phase 'cause I like to play sports and stuff and I hung out with a lot of guys. But I had always looked at girls so… And boys never really attracted me." Ashlee identified herself as a "stud," a term that refers to a more "masculine," female-bodied person who generally has sexual relationships with other female-bodied people.

Other participants talked about how gender relates to their own desires and identities. Choosing a partner was one example of how gender identity manifested in the lives of the young people. "The first time I ever seen a girl that was like just like a boy was when I was in high school… I was like, 'What are you actually? You're confusing me'… then I was like, 'Damn, she looks so cute,' so then I was just like, 'Oh, I have to find a girlfriend now.'" (Misty).   In the

above quotation, Misty articulates the ways in which the gender identity of her partner relates to her sexual desire, her sexual identity, and her own gender identity. Although she does not explicitly state this, the first time she ever considered that she might be attracted to female-bodied people was when she saw a girl "that was just like a boy." Discourses of gender identity, sexual activity, and sexual identity are all crucial, interrelated parts of how the young people conceive of their sexualities and are important to consider in congruence with one another. There are many gender-non-conforming youth who end up homeless and they are largely underrepresented, even within the LGBTQ community. There is a great need for social workers to reach out to this population and to broaden their understanding of gender identity in a sensitive and non-judgmental way.

HIV& STI Prevention

A key dimension of this study focused on HIV prevention and sexual health. There were many themes that arose in this arena.

Lack of awareness about risk.

Due to the evolving nature of HIV treatment and the increasing manageability of the disease, the awareness of risk is not as great among younger people (citation). All of the participants surveyed in this project worked as HIV prevention advocates, and while they all, for the most part, were practicing safer sex, they expressed dismay at the fact that their peers were not. They highlighted the frustration that they felt with the general lack of concern over HIV and STI transmission among their peers. For example, one participant said about the project, " They felt like that wasn't anything they needed to be talking about cause they didn't feel like they were at risk." HIV/STI prevention is also an important dimension of how the young people are navigating their sexualities as it is crucial to engaging in sexual activity. One participant offered,

"I feel like everybody needs to know the risk that they're taking when they have unprotected sex. I don't think anybody ever realizes how serious it is even if it is something that's curable." This is particularly salient for homeless youth if they are engaging in exchange sex and/or have multiple partners.

Condom use and prevention.

The peer educators also participated in knowledge diffusion with their friends and others in their communities and engaged in formal and informal outreach Jason articulated his methods: I always say, "Well I hope you're using a condom and if it hurts that bad make sure you use lube too so that way it doesn't hurt and stuff and if you can't handle it then don't do it 'cause you can also damage your body too that way." The youth were very sex-positive in their approach to talking about sex with their peers and promoted safer sex in a way that spoke to the realities of their lives. It also helped the peer educators to engage in their own safer-sex practices, which promoted a sense of self-efficacy. Phillip reported the following interaction: "One of my other friends, I saw him in the streets and he came up to me and asked me if I had a condom and I said, 'Yes, I do have a condom,' so that was like really awesome…I'm not a really good outreach worker if I don't use condoms myself." One of the participants was HIV positive at the time of the program and was very open about his experience. He said,

> It [HIV] isolates, it isolates you and um… it's just very, it's very hard so basically, I wouldn't want this life for anybody that doesn't have HIV so if they, if I could get them to start wrapping it up or not sharing needles and all this stuff, it would actually be uh… the struggle that I'm dealing with now.

Having an HIV positive participant in the project changed the nature of the study in the sense the other participants were able to befriend someone with HIV and understand the challenges and difficulties of living with the disease while also being homeless. Given the fact that the

participants identified the lack of awareness about risk for HIV and other STIs, an HIV positive peer brought the reality of HIV home for the participants in the project.

Absence of discourse around safer sex in media.

The youth identified feeling frustrated with the lack of discussion about safer sex in the general media. Many of them identified television and movies as places where they received messages about sex and sexuality, and they felt like they were not taught about how to have safer sex through these channels. For example, one participant said, "you do see a lot of sexual activity on T.V. and stuff and behaviors and encounters and stuff but rarely do you see stuff saying to protect yourself." The lack of candid and supportive discussion about sexuality from their peers or family members, and the absence of safer sex messages in their communities or via the media means that the youth do not see their sex lives reflected outside of themselves. Ashlee articulated the intersections between sexuality, media and the lack of discussion about safer sex:

> Usually in movies or something they're just hopping right into it. Nobody is putting anything on. Nowadays with cable and everything being more X-rated, they have certain lesbian movies and homosexual movies I guess with men. But they're not teaching you anything. They're just showing you how to do it. Basically that's all they're advertising is the act and the motions that take place. Nothing about safety. Nothing about anything that's meaningful.

The HIV prevention education project was extremely meaningful for many of the youth, as it may have been the first time that many of them were able to engage with the realities of navigating safer sex and educating their peers about it. They were able to create positive social media in which they had control over how to talk about safer sex and how to reach a wider audience, which was very empowering for many of them.

Substance Abuse

Substance abuse was intimately connected to issues of sexuality and HIV prevention. Not all of the participants used or had used substances, but for some of them, substance abuse and the consequences of using were intimate parts of their lives. Phillip offered, "out of like I'd say the three or four years I was homeless, I would go from place to place just using sex, using meth as a place to have a shower, sometimes food or places to just accidentally crash out." Sex for the purposes of housing or drug exchange was an extremely common feature in this population, as many of the participants were engaging in these types of behaviors, whether or not they conceptualized it in this way.

Safer Sex and Drug Use.

Using drugs, especially crystal meth, had a direct negative impact on whether or not the participants engaged in safer sex practices. Consistent with the literature on this subject, (Kipke et al., 1997; Milburn et al., 2006; Rice, 2010) it was very common for the participants not to use condoms when they had sex. For example, "I didn't really focus on condom usage that much 'cause I was so into getting my dope and stuff." (Jason). The participants also talked about the challenges of trying to undertake HIV prevention education with a substance using population. "It's not gonna stick in their head. As soon as their mind gets going as far as getting high, they either want the dick in their ass, they either wanna get off, or yeah, they just wanna get their rocks off." (Phillip). These concerns were articulated more among the gay male participants, demonstrating further the complex issues that queer homeless youth are navigating.

All of the young people interviewed spoke about a diverse set of circumstances and challenges related to sexuality. There are many issues that these participants are facing in their

lives on the streets, and they were able to articulate their experiences with wisdom and a desire to

see change occur.

CHAPTER 4

Discussion

This exploratory study focused on how youth make meaning of their sexualities while living on the streets. This question paved the way for many more questions, and the non-linear nature of my research question lead to non-linear answers. One of the difficulties in undertaking secondary data analysis is that as a researcher, I tailored my questions to fit the data, and not the other way around. I therefore was not able to ask questions that arose for me while I was working with the data, and I would have found it helpful to interview participants myself, were I able to do so. There were many important issues upon which to focus in the rendering of this paper, and the entire set of data was rich and detailed. Not all of the themes focused on issues of sexuality, and there were many directions in which to take this project. Given that the project was an HIV prevention project, sexuality was a recurring theme in the data, and came up repeatedly. It would have been both impossible and imprudent to ignore its meaning in the lives of the participants in this study.

My results necessitate taking an intersectional approach to understanding sexuality among homeless youth. All of the issues the youth discussed intersect with one another and demonstrate how sexuality is a driving dynamic in the sexual lives of young people. It is difficult to parse these themes out from one another, showing that sexuality acted as a thread that linked many of the overarching concepts, and also intertwined with issues of race, class, socioeconomic status, and gender. My results demonstrate that family norms about sexuality have an impact on how a homeless young person conceives of his/her sexual identity, which has an impact on their sexual activity, and shapes the behaviors in which they engage on the streets. For example, Phillip, one of the participants, is an HIV positive, gay man in his early 20s. His

Mormon upbringing created an environment where it was not safe for him to be out at home. He moved out of his house as a very young person, and cited sexuality as one of the major reasons why he left. In order to survive on the streets, he started trading sex and drugs for shelter, and subsequently became addicted to methamphetamine and contracted HIV. This is a simplistic overview of Phillip's life on the street, and to identify any one factor as contributory is a problematic oversimplification. However, the dynamics at work suggest that sexuality played a large part in how Phillip navigated his homelessness. External stressors like a homophobic family, low socio-economic status, poor social support, and homelessness caused Phillip to make risky choices. Although he was the person making decisions to engage in such behaviors, I argue that he barely had any agency: He was a person situated in an environment of risk. To return to Kawash's (1998) rendering of the homeless body, Phillip was forced into a "space of exclusion," where the physical, material, and emotional spaces for existence and subsistence became smaller and smaller. In his interviews, Phillip talked about his difficulties with accessing comprehensive health and mental health services for his HIV treatment, as well as general stressors like poverty and family issues. He discussed spending time in a psychiatric hospital, his struggles with addiction, interactions with the police and other types of institutional violence. Kawash argues that the ultimate aim of the "homeless wars" is to exert such pressures against the homeless body that will reduce it to nothing, to squeeze it until it is so small that it disappears, such that the circle of the social will again appear closed. Phillip's life disrupts the social order in its deviance. His behavior can be read as his resistance to his available (physical, mental, and emotional) space becoming smaller. There is almost nowhere in the urban landscape where Phillip can be young, queer, poor, and HIV positive, showing how institutional forces are encroaching upon him.

Future Research

There are many implications for future research that have arisen from this study. One is to expand the number of participants in the study, as the overall number is very small. Doing so would gain a more comprehensive picture of the meaning of sexuality among a broader cross-section of homeless adolescents. It would be important to expand an understanding of what sexuality means to this population. It might also be helpful to add some survey data in order to garner some numbers about what kinds of behaviors, specifically, homeless youth are engaging in. Since my study relied on secondary data analysis, I might also broaden the scope of the questions that researchers asked youth to ask them more directly about how they understand their sexualities. It may also be helpful to undertake comparative analysis of LGBTQ homeless adolescents and their heterosexual (or even LGBTQ housed) counterparts.

I am curious about how youth perceive the role of social workers in relation to matters of sexuality. Another direction for future research might be to interview clinicians themselves about their knowledge in this area and perhaps pilot some interventions that help to expand clinicians' understanding of these issues. Many questions have arisen from this study; many more than have been answered, but homeless youth belong to a group that greatly needs researchers, clinicians, and advocates, and it is my sincere hope that this study will aid in the service of this population.

Implications for Clinical Practice

It is crucial that clinicians working with this population take a holistic approach to understanding sexuality, rather than treating these issues as though they exist in silos. While homeless youth are a population at risk for sexual health, mental health, and physical health issues, in addition to being the victims of violence, clinicians who focus on the intersecting

dynamics of sexuality may help to alleviate some of that risk. It is important for clinicians to focus on the resilience and strength that live inside of homeless youth; their mere ability to survive on the streets is laudable, and it would be very beneficial for clinicians to focus on a strengths-based perspective when working with this group.

The challenges of undertaking clinical work with this population are legion. Homeless youth, by their very nature, are a transient population. They may not have resources to come to an organization to receive services. They may be involved with the criminal justice system or be incarcerated. They may be involved in using substances, or all of the above, in concert with one another. Homeless youth also have suffered many traumatic experiences and may find it extremely difficult to form attachments with social workers and other service providers. Skilled clinicians can prove invaluable for this population. By building rapport and relationships with homeless youth, social workers can encourage them to foster healthier kinds of attachments. They can ultimately help them to transition into more permanent living situations and out of situations in which bodily risk and victimization is a regular part of their lives. This may require thinking outside of the box on the part of social workers, and conducting the work where it is most needed: stepping outside of offices and agencies and moving the work onto streets, drop-in centers, shelters, and other places where homeless youth might congregate. Breaking down those barriers is representative of extending a hand to homeless youth on their own turf, and may be immensely beneficial in building a more trusting relationship. A clinician who has a comprehensive understanding of the deep dynamics of sexuality and how it intersects with life on the streets can help a homeless young person to restructure new meanings of "home." It may mean the difference between a trajectory into chronic homelessness for a young person, and a journey to safety and self-acceptance.

Homing

Fortier (2003) discusses how the process of coming out as queer means leaving the childhood home and relocating oneself in another "home." She talks about how the queer person is always already displaced and estranged in the heterocentric home of origin. Other queer theorists talk about how absence and loss is located within the home (Eng, 1997), and it is not necessary to leave in order to feel that loss. For these theorists, home is not necessarily a place of comfort, but a place that is embedded with its own distinct power dynamics where not everyone is equal. Fortier looks at ways in which the notion of home can be reconstituted for queer people through the process of migration, movement, and assemblage. She says, "[r]ather than isolated sites of (un)belonging, "homes" are locations criss-crossed by a variety of forces the [subjects] had to negotiate over and over." (Fortier, 2003, p. 122). Reproducing home is tied to an identity of place, but in its reconstruction, forces the person to remake their ideals, their identities, and their associations with home.

The homeless youth whose voices are represented in this study are constantly re-making and re-membering home. They are "homing," which Fortier sees as a desire to return home by re-membering it differently. They are creating home through their literal dwelling sites, through the connections with peers on the street or peers from their "home communities," through hanging out in drop-in centers or in shelters. One of the ways in which they create home is through the expression of their sexuality, as they may find a literal home in their sexual partners, or may join together with young people who share their sexual identities and build a community. Two of the participants, Ashlee, and Misty, were partners, and they found a sense of security, home, and belonging in one another. I argue that their participation in the Have You Heard project was also a type of "homing," through the community and sense of purpose that the

intervention provided. The youth in this study, by living on the terrain of the street, by navigating sexuality in public, by dealing with health and mental health issues, are all trying to assemble a different meaning of home from where they came—a home that supports an evolving sense of self and community.

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Appendix A: Sexual Health Interview Guide

Intro: we are trying to get at where you all got your sex education. And if you feel like it was effective to meet your needs later in life. Did you get the support, knowledge and mentorship you needed through your experiences with health education?

- How did you first learn about sex? What about sexuality?
- How was this a part of your family conversations?
- How was this a part of your peer conversations? What about with siblings, cousins, friends of different ages than you?
- How did you see sex on TV and in the Movies? What forms of sexual identity and expression did you see? Print media? Newspapers?
- What were representations in the popular media that felt positive and mentoring?
- What were representations in the popular media that made you feel bad about sex or your future relationships? What were representations in the media that made you feel good, strong healthy about sex and relationships?
- Is there anything else that you want to add about your sexual experiences and how you felt about your sex education?
- What about with experiences with doctors and health care professionals? Did you learn anything of value? Or a negative experience?
- How do you think YOUR POINT OF VIEW as a writer, student, kid was represented on the popular media? Did you ever call a call-in show or write a letter to an advice column? Did you ever see representations of your sexuality on the kinds of shows you watched as a kid? Teenager? Music and music videos? Did you ever share/publish writing or art that you yourself created about Love, Sex or sexual health (or creative expression on other topics)?
- What do you remember about your experiences in middle school and High School about sex, sexuality? Sex ed class?
- Describe the school you were in when you started sex ed. What was social life there? What were the norms about sex there?
- What about a little later as a young adult? Where did new knowledge about sex, sexuality and health come from? Any important mentors, friends, or teachers you want to mention?
- What did you learn about sex in other places, cultures or groups of people: Images around sex and sexuality in other cultures; broadcast media about cultures other than your own.

Appendix B: Exit Interview Guide

- What was your overall impression of the work we did this summer?
- What was the most fun/favorite thing you did this summer in the program?
- What was the most inspiring thing about the summer for you?
- What do you think was successful/made the program work well this summer?
- What was the most frustrating or hardest thing about the program?
- What was your experience like with the other clients at MFP?
- What did important people in your life think about you participating in the program?
- Before the program, who were the people that you were spending time with?
- What would you have been doing this summer if you were not in the program?
- Did you make any new friends this summer in the program?
- Do you think you will maintain these relationships in the future?
- Did any of your relationships change during the course working in the program?
- Did this program give you an opportunity to reach out to people that you could not reach out to before?
- Did you share your work in the program with people from home like family or friends who you knew from before you became homeless?
- Do you think that you were a leader this summer?
- If you were to run the program again, what would you like to see done differently?
- Do you think the face-to-face outreach or the online outreach worked better?
- Is there anything else I should know about your experiences this summer?

Appendix C: Testimonial interview Guide

- Why do you care about HIV prevention?
- In your own life, what issues do you struggle with around HIV prevention and staying safe?

UNIVERSITY OF SOUTHERN CALIFORNIA UNIVERSITY PARK INSTITUTIONAL REVIEW BOARD FWA 00007099

Approval Notice for Continuing Review of Expedited Submission

<u>Date</u>: Mon Jul 12 08:08:48 2010 <u>Principal Investigator</u>: Eric Rice

Faculty Advisor:
Co-Investigators :   Norweeta Milburn
Project Title: **Feasibility of Online Outreach for HIV Prevention among Homeless Youth USC UPIRB # UP-09-00101 Continuing Review # UP-09-00101-CR001 Continuing Review 2010**

The University Park Institutional Review Board (UPIRB) designee reviewed the continuing review of this study on **7/8/2010**.

The UPIRB designee determined that your project meets the requirements outlined in 45 CFR 46.110 category (9) to receive expedited review. The UPIRB designee determined that this research involves no more than minimal risk. In approving this research it was determined that all of the requirements under 45CFR 46.111 were satisfied.

The study has been approved for a period of one year. If you plan to continue this study next year, you are required to submit a continuing review application prior to its expiration date of **7/7/2011**. You may not conduct study related activities, including recruitment, enrollment, data collection or data analysis once approval expires.

This approval notice is issued for data analysis only. No subjects may be contacted, recruited, enrolled or followed-up.

The consent and recruitment documents will not be returned (stamped/finalized); since recruitment/enrollment has closed.

As the Principal Investigator you are required to ensure that this research and the actions of all project personnel involved in conducting the study will conform with the research project and its modifications approved by the IRB; HHS regulations (45CFR46); IRB Policies and Procedures and applicable state laws. Failure to comply may result in suspension or termination of your research project, notification of appropriate governmental agencies by the IRB, and/or suspension of your freedom to present or publish results. Any proposed changes in the research project must be submitted, reviewed and approved by the IRB before the change can be implemented. The only exception is a change necessary to eliminate apparent immediate hazards to the research subjects. In such a case, the IRB should be informed within 5 days of the change following its implementation for IRB review. You must inform the IRB immediately if you become aware of any violations of HHS regulations (45CFR46), applicable state laws or IRB Policies and Procedures for the protection of human subjects. You are required to notify the IRB office in the event of any action by the sponsor, funding agency, including warnings, suspension or termination of your participation in this research. You must maintain all required research records and recognize the IRB is authorized to inspect these records. A final progress report is required by the IRB upon completion or termination of the study.

Informed consent is obtained in the research participant's language. If the participant speaks Spanish and the informed consent document has been translated into Spanish, you must utilize the Spanish informed consent document and the Spanish HIPAA Authorization form, if applicable. For participants who speak other languages, you must have a translator verbally translate the English informed consent document into those languages for the participants. The English informed consent serves as a summary. The translator, the person obtaining informed consent and the witness sign the English informed consent document. The participant and witness sign the Short Form informed consent document, which must be in the participant's language. The IRB has translated the Short Form consent into multiple languages, which are available on the IRB website (http://www.usc.edu/admin/provost/oprs/hsirb/forms).

You must inform the IRB of any unanticipated adverse event or injury no later than 14 calendar days following the time it becomes known that a subject suffered an adverse event/injury. To report adverse events you must use the Reportable Event activity in iStar. Furthermore you must inform the IRB immediately of any significant change in the risk/benefit relationship of the research as originally presented in the protocol and approved by the IRB.

Sincerely,

Richard S. John, Ph.D., Chair

Funding Source(s): Funding Agency: National Institute of Mental Health Contract or Grant Number: K01MH080605-03 PI of Project: Eric Rice Title of Project: Feasibility of Online Outreach for HIV Prevention among Homeless Youth PI of Main Grant: Eric Rice Title of Main Grant: Social Network-Based HIV Prevention for Homeless Youth

Administrator or IRB/CCI office.