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600,000 families and 1.35 million children experience homelessness in the United States each year.”⁴

- At least 52,000 youth are homeless on their own, and service providers count more than 1 million youth who have run away from home or been “thrown away” by parents, guardians, or institutions.⁵

Demographic Characteristics of Youth Who Are Homeless

Youth who are homeless can be found in urban, suburban, and rural areas throughout the U.S., but tend to be most visible in major cities.⁶ Studies indicate that young people who become homeless are likely to be “local kids.”⁶ Many of the youth come from impoverished homes—as many as 40 percent are from families that received public assistance or lived in public housing.⁷ The majority of youth had been suspended and/or expelled from school ⁸ and about half had not finished high school.² Homeless youth staying on the streets are mostly male, but those in shelters are either equally divided by gender or mostly female.

Estimates of lesbian, gay, bisexual, transgender, or questioning (LGBTQ) youth who are homeless range from 6 to 40 percent; these youth may be especially at risk of homelessness due to family conflicts over sexuality.² Furthermore, in many studies the proportion of teens who are LGBTQ may be underreported because the young people are not comfortable with, or not sure of, their sexual identities.²

Risk Factors for Homelessness

Major risk factors for homelessness include substance use and mental health problems, problematic family dynamics, and “aging out” of foster care or leaving the criminal justice system.

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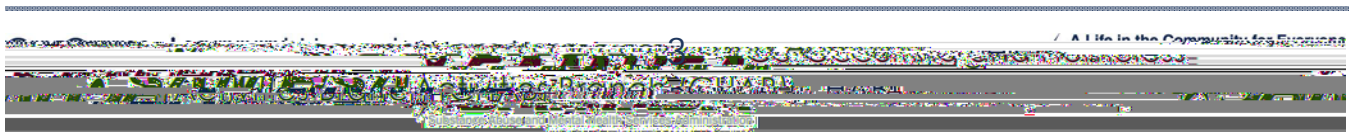


homeless report using drugs and alcohol to self-medicate for depression and to enable them to engage in survival behaviors. In particular, they may sell drugs or engage in sexual activity to pay for food or shelter. Health risks related to sexual behavior—such as contracting HIV/AIDS or other sexually transmitted diseases—are significantly higher for homeless youth than for their housed counterparts.¹¹ Furthermore, 48 percent of street youth and 33 percent of shelter youth have been pregnant or impregnated someone, compared to 10 percent of housed youth.²

Youth who engage in the highest risk behaviors, such as using intravenous drugs and having unprotected sex with multiple partners, are often more likely to remain homeless and be more resistant to change.¹² Because these activities provide emotional and economic support, youth with alcohol and substance use disorders may be reluctant to enter treatment. However, many shelters and residential programs require youth to be sober before entering the program.¹³ This paradox, and the rejection it involves, may lead to further risky behavior.

“Assault, illness, and suicide claim the lives of about 5,000 runaway and homeless young people every year.”¹⁴

To help protect themselves, many street youth



The observations made by Ms. Russell and Ms. Davis are borne out by the literature. Research indicates that promising strategies for youth who are homeless often are best provided at locations and times that the young people view as convenient. In addition, these services are offered by clinicians comfortable with street slang and knowledgeable about street life.

The research also shows that:

- A single activity seen as non-threatening (such as entertainment or meals) and/or needed (such as health care) can be the gateway to other services;¹⁶ and
- Peer counselors can attract and engage youth in program activities.¹⁶

Staff Selection and Support

Promising programs select and train staff carefully. “We look for dedication to and passion about this population,” Ms. Russell explained. “Staff members must understand the needs of traumatized youth.” In addition, staff members are selected who have prior experience with this population, either through work in treatment programs or through having been homeless themselves.

Both Ms. Davis and Ms. Russell employ individual and group supervision, treatment team meetings, case reviews, and formal training sessions to educate staff, maximize their effectiveness, and maintain high morale. The directors reported that trauma, street culture, alcohol and addiction, and counseling skills (such as motivational

Programs with “a Twist”

Programs often offer “a twist” on a promising practice to improve effectiveness. Both SOCYIT and Metamorphosis offer gateway services tailored to accomplish specific, but slightly different, goals. In addition, Metamorphosis has developed a peer counseling program targeting both youth and counselors. “Dinner and a Movie”

SOCYIT holds free “Dinner and a Movie” events weekly for program participants and their friends. Participants are invited to briefly report on their progress during the past week and their plans for next



