

SPECIAL 2016 REPORT

ON HOMELESS YOUTH



November 2016

A HIDDEN PROBLEM.

Youth and child homelessness in the United States was a persistent problem long before the rise of individual and family homelessness in the 1980s.

Early attempts to provide assistance to children living on the streets in urban settings included orphanages and youth homes. Urban children could also end up

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on Orphan Trains to far-flung, mostly rural, parts of the country where families could adopt them.

Although these interventions were well-intended, siblings were frequently

separated from each other, and children who were adopted or living in youth homes often endured lives of deprivation filled with child labor and exploitation.

There are many more resources available today to end youth homelessness, but there are still thousands of unaccompanied, homeless young people surviving on their own in every part of the United States, especially in urban communities, who need specialized services targeted to their unique needs.

This study is focused on unaccompanied (not connected to a parent or guardian, and not parents themselves) older homeless youth ages 18-24 without a regular place to live.

In 2015,
172
people ages 18-24
entered the
emergency shelter
system in
Rhode Island.



From the President

Dear Friends,

2016 marks Crossroads Rhode Island’s sixth report on a particular segment or issue impacting homelessness. We present information associated with that group on a national, state and local level – and offer solutions on how to address their homelessness. I am proud to present this year’s report focusing on youth homelessness. Today, there are thousands of unaccompanied, homeless young people surviving on their own in every part of the country, especially in urban communities. Homeless youth are especially vulnerable to all types of exploitation, and often tend to be hidden—172 individuals ages 18-24 accessed the emergency shelter system at Crossroads and other shelters in Rhode Island in 2015. There is no way to know for sure how many more in this age group were unsheltered completely, staying temporarily with friends or family, or camping or living out of their cars without going to the emergency shelter system for help at all.

In 2016, Crossroads completed renovation on Whitmarsh house, a new development that targets the growing population of homeless 18-24 year olds. The rehabilitation transformed the existing property from a former group home setting into 11 efficiency apartments. Crossroads offers a range of services including shelter, case management, education and employment services to families and adult clients over the age of 18. We practice a Housing First approach targeted to the unique needs of the homeless youth. This project not only builds upon prior success, but also looks forward to creating the framework for a sustainable future, increasing the velocity of our social impact in the state of Rhode Island. Ending homelessness in the 18-24 year old population will reduce the number of chronically homeless in the coming years. The goal of ending chronic homelessness will be that much more possible. Early intervention is critical if we want to achieve this goal.

It is my hope that this report will not only raise awareness of the issues we face around youth homelessness, but also present positive solutions as we move forward together to end each individual and family’s experience with homelessness. Thank you for taking the time to read this report and for continuing to support our mission of securing stable homes. Together, we can work toward ensuring that chronic homelessness becomes an issue of the past, and not one passed on to a new generation.

Sincerely,

Karen A. Santilli, President, Crossroads Rhode Island

A Letter from Lisa Guillette of Foster Forward

As Rhode Island continues to develop a comprehensive approach to end youth homelessness, it is essential to give particular attention to young people who have experienced involvement in our child welfare system. We know that the adverse childhood experiences these youth have faced put them at acute risk of homelessness. Most housing, mental health and substance abuse programs are geared towards adult populations. However, the adolescent brain is still developing the executive function skills needed to navigate the challenges of emerging adulthood. Perhaps most importantly, so many of these youth lack positive adult caregivers who can help them successfully transition through the teen years into their mid-twenties.

In focusing on young people who are legally “aging out” of foster care without permanent adult connections, statistics show that this group is far less likely to complete high school or have a job compared to their peers who didn’t experience foster care. Those who age out are also more likely to become parents before they are ready or to be incarcerated. Not surprisingly, many states are implementing policies and making investments to legally extend care beyond age 18 so young people have the time and resources needed to make successful transitions to adulthood. Rhode Island does currently offer voluntary aftercare services (known as YESS) for young people who have aged out of foster care on or after their 18th birthday. This programming is limited to a modest stipend and six to eight hours a month of case management. While YESS is cost efficient and has been successful in helping participants maintain affordable housing, the model is limited in its ability to fully respond to the complex needs of youth who age out. Furthermore, YESS is not allowed to provide service to youth who experienced disruptions after discharge from foster care to reunification, adoption or guardianship. The time is right for our state to consider the legal extension of foster care as a key strategy to enhance our state’s Continuum of Care and improve outcomes for this vulnerable population.

Finally, creative interagency partnerships are critical to addressing the issue of youth homeless and developing alternatives to effectively engage at-risk youth. Permanent supportive housing initiatives such as Crossroads’ new Whitmarsh House offer much needed expansion for our state’s Continuum of Care and offer more developmentally appropriate options for addressing the needs of this unique population.

Lisa Guillette, Executive Director, Foster Forward

YOUTH HOMELESSNESS.

Who Are They?

It is difficult to know the exact number of youth who are homeless or why they are homeless. More so than older individuals experiencing homelessness, they tend to be invisible or hidden. They depend on their network of friends and peers who help each other survive on the streets and share living spaces when they are able to do so. They spend time in bus and train stations, cemeteries, public parks, homeless encampments, abandoned buildings, youth and LGBTQ drop-in centers.

Annual Housing and Urban Development (HUD) Point in Time (PIT) counts of unaccompanied youth acknowledge the difficulties involved in finding and contacting homeless youth. In 2015, a one-night count documented 32,240 unaccompanied youth ages 18-24 in the United States, with 46% of them being unsheltered. In addition, there were 9,775 homeless youth who were parenting children of their own.

In 2014, the National Alliance to End Homelessness estimated that 150,000 unaccompanied single youth ages 18-24 experienced a homeless episode of longer than one week.

Homeless youth include those who have aged-out, or been emancipated from the foster care system; exiting the juvenile justice system; runaways and young people fleeing from violent homes; LGBTQ youth expelled from family units; pregnant and parenting youth.

LGBTQ youth are disproportionately represented in homeless youth; it has been estimated that they make up anywhere from 20% to 40% of the homeless youth population, while only 10% of the general youth population identifies as LGBTQ.



What Challenges Do They Face?

Homeless unaccompanied youth are vulnerable to all types of exploitation. Many are disconnected from health care and mental health services and at great risk for mental health problems, drug and alcohol use, sexually transmitted diseases, HIV, violence, and unintended pregnancies. They are at very high risk of committing suicide.

A lack of education and experience, in addition to the barriers created by homelessness, make finding employment particularly challenging. When they do find employment, they are often not paid a livable wage.

When their network of friends is unable to help them, they may turn to prostitution or theft in exchange for food, shelter, or drugs.

Studies have shown that the longer young people are homeless, the more likely they are to experience sexual exploitation and engage in substance abuse and criminal behavior.

Mental Health

- 45% of homeless youth reported mental health problems within past year.
- Only 9% of homeless youth access mental health services.
- Homeless youth are 11 times more likely to have mental health problems than the general population.

Criminal Activity

- 23% of homeless youth report stealing.
- 14% of homeless youth report committing forced entry to a residence.
- 20% of homeless youth report dealing drugs.
- Homeless youth report sexual assault and rape rates 2-3 times higher than non-homeless youth.

Increased Risk for Homeless LGBTQ Youth Compared to Heterosexual Homeless Youth

- LGBTQ homeless youth are twice as likely to experience sexual abuse before the age of 12.
- LGBTQ youth, once homeless, are at higher risk for victimization, mental health problems, and unsafe sexual practices.
- LGBTQ homeless youth are roughly 7.4 times more likely to experience acts of sexual violence than heterosexual homeless youth.
- LGBTQ homeless youth commit suicide at higher rates (62%) than heterosexual homeless youth. (29%)

Substance Abuse

- Homeless youth are 3 times more likely to use marijuana and 18 times more likely to use cocaine than their non-homeless peers.
- 30 – 40% of homeless youth report alcohol problems.
- 40 – 50% of homeless youth report drug problems.
- Only 10 -15% of homeless youth receive substance abuse treatment.

Unsafe Sex Practices

- More than 1/3 of homeless youth have had sex in exchange for money, food, shelter, or other basic needs.
- Homeless youth are 16 times more likely to be diagnosed with HIV, and 7 times more likely to die from AIDS than their non-homeless peers.

Pregnancy and Parenting

- About 50% of unsheltered homeless female youth have had a pregnancy experience.
- Children of homeless young mothers are 3 times more likely to experience homelessness numerous times, and 60% more likely to be removed from their parents and placed into foster care.
- Children born to homeless youth are 7 times more likely to live with their mother than with their father.
- Babies born to unaccompanied youth are at high risk for health complications.
- Miscarriages are 2 – 4 times higher among homeless youth than the general population.
- Without childcare, older youth may not be able to engage in education and workforce programs.

Homeless Youth in Rhode Island

There is no uniform, comprehensive system in place that addresses prevention or the unique needs of this vulnerable population in the United States. Each state has its own policies and legal definitions that affect service.

Crossroads Rhode Island offers shelter, basic needs assistance, case management, education and employment services, and housing to families and adult clients over the age of 18. When a person or family experiencing homelessness comes to Crossroads for help, they are assessed to determine the level of assistance they will need in order to end their homelessness. Some clients need only a little support from Crossroads, while others – especially those in the 18-24 age group – require more intensive support for a longer period of time.

According to Kids Count RI, 172 individuals ages 18-24 accessed the emergency shelter system at Crossroads and other shelters in Rhode Island in 2015. There is no way to know for sure how many more in this age group were unsheltered completely, staying temporarily with friends or family, or camping or living out of their cars without going to the emergency shelter system for help at all.

ENDING YOUTH HOMELESSNESS.

Preventing and ending youth homelessness requires system-wide coordinated efforts. Homeless youth have unique needs; they are very young adults who have most likely not lived on their own, yet they must make daily decisions related to personal safety and survival. According to The National Alliance to End Homelessness, there are several key elements that must be in place to end youth homelessness. These include supportive relationships, housing and services, connections to mainstream services, and quality staff.

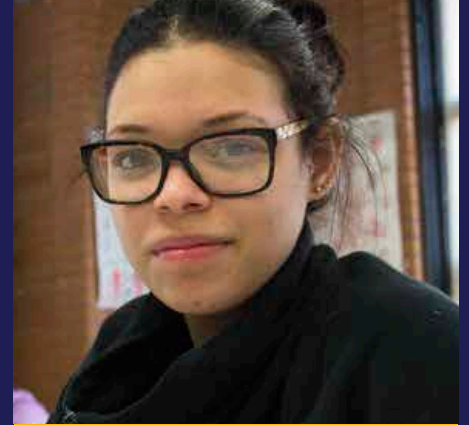
Best Practices for Ending Youth Homelessness

Like the overall problem of homelessness, the only solution to youth homelessness is housing. Homeless youth require a Housing First approach that is targeted to their special needs. They require a supportive environment in which they can make mistakes, foster relationships, and learn to advocate for themselves in the workforce, healthcare, government, and educational systems.

Older homeless youth who have income should be engaged in rapid re-housing, with affordable housing available specifically for this population. Preventing some instances of youth homelessness is possible with effective discharge planning for those aging out of the foster care system or exiting the juvenile justice system.

Services should be relationship-based and trauma-informed. Case managers should be available to provide youth with the support that they need. This may include support in reconnecting with family, targeted support for LGBTQ youth, and longer-term financial and case management support than is typically needed for adults and families. Many young people have never lived on their own and need support to learn the basics like managing a budget, preparing meals, and understanding tenant rights and responsibilities.

Finally, there needs to be a coordinated entry system that is able to connect youth to specialized and appropriate services using an assessment to prioritize those with the deepest needs, and track progress towards self-sufficiency.



Housing First

The approach used by Crossroads that prioritizes providing people experiencing homelessness with permanent housing as quickly as possible – and then providing supportive services as needed.

Rapid Re-Housing

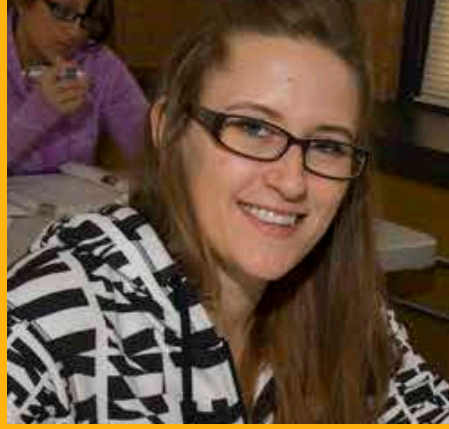
Provides financial assistance and services to prevent individuals and families from becoming homeless and help those who are experiencing homelessness to be quickly re-housed and stabilized.

Trauma Informed Care

An organizational structure and treatment framework that involves understanding, recognizing, and responding to the effects of all types of trauma.

Coordinated Entry

Paves the way for more efficient homeless assistance systems by reducing the amount of time people spend moving from program to program before finding the right match, and improving data collection and quality.



SPECIALIZED SERVICES FOR HOMELESS YOUTH.

When homeless youth receive services tailored to their unique situations, rather than a one-size-fits all service delivery approach, they:

- are more likely to reconnect with family members;
- are more likely to stay in school and/or utilize adult education and workforce programs that lead to higher education and/or employment;
- exit the system with skills for adult living;
- have decreased involvement with criminal justice system;
- have increased social skills and ability to live and work successfully and independently in the community;
- lead healthier lives and experience an overall improvement in their quality of life;
- have a reduced chance of experiencing homelessness as an adult.



“CROSSROADS WILL ALWAYS BE THERE TO HELP PEOPLE WHO FIND THEMSELVES HOMELESS GET BACK ON THEIR FEET AND BACK INTO HOUSING. IT IS MY HOPE AND INTENTION TO CONTINUE TO WORK TOWARDS A TIME IN OUR STATE’S HISTORY WHEN NO ONE WILL BE LIVING UNDER A BRIDGE, OR IN A TENT, OR IN HER CAR. BECAUSE ANYTHING LESS THAN THAT IS UNACCEPTABLE.”

HOW CROSSROADS IS HELPING.

Crossroads Rhode Island is committed to ending homelessness for families and individuals experiencing it in our state by applying a Housing First approach, and treating every instance of homelessness as unique.

In November 2016, Crossroads began operating Whitmarsh House, an 11-unit complex that offers permanent supportive housing for people with low to no income. In order to help address the problem of youth homelessness in Rhode Island, three of the units are reserved to house people who are between 18 and 24 years old.

Crossroads serves these individuals in partnership with Foster Forward, an organization dedicated to empowering lives impacted by the foster care system and with expertise in the area of vulnerable youth. Foster Forward and Whitmarsh House work together to identify youth clients and provide necessary supportive services.

“Crossroads RI is committed to ending homelessness for families and individuals experiencing it in out state.”



Shelters and Housing

Crossroads operates the only LGBTQ shelter in the state of Rhode Island. Members of the LGBTQ community make up a disproportionately high percentage of homeless youth, perhaps as high as 40%. Having a dedicated safe shelter for these individuals is extremely important, because they are also at greater risk for violence and exploitation once they become homeless.

Our main goal is always to get a family or individual into housing as quickly as possible. We help the clients with the most serious needs first, providing case management and assistance in the way that will be



the help

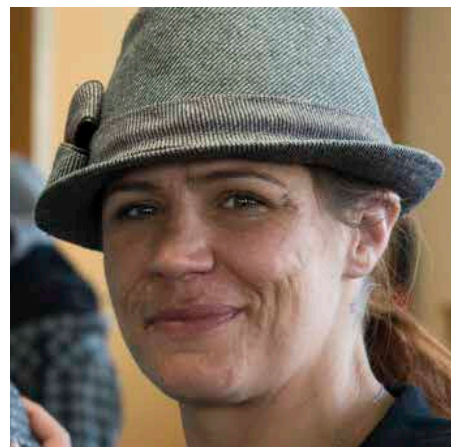
the most helpful to them. We also continue working with our clients after they are housed to help them remain stably housed and become good tenants.

The young people who reside at Whitmarsh House and in Crossroads' other affordable housing units receive the long-term support that they need to develop and maintain life skills and learn to be self-sufficient.

“Crossroads operates the only LGBTQ shelter in the state of Rhode Island. Members of the LGBTQ community make up a disproportionately high percentage of homeless youth, perhaps as high as 40%.”

In 2015, we helped 1,364 people secure or maintain stable housing. That same year, we served 253 people between the ages of 18-24 throughout our programs.

When we end long-term homelessness among the extremely vulnerable 18-24 year old population, we also decrease the number of people who will be chronically homeless in the coming decades. With the support of the Rhode Island community, we can ensure that chronic homelessness will become a problem of the past, and not a problem passed on to a new generation.



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**THE MISSION OF CROSSROADS
RHODE ISLAND IS TO HELP HOMELESS
OR AT-RISK INDIVIDUALS AND FAMILIES
SECURE STABLE HOMES. THOSE WE SERVE
ACHIEVE THIS BY ENGAGING IN OUR RANGE
OF SERVICES INCLUDING HOUSING, BASIC
NEEDS, SHELTER, CASE MANAGEMENT,
REFERRALS, AND EDUCATION AND
EMPLOYMENT SERVICES.**

