



Center for School Mental Health University of Maryland School of Medicine Homeless Youth and School Mental Health

December 2011

Defining Homelessness

Homeless youth have been described as one of the most neglected and victimized populations, with approximately 1.5 million homeless students attending United States (U.S.) schools each year (National Center on Family Homelessness, 2011a). A “homeless individual” is defined as 1) someone who lacks a fixed, regular, and adequate nighttime residence and 2) someone who has a primary nighttime residence that is a shelter or institution that provides temporary residence, or a location that is not designed as a regular sleeping accommodation for human beings (U.S. Department of Housing and Urban Development, 2011). This definition includes children and youth who are living in transitional or emergency shelters, cars, parks, public spaces, abandoned buildings, bus or train stations, or camping grounds due to a lack of alternative adequate accommodations.

Currently, the federal definition of homelessness does not include people living in motels or those who share housing with someone else, which is often referred to as “doubled-up.” Although the Department of Education recognizes such students as homeless, unfortunately, students

who do not meet HUD’s definition of homelessness are not eligible to receive

many of the federal services that are offered. The Homeless Children and Youth Act of 2011 was recently introduced in Congress to address this issue and is currently under review.

Families with children are among the fastest growing segments of the homeless population (National Coalition for the Homeless, 2009). From 2007 to 2009, there was a 30% increase in the number of families who experienced homelessness, with more than 170,000 families being affected (U.S. Department of Housing and Urban Development, 2010). About 22% of sheltered homeless individuals are youth under the age of 18, with disproportionate numbers of African-American and Native American youth represented (U.S. Department of Housing and Urban Development, 2010).

In addition, homeless youth who are with their families, unaccompanied youth who are homeless and not under the physical custody of a parent or guardian are also in great need. Unaccompanied youth are either youth who have run away from home, those who have been asked to leave or thrown out of their home (also known as “throwaway” youth), or independent

youth who have no contact with their families. There are also cases whereby a teenage male youth may become unaccompanied or independent if his family has moved into a shelter with restrictions on the age of male youth who can reside there. In some instances, youth may leave their homes due to a violent, neglectful, and volatile family environment or due to their caretaker’s disapproval of their sexual preferences (U.S. Interagency Council on Homelessness, 2010; Fernandes, 2007). Youth who have transitioned, or “aged out” of the foster care system also represent a significant number of unaccompanied youth. Estimates of the percentage of youth who were in foster care who later became homeless range from 14% to 25% (Fernandes, 2007).

It is extremely difficult to identify the actual number of unaccompanied youth in the U.S. because they are often not attending school and do not frequently use homeless services or facilities. The Department of Housing and Urban Development has estimated that 2.2% of the homeless sheltered population, or 22,700 individuals, were unaccompanied youth; however, this is considered a gross underestimate of the number of unaccompanied youth as many of them do not utilize shelters. Other estimates have suggested that there are as many as 110,000 unaccompanied youth (U.S. Interagency Council on Homelessness, 2010).

Fast Facts on Children and Youth who are Homeless

- One in 50 children experience homelessness each year in the U.S. (National Center on Family Homelessness, 2009).
- Almost 50% of homeless children are under the age of 6 (National Center on Family Homelessness, 2009).
- Less than 16% of eligible pre-school aged homeless children are enrolled in preschool programs (U.S. Department of Education, 2004).
- 87% of homeless youth are enrolled in school and only 77% of them attend school regularly (U.S. Department of Education, 2004).
- 42% of homeless children transfer schools at least once a year and 51% of these students will transfer twice or more (National Coalition for the Homeless, 2007).
- Less than 25% of homeless children graduate from high school (National Center on Family Homelessness, 2009)



Experiences of Homeless Youth

Youth who become homeless are often affected by the structural and personal factors that contributed to their loss of residence, such as not having a stable place to live, family conflict, and abuse. Many homeless youth experience moderate to severe health conditions, and unfortunately have limited access to medical and dental care (National Center on Family Homelessness, 2009; 2011a). Some children who are homeless express fears that they will not have a place to live or sleep, and worry that something bad will happen to their family (National Center on Family Homelessness, 2011b).

Many homeless youth, and particularly unaccompanied youth, engage in risky

behaviors including selling drugs, panhandling, stealing, and prostitution as a means of survival, which result in a greater risk for involvement in the legal system, teenage pregnancy, or contracting a sexually transmitted disease (Aratani, 2009; U.S. Interagency Council on Homelessness, 2010). Homeless Youth encounter a great number of stressors, and many turn to drugs or alcohol to cope with their challenges. Recent estimates suggest that between 41% to 48% of youth who are homeless abuse alcohol, while between 39% to 47% abuse other drugs (Merscham, Leeuwen, & McGuire, 2009). Due to the numerous risks and challenges that homeless youth face, interventions that

target safety, well-being, permanent connections, and self-sufficiency are critical to their success. (Runaway and Homeless Youth Training and Technical Assistance Centers, n.d.)



Causes of Homelessness

The reasons that youth may become homeless are complex in nature. Structural factors, such as poverty, lack of affordable housing, underemployment, as well as personal factors such as substance abuse, mental health difficulties, physical abuse, and family conflict are some of the contributing factors to homelessness in families (Hernandez Jozefowicz-Simbeni & Israel, 2006). More recently, many families have been significantly affected by the recession, which has contributed to high unemployment rates, a shortage of affordable rental housing, and a major increase in home foreclosures. Families who are homeless tend to have lower incomes, less access to housing subsidies, and weaker social networks in comparison to families who are not homeless (U.S. Interagency Council on Homelessness, 2010).

Mental illness in adult family members was identified as one of the top three contributors to homelessness (National Coalition for the Homeless, 2009). Violence in the home is also a primary predictor of homelessness. In fact more than 80% of homeless mothers have been abused, and many youth leave home because they have experienced or witnessed high levels of violence or trauma in their homes (Fernandes, 2007; Aratani, 2009; U.S. Interagency Council on Homelessness, 2010). Other estimates suggest that up to 83% of homeless children have been exposed to at least one major violent incident by the age of twelve (National Center on Family Homelessness, 2011a). Exposure to violence can negatively impact a child's physical, cognitive, emotional, and social development (Ososky, 1999).



Educational Experiences of Homeless Youth

According to the National Center for Homeless Education (2011), during the 2009-2010 school year, there were almost 940,000 homeless children and youth enrolled in school. While 87% of homeless youth are enrolled in school, only 77% of them attend school regularly (National Coalition for the Homeless, 2007). Within one year, about 42% of

homeless students transfer schools at least once, and approximately three to six months of education is lost in every move (National Coalition for the Homeless, 2007). The paperwork that many schools require (e.g. proof of residency, immunization records) makes it difficult for some homeless students to enroll in school. Unfortunately, even if schools allow students to enroll without the appropriate paperwork, a student may be placed inappropriately due to missing academic and special education records. Even when students are successful in school enrollment, they may have difficulty with attendance, related to limits on their length of stay in a shelter, transportation difficulties, and/or lack of adequate clothing or school supplies. These challenges with school mobility and attendance often lead to poor educational outcomes for homeless youth including being more likely to repeat a grade, drop out of school, or be placed in special education (National Coalition for the Homeless, 2007).

In an effort to address some of the educational barriers that homeless youth experience, the **McKinney-Vento Homeless Assistance Act (McKinney-Vento)** was signed into law in 1987 and provides specific provisions to ensure that schools allow homeless students to remain in their school of origin, receive

transportation to and from school, and enroll in school immediately even if their school records are unavailable. McKinney-Vento also provides opportunities for enhanced academic support for homeless students. The most recent authorization of the bill includes requirements for school districts to implement a local liaison to ensure that McKinney-Vento is implemented appropriately. In 2011, the U.S. Department of Education allocated over 65 million dollars to support McKinney-Vento; however, many believe that McKinney-Vento is woefully underfunded to adequately support the educational needs of homeless youth (National Center on Family Homelessness, 2009). With over one-million homeless students, the average funding estimate is slightly less than \$70 per student each year. While adhering to the provisions in McKinney-Vento can help prevent the academic decline that many homeless students experience, unfortunately many families and schools are not aware of the Act, and many school systems and states struggle to meet the financial demands to adequately support the needs of the homeless youth in their respective jurisdictions.

Another policy that was passed to assist homeless youth is the **John H. Chafee Foster Care Independence Act**. This Act was passed in 1999 to assist youth transitioning out of foster care or those aged 18 to 21 who have aged out of the foster care system. The Chafee Foster Care Independence Program provides assistance to states to help current and former foster care youth with education, employment, housing, financial management, training in daily living, substance abuse prevention, preventive health activities, and counseling needs in an effort to help prevent homelessness in this vulnerable population (Aratani, 2010).

Mental Health Issues and Homeless Youth

The impact of dealing with the circumstances that led to homelessness, and its associated challenges are overwhelming to many youth. One out of six young homeless students display emotional disturbances, and of homeless youth who attend school on a regular basis, as many as 20% are subject to behavioral problems, mood disorders, and depression, as well as other mental illnesses (National Center on Family Homelessness, 2009; 2011b). Many homeless youth suffer from Post-Traumatic



Stress Disorder (PTSD), either due to what they experienced prior to becoming homeless or their experiences living on the streets or in sheltered housing. In particular, homeless youth who are Lesbian/Gay/Bisexual/Transgender/Questioning (LGBTQ) or unaccompanied have a higher risk of experiencing PTSD as they experience higher rates of sexual and physical assault (Aratani, 2009). As many youth who are homeless might witness or experience violent acts, this often results in heightened expressions of violence, aggression, and

Challenging Youth Homelessness

delinquent behavior (National Center on Family Homelessness, 2011b). Sadly, the rates of suicide attempts for homeless youth typically range from 20% to 40%, making it the leading cause of death among homeless youth (Roy et al., 2004). Unfortunately, many of these mental health problems often go untreated, undetected, or misdiagnosed because of a lack of medical benefits and frequent mobility (National Center on Family Homelessness, 2011a; National Network for Youth, n.d.).



School Mental Health Interventions for Homeless Youth

School mental health programs can provide invaluable support to help homeless youth obtain counseling and supportive services that they may otherwise not be able to obtain. Specific evidence-based therapeutic interventions that have demonstrated success with homeless students include:

- Trauma-focused Cognitive Behavioral Therapy (TF-CBT)
- Motivational Interviewing
- Cognitive Behavioral Therapy for Adolescent Depression
- Seven Challenges substance abuse intervention

(Runaway and Homeless Youth Training and Technical Assistance Centers, n.d.).

Schools and teachers can help students succeed by...

- Enrolling the students in school even if all of their school records are not available
- Keeping students' living situation confidential
- Providing a positive, supportive environment that is free of stigma or prejudice
- Being sensitive to the feelings of homeless students by showing understanding and acceptance
- Increasing awareness of the plight of homeless students
- Helping students get involved in school activities/clubs
- Ensuring staff are aware of the McKinney-Vento Homeless Assistance Act
- Ensuring students and families are aware of the resources and supports that are available to them
- Offering tutoring services
- Adjusting homework assignments so that long-term work can be broken into shorter tasks with daily or weekly deadlines
- Providing a place before and after school for students to complete their homework assignments (and provide the necessary supplies to do so)
- Being aware of basic needs of students (i.e., sleep, clothing, food, health, hygiene, school supplies), and work to meet these needs through the school or shelter
- Seeking school-based health services where appropriate to address medical needs
- Assigning students a "buddy" to show them around and foster peer relationships

(Popp, 2004; National Center for Homeless Education and the Legal Center for Foster Care and Education, 2009).



In addition to feeling isolated and disconnected from school, many students are embarrassed

about being homeless, and are reluctant to share this information, making it all the more difficult for school staff to support them. Providing help to unaccompanied youth is also challenging because those who are staying with friends or “couch-surfing” may not view themselves as homeless and are often unaware that they are eligible to receive additional support and assistance.

One of the first steps in providing appropriate services to homeless students is being able to identify who is homeless and in need of services. Each school district should ensure that there are effective practices in place to assist in identifying and reaching out to homeless youth. Although it is not always easy to identify homeless students by their appearance, schools can provide their staff with information about some signs to look for to help determine if a student may be in need (e.g. excessive absences, limited clothing and food, poor hygiene, decline in work performance) and ensure that staff and students know where to go to receive assistance.

Signs to Help Identify Students Who are Homeless...

- **Excessive absences**
- **Limited clothing and food**
- **Poor hygiene**
- **Decline in work performance**

Schools can also increase staff awareness about the causes and effects of homelessness, and develop flexible policies regarding class schedules, tardiness, and credit recovery to accommodate the students’ needs (National Center for Homeless Education and the Legal Center for Foster Care and Education, 2009). In addition to effectively identifying homeless students, school staff must be trained to recognize the warning signs of childhood trauma and increase their awareness of the ways that trauma impacts learning (National Center on Family Homelessness, 2011a).

Teachers are often the first line of defense in combating the problems faced by homeless students in schools. One of the most important ways to assist homeless students is to provide a nurturing and stable environment where the students feel safe. By providing homeless students with a feeling of stability, these students may be more likely to accept the assistance that is offered to them by the school staff. In creating a safe environment, it is important that school staff identify any signs of prejudice and stigma they may have towards homeless youth, and ensure that they are not viewing those students as more difficult or as having less potential for success (National Network for Youth, n.d.; National Center for Homeless Education and the Legal Center for Foster Care and Education, 2009)

One way that schools can promote a student’s sense of belonging and school engagement, is to provide the appropriate supports to ensure that homeless students are able to fully participate in extra-curricular activities. Schools can do this through actions such as 1) honoring the stipulations in the McKinney-Vento Act which support full inclusion in school activities, 2) identifying resources to pay for equipment and fees, and 3) coordinating with local health care professionals to address health needs (National Center for Homeless Education, 2010). To assist with the academic deficits that many homeless students face, schools can provide tutoring and academic enrichment activities. As meeting the basic needs of students may be challenging in an unstable home environment, schools can ensure that homeless students have access to hygiene products, showers, and clean clothes if they are needed.

Another major education barrier for homeless students is transportation to school. Despite the McKinney-Vento provisions, many schools do not provide transportation to/from school and if transportation is provided, the time it takes the student to get to school from a shelter can be excessive. In many cases, transportation is costly, complicated, and uncoordinated. One of the largest barriers to transportation provision is a lack of knowledge about rights and

available services for homeless students (National Network for Youth, n.d.).

Even when budget and personnel issues are challenging, there are still things that schools and school staff can do to assist homeless students. All schools should have staff who are knowledgeable about the resources within their community and can coordinate with local health, mental health, and social service organizations to ensure that the needs of the homeless students and families are met. It is imperative that the educational, social, and emotional needs of homeless students be addressed for the students to be successful. Without the appropriate supports, these students are at high risk for a host of societal ills, which can perpetuate the cycle of homelessness. Another way that school staff and school leaders can help is to document the impact of homelessness in their schools and to advocate for these students at local, state, and national levels.

Homeless Children in School

In the 2009–10 school year, of the homeless youth enrolled in school (K-12) approximately:

- 71% were living doubled up as their “primary nighttime residence”
- 19% were living in a shelter
- 5% were living in hotels or motels



A School for Homeless Students

A small number of public schools throughout the country specifically focus on educating homeless students. One such school, the Monarch School, in San Diego, CA has recently seen a substantial increase in enrollment and reports positive outcomes for students including high standardized test scores, high attendance rates, and rapid academic progress for their students. A variety of services are provided to students including:

- Reading clinics
- Regular academic assessments
- Shower and laundry facilities
- Conflict mediation
- Expressive arts therapy
- Mandatory tutoring if needed
- Involvement in extra curricular activities

(Anderson, 2011)

Needs of Homeless Youth

To prevent, end, and treat youth homelessness:

- Individualized goal-based service planning
- On-going support services connected to mainstream resources
- Independent living skills training
- Job training
- Connection to supportive networks
- Employment
- Education
- Health care
- Housing
- Trauma-focused treatment

(National Center on Family Homelessness, 2009; U.S. Interagency Council on Homelessness, 2010)

National Resources for Homeless Youth and Families

National Health Care for the Homeless Council

The National Health Care for the Homeless Council is a national organization dedicated to improving the health of homeless people. The website contains relevant statistics, PowerPoint presentations, trainings, newsletters, and other resources.

<http://www.nhchc.org/Children/index.htm>

Locating a Health Center

Federally-funded health centers provide care to those who are uninsured.

Visitors to this site can enter their zip code to find federally funded health centers in their area.

<http://findahealthcenter.hrsa.gov>

National Survey of Programs and Services for Homeless Families

The Institute for Children, Poverty & Homelessness provides an online tool to identify the programs and activities taking place in each state throughout the U.S to address family homelessness.

<http://www.redwhiteandbluebook.org>

Federal Food Programs

The Food Research and Action Center (FRAC) lists federal resources that address eligibility requirements for free school meals, full school year eligibility, and federal funds for shelters serving children and youth.

<http://frac.org/federal-foodnutrition-programs/afterschool-programs/>

Housing

The Department of Housing and Urban Development (HUD) offers contact information by state for emergency shelters and housing assistance for those in need.

<http://portal.hud.gov/portal/page/portal/HUD/topics/homelessness>

Homeless Advocacy Coalitions

This document contains a recent listing of national, state, and local homeless advocacy coalitions.

http://www.nationalhomeless.org/directories/directory_advocacy.pdf

Statewide Data and Resources

The National Center for Homeless Education website can help you identify the State Coordinators of Homeless Education, State data on homeless education, and links to other homeless resources by state.

http://center.serve.org/nche/states/state_resources.php

Child Trauma

<http://www.nctsn.org/>

Established by Congress in 2000, the National Child Traumatic Stress Network (NCTSN) is a unique collaboration of academic and community-based service centers whose mission is to raise the standard of care and increase access to services for traumatized children and their families across the United States. Combining knowledge of child development, expertise in the full range of child traumatic experiences, and attention to cultural perspectives, the NCTSN serves as a national resource for developing and disseminating evidence-based interventions, trauma-informed services, and public and professional education.

References

- Anderson, M. (2011). Enrollment surges at schools for homeless students. *Education Week*. Retrieved from <http://www.edweek.org/ew/articles/2011/04/11/28homeless.h30.html>
- Aratani, Y. (2009). *Homeless Children and Youth, Causes and Consequences*. National Center for Children in Poverty. Retrieved from http://www.nccp.org/publications/pdf/text_888.pdf
- Fernandes, A.L. (2007). Runaway and Homeless Youth: Demographics, Programs, and Emerging Issues. CRS Report for Congress. Retrieved from <http://www.endhomelessness.org/content/article/detail/1451>
- Hernandez Jozefowicz-Simbeni, D. M., & Israel, N. (2006). Services to homeless students and families: The McKinney-Vento Act and its implications for school social work practice. *National Association of Social Workers, 28*, 37-44.
- McKinney-Vento Homeless Assistance Act of 2002, 42 U.S.C. § 11431 et seq. Retrieved from <http://center.serve.org/nche/m-v.php>
- Merscham, C., Van Leeuwen, J. M., & McGuire, M. (2009) Mental health and substance abuse indicators among homeless youth in Denver, Colorado. *Child Welfare, 88*(2), 93-110.
- National Center on Family Homelessness (2009). *America's youngest outcasts: State report card on child homelessness*. Retrieved from http://www.homelesschildrenamerica.org/pdf/rc_full_report.pdf
- National Center on Family Homelessness (2011a). *Campaign to end child homelessness*. 2011-2012 Federal Policy Agenda. Retrieved from <http://www.homelesschildrenamerica.org/media/139.pdf>
- National Center on Family Homelessness (2011b). The characteristics and needs of families experiencing homelessness. Retrieved from <http://www.familyhomelessness.org/media/278.pdf>
- National Center for Homeless Education (2011, June). Education for homeless children and youth program. Data collection summary. Retrieved from http://center.serve.org/nche/downloads/data_comp_0708-0910.pdf
- National Center for Homeless Education (2010, Spring). Ensuring full participation in extra-curricular activities for students experiencing homelessness. Retrieved from http://center.serve.org/nche/downloads/briefs/extra_curr.pdf
- National Center for Homeless Education and the Legal Center for Foster Care and Education (2009). *Best Practices in Homeless Education: Clearing the path to school success for students in out-of-home care*. Retrieved from <http://center.serve.org/nche/downloads/briefs/ctp.pdf>
- National Coalition for the Homeless. (2007, July). *How many people experience homelessness*. Retrieved from www.nationalhomeless.org
- National Coalition for the Homeless. (2008, June). *Homeless youth*. Retrieved from www.nationalhomeless.org/factsheets/youth.html
- National Coalition for the Homeless. (2009, August). *Education of homeless children and youth, Fact Sheet #10*. Retrieved from www.nationalhomeless.org/factsheets/youth.html
- Osofsky, J. (1999). The Impact of Violence on Children. *Domestic Violence and Children, 9* (3), 33-49.

- Popp, P. A., Hindman, J. L., Stronge, J. H., & Project HOPE-Virginia. (2007). *Local homeless education liaison toolkit*. Retrieved from the National Center for Homeless Education website:
<http://center.serve.org/nche/downloads/toolkit/toolkit.pdf>
- Roy, E., Haley, N., Leclerc, P., Sochanski, B., Boudreau, J., & Boivin, J. (2004). Mortality in a cohort of street youth in Montreal. *Journal of the American Medical Association*, 292(5), 569–574.
- Runaway and Homeless Youth Training and Technical Assistance Centers (n.d.). Runaway and Homeless Issues at a Glance. What is evidence-based practice? Retrieved from
http://rhyttac.ou.edu/images/stories/resources/tip_sheets/ebp.pdf
- Toro, P. A., Dworsky, A., & Fowler, P. J. (2007, September). Homeless youth in the United States: Recent research findings and intervention approaches. In D. Dennis, G. Locke, & J. Khadduri (Eds.), *Toward understanding homelessness: The 2007 National Symposium on Homelessness Research* (pp. 1-33). Washington DC: U.S. Department of Housing and Urban Development and U.S. Department of Health and Human Services.
- U. S. Department of Education. (2004). *Education for homeless children and youth program*. Retrieved from
<http://www2.ed.gov/programs/homeless/guidance.pdf>
- U.S. Department of Housing and Urban Development (2010). The 2009 annual homeless assessment report. Retrieved from <http://www.hudhre.info/documents/5thHomelessAssessmentReport.pdf>
- U.S. Department of Housing and Urban Development (2011). Federal definition of homelessness. Retrieved from <http://portal.hud.gov/hudportal/HUD?src=/topics/homelessness/definition>
- U.S. Interagency Council on Homelessness (2010). Opening doors: Federal strategic plan to prevent and end homelessness. Retrieved from
http://www.usich.gov/PDF/OpeningDoors_2010_FSPPreventEndHomeless.pdf

Authored by:

Dana Cunningham, Sylvia McCree-Huntley, Nancy Lever, Emily Sidway, Latisha Curtis, Nicole Brandt, & Sharon Stephan

Recommended Citation:

Cunningham, D., McCree-Huntley, S., Lever, N., Sidway, E., Curtis, L., Brandt, N. E., & Stephan, S. (December, 2011). *Homeless Youth and School Mental Health*. December 2011 Baltimore, MD: Center for School Mental Health, Department of Psychiatry, University of Maryland School of Medicine.

The mission of the Center for School Mental Health (CSMH) is to strengthen policies and programs in school mental health to improve learning and promote success for America's youth. The CSMH has three over-arching goals:

- 1. Further build a community of practice in school mental health (SMH) to facilitate analyses of successful and innovative policies and programs, to enhance collaboration between diverse stakeholders, and to develop strategies to maximize policy and program impact.*
- 2. Enhance understanding of successful and innovative SMH policies and programs across urban, suburban, rural and frontier settings, and across local, state, national, and international levels.*
- 3. Further develop a rapid, innovative and widespread communications framework to disseminate to all interested stakeholders findings and recommendations on successful and innovative policies and programs in SMH.*

Center for School Mental Health
 University of Maryland
 School of Medicine
 Department of Psychiatry
 737 W. Lombard St., 4th floor
 Baltimore, Maryland 21201
 (410)706-0980- phone
 (888)706-0980- toll-free
 (410)706-0984- fax
<http://csmh.umaryland.edu>



Support for this project (Project # U45 MC00174) is provided in part by the Office of Adolescent Health, Maternal, and Child Health Bureau, Health Resources and Services Administration, Department of Health and Human Services.

Funding for this project was also made possible in part by the Maryland Mental Health Transformation Grant # 5 U79 SM57459-02 from SAMHSA. The views expressed in this publication do not necessarily reflect the official policies of the Department of Health and Human Services; nor does mention of trade names, commercial practices, or organizations imply endorsement by the U.S. Government.