

2 HOMELESS & STREET-INVOLVED INDIGENOUS LGBTQ2S YOUTH IN BRITISH COLUMBIA: INTERSECTIONALITY, CHALLENGES, RESILIENCE & CUES FOR ACTION

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Introduction

In keeping with many Indigenous traditions, as authors of this chapter we begin by acknowledging the land on which this work of listening, sharing, statistical analyzing and writing took place: the traditional, ancestral and unceded territories of the Musqueam, Tsleil-Waututh, Squamish, Stó:lō and Secwépemc Nations, located in Western Canada. It is also important to share who we are, and how we came to write this chapter. While our author bios provide more specific descriptions of our backgrounds and identities, our team includes researchers who are Indigenous (First Nations or Métis) and identify as lesbian, gay, bisexual, transgender, queer or Two-Spirit (LGBTQ2S); researchers who are Indigenous but not LGBTQ2S; and researchers who are non-Indigenous but LGBTQ, and have more than a decade working on research with Indigenous communities. We are from territories across Canada, the United States (U.S.), and the United Kingdom (U.K.).

Several of us conducted a recent large-scale health survey of street-involved youth and youth experiencing homelessness across 13 different communities in British Columbia (BC) in 2014. Although Indigenous organizations and Indigenous Peoples were part of that original survey research team, it was not solely designed for Indigenous LGBTQ2S research. Therefore, after we were asked by more than one Indigenous group and by the editors of this book to consider more detailed analyses about LGBTQ2S Indigenous youth, we took additional steps to Indigenize our methods as follows: Our team members who were first asked to write this chapter invited an advisory group of Indigenous LGBTQ2S people, especially those who work with Indigenous LGBTQ2S youth experiencing homelessness, to provide guidance on the analyses. As the chapter work progressed, most advisory members also became co-authors. Finally, in keeping with our commitment to build capacity for the next generations, our team included an Indigenous university student, who has had a pivotal role in completing this work.

Street-involved youth and youth experiencing homelessness in Canada are disproportionately likely to be Indigenous: while the Canadian census estimates about 6% of youth in Canada are Indigenous (Statistics Canada, 2013), previous multi-city surveys of street-involved youth and youth experiencing homelessness in Western Canada have found more than half identify as Aboriginal, First Nations, Inuit or Métis (Smith et al., 2007; Smith et al., 2015).

Our overall purpose is to contribute to the limited existing research about LGBTQ2S Indigenous youth who are experiencing homelessness in Canada, based on our research in Western Canada. What are the specific challenges faced by youth experiencing homelessness who are both Indigenous and LGBTQ2S? What resilience factors help them cope despite these challenges? What resources do they access, how helpful are these supports, and what recommendations do young people offer for how services can be more supportive? This chapter will examine the limited existing research, and then expand that knowledge by drawing on data from the 2014 BC Homeless and Street-Involved Youth (HSIY) Survey to answer those questions. We will incorporate recommendations young people made, and consider how these findings fit within the relevant recommendations from the Truth and Reconciliation Commission of Canada, although we note, as others have, that none of the recommendations specifically mention Two-Spirit people (Truth and Reconciliation Commission of Canada, 2015).

It is important to begin by describing Indigenous understandings of LGBTQ and Two-Spirit identities, as there are significant differences in cultural definitions of sexual orientation, gender identity and spiritual identity that may influence how Indigenous youth experiencing homelessness in Canada identify as LGBTQ2S.

Defining LGBTQ and Two-Spirit in Indigenous Canadian Contexts

Historically, many Indigenous Peoples throughout the world embraced positive, often spiritual roles in their societies for their people whose fluid or ambiguous gender identity or sexual orientation did not fit into the rigid roles dictated by the social norms of European colonial powers; in North America, more than 1,200 distinct Indigenous communities had such roles, and most Indigenous languages had one or more different words, such as *winkte* in Lakota, or *niizh manitoag* in Ojibway to describe them (Jacobs, Thomas, & Lang, 1997; Plaut & Kirk, in press). As Plaut and Kirk and others have noted, however, with

colonization and the influx of Christian missionaries, the efforts to extinguish Indigenous cultures often included trying to remove Indigenous norms, values and language through residential schools, punitive laws and conversion to Christianity, all of which supported the colonizers' homophobic perspectives, and influence Indigenous community perspectives to this day (McNeil-Seymour, 2015). In 1991, members of an Indigenous LGBT meeting in Winnipeg adopted the term 'Two-Spirit' as an intertribal term to reflect these concepts in Indigenous communities, a term intended to encompass more than just gay, lesbian or bisexual orientations, or diverse gender identities. Some Indigenous people have neither taken up the term Two-Spirit, nor reclaimed traditional language terms; instead, they avoid disclosing their identities because their Elders feel it is contrary to their community's current cultural beliefs, and these people fear being rejected by their community (Plaut & Kirk). Some Indigenous LGBTQ2S Peoples still prefer the terms gay, lesbian or bisexual. Therefore, for this chapter, we use the acronym LGBTQ2S to refer to the group of young people who identify as either LGBTQ or Two-Spirit, or both.

LGBTQ and Two-Spirit Youth Experiencing Homelessness: What is Already Known?

The research literature about Indigenous LGBTQ2S young people experiencing homelessness, whether in Canada, the U.S., or other colonized countries, is sparse. Our search included community and government reports and unpublished theses, in addition to peer-reviewed journals, but we found only a small number of studies focused solely on Indigenous LGBTQ2S youth experiencing homelessness (Teengs & Travers, 2006; Toronto Aboriginal Support Services Council, 2014; Wesley, 2015). These studies all incorporated interview or focus group methodologies, which provided rich information about a localized group of Indigenous LGBTQ2S youth experiencing homelessness, but all took place in Toronto, Ontario. Other studies focused on LGBTQ youth of colour experiencing homelessness, including a small number of Indigenous youth (Daniel & Cukier, 2015; Walsh, 2014). Some studies focused on Indigenous youth experiencing homelessness generally, with some mention of Indigenous LGBTQ2S youth (Baskin, 2007; Hunt, 2011; Saewyc, et al., 2009). With so few studies available, we also drew on research about Indigenous LGBTQ and Two-Spirit adolescents who were not experiencing homelessness (Barney, 2004; Bostwick, et al., 2014; Gosnell-Myers, 2012; Saewyc, Clark, Barney, Brunanski, & Homma, 2014; Tourand, Smith, Poon, Saewyc, & McCreary Centre Society, 2016); on literature about LGBTQ and Two-Spirit adults experiencing homelessness

(Ristock, Zoccole, & Potskin, 2011); and research about Indigenous LGBTQ2S adults who were not experiencing homelessness (Balsam, Huang, Fieland, Simoni, & Walters, 2004; Brotman, Ryan, Jalbert, & Rowe, 2002; Cassels, Pearson, Walters, Simoni, & Morris, 2010; Chae & Walters, 2009; Elm, Lewis, Walters, & Self, 2016; Fieland, Walters, & Simoni, 2007; National Center for Transgender Equality & National Gay and Lesbian Task Force, 2012; Scheim, Jackson, James, Sharp Dopler, Pyne, & Bauer, 2013).

The research about Indigenous LGBTQ2S youth experiencing homelessness documents their challenges in finding supportive communities, both on reserves, where they felt rejected, and in the cities to which they moved. As previously noted, all four studies we found took place in Toronto. In a study by the Toronto Aboriginal Support Services Council (2014), a number of Indigenous LGBTQ2S youth experiencing homelessness were interviewed to illuminate the barriers they face. The authors argued that, given the systemic racial oppression Indigenous LGBTQ2S youth face, along with the stigma attached to their sexual identities, they were at the highest risk for homelessness, violence, abuse and suicide compared to all other homeless youth. Within shelters, the main issues youth reported were staff apathy, homophobia from other clients, racial profiling, and rejection of clients who were not sober. The streets presented youth with a similar set of challenges, including being ignored or stereotyped by people who were not experiencing homelessness, and also being targeted for stigma around their sexuality, not just their housing status.

Another study with 13 Two-Spirit youth in Toronto who had migrated there from other communities (Teengs & Travers, 2006) found similar themes: since youth experienced homophobia and gay-bashing in the small towns and reserves from which they came, they migrated to the city in search of acceptance by the wider LGBTQ community. Yet once in Toronto, without a completed education and with limited job opportunities, they were not prepared for life in an expensive urban centre, and ended up homeless. Some spoke of experiencing racism and classism in mainstream gay communities and homophobia in Indigenous circles. Several of them said they ended up in the party scene and coped by abusing substances, while others turned to survival sex to support themselves, which put them at risk for HIV. Recent master's thesis work conducted in Toronto validated these findings: Wesley (2015) brought together five Two-Spirit youth in a sharing circle. Their narratives revealed they did not believe a Two-Spirit community existed in Toronto, and they used the term 'Two-Spirit' to more holistically describe a way of being, rather than a sexual or gender category. They described the intolerance that existed on the reserves they

came from, and their need to migrate to cities for safety. The youth expressed a desire for more cultural programming and social events in the city for Two-Spirit people, preferably not delivered by a social service organization. They also desired more Two-Spirit Elders to talk to and look to for mentorship. Another study included a focus group of both Somali LGBTQ and Indigenous LGBTQ2S youth experiencing homelessness in Toronto, who described being ‘invisible’ and outcasts, experiencing poor treatment by police, but also having a ‘street family’ that offered protection and emotional support (Daniel & Cukier, 2015). Indigenous LGBTQ2S participants noted the ongoing impacts of colonization and called for more culturally relevant spaces, services and shelters.

Studies that focused on Indigenous youth experiencing homelessness, but not specifically on Indigenous LGBTQ2S youth experiencing homelessness, reported similar issues of racism and stereotyping within shelter settings, as well as vulnerability to violence, sexual exploitation and substance use issues. A qualitative study of 24 Indigenous youth at risk of or experiencing homelessness in Ontario highlighted a strong link between being raised in the child welfare system and experiencing homelessness as a youth (Baskin, 2007), but the study had only one Two-Spirit youth. Nearly half the Indigenous youth experiencing homelessness in the 2006 multi-community survey of homeless and street-involved youth in BC had a history of government care (Saewyc et al., 2009); in one of the few direct comparisons of LGBTQ and heterosexual Indigenous youth experiencing homelessness, this study found LGBTQ Indigenous youth were significantly more likely than heterosexual peers to have run away from home or to have been kicked out of their homes. They were also more likely to report experiences of sexual exploitation than heterosexual youth; other studies in BC have documented the risks for sexual exploitation among Indigenous youth, both on- and off-reserve (Hunt, 2011).

What about the experiences of Indigenous LGBTQ2S youth who are not experiencing homelessness? One recent study of Aboriginal Canadian, Native American, and Maori adolescents compared sexual minority and heterosexual youth in school-based surveys in Canada, the U.S., and New Zealand (Saewyc et al., 2014). It should be noted the surveys did not specifically include Two-Spirit as an identity term in Canada or the U.S., but included only lesbian, gay, and bisexual. The study found that sexual minority Indigenous students were more likely than their heterosexual peers to experience enacted stigma, that is, harassment, bullying, physical assault, and ethnic and sexual orientation discrimination. Those who experienced these higher rates of enacted stigma were also more likely to report behaviours that put them at risk for HIV, including unprotected sex, multiple sexual

partners, pregnancy involvement and injection drug use (Saewyc et al., 2014). A U.S. study of over 6,000 sexual minority and ethnically diverse youth found Native American sexual minority youth had a greater likelihood of negative mental health outcomes than their White counterparts, such as self-reported feelings of sadness, suicidality and self-harm (Bostwick et al., 2014). Native American sexual minority youth also had the highest rates of attempted suicide within the previous year. However, the gap between sexual minority Native American and sexual minority White adolescents was smaller than among Native American and White heterosexual youth.

There have been only a couple of studies of primarily homeless LGBTQ2S young adults, and these have focused on those who have either been sexually exploited as an adolescent, or are involved in current sex work as an adult. One of the studies involved interviews with 96 Aboriginal young men in the sex trade in BC, Alberta, Saskatchewan and Manitoba (McIntyre & the Hindsight Group, 2012), while another study involved focus groups with 14 young men, women and transgender Aboriginal youth (Gosnell-Myers, 2012). Both studies noted that most of their participants were sexually exploited before the age of 18, and this was often preceded by a history of physical and sexual abuse, being in government care, and being rejected or kicked out by family, often due to sexual orientation. As in the other studies described, these young adults stated that Two-Spirit youth experiencing homelessness were treated differently, including being ignored or treated as offenders by police, and even in some cases being physically abused by police (Gosnell-Myers, 2012). LGBTQ2S young adults who were involved in sex work struggled with substance use issues, although in one study, sexual exploitation preceded problematic substance use for most young people (McIntyre & the Hindsight Group, 2012), while in the other study, substance use came first for most of the young people (Gosnell-Myers, 2012).

Many studies describe the legacy of colonization that contributes to Indigenous youth homelessness, especially historical trauma from policies and practices that tried to eradicate Indigenous culture, for example, residential schools or the systematic removal of Indigenous children from families (Baskin, 2007; Hunt, 2011; Toronto Aboriginal Support Services Council, 2014). While the colonial legacies of poverty and family conflict have often been determinants of youth homelessness, especially among Indigenous youth living on impoverished reserves, the additional homophobic and transphobic legacies of colonization create further vulnerability to homelessness for LGBTQ2S youth.

While some of the information presented here about Indigenous LGBTQ2S adults experiencing homelessness, or about Indigenous LGBTQ2S youth who are not homeless, might reflect the experiences of Indigenous LGBTQ2S youth experiencing homelessness, it is difficult to know how much is similar and what might be different. The few studies that focus on Indigenous LGBTQ2S youth experiencing homelessness involved interviews and focus groups with a small number of youth, primarily in Toronto; they provide rich insights from specific places, but the experiences of Indigenous LGBTQ2S youth experiencing homelessness in other provinces, or other communities, may be quite different. Our study contributes to the existing literature by drawing on patterns of experiences from hundreds of Indigenous youth experiencing homelessness across BC, and more than 100 Indigenous LGBTQ2S youth experiencing homelessness.

Method

The Current Study: The 2014 BC Homeless & Street-Involved Youth Survey

From fall 2014 through winter 2015, the McCreary Centre Society, in partnership with several youth-serving community organizations and the Stigma and Resilience Among Vulnerable Youth Centre of the University of British Columbia, conducted a survey of homeless and street-involved youth, aged 12 to 19 years, in 13 diverse communities across BC, including large urban centres, such as Vancouver, and rural and small communities, such as Prince Rupert and Nelson. The surveys asked a wide range of questions about life circumstances, risk exposures, assets and supports, health and risk behaviours, and health outcomes. The surveys also included measures of sexual orientation and gender identity, and several questions about Indigenous identity and related life circumstances, such as whether youth had ever lived on a reserve.

The 2014 survey followed the same participatory methods as two previous multi-community homeless and street-involved youth surveys conducted by the McCreary Centre Society in 2000 and 2006 (Smith et al., 2007). In each community, the society partnered with agencies that provided services to homeless and street-involved youth as community champions and advisory members. These champions guided the questionnaire and supported co-researcher teams comprising youth workers and currently or previously homeless youth, who administered surveys in each designated area and participated in data analyses. Community partners included Indigenous organizations, such as the Friendship House Association of Prince Rupert and the Prince George Native Friendship

Centre. The surveys were anonymous: the co-researcher team members read questions aloud, but youth answered on their own surveys, putting them afterwards in envelopes without names or identifiers. Some surveys were conducted one-to-one, while others were administered in groups of no more than five youth. Participants could also skip questions, or stop when they wanted. A total of 689 youth ages 12 to 19 years participated, and 681 youth completed enough of the survey to provide usable data. The original report provides more details about the original research (Smith et al., 2015).

Measures in the Survey

Most measures used in the survey were drawn from our previous youth health surveys of youth who were in school or experiencing homelessness, as well as existing validated measures from other sources. The key measures used to identify our sample for this analysis were three questions asking about sexual orientation, gender identity and Two-Spirit identity, as well as a question about ethnic background. The questions about sexual orientation have been used in a number of surveys in Canada and the U.S.; these questions were first asked in the BC Adolescent Health Survey among adolescents in schools in 1992, and have since been used in each cycle, to date with more than 120,000 students aged 12 to 18 years. One specific question was first asked among youth experiencing homelessness and street involvement in the 2000 survey conducted in six communities across BC. This question asks about self-identity linked to attractions, and offers seven response options. The question and response options are:

People have different descriptions about themselves when it comes to being attracted to other people. Which of the following best describes your feelings?

- Completely heterosexual (straight; attracted to people of the opposite sex);
- Mostly heterosexual;
- Bisexual (attracted to both males and females);
- Mostly homosexual;
- Completely homosexual (gay/lesbian; attracted to people of the same sex);
- Questioning (I'm questioning who I'm attracted to);
- I don't have attractions.

In addition, the survey asked the following question about gender identity: "Are you....? Male, Female, Transgender, Another, specify: _____."

As part of the section on Aboriginal identity, and Aboriginal experiences, such as currently or ever having lived on a reserve, etc., we also asked, “Do you identify as Two-Spirit?” with the response options as “No,” “Yes,” and “I don’t know what Two-Spirit means.” For the purposes of these analyses, those who identified as bisexual, mostly or completely lesbian/gay, questioning, transgender, and/or Two-Spirit were combined into the LGBTQ2S group. For the heterosexual cisgender comparison group, we included only those who identified as completely heterosexual or straight, and also did not identify as transgender.

The question assessing Indigenous status asked, “What is your background? (Mark all that apply)” and included the option of Aboriginal. If youth checked the Aboriginal identity, they were also asked to answer further questions in the grey box just below that question. These follow-up questions included, “Are you Aboriginal? (Mark all that apply)” with the following response options: “Yes, I am First Nations,” “Yes, I am Métis,” “Yes, I am Inuit,” and “Yes, other, specify.” If youth checked Aboriginal as one of their ethnic backgrounds, they were included in the sample.

Based on advice from our advisory group, we conducted three types of analyses. First, we gathered descriptive data about the Indigenous LGBTQ2S youth in the survey, including who they were, where they were from, how they identified, and some aspects of their lives. Our goal was to consider the intersectionality of their health and life experiences; that is, how being both Indigenous and LGBTQ2S may be different from being either of these alone. We next conducted comparisons of Indigenous LGBTQ2S youth to their heterosexual cisgender Indigenous peers in the survey. Finally, we compared Indigenous LGBTQ2S youth to non-Indigenous LGBTQ youth. We statistically tested the comparisons between groups, to see how likely or unlikely it would be that our results were due to chance; this usually involves specifying a cut-off or ‘alpha’ level of how unlikely that is. We generally chose the conventional alpha or p-value of .05, which means there is a low likelihood the results are based on random chance. Most of the differences between groups that we report in this chapter are statistically significant; in some cases, where the p-value was between .05 and .10, we also examined the effect size, which is a calculation of how much the particular outcome differs between the groups. For effect sizes, we usually used a calculation called the *phi* coefficient; a *phi* between .10 and .29 is a small effect size, .30 to .49 is moderate and .50 or higher is a large effect. All comparisons or differences between groups that are reported without mentioning effect sizes are statistically significant at .05; where we mention effect sizes, that means that the test statistic’s p-value lies between .05

and .10, so not significant at the usual .05 level, but still potentially meaningful. For those who are interested in the precise type of statistical tests we used to do these comparisons, most of our analyses used chi-square tests, because of the type of questions asked in the survey; some analyses included correlations for ordinal comparisons, or logistic regressions that calculated odds ratios.

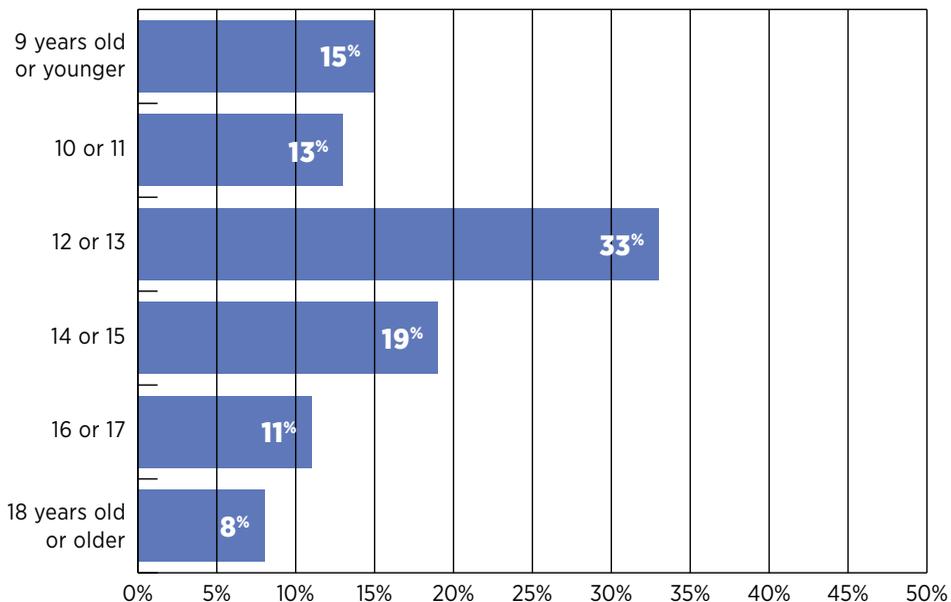
We describe:

- The LGBTQ2S youth in the survey;
- Their experiences of adverse events, such as violence and discrimination;
- Their health inequities;
- Their access to services and missed care;
- Resilience and protective factors that are linked to improved health or fewer health problems;
- The youths' recommendations for services and changes in their communities; and
- Implications for practice.

Who are the Indigenous LGBTQ2S Youth Experiencing Homelessness in BC?

In the 2014 BC HSIY survey, just over half the youth surveyed (358, or 53%) identified as Indigenous, and among these youth, 122 (34%) identified as LGBTQ or Two-Spirit. Among the LGBTQ2S Indigenous youth, 36% identified as Two-Spirit, 3% identified as transgender, more than half (56%) identified as bisexual, 7% identified as mostly or completely lesbian/gay, and 11% said they were questioning their orientation. Regarding the LGBTQ2S Indigenous youths' Indigenous status, 77% said they were First Nations, 27% were Métis, and a very small number said they were Inuit. (Youth could choose more than one response, which is why the total is more than 100%.) The most common ages for LGBTQ2S participants were 16 and 17 (43%) followed by 18 and 19 (38%). However, most youth surveyed had first become homeless or street-involved at much younger ages, most commonly around age 12 or 13 (see Figure 1). One-quarter of LGBTQ2S youth were surveyed in more rural areas, such as Chilliwack, Nanaimo, Nelson and Prince Rupert, but there were no significant differences between the percentages of LGBTQ2S youth in rural and urban communities.

FIGURE 1: AGE ABORIGINAL LGBTQ2S YOUTH FIRST BECAME HOMELESS



Source: 2014 HSIY Survey.

Among Indigenous LGBTQ2S youth, 40% had lived on a reserve at some point, and 18% said they had experienced homelessness on a reserve; there was no difference between Indigenous LGBTQ2S youth and heterosexual and cisgender youth in terms of ever or currently living on a reserve. More than two-thirds (69%) had been in government care at some point (foster care, group home or with a Youth Agreement), with foster care being the most common type of care (55%). Nearly the same number (62%) reported that one or more of their close relatives were survivors of residential schools; among these youth, 73% had at least one grandparent and 18% had a parent who had attended a residential school.

Nearly three in four Indigenous LGBTQ2S youth said they were currently in school, and most of these were attending an alternative school (59%). Similar numbers of Indigenous heterosexual cisgender and non-Indigenous LGBTQ youth also reported they were currently attending school.

About half the LGBTQ2S youth were engaged with Indigenous cultural practices to some extent, although it appeared that homelessness had created some challenges for maintaining connections to culture. Just over one in five reported they spoke an Indigenous language (21%). Nearly half the young people (49%) surveyed said they had participated in cultural or traditional activities before they became homeless, but this dropped to 39% who said they had participated in cultural or traditional activities after they became homeless. More than a third (39%) had approached an Elder for help in the previous year, and most of these youth (81%) said they found the Elder helpful.

Experiences of Violence, Discrimination, Precarious Housing and Government Care: Differences and Similarities to Heterosexual Cisgender Indigenous Youth and Non-Indigenous LGBTQ2S Youth

Only 70% of Indigenous homeless and street-involved youth gave reasons for why they were homeless or street-involved, but among those who gave answers, LGBTQ2S youth were more likely than heterosexual cisgender youth to say they were homeless or street involved because they did not get along with their parents (51% vs. 36%). They were also more likely to say they left home because of their sexual orientation, and because there was violence or abuse at home (34% vs. 16%). LGBTQ2S youth were more likely to have ever been sexually abused (61% vs. 27%). They were also more likely to report physical abuse, with 68% indicating they had been physically abused, compared to 50% of Indigenous heterosexual cisgender youth. Approximately one in three Indigenous LGBTQ2S youth (35%) had been sexually exploited, compared to 15% of heterosexual cisgender Indigenous youth.

Similar to previous research in Toronto, most Indigenous LGBTQ2S youth experiencing homelessness in BC reported discrimination in the previous year (75%). More than half reported discrimination because of physical appearance or people viewing them as different (see Table 1), and more than a third reported discrimination because of sexual orientation, with just under a third reporting discrimination based on gender identity. Indigenous LGBTQ2S youth were more likely than heterosexual Indigenous youth to experience any kind of discrimination (75% vs. 58%). Similar to what has been reported in research among Indigenous youth who are not homeless, most LGBTQ2S Indigenous youth who experienced homelessness or street involvement also experienced verbal or physical bullying, or being excluded from groups on purpose in the previous year, a significantly higher percentage than among heterosexual cisgender Indigenous youth (81% vs. 69%).

TABLE 1: TYPES OF DISCRIMINATION EXPERIENCED BY LGBTQ2S HOMELESS AND STREET-INVOLVED INDIGENOUS YOUTH IN THE PAST YEAR

TYPE OF DISCRIMINATION	PERCENT OF YOUTH REPORTING
Age	39%
Being homeless or street-involved	30%
Being on income assistance	10%
Disability	20%
Gender identity	31%
How much money you or your family has	39%
People seeing you as different	55%
Physical appearance	54%
Race, ethnicity, or skin colour	31%
Sexual orientation	35%

Source: 2014 HSIY Survey.

Indigenous LGBTQ2S youth differed from both heterosexual cisgender Indigenous youth and non-Indigenous LGBTQ youth in housing responses. They were more likely than heterosexual cisgender Indigenous youth to have ever lived in the most precarious housing, such as abandoned buildings or squats, hotels, cars, tents and on the street (77% vs. 61%). In particular, they were more likely than heterosexual cisgender Indigenous youth to have ever lived in a squat or abandoned building (25% vs. 12%) and on the street (45% vs. 27%). Compared to non-Indigenous LGBTQ youth, they were less likely to have ever lived in their parents' home, or to have lived 'nowhere or all over' (52% vs. 67%).

Indigenous LGBTQ2S youth were also somewhat more transient than heterosexual cisgender Indigenous youth: they were less likely to be from the community where they were completing the survey (53% vs. 66%). In addition, they were more likely to say they had been homeless in more than one community compared to Indigenous heterosexual cisgender youth (38% vs. 20%). Nearly two in three LGBTQ2S Indigenous youth had moved back home since first leaving (63%), which did not differ from Indigenous heterosexual cisgender youth. Among those who moved back home, 38% had moved back once, 24% twice, and 38% three or more times.

Health Disparities Between LGBTQ2S and Heterosexual Cisgender Indigenous Youth

Mental health issues were a key health disparity for LGBTQ and Two-Spirit youth compared to heterosexual cisgender Indigenous youth, but there were no statistically significant differences from non-Indigenous LGBTQ youth. LGBTQ2S youth were more likely than their heterosexual cisgender counterparts to have self-harmed once or more in the previous year (69% vs. 31%). Among Indigenous LGBTQ2S youth who had self-harmed, 83% reported doing so because they were lonely or depressed, 69% because they were feeling stressed, 59% because they were feeling angry, 42% because they were feeling rejected, 31% because they wanted to feel in control, 22% because they had problems with drugs or alcohol, 11% because they were bored and 7% to get attention. They were more likely than heterosexual cisgender Indigenous youth to report self-harm because they were lonely or depressed, or because they were feeling stressed. Indigenous LGBTQ2S youth were also more likely than heterosexual cisgender youth to have seriously considered suicide in the previous year (57% vs. 32%). About half (51%) of Indigenous LGBTQ2S youth had attempted suicide within the previous year, compared to 22% of heterosexual cisgender Indigenous youth.

Substance use was a common issue among all groups of homeless and street-involved youth. Nearly one in five (17%) Indigenous LGBTQ2S youth had consumed five or more drinks in a single session (heavy sessional drinking), at least 10 times in the past month, which was no different from heterosexual cisgender Indigenous youth or non-Indigenous LGBTQ youth. However, for drugs other than alcohol or marijuana, LGBTQ2S youth were twice as likely as Indigenous heterosexual cisgender youth to have used three or more substances within the past month (20% vs. 10%); they were more likely to have used crystal meth (17% vs. 8%), amphetamines (15% vs. 5%), inhalants (20% vs. 8%), mushrooms (20% vs. 8%) and ecstasy (16% vs. 7%).

More than half (55%) of LGBTQ2S youth reported three or more problems in the previous year because of substance use, such as blacking out, arguing with family about their drug use, losing friends or romantic partners, or trouble with the law, but this was similar for both the Indigenous heterosexual cisgender and non-Indigenous LGBTQ populations. Compared to Indigenous heterosexual cisgender youth, LGBTQ2S youth were more likely to have been injured (47% vs. 34%) or to have had sex when they did not want to (25% vs. 11%) in the previous year because of their alcohol or drug use.

Access to Services and Foregone Care

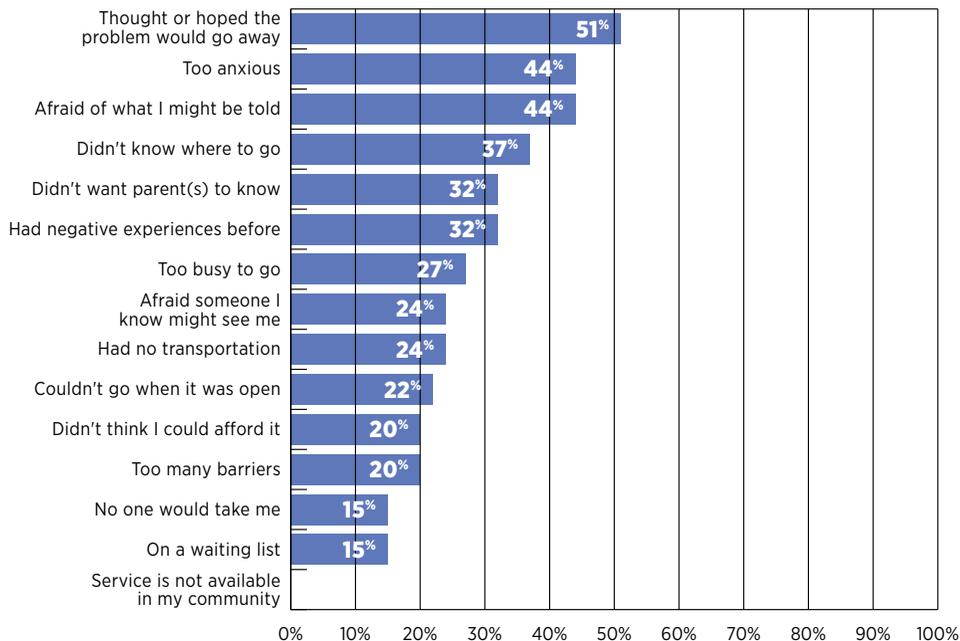
The survey asked youth about where they got health care, whether they had accessed a variety of different services in the past year, and whether these services were helpful. Just over half of Indigenous LGBTQ2S youth had a family doctor (54%), and nearly half got health care from walk-in clinics (49%). About one in five got their health care from an emergency department (19%), 11% from street nurses, 7% from after-hours clinics, and 17% said they did not get any health care. There were no differences between LGBTQ2S and heterosexual cisgender Indigenous youth in types of health care they accessed, except that LGBTQ2S youth were more likely to access after-hours clinics (7% vs. 2%).

Two in three Indigenous LGBTQ2S youth (67%) reported accessing a youth centre. More than half had stayed in a safe house, shelter or transition house (53%); 55% had used a food bank; 55% had gone to a youth clinic, 58% had accessed dental services; and 53% said they had received mental health support. Just under half (48%) said they had accessed job training and work experience, while 41% had taken life skills training programs. A total of 44% had used a soup kitchen; 40% accessed alcohol or drug treatment, counselling, or detox; 37% had received help from street nurses; 37% had accessed safe and affordable housing; and 30% had gone to a veterinarian for pet care. One in four (26%) had used the crack pipe exchange; and 19% had used a supervised injection site. One in five (21%) had accessed childcare or babysitting.

Compared to Indigenous heterosexual cisgender youth, Indigenous LGBTQ2S youth were more likely to report having missed out on needed medical care in the previous year (36% vs. 21%). However, there was no difference between Indigenous LGBTQ2S and non-Indigenous LGBTQ youth on foregone medical care. The survey included questions on the reasons for missing medical care: Indigenous LGBTQ2S youth were more likely than Indigenous heterosexual cisgender youth to report forgoing necessary medical care because they were too anxious (44% vs. 19%).

More than one in three Indigenous LGBTQ2S youth (38%) did not get mental health services when they felt they needed them, compared to 27% of Indigenous heterosexual cisgender youth. Reasons for missing necessary mental health services were not different in non-Indigenous and Indigenous LGBTQ2S youth, except that Indigenous LGBTQ2S youth were less likely than non-Indigenous LGBTQ youth to say they missed out on mental health care because they were too busy to go (see Figure 2).

FIGURE 2: REASONS INDIGENOUS LGBTQ2S YOUTH DID NOT ACCESS NEEDED MENTAL HEALTH SERVICES (AMONG THOSE WHO NEEDED THEM)



Source: 2014 HSIY Survey.

NR: The percentage for 'service is not available in my community' was not releasable.

Almost one in ten (9%) Indigenous LGBTQ2S youth reported being refused drug services because the program was full, 5% because of past experiences with the program, and a smaller percentage reported not fitting program requirements. More than twice as many Indigenous LGBTQ2S youth had been refused drug treatment services compared to their Indigenous heterosexual cisgender peers (15% vs. 7%).

Resilience and Protective Factors Among Indigenous LGBTQ2S Youth

While our study found that Indigenous LGBTQ2S homeless and street-involved youth were at higher risk for a number of health outcomes and risk behaviours than their heterosexual cisgender Indigenous peers, it is important to recognize this does not mean all Indigenous LGBTQ2S homeless youth experience those health outcomes, or engage in health-compromising behaviours. For many of the health outcomes we reported above, half or more

of LGBTQ2S young people did not have those health issues: for example, 51% reported a recent suicide attempt, which therefore means 49% did not attempt suicide in the previous year. Analyses described below consider some of the recommendations and assets identified in other studies, including increasing young people's cultural knowledge and involvement and supportive relationships, to see whether these appear to be protective factors against outcomes such as mental health problems and problematic substance use, or resilience factors that support positive health. For these analyses, we focused only on Indigenous LGBTQ2S youth.

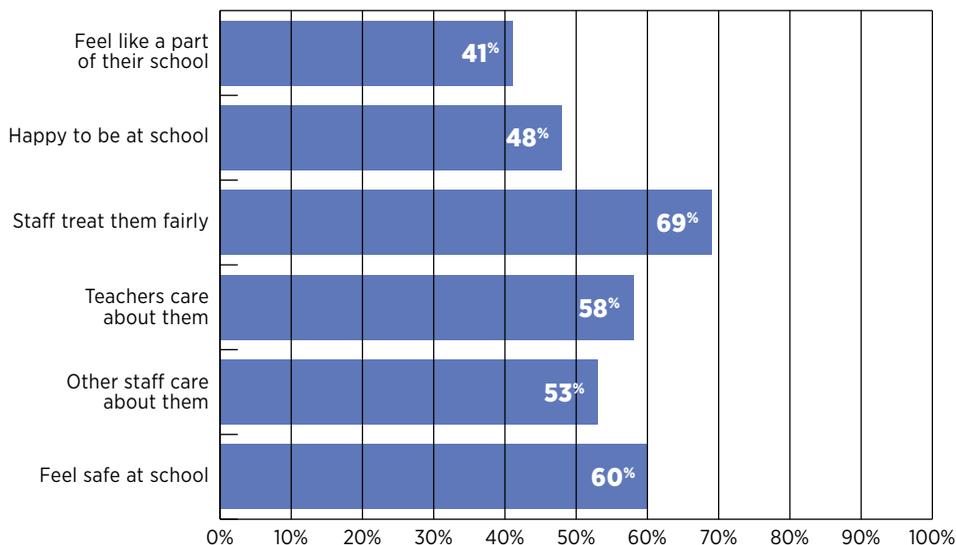
Connecting (or Reconnecting) to Culture is Protective

Speaking an Aboriginal or Indigenous language is one way of being immersed in and reconnecting to Indigenous culture. First Nations, Inuit and Métis communities across Canada have been working to revitalize Indigenous languages through their children and youth for decades; some of these efforts have been supported by the Government of Canada through their Aboriginal Peoples' Program–Aboriginal Languages Initiative (Department of Canadian Heritage, 2016). In the 2014 HSIY survey, we asked whether youth could speak an Aboriginal language. Of those who said yes, some specifically identified Haida, Sekani, Cree, Gitksan, Sm'algayax, and Nisga'a. Those who spoke an Indigenous language were much less likely to have considered suicide in the previous year (24% vs. 64%), or to have self-harmed in the previous year (47% vs. 74%). Those who spoke an Aboriginal language were also more likely to rate their mental health as good or excellent (59% vs. 33%).

We found potentially positive associations for health outcomes among Indigenous LGBTQ2S youth who reported involvement in traditional or cultural activities since becoming homeless or street-involved. The p-values were just over the usual .05 cut-off for the various analyses (.064 to .090). However, we found measurable effect sizes in the small levels of change range (ϕ =.202 to .239). These results should be considered with caution, but they provide some evidence that affirms previous focus group research findings, so we offer them here. Those who had participated in cultural activities since becoming homeless were less likely to have attempted suicide in the previous year, or to have self-harmed. They were somewhat less likely to have engaged in heavy sessional drinking on 10 or more days in the previous month. They were also more likely to rate their mental health as good or excellent, and to feel their current life circumstances were good or excellent.

School involvement may be protective, but results are inconclusive. School attendance has been identified as a protective factor for young people in a number of studies, including for LGBTQ non-Indigenous youth. However, this protective effect is primarily noted when young people feel safe at school, and report higher levels of school connectedness. In this survey of homeless and street-involved youth, 73% of Indigenous LGBTQ2S youth said they were currently in school, and most of these were attending an alternative school (59%). The survey also asked several different questions related to school connectedness (see Figure 3), and only about half of Indigenous LGBTQ2S youth attending school reported feeling positive about the various dimensions of school connectedness. They were less likely to feel happy to be there, compared to their straight cisgender Indigenous peers (48% vs. 65%). More positively, Indigenous LGBTQ2S youth who were street-involved or experiencing homelessness and currently attending school were twice as likely as those not in school to expect they would be living in a home of their own within five years (51% vs. 26%).

FIGURE 3: CONNECTED TO SCHOOL (AMONG INDIGENOUS LGBTQ2S YOUTH CURRENTLY ATTENDING SCHOOL)

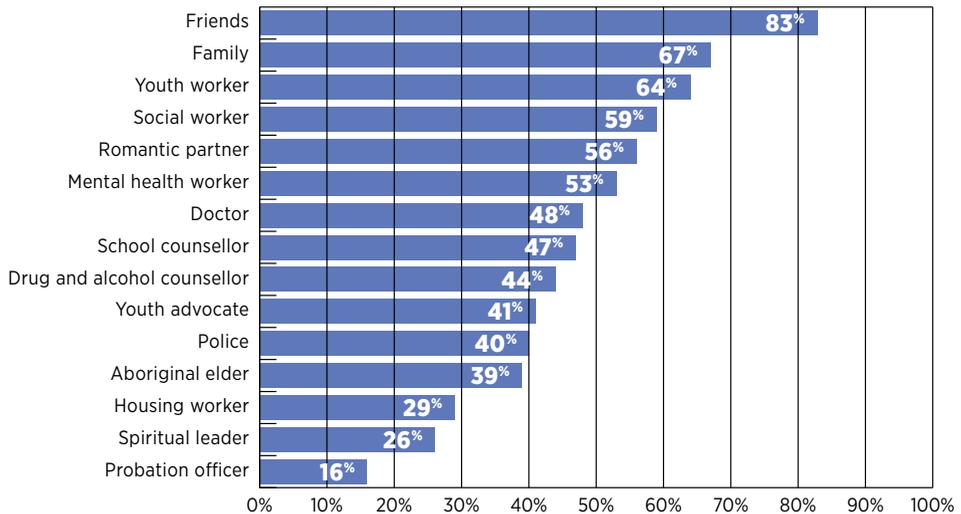


Source: 2014 HSIY Survey.

Supportive Adults can be Important, but a Relatively Small Number Turn to Adults for Help

While family relationships may be challenging for homeless and street-involved youth, they can still be an important source of emotional support or help with problems. Friends and supportive adults outside the family can also offer key support. The survey asked whether youth had sought help from a variety of different people in the past year, and whether those people were helpful or not (see Figure 4). Indigenous LGBTQ2S youth who asked for help from their family were less likely than heterosexual Indigenous youth to say their family was helpful. Similarly, Indigenous LGBTQ2S youth who asked for help from social workers and probation officers were less likely than Indigenous heterosexual cisgender youth to say those workers were helpful.

FIGURE 4: PEOPLE INDIGENOUS LGBTQ2S YOUTH APPROACHED FOR HELP IN THE PAST YEAR



Source: 2014 HSIY Survey.

Note: Youth could choose more than one answer.

Trust may also be an issue: while nearly all youth asked for help from friends in the previous year (83%), a smaller number asked for help from adults outside the family. Fewer than half the youth reported asking for help from adults other than youth workers, social workers and mental health workers. For example, only 39% had asked an Elder for help in the previous year. Compared to Indigenous heterosexual cisgender youth, LGBTQ2S youth were more likely to ask for help from a youth advocate (41% vs. 27%), a drug and alcohol counsellor (44% vs. 24%), or a mental health worker (53% vs. 25%), while they were less likely to ask

for help from a probation officer (16% vs. 26%). Among LGBTQ2S youth, Indigenous youth were less likely than non-Indigenous LGBTQ youth to have asked a youth worker for help (64% vs. 82%). Since only about half of LGBTQ2S youth asked for help from non-family adults, most of these analyses involve a relatively small number of Indigenous LGBTQ2S youth from the survey, and thus do not have enough statistical power for significant results, yet they offer some suggestive trends in effects that may be worth considering.

One finding that was statistically significant, despite the small sample size of the survey: Indigenous LGBTQ2S youth who could identify an adult outside their family they could turn to for support were more likely to see themselves in a job in five years compared to their peers without this type of support (55% vs. 29%).

Since so few youth asked an Elder for help (39%), most results were not statistically significant; however, the findings we examined had *phi* coefficients showing effect sizes that were moderate or at the upper end of small. While we felt these suggested potential relationships that could be worth testing in further research on specific interventions, it is important to interpret these results with caution. Among the Indigenous LGBTQ2S youth who asked an Elder for help, those who found this support helpful were more likely to feel their current life circumstances were good or excellent (*phi*=.323). They were somewhat less likely to have self-harmed in the previous year (*phi*=-.163), or to have missed out on needed medical care (*phi*=-.175). Indigenous LGBTQ2S youth who found an Elder helpful were also less likely to have engaged in heavy sessional drinking on 10 or more days in the previous month (among those who ever drank alcohol, *phi* =-.238). They were also somewhat more likely to rate their mental health as good or excellent, and to see themselves with a job in five years (both *phi*=.189).

Social workers are another group homeless and street-involved Indigenous LGBTQ2S youth may encounter, and from whom they get help. They were less likely than their heterosexual Indigenous peers to find a social worker helpful. However, the LGBTQ2S youth in the survey who found social workers helpful were significantly less likely to have self-harmed in the previous year (56% vs. 81%), and were less likely to report problems from substance use in the previous year (*phi*=-.285). They were less likely to forego needed medical care. They were also somewhat less likely to have attempted suicide in the previous year, or to have foregone needed mental health care (*phi* from -.200 to -.284).

Youth workers and mental health workers also appeared to be a positive resource. When Indigenous LGBTQ2S youth asked youth workers for help and found them helpful, they

were less likely to have missed out on needed medical care (27% vs. 60%), to have foregone mental health care ($\phi = -.243$), or to have self-harmed in the previous year ($\phi = -.251$). When Indigenous LGBTQ2S youth asked mental health workers for help, 63% found them helpful; those who found mental health workers helpful were more likely to see themselves employed in five years compared to those who did not find mental health workers helpful (62% vs. 30%).

Changing the Paths for Indigenous LGBTQ2S Youth Experiencing Homelessness: Youths' Recommendations, and Implications for Policy and Practice

Most Indigenous LGBTQ2S youth who participated in the survey said there were a number of services their communities needed in greater quantities (see Table 2). They were more likely than heterosexual cisgender Indigenous youth to say they needed more youth clinics in their community (45% vs. 28%). They were also more likely than heterosexual cisgender Indigenous youth to say their community needed more mental health supports (41% vs. 24%).

TABLE 2: SERVICES INDIGENOUS LGBTQ2S YOUTH SAID THEY NEEDED MORE OF IN THEIR COMMUNITY

TYPE OF SERVICE	PERCENT OF YOUTH REPORTING
Safe and affordable housing	52%
Safe house/shelter/transitional housing	50%
Job training/work experience	49%
Youth clinic	45%
Life skills training program	44%
Youth centre	43%
Mental health support	41%
Food bank	39%
Alcohol and drug treatment/counselling/detox	38%
Street nurses	28%
Dental services	24%
Soup kitchen	24%
Needle/crack pipe exchange	23%
Affordable childcare/babysitting	23%
Supervised injection/Insite	21%
Veterinarian	19%

Conclusion and Recommendations

Our findings echo the voices of Indigenous LGBTQ2S youth experiencing homelessness in other studies in Canada. We found that Indigenous LGBTQ2S youth experiencing homelessness and street involvement reported a number of disparities compared to Indigenous heterosexual cisgender homeless and street-involved youth, including higher rates of violence and discrimination, fewer sources of support and, as a result, significant health care issues, including mental health challenges such as suicide attempts and self-harm. Most of these youth have experienced significant cultural and family loss, and were dealing with the legacy of historical trauma; most have been in government care, and nearly two in three had relatives who had been in a residential school. Indigenous LGBTQ2S youth experienced more precarious housing, and were more likely to leave their reserve or community, yet end up homeless in other places. They were more likely to miss out on needed medical care and mental health care, and less likely to find some of the services they accessed helpful.

At the same time, we saw that Indigenous LGBTQ2S youth experiencing homelessness have a number of strengths and supports they draw on, and when they do access services or caring adults they find helpful, they report better health and more hope for their future. One of the key protective factors that appears to foster resilience is connection (or re-connection) to Indigenous culture, whether through language revitalization, participating in traditional cultural activities, or getting support from Elders. These protective factors have been recommended in other studies, but to our knowledge, this is the first multi-city survey of Indigenous LGBTQ2S youth experiencing homelessness to actually document the link between cultural connectedness and better mental health outcomes. Communities should support culturally based programs to reconnect Indigenous LGBTQ2S youth experiencing homelessness to their cultural heritage.

There are also a number of recommendations from the Truth and Reconciliation Commission of Canada (TRC) that may be relevant for Indigenous LGBTQ2S youth experiencing homelessness, though they are not specifically mentioned in the report (TRC, 2015). One of the most relevant is the first recommendation, calling on the federal government to reduce the number of Aboriginal children in care, especially the specific recommendation, “1.ii. Providing adequate resources to enable Aboriginal communities and child-welfare organizations to keep Aboriginal families together where it is safe to do so, and to keep children in culturally appropriate environments, regardless of where they

reside” (TRC, p. 1) and “1.v. Requiring that all child-welfare decision makers consider the impact of the residential school experience on children and their caregivers” (TRC, p. 1). The high proportion of Indigenous LGBTQ2S youth who have been in government care, and whose family members have experienced residential schools, helps explain some of the challenges these youth face, and the ongoing legacy of historical trauma that creates challenges for them and their communities.

Since nearly a third of Indigenous homeless youth in these communities reached by the survey were LGBTQ2S, all health care and mental health professionals and youth workers and social workers who work with homeless youth should be aware of and responsive to their needs. We recommend that providers who work with homeless youth engage in specific work on unlearning racism and homophobia/biphobia/transphobia, as well as learning how to foster culturally safe practices and environments for Indigenous LGBTQ2S youth. Professionals should also be trained in trauma-informed care, given the levels of trauma experienced by Indigenous LGBTQ2S youth experiencing homelessness.

With the importance cultural connectedness appears to have in fostering better health among Indigenous LGBTQ2S youth, and given that those who asked Elders for help and found them helpful reported better health as well, one of the other TRC recommendations is particularly salient, calling on the Church parties to the TRC to fund “61.iv. Regional dialogues for Indigenous spiritual leaders and youth to discuss Indigenous spirituality, self-determination, and reconciliation” (TRC, p. 7). In several of the studies of Indigenous homeless and street-involved youth, including this study, youth described a lack of both safety and acceptance in their communities that creates challenges for them, causes them to leave home and contributes to their ongoing homelessness. Communities may further benefit from Two-Spirit role models and leaders helping to raise awareness about historical elements of Indigenous culture that included respected roles for Two-Spirit people as a way to increase acceptance and support for LGBTQ and Two-Spirit youth (McNeil-Seymour, 2015).

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