PROMISING STRATEGIES TO END YOUTH HOMELESSNESS

Report to Congress

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Administration for Children and Families
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Report to Congress on Promising Strategies to End Youth Homelessness
A Review of Research

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I. INTRODUCTION

Youth homelessness has profound consequences reaching well beyond individual youth and their immediate families. Indeed, negative impacts from youth homelessness enter into the very fabric of our communities and the nation as a whole. Research suggests that as many as 1.6 million young people may be homeless at some point during the year. When youth leave their homes and enter the homeless population, they are in jeopardy of engaging in anti-social and risky behaviors as well as becoming one of the most severely victimized groups in our society.[1] Alarmingly, an increasing amount of research on the chronic homeless population notes a correspondence of homelessness experienced in youth to subsequent adult experiences of homelessness.

When the Runaway and Homeless Youth Act (RHYA, Title III of the Juvenile Justice and Delinquency Prevention Act of 1974, JJDPA, P.L. 93-415) was reauthorized in 2003 during the 108th Congress by the Runaway, Homeless, and Missing Children Protection Act, it included a provision for a Report on promising strategies to end youth homelessness. The Report provides Members of Congress information on the needs of the homeless youth population and the characteristics of homeless youth, theoretical perspectives, prevention and amelioration interventions, and implications for policy and program development. This Report also includes a review of the range of supports and services available to meet the population's needs, including those services funded in the Runaway and Homeless Youth Act.[2]

The two principle causes of youth homelessness are 1) a breakdown in family relationships and 2) inadequate interventions from systems that are charged with protecting, nurturing, and supervising youth when their families cannot. The primary reason youth consistently state for their homelessness is family conflict. [3] The second leading cause of youth homelessness links to the high proportion of homeless youth who have been in foster care. Additionally, there is growing evidence suggesting that many homeless youth have spent time in juvenile detention.[4] Finding effective ways to address

these causes of homelessness is critical in the campaign to prevent and ameliorate youth homelessness.

Stable and nurturing families are the most potent barrier to the dangers of youth homelessness – and its consequences: anti-social behaviors, crime, and sexual exploitation. Increasing positive parenting skills, as well as connecting youth and their families to community resources, can help parents and caregivers manage issues that have the potential to unravel families. On their own, youth typically are disconnected from positive communities and social networks, and the systems – education, employment, and health care – that could help them to change their circumstances.

President Bush has initiated actions to address the leading causes of youth homelessness. The Administration's initiatives include strengthening families (the Responsible Fatherhood and Healthy Marriage initiative and the Promoting Safe and Stable Families program), providing role-models and mentors to youth in disadvantaged circumstances (Mentoring Children of Prisoners programs), and promoting effective coordination among Federal agencies, as well as with State and local governments that deliver services to homeless youth, youth-at-risk, and their families (FYSB State Collaboration Grants).

The Administration's actions offer homeless youth (and their families) both positive opportunities and crucial interventions as young people strive to successfully negotiate the transition from childhood to adolescence and ultimately into responsible adulthood. An important feature is promoting the benefits of collaborations by public and private non-profit and faith-based organizations in preventing youth homelessness. Partnerships enhance resources that lead to positive outcomes within the criminal justice, mental health, medical, and welfare systems.

In December 2002, the President established the White House Task Force for Disadvantaged Youth. Given a one-year term, it was charged with developing a framework for federal youth policy -- under existing authorities and programs -- that encompasses a comprehensive Federal response to the problems facing America's youth.

Its goal was to identify strategies to enhance agency accountability and effectiveness and submit action recommendations. The Report was presented to the President in October, 2003. A key recommendation was to target special populations for support – those who "carry disproportionately negative consequences for youth and their communities if not addressed." Youth in public care (in and aging-out of foster care) and youth in the juvenile justice system were identified as examples of this population of "disconnected" and "neediest" youth.[5]

In the fall of 2005, the President and First Lady convened a national policy conference focusing on the nation's at-risk youth population, "Helping America's Youth" (HAY). The conference served as the launch of the first interactive, comprehensive web-based tool, "The Community Guide to Helping America's Youth," which was developed under the First Lady's leadership. The Guide currently includes over 180 evidence-based programs located in communities throughout the nation that prevent and reduce delinquency and other negative youth behaviors. The listed programs have been evaluated using scientific techniques and have demonstrated a statistically significant decline in these negative outcomes. The Guide is intended to facilitate strategic, efficient and effective planning. It will assist community partnerships in their collaborative efforts to prioritize issues, identify existing resources, and fill gaps or unmet needs with effective programs. Through the Guide, communities will have an additional tool in meeting the challenge of preventing and ameliorating youth homelessness.

Based on results from regional forums, the Federal Partnership has focused on creating cross-agency teams to consult with state teams; providing a "crosswalk" of key Federal program definitions and program policies in order to better align programs and funds; providing States and Tribal governments with information on the funding from each of the Federal agencies that is available in their State to serve the neediest youth; and providing models of collaboration.

The Runaway and Homeless Youth Act

The Runaway and Homeless Youth Act (RHYA) was enacted to provide the core services to stabilize and address the needs of runaway and homeless youth. The Act established and authorizes funding for programs that provide a range of supports and services for runaway and homeless youth, including pregnant and parenting teens.

The Family and Youth Services Bureau (FYSB) in the Administration for Children and Families (ACF), Department of Health Services (DHHS), administers the RHYA, awarding funds in the form of grants that support homeless youth through youth shelters, street outreach, and transitional living programs operated by faith-based and community organizations or local public or tribal agencies. These organizations and agencies also work in partnership with schools, mentoring programs, and other local, regional, tribal, or national organizations that serve youth. In the 30 years since RHYA was enacted, it has supported the efforts of local grantees targeting outreach efforts to homeless youth, assessing and responding to their needs, and stabilizing youth through reunification with their families or other permanent living options, where appropriate.[6]

Three programs receive funding under RHYA: the Basic Center Program, the Street Outreach Program and the Transitional Living Program.

Basic Center Program (BCP) – funds short-term (no more than 15 days) shelter services for youth under 18 years of age, as well as other supportive services, including counseling for youth and their family, to reunite youth and their families, or to connect youth to alternative supervised placements.

Street Outreach Program (SOP) – supports outreach activities designed to serve youth who have experienced or are at-risk of sexual abuse, prostitution or sexual exploitation. Services are available to youth under 21 years of age and can include identification and outreach, information and referral to housing and health care services as well as education and prevention services.

Transitional Living Program (TLP) – provides food and shelter, life skills, education and employment training, and other services to help youth who cannot be reunited with their families develop the knowledge and skills to live independently. Programs funded under the TLP are available to youth 16 through 21 years of age for approximately 18 months. The recent reauthorization of RHYA also includes funding for transitional living programs targeted to young mothers and their children. These maternity group homes meet the unique needs of this population and provide pregnant youth and young mothers aged 16-21 with food and shelter, as well as parenting education and support programs.

The Runaway and Homeless Youth Management Information System (RHYMIS), instituted over three decades ago and modified over time, has been used by ACF as its primary data collection tool. In keeping with the President's direction to bring greater coordination and accountability to government, RHYMIS continues to be upgraded and streamlined by FYSB. As of 2005, the enhanced "NEO RHYMIS" is used by RHYA grantees to collect and record the characteristics on the young people they serve, their critical issues, and the services received under the RHYA.

Background

When analyzing programs for homeless youth, it is important to note three factors: 1) Programs funded by RHYA have general standards and requirements that guide grantees but specific program approaches and models vary among grantees. 2) The multiple needs of homeless youth require targeted services from public systems outside the RHY network– child welfare, welfare, juvenile justice, mental and physical health care, education, housing, and labor. 3) State and local efforts to coordinate and deliver comprehensive services for homeless youth vary significantly in scope, approach, and effectiveness throughout the nation.

In order to compile and synthesize the most current information on promising strategies to end youth homelessness, a review was conducted of the literature on youth

homelessness that included studies, articles, reports and publications from academic researchers, government and youth-serving agencies. The development of a rich research base on youth homelessness is still in its early stages. Nevertheless, existing studies and data, evaluations of interventions in related fields, and information drawn from practitioners provide a window into the world of homeless youth. Understanding this population's characteristics in the context of robust social theory can help to inform the development of effective policies and practices to address youth homelessness.

Other materials consulted were "The White House Task Force on Disadvantaged Youth Final Report to the President" and "Helping America's Youth" materials, as well as information and policy analyses published by national coalitions and organizations addressing youth homelessness. Additionally, practitioners and professionals in the field were contacted for knowledge based on their experiences. The current review by ACF focused primarily on information generated since 1998, when DHHS and the Department of Housing and Urban Development sponsored the National Symposium on Homelessness Research.

There is an emerging body of research and data from both qualitative and quantitative studies that provides significant information on who homeless youth are and how they experience homelessness. Researchers have examined the prevalence of the problem, the characteristics of homeless youth, and their experiences on the street. Several researchers also have developed theoretical constructs to understand the pathways to homelessness among adolescents and to improve interventions.

However, data on long-term outcomes evaluating the effectiveness of interventions specifically addressing youth homelessness are limited. While some homeless youth programs track data to measure the effectiveness of their work, often these are not based on rigorous experimental or quasi-experimental research design. Accordingly, the Report's literature review was expanded to include interventions in related fields designed for high-risk youth that are grounded in theory and have been rigorously evaluated.

Based upon the broad review of available information on homeless youth and interventions to address youth homelessness, this Report focuses on three critical issues:

- Who the homeless youth are;
- The extent of youth homelessness; and
- The strategies which hold the most promise for addressing and ending youth homelessness.

Homeless Youth

Research conducted on homeless youth and their experiences on the street has been obtained from surveys with youth in local service agencies, including shelters, drop-in centers and transitional living programs, or in street locations in large urban cities or metropolitan areas. The Seattle Homeless Youth Project[7] surveyed youth drawn from a variety of service agencies in the Seattle metropolitan area[8] and examined adolescent substance abuse, anti-social behavior, and effects of early childhood experiences including the psychological effects of child maltreatment. Another often-cited work is that of Whitbeck[9] and colleagues[10] in four mid-sized cities in four midwestern States. In addition to examining the characteristics of homeless youth identified on the streets and in shelters in Missouri, Iowa, Nebraska and Kansas, the researchers examined the effects of street experiences (e.g., affiliation with problem peers, negative subsistence strategies, risky sexual behaviors and drug and/or alcohol use) and early family abuse on victimization and depression for street youth.

While researchers have developed a significant amount of descriptive information on homeless youth, the challenges related to tracking homeless youth over time has resulted in few longitudinal studies on this population. Consequently, there is little information on patterns of youth homelessness and factors that may be associated with more or less chronic experiences and repeat episodes of homelessness. The relationship between specific behaviors or experiences of homeless youth and long-term developmental outcomes has not been examined closely nor have the factors associated with an increased risk of homelessness or the long-term outcomes for homeless youth. Because

researchers have been unable to develop studies of homeless adolescents and their prior experiences and match them rigorously with valid comparison groups, it is difficult to conclusively determine the factors associated with an increased risk of homelessness or determine which of the characteristics attributed to homeless youth are unique to this population.

Extent of Youth Homelessness

The Substance Abuse and Mental Health Services Administration, Office of Applied Statistics, July 2, 2004, reported that in 2002, 1.6 million youths, or 7 percent of 12- to 17-year olds ran away from home and slept in exposed or poorly sheltered locations. This number corresponds to earlier credible survey estimates from 1998 (1.5 million) and 1999 (1.7 million). Estimates vary mainly because researchers use different age and definitional parameters in their measurements, and homeless youth are a transient and "mobile" population, therefore difficult to track. Youth are not easily accessible to researchers, and they often move in and out of homelessness, avoiding contact with service systems and adults.

Strategies That Hold the Most Promise for Addressing Youth Homelessness

Few programs and interventions designed to prevent or end homelessness based on theoretical constructs were found. Studies of programs have not been based on rigorous experimental or quasi-experimental research designs. This is due in part because the needs of homeless youth are so urgent that assignment to a control group, an important methodological tool in research evaluation, raises significant ethical concerns. One exception is a study, undertaken in 1994 by Cauce and colleagues, which evaluated the effects of an intensive case management program for homeless adolescents compared to a matched comparison group. The authors found that youth receiving intensive case management services showed greater reductions in aggressive and problem behavior and improved satisfaction with quality of life.[11]

Beyond the ethical questions, valid comparison groups also are difficult to develop because homeless youth are a diverse population and homelessness is an episodic

phenomenon. This makes it particularly difficult to conduct longitudinal studies of homeless youth. However, a longitudinal study of youth aging out of foster care helped to shed light on youth homelessness, as it revealed that many youth aging out of foster care became homeless.[12] In addition, two longitudinal studies with matched comparison groups currently underway will greatly contribute to the knowledge base about this population.

The Housing, Adolescence and Life Outcomes (HALO) Project funded by the National Institute on Alcohol Abuse and Alcoholism is following 251 homeless youth, and a matched housed sample of 150 adolescents over 1.5 years to document the longitudinal consequences of homelessness and to investigate risk and resilience factors associated with negative and positive outcomes.[13] Similarly, the National Institute on Mental Health has provided funding for *Project i*, a five-year study of homeless young people in Melbourne, Australia and Los Angeles, CA.[14] The study seeks to understand the life course of new homeless youth and the factors that influence youth's pathways in and out of homelessness as well as their risk of contracting HIV. In Los Angeles alone, *Project i* is following approximately 240 new homeless youth (youth who report having left home for no more than 180 days) and 200 more experienced youth (youth who report having left home for more than 180 days) over a three-year period. Results of these evaluations should benefit decision-makers in designing interventions for the homeless youth population.

II. Understanding the Problem

Who Are Homeless Youth?

Despite the complexity and episodic nature of youth homelessness and the limited availability of longitudinal or comparative studies, emerging research on youth homelessness helps us to understand several important aspects of this population.

Defining Youth Homelessness

Defining who is a "homeless youth" is neither easy nor straightforward. It involves an array of issues concerning age, length of time on the street or in arrangements without supervised adult care-givers, and the circumstances that led the youth to be on their own without a permanent residence.

Different terms are used to refer to homeless youth depending on how they came to be separated from their families. "Homeless youth" typically refer to youth who are on their own or "unaccompanied" by their caregivers. Adolescents who are homeless with their families and served by interventions targeted to homeless families are generally not included in studies focused on homeless youth. "Runaway youth" are youth who have left their home without the consent of their parents or legal guardians, while the term *throwaway* (or thrown-away) is frequently used to refer to youth who have been asked or told to leave by their parents or caregivers.

In general, when defining homeless youth, researchers have placed less emphasis on the setting or place where youth reside and have focused on the presence or absence of an adult caregiver.[15] Federal guidelines define homeless youth as "unaccompanied youth" or adolescents "on their own" living in a shelter, public place or with a stranger because they needed a place to stay.

While the majority of homeless youth reside in shelters or "sofa surf" with multiple acquaintances, a subpopulation of youth referred to as street youth spend a significant amount of time living on the streets or in inappropriate locations, such as abandoned buildings, cars, or under bridges. Street youth tend to have the most chronic experience of homelessness, and face the highest level of risk.

As theory and research regarding adolescent development have expanded over the last 20 years, scholars and practitioners generally have come to accept that 18, the legal age of adulthood, is not the age at which individuals reach adulthood developmentally. Accordingly, many interventions targeted to homeless youth serve individuals through age 21, and in some cases, through age 24. Likewise, researchers examining the problem of

youth homelessness and interventions to address it, frequently include "youth" older than age 18 in their studies.

The Runaway and Homeless Youth Act defines homeless youth as individuals not more than 21 years of age and restricts programming provided with RHYA funds to this age range. For purposes of this report, the literature review focused on unaccompanied youth and has included research focused on homeless youth, regardless of the upper age defined by researchers.[16]

As with Federal guidelines related to domicile, researchers typically include youth who have spent at least one night in a homeless setting (e.g., shelter, street or other public place or with a stranger) in their count when determining the number of youth who experience homelessness. Youth's homeless episodes vary greatly across studies: some youth report being homeless for the first time; some have experienced multiple (although short-term) homelessness episodes; and others report being homeless for a period of several months. Although researchers have identified youth with more chronic homeless episodes (i.e., one year or longer), research into chronic homelessness among youth is relatively sparse.[17]

Given these issues, a research-based substantiated estimate of homeless youth remains elusive.

Characteristics of Homeless Youth

Numerous studies indicate that certain characteristics are more prevalent among runaway and homeless youth than their peers. Among these trends are alcohol and other drug abuse, poverty/economic instability, and mental health disorders.

Alcohol and Other Drug Abuse

Studies indicate that homeless adolescents report higher frequencies of alcohol and other drug use and abuse than housed adolescents.[18] Analysis of 2003 FYSB data indicate that alcohol and other drug abuse was a critical issue for 23.5 percent of youth in Basic Center Programs and 42.3 percent of youth in TLPs.

Poverty/Economic Instability

Research is somewhat mixed regarding the extent to which family poverty is a common factor among homeless youth. This is likely because family conflict and related issues, which appear to be the primary factor associated with youth homelessness, occur across the spectrum of socioeconomic backgrounds. In addition, Cauce and colleagues note that although most homeless youth come from difficult backgrounds, those difficulties cannot be assumed to include poverty or economic disadvantage.[19]

Mental Health Disorders

Researchers have found high rates of a number of psychiatric disorders among homeless youth, including depression, anxiety, ideas of suicide, and conduct disorders. MacLean and colleagues found that of 354 homeless youth, 76.9 percent met the American Psychiatric Association's DSM-III-R criteria for at least one disorder – about eighteen percent were depressed and forty-three percent reported having attempted suicide.[20] Mental health was the third most commonly cited critical issue for youth in Federally-funded Basic Center Programs – identified by 30.9 percent of shelter youth in 2003. The issue was also identified by 41.3 percent of TLP youth.

It remains difficult to determine whether psychological and emotional disturbance is associated solely with homelessness, family violence or parental abuse, youth's use of alcohol or drugs, or a combination of these.[21]

Despite the high rates of mental health disorders among this population, preliminary research notes that homeless adolescents often lack access to health and mental health care. In addition, it is possible that homeless youth do not seek health care because they distrust authority and are likely to be asked for a permanent address, health insurance information or parental permission for treatment.

<u>Pathways to Homelessness</u>

Self-reported data from youth and research on the characteristics of homeless youth suggest common pathways to youth homelessness. Specifically 1) the presence of family conflict and violence, 2) foster care placement and 3) involvement in the juvenile justice system appear to place youth at greater risk of experiencing homelessness.

Family Conflict and Violence

Homeless youth report experiencing many types of family conflict in their homes, including fights with parents or caregivers, parental rejection, as well as neglect and/or abuse by a parent, caregiver, or other individual with access to the home.

- Youth who have been "thrown out" of their homes were more likely than other homeless youth to report spending a night away from home because of family conflict.[22]
- Whitbeck and colleagues found that parents of runaways reported high rates of serious violence between parents and their children.[23]
- RHYMIS data (2003) from FYSB-funded shelters and residential programs indicates that 89.7 percent of runaway youth entering shelters and 75.5 percent of homeless youth joining residential programs rate family dynamics as a critical issue leading to their homelessness.
- Approximately 28 percent of runaway youth who entered the shelters cited abuse and/or neglect as a critical issue.
- High rates of physical and sexual abuse occur among this population. In their analysis of antecedents to homelessness, Yoder and Whitbeck report that neglected and sexually abused youth (regardless of their ages) were approximately three times more likely to run away than were non-neglected youth.[24] Among the most rigorous studies, rates of sexual abuse tend to cluster in a range from 21 to 42 percent.[25]
- While both boys and girls experience parental or caregiver abuse, girls are more likely than boys to experience sexual abuse.[26] Available research shows that many youth who have been sexually abused have been abused by more than one person.[27]

- Research on the negative consequences of physical and sexual abuse points to a connection between sexual abuse and suicidal notions among homeless youth.
- Rejection is likely to lead to homelessness for subpopulations of youth. In their comparative study of heterosexual and gay, lesbian, bi-sexual, and transgender (GLBT) youth, Cochran and colleagues found that GLBT youth indicated leaving their homes because of conflicts with parents over their sexual orientation.[28]
- Family conflict resulting from teen pregnancy may lead to adolescent homelessness.[29]
- Teen mothers have a higher risk of becoming homeless than their peers and compared to adult mothers, teen mothers are more likely to be homeless at a younger age and homeless more often than adult mothers.[30]
- Homeless parenting teens are often served by interventions targeted to families rather than youth. As a result, homeless youth with children often are not included in estimates and studies of homeless youth, which could impact policy decisions.

Foster Care Placement

One population particularly prone to homelessness is adolescents who have had experiences with the child welfare system.

- Courtney and colleagues interviewed 474 foster care youth in Illinois in out-of-home care and found that over 52 percent had run away at least once; of these, two-thirds reported more than one run.[31]
- In a study of 364 homeless youth in Washington, Cauce et al., found that 33 percent of the youth in the study reported a foster home placement -- the average number of placements was 3.3 with 14 percent reporting four or more placements. In addition, 18 percent of the time, homelessness resulted from a youth being removed from their parents by a public official.[32]
- Youth may run away due to reluctance to enter foster care, or unhappiness with foster care placements. Youth who have emancipated or who "age out" of the foster care system upon their 18th birthday are at particularly high risk of becoming homeless.

- Emancipated youth often lack "permanency" and do not have the independent living skills necessary to make a successful transition to self-sufficiency. They are disconnected from families and caring adults and lack the education and employment skills needed to obtain employment and maintain a household.
- Youth who age out of the foster care system are more likely to abuse drugs and alcohol and are more likely to be involved with the criminal justice system.[33] In their longitudinal study of youth leaving foster care, Courtney and colleagues found that of the 141 youth who left foster care, approximately 12 percent reported being homeless at least once since discharge and a significant number (22 percent) had lived in four or more separate places since discharge.[34]
- A study of foster care alumni found that 22 percent were homeless for one or more nights at any time within a year after being discharged from foster care and almost one out of five were homeless for the first time ever for a week or more after leaving foster care.[35]

Juvenile Detention

Though limited, the existing body of research documents high rates of involvement with the juvenile justice system among homeless youth (statistics on the number of youth that become homeless upon release from incarceration are not available).

- Data from a homeless youth shelter in New York City indicate that approximately 30 percent of the youth who entered the shelter had a history of incarceration.[36]
- Analysis of data from nine Federally-funded shelters in Northern Washington State found that out of 940 surveyed youth, 28 percent were involved with the juvenile justice system.[37]
- Results from a statewide survey in Minnesota revealed similar rates of juvenile justice involvement among younger and older homeless youth. Among 209 homeless youth ages 17 and younger, close to half (46 percent) had spent at least one night in a detention center, while approximately two-fifths (38 percent) of the 285 homeless young adults (ages 18-20) surveyed also reported spending at least one night in a detention center.[38]

- Both age groups from the study reported that having a criminal background interfered with getting or keeping housing.[39]

Prevalence of the Problem

Homelessness among youth is a problem defined by a constellation of constantly changing variables in the lives of youth – where they live, the status of their relationship with caregivers, and their age. In the course of a year, a single youth might be asked to leave home by a parent, spend time in a shelter, return home, runaway from home, and end up on the street. Depending on when a researcher interacted with this young person, he or she might be classified as homeless or housed, runaway or "thrown-away", or a street youth. If he or she were age 21 and turned 22 during the course of the year, some researchers might include this person within the population of homeless youth, while others would not. Classifying youth within these categories is necessary for researchers to capture the prevalence and severity of youth homelessness, the reason it occurs, and how it may be changing over time.

- Estimates of the prevalence of youth homelessness range from 500,000 to 2.8 million youth, depending on the sampling methodology and definitions of youth homelessness used.
- The DHHS Substance Abuse and Mental Health Services Administration reported that in 2002, 1.6 million youths, or 7 percent of 12- to 17-year olds, ran away from home and slept on the street during the study year.
- Analysis of survey data from a national probability sample of households and juvenile facilities indicates that in 1999, 1.7 million youth had a runaway/throwaway episode. The authors report that youth ages 15-17 years accounted for two thirds of youth with runaway/throwaway episodes during the study year.[40]
- These and other studies of the prevalence of youth homelessness do not typically include individuals 18 and older, making it difficult to determine how many youth between the ages of 18-24 experience homelessness annually.[41]

Duration of Homelessness

Research findings suggest that youth homelessness typically is an episodic phenomenon, although it appears that street youth tend to have more chronic homeless experiences.

- Because youth typically transition in and out of homelessness, the total accumulated time they spend on their own may be a better indicator of their homeless experience than the length of any single episode. Whitbeck and colleagues found that adolescents in the homeless population reported an average of 123 days on the street in their lifetimes.[42]
- Halcón and Lifson report that estimates of long-term (up to one year) homelessness among youth vary from 25 to 80 percent.[43]
- A study of 631 shelter youth residing in Federal and non-federally funded shelters and 528 street youth, found that while almost half the street youth had currently been away from home for more than a year, the majority of the shelter youth had been away less than one month.[44]
- Because older youth have had longer time to accumulate homeless experience, studies that include adolescents over the age of 18 are likely to document more chronic patterns of homelessness.[45]

To date, few studies have examined the factors that lead youth to have chronic compared to single episodes of homeless experiences.

Street Life and Homeless Youth

The homeless subpopulation of street youth is most at-risk of negative outcomes.[46] While there is no data clearly indicating the long-term effects of living on the street as a youth, it is clear that the realities of street life lead many young people to engage in a range of high-risk behaviors, both in order to meet basic survival needs, and as a result of engaging with other troubled peers. Though peers on the street provide friendship, support and a sense of community, they also may introduce youth to and/or reinforce

negative and risk-taking behaviors. In addition, street youth are particularly vulnerable to victimization, including assault and sexual exploitation.

Studies have shown that street youth engage in a multitude of risky behaviors that include 1) alcohol and other drug abuse, and 2) sexual and criminal activities. Research finds that youth are likely to engage in negative activities as a result of peer dynamics involved in engaging with other troubled peers and/or in order to survive street life.

Substance Use and Abuse

- In a study of street youth in the Midwest, almost one half of the males and one third of the females sold drugs.[47]
- High rates of affiliation with troubled peers were associated with substance abuse and dependence.[48]

Sexual and Criminal Activity

- Many homeless youth engage in "survival sex" (exchanging sex for shelter, money, drugs, food or clothing). In their nationally representative sample, Greene, Ennet and Ringwalt noted that 27.5 percent of street youth and 9.5 percent of shelter youth reported participating in survival sex (1999). In a study of 203 homeless and street youth in Minneapolis, Halcón and Lifson found that more than one in five youth reported a history of exchanging sex for money, drugs or other goods.[49]
- In a study of 272 homeless youth in Seattle, Wagner and colleagues determined that almost 80 percent of those interviewed engaged in sexual activity in the three months prior to the study. Sexually active youth reported having had at least one sexually transmitted disease, and of the sexually active women, a large number had been pregnant at least once.[50]
- Gay, bisexual, and transgender males report high rates of unprotected intercourse, sex with persons known to be HIV-positive, sex while high on drugs and sex with an injection drug user.[51]

- Whitbeck and colleagues found that adolescent females were more likely to engage in survival sex than adolescent males. In addition, Moon found that compared to their heterosexual counterparts, male and female GLBT participants were more likely to report exchanging sex for money.[52]

Homeless Youth as Victims of Crime

Recognizing that a large proportion of homeless youth come from violent and abusive family backgrounds, researchers have explored the consequences of a family abuse history on the likelihood of homeless youth being victimized. Because homeless youth who have been victims are at risk of engaging in negative behaviors, lack adult supervision or connection and live in dangerous environments, they are particularly vulnerable to physical and sexual assault.

- Whitbeck and colleagues traced the process through which early abuse by caregivers increases the likelihood of anti-social behaviors among homeless adolescents. Their study revealed that family abuse was correlated with physical and sexual abuse/exploitation on the street – 25 percent of the females and 9.2 percent of the males reported that they had been forced to engage in some form of sexual activity while at home, while a smaller percentage reported that they had been sexually assaulted or raped.[53]
- Severity and occurrence of abuse vary by gender.[54] In their study, Cauce and colleagues found that males reported higher rates of physical assaults than females while more females than males reported instances of rape.[55]
- Street youth have fewer resources with which to respond to physical and sexual assaults, due in part to their fear that authorities may have them returned to their families or placed back in the public system from which they have run away.[56]

Given what is known about the characteristics of homeless youth and their experiences on the street – high levels of victimization and engagement in risky behaviors and subsistence activities (sexual and criminal) – it is clear these youth are particularly vulnerable to experience further instability, injury, compromised mental and physical health, and chronic homelessness.

III. Theoretical Perspectives

Several theoretical perspectives focused on youth homelessness illuminate the social development of youth and the dynamics of interaction between homeless youth and their families, peers, and environments. These perspectives integrate research on the characteristics of homeless youth with research on adolescent development, juvenile risk and anti-social behaviors, and the impact of family dynamics and poverty.

Two general frameworks that can inform work with homeless youth are youth development (personal and social assets) and ecological-developmental perspectives. Additionally, there are two models researchers use to explain the trajectory of youth homelessness – the Risk Amplification Model (RAM) and the Life Cycle Model.

Youth Development Perspectives

Programs for homeless youth need an environment in which youth are given opportunities to participate in decision-making, as well as necessary resources and supports to help them avoid or overcome difficult situations and risky behaviors. A key tenet of the youth development perspective is that remediating and preventing negative behaviors is not enough. Interventions are needed that focus on preparing youth for successful adulthood by fostering development of positive traits.[57] ACF's Positive Youth Development (PYD) approach to working with homeless youth includes prevention and resiliency. Prevention research identifies risk factors that lead to specific problem behaviors, as well as protective factors that help children and youth avoid negative behaviors. Resiliency research shows that children who are able to overcome situations of disadvantage typically possess strong social skills, pleasing personalities, strong intellects[58], and possess a sense of independence and purpose.[59] They also have connections to caring adults who encourage them to aim high and opportunities to contribute through participation in meaningful activities.[60]

The very factors that place homeless youth at risk – the inability of youth and their families to maintain supportive relationships – make the task of preparation for adulthood all the more urgent. In the United States young people often have maintained a level of dependence on family into their early to mid-twenties, while experimenting with roles, gaining education, and developing more intimate and lasting relationships. Young people who experience homelessness do not have the security of family guidance and resources as they negotiate the challenges of adolescence and the transition to adulthood (often at an earlier age than other young people).

In recent years, youth development researchers and theorists have synthesized findings from these areas – adolescent development, prevention, and resiliency research – and have developed comprehensive lists of developmental assets. Assets are positive traits that indicate successful development in adolescence and greater preparation for successful transition to adulthood. Generally speaking, the more assets that young people possess, the better prepared they are for a healthy and successful adulthood.[61]

Personal and Social Assets that Facilitate Positive Youth Development
From Community Programs that Promote Youth Development

Physical Development
- ✓ Good health habits
- ✓ Good health management skills

Intellectual Development
- ✓ Knowledge of essential life skills
- ✓ Knowledge of essential vocational skills
- ✓ School Success
- ✓ Rational habits of mind
- ✓ In-depth knowledge of more than one culture
- ✓ Good decision-making skills
- ✓ Knowledge of skills needed to navigate through multiple cultural contexts

Psychological and Emotional Development
- ✓ Good mental health including positive self-report
- ✓ Good emotional self-regulation skills
- ✓ Good coping skills
- ✓ Good conflict resolution skills
- ✓ Mastery motivation and positive achievement motivation
- ✓ Confidence in one's personal efficacy
- ✓ "Planfulness" – planning for the future and future life events
- ✓ Sense of personal autonomy/responsibility for self
- ✓ Optimism coupled with realism
- ✓ Coherent personal and social identity
- ✓ Prosocial and culturally sensitive values
- ✓ Spirituality or a sense of a "larger" purpose in life
- ✓ Strong moral character
- ✓ A commitment to good use of time

Social Development
- ✓ Connectedness – perceived good relationships and trust with parents, peers, and some other adults.
- ✓ Sense of social place/integration – being connected and valued by larger social networks
- ✓ Attachment to prosocial/conventional institutions, such as school, church, nonschool youth programs
- ✓ Ability to navigate multiple cultural contexts
- ✓ Commitment to civic engagement.

The National Research Council synthesized many separately identified sets of assets into one comprehensive list of developmental assets. The assets are organized around four

developmental areas: physical development, intellectual development, psychological and emotional development, and social development.

Among other research, Catalano and associates conducted a comprehensive review of evaluations of positive youth development programs, and found that successful programs included strategies that focused on:

- Strengthening social, emotional, behavioral, cognitive, and moral competencies;
- Building self-efficacy;
- Sharing messages from family and community about clear standards for youth behavior;
- Increasing healthy bonding with adults, peers, and younger children; and
- Expanding opportunities and recognition for youth.

They also found that successful programs strive to provide structure and consistency in program delivery, typically through the development of curriculum that guides interaction between workers and youth. Successful interventions usually were longer-term, with involvement by youth for at least nine months.[62]

Finally, reviews of evaluations and theoretical research were conducted by the National Research Council. The review identified these features of positive developmental settings:

- Appropriate structure
- Integration of family, school, and community efforts
- Supportive relationships
- Opportunities to belong
- Positive social norms
- Support for efficacy and mattering
- Opportunities for skill building
- Physical and psychological safety

Youth development theorists emphasize that individuals do not develop assets solely by understanding and avoiding risk. They also must have a whole range of positive opportunities: for nurturing and mutual relationships with adults and peers; to explore talents and interests and develop a sense of competence and personal identity; to engage in leadership and decision making and develop a sense of self-efficacy and control over their future. In the case of youth aging out of foster care, the PYD approach offers opportunities for young people to select services they believe will help them in their future. The Federal Interagency Council on Homelessness, noting that "consumer preference" should be included in homeless youth program design, has found employment and housing are key "consumer choices" by youth aging out of foster care.

Naturally, interventions targeted to homeless youth must address urgent basic needs for safety, nutrition, supervision and shelter, and pressing physical and mental health problems. However, practitioners recognize that prevention and remediation provide youth with positive developmental opportunities and are not mutually exclusive or competitive. Implicit in youth development theory is the belief that interventions are most effective when staff engage youth as partners in planning and decision-making. Each youth should be seen as an individual and an adult-in-progress, with unique strengths and assets. Creativity, mutual respectfulness and the quality of person-to-person relationships between program staff and youth can make a significant difference in fostering trust, motivation to grow, willingness to listen as well as speak out, and other factors needed by youth to learn from and work with adults.

For instance, a substance abuse program might incorporate the dramatic arts in order to provide for self-expression and an opportunity to tap into latent talents, not only in performing, but in organizational and technical skill areas such as event management, stage direction, sound and lighting. In place of short-term basic budgeting courses for foster care youth that focus on the dangers of financial irresponsibility, a program could offer opportunities to set financial goals and accumulate assets through matched savings accounts (Individual Development Accounts) and/or entrepreneurial training.

The PYD perspective is gaining greater recognition as a way to view juveniles – regardless of their circumstances – as individuals who possess positive as well as negative attributes. In order to promote the tenets of PYD and enhance youth worker competencies, FYSB's regional technical assistance providers offer PYD and other training to program administrators and youth workers throughout the country. Other efforts to establish youth worker competencies and offer training in youth development principles occur at the national and local levels, including the Department of Labor's 2002 National Youth Worker Apprenticeship Initiative. These training projects enhance staff understanding of the most effective means for placing youth development at the core of programs for youth who are already homeless or at risk.

Finally, it is important that programs serving homeless youth develop partnerships with a variety of organizations and agencies in their communities in order to support positive youth development. While individual programs may not have the resources to offer a full array of developmental opportunities to meet youth's varied interests – programs can link youth to a variety of available resources through partnerships and collaborations.

Ecological-Developmental Perspective on Youth Homelessness

In general, the ecological perspective encourages researchers, program designers and practitioners to consider the extent to which community factors and characteristics of individuals interact to lead to homelessness, rather than focusing exclusively on individual traits.[63] Haber and Toro emphasize that youth homelessness should not be conceptualized as either the result of failure or poor adaptation on the part of adolescents or their parents, but rather as a breakdown of the parent-adolescent relationship, which takes place within and is influenced by a whole constellation of social factors, such as economic stress, peer associations, and levels of community violence. They further suggest that youth experiences within their families and in the larger social environment will have different effects on young people depending on their stage of development. Thus, effective interventions must be tailored to address the individuals' developmental stage as well as the context of their relationships and their environment.

Applying an ecological-developmental perspective to youth homelessness has a number of implications for intervention. Perhaps most compelling is the importance of understanding and attempting to address social trends contributing to homelessness as well as individual traits. The ecological perspective suggests that interventions to prevent and ameliorate youth homelessness should place more emphasis on youth in the context of their families and communities. For example, several studies on homeless families, suggest that the availability of subsidized housing is as important in predicting future residential stability as individual characteristics of parents.[64] While the trajectories of homelessness are different for youth and families, the need for affordable housing is shared by both. Indeed, since some youth cannot reunite safely with their families, they need resources to transition into living independently in their communities.

Risk Amplification Model (RAM)

According to the RAM model, youth homelessness involves a pattern of exposure to increasing risks related to negative social interactions and environmental disruptions. Critical factors integrated in this theory include the influence of family environments and peer networks on youth. Essentially, the theory proposes that risks associated with family conflict and negative peer networks lead to and are then compounded by the experience of homelessness.[65] The theory integrates research on the high degree of family conflict reported by homeless youth, as well as research indicating the critical role that both early family influences and peer influences have on negative behavior in adolescents.[66 67] Building on this research, RAM suggests that youth who experience family conflict and violence at home, and those who associate with anti-social peers are more likely to end up homeless. Once homeless, these youth are more likely to continue to associate with anti-social peers, engage in high-risk activities such as drug abuse and survival sex, and be victimized. These experiences amplify the risks experienced prior to homelessness and compound the negative outcomes, such as antisocial behavior, depression, and addiction. As the problems youth experience are multiplied, it becomes increasingly difficult for them to successfully transition to more stable living

arrangements and develop healthy relationships with family or other caregivers as well as positive peers.

RAM underlines the importance of early intervention and the need to quickly stabilize homeless youth through reunification with their families or placement in other settings. The first experience of homelessness often is a critical intervention point since the greater number and length of homeless episodes youth experience, the greater the risk amplification. It also is essential to maintain contact with the young people to prevent additional episodes of homelessness. However, emergency shelters which frequently have contact with youth early in their experience of homelessness, are primarily focused on short-term stabilization. While some emergency shelters put strong emphasis on continuing support, many have very little in the way of resources to support follow-up services. This is particularly problematic for youth who return home. In all likelihood, many of them are returning to troubled home environments, and their experiences while homeless may have increased the challenges they face in successfully readapting to their families or households of origin. Runaway and Homeless Youth Act-funded shelters are required by statute and the program standards to provide after-care and to conduct follow-up contacts when runaways are returned to their parents or guardians. However, they are rarely in a position to investigate and confirm that all is well.

Research on adolescent development emphasizes the importance of youth establishing strong connections with their peers and the strong influence that peers can have on social development and behavior. Homeless youth often depend on peers for emotional support and for meeting their basic needs, which can have both positive and negative outcomes. Drawing upon such studies, RAM also hypothesizes that association with anti-social peers can significantly amplify the risks associated with youth homelessness. The influence of peers also has implications for practice.

Life Cycle Model of Youth Homelessness

Similar to RAM, the Life Cycle Model of youth homelessness focuses on the trajectory of homelessness for street youth. The Life Cycle Model, developed by researchers at the University of California at San Francisco, is based on a small, exploratory ethnographic study of street youth in that city. Though the study involves a small number of youth in a specific setting, it nevertheless provides a useful framework for conceptualizing cycles of homelessness for street youth.

Based on youth observations gleaned from exploratory and semi-structured interviews, researchers developed a proposed model of life on the street that includes seven stages. (1) In the "first on the street phase," youth struggle with intense feelings of "outsiderness" and the burden of meeting basic needs. (2) The difficulties of life on the street may lead youth to seek help from systems or return home and potentially escape street life. (3) Youth who remain on the street are initiated into the culture of street life by "street mentors", typically their peers. (4) They learn necessary survival skills, are acculturated into belief systems rejecting mainstream society and validating life on the street, and frequently begin using and/or selling drugs. (5) As youth become more accustomed to living on the street they enter a stage of "stasis" in which they are generally able to meet basic needs, may have strong, though often ambivalent, relationships with other street youth, and have a strong mistrust and rejection of mainstream society. (6) The "stasis" stage is interrupted by frequent periods of "disequilibrium", when their ability to continue to survive on the street is threatened by a variety of experiences, such as victimization, conflicts with peers, and arrests. (7) When youth are in disequilibrium, they may question their way of life, or come into contact with mainstream institutions that help them to escape street life. Disequilibrium may also reinforce street youths' perception of themselves as outsiders and their distrust of mainstream institutions. Depending on these experiences, youth may extricate themselves from street life, remain on the street, or experience cycles of return to mainstream life followed by recidivism.[68]

Though the Life Cycle Model is still preliminary and based on a small sample, findings suggest that the openness of youth to effects from interventions will vary depending on what stage they are in. Youth who are just entering the street and youth who are experiencing disequilibrium are likely to be the most responsive to outreach and intervention. Street outreach programs could place more emphasis on targeting youth who are new to the streets and actively work to engage these young people in supportive environments before they are initiated fully into street life. Street outreach programs also could focus activities on a few "non-street" settings and develop partnerships where youth experiencing disequilibrium are most likely to be found, such as in emergency rooms or jails. In addition, the model's emphasis on the influential role of initiation into the culture of street life suggests that mentoring homeless youth at this stage of their experience may be an effective strategy for discouraging homelessness. Auerswald and Eyre further suggest that just as youth have to learn "street smarts" in order to survive on the street, to successfully escape the street they need to learn "mainstream smarts." This involves modifying belief systems that reject mainstream society, establishing a means of supporting oneself, and developing relationships with healthy peers and connecting with adult mentors from faith-based and community programs, youth sports organizations, education and youth service programs in the community.

IV. Interventions To Prevent Youth Homelessness

Pathways leading young people to homelessness are largely related to family dynamics. Family conflict is the most common factor reported by youth for being on their own (RHYMIS data).[69] In addition to negative family dynamics, when families are either unable or unwilling to care for and/or control their children, out-of-home placements in foster care and juvenile detention settings have been identified as antecedents of youth homelessness.

Preventing youth homelessness requires strengthening families, a consistent domestic policy theme of the Bush Administration. By helping parents develop the capacity to care and nurture their children, the risk of youth homelessness is greatly reduced. Risk factors that lead

to family conflict and residential placements must be addressed and protective factors at the individual, family and community levels must be supported.

Interventions most directly relevant to youth who are at high risk of homelessness, and supported by theory and evaluative research include: family interventions to prevent child abuse and neglect; interventions to reduce juvenile violence; and, interventions that support successful transitions.

Preventing Child Abuse and Neglect

As data have revealed, a high portion of homeless youth experience abuse and/or neglect in their homes. Therefore, it is crucial that interventions take place as early as possible to create violence-free and stable families. Within nurturing families, children can grow and move safely through adolescence and into adulthood. At ACF, several initiatives to support families have been advanced, including responsible fatherhood, and healthy marriage activities, as well as programs in the Promoting Safe and Stable Families statute.

Parent support and education strategies, often provided as components of comprehensive, community-based family supports, can strengthen families, connect families to community resources, promote positive parenting and increase parents' capacity to care for their own children.

Currently, approximately 500,000 children are in Foster Care as a result of being removed from their homes as a result of a child abuse investigation or assessment. These children are at greater risk of brain damage, developmental delays, learning disorders and problems forming relationships; further, they have a greater risk of engaging in antisocial and criminal behavior later in life.[70] Children who are removed from their homes and enter foster care are particularly at risk for homelessness.

Changing negative family dynamics is essential to eliminating the primary reason adolescents leave home -- family conflict. To date, most of the intervention research on preventing child maltreatment has focused on parent education and home visitation programs. Although not conclusive, evaluation findings suggest that these intervention approaches hold promise for preventing child abuse.

Parent Education

RHYMIS data reveals that family conflict is the most often cited reason youth give for leaving their homes. The goal of parent education is to help parents (or caregivers) gain the knowledge and skills to be effective parents/caregivers and to facilitate the development of healthy children. Parent education programs that focus on improving parenting and life skills can be delivered in a variety of settings, and often target at-risk families (pregnant and parenting teens, single-parents and low-income families). Programs range in their approach, with some grounded in behavioral principles, such as parent nurturing, and others grounded in psychological principles, such as parent effectiveness training.[71]

Research findings demonstrate that some parent education programs lead to reductions in risk factors for child abuse and neglect as well as improvements in parenting skills. Studies have found decreased levels of stress and unhappiness among program participants as well as increased knowledge of child development and attitudes toward parenting and discipline.[72] Unfortunately, most studies have focused on short-term gains of knowledge, skills or behaviors, and little is known about the long-term impact of these programs.[73]

Home Visiting

Home visiting programs are predicated on the view that one of the best ways to reach families with young children is to bring services to them, rather than expecting them to seek assistance in their communities. A person trained in child development (e.g., a nurse or other professional, a certified parent educator or other paraprofessional) visits

the home of new or expectant families to deliver information, coach effective parenting behavior, conduct outreach and needs assessments, and other case-finding activities.[74]

Although home visiting programs vary, researchers have identified key factors that are likely to maximize program effectiveness: 1) comprehensive, frequent visits; [75] 2) flexible core educational program; 3) staffing by well-trained professionals; and, 4) connecting families to needed services.[76] However, because studies of home visiting programs have not tested the same intervention, it is not possible to know which service delivery component or combination of components is most effective in achieving positive outcomes for children and families.

Reducing Violence and Delinquency Among Juveniles

Two family-based prevention/intervention approaches, Functional Family Therapy and Multi-Systemic Therapy, have strong evidence documenting their effectiveness in reducing juvenile violence and delinquency. Both service delivery models aim to strengthen and stabilize youth and their families, prevent antisocial behaviors and address the environmental factors associated with delinquency.

Homeless youth have high levels of involvement with the juvenile justice system.[77] Interventions to stabilize troubled juveniles, prevent antisocial behavior problems and disruption, or removal from home may help youth to avoid trajectories of amplified risk and eventual homelessness. The body of research evaluating violence and juvenile delinquency prevention programs is much better developed than the body of research focused on homeless youth. Interventions that have been studied and evaluated include programs designed to promote a resilient family environment that supports healthy family relationships and positive connections for youth.[78] Functional Family Therapy and Multi-Systemic Therapy both have a sound base of scientific research supporting their effectiveness in reducing violence and delinquency among youth.

Functional Family Therapy

Functional Family Therapy (FFT), an outcome-driven approach used and tested for over 30 years, is a family-based prevention/intervention program for youth, ages 11 to 18, at risk for, or presenting, problem behaviors. The primary goal of FFT is to produce positive outcomes by preventing the continuation of targeted activities in identified youth – for example, delinquency, violence and substance use.[79] The program seeks to address adolescents' issues within their families, their communities and the systems that youth and families rely upon – schools, health care, child welfare and juvenile justice. The FFT model also places emphasis on respecting the manner in which all family members experience the intervention process. The program can be home-based, clinic-based or school-based. A major goal is to meet with families in settings where they are most comfortable and receptive.

FFT programs aim to motivate families to change by identifying and building on the family's strengths and providing specific ways to overcome difficulties.[80] The therapy model uses a multiphase intervention map that outlines specific goals. Each of the model's three phases includes an assessment process that focuses on understanding the ways in which behavioral problems develop within family relationship systems.

- **Engagement and motivation** – The initial phase is designed to engage, motivate and retain families and targeted youth in prevention/intervention activities by developing credibility in the intervention process and enhancing families' perception that positive change is possible. During this phase, such risk factors as negativity, blaming, hopelessness and lack of motivation are addressed, while at the same time nurturing such protective factors as trust, credibility, alliance and treatment availability (i.e., minimizing those factors that might signify insensitivity and/or inappropriate resources).
- **Behavior change** – During the next phase, families and FFT clinicians develop and implement intermediate and long-term behavior change plans that are culturally appropriate and specifically tailored to the unique characteristics of each family member. The assessment focus includes attribution-processes and coping strategies, reciprocity of positive behaviors and competent parenting. To

help families achieve the desired behavior change, within the family's relational system, clinicians guide and model specific behavior changes (e.g., parenting, communication and conflict management).

- **Generalization** – The final phase of the intervention focuses on applying positive behavior change to other issues, problems or situations affecting the family. The focus is on enhancing the family's ability to maintain change and prevent relapse by linking families to available community resources and mobilizing the community supports and services necessary to maintain the intervention's positive impact.

Studies have shown that when compared with no treatment, other family therapy interventions and traditional juvenile court services, such as probation, FFT can reduce adolescent re-arrests by 20 to 60 percent.[81] Significantly, in addition to its effectiveness in reducing adolescents' re-offense rates, the model also has been shown to successfully reduce the onset of delinquency among the siblings of treated adolescents[82]

Studies also indicate that FFT reduces treatment costs to levels well below those of traditional services and other interventions. Total "crime-cost" (system cost plus crime victim cost) savings using FFT are significantly greater than the potential savings achieved as the result of all other residential and probation-based services.[83]

Multi-Systemic Therapy

Multi-Systemic Therapy (MST) is an intensive family- and community-based clinical intervention approach targeted to chronic, violent or substance-abusing juvenile offenders, ages 12 to 17, at risk of institutional placement. MST posits that youth antisocial behavior is rooted in a variety of environmental factors and innate characteristics of the individual youth and his or her family.[84] Consequently, the treatment model aims to target those factors associated with delinquency in all aspects of young people's lives (e.g., family, peers, school and neighborhood). MST uses the strengths of each system to facilitate and promote behavior change in the youth's natural environment.

The treatment approach focuses on a home-based model of service delivery, which helps to overcome barriers to service access, increases family retention and enhances the maintenance of treatment goals. MST services also can be delivered in schools and other community settings. Initial therapy sessions identify the strengths of the adolescent and family, and the positive aspects of their transactions with peers, friends, school, parental workplace, and other relevant systems. Problems are targeted for change and the resources (i.e., strengths) of each system identified to facilitate such change. A major goal of the intervention is to empower parents by providing them with the skills and resources necessary to address the challenges of raising teenagers and to empower youth to cope with family, peer, school and neighborhood problems. Through this process, a treatment plan is developed that is both family-focused and family-driven, identifies treatment goals at the family, peer and school level and takes into account extended family, community and informal support networks for the family.

Since 1986, MST has been evaluated in over 20 randomized clinical trials with a variety of youth and their families. Results of controlled studies with violent and chronic juvenile offenders have shown MST's effectiveness in reducing youth criminal activity and violent offenses. Evaluations of MST for serious juvenile offenders have demonstrated reductions of 25 to 70 percent in long-term rates of re-arrest.[85] These outcomes signify the potential cost savings associated with MST in comparison to traditional services (e.g., incarceration, hospitalization).

By reducing juvenile offense rates and stabilizing youth involved with the juvenile justice system, both Functional Family Therapy and Multi-Systemic Therapy hold promise for reducing the onset of homelessness among this high-risk population. Furthermore, because of their documented success in intervening and stabilizing very high-risk youth within the context of their families, these strategies are a useful resource for program developers and service providers working with homeless youth in emergency shelters and street outreach programs. These models could be adapted and implemented as a means of providing support to homeless youth who are returned to their families.

Supporting Successful Transitions to Independent Living

Providing transition plans in Independent Living Programs for foster youth and Intensive Aftercare Programs for youth leaving juvenile detention is extremely important. Transition interventions help youth who are expected to live on their own acquire the knowledge and skills, economic resources, supportive services, and connections to community networks and caring adults.

Although research findings demonstrate that the interventions described earlier can positively impact and strengthen family-youth relationships, some children and youth are not able to benefit from them. This is particularly the case for children and youth in the foster care and juvenile justice systems when family reunification is not possible. When youth leave these systems the expectation is that they will be able to live on their own. This often is not the case. Given the large number of homeless adolescents with a history of foster care placements and juvenile justice involvement, targeted strategies are needed to support healthy transitions and prevent the onset of homelessness among these high-risk populations. Two promising interventions are the Independent Living Program (ILP) for foster youth and reintegration and aftercare services for youth in the juvenile justice system.

Research findings demonstrate that compared to the general youth population, youth in foster care exhibit lower functioning levels in the areas of physical and emotional well-being, education, employment and economic status.[86] Youth who spend a significant amount of time in foster care often are unprepared to live independently, and lack the adult support that most individuals depend on well into young adulthood. It is not surprising, therefore, that a large proportion of homeless youth also have a history of foster care placements. To address this growing problem, Congress enacted the Independent Living Program in 1986 and Title I of the Foster Care Independence Act of 1999 (the John H. Chafee Foster Care Independence Program) to help older adolescents, who will leave foster care at the age of 18, successfully develop the knowledge, skills and

habits to live independently. These policy initiatives have led to the widespread implementation of independent living programs across the country.[87]

Few studies have rigorously evaluated the effectiveness of Independent Living Programs (ILP) in achieving positive outcomes for transitioning youth. Those studies that have been conducted indicate that when implemented comprehensively, these programs hold promise for helping youth successfully move to independence.[88] Additional studies have examined the characteristics of youth leaving care, and the range of supports and services that need to be in place to most effectively prepare them for the transition to independence and support them after they leave care. These research efforts provide information on the characteristics and needs of foster youth and what works in preparing them to live on their own. Critical components of intervention strategies are described below.

- **Assessments** – To develop individualized and youth-focused ILP plans, programs must assess the strengths (i.e., skills and knowledge) and needs of foster youth. These assessments can be conducted formally through the use of standardized assessment tools and protocols and informally through observations and discussions with youth. Areas to be assessed include adolescents' academic/educational level, employment/vocational skills, personal and social skills (relationships with peers and adults; communication skills), health, residential living/home management skills, personal hygiene and safety, purchasing habits, budgeting and banking. Based on these assessments, ILP staff can actively work with and engage youth, foster parents and other supportive adults in the development of targeted ILP plans that build on each youth's unique strengths and address his or her needs.
- **Life skills preparation and training** – Youth transitioning out of care need to develop basic life skills and must be prepared for the realities and responsibilities of living on their own. Specific ILP intervention components should include education and job training, career development, assistance securing stable and affordable housing, education and training on maintaining a residence, planning for health care needs, accessing community resources, financial planning and

decision-making and leadership skill development opportunities. Some independent living programs also pay for work-related expenses and transportation costs to help youth maintain their employment.[89] While few studies have rigorously evaluated the impact of life skills preparation and training, results from the most comprehensive study of the outcomes for youth formerly in foster care demonstrate that consistent training in a few skill areas (e.g., health care, education and employment training opportunities) was associated with positive outcomes for youth.[90] Cook and colleagues found that youth who received an increasing number of skills training in the areas of money, consumer skills, credit, education and employment were more likely to maintain a job for at least a year and access health care if they needed it. Similarly, youth who received health training were significantly more likely to access health care services after discharge than those who did not receive such training.

To be effective, however, ILP training and preparation needs to go beyond classroom instruction and provide youth with opportunities for experiential learning and practice.[91] For example, programs can be designed to allow youth to live in unsupervised or semi-supervised settings, such as scattered-site and supervised apartments, where youth take ownership and responsibility for buying groceries, cooking and cleaning and maintaining their apartments. These experiences will give youth the opportunity to experience the realities of living on their own, make mistakes and learn by doing while at the same time developing the skills necessary for successful independent living.[92]

In addition, while ILP services and supports have traditionally focused on helping youth develop life skills through short-term training and preparation, there is growing recognition that youth need more intensive and sustained help focused on preparing them for the economic realities of self-support.[93] Youth need to learn about budgeting and they also need opportunities to develop effective financial management skills and the resources that will enable them to save and accumulate material assets. A number of innovative programs have begun to utilize

Individual Development Accounts (IDA) in combination with financial literacy education, to help youth develop savings habits and accumulate critical assets, including post-secondary education or their first house or apartment. Some ILPs also are developing enhanced job training, internship, and entrepreneurial training and opportunities, as well as linking youth with professional mentors from fields of interest.

Supporting the Economic Success of Transitioning Youth

With support from several national foundations, a number of community-based initiatives currently are testing and evaluating comprehensive approaches to provide transitioning youth opportunities to acquire the means to achieve economic success. Several communities provide current and former foster care youth with opportunities to learn financial management; obtain experience with the banking system; save money for education, housing, and health care through a matched IDA programs, and gain streamlined access to educational, training, and vocational opportunities. Evaluation of these efforts will provide the child welfare field information on what strategies assist successful transitions to adulthood.

- **Affordable housing** – Affordable housing is a critical need for youth aging out of foster care. Researchers and practitioners encourage youth service providers to help youth find housing in communities where they will have access to employment opportunities, social services, transportation and social support systems that will help increase the odds for success.[94] Providing transitioning youth access to appropriate housing options requires child welfare agencies to carefully assess youth's readiness to live in semi-supervised or unsupervised settings as well as the creation of partnerships and collaborative relationships with landlords and public housing authorities to increase the supply and availability of apartments and other housing options for foster youth. Although the John H. Chafee Foster Care Independence Program (CFCIP) requires that child welfare agencies coordinate with Federal and State housing programs that provide services to youth, the General Accounting Office reports that few States are using housing services provided by HUD and State housing authorities for emancipated foster youth.[95]
- **Connections to caring adults** – Promising intervention strategies for youth aging out of care also focus on ensuring that young people are connected to caring

adults. Studies have shown that biological, extended and foster families play an important role in the lives of many youth who exit care; they often are the only source of emotional, social and financial support available to this population.[96] Therefore, important components of ILPs preparing youth to exit care include:

- Exploring resources of families (biological, foster and adoptive) and relatives;
- Facilitating visitation between youth and family members;
- Engaging family members in the development of youth ILP plans; and
- Developing alternative support systems through relationships with mentors and other supportive adults to connect youth to a wide range of community resources.

Promoting these relationships also is important because in many instances, successfully engaging youth in ILP activities requires the active engagement of foster parents, mentors and other caring adults who can recruit, advocate for, encourage and motivate young people to participate in these activities and teach youth by modeling positive skills and behaviors.

Finally, to sustain the transition and ensure positive long-term outcomes for this vulnerable population, ILPs also must provide youth with aftercare services upon exit from care that may include counseling, case management, limited financial assistance to meet emergency needs and information on available community resources.[97]

Additionally, given the similarities between ILPs for foster care youth and Transitional Living Programs (TLP) for homeless youth, significant opportunities for coordination and service integration exists. ACF annually holds joint conferences for both ILP and TLP program grantees ("Pathways to Independence").

Re-integration and Aftercare Services for Offending Youth

Aftercare interventions have been advanced as an effective strategy to reduce recidivism, increase public safety and provide juvenile parolees with the treatment and support to enable them to be successfully reintegrated.

Available research indicates that recidivism rates among juvenile offenders are high and the current juvenile corrections systems are not equipped to adequately prepare youth to return to their communities.[98] One specific approach that has promise is the Intensive Aftercare Program (IAP), a theory-driven model that seeks to reduce recidivism by providing a continuum of supervision and services to high-risk juvenile offenders during institutionalization and after release. [99] The IAP premise is that a continuum of services must include pre-release preparation and planning, supportive services by institutional and aftercare staff, and long-term re-integrative activities to ensure that youth have access to service delivery and are monitored post-release.

Like other models, IAP examines youth problems in the context of their families, peer relationships, schools and communities. Interventions are not simply focused on addressing "youth problems" but are designed to holistically address risk factors and strengthen protective factors present in the settings and contexts in which youth live. Five principles guide the implementation of IAP interventions:[100]

- Preparing youth for progressively increased responsibility and freedom in the community;
- Facilitating youth-community interaction and involvement;
- Working with the youth and targeted community support systems on traits needed for constructive interaction and the youth's successful community adjustment;
- Developing new resources and supports; and
- Monitoring and testing the youth and the community on their ability to deal with the other productively.

These goals are effectuated through a comprehensive case management approach focused on identifying and assessing high-risk youth by the use of validated screening instruments and then developing individualized case plans. Plans are intended to engage and incorporate family and community perspectives, identify youths' service needs, and practical approaches for meeting them from incarceration to discharge. Staff members are assigned small caseloads that enable them to closely supervise youth and provide intensive services 24 hours a day, 7 days a week (IAP case managers may carry

approximately one-half to one-third the amount of cases handled by non-IAP case managers as cited by Wiebush).[101] The supervision and monitoring of offending youth is based on a system of graduated sanctions and rewards that holds youth accountable and provides youth with incentives that encourage positive behavior and behavior modification.

To provide juvenile offenders with the necessary resources to transition successfully into the community, the IAP model requires the establishment of linkages with community resources and social networks. This cross-agency or cross-systems coordination is established early in the intervention through the use of a team-oriented approach to case planning and management. Through this collaboration, youth gain access to education, employment/vocational training, mental health counseling, drug and alcohol treatment, housing, mentoring and other supportive services available in the community.[102]

Working with youth during and after incarceration and providing them access to a comprehensive array of aftercare services, IAP interventions not only reduce juvenile recidivism rates but also lead to successful transition from the justice system and youth's reintegration into the community.[103] In so doing, the model has the potential to reduce homeless episodes among this high-risk population.

V. Interventions to Ameliorate Homelessness

Ending youth homelessness requires effective interventions that engage youth as early in the cycle of homelessness as possible and helps to stabilize them in appropriate, supportive environments.

Four categories of interventions are: Gateway Services, Shelter and Stabilizing Services, Targeted Supportive Services, and Programs Supporting Youth Transitions to Independence.

1. **Gateway Services** meet the urgent and basic needs of youth in an effort to gain their trust and eventually help them access a broader range of services. Gateway services

are less structured and formalized than services to shelter and stabilize youth, and include drop-in centers and street outreach programs.

2. **Services to Shelter and Stabilize Youth** focus on sheltering and stabilizing homeless youth, through reunification with their family or appropriate transitional placement outside their families.
3. **Targeted Supportive Services** are intentional and intensive services to specific populations with special needs, including youth with drug and alcohol abuse and mental health problems, youth living with HIV/AIDS, and pregnant and parenting teens.
4. **Programs Supporting Youth Transitions to Independence** encompasses longer-term housing options and services that help young people who will not be returning to their families with their transition to independence.

Principles for Effective Intervention Practice

Theoretical research and practitioners emphasize that a core set of principles for relating effectively to homeless youth should infuse all interventions. Most of the promising interventions coordinate and integrate services in an effort to provide seamless support.

- **Strengthening and supporting families** – To address the risk factors that lead to youth leaving and staying away from their homes, intervention approaches must emphasize strategies to strengthen and support families. Families, whether immediate or extended, are resources for homeless youth and should be actively involved in adolescents' transition to independence and adulthood. Service delivery should include: 1) coordination of supports and resources for youth and families in crises, 2) access and referrals to an array of services and strategies to reduce family conflict, and 3) development of parenting skills to understand adolescents' developmental transitions.
- **Supporting positive youth development** – Recognizing the strengths and needs of each individual youth, empowering youth to set goals and encouraging their involvement in making decisions that affect them are essential to all interventions.

Programs for homeless youth need to provide opportunities to develop leadership skills by engaging youth in program design, planning and implementation. In many instances, youth are able to serve as peer mentors and role models to other young people, assist professional staff in recruiting, and increasing participation in program services and activities. These opportunities help young people develop confidence in their abilities, a sense of empowerment and self-efficacy, as well as a greater sense of ownership in program goals and activities.

- **Developing cultural competency** – To address the needs of homeless youth and maintain their participation and engagement in program activities, services must be provided in a safe and comfortable environment. Services must be culturally appropriate and non-judgmental and take into account and respect individual differences across race, ethnicity, gender, sexual orientation or lifestyle, and age. To ensure the provision of non-judgmental services, providers must train and develop culturally proficient workers, hire workers who are representative of the youth served and design interventions with knowledge of and respect for the differences in young people's life experiences and cultural beliefs. In addition, interventions should build upon youth's strengths and recognize their uniqueness. The provision of non-judgmental services is particularly important as youth's perception of workers and other professional staff greatly affects their willingness to seek services and participate in support programs.

- **Creating a continuum of integrated services** – Homeless youth are a diverse population and are vulnerable to a range of problems. Accordingly, to effectively address their needs, programs and services need to be integrated. Strategies should include the development of coordinated service plans involving a number of providers and programs to meet young people's multiple needs, establish linkages and referral systems across agencies, and provide cross-agency training to ensure that services are consistent and coherent. Developing comprehensive and integrated service strategies is particularly important because many service providers have limited resources to serve homeless youth, and the available

funding streams are restricted to specific categories of services or eligible populations.

- **Tailoring services to individualized needs** – Given the particular challenges of the homeless youth population (e.g., multiple placements, precarious living situations, and co-occurring disorders), most homeless youth need access to individualized and tailored services that are integrated into a continuum of care. Intensive case management is one approach to achieve this goal. Case managers develop trusting and caring relationships with homeless clients, respond quickly to client needs and priorities, are dependable but flexible, and have the capacity to assess clients' often changing needs for intensive services or personal space.[104] Importantly, effective case managers provide active assistance to help clients access needed resources, follow clients' priorities and timing for services, respect client autonomy and focus on realistic goals. Small caseloads enable case managers to develop therapeutic relationships with youth, provide crisis intervention and serve as the unifying factor in service delivery by helping youth navigate the various service systems and act to facilitate communication between different service-providers involved with the youth. Because intensive case management can be implemented across a variety of program models, the approach can be easily adapted to meet the needs of individual youth in a variety of settings, including emergency shelters, transitional living and supportive housing programs.

RHYA Outreach and Gateway Services

Homeless youth are a difficult population to serve as they are often fearful of being forced to return to negative situations – whether in families or institutions – and they tend to be distrustful of adults. RHYA street outreach programs and drop-in centers, administered by ACF, strive to engage youth by providing services that meet their most urgent needs with relatively little structure and few demands. These services are intended to reduce the level of risk youth on the street face and provide a gateway through which hard-to-reach youth can eventually move into more intensive, transitional services.

Street Outreach

A significant number of homeless adolescents spend time living on the street at some point during their homeless experience. Time spent on the street is often associated with exposure to victimization and risky behavior. Street outreach is designed to minimize the negative impact of life on the street for homeless youth.

Generally, street outreach programs target homeless youth who might not otherwise take advantage of needed services because they lack trust in adults and service systems or they do not know how to find services they need.[105] The program goal is to prevent adolescents' exposure to sexual abuse and victimization, as well as prolonged episodes of homelessness. To achieve this goal, street outreach workers go to where homeless youth are likely to congregate, including abandoned buildings, bus stops and other street locations, and work directly with the young people to assess and respond to their needs. Outreach programs offer a variety of services including street-based education, access to emergency shelter, survival supplies such as blankets and food, individual assessments, treatment and counseling, prevention and education activities, information and referrals, crisis intervention, transportation and follow-up support. Practitioners contend that the most effective street outreach programs are those that provide homeless adolescents with access to caring adults who can show them how to maneuver myriad systems through which services and help are provided.

Successful outreach workers are trained in youth development principles, know how to communicate with young people, and are able to respect their personal space. Outreach workers understand the importance of relationship-building, have in-depth knowledge of the operations and services of youth-serving systems (such as social services, juvenile justice, health and education), and are able connect youth to critical supports and services.[106] Finally, workers know the street culture and can help vulnerable young people develop trusting, positive relationships. When youth are ready, outreach workers help them identify the services they need and link them to those services.

A promising outreach strategy is training peers, or formerly homeless youth, to serve as outreach workers. A peer-to-peer outreach approach is considered particularly effective in finding and identifying homeless adolescents since peer outreach workers typically know the places where street youth gather and can more easily connect and build a rapport with them. Peer models also help foster partnerships between youth and adults, increase self-esteem among peer outreach workers, and provide youth opportunities to participate in service design and delivery.[107]

To most successfully connect street youth to the help they need, outreach workers often travel in a van loaded with supplies to the areas where street youth typically congregate. Mobile outreach activities give outreach workers the flexibility to offer critically needed preventive and urgent health care services, distribute nutritious food and snacks, help youth complete applications for benefits, provide referrals to emergency shelter services, and assist with transportation. In addition to providing services, many street outreach programs are connected to, or coordinate with, drop-in centers, emergency shelters and other youth-serving agencies that further stabilize youth by providing case management, short-term shelter and long-term housing.

Collaborative Approaches to Street Outreach

Understanding that one program alone cannot identify all street youth or meet all of their needs, innovative programs have organized collaboratives of agencies conducting street outreach. The goal is to have more trained counselors covering the streets at all hours and to provide appropriate linkages and referrals to homeless youth. Members of the collaborative share current information, conduct joint outreach activities, make appropriate service referrals, and enroll eligible participants in entitlement programs.

Successful outreach programs also engage service providers, neighborhood business owners who have frequent contact with street youth, community leaders, and local police to coordinate services and build cooperation in serving this population.

Drop-in Centers

Outreach and engagement also take place in drop-in centers. Drop-in centers provide homeless youth with an initial point of contact for a broad range of services and referrals. Drop-in centers meet immediate subsistence needs by providing free meals, showers,

laundry facilities, toiletries and new and used clothing. Centers also may provide comprehensive programming and supportive services such as individual

Peer-to-Peer Models to Reach Homeless Youth

A street outreach program in the Northeast developed a peer outreach component to target youth at risk of becoming homeless. The agency trains youth who have successfully completed one of its programs to do street outreach that specifically targets youth who are in need of services but who might not relate to the agency's professional staff. To ensure continuity of services and further develop peer workers' skills, peer outreach workers have the opportunity to work in the agency's resource center where they assist with a variety of activities targeted to youth and their families (access to crisis intervention, education, legal and medical services).

assessment, case management, crisis intervention, information and referrals. In addition, in coordination with shelters and other youth-serving programs, drop-in centers provide youth access to housing, legal counsel, and health services. For many vulnerable youth, this approach enables them to control decisions concerning when and how they seek help, including when and how they transition from street life to other residential arrangements.

Strategies to Engage Homeless Youth

Recognizing the importance of providing youth with a safe and non-threatening space, some drop-in centers encourage youth participation by providing a game room or drop-in room where youth can "hang out" and find some privacy. Others seek to foster a sense of community and connectedness among homeless youth by holding group sessions that allow youth to discuss issues in their lives, as well as conducting activities that allow youth to form friendships and develop trusting relationships with peers and professional staff.

Sheltering and Stabilizing Homeless Youth

Youth shelters that place a strong emphasis on stabilizing youth and reunification with families or other appropriate long-term placements are critical in preventing prolonged episodes of homelessness among this population. Providers report that younger youth and those experiencing their first episode of homelessness are more likely to reconcile with families, if early intervention is available. [108]

Through the Basic Center Program, ACF provides core funding for many emergency shelters throughout the country. Emergency shelters are essential for stabilizing homeless youth, providing a temporary safe haven from victimization and the risks of life on the streets, and intervening quickly to ameliorate the short- and long-term effects of homelessness. Emergency shelters provide youth a safe place to spend the night away from the potentially dangerous environment of adult shelters and street life and serve as an entry point from which youth can access a variety of programs and services. Community-based emergency shelters represent the primary method of intervention for runaway youth and are required to reunify youth with their families. [109]

Shelter programs receiving Basic Center funding serve youth up to age 18, for a maximum of 15 days, and are required to provide room and board, clothing, medical services, individual, group, and family counseling, outreach, and aftercare services and referrals, as appropriate, for youth after they leave shelter. In addition to Basic Center funds, many shelters use other resources, such as local faith-based and community social service support, to provide additional services to homeless youth. Shelters also can provide crisis intervention through assessments, counseling, and case management services. Through crisis intervention, shelters meet young people's immediate needs, stabilize youth, assist them in making decisions about their lives, and reunify youth at-risk of homelessness with their families. When family reunification is not possible, however, shelters help youth transition to other appropriate and stable placements.

Research suggests that the first episode of homelessness is a critical time for intervention. Therefore, strong family-centered follow up services to support youth upon reunification with their families is critically important. Addressing issues that led to initial departure can prevent future homeless episodes. Shelters that successfully reunify youth and their families are more likely to develop strategies to engage families in the youth's treatment plan, provide adjunct youth-family mediation, counseling and other support services to reduce family conflict, address behavioral issues and reduce the risk factors that lead to youth leaving home.[110]

Family Support Services to Reunify Youth and Their Families

Shelters can provide youth and families with group and individual-level counseling by trained professionals (i.e., family therapist) and a peer mentor assigned to the youth upon entry into the program. Through this triage approach, the program seeks to immediately engage youth and families in order to assess specific issues and determine how best to reunify youth with their families. The family therapist is available during the day and evening hours and the peer mentor works with the teen to promote positive decision-making, serve as a role model and engage the youth in experiential learning activities. These services are available to youth and their families during periods of crisis and throughout their engagement with the program.

In addition to short-term crisis interventions and family follow-up and support, promising programs also work with youth to ensure their transition and access to a continuum of supports and services. In some instances, youth work with case managers who link them to housing, jobs, school placements, public benefits, health care, legal assistance and other services as needed.

A Continuum of Care for Homeless Youth

To provide youth with the education, employment, and training skills necessary to become self-sufficient, one particularly innovative program developed a comprehensive workforce development initiative available to minors and young adults at its drop-in center, emergency shelter, or transitional living program. Components include:

- Education and employment assessment;
- Employment skill building and career exploration;
- Day labor program;
- Employability skills development through job readiness classes;
- Computer skills training;
- Individualized job placement;
- Pre and post-placement counseling and retention services; and
- Educational advocacy and post-secondary education advising.

The program's separate but integrated components can be accessed individually, enabling participants to utilize those services they need to achieve their employment or educational goals. Participants also may access the components consecutively to progressively develop marketable skills, clear career goals, and a positive attitude and behavioral outlook that will increase their chances of identifying career interests and setting a plan to achieve them. This flexibility allows the program to "meet youth where they are."

While some shelters coordinate with social service providers to facilitate homeless adolescents' access to supportive services, others have the capacity to provide these

services on-site. The availability of on-site services not only ensures that youth have access to a continuum of care but also can facilitate tracking and monitoring.

Research has found a number of youth identified barriers which may prevent them from accessing assistance at emergency shelters. Boyer and colleagues found that youth may not seek shelter services because they do not want to comply with program rules (e.g., wake up time, curfew, and drug, alcohol or smoking restrictions), they fear for their safety (i.e., believe they will be victimized) or believe they will be treated badly by program staff. [111] Then, too, some shelters will not serve homeless youth with presenting or severe problems that may place other youth and shelter staff at-risk.

Although underage youth can stay at a shelter without a parent or guardian, Federal law requires that shelter programs contact a youth's family within 72 hours of a youth's entry into the shelter. This familial contact is a critical step in the reunification process, a primary goal of the Runaway and Homeless Youth program. State laws may also require that programs, particularly licensed shelters, contact a parent or guardian sooner or obtain a parent's consent for a youth to enter the program. Consequently, many shelters require that youth provide proper identification and/or parental contact information upon entry. Studies have found that these eligibility requirements can prevent youth from seeking shelter services.[112]

Programs and Services to Support Youth Transitions to Independence

There are two general strategies to help homeless youth make a successful transition to independence: TLPs and longer-term affordable housing. TLPs provide youth who cannot return home with prescribed, stable, living situation, as well as supports and services that help them prepare for independent living. Due to the growing recognition of the need, the Department of Housing and Urban Development is actively pursuing development of longer-term affordable housing options to help homeless youth successfully transition to independence.

Transitional Living Programs

TLPs provide shelter, life skills and other services to help youth who cannot be reunited with their families move toward independence and self-sufficiency. These programs are very similar to the ILPs targeted to youth aging out of foster care, and in some instances providers integrate these programs. TLPs are primarily funded through RHYA and are available to youth 16 through 21 years of age for a period of approximately 18 months. These programs are intended to help homeless youth, including those who have been in foster care, avoid long-term dependency on social services and make a successful transition to independent living by providing temporary housing and mandatory services.[113] Living accommodations may include host family homes, group homes and supervised apartments. Supervised apartments are either agency-owned apartment buildings or scattered-site apartments which are rented directly by young people with support from the agency.

In addition to temporary or transitional housing, TLPs offer life-skills building, education and employment training, mental and physical health care, housing placement, benefits assistance, and case management services. The role of the case manager is to assess young people's needs, collaborate with youth in developing service and transition plans with clearly outlined goals and steps to achieve them, link youth to supportive services, monitor use of services and act as an advocate for youth to help them successfully achieve independence.

TLPs help homeless youth by providing them with real life experiences in a quasi-supervised setting. In this environment, young people make independent choices and have the opportunity to learn from any mistakes. Researchers contend that to be most effective, TLP services should recognize the adult-like status of homeless adolescents by teaching them life skills they may not have learned earlier.[114]

To enter a TLP program, youth may be required to meet the following conditions:

- Demonstrate homelessness status
- Agree to a criminal background check

- Undergo assessments (life-skills, parenting/pregnancy prevention); substance abuse evaluation/drug screening; and a physical examination
- Provide references
- Secure employment and/or attend school/educational program

To remain in a TLP program, youth may be required to meet the following conditions:

- Pay rent, based on their ability to pay
- Contribute a percentage of income towards household expenses and/or a savings account
- Attend school or an educational program and/or remain continuously employed
- Remain drug- and alcohol-free and meet other "house rules" including curfews
- Participate in program activities including weekly house meetings
- Meet housekeeping responsibilities
- Assist staff in making decisions about new youth entering the program by interviewing youth and providing feedback to staff

Providing Comprehensive and Integrated Transitional Services

A transitional living program on the West Coast provides transitional living services in a group home setting for homeless youth ages 15-17. The program is designed to provide youth with developmentally appropriate services necessary to assist them in making a successful transition to permanent housing and productive adulthood. Key components of this integrated service approach include:

- Stable housing in a safe and supporting residential environment that enables youth to focus their attention on their educational and life skills goals;
- Case management services to help youth develop individualized plans that reflect youth's assets, needs future goals and an action plan by which youth will meet identified goals;
- Educational services available in collaboration with the local school district or at the program's fully accredited school;
- Life skills training that includes budgeting and money management, conflict resolution, cooking and cleaning and other practical skills;
- Job readiness training including employment assessment, skill building, job placement and retention services;
- Medical care; and
- Substance abuse and mental health services, including assessments, wrap-around case management, medication service, counseling, aftercare and coordinated referrals to emergency and long-term care.

Compared to other interventions, TLPs provide more privacy, services that are more intensive and have more requirements, and greater expectations for youth participation. TLPs eligibility requirements vary. Some TLPs do not admit "hard-to-serve" homeless adolescents, such as youth with substance abuse, mental health issues or developmental disabilities, while these issues may not disqualify a youth for admission into other TLPs.[115] Programs that lack the resources to provide intensive support and specialized services often are unwilling to admit a more difficult-to-serve client population. Though they are sometimes criticized for "creaming," providers argue that they lack the capacity to both help large numbers of homeless youth make successful transitions and adequately address the serious problems of the most troubled young people.

Individualized Transitional Living Services

A transitional living program for young adults, ages 18 to 24, fosters independence in a minimally restrictive environment by emphasizing a highly individualized approach and the opportunity for each resident to develop, with staff support, a customized action plan for economic self-sufficiency and long-term permanent housing. To assist youth obtain and maintain permanent housing, the program provides intensive case management services, life skills training, employment services and follow-up services. Youth work with a case manager and transition specialist to develop a plan for permanent housing that includes decisions about where the youth wants to live, anticipated rent expenses employment development for economic self-sufficiency. Through their participation in life skills training, youth not only learn about money management, food preparation, and housecleaning, but also about tenancy laws, and receive information on how to select roommates and neighborhoods. Finally, because youth must budget their own finances in preparation for their transition to permanent housing, they most obtain and retain full-time employment status and pay 30 percent of their income as "rent" while participating in the program. These rental "savings" are returned to the youth upon leaving the program and the money is most commonly used to cover move-in costs, including security deposits and furniture.

Affordable Housing

While historically there has been relatively little work in this area, there are promising models of affordable housing options targeted to the needs of youth developed by the Department of Housing and Urban Development as well as State and local agencies. Strategies include the provision of supportive housing as well as access to subsidized housing and voucher programs that will help youth find safe, affordable housing and live on their own.

To be effective, supportive housing strategies should include access to safe, decent and affordable rental housing as well as access and connections to relevant supports and

services that give young people access to services they need. This approach is premised on the assumption that homeless youth need help with more than housing alone to successfully achieve independence.

What distinguishes supportive housing models from transitional and independent living programs is that they tend to be more flexible, longer-term and have fewer admission criteria. Supportive housing programs help youth and young adults develop independent living skills by combining housing and services while affording residents the rights and responsibilities of tenancy. Supportive housing programs typically target homeless youth and young adults from 18-25 years of age, including those who have aged out of the foster care system, transitioned from the juvenile justice system or children's mental health system, and/or are pregnant and parenting, and who would thrive in a more independent setting. Youth service providers have developed innovative congregate supportive housing programs for older homeless and precariously housed youth.[116]

The Foyer Model of Supportive Housing

Foyer is a supportive housing model developed in Europe to provide young adults who cannot live at home with a continuum of services to facilitate their transition to independent living and successful adulthood. In addition to stable housing, participants receive intensive case management services and linkages to job training, education and life skills development resources. The Foyer model is currently being adapted to serve homeless and aging-out youth in New York City.

Supportive housing may be organized in several ways: 1) housing dispersed throughout a community and usually rented from a private landlord (i.e., scattered site); 2) single, multi-unit buildings dedicated to youth and young adults (i.e., single site or congregate); and 3) units or entire floors set-aside especially for youth and young adults in affordable housing developments (i.e., set-aside units).

Two distinct program designs have emerged. In one approach, a youth or young adult signs a lease or occupancy agreement with a private landlord and has overall responsibility for meeting the stipulations of the lease. In this approach, there are no

responsive to client needs, establish good relationships with landlords, find housing in communities that are safe, affordable, with access to transportation, employment and other services that are familiar and/or comfortable to young people. In addition, given

the limited resources available to serve this population, programs must have the capacity to access and coordinate funding from a variety of programs to develop supportive housing for homeless and at-risk youth. They also need to form positive partnerships with housing authorities and community development entities.

Scattered Site Housing for Transitioning Youth

An agency on the West Coast operates a scattered site housing program through a master lease for youth ages 18-21, who have been discharged from foster care, homeless or at risk of homelessness. The agency master leases individual rental units throughout the community and subleases them to program participants. To qualify for the housing program, participants must complete an economic literacy curriculum and a rigorous certification program that makes them eligible for a housing micro-loan which pays their first month's rent and security deposit. Participants live in a two-bedroom shared apartment, accessible to public transportation and community amenities, and pay a portion of their rent (30 percent at entry into the program and a greater percentage as their participation in the program continues).

In addition to the micro-loan, participants receive a comprehensive array of supportive services that includes life skills training, assistance with rent payments, move-in, transportation, food stipends, and opportunities to interact with peers and adults in the community through participation in community events. Program participants also receive individualized services related to meeting their employment, health, education, financial management, and other goals.

In addition to supportive housing programs targeted to youth, young people can also benefit from access to traditional, affordable housing vouchers and subsidized housing available to low-income adults. To ensure that homeless youth access these resources, the Family Unification Program (FUP) was created at the Department of Housing and Urban Development in 1990 to meet the housing needs of children at risk of placement in foster care due to homelessness or other housing problems. In 2000, Congress expanded FUP eligibility to youth aging out of foster care. FUP provides housing assistance,

HUD Grant Funds Service to Homeless Youth

To house homeless youth with mental health problems and substance dependence, one service provider accesses a Shelter Plus Care Federal housing grant from HUD to operate a 17-unit apartment complex. The HUD grant provides a housing subsidy for youth at 30 percent of their income while the service provider provides a dollar-for-dollar match with supportive case management services. Through partnership with a national homeless advocacy coalition and a mental health care provider, youth also have access to mental health screening, assessments, treatment, and psychotropic medications.

through Section 8 vouchers, to families whose children are at risk of placement in foster care and to young adults transitioning out of foster care.[117]

Youth ages 18-21, who have left foster care at age 16 or older, are eligible for FUP housing assistance for up to 18 months. In order to receive these services, however, youth must be referred and certified as eligible by a local child welfare agency, and the agency must be willing to provide aftercare services to them. Service providers can help homeless youth access these resources by working with local child welfare agencies to verify young people's eligibility and to ensure that they receive aftercare services.

Providing Targeted Supportive Services to Homeless Youth

While shelter, transitional living, and supportive housing programs frequently incorporate a range of services, they often do not have the capacity to effectively work with the most difficult-to-serve populations. Some homeless youth require intensive supports targeted to their special needs, in particular, pregnant and parenting teens as well as youth with extreme alcohol and other drug abuse problems, youth with severe mental health problems, and youth with HIV/AIDS.

Pregnant and parenting teens

Homeless youth who are parents face the dual hardships of street life and responsibility for their children's safety and well-being. Their lack of social support networks, histories of family conflict and precarious living situation are risk factors that can lead to interactions with the child welfare system and separation from their children. Homeless teen parents are able to receive supportive services through youth shelters and through programs designed for homeless families.

Youth who are homeless and are parents require services tailored to their particular life circumstances and developmental needs. They require access to transitional living and

supportive housing programs, specialized training and education programs to develop their parenting skills and access to services including child care, educational assistance and employment preparation and training. Recognizing the special needs of pregnant and parenting teens, the recent reauthorization of RHYA includes funding for TLPs targeted to young mothers and their children. These maternity group homes provide pregnant youth and young mothers aged 16-21 with food and shelter, as well as parenting education and support programs to promote their long-term economic independence and their ability to support their children.

Substance abusers

Studies suggest that homeless adolescents have higher rates of substance use disorders than housed youth.[118] The substance abuse rate of homeless youth has been estimated to range from 70 to 85 percent.[119] The use of dangerous and illicit substances can impair judgment and decision-making and lead youth to engage in violent behavior. Confounding this challenge is the fact that many homeless youth have co-occurring problems with alcohol and other drug use and mental health disorders.[120] These disorders hinder providers' ability to serve the population and limit youth's capacity to develop employability skills, find and keep a job and secure housing. Serving this population requires access to drug abuse assessments and evaluations, detoxification and treatment services, as well as ongoing counseling and education.

Youth with mental health problems

Although it is difficult to assess accurately the mental health status of homeless adolescents, research shows that prevalence rates of depression, suicidal initiations, and other mental health disorders among this population are higher than those found in housed matched groups or the general population.[121] While many homeless youth struggle with mental health issues, some have severe mental health needs that require intensive supervision and intervention. Frequently, runaway and homeless youth program staff find that they are faced with youth who have more intensive needs than they have the capacity to address. Homeless youth with mental health problems need access to intensive and structured services tailored to their specific needs. Services for

this vulnerable population include daily living skills, supportive housing, transportation, education, vocational training, access to counseling and medical services and skills to develop their self-esteem and empowerment. Children and youth with serious mental and emotional disorders frequently get lost between the child and adult mental health systems.[122] Therefore, homeless youth service providers need to create linkages with both the child and adult mental health systems to effectively reach this population.

HIV/AIDS

Homeless youth engage in risky behaviors, such as unprotected sex, sex with multiple partners, intravenous drug use and needle-sharing, that place them at high-risk for contracting HIV/AIDS.[123] To reduce the incidence of HIV/AIDS among homeless youth, prevention programs and services to educate young people about risky behaviors, their consequences, and how to avoid them, including abstinence education are needed. Prevention education is most effective when it is offered by trained professionals in conjunction with street outreach activities that engage youth and encourage them to seek supports and services. Results from an evaluation of HIV/AIDS street outreach projects indicate that youth in contact with street outreach were more likely to have sought health care and HIV counseling and testing than youth who did not come in contact with street outreach.[124]

In addition to prevention education, this high-risk population needs access to HIV/AIDS support groups and case management services that connect them to specialty clinics and treatment services. These services should be coordinated and integrated with transitional living, housing and other programmatic strategies to support homeless adolescents' successful transition to adulthood. Supportive services require positive partnerships between service providers, clinics, HIV/AIDS service organizations, and State and local health departments.

An effective service delivery system for this diverse population is multi-disciplinary and offers comprehensive, developmentally appropriate and coordinated services to promote healthy youth development and reduce delinquency and victimization.[125] In order to

meet the needs of the homeless youth population, providers must develop relationships with other youth-serving agencies, share information, provide education, and develop coordinated approaches to service delivery. Outreach programs cannot be designed in isolation from other service programs. The effectiveness and success of any outreach effort hinges on the broader service system of which it is part, community linkages, resource sharing, and service availability.[126]

VI. Implications for Policy and Program Development

Youth homelessness is an issue of national concern that requires urgent public and private sector attention. The causes and antecedents are varied and complex. Negative consequences appear to multiply with successive episodes of homelessness and the greater the cumulative amount of time young people remain homeless. Service providers report that the population of homeless youth appears to be growing, and that clients have multiple problems and are generally more troubled than in the past. [127]

Youth who have runaway or have been thrown out of their homes and families, as well as those who become homeless after leaving foster care, incarceration and other residential settings, are at high risk for medical problems and other health compromising behaviors. This includes HIV/AIDS, and other sexually transmitted and infectious diseases; substance abuse; psychotic behavior, depression and suicide attempts; prostitution and other forms of trauma.[128]

Solutions to prevent and ameliorate youth homelessness will not be easily or rapidly accomplished. No single approach or quick fix exists to solve problems associated with youth homelessness. While more information is needed on the homeless youth population itself; and the costs, effects and effectiveness of interventions, several important points have emerged to provide guidance to decision-makers.

- Preventing young people from becoming homeless in the first place, or to prevent them from repeat episodes (with compounded problems), is a critical public

policy issue. Negative behaviors and experiences that are likely to result from youth homelessness have devastating consequences which are difficult to remedy.

- Family conflict and violence is the most common underlying antecedent of youth homelessness. It is of utmost importance that public policies affirm the role and responsibility of families to care for their children as they transition into adolescence and successful, independent adulthood. Government and community institutions support the families' role.
- All young people do not experience stress and conflict the same way. Nor do they experience homelessness and life on the street the same way. A comprehensive array of policies and programs targeted to the special characteristics of youth, their families and their communities, takes into account the circumstances of teenagers and young adults from different social, cultural, and economic backgrounds and their accumulated experiences. Very young adolescents, pregnant and parenting teens, young people leaving foster care, juvenile detention and other residential facilities, and those with significant health and mental health problems require specialized support. Similarly, effective family programs respond to the needs and vulnerabilities of families in different circumstances, for instance: low-income, single-parent, teen-parent, immigrant, and others with special needs.
- Because homeless youth have multiple needs that cut-across categorical programs and service delivery systems, policies encouraging and facilitating the coordination of funding and services from a variety of agencies and programs at all levels of government (Federal, State and local) is important in providing services. In the process, it also is necessary to create broad-based accountability for achieving positive outcomes for youth, their families, and their communities, not just for enrolling vulnerable young people in programs.

Programs and Policy Goals and Options

The following approaches address overarching issues of youth homelessness from a policy perspective and build on existing resources and initiatives.

1) Provide Targeted Education and Support Services to High-Risk Families to Reduce the Incidence and Prevalence of Youth Homelessness.

The majority of youth grow up in families that provide support, structure and guidance throughout childhood until they are ready and able to meet the challenges of living on their own. They will reach adulthood healthy, prepared for work and able to contribute to the well-being of their families and communities. However, for youth who live in families that are plagued by stress, conflict and violence, and especially for adolescents who leave home before they reach adulthood, the future is often problematic.

Several general strategies have been identified that have potential for reducing the incidence of youth running away or being thrown out of their homes. Central to all of them is the need to strengthen families and to mitigate the conflict and violence that often lead to significant psychological and emotional problems, child physical and sexual abuse, neglect and abandonment. This entails helping parents acquire the knowledge and skills to raise their children responsibly and effectively, providing at-risk families the special resources they need to continue to care for their children and keep their families together, and intervening to help solve problems when parents and youth experience conflicts that threaten their relationships and their ability to continue to live together.

Research identifies two effective program approaches specifically targeted to supporting healthy relationships between youth and their families.

- **Parent Education Programs** – Parent education programs can be effective in reducing rates of child abuse and neglect among high risk families.[129] Because of the high rates of child abuse and neglect among homeless youth, this primary prevention strategy shows promise for preventing youth homelessness. Currently, there is an array of parent education efforts underway in States -- supported with Federal, State, local and private dollars. Typically, parent education efforts focus on the parents of young children, however for many parents and children,

adolescence is when parent-child relationships break down. Many parents are in desperate need of good information on appropriate parenting practices to address the developmental needs of adolescents, to identify signs of problems, to communicate effectively about sensitive issues such as sexuality and drugs, and to set appropriate limits. In its *Final Report*, the White House Task Force for Disadvantaged Youth noted the importance of parents in the lives of youth and recommended the development of a continuum of parental involvement components in youth programs, including parent support groups and education.[130]

Because of its access to parents and youth, a potential delivery system for parent education efforts targeted to teenagers is the school system. Community-based youth groups and faith-based organizations also can effectively reach parents and youth in an environment that may be perceived as more informal and supportive than schools. Generally speaking, engaging parents in programs is difficult for parents of children of all ages, but is notoriously difficult for parents of teenagers. Any effort to expand parent education to parents of teens should assess and build on knowledge garnered from the small base of research and education efforts targeted to the parents of teens.

- **Intensive Therapeutic Support for Families Near or in Crisis** – While parent education can provide broad scale support for effective parent-child relationships, some families need more intensive supports. These include families in which there are high levels of violence and conflict; families in which youth are acting out and parents feel they are helpless to intervene or control them; families in which there is parental substance abuse or mental health problems; and families in which parent-youth relationships have broken down to the point that youth run away, or parents throw them out. In these crisis situations, one of three systems becomes the entry point for support and services for youth and their families: 1) the child welfare system; 2) the juvenile justice system; or 3) the runaway and homeless youth system. Unfortunately, involvement with these systems typically occurs when families have been in crisis for some time and a significant and

traumatic event occurs, such as a young person committing a crime, or ending up on the street, or a parent abusing or neglecting a child severely enough that it attracts attention and is reported. At this point, interventions are often punitive in nature, and typically do not place enough emphasis on working with the whole family to support healthier and more adaptive relationships.

There are, however, a number of "early warning signs" that existing programs and systems could respond to in more effective ways. These include actions on the part of youth such as truancy, minor criminal offenses and fighting, and excessive acting out in school, as well as actions on the part of parents or other adults in the household, such as domestic disturbances. Currently, many jurisdictions treat issues such as truancy as "status offenses" which are handled by the juvenile justice system.[131] The juvenile justice system also handles minor offenses, such as fighting or vandalism. Most typically, youth receive a "slap on the wrist" for these types of offenses with warnings of more severe punishment for future misbehavior. Likewise, in some jurisdictions, running away is also treated as a status offense. If runaway youth are picked up by the police, they often are simply returned home with little investigation into the problems that led them to run in the first place. If runaway youth end up in an emergency shelter, workers there make an effort to assess the appropriateness of the home environment before returning youth home, but often do not provide intensive follow-up support to youth and their families.

Violence reduction research provides evidence that it is indeed possible to effectively help very high-risk youth and their families to establish more supportive relationships. In the section "Reducing Violence and Delinquency Among Juveniles" two evidence-based, family-focused interventions for high-risk youth -- Multi-Systemic Therapy and Functional Family Therapy are described. While these interventions were designed specifically for violent youth, research on their effectiveness can inform the development of more effective family-focused interventions for a broader sub-population of high-risk youth and families. Support for the development of more intensive family therapy options, as well as more coordinated and concerted community-level efforts to detect

early signs of trouble among youth and families could prevent the escalation of problems that lead to eventual homelessness.

Options for Improving Supports for Families in Crisis

- Gather existing best practices aimed at early identification and coordinated response to youth risk behaviors by the juvenile justice, substance abuse and mental health, runaway and homeless youth, education, and child welfare systems;
- Identify challenges to implementation of more intensive and coordinated therapeutic supports for families in or near crisis; and
- Explore opportunities for increasing the flexibility of resources within existing programs that are well-positioned to respond to early warning signs with intensive therapeutic supports for families, such as the Basic Centers Program, and the Safe Schools/Healthy Students Initiative.

2) Provide Enhanced Preparation, Transitional Living, and Support Services for Youth in the Foster Care and Juvenile Justice Systems.

Youth aging out of foster care and those leaving juvenile detention appear to be at increased risk of homelessness. A natural target for prevention of youth homelessness is to improve the level of preparation, transitional living, and support services provided to youth by these systems. In recent years, new initiatives have focused increased attention and resources on the fate of youth leaving both of these systems. The *Final Report* of the White House Task Force on Disadvantaged Youth also emphasized the importance of targeting public investments in youth programs toward youth in public care, recognizing the high-risks and poor outcomes these populations face.

Foster Care Youth

When youth in foster care turn 18 they are "emancipated" from the State system that has served as their custodian. Their connection to the child welfare system terminates, and they are on their own, usually without any safety net. Many of these young people suffer

emotional disturbances and the behavioral problems that often accompany them, and many experience homelessness.[132] Research has shown that these young people are far less likely to become homeless if they have access to stable, affordable housing.[133] Research also has shown that youth who receive skill training in five key areas – education, employment, money management, credit management, and consumer skills – fare significantly better in their ability to live independently than those who do not receive training and support. Results from a national study suggest that youth who receive these services are better able to get and hold a job for at least a year, better able to obtain health care if they need it, less likely to go on welfare or to prison, and more likely to build a supportive social network.[134]

Historically, support and preparation for independent living for youth aging out of foster care has been marginal and uneven across States. Typically, States have provided a few weeks of voluntary independent living training that did little to prepare youth for the reality of life on their own. In recent years, public and private sector initiatives have placed increased focus and resources on addressing the needs of youth aging out of foster care. The John H. Chafee Foster Care Independence Program (CFCIP), established as part of the Foster Care Independence Act of 1999, extended eligibility for transition assistance to former foster care children up to age 21, increased funding for independent living activities and provided States increased flexibility in use of funds, increased State accountability for outcomes for young people transitioning from foster care, and gave States the option to provide Medicaid coverage to youth transitioning out of foster care between the ages of 18 and 21. Education and training vouchers, a component of the Bush Administration's initiatives to assist foster care youth in transitioning to independence, were made available through amendments to CFCIP passed in 2001. The vouchers provide youth with a maximum of $5,000 annually to support postsecondary training and education. Importantly, in 2000, Congress extended eligibility for the Family Unification Program (FUP), located at the Department of Housing and Urban Development, to youth aging out of foster care. FUP sets aside Section 8 vouchers for families at risk of losing their children because of housing problems, and for youth aging out of foster care. In addition to public sector efforts to better support youth aging out of

foster care, private funders and faith-based groups have developed national demonstration initiatives to help prepare foster youth to become successful adults.[135]

"Supporting Successful Transitions to Independent Living" describes approaches that are helping youth to develop a community-wide network of connections and to develop a focus on the future and pathways to lifelong economic well-being and financial success. Innovative strategies, such as linking youth with intensive financial literacy training, individual development accounts (IDAs), as well as entrepreneurial training and opportunities are among these efforts.

The current trends aimed at supporting the needs of youth aging out of foster care are promising. CFCIP has led to the expansion and improvement of State efforts to prepare these youth for a successful adulthood. While many provisions of CFCIP are voluntary for States, and the level and quality of independent living preparation remains uneven across States, much is being learned. Many States are able to aid the efforts by policymakers to strengthen and expand supports for youth aging out of foster care, with a dual focus on meeting basic needs and preparation for successful adulthood.

Options for supporting youth aging out of foster care:

- Explore aspects of independent living programs that support youth becoming economically successful as well as helping them gain other skills to live successfully on their own.
- Explore effective methods of promoting Individual Development Accounts.
- Explore opportunities for providing financial literacy training for all foster youth aged 15 and older.

Juvenile Justice Youth

Existing initiatives also focus on preparing youth being released from juvenile detention for successful reintegration into society. Homeless youth report in large numbers that they have been or currently are involved in the juvenile justice system. Youth who have spent time in juvenile detention face challenges gaining employment, may not be

welcomed back into their families of origin, and/or may struggle to get along with their families and reconnect with their communities. The frequent result is recidivism. The U.S. Department of Justice estimates that reducing recidivism among juvenile offenders by just four percent would save $35 million in public funding for law enforcement, courts, and juvenile corrections system and $30 million in victim costs.[136]

The Intensive Aftercare Program (IAP) is a theory-based model of reintegration for juveniles. (See "Supporting Successful Transitions to Independent Living") The Office of Juvenile Justice and Delinquency Prevention administers a number of funding streams that States can use to prevent and address juvenile delinquency, and support reintegration programs, such as IAP. Because the bulk of funding is administered through block grants, the degree to which States invest in reentry initiatives for juveniles varies widely nationwide.[137]

One Department of Justice initiative that is specifically targeted to supporting reentry efforts is the Serious and Violent Offenders Reentry Initiative.[138] This initiative is an interagency effort that provides funding to State criminal and juvenile justice agencies to develop, implement, enhance, and evaluate reentry strategies. The initiative has three distinct phases: institution-based programs to prepare incarcerated offenders to reenter society; community-based transition programs that work with offenders' pre and post-release; and community-based long-term support programs to provide ex-offenders with a network of social services agencies, faith-based and community organizations.[139] The initiative targets 160,000 offenders; however, only 10 percent of the target population is youth. Finally, OJJDP's Performance-Based Standards for Youth Correction and Detention Facilities (PBS) is a system to improve and track conditions and services for incarcerated youth that includes standards related to preparing youth for reintegration into the community. Seventeen States have voluntarily adopted these standards.

Program Options to help youth in the juvenile justice system:

- Gather information on how and to what extent States are supporting reentry services for juvenile offenders;

- Analyze the cost of providing reentry services to offenders and the adequacy of current resources to address enforcement and detention costs, as well as costs associated with comprehensive reentry efforts;
- Identify where existing investments in other systems, such as education, workforce development, and substance abuse and mental health services, could be better targeted and coordinated to support youth reentry, and identify gaps in existing resources that warrant additional investments.

Another new and promising, small-scale initiative is the Department of Labor Responsible Reintegration of Youthful Offender grant to address the specific workforce challenges of youth offenders. This initiative is supporting demonstration grants in 15 States that support efforts to link youth offenders with jobs in high-growth industries.

Youth who commit crimes, serve time in juvenile detention and then are released back into communities without preparation and support appear to be at risk for a number of negative outcomes, including eventual homelessness. Targeting investments in prevention and reentry efforts could help some youth to avoid homelessness, as well as preventing a host of other negative outcomes with costly implications for society and public systems. Targeting investments requires an understanding of the current level of services and capacity that exist in States.

3) Increase the Quality, Comprehensiveness and Capacity of Supports and Services for Homeless Youth.

Homeless youth in the United States tend to come from severely dysfunctional families, and they are at risk for negative developmental outcomes before they run away or are thrown out of their homes. Although leaving home may be an adaptive response to a threatening situation, young people who leave to escape serious family problems often face equally threatening problems on the street – troubled peers, substance abuse, unprotected and unwelcome sexual activity, criminal activity, violence and victimization.

Altering the developmental pathways and outcomes for homeless youth is not easy. Often those in greatest need are those who are most difficult to locate and serve. Generally, they also have most "successfully" adapted to street life. Accordingly, aggressive outreach and efforts are needed to help homeless youth find their way to shelters and other programs that can meet their immediate needs for shelter, food and protection, and link them to longer-term support and services to address their health, mental health, educational, social and economic needs in stable settings. In the section "Interventions to Ameliorate Homelessness" interventions are described that address the needs of homeless youth, from gateway services to long-term supportive housing programs.

Practitioners and researchers identify comprehensive and integrated service delivery models that link youth to a continuum of services tailored to their unique needs as a promising practice. The foundation of comprehensive approaches is intensive case management services that enable youth-workers to create a strong relationship with youth. The success of this model is dependent on the availability of a range of supports and services to which case managers can refer youth. Many programs that have a strong reputation in the field administer and co-locate the full range of services for homeless youth, from outreach to transitional living and affordable housing options.

Theoretical research summarized under section on "Comprehensive Independent Living and Life Skills Training," notes that it is not only comprehensiveness of services that matters, but also the quality of those services. In particular, the youth development perspective helps us to understand the importance of positive opportunities and preparation for successful adulthood. Research into human resiliency has shown that overcoming challenges and difficult circumstances is an innate human quality that can be nurtured.[140] Three general approaches often serve as protective factors for vulnerable youth, including:

- Caring and supportive relationships with adults and peers
- High expectations for success and achievement
- Opportunities for participation and leadership

These three factors are often missing in the lives of young people who become homeless and enter life on the street. One important implication for social policies and services is that homeless youth need opportunities to engage in interactions with adults and peers that are healthy, supportive, and can lead to positive developmental pathways. Young people who do not have parents and other family members on whom they can rely for support, encouragement and guidance, will look for it elsewhere. Once on the street, they likely will find it from adults and peers who may provide a sense of connectedness, but generally do not offer the assistance and support necessary to foster positive developmental pathways. Therefore, in the absence of nurturing families, youth need to form close trusting relationships with other caring adults – coaches, counselors, foster parents, youth leaders, faith members, and mentors – who can serve as advisors, gatekeepers, cheerleaders and comforters.

Viewing vulnerable youth as a "set of problems" may lead adults in their lives to have lowered expectations for them. But all youth need adults in their lives who have high expectations for their success, who will encourage them to set ambitious educational, career and personal goals, and maintain high expectations for themselves. Often expectations – whether low or high – become reality. Finally, young people need to be involved in decisions and choices that concern them – such as their participation in treatments and interventions. They are far more likely to feel an investment in the outcome, if they have a voice in the decision and a sense of control in their lives.

Opportunities to be contributing members of schools, neighborhoods and faith-based organizations which promote strong values can help vulnerable young people envision pathways out of the adversity that has scarred their early lives.

Many of the elements of a comprehensive continuum of services for homeless youth are already in place in communities, as are examples of quality practice built on youth development principles. However, in many communities the linkages do not exist between programs. An important starting point for addressing youth homelessness more

effectively is to better understand how to link services, improve their quality, and target resources toward the most pressing capacity needs. The First Lady's Helping America's Youth Initiative and its "Community Resource Guide" is a new tool that addresses this need.

4) Support Coordination of Programs and Services for Youth who are Homeless or At-Risk of Becoming Homeless.

Below are some examples of relevant Federal laws that play a critical role in funding and administering supports and services to youth at-risk of homelessness and those who are homeless. Congress established the Interagency Council on Homelessness in 1987 with the passage of the Stewart B. McKinney Homeless Assistance Act. The Council is responsible for providing Federal leadership for activities to assist homeless families and individuals. Its major activities include: planning and coordinating the Federal government's activities and programs to assist homeless people, and making or recommending policy changes to improve such assistance; monitoring and evaluating assistance to homeless persons provided by all levels of government and the private sector; ensuring that technical assistance is provided to help community and other organizations effectively assist homeless persons; and disseminating information on Federal resources available to assist the homeless population. Relevant Federal laws supporting programs and services for vulnerable youth include: the Runaway and Homeless Youth Act, the John H. Chafee Foster Care Independence Act, the McKinney-Vento Act, the Mentoring Children of Prisoners Program, the Promoting Safe and Stable Families Program, the Juvenile Accountability Block Grant and the Title V Community Prevention Grants Program under the Juvenile Justice and Delinquency Prevention Act, and the Hope VI housing program. Each of these statutes places high priority on efforts to help vulnerable youth through difficult transitions and promote successful independent living, contains targeted funding to defined populations, and imposes specific administrative limits on the use of funds.

VII. CONCLUSION

Adolescence is a time when young people explore talents and interests and choose paths that determine the direction of their adulthood. It is also a time when youth can become disconnected from adults as a result of family stress, tough communities and environments, and their own personal behavior. Teens and families with particular vulnerabilities do not always make it through this difficult transition with relationships intact. For a variety of reasons related to the characteristics of youth, the characteristics of their parents, the dynamics of their relationships, and the realities of their communities – youth may end up on their own. In other cases, they are running from or told to leave their home. In some cases, they have been separated from families and are running from foster homes or group homes. Or, when they reach age 18, those responsible for their care – parents or systems – expect them to fend for themselves.

While the population of homeless youth is extremely diverse, their common trait is that they are disconnected from adults they can depend upon to care for them. For over 30 years, the Federal government has supported the core of a safety net for these youth through runaway and homeless youth programs administered by the Administration for Children and Families. The child welfare and juvenile justice systems, too, play critical roles in the lives of this vulnerable population, as youth in public care tend to be at high risk for homelessness.

Drawing from existing research and informed discussions with practitioners in the field, policy experts and program administrators, conclusions about prevention and intervention reveal:

1. As youth homelessness primarily is related to the disconnection of youth from adults, ending it requires fostering supportive relationships between youth and adults - first and foremost between youth and families, and secondarily between youth and adults who become their support system when families are unable or unwilling to do so.

2. Youth who cannot depend on their family's support, need programs and services to meet their basic needs, as well as to help prepare them to transition successfully to independence.
3. Problems experienced by youth who are homeless cut across many systems thereby requiring effective coordination of targeted supports and services. This task involves interagency planning at the Federal, State, and local levels.

In recent years there has been an increased interest among policymakers, researchers, and faith-based and community groups in the issue of youth homelessness and the problems facing populations at particular risk of homelessness. The Bush Administration has directed considerable attention to addressing the needs of high-risk youth through its White House Task Force on Disadvantaged Youth, the First Lady's "Helping America's Youth" initiative, successful passage of it's legislative proposals including the creation of "Mentoring Children of Prisoners" and improvements to "Promoting Safe and Stable Families" programs, among others. This growing focus on youth presents an excellent opportunity to move the nation closer to the goal of ending youth homelessness with enhanced coordination by public agencies, private entities, practitioners, researchers, technical assistance providers, young people, and advocates, and the continued strong leadership by key Federal agencies and national policy makers.

APPENDIX A

FEDERAL PROGRAMS RELEVANT TO YOUTH HOMELESSNESS				
Funding Stream	**Program Name**	**Administering Organization**	**Eligibility Requirements**	**Services Funded**
Runaway and Homeless Youth Act (RHYA)	BASIC CENTER	Department of Health and Human Services, Administration for Children and Families	Youth under 18 years of age	Meets basic needs of youth as well as crisis intervention and family reunification
	STREET OUTREACH	Department of Health and Human Services, Administration for Children and Families	All youth	Provides youth with basic needs and provides information for accessing other services
	TRANSITIONAL LIVING PROGRAM (TLP)	Department of Health and Human Services, Administration for Children and Families	Youth ages 16-21 who are homeless, aging out of the foster care system, transitioning from the juvenile justice or mental health system, and are pregnant and/or parenting	Provides longer-term housing, often group-living or supervised apartments, from which youth can finish their education, learn independent living skills, and gain employment

Title IV-E	TITLE IV-E FOSTER CARE FUNDING	Department of Health and Human Services, Administration for Children & Families	Families and youth involved in the child welfare system	Foster care maintenance for eligible children, administrative costs to manage the program, training for staff, for foster parents, and for certain private agency staff
Workforce Investment Act (WIA), Youth Activities	WIA YOUTH ACTIVITIES	Department of Labor, Employment and Training Administration	Low income youth between the ages of 14 and 21	The Act authorizes the use of funds for youth employment and training activities that will provide eligible youth assistance in achieving careers and academic and employment success; ensures ongoing mentoring opportunities; provides opportunities for training; provides continued supportive services; provides incentives for recognition and achievement; and provides opportunities for leadership, development, decision making, citizenship, and community service

Temporary Assistance for Needy Families (TANF)	TANF	Department of Health and Human Services, Administration for Children and Families	Families with children under the age of 18, that are deprived of financial support from a parent by reason of death, absence from the home, unemployment, or physical or mental incapacity	Provides cash assistance and supportive services to assist the family, helping them achieve economic self-sufficiency
Medicaid	MEDICAID	Department of Health and Human Services, Centers for Medicare and Medicaid	A parent or guardian with a low income may apply to receive Medicaid for a child who is 18 years old or younger, if your child is sick enough to need nursing home care, but could stay home with good quality care at home. Teenagers living on their own may be allowed by their State to apply for Medicaid on their own behalf or any adult may apply for them. Many States also cover children up to age 21	Pays for medical assistance for certain individuals and families with low incomes and resources

Public Health Service Act	HEALTH CARE for the HOMELESS		Department of Health and Human Services, Health Resources and Services Administration	Patients must be homeless	Primary health care and substance abuse services at locations accessible to people who are homeless; emergency care with referrals to hospitals for in-patient care services and/or other needed services, and outreach services to assist difficult-to-reach homeless persons in accessing care, and provide assistance in establishing eligibility for entitlement programs and housing.
McKinney-Vento Homeless Assistance Act	Title IV Housing Assistance Act	Emergency Shelter Grants	Department of Housing and Urban Development	Homeless persons Short-term homeless prevention assistance may aid persons at imminent risk of losing their own housing due to eviction, foreclosure, or utility shutoffs	Provides basic shelter and essential supportive services as well as short-term homeless prevention assistance to persons at imminent risk of losing their own housing
		Supportive Housing Program	Department of Housing and Urban Development	Homeless persons	Provides rental assistance payments that cover the difference between a portion of the tenant's income (normally 30%) and the unit's rent, which must be within the fair market rent (FMR)

					established by HUD
McKinney-Vento Homeless Assistance Act (cont)		Section 8 Assistance for Single Room Occupancy Dwellings	Department of Housing and Urban Development	Homeless persons	Develops supportive housing and services that will allow homeless persons to live as independently as possible
		Shelter Plus Care	Department of Housing and Urban Development	Hard-to-serve homeless persons, (primarily those with serious mental illness, chronic problems with alcohol and/or drugs, and acquired immune deficiency syndrome (AIDS) or related diseases) and their families who are living in places not intended for humans habitation (e.g. the streets) or in emergency shelters	Provides housing and supportive services on a long-term basis

McKinney-Vento Homeless Assistance Act (cont)	Title VII	Education for Homeless Children and Youth	Department of Education	Children and youth who lack a fixed, regular, and adequate nighttime residence	Provides an array of supports including but not limited to tutoring, transportation, and cash assistance to ensure the participation of homeless children and youth in elementary and secondary school. The act guarantees access to school and a meaningful opportunity for educational success
Section 8 Housing Choice Voucher Program	FAMILY UNIFICATION PROGRAM (FUP)		Department of Housing and Urban Development	Youth aging out of foster care and families at risk of losing their child to care or that are trying to reunite with child already in care	Provides housing assistance vouchers
John H. Chafee Foster Care Independent Program	EDUCATION & TRAINING VOUCHERS (ETV)		Department of Health and Human Services, Administration for Children & Families	Youth aging out of foster care	Activities may include but are not limited to: tuition, fees, books, equipment (computer), supplies, uniforms, housing, internship and school related travel
	INDEPENDENT LIVING PROGRAM (ILP)		Department of Health and Human Services, Administration for	Youth ages 18-21 who are parenting, preparing to emancipate from the	Enables youth to live on their own in the community with a range of

		Children & Families	foster care system, and those diagnosed with serious emotional disturbances	support services until they are fully stable
Juvenile Justice and Delinquency Prevention Act (JJDPA)	TITLE V INCENTIVE GRANTS FOR LOCAL DELINQUENCY PREVENTION	Department of Justice, Office of Juvenile Justice and Delinquency Prevention	All youth	The program provides communities with funding and a guiding framework for developing and implementing comprehensive juvenile delinquency prevention plans. The 3-year prevention plans are designed to reduce risk factors associated with juvenile delinquency and decrease the incidence of juvenile problem behavior
	JUVENILE ACCOUNTABILITY BLOCK GRANTS (JABG) PROGRAM	Department of Justice, Office of Juvenile Justice and Delinquency Prevention	Youth involved in the juvenile justice system	Rehabilitation of adjudicated youth, Reducing juvenile recidivism rates

Juvenile Justice and Delinquency Prevention Act (JJDPA)	SERIOUS AND VIOLENT OFFENDERS REENTRY INITIATIVE	Department of Justice, Office of Juvenile Justice and Delinquency Prevention	Incarcerated youth offenders	Encompasses three phases: 1.) institution-based programs to prepare incarcerated offenders to reenter society, 2.) community-based transition programs to work with offenders before and following release from correctional institutions, 3.) community-based long-term support programs

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