# Not Just a 'Youth Problem': LGBT+ Experiences of Homelessness Across the Life Course in Fife, Scotland

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- Abstract\_ While it is widely recognised that LGBT+ people are over-represented in the homeless population, research on their circumstances and experiences is limited. Scotland has a well-deserved reputation for progressive homeless legislation, yet in policy documents LGBT+ people are barely mentioned. This paper presents the results of a study in Fife, the third largest Local Authority in Scotland, focusing on 14 in-depth interviews with LGBT+ people from across age groups who had experience of or been at risk of homelessness. The findings bring to the fore that rejection by family and partners for 'coming out' is common to all age groups and not just a youth problem, and is a unique reason for LGBT+ people becoming or being at risk of homelessness. The research highlights the complexity of LGBT+ life courses, with fluidity and confusion around gender identity colluding with poverty and rurality to exacerbate the experience of homelessness. This paper calls for data collection in this area so that the extent of the problem no longer remains unknown and easily ignored and more inclusive dialogue between policy makers and those affected by policy, a message which needs to resonate beyond this field and indeed beyond Scotland.
- > Key Words\_ LGBT+, Homelessness, Life Course, Rural, Identity

# Introduction

The actual extent of LGBT+ homelessness is unknown and there are significant knowledge gaps in this area with the focus on this as being a youth problem (Ecker, 2019). The European Union Agency for Fundamental Rights estimates that in the EU 1 in 5 LGBT+ young people experience homelessness, rising to 1 in 3 for trans people and nearly 40% for intersex people (Ritosa et al., 2021). In the UK, while only 5% of people identify as LGBT+, it is estimated that they make up a quarter of all homelessness (Fraser et al., 2019; Nolan, 2017). It is important to recognise however that all of these studies are estimates and focused on youth and the variations are wide (Shelton, 2017).

Inequality and homophobia continue to exist. The European Union Agency for Fundamental Rights (2020) report that of the 140000 respondents from across Europe, 43% of LGBT+ respondents above 18 years old and 60% of trans people felt discriminated against in their everyday life. LGBT+ hate crime in Scotland, where this research took place, has risen by 24% between 2019 and 2020 (Crown Office and Procurator Fiscal Service, 2020).

The study of LGBT+ people as an identity group is relatively new and they remain invisible in the data (Moore, 2015). LGBT+ invisibility in homelessness is not just about the lack of data collection, but also young people not seeing themselves as homeless or minimising their situation, being unwilling to use accommodation services, and to reveal their sexual identity (Norris and Quilty, 2020). The consequence of this invisibility is that the portrayal of LGBT+ as affluent and well-housed has endured, whereas the reality is that the majority of LGBT+ people are living in poverty (Matthews et al., 2019). The LGBT+ specific research, which sits outside of the main datasets, shows that this population experience higher rates than the general population of problematic substance use, self-harm, suicide, poor mental health (Bachmann and Gooch, 2018), and isolation (Teuton, 2018). Healthcare and service provision for LGBT+ people in the UK is inadequate and in some cases hostile (Government Equalities Office, 2018).

Poverty is the main driver of homelessness and how this intersects with sexuality, ethnicity, racism, substance use, and mental health issues are important to recognise (Fraser et al., 2019). Rejection by others for 'coming out' is the main cause of homelessness for LGBT+ and is a unique factor to this population (Ecker, 2019; Abramovich, 2012). Fraser et al. (2019) draw attention to 'systematic failures' such as sexual abuse, foster care, and stigma that all contribute towards homelessness. They caution however, that focusing only on the negative aspect of LGBT+ is to provide a one-dimensional understanding of the issue and to undermine this

population. Bryan and Mayock (2012) carried out the first study in Ireland exploring LGBT+ lives and mental health, and also caution against making linear conclusions, but instead to recognise the diversity and complexity of accounts.

In 2017, the European Pillar of Social Rights set out to define a common framework for the social rights of European Citizens. The European Commission announced the launch of a European Platform on Combatting Homelessness (FEANTSA and the Abbe Pierre Foundation, 2021). However, the UK is no longer part of the European Union, despite the Scottish people voting largely to remain, and therefore these developments do not apply any longer to where this research has taken place. In 2018, the UK Government Equalities Office (2018) launched an LGBT Action Plan, committing the UK Government to address, among many other issues, the causes of LGBT+ homelessness (Lawrence and Taylor, 2020). However, because of devolved responsibilities, much of the plan is only applicable to England. While at the present time in Scotland there appears to be no plan of equivalent scope, in 2018 the Scottish Government launched its Ending Homelessness Together High Level Action Plan which recognises 'sex, gender reassignment, and sexual orientation' as 'protected' groups (together with age, disability, race, and religion or belief). Following this directive, all Local Authorities were tasked with putting in place local Rapid Rehousing Transition Plans. These plans emphasise the need for fair access for all to stable, secure housing and place high importance on providing services that are person-centred and founded on rights and lived experience. While many groups at risk of homelessness were identified in these plans (Dun, 2020), LGBT+ communities regrettably received scant attention.

This paper is structured to set out the aims, scope, and methods of the research before turning to report on the findings based on interviews with 14 LGBT+ individuals from across age groups who had experience of or were at risk of homelessness. This highlights that rejection for coming out was the main reason for homelessness and is not just a youth problem.

# Aims and Scope of the Research

Fife is Scotland's third largest Local Authority area by population (approx. 372000). In 2016, a *LGBT Community Needs Assessment* for Fife was published (Greenwood and Olsson, 2016). This showed that LGBT+ people are significantly disadvantaged when using health and support services which rarely recognise or take account of their specific needs. The report further concludes that LGBT+ people are unable to live openly and do not feel sufficiently comfortable or safe 'to be themselves'. It highlights the absence of LGBT+ specific social activities and venues in much of Fife, which severely limits opportunities to connect with peers, contributing to

isolation and negatively impacting on health and wellbeing. Fife is a mixed area geographically with two out of three people living in an urban area, one in six in a small town, and the remainder in rural areas or small villages (Fife Centre for Equalities and Fife Council Research Team, 2019).

The research reported on in this paper was commissioned by Frontline Fife, a charity that provides a range of services addressing immediate housing needs and support for early intervention around homelessness.<sup>1</sup> The study set out to identify the challenges experienced by LGBT+ who have had direct experience of home-lessness or been at risk of homelessness, and for this to inform service development (Nugent, 2021).

# Methods

This was a qualitative study with semi-structured interviews conducted (Cousin, 2009). Fieldwork took place between August 2019 and April 2020. Drawing on the work of Nowell et al. (2017) a thematic analysis was carried out, and this involved six phases, namely becoming familiar with the data; generating initial codes; searching for themes; reviewing themes; defining and naming themes; and finally, producing the report. One of the main challenges in qualitative research is people being able to tell it like it is (Holloway and Jefferson, 2000), and of their own understanding of their situation and context. It was challenging gaining access to people with lived experience of homelessness, and awareness was raised by meeting local LGBT+ groups. The call was also extended to other Local Authorities, with two interviewees coming from outside Fife. It is important to be mindful of intersectionality and the uniqueness of individual experiences, and all interviewees' views are their own. The number of participants is small and not representative of a wider group, with the focus on providing depth and to promote discussion around this area.

# LGBT+ Voices

Although a small sample, the extraordinary individual stories of these 14 participants not only illustrate themes commonly reported in the literature, but, importantly, also raise issues that are relatively neglected and 'new' to the published research. A profile of individual interviewees is provided in Table 1. The names of interviewees were changed to ensure confidentiality.

<sup>&</sup>lt;sup>1</sup> To learn more about the charity please go to https://www.frontlinefife.co.uk.

ID	LGBT+ Identity	Age	Based	Housing Situation at time of Interview	Engagement with Housing Services and overall views
Brian	Trans man	16-24	Small Town	Back with parents, 'evicted' after coming out and sofa surfed.	No, was unaware of support.
Cheryl	Trans woman	50-59	Large Town	Own tenancy, relationship ended when came out.	Yes, through other service, positive, but chose not to stay in TA.
Dan	Trans man	16-24	Small village, LA	Own tenancy, 'evicted' by parents after coming out.	Yes, through other service. TA – Negative reactions.
Fiona	Cisgender Gay Woman	25-29	Small village, LA	Still in TA after split with partner.	Yes, positive experience.
Finn	Trans man	16-24	Small village	Own tenancy, 'evicted' after 'came out' by parents.	Yes, through other service. Positive, unaware of TA.
Gerry	Cisgender Gay man	40-49	Small village	Own tenancy after split from partner.	Yes, positive but chose not to stay in TA.
lain	Cisgender Gay man	16-24	Rural area	With parents and recently 'came out', had been concerned of risk.	No experience of services and unaware.
Janet	Trans woman	50-59	Small village	Own tenancy, homeless as used finances to transition.	Yes, and positive.
Layla	Trans woman	30-39	Large Town	At risk, as lost long-term job due to transphobia.	No contact and unaware of support.
Maura	Cisgender Bi-sexual Woman	16-24	Small village	With parents and not 'out' because of risk.	No experience and unaware.
Neil	Cisgender Bi-sexual Man	40-49	Large Town	Sofa surfing, 'evicted' after coming out to long-term partner.	Aware but unengaged as views TA as 'unsafe'
Susan	Trans woman	40-49	Small village	With partner but at risk for coming out.	Aware but no contact with housing services.
Tim	Cisgender Gay man	40-49	Small village	Own tenancy. Had split up with partner and moved back in with	Aware but unengaged as views TA as 'unsafe'

#### Table 1: Profile of interviewees

#### Summary of Table 1

Cisgender

Gay Woman

Viv

N.B. Not all participants disclosed both their gender and sexual identities.

Small Town

25-29

LGBT+ identity: Seven participants identified as cisgender - two as gay women, three as gay men. One woman and one man identified as bisexual. Seven interviewees identified as trans - four as trans women and three as trans men.

parents.

Own tenancy, did not

come out to parents

when younger.

No experience but

aware.

Age: Five respondents were under 25, and six were aged 40 or over; of the latter two were 50 or over. Residence: Four interviewees lived in a large or small town, 10 lived in a small village, and one in a rural area.

Housing Situation: At the time of interview seven interviewees had their own tenancies.

# Findings

The following findings present an analysis based on the interviewees' responses. There are three main sections recounting (i) experience of homelessness, (ii) engagement with support services, and (iii) assessment of support provision.

# Experience of homelessness and risk of homelessness

### Struggle with sexual / gender identity and experiences of homophobia

The vulnerability of LGBT+ homelessness is closely aligned to the discomfort of being queer in a heteronormative society (Matthews and Poyner, 2017). All interviewees described being aware of being 'different' and in a minority. Trans people reported feeling particularly vulnerable to stigma and were noticeably lacking in self-acceptance and confidence. Several trans respondents identified the stalling of consultations over the 2004 Gender Recognition Act and the continuing contemporary debate regarding the rights of trans people in UK society (Doward, 2020) as symptomatic of the barriers they faced in achieving an accepted place in society. All interviewees described struggling with their identity and viewed revealing who they are to others, particularly in the initial stages of 'coming out', as a 'gamble' – for fear of exclusion.

I moved to London and was finally able to live the life that I wanted, but then when I came back to live with my parents, I kept that part of my life in a box, literally in a box and could only be me when I went to visit friends in Glasgow. (Layla, Trans woman)

The detailed picture of individual experiences reveals complexity. For example, Viv and Tim only came out to their parents when they were older and had their own tenancies. Iain only revealed his sexual identity to his parents when he was concerned it was otherwise going to be disclosed through Facebook. Maura, at the time of interview had still not told her parents about her sexual orientation because she was concerned how they might react.

#### Mental health, abuse, and violence

Four interviewees who grew up in and continued to live in a small village or rural area reported not 'coming out' until they were much older and felt that throughout that time they 'hid from themselves' which had an adverse impact on their mental wellbeing. Gerry felt his lack of self-acceptance was clearly a contributory factor to his mental health problems and played a role in his marriage breakup, leading to homelessness. Brian and Gerry had both been physically attacked because of their sexual identity and Brian reported suffering from post-traumatic stress disorder (PTSD) as a result. Finn and Dan faced transphobic abuse from their families for years. Not knowing where to get help, they felt trapped and experienced mental

trauma resulting in being hospitalised on several occasions. All interviewees reported experiencing stigma and being abused either physically or on-line because of their LGBT+ identity.

I have had negative attention, people spitting at me. It was a younger person than me and they told me to kill myself... I had a drunk guy push me and ask 'Are you a boy or a girl?' (Finn, Trans man)

I have had a lifetime of stress related problems and looking back on it, it is all linked to me needing to be me, and up until now not being able to. (Cheryl, Trans woman)

#### Rejection

Four were put at risk of homelessness and eight became homeless because of rejection by family or partners after coming out. The fear of personal rejection by family, friends, and a potentially hostile and homophobic society dominated the narratives of all the interviewees and across age groups underpinning struggles with self-acceptance of a queer identity. This was especially apparent among those interviewees who lived in small villages and rural communities without easy recourse to safe and protected environments. The varied background stories of the participants further highlight how LGBT+ people are not a homogeneous group, presenting a challenge to the designation of LGBT+ as a 'community', with trans people in particular feeling on the margins.

I think it is harder for people when they live in rural areas. I watch what I do when I am in certain places... I wouldn't move away though because this is my home. (Gerry, Gay man)

I think a lot of trans people become estranged by family, friends and isolated... Since I have come out I have lost my male friends. (Susan, Trans woman)

#### Isolation and rurality

Echoing findings from the *Fife Needs Impact Assessment* (Greenwood and Olsson, 2016), the 10 rural/small village based interviewees reported feeling an acute lack of acceptance, no sense of community, and having to strictly regulate their behaviour. Among these, four trans people recorded that local residents were resistant to recognising anything but their birth assigned identity, making them feel both estranged from and rejected by the wider community.

It is hard in X (small village) that sometimes people still refer to you as the person you were before, they use my dead name. (Finn, Trans man) While LGBT+ individuals living in larger settlements frequently have access to known, visible, safe, and inclusive or dedicated spaces for LGBT+ people, for most living in rural communities such access is not the norm. For rural based LGBT+ individuals the ability to seek out informal support is therefore limited, other than online, compounding further their isolation and disconnection.

#### Safety and security

All felt 'unsafe' to be themselves and the perception and experience of the prejudice of others towards them as LGBT+ and the risk of abuse was a particular barrier to seeking help. Six interviewees who now had their own tenancies acknowledged that here they felt safe and secure, and this was transformational as they were finally able to live the life they wanted, and that this had had a positive impact on their mental health. By contrast, Neil who was sofa surfing and Layla who was at risk of losing her home for financial reasons, did not feel at all secure. Maura felt that by not telling her parents 'the truth' about her sexual identity she was 'living a lie' and worried they would find out from someone else and ask her to leave. Susan feared her partner might ask her to move out because they were finding it difficult to cope with her 'new' gender identity. All described the pressure they felt and had underlying concerns about how their situations were affecting their general wellbeing.

The main challenge for people who are LGBT+ is being judged, heterosexual people can walk down the street and hold hands, if you do that when you are two men or two women people stare. (Tim, Gay man)

#### Complexity

The 14 in-depth interviews conducted for this research bring to the fore the complexity of the interaction between sexual/gender identity and housing (Matthews et al., 2019). This study shows that LGBT+ homelessness is not just a youth problem: five of our sample were under 25 years, and six over 40, two of whom were 50 or over. Maura, at the age of 17, highlights further levels of complexity as she was confused about her sexual identity, and not sure if she was bi-sexual or asexual. As Matthews (2020) shows, being conflicted over queer identity is not helped by the many categories that now make up the '+' part of the 'LGBT+' acronym – which itself is a heteronormative derived classification. Without access to support mechanisms (informal or formal), the impact of not having the opportunity to explore identity over time will amplify negative feelings of insecurity and lack of self-acceptance.

I am bi-sexual but also potentially asexual. I have not told my parents because I am worried they will kick me out... My brother is gay and my Dad hasn't been great about it, so I have been worried about saying. (Maura) Our research reaffirms the findings of *Hard Edges Scotland*, and previous to this *Hard Edges England* reports, that there is a strong and direct correlation between home-lessness and poverty (Bramley et al., 2015; 2019). Yet, in common with findings in previous studies around poverty, most of the participants in our research only hinted at living with deprivation (Walker, 2014). Only one person was open about their struggle to survive and how living rurally made this even more challenging.

Living rurally, travel as well is expensive, so it can mean you having to decide if you are going to eat or go somewhere. (Dan, Trans man from the Borders)

LGBT+ identity, however, was shown to have a direct relationship with poverty for two people. Janet had invested all her money to travel abroad and pay for her transition, as this was not available on the NHS at the time. She was, as a consequence, effectively homeless upon return. Layla lost her job because of her ex-employer's transphobia and was at risk of homelessness as a result.

#### **Resilience and hope**

As well as challenges, the life stories of our interviewees demonstrate the incredible resilience of some individuals, albeit born out of necessity. All felt hopeful that societal progress with increasing acceptance of non-binary sexual identities would continue and that inclusion would be promoted. It was strongly felt by respondents that young people are less closed-minded than older generations, being more questioning of heteronormativity and accepting of difference. Overall, despite reservations about support services as is discussed below, interviewees were very positive about Fife 'being an accepting place'. All felt that the teaching of LGBT+ rights in schools and the creation of safe spaces, such as is in Kirkcaldy High School, were significant indicators of the progress made.

I think it is harder in rural areas, but I think things are really improving and I think younger people will have it easier than we did. (Cheryl, Trans woman)

# **Engagement with Support Services**

The responses of the LGBT+ interviewees created three categories in relation to engagement with services. Namely, four were *unaware of support services*, four were *aware but wary*, and finally, six were *aware and engaged*. Those unaware or aware but wary of services lived the most precarious lives and had experienced the most unsafe situations, having to sofa surf or even having to rely on family or partners that had rejected them. Those wary had negative perceptions about the quality of housing they could access and also how others might react to their sexuality and the risk of abuse, and the impact this would have on their mental health.

I don't want to stay in temporary or hostel accommodation. I know the reputations of those places. I am not scum. I know me, with my drinking, if I fall in with those people I will fall down with them. (Neil, Bi-sexual man)

The variable levels of engagement of interviewees with housing support services highlights the need for their positive promotion as both inclusive and empathetic and as demonstrating understanding of the diversity of LGBT+ identities. Access to such services at a much earlier point in a crisis cycle can prevent homelessness from occurring.

# Assessment of housing support services

The six LGBT+ interviewees who had first-hand experience of housing services reported having generally positive interactions with support staff, but also felt that LGBT+ training would ensure that staff were not only more informed and confident about their interactions, but would also help to challenge heteronormative attitudes. All felt that asking about gender and sexual identity should be 'up front' and the 'responsibility' of support agencies to inform plans and ensure they are not errone-ously being classified as 'intentionally homeless'.<sup>2</sup> Echoing views recorded in other research (England, 2019), all interviewees who engaged with housing support lamented the unpreparedness and inflexibility of applicant procedures and recording systems. These experiences reflect the dominant heteronormativity of administrative processes, underlining the conclusion of Matthews (2020) that the change needed is not just about adding 'a box', but cultural and structural.

I think they should ask about your sexual identity. It is my main reason for being homeless so it should be noted. When I went to the Council the lady said they didn't have a form for me, as if I was really abnormal. She said 'I have never had to deal with this.' (Finn, Trans man)

<sup>&</sup>lt;sup>2</sup> A person is intentionally homeless if it is deemed that they deliberately did or failed to do anything which led to the loss of accommodation which it was reasonable for them to continue to occupy. In these cases the Local Authority has no duty to provide permanent housing.

# **Discussion and Conclusion**

This research brings to the fore that rejection by family and partners for 'coming out' is common to all age groups and crucially not just a youth problem, and is a unique reason for LGBT+ people becoming homeless or being at risk of homelessness. The stories told by LGBT+ participants emphasise the complexity of LGBT+ life courses, with fluidity and confusion around gender identity colluding with poverty and rurality to exacerbate the experience of homelessness. LGBT+ people are at particular risk of hidden homelessness; a result of the combination of a reluctance on the part of some to be open about their identity through fear of intolerance and abuse, a lack of knowledge about and suspicion of the role of support services, and, critically, the absence of systematic recording of sexual and gender identity in housing and homelessness records.

This study reveals 'new' insights into the lives of LGBT+ people, and especially trans men and women living in rural areas or smaller settlements. Isolation, aggravated by being cut off from immediate and easy access to a supportive community, is compounded by the constant fear of 'exposure'. For some this meant not 'coming out' until they were much older, which had an adverse effect on mental health, leading even to hospitalisation. These accounts clearly demonstrate feelings of acute isolation and lack of acceptance, and the complex interaction between the fluidity and confusion that can exist around gender/sexual identity on the one hand and rurality and housing on the other.

Access to LGBT+ support groups emerged strongly as being especially important in affirming a positive identity and achieving a sense of belonging – a sense of belonging that had been achieved for the six LGBT+ participants who had their own tenancies. Each had lived through periods of homelessness, insecurity, and relative poverty and bore testimony to the sense of wellbeing that access to safe and habitable shelter conferred. Having a stable secure home and one's own space is the foundation from which to thrive and can be fundamental in establishing a place in the community. For LGBT+ people, home can be an especially important, if not crucial, space for self-acceptance of one's identity (Di Feliciantonio and Dagkouly-Kyriakoglou, 2020).

May (2011, p.3) states that "we come to understand who we are partly on the basis of where and with whom we belong, which is why belonging is of fundamental importance to the self." Routes out of homelessness in research conducted by Matthews et al. (2019) are associated with people becoming more comfortable with their identities, and that the vulnerability of homelessness is closely aligned to the discomfort of being queer in a heteronormative society. The acceptance of oneself could even be regarded as a private form of ontological security and this study demonstrates how challenging this can be especially for LGBT+ people.

'LGBT+' and 'homeless' are discrete 'labels' or 'shibboleths' provoking stigma and prejudice. Together they compound the social ills of the 'roofless queer'. Both need to be addressed, but combatting the prejudice and stigma associated with LGBT+ identity is arguably the most problematic. Evidence from this study suggests that there is a need for LGBT+ training and data collection in this area so that the extent of the problem no longer remains unknown and easily ignored. Although this study was conducted in Scotland and with a small group of participants, it brings to the fore the need for a more inclusive dialogue between policy makers and those affected by policy, and this is a message which needs to resonate beyond this field and indeed beyond Scotland. While this research places a spotlight on LGBT+ identity, it is recognised that 'identity' matters for all and should be an integral part of person-centred care and public service delivery and policy development.

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