Now and Then: A Retrospective Study of Homelessness in Adulthood and Youth

June 2013



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Established in 1985, Health Care for the Homeless, Inc. (HCH) is a federally qualified health center and nonprofit organization that works to prevent and end homelessness for vulnerable individuals and families by providing quality, integrated health care and promoting access to affordable housing and sustainable incomes through direct service, advocacy, and community engagement. Comprised of a headquarters facility located in downtown Baltimore City, as well as satellite clinics in the City of Frederick, Montgomery, Harford and Baltimore counties, HCH delivers pediatric, adult, and geriatric medical care; mental health services; social work and case management; addiction treatment; dental care; vision assistance; HIV services; outreach services; supportive housing; and access to education and employment for thousands of Marylanders annually. In 2011, HCH served approximately 10,000 individual children and adults experiencing homelessness in Maryland, including over 6,000 in Baltimore City.

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Executive Summary

The issue of youth homelessness has received more attention in recent years as the numbers of families without stable housing has increased. The National Center on Family Homelessness ranked Maryland as 26th in the nation based on its performance and planning in response to the following: homelessness among young people, the extent of child homelessness, child well-being, risk for child homelessness, and state planning and policy activities. The Maryland State Department of Education, the City's Continuum of Care application, and its shelter system all report increases in homelessness among youth. Children who experience homelessness are prone to a range of poor outcomes in the areas of education, health care, and future employment and stability; hence, it is important to attend to this particularly vulnerable group given how early instability can propagate over time. As a result of the national focus on youth homelessness and the prevalence of the problem in both Maryland and in Baltimore City, staff and clients of HCH sought to investigate and compare the experiences of people who had been homeless at some point growing up and those who had stable housing as a youth.

Methodology: In July and August 2012, HCH staff and interns along with advocates with *B'More Housing for All* surveyed 504 adults in Baltimore City about their current experiences with homelessness, as well as their experience of homelessness in youth. For purposes of this study, "homelessness" is defined as lacking stable housing; that is, not having a place to live that is one's own or living in a place that might be taken away unexpectedly. This would include staying in shelters, on the street, in transitional housing, in a "doubled-up" housing arrangement for economic reasons, in abandoned buildings, in vehicles and other locations unfit for habitation. "Homeless youth" is defined as being homeless prior to age 18. The survey used a community-based participatory research design, whereby those who have experienced homelessness helped design the survey tool, select survey sites, and process the findings. This design helps ensure the participation of those most directly impacted by the conditions described and encourages their involvement in enacting needed solutions. Because this approach uses convenience sampling, there is selection bias in the design, and the data may not be representative of individuals who declined or were unavailable to be surveyed, and/or those who are disconnected from services. There was also likely some degree of recall bias.

Key Results: This report is divided into three sections: the first includes all survey respondents; the second compares those who experienced homelessness as a youth with those who did not; the third takes a more in-depth look at the group who had been homeless prior to age 18.

- Age and gender: Of all survey respondents, over half (55%) were over age 45, and 11% were age 18 to 24. Those who lacked stable housing as a youth were younger overall (average age 35 v. 45 years). Just over a third of the entire survey sample (35%) was female, with slightly more women among the group who had been homeless as a youth (37%).
- Family: Nearly all individuals (90%) come from families with multiple siblings. Two-thirds (64%) had children of their own. About half (49%) of those who were homeless as youth report unstable/very unstable relationships with their family, compared to only 16% of those not homeless growing up.
- Education: Of the entire survey population, 25% had not received a high school diploma, 55% had finished high school or a GED, and 20% had sought higher education. Among those who had been homeless as a youth, about one-third failed to complete high school (32%); nearly half (49%) said they were not able to fully participate in school; more than half (57%) missed days of school; 27% changed schools; and 43% dropped out altogether because of their housing instability. Note that while a high number reported dropping out, only 32% responded in an earlier question that they had

less than a high school diploma/GED certificate, which may indicate that a number eventually returned to complete school at some point.

- Employment: Of the full survey group, nearly 70% had been unemployed longer than one year at the time of the survey (41% for more than three years). Nearly all (97%) had been employed at one point, with only 3% indicating they had never worked. Those who had been homeless as a youth reported higher levels of current employment (19% v. 13%) and lower levels of long-term unemployment as compared to their counterparts (32% v. 43%).
- Experience with homelessness: The vast majority (83%) of those surveyed had not experienced homelessness prior to age 18. Those that did were less likely to be currently experiencing homelessness (60% v. 74%), but those that were had higher rates of long-term current and cumulative homelessness (24%/35% v. 18%/28%, respectively). Current venues of shelter are also strikingly different, with former homeless youth staying more often on the street (68% v. 52%) and in abandoned buildings (32% v. 22%) and less often in shelters (64% v. 70%) than those not homeless as a youth. Those homeless as a youth report significant lengths of time spent homeless as a child, with 42% reporting more than 2 years spent without stable housing (and 17% more than 5 years). While one-third (35%) has stayed in a shelter at some point during this time, more than half had been doubled up or "couch surfing" (60%) and/or stayed on the street (56%). Nearly one-third slept in an abandoned building (30%) as a youth.
- Out of home placement: Those who were homeless as a youth had much higher rates of public system involvement while growing up—twice as likely to have been in foster care (23% v. 12%), three times more likely to have been in kinship care (22% v. 7%), a group home (32% v. 9%) or juvenile detention (28% v. 9%), and four times more likely to have been in a residential treatment center (RTC) for a mental health disorder (23% v. 6%). Unfortunately, the children of those formerly homeless still have higher rates of out of home placement when compared with the children of those not homeless as a youth (nearly twice as likely to be in foster care and kinship care, three times as likely to have been in a group home or juvenile detention, and four times as likely to have been in an RTC). Both groups report much lower rates of their own children being placed in group homes (13% v. 4%), juvenile detention (13% v. 4%) or RTCs (8% v. 2%) when compared to their own experiences growing up.
 - *Benefits:* Those with homelessness in their youth also had higher rates of all types of public assistance to their families while they were growing up, to include TCA/TANF/"welfare" (56% v. 34%), food stamps (63% v. 41%), WIC (27% v. 19%), medical assistance/Medicaid (63% v. 47%) and disability (20% v. 17%). Both groups report currently receiving less TCA/TANF/"welfare" (28% for both) and WIC assistance (13% v. 10%) than they did growing up, but higher rates of SNAP/food stamps (82% v. 77%), Medicaid (78% v. 68%), and disability (33% for both).
- *Health:* The health of former homeless youth was also worse than their counterparts (32% v. 9% reporting poor/fair health), with fewer survey respondents reporting they had access to medical check-ups (72% v. 89%) or care when sick or injured when growing up (75% v. 90%).

Conclusion & Recommendations: Among adults who had been homeless, this survey found less than one in five had this experience before age 18, but this group has specific vulnerabilities related to education, involvement with public systems (out of home placement) and use of the homeless service system. While this subgroup received greater levels of benefits as youth, these disparities have narrowed over time. Both groups are still clearly struggling with housing instability and unemployment. Public policies related to affordable housing, homeless services, employment, health care, schools and benefits

must all be coordinated to provide an adequate support network and respond to families in crisis. Targeted efforts to create affordable housing and employment opportunities that pay sufficient wages are especially critical to prevent and end homelessness among individuals and families in Baltimore City.

Introduction

The issue of youth homelessness has received more attention in recent years as the numbers of families without stable housing has increased. A 2010 report by the National Center on Family Homelessness (NCFH) utilizing data from the U.S. Department of Education found that one in 45 – or 1.6 million – children in the United States experienced homelessness, an increase of 33% from three years prior.² Despite Maryland's status as a wealthy state, the NCFH ranked it in the middle of all states (26th) based on its performance and planning in response to homelessness among young people, the extent of child homelessness, child well-being, risk for child homelessness, and state planning and policy activities.³ According the Maryland State Department of Education, over 14,000 homeless students were identified during the 2010-2011 school year; this also represented a significant increase from the number identified just two years earlier (10,676).⁴ In its 2012 application for Continuum of Care Homeless Assistance Program funding, Maryland reported 1,300 households experiencing homelessness that had at least one child present.⁵ Children age 0 to 17 make up a significant portion of those staying in homeless shelters, comprising 30% of Maryland's shelter population in FY 2009 (the most recent year data are available from the Maryland Department of Human Resources) and 22% of those staying in Baltimore City shelters. These numbers may be undercounts of the actual scope of the problem given historic limitations in counting a population that may not readily self-identify for a variety of reasons.

In addition to the homeless young people who are identified by schools or service providers, there are many others who remain in the shadows: unaccompanied homeless youth often try to avoid the attention of the social service system. Many have had negative experiences with foster care or are afraid of being returned to dysfunctional or abusive families. Disconnected from family and wary of social institutions, unaccompanied homeless youth are often not identified or served by traditional services. Although the National Alliance to End Homelessness estimates that "as many as 50,000 youth sleep on the streets in the United States," the Alliance notes that there is a dearth of solid data. In Maryland, data on the prevalence of unaccompanied homeless youth largely comes from counts that parallel HUD-mandated homeless censuses. In 2011, the Center for Adolescent Health at the Johns Hopkins School of Public Health identified 640 adolescents and young adults between the ages of 13 and 25 who were living on their own – unaccompanied by a parent or guardian. This represents a 50% increase over the number of homeless unaccompanied youth identified in a 2009 count. Prince George's County first conducted a count of homeless youth at the end of 2012, but the data is not yet available.

The impact of poverty on children and youth can include increased risk of negative physical and mental health. When compared to stably housed poor children, homeless children are more likely to have behavioral problems, developmental delay, health problems including obesity, and were more likely to fail school or drop out. In Maryland, homeless children have higher rates of health problems such as asthma and emotional disturbance, significantly lower test scores, and a high school graduation rate below 25%. In 2012, the U.S. Interagency Council on Homelessness published a framework to specifically address what should be implemented to improve the educational outcomes for homeless children and youth, and the steps that need to be taken to advance the goal of ending youth homelessness by 2020. Central to the framework is to approach the problem of youth homelessness in a more coordinated and effective way across different disciplines that work with this population.

As a result of the national focus on youth homelessness and the prevalence of the problem in both Maryland and in Baltimore City, staff and clients of HCH sought to investigate and compare the

experiences of people who had been homeless at some point growing up and those who had stable housing as a youth.

Methodology

HCH staff and interns partnered with members of *B-more Housing for All* to develop the survey (Appendix B) and in the four weeks between July 27 and August 24, 2012, these individuals (joined by students from McDaniel College and Johns Hopkins University) conducted 594 surveys throughout Baltimore City. The survey was conducted in accordance with an Institutional Review Board (IRB) protocol that was approved by faculty at McDaniel College. After removing 90 surveys completed by those who had never experienced homelessness, there were 504 final surveys included in this report.

Each member of the survey team received training on administering the survey tool and recording codable data. All of the respondents participated voluntarily, their identifying information was not collected, and respondents were aware that they could stop the survey or skip questions. McDaniel College students and HCH staff recorded and analyzed the data using SPSS Version 19.

For purposes of this study, homelessness is defined as lacking stable housing; that is, not having a place to live that is one's own or living in a place that might be taken away unexpectedly. This would include staying in shelters, on the street, in transitional housing, in a "doubled-up" housing arrangement for economic reasons, in abandoned buildings, in vehicles and other locations unfit for habitation.

For the purposes of this study, "youth homelessness" is defined as having experienced homelessness/housing instability prior to the age of 18 (though we note that this term in other areas of public policy can include those up to age 24). In accordance with the IRB protocol, no one under the age of 18 participated in the survey; therefore, respondents were asked about retrospective experiences with homelessness as a minor.

Survey sites (Appendix A) were selected by HCH staff, interns and B-More Housing for All members. Multiple locations across Baltimore City were chosen in an attempt to maximize opportunities for participation. Food pantries, unemployment offices, shelters and a variety of homelessness assistance programs were selected as they serve high number of people experiencing homelessness. In an effort to capture more recent experiences, survey sites also included providers that targeted services to young adults; in addition, surveys were undertaken at the main branch of the Enoch Pratt Free Library to capture the experiences of those less likely to be currently receiving services at the selected locations.

As with previous HCH research, this survey was designed to obtain consumer-focused information from very low-income Baltimore City residents who have experienced homelessness. While the results describe a specific population, there are several limitations to this research design. Primarily, the data are self-reported and therefore cannot be confirmed and are subject to recall bias. In addition, as the survey did not collect identifying information, there is the potential for duplication. All respondents were asked if they had previously completed the survey to limit this risk. Moreover, considering the study was cross-sectional, causal relationships cannot be determined from the data. Finally, as the surveys were conducted at service providers using convenience sampling, there is selection bias in the design, and the data may not be representative of individuals who declined or were unavailable to be surveyed, and/or those who are disconnected from services.

There are numerous benefits to using a community-based participatory research design. Foremost, working with *B-more Housing for All* provided meaningful connections to the study population in order

to build upon the strengths of each individual and engage members in community activity. Overall, the survey methods used in this study allowed the personal perspectives of those who struggle with unstable housing to be heard and used to guide policy change that will have a direct impact upon them and their communities.

Results

Researchers completed surveys with 594 individuals during the study period, but the analysis in this report is limited to the 504 individuals who had experienced homelessness at some point (whether as a minor or as an adult). Section one presents demographic information about all 504 respondents. Section two compares the experiences of those who were homeless in youth with those who did not become homeless until they reached adulthood, and section three provides more detail related to the group who experienced homelessness as a minor.

Section 1. Demographics of Survey Group

Respondents were asked to share some basic demographic information such as gender, age, educational attainment, as well as their current employment status and the timing of their experiences with homelessness. Table 1 illustrates these results.

Table 1. Demographics of Survey Sample

Characteristic	Response (n = 504)					
Gender						
Male	65%					
Female	35%					
Age						
18-24	11.4%					
25-34	19.2%					
35-44	14.7%					
45-54	34.1%					
55-64	18.2%					
65+	2.4%					
Family Members						
Have siblings	90.0%					
Mean # siblings	4.4					
Have children	64.0%					
Mean # children	3.4					
Education						
<high school<="" td=""><td>25.4%</td></high>	25.4%					
High school/GED	54.9%					
Technical school/ community college	10.4%					
4-year college	7.6%					
Graduate school	1.8%					

Characteristic	Response (n = 504)					
Length of Unemployment (among those unemployed at time of survey)						
Never employed	3.0%					
<3 months	13.2%					
3 months to <1 year	15.2%					
1 year to <3 years	27.7%					
3+ years	40.9%					
Age at First Homelessnes	s					
<18 years	16.7%					
18+	83.3%					

Overall, the survey respondents were two-thirds male, over half (55%) were over age 45 and 11% were age 18 to 24. Nearly all individuals (90%) come from families with multiple siblings, and two-thirds (64%) had children of their own. While one-quarter had less than a high school diploma, over half (55%) had finished high school or a GED, with 20% had sought higher education. Of concern—but not unexpected—is the long-term unemployment this population has experienced, with nearly 70% unemployed longer than one year (41% for more than three years). Nearly all (97%) had been employed at one point, with only 3% indicating they have never worked. Finally, the vast majority (83%) had not experienced homelessness prior to age 18. This may be due to the age of the study participants, who were largely older and grew up in a time before family and youth homelessness became more prevalent. Section two explores some differences between these two populations and leads to a better understanding of possible factors that can influence current or past instability in this regard.

Section 2. Differences Between Those Who Experienced Homelessness as a Youth and Those Who Did Not

The survey asked questions regarding participants' history with homelessness, the types of shelter sought, the types of public assistance they receive now and that their family received when they were growing up, and the type of public system involvement they and their siblings had as well as their own children now. Finally, the survey asked about respondents' family stability, and their own health status and access to health care services as a youth. Table 2 illustrates the differences between in key characteristics between those who had experienced homelessness as a youth and those who had not.

Table 2. Differences Based on Experience of Homelessness as a Youth

Characteristic	Homeless During Youth (n= 84)	Not Homeless During Youth (n= 420)			
Demographics					
Mean age at time of interview	35	45			
Mean # children	3.0	3.4			
Mean # siblings	4.5	4.3			
Female	37%	35%			
Less than High school/GED	32%	24%			

Characteristic	Homeless During Youth (n= 84)	Not Homeless During Youth (n= 420)				
Currently employed	19%	13%				
If unemployed, unemployed for 3+ years	32%	43%				
Length of time homeless						
Are currently experiencing homelessness	60%	74%				
Current episode of homelessness is 5+ years	24%	18%				
Total time spent homeless over lifetime is 5+ years	35%	28%				
Venues of Shelter (among those currently homeless)						
Homeless shelter	64%	70%				
Street	68%	52%				
Abandoned buildings	32%	22%				
Family Relationships: Unstable/very unstable	49%	16%				
Public System Involvement Growing Up						
Foster care	23%	12%				
Kinship care	22%	7%				
Group home	32%	9%				
Juvenile detention	28%	9%				
Residential treatment center	23%	6%				
One or more of the above	61%	26%				
Sibling in one or more of the above	46%	21%				
Family Receipt of Public Assistance Growing Up						
TCA/TANF/"welfare"	56%	34%				
SNAP/food stamps	63%	41%				
WIC	27%	19%				
Medical assistance/Medicaid	63%	47%				
Disability	20%	17%				
Health Status Growing Up						
Poor/fair	32%	9%				
Access to Health Care Growing Up						
Regular medical check-ups	72%	89%				
Access to care when sick/injured	75%	90%				
Respondent's Children's Involvement with Public Sy	stems					
Foster care	26%	10%				
Kinship care	24%	13%				
Group home	13%	4%				
Juvenile detention	13%	4%				
Residential treatment care	8%	2%				
Current Receipt of Public Assistance		•				
TCA/TANF/"welfare"	28%	28%				
SNAP/food stamps	82%	77%				
WIC	13%	10%				
Medical assistance/Medicaid	78%	68%				

Characteristic	Homeless During Youth (n= 84)	Not Homeless During Youth (n= 420)
Disability	33%	33%

While the sample size of those who had experienced homelessness as a youth was much smaller than those who had not, there are some important differences that emerge from their responses. Those who lacked stable housing at some point growing up were younger (35 v. 45 years) and a larger percentage failed to complete high school (32% v. 24%), yet they reported higher levels of employment (19% v. 13%) and lower levels of long-term unemployment compared to their counterparts (32% v. 43%). They were also less likely to be currently experiencing homelessness (60% v. 74%), but those that were had higher rates of long-term current and cumulative homelessness (24%/35% v. 18%/28%, respectively).

Current venues of shelter are also strikingly different, with former homeless youth staying more often on the street and in abandoned buildings and less often in shelters than those not homeless as a youth. Of particular interest is that about half of this population (49%) report unstable or very unstable relationships with their family, compared to only 16% of those not homeless growing up. These unstable relationships likely explain the much higher rates of public system involvement while growing up—twice as likely to have been in foster care (or their sibling in foster care), three times more likely to have been in kinship care, a group home or juvenile detention, and four times more likely to have been in a residential treatment center (RTC) for a mental health disorder. Troubled family backgrounds may also explain higher rates of all types of public assistance in households where homelessness was present (TCA, food stamps, WIC, Medicaid and disability). The health of former homeless youth was also worse than their counterparts (with 32% reporting poor/fair v. 9%, possibly explained by higher rates of RTC admission), with fewer survey respondents reporting they had access to medical check-ups (72% v. 89%) or care when sick or injured (75% v. 90%).

Unfortunately, the children of those formerly homeless still have higher rates of out of home placement when compared with the children of those not homeless as a youth (nearly twice as likely to be in foster care and kinship care, three times as likely to have been in a group home or juvenile detention, and four times as likely to have been in an RTC). However, the good news is that both groups report much lower rates of their own children being placed in group homes, juvenile detention or RTCs when compared to their own experiences growing up. This may be due to evolving public policy practices emphasizing alternatives to out of home placement, but without more detailed analysis, we cannot draw further conclusions.

Finally, we see both groups currently receiving less TCA/TANF/"welfare" and WIC assistance than they did growing up, but higher rates of SNAP/food stamps, medical assistance/Medicaid, and disability. Given that the majority of the survey respondents were men, it is expected that TCA and WIC would be lower since those programs are generally directed toward women with children, and we hope that receipt of the other benefits helps improve what would otherwise be a worse situation. Of particular concern is the group *currently* experiencing homelessness (those not homeless as youth) has an equal or lower rate of benefit receipt than their counterparts. While there are differences between groups, both clearly are grappling with significant current and past instability as indicated by their current living situation, their own family instability, and receipt of public assistance both current and growing up. Section 3 will look further into the experiences of those who were homeless at some point growing up as a way of better understanding this specific subgroup.

Section 3. Experiences of those Homeless During Youth

This section looks at the experiences of those who were homeless during youth, in terms of its duration, connection with shelter services, and impact on education. Table 3 illustrates the participants' responses.

Table 3. Characteristics of Those Experiencing Homelessness as a Youth

Characteristic	Homeless During Youth (n = 84)						
Cumulative Length of Time Spent Homeless as a Youth							
<1 month	6%						
1 month to <6 months	23%						
6 months to < 2 years	29%						
2 years to < 5 years	25%						
5 years to < 10 years	10%						
10+ years	7%						
Venues of Shelter While Homeless as a Youth							
Homeless shelter	35%						
Transitional program/recovery house	14%						
Doubled-up/"couch surfing"	60%						
Street	56%						
Abandoned building	30%						
Juvenile detention	24%						
Vehicle/car	16%						
Involvement with School							
Not able to fully participate in school activities	49%						
Missed days of school	57%						
Had to change schools	27%						
Dropped out of school	43%						

While youth and family homelessness appears to be growing in the United States currently, this group of 84 people is looking back over disparate periods of time given the range of ages (with 35 years being the average). This group reports significant lengths of time spent homeless as a child, with 42% reporting more than 2 years spent without stable housing (and 17% more than 5 years). While one-third (35%) has stayed in a shelter at some point during this time, more than half had been doubled up or "couch surfing" (60%) and/or stayed on the street (56%). Nearly one-third slept in an abandoned building (30%) and about one-quarter had been in juvenile detention (24%, note this is a slightly lower reported rate than the same earlier question where 28% of this group reported a stay in juvenile detention growing up). Nearly half of this group said they were not able to fully participate in school, more than half (57%) missing days of school, 27% changing schools, and 43% dropping out altogether because of their housing instability. While a high number reported dropping out, only 32% indicated in an earlier question they had less than a high school diploma/GED certificate, which may mean that a number eventually returned to complete school at some point. These responses hopefully will be meaningful for public policy officials who design and administer homeless crisis services and education programs aimed to improving individual and family stability. Based on this information, the next section offers some policy recommendations those officials might consider.

Discussion & Policy Recommendations

The initial intention of this survey was to learn more about the experiences with youth homelessness from adults who had unstable housing at some point growing up. However, despite our best efforts to survey young adults age 18 to 24, our survey population ended up being older than anticipated and therefore, may not speak to recent or contemporary realities that are facing today's young people. Future survey methodologies may be able to improve upon this initial attempt, but there are some important points we can derive from the data collected that hopefully can meaningfully contribute to a better understanding of the issue and lead to changes in public policy.

System Involvement: More than half of adults who were homeless growing up came from families that had some involvement with social services and/or juvenile justice, confirming the high rate of unstable family relationships reported and suggesting backgrounds with abuse and/or neglect or ones with some level of criminal involvement. In recent years, policies regarding out-of-home placement have evolved to put greater emphasis on prevention and family reunification, yet many of these adults also have children in the same systems they themselves experienced (though higher-end care such as RTCs and group homes is lower—it is still much higher than the comparison group). Housing stability must be a central part of assistance that DSS and DJS can provide when working with troubled families. While many more adults surveyed had not experienced homelessness, their current and past systems involvement (and that of their own children) is markedly lower, suggesting that the presence of housing stability early on can keep multiple generations from entering out-of-home placement.

Schools: Youth homelessness compromises the ability to attend and participate in school, and yields greater disparities in educational attainment. While school systems now are required to identify and assist those who are homeless, the supports these families need are likely more than an individual school can provide. Once students drop out, it becomes even more difficult for an intervention to be effective; hence drop-out prevention should be a priority. Compounding this problem is likely the high number of students with intensive needs enrolled in Baltimore City schools who come from unstable families grappling with poverty, poor health, unemployment and other social issues. In reality, schools are tasked with fixing problems they inherit from a broader community environment, and families generally need a broader range of supports than schools can provide on their own, such as adequate incomes, affordable housing, child care and other assistance. Transportation should continue to be a key service to reduce the number of times students change schools, summer programming that includes the free breakfast and lunch meal programs should be universally available to ensure continuity of education over the summer and to continue access to nutritional food.

Health care: Those who were homeless growing up were over four times more likely to have been in poor health, and also less likely to have regular medical check-ups or access to care when sick or injured. This group (and their children) also had higher rates of RTC involvement as youth, suggesting higher rates of serious emotional disorders requiring higher levels of mental health treatment. Indeed, about one-third of both groups report currently receiving disability assistance. Poor health can also contribute to longer-term homelessness, and while this survey did not ask about the presence of specific health conditions, it is notable that the group with the highest system involvement (past and present) and the highest rate of public assistance (past and present) are also experiencing longer periods of homelessness compared to those who had not been homeless growing up. Over time, health may deteriorate, especially when many survey respondents in both groups report sleeping on the street and in abandoned buildings.

Benefits: As might be expected, those who were homeless as a youth lived in families who received a greater amount of assistance than those who grew up in families who were not unstably housed. Over time, however, both groups receive higher levels of food stamps, Medicaid and disability compared to

when they were growing up, with a smaller disparity between the groups. These trends may be due to survey demographics (more men than women) and target population, or changes in how benefits have evolved over the past several decades (e.g., reducing barriers to receiving food stamps and Medicaid, and increasing barriers for TANF/"welfare"). While benefits likely reduce hardship, the bulk of the survey population is currently experiencing homelessness, suggesting that additional resources are needed in order to gain stability. This could be through employment with decent wages, more intensive benefits that address a wider range of needs, or through higher benefit levels (such as disability income levels, which are currently set at about \$700 a month for SSI/disability).

Housing and the homeless service system: The homeless services system should be able to accommodate families with children as well as unaccompanied homeless youth who have been separated from their parents and are living on their own. The high rate of those who were homeless as a youth who were couch surfing, or staying on the street, in an abandoned building or in a car should indicate that there are many youth who may not be counted as part of formal homeless estimates or targeted for additional assistance. Programs that couple supportive housing with education and job opportunities would be ideal for preventing homelessness, especially among intact families and youth who are transitioning out of the foster care and juvenile detention systems. At the same time, many of the adults in this survey report being currently homeless—some for long periods of time—which points to a need for more affordable housing options and support services in general.

Conclusion

Homelessness is a serious concern whether it occurs among adults or youth, however, those who are unstably housed as youth are even more vulnerable to continued instability as they age and have children of their own. This survey found the majority of adults experienced homelessness as an adult, but not as a child. Among those who were homeless as a youth, they had greater systems involvement and a higher receipt of public benefits, but also had higher levels of employment and lower levels of long-term unemployment compared to their counterparts who had not been homeless as children. Because out-of-home placements for the children of these adults are still higher, public policies must work to break the inter-generational family instability where it does exist, as well as end homelessness among all adults, whether or not they had this experience as youth. Public policies related to housing, homeless services, employment, health care, schools and benefits must all be coordinated to provide an adequate support network and respond to families in crisis. Targeted efforts to create affordable housing and employment opportunities that pay sufficient wages are especially critical to prevent and end homelessness among individuals and families in Baltimore City.

NOTES:

¹ National Center on Family Homelessness (2009). *America's Youngest Outcasts*. Available at: http://www.homelesschildrenamerica.org/reportcard.php.

² The National Center on Family Homelessness. (2011). America's Youngest Outcasts: 2010. Available at http://www.homelesschildrenamerica.org/media/NCFH AmericaOutcast2010 web.pdf.

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⁴ National Center for Homeless Education. "Maryland: Consolidated State Performance Report. Available at http://nchespp.serve.org/profile/MD.

⁵ U.S. Department of Housing and Urban Development (2012). HUD's 2012 Continuum of Care Homeless Assistance Programs: Homeless Populations and Subpopulations. Available at: http://www.hudhre.info/CoC_Reports/2012_md_pops_sub.pdf.

⁶ Maryland Department of Human Resources, Annual Report on Homeless Services in Maryland, FY 2009. Available at: http://www.dhr.state.md.us/documents/Data%20and%20Reports/Central/Annual-Report-on-Homelessness%20Services-in-Maryland-Fiscal-Year-2009.pdf.

National Alliance to End Homelessness. "Youth." Available at http://www.endhomelessness.org/pages/youth.

⁸ Astone and Pologe. (2011). "Homeless Young People in Baltimore: A Parallel Count Accompanying the 2011 Homeless Census." Available at

https://docs.google.com/file/d/0B4UxTbktSXBTMjIxYzRkYmItZDg1Yi00ODJiLWFiMGItZmEzNjYyM2EwZWU

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9 Buckner J.C. Understanding the impact of homelessness on children: Challenges and future research directions. American Behavioral Scientist. January 2008:51 (6): 721.

¹⁰ Institute for Children, Poverty, and Homelessness (Winter 2011). National Survey of Programs and Services for Homeless Families: Maryland. Available at: http://www.icphusa.org/PDF/reports/ICPH_Maryland_Brief.pdf.

¹¹ More information is available at the U.S. Interagency Council on Homelessness website at: http://www.usich.gov/population/youth/a framework for ending youth homelessness 2012/.

APPENDIX A

Participating Service Providers and Survey Sites

- 1. Beans and Bread
- 2. Carriage House
- 3. Enoch Pratt Free Library (Main Branch)
- 4. Geraldine Young Family Life Center
- 5. Health Care for the Homeless
- 6. Helping Up Mission
- 7. HOPE Wellness and Recovery Center
- 8. Manna House
- 9. My Sister's Place
- 10. Our Daily Bread
- 11. Project Homeless Connect (Ravens Stadium)
- 12. Project PLASE
- 13. Restoration Gardens
- 14. Salvation Army Booth House
- 15. St. Vincent de Paul Park
- 16. Volunteers of America
- 17. Weinberg Housing and Resource Center
- 18. Word on the Street
- 19. Youth Empowered Society (YES)
- 20. YO! Eastside Center

APPENDIX B

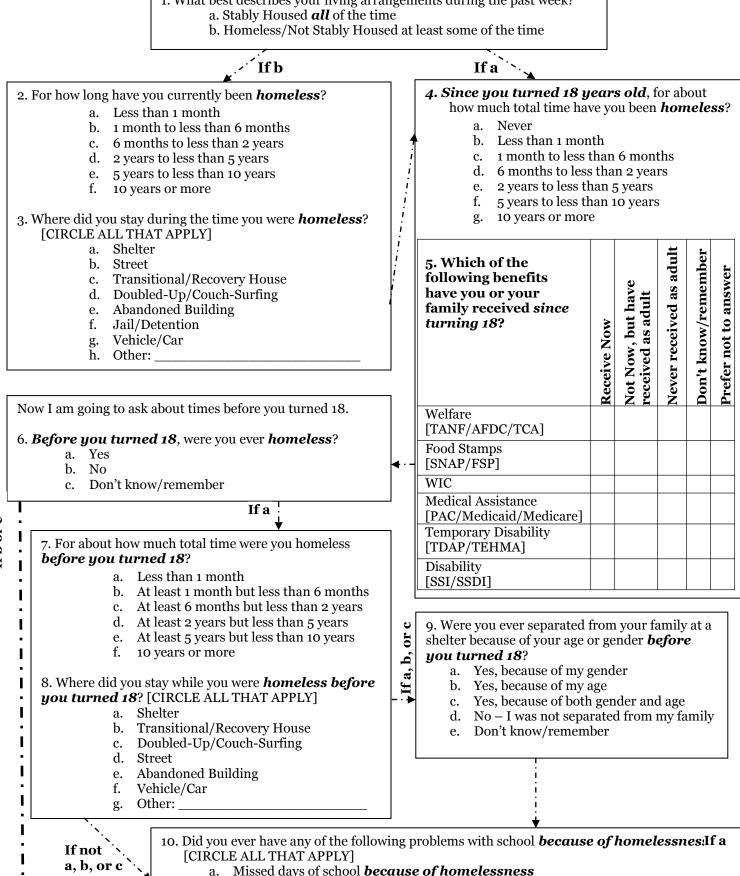
HCH SUMMER 2012 SURVEY: YOUTH AND YOUNG ADULT EXPERIENCES WITH HOMELESSNESS

and I'm working with Health Care for the Homeless on a survey that hopefully will help improve how Maryland offers Hello, my name is services to children and young adults who are experiencing homelessness. To do that, I would like to ask you some questions about your current and past experiences with homelessness. You don't have to be currently homeless, or ever homeless, to answer these questions. I won't ask for your name or any identifying information, and if you don't want to answer a question, you don't have to. You can also stop the survey at any time. Based on that, can I ask you some questions?

Before I do, though, two questions: Is this the first time someone has asked you to take this survey this summer? And are you at least 18 years old? [If yes to both, continue with survey. If not 18, explain that only those 18 or older can be interviewed.]

Definitions:

- Stably housed: having a place to live that is either your own or a place you feel is not likely to be taken away unexpectedly
- Homeless [Not Stably Housed]: not having a place to live that is either your own or living in a place you feel might be taken away unexpectedly
- Doubled-up [Couch-Surfing]: living with friends/family because of housing instability or family conflict
 - 1. What best describes your living arrangements during the past week?



Had to change schools because of homelessness

Dropped out because of homelessness

Don't Know/Don't Remember

Not able to fully participate in school activities **because of homelessness**

No – I did not have any of these problems with school because of homelessness

b. c.

d.

Flip to page 2

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were sick or inj	ured?	- J = 62 III				,		Temporary		\vdash	\dashv	\dashv	
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