

Stronger Youth and Smarter Communities

An Analysis of Oregon's Investment in Runaway and Homeless Youth Programs

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Center for Improvement of Child and Family Services



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EXECUTIVE SUMMARY

Problem

The Oregon Runaway and Homeless Workgroup estimates that 24,000 unaccompanied youth experience homelessness each year in Oregon. National studies indicate that most of these youth run away due to family conflict or abuse, while others are kicked out of their home or ‘thrown away’. Research shows that without supportive services these youth are at much greater risk of:

- Sexual victimization
- Prostitution
- Physical abuse
- Physical illness
- Suicide
- Substance abuse
- Gang involvement
- Ending up in the adult chronic homelessness population
- Death

Oregon is home to innovative runaway and homeless youth services, but these rely heavily on federal funds and are available primarily in the I-5 corridor. Youth in rural areas, or smaller towns unable to access federal funds, are at risk.

Legislative Investment

In 2007 the Oregon State Legislature appropriated \$1 million to the 2007-2009 budget of the Oregon Commission on Children and Families (OCCF) to enhance, expand, or develop services and supports for previously un-served runaway and/or homeless youth. While 20 counties requested over \$4 million in assistance in response to the initial request for proposals, the funding allocated has enabled OCCF to “roll out” services in 8 counties. Through a leveraged federal grant, Portland State University’s Center for Improvement of Child and Family Services provided evaluation on some of the short-term the outcomes of this investment.

Findings

Researchers found that the funds invested yielded results for Oregon’s runaway and homeless youth at a low per-youth cost compared to the risk of non-intervention. In addition, researchers found benefits to communities in terms of more efficient use of limited resources.

Runaway and homeless youth Services are cost effective

- Total number of youth served from Apr-Dec 2008: **1,829**
- Estimated number served from initial startup thru June 2009: **3,047**
- Estimated number that will be served in 2009-2011 biennium: **4,877**
- Cost per youth for 2007-2009 biennium: **\$210**
- Estimated cost per youth for 2009-2011 biennium: **\$131**

Research indicates that costs of NOT providing services to high risk youth range from **\$470,000 - \$3 million per youth**. Local cost-benefit analyses show that **\$1 invested** in runaway and homeless youth provides over **\$4 in savings**.

Youth are safe and learning new skills

Examples include;

Benton County

- From Apr-Dec 2008, 86% of youth served exited to a safe and stable living circumstance.

Deschutes County

- From July- Sep 2008, 100% of youth served exited the program to safe and stable housing
- From July – Dec 2008, 86% of youth who participated in educational training demonstrate academic progress and re-engagement in the education process

Lincoln County

- 100% of youth served from July – Dec 2008 are now in a stable living situation

Washington County

- 84% of youth who participated in shelter care from Jan – Dec 2008 receive safe exits transitioning to a living situation that is stable and safe
- 86% of youth who participated in skill building groups from Jan – Dec 2008 report increased resistance and resiliency skills

Communities are working smarter

Programs utilizing these investments developed extensive community partnerships and collaborations that brought new community members to the table to address the needs of this vulnerable population. New and/or expanded partnerships were with:

- Individuals and community members
- Local businesses
- The faith community
- Existing social services:
- State agencies: DHS, Juvenile Departments, etc.
- Existing youth serving agencies
- Schools
- Youth

It would seem likely that other Oregon communities, given the opportunity, would be able to replicate similar models of services and community collaboration. Training and technical assistance from OCCF appears available and experienced to support such an expansion.

Family and youth are reconciling

Many of the runaway and homeless youth Rollout Programs provide family counseling or mediation to resolve the conflict that led to the youth requiring services. Initial analysis of an outcome survey, developed to capture this, among other changes in behavior, offers strong evidence that these interventions worked. Youth from a shelter program reported a significant improvement in their experience of family support six weeks after the program. There is a strong body of research that says youth who experience their families as supportive are much less likely to engage in delinquency, substance abuse, or other risky behaviors. This was a good investment.

Recommendation

Research shows that every youth kept in school and off the street saves the state much more costly interventions in the future such as those associated with substance abuse treatment, incarceration, and, among others, the costs associated with adult chronic homelessness. In light of this and other findings in this report, it would seem prudent to continue investments in the current programs and based on continued and expanded resources, replicate the services and supports in other counties. Such investments would afford other Oregon communities the opportunity to build collaborative mechanisms and thereby increasing the efficiency of their services to runaway and homeless youth. Such an investment will assure that youth in every community have the chance to become healthy young adults capable of giving back to their communities and families.

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RUNAWAY & HOMELESS YOUTH DEFINITIONS

In the course of describing the social problem of runaway and homeless youth (RHY), it is useful to understand the definitions and types of the various subgroups of the RHY population. Such definitions often appear to overlap, leading to confusion among communities, policy makers, and researchers^{1,2}. The purpose of this section is to provide clarity and a common understanding.

To begin, the term *runaway and homeless youth* does not include those homeless youth who are members of an intact, homeless family unit. The Runaway and Homeless Youth Act, the sole piece of Federal legislation pertaining specifically to the issue, defines this population as “individuals under age 18 who are unable to live in a safe environment with a relative and lack safe alternative living arrangements, as well as individuals ages 18 to 21 without shelter”³. However, there are various definitions of the runaway and homeless youth population that emphasize other characteristics. One report states the term *homeless youth* is often used to describe youth between the ages of 12 and 24 and *includes* youth who have been thrown out of their homes, are unaccompanied, have run away from home and are “street youth and systems youth”⁴.

Other researchers say that the key defining criteria of a homeless youth is that he or she is unable to secure appropriate stable housing and is “without the supervision of a guardian or other primary caretaker”⁵. The Office of Juvenile Justice and Delinquency Prevention (OJJDP) of the U.S. Department of Justice differentiate between runaway and throwaway youth as follows⁶:

Runaway youth

- A child leaves home without permission and stays away overnight.
- A child 14 years old or younger (or older and mentally incompetent) who is away from home chooses not to come home when expected to and stays away *overnight*.
- A child 15 years old or older who is away from home chooses not to come home and stays away *two nights*.

Throwaway youth

- A child is asked or *told to leave home* by a parent or other household adult, no adequate alternative care is arranged for the child by a household adult, and the child is out of the household overnight.
- A child who is away from home is *prevented from returning home* by a parent or other household adult, no adequate alternative care is arranged for the child by a household adult, and the child is out of the household overnight.

Still other research adds additional designation to meet the threshold of homeless youth, “*Homeless youth* are unaccompanied youth between the ages of 16 and 21 who cannot safely live with a relative and have no safe alternative living situation”⁷. Yet another definition from the National Coalition for the Homeless states, “Homeless youth are individuals under the age of eighteen who lack parental, foster, or institutional care. These youth are sometimes referred to as ‘unaccompanied’ youth”⁸.

Age can be a particular challenge and often results in barriers to services for these youth. Researchers, service providers, and advocacy organizations view youth developmentally, often including youth up to the age of 21, and in some cases 24, in services, though policy makers and federal and state policy frequently see “youth” from a chronological perspective that ends earlier. While essentially every Federal Department has some type of program that *could* provide assistance to RHY, the varying definitions and department missions result in a disjointed system, often split between *adult services* and *youth services* (that often compete for the funding to serve 18-24 year olds). This system is rife with gaps through which the vast majority of RHY fall. Additionally, because RHY are, by the legal definition, both “youth” (17 and younger) and “adults” (18-24), systems struggle to provide services that can effectively meet the broad range of their developmental needs. In advocating for changes in the juvenile justice system, Columbia Law Professor Elizabeth Scott and renowned psychologist Laurence Steinberg describe how challenging this can be when they state, “Adolescence and adulthood are not tidy developmental categories; the transition to adulthood is a gradual process”. They go on to describe how a youth may have fully developed psychologically by age 15 or 16 (“...logical reasoning and information processing capacities...”), their psychosocial capacities (“...impulse control, future orientation, [and] resistance to peer influence...”) might not fully develop until age 24 or 25⁹.

Further complicating this issue are the varying pathways by which youth become runaway and homeless youth. Youth run away from families due to conflict for a variety of issues (e.g. rejection because of sexual activity, pregnancy, GLBT, etc.), sexual abuse, physical abuse, neglect and other forms of maltreatment. Additionally, youth may be thrown out of their homes or left behind when a family moves out of state. Youth may also enter the ranks of runaways by running away from foster care placements or end up homeless after aging out of the child welfare system. They may also become homeless upon release from other systems of care such as residential treatment or the juvenile justice system.

This confusion over definitions, varying characteristics used to describe RHY (i.e. runaway, throwaway, homeless), combined with disagreements around age, which system is best suited to serve older youth (18-24), and the lack of an agreed upon protocol for counting RHY create a strenuous and exasperating environment for developing useful policy, effective interventions, and meaningful research.

¹ Sanchez, R.P., Waller, M.W., & Greene, J.M. (2006). Who runs? A demographic profile of runaway youth in the United States. *Journal of Adolescent Health*. 39. 778-781.

² Fernandes, A.L. (2007). *Runaway and Homeless Youth: Demographics, Programs, and Emerging Issues*, No. RL33785, Congressional Research Service.

³ *Ibid.*

⁴ Moore, J. (2006). *Unaccompanied and Homeless Youth: Review of Literature 1995-2005*. National Center for Homeless Education. p 2. Retrieved on May 29, 2008 from website: www.serve.org/nche

⁵ Haber, M. G., & Toro, P. A. (2004). Homelessness among families, children, and adolescents: An ecological-developmental perspective. *Clinical Child and Family Psychology Review*, 7(3), 123-164.

⁶ Hammer, H., Findelhor, D., Sedlak, A.J. (October 2002). Runaway/throwaway children: National estimates and characteristics. *National Incidence Studies of Missing, Abducted, Runaway, and Throwaway Children (NISMArt)*. Retrieved on October 21, 2008 from <http://www.ncjrs.gov/html/ojdp/nismart/04/>

⁷ Bass-Rubenstein, D. (2008). Youth at risk. *Encyclopedia of Social Work*. Terry Mizrahi and Larry E. Davis. Encyclopedia of Social Work: (e-reference edition). Oxford University Press. Retrieved on 7 March 2009 <http://www.oxford-naswsocialwork.com/entry?entry=t203.e421>

⁸ National Alliance to End Homelessness (NAEH) (n.d.). *Policy Focus Area: Youth*. Retrieved on October 21, 2008 from <http://www.endhomelessness.org/section/policy/focusareas/youth>

⁹ Scott, E.S. & Steinberg, L. (2008). *Rethinking Juvenile Justice*. Harvard University Press. Cambridge, MA.

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NUMBERS OF RUNAWAY AND HOMELESS YOUTH

Several key issues impact the ability to accurately gauge the scope of the RHY issue. It is unclear how many incidents of running away go *unreported*, there are challenges associated with *finding* runaways and homeless youth, older runaways and homeless youth (18-24) are generally *excluded from census* attempts, available data is generally from youth who are *in programs*, and the *social stigma* attached to running away inhibit youth from self-identifying¹.

National Numbers

Because this population tends to be “hidden in plain sight”, due in large part to the challenges of definitions as well as the difficulties in locating and counting, the exact number of runaway and homeless youth is difficult to obtain². Another challenge in getting an accurate count is the transitory nature of the youth’s situation, which can often be for short-term periods out-of-home, repeated several times over several years. Their reluctance to interact with census counters for fear of being taken into state custody or forced to return to the family from which they ran is another barrier. A recent report to Congress acknowledges this difficulty and adds, “Determining the number...is further complicated by the lack of a standardized methodology for counting”³. Because of this, estimates of runaway and homeless youth vary widely. One such estimate places the number of runaway and homeless youth at 1 million each year⁴. However, according to the National Collaboration for Youth, the total for 2005 was as high as 1.6 million in the United States⁵. Additionally, the Office of Juvenile Justice and Delinquency Prevention of the U.S. Department of Justice estimated 1,682,900 children experienced homelessness or running away from home in 2002⁶. A report to Congress stated that “1.7 million youth under age 18 left home or were asked to leave home in 1999... Of these youth, 68% were between the ages of 15 and 17”⁷. The magnitude of these numbers is better understood when compared with that of entire U.S. foster care system, which works with approximately 500,000 children each year⁸. This growing number is of particular concern for communities across the nation due to the significant risks these youth face, including depression, suicide, sexual and physical abuse from strangers and peers, substance abuse, and medical illness⁹.

Additionally national studies continue to report high incidence of youth homelessness among the general population. Research indicates rates of running away for all adolescents vary from 5 to 14 percent of the youth population with a more conservative rate of 5 to 7 percent listed most frequently^{10,11,12,13}. This indicates that somewhere between 1 and 2.8 million adolescents experience homelessness each year and, consequently, does not include youth ages 18-24.

Oregon Numbers

In their report to the Interim Committee on Health and Human Services of the Oregon Legislature, the Oregon Runaway and Homeless Workgroup (ORHWG) stated that 24,000 unaccompanied youth experience homelessness each year in Oregon¹⁴. This report represents the first time there has been an attempt to define the scope of the RHY problem in Oregon. Concurrently, in their report titled *Oregon's Homeless Youth*, the Oregon chapter of the League of Women Voters (LWV) asserted that "In 2004-2005, 1,622 unaccompanied homeless youth were enrolled in Oregon's schools"¹⁵, and according to the Oregon Department of Education, that number had increased by 73 percent to 2,802 for the 07-08 school year¹⁶.

The 2005-2007 estimates from the Census Bureau record Oregon as having approximately 243,607 youth ages 13-17, which, according to the National Alliance to End Homelessness, is the most common age range for running away. Using the above estimates of prevalence, we find that approximately 12,180 to 17,052 youth run away from home each year in Oregon. It is important to note this rate does not include those youth who have been forced to leave their homes. It is important to note this number does not include 11 and 12 year olds, who are included in funding criteria. Additionally, the National Health Care for the Homeless Council estimated there are between 750,000 – 2 million homeless each year ages 18-24¹⁷, or 2.55-6.79% of the entire US population of that age group. According to the 2005-2007 estimates from the U.S. Census Bureau, Oregon had 340,936 young adults ages 18-24. Using the above estimates of 2.55-6.69%, this would result in an annual incidence of homelessness for this age group of 8,694 – 23,150. Drawing on all estimates, it is estimated that each year in Oregon somewhere between 20,500 – 40,000 youth runaway, are thrownaway, abandoned, or otherwise become homeless.

- ¹ Bass-Rubenstein, D. (2008). Youth at risk. *Encyclopedia of Social Work*. Terry Mizrahi and Larry E. Davis. Encyclopedia of Social Work: (e-reference edition). Oxford University Press. Retrieved on 7 March 2009 <http://www.oxford-naswsocialwork.com/entry?entry=t203.e421>
- ² Fernandes, A.L. (2007). *Runaway and Homeless Youth: Demographics, Programs, and Emerging Issues*, No. RL33785, Congressional Research Service.
- ³ *Ibid.* p.4
- ⁴ Thompson, S. J., Safyer, A. W., & Pollio, D. E. (2001). Differences and predictors of family reunification among subgroups of runaway youths using shelter services. *Social Work Research*, 25(3), 163-172.
- ⁵ National Collaboration for Youth. (2006). *Runaway and Homeless Youth Act Programs-Fact Sheet*. Retrieved October 15, 2006 from <http://www.nasassembly.org/nydic/policy/breifs/documents/06CollabRHYA.pdf>
- ⁶ National Crime Justice Reference Service (October, 2002). *National Incidence Studies of Missing, Abducted, Runaway, and Throwaway Children* (NISMART). Retrieved on November 7, 2008 from <http://www.ncjrs.gov/html/ojjdp/nismart/04/ns2.html>
- ⁷ Fernandes, A.L. (2007). *Runaway and Homeless Youth: Demographics, Programs, and Emerging Issues*, No. RL33785, Congressional Research Service. p 6.
- ⁸ U.S. Department of Health and Human Services (USDHHS) (2007). *Promising Strategies to End Youth Homelessness: Report to Congress*. Retrieved on October 21, 2008 from http://www.acf.hhs.gov/programs/fysb/content/docs/reporttocongress_youthhomelessness.pdf
- ⁹ National Child Traumatic Stress Network (2005). *Facts on Trauma and Homeless Children*. http://www.nctsn.org/nctsn_assets/pdfs/promising_practices/Facts_on_Trauma_and_Homeless_Children.pdf
- ¹⁰ Cheung, C. K., Liu, S. C., & Lee, T. Y. (2005). Parents, teachers, and peers and early adolescent runaway in Hong Kong. *Adolescence*, 40(158), 403-424.
- ¹¹ Haber, M. G., & Toro, P. A. (2004). Homelessness among families, children, and adolescents: An ecological-developmental perspective. *Clinical Child and Family Psychology Review*, 7(3), 123-164.
- ¹² National Alliance to End Homelessness (NAEH) (2007). *Fact Checker: Accurate Statistics on Homelessness*. Retrieved on October 21, 2008 from http://www.endhomelessness.org/files/1659_file_10606_NAEH_YouthHomelessness_4_.pdf
- ¹³ Sanchez, R.P., Waller, M.W., & Greene, J.M. (2006). Who runs? A demographic profile of runaway youth in the United States. *Journal of Adolescent Health*. 39. 778-781.
- ¹⁴ Oregon Runaway and Homeless Work Group (ORHWG) (2005). *From Out of the Shadows: Shedding Light on Oregon's Runaway and homeless Youth*. Report to the Interim Committee on Health and Human Services February 2005
- ¹⁵ League of Women Voters of Oregon Educational Fund (LWV). (2006). *Oregon's Homeless Youth*. p 9. Retrieved on May 16, 2008 from http://www.lwvrv.org/pdf_docs/homeless-youth%202006.pdf
- ¹⁶ Oregon Department of Education (2008). *Superintendent's Update #272*. Retrieved on December 3, 2008 from <http://www.ode.state.or.us/news/announcements/announcement.aspx?=4084>

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- ¹⁷ National Health Care for the Homeless Council (2004). *Homeless Young Adults Ages 18-24: Examining Service Delivery Adaptations*. Retrieved on March 16, 2009 from <http://www.nhchc.org/Publications/101905YoungHomelessAdults.pdf>

IMPACT OF RUNNING AWAY AND HOMELESSNESS ON YOUTH

Nationally, 36-50 percent of runaways stated they ran away from home to escape abuse^{1,2,3}. However, the reality is in all likelihood the “cycle of abuse they experienced at home will continue on the streets”⁴. While running away from home can be a desperate call for help, it dramatically increases the risk of youth being victimized, both physically and sexually, by either friends or strangers^{5,6,7}. Because runaway youth find themselves lacking skills and resources necessary to fully engage in employment, “they often are forced into prostitution, drug dealing, and other criminal behavior to survive”⁸.

Studies demonstrate profound risks to youth when they are homeless and living on the streets. Being a runaway youth is associated with increased risks of substance abuse^{9,10,11}, a decrease in emotional health and coping skills leading to increased rates of suicide attempts^{12,13,14}, higher rates of pregnancy¹⁵, higher rates of mortality than their counterparts in the general population¹⁶, and the younger they are when they first runaway, the more likely they are to become involved in gangs¹⁷. Furthermore, studies list higher rates of, “sexually transmitted infections, uncontrolled asthma, tuberculosis, and skin disorders” among homeless youth as an additional risk¹⁸.

The National Crime Justice Reference Service of the U.S. Office of Juvenile Justice and Delinquency Prevention recognized that whether or not a youth ran to a location known to them where they are provided with safety or are roaming the unknown streets of an urban city made an important difference as to what level of risk the youth was being exposed to. Table 1 provides a description of many of the levels of risk¹⁹.

Table 1: Estimates of Potentially Endangered Runaway/Throwaway Youth

Characteristic of Episode	Estimate	Percent (<i>n</i> = 1,682,900)
Child had been physically or sexually abused at home in the year prior to the episode or was afraid of abuse upon return	350,400	21
Child was substance dependent	317,800	19
Child was 13 years old or younger	305,300	18
Child was in the company of someone known to be abusing drugs	302,100	18
Child was using hard drugs	292,000	17
Child spent time in a place where criminal activity was known to occur	256,900	12
Child engaged in criminal activity during the course of the episode	197,400	11
Child was with a violent person	125,400	7
Child had previously attempted suicide	70,500	4
Child who was enrolled in school at the time of the episode missed at least 5 days of school	70,500	4
Child was physically assaulted or someone attempted to physically assault child during the course of the episode	69,100	4

Note: The individual estimates and percents do not sum to the total because youth were counted in each category that applied.

Today, after decades of media stories, documentation, and research on the issues of runaway youth population (though woefully understudied), most advocates see running away as a behavior resulting from complex systems issues. Abuse, neglect and other forms of child maltreatment, along with issues surrounding the effects of generational poverty, are seen as precursors to running away from home. This information is beginning to help society see the runaway not as a criminal but as a child victim of an unhealthy environment in need of intervention²⁰.

The Costs of NOT Intervening

Aside from the personal losses experienced by a child who does not fully engage in our society, there are direct monetary consequences to communities as well. The chief financial costs associated with homeless youth are loss of wages and productivity due to dropping out of high school, involvement in the justice system, *and* costs associated with chronic homelessness.

Education and Employment

Research has long shown the connection between dropping out of high school and juvenile delinquency. Barriers to education for runaway and homeless youth result in an increased school drop-out rate, especially for those whose return home is not facilitated quickly.

Some estimates report drop-out rates as high as a 75 percent for runaway youth. An incomplete education not only limits employment opportunities, but limits expected wage earnings as well which can perpetuate generational poverty. According to Mark Cohen, Professor of Economics at Vanderbilt University, costs associated with dropping out of school include lost wages and productivity, loss of fringe benefits, and “nonmarket” losses (i.e. education benefits individuals through improved social connections and improves communities through technology development and other types of knowledge formation). Cohen uses losses in these areas to estimate a cost of \$470,000 to \$750,000. This would amount to **\$606,000 to \$966,000** when converted to 2007 dollars²¹.

Criminal Justice

Cohen describes a juvenile career criminal as one who begins his/her criminal career as an adolescent and carries it into adulthood. A career criminal, as defined by Cohen commits 1 to 4 crimes per year for 6 years and will spend approximately 8 years in jail for a total of 14 years of costs. In calculating the associated costs, Cohen takes into account the cost to the victim, the system (i.e. investigation, arrest, adjudication, etc.), incarceration, and the average time served. Additionally, he calculates the opportunity costs of the offender’s timeⁱ (i.e. lost wages while incarcerated). Combined, the range for costs are \$1.5 million to \$1.8 million, or, converted to 2007 dollars, **\$1.9 million to \$2.3 million**²².

Substance Use and Abuse

As with crime, substance abuse negatively impacts the user, their family, friends, and the community around them. For his cost calculation, Cohen makes the assumption that time for drug use begins at age 15 and lasts until age 60, with heavy drug use lasting roughly 14 years. To determine costs, Cohen takes into account lost labor productivity, treatment expenses, medical expenses (both emergencies and routine), risk of death, drug-related crimes, arrests, and third-party risks and costs such as those associated with children of drug abusing parents. Running assumptions and estimates through his equation, Cohen estimates the lifetime costs of a heavy

ⁱ Cohen estimates legitimate earnings of \$7,542 (1997 dollars) per year, which, when multiplied by the years of incarceration equals approximately \$60,000. This would convert to \$77,000 in 2007 dollars.

drug user will range from \$483,000 to \$1.26 million or, **\$622,000 to \$1.6 million** in 2007 dollars²³.

Notes on Cost Estimates

There are two key notes that should be considered when using these cost estimates. The first is that many assumptions and hypothesis went into developing the equations for these calculations. Therefore, according to Cohen, the costs should be used “as order of magnitude estimates”. Secondly, money invested in programs that will help prevent these costly behaviors is based on future benefits, perhaps as far out as 20 years or more. Therefore the costs should be discounted by approximately 2% to take this into account. Similar to Cohen’s, Table 2 lists all the costs along with the 2% discount²⁴.

Table 2: Summary of the Monetary Value of Saving a High-Risk Youth

	Total Cost	Present Value (2% discount rate)
Career criminal	\$1.9 - \$2.3 million	\$1.7 - \$1.9 million
Heavy Drug User	\$622,000 - \$1.6 million	\$477,000 - \$1.25 million
High School Dropout	\$606,000 - \$966,000	\$313,000 - \$500,000
Less duplication*	(\$364,690 - \$1.0 million)	(\$284,000 - \$781,000)
Total	\$2.8 - \$3.9 million	\$2.2 - \$3.0 million

Numbers may not add due to rounding. All costs are in 2007 dollars.

*E.g., crimes committed by heavy drug users

In a report titled *The Economic Benefits of Helping Homeless Youth*, Dr. Kristina Smock studied the cost benefits of providing services to runaway and homeless youth in the Portland, OR area. She noted, “Youth homelessness costs the general public millions of dollars each year as a result of homeless youth cycling in and out of the juvenile justice system, incarceration, emergency room medical care, foster care placement, and school system costs associated with delayed learning and inter-school movement.”²⁵ Yet found that if supports and services are provided to these youth, “they are resilient and able to make lasting changes... are able to find permanent homes... are able to get and keep good jobs... [and] choose and maintain health and well-being.”²⁶ Table 3 below, taken from the report, illustrates her findings²⁷;

Table 3: Summary of Cost Benefit Analysis²⁸

Program Area	Program Cost	Cost Savings	Benefit Ratio
Prevention and early intervention	\$195,203	\$984,672	\$5.04 saved for every \$1 spent
Engaging homeless youth and moving them toward stability	\$448,277	\$3,197,020	\$7.13 saved for every \$1 spent
Getting homeless youth off the streets	\$783,680	\$584,2238	\$7.45 saved for every \$1 spent
Fostering self-sufficiency through education and training	\$759,121	\$1,374,702	\$1.81 saved for every \$1 spent
Total*	\$276,4541	\$11,398,632	\$4.12 saved for every \$1 spent

*Program costs total includes all expenditures of New Avenues For Youth, including administration and fund raising.

Chronic Homelessness

The federal government's definition of chronic homelessness includes homeless individuals with a disabling condition (substance use disorder, serious mental illness, developmental disability, or chronic physical illness or disability) who have been homeless either 1) continuously for one whole year, or 2) four or more times in the past three years. Federal, State and local governments, and communities understand the need to end chronic homelessness. Many communities and states have been developing 10 Year Plans to End Homeless in an effort to do so. Yet to affectively accomplish this, it is critical that plans include a recognized source of the chronic homeless population; runaway and homeless youth.

In one of the only studies to look at the association between running away as an adolescent and chronic homelessness, leading homeless researcher Martha Burt found that 51 percent of 18 and 19 year old homeless individuals had run away from home, 38 percent of 20 to 24 year olds, and 32 percent of homeless individuals 25 years old and older. She also iterates that chronic homelessness creates a costly burden for communities and states. They use more social services, more shelter beds, and stay in programs for longer periods of time²⁹. Additional research on the adult homeless population reflects increased utilization of emergency rooms and hospitalizations compared to low-income, housed populations. Research further shows that for those chronically homeless with serious mental illnesses, approximately 20-25 percent of the adult homeless population, the average annual costs of inpatient care was \$32,605 to \$25,010 (1996 dollars)³⁰. National studies in multiple communities have shown that when formerly homeless people or people who are at risk of homelessness move into supportive housing, they experience individual improvements and communities save money. The *10 Year Plan to End*

Homelessness from Portland, Oregon reports the following savings have been observed with improved supports to the chronically homeless:

- 58% reduction in Emergency Room visits
- 85% reduction in emergency detox services
- 50% decrease in incarceration rate
- 50% increase in earned income
- 40% rise in rate of employment when employment services are provided
- More than 80% stay housed for at least one year

Clearly, investing in services that will reduce the numbers of the adult chronic homeless, and the subsequent costs associated, will benefit not only runaway and homeless youth, but communities as well.

¹ National Runaway Switchboard (2006). *2005 Call Statistics*. Retrieved October 15, 2006 from http://www.nrscrisisline.org/news_events/call_stats.html

² Rew, L. (2008). Caring for and connecting with homeless adolescents. *Family & Community Health*, 31(1), S42-S51.

³ Stiffman, A. R. (1989). Physical and Sexual Abuse in Runaway Youths. *Child Abuse and Neglect: The International Journal*, 13(3), 417.

⁴ Tyler, K. A., Whitbeck, L. B., Hoyt, D. R., & Cauce, A. M. (2004). Risk Factors for Sexual Victimization Among Male and Female Homeless and Runaway Youth. *Journal of Interpersonal Violence*, 19(5), 503.

⁵ Fisher, D. G., & et al. (1995). Sexual and Drug-Taking Experiences Reported by Runaway Youth. *Journal of Alcohol and Drug Education*, 40(2), 88.

⁶ Rew, L. (2008). Caring for and connecting with homeless adolescents. *Family & Community Health*, 31(1), S42-S51.

⁷ Tyler, K. A., Whitbeck, L. B., Hoyt, D. R., & Cauce, A. M. (2004). Risk Factors for Sexual Victimization Among Male and Female Homeless and Runaway Youth. *Journal of Interpersonal Violence*, 19(5), 503

⁸ Thompson, S. J., Safyer, A. W., & Pollio, D. E. (2001). Differences and predictors of family reunification among subgroups of runaway youths using shelter services. *Social Work Research*, 25(3), 163-172.

⁹ Fisher, D. G., & et al. (1995). Sexual and Drug-Taking Experiences Reported by Runaway Youth. *Journal of Alcohol and Drug Education*, 40(2), 88.

¹⁰ Thompson, S. J., Zittel-Palamara, K. M., & Forehand, G. (2005). Risk factors for cigarette, alcohol, and marijuana use among runaway youth utilizing two services sectors. *Journal of Child & Adolescent Substance Abuse*, 15(1), 17-36.

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- ¹¹ Yoder, K. A., Whitbeck, L. B., & Hoyt, D. R. (2003). Gang Involvement and Membership among Homeless and Runaway Youth. *Youth & Society*, 34(4), 441.
- ¹² *Ibid*
- ¹³ Stiffman, A. R. (1989a). Suicide Attempts in Runaway Youths. *Suicide and Life-Threatening Behavior*, 19(2), 147.
- ¹⁴ Rew, L. (2008). Caring for and connecting with homeless adolescents. *Family & Community Health*, 31(1), S42-S51.
- ¹⁵ *Ibid*
- ¹⁶ Roy, E., Haley, N., Leclerc, P., Sochanski, B., Boudreau, J. F., & Boivin, J. F. (2004). Mortality in a cohort of street youth in Montreal. *Jama-Journal of the American Medical Association*, 292(5), 569-574.
- ¹⁷ Yoder, K. A., Whitbeck, L. B., & Hoyt, D. R. (2003). Gang Involvement and Membership among Homeless and Runaway Youth. *Youth & Society*, 34(4), 441.
- ¹⁸ Rew, L. (2008). Caring for and connecting with homeless adolescents. *Family & Community Health*, 31(1), p S45
- ¹⁹ Hammer, H., Findelhor, D., Sedlak, A.J. (October 2002). Runaway/throwaway children: National estimates and characteristics. *National Incidence Studies of Missing, Abducted, Runaway, and Thrownaway Children (NISMArt)*. Retrieved on October 21, 2008 from <http://www.ncjrs.gov/html/ojjdp/nismart/04/>
- ²⁰ Whitbeck, L., Hoyt, D., Yoder, K., Cauce, A., Paradise, M., (2001). Deviant behavior and victimization among homeless and runaway adolescents. *Journal of Interpersonal Violence*. 16 (11), 1175-1204.
- ²¹ Cohen, M. A. (1998). The monetary value of saving a high-risk youth. *Journal of Quantitative Criminology*, 14(1), 5-33.
- ²² *Ibid*
- ²³ *Ibid*
- ²⁴ *Ibid*
- ²⁵ New Avenues for Youth (2007). *The Economic Benefits of Helping Homeless Youth*. p 3. Retrieved on March 16, 2009 from www.newavenues.org/files/NewAvenues_Cost_Benefit_Study.pdf
- ²⁶ *Ibid*
- ²⁷ New Avenues for Youth (2007). *The Economic Benefits of Helping Homeless Youth*. p 4. Retrieved on March 16, 2009 from www.newavenues.org/files/NewAvenues_Cost_Benefit_Study.pdf
- ²⁸ *Ibid*
- ²⁹ Burt, M., Aron, L.Y., Lee, E. & Valente, J. (2001). *Helping America's Homeless: Emergency Shelter or Affordable Housing*. Washington D.C.: The Urban Institute Press.
- ³⁰ Rosenheck, R. (2000). Cost-effectiveness of services for mentally ill homeless people: the application of research to policy and practice. *The American Journal of Psychiatry*, 157(10), 1563-1570.

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RUNAWAY AND HOMELESS YOUTH NEEDS

The League of Women Voters of Oregon Education Fund published a report (2006) that examined RHY demographics, service delivery, barriers to services, and youth needs. This report utilized multiple interviews with runaway and homeless youth throughout the state of Oregon though public forums held in 2005. These forums identified what kinds of services work well for youth and which service approaches should be avoided. The most common statements made by youth centered on *the importance of having one relationship with an adult role model* for the provision of advocacy, mentoring, and guidance. Research supports this finding and has an extensive history of showing the importance for youth to have a supportive relationship with one or more stable adult role models^{1,2,3,4}.

Additional needs for youth are related to experiences associated with gender, race, economic status, school, and/or neighborhood contexts⁵. One important difference between the relationships adolescents have with their peers versus adults is the difference in power dynamics. There often exists a hierarchical relationship between adolescents and adults, which can create problems in an adult shelter, while peer friendships are considered more equal and shared⁶. Because RHY programs work to engage youth in their communities through service learning, youth are afforded the opportunity to build healthy peer relationships.

In addition to the importance of relationships, during the LWV forums (2006) youth indicated categories of services they find most helpful. With no particular hierarchy noted, these services consisted of the following⁷:

- Mental health treatment
- Substance abuse treatment
- Life skills training
- Wraparound services
- Food programs
- Case management
- Youth's commitment to some case management

- Voluntary participation in programs
- Non-judgmental service providers
- Friendly, trusting professionals
- Job-skill development
- Consistent rules and structure
- Family mediation
- Affordable housing

These “helpful” services, as identified by the youth, are consistent with what RHY providers stated in the report as important in providing effective interventions and support to RHY. This report also indicated that young people tended to turn away from services that had the following characteristics:

- Living with rigid rules
- Living with a homeless adult
- Preaching and condescending approaches
- Scare tactics
- Having treatment forced on them

For RHY policies to be effective there must be a commitment to understanding the developmental needs as well as the more *tangible* needs of this vulnerable population.

¹ Bowlby, J. (1969). *Attachment and Loss: Vol. 1 Attachment*. New York: Basic Books

² Ainsworth, M.D.S., Blehar, M.C., Waters, E., Wall, S. (1978). *Patterns of attachment: A psychological study of the Strange Situation*. Hillsdale, NJ: Erlbaum

³ Main, M. (1996). Introduction to the special section on attachment and psychopathology: 2. Overview of the field of attachment. *Journal of Consulting and Clinical Psychology*, 64, 237-243.

⁴ Siegel, D. (1999). *The Developing Mind: How relationships and the brain interact to shape who we are*. New York: The Guilford Press.

⁵ Giordano, P.C. (2003). Relationships in adolescence. *Annual Review of Sociology*. 29. 257-281.

⁶ Buhl, M.B., Noah, P. (2005). Relations with Parents and Friends During Adolescence and Early Adulthood. *Marriage and Family Review*, 36 (3/4), 31-51

⁷ League of Women Voters of Oregon Educational Fund (LWV). (2006). *Oregon's Homeless Youth*. Retrieved on May 16, 2008 from http://www.lwvrv.org/pdf_docs/homeless-youth%202006.pdf

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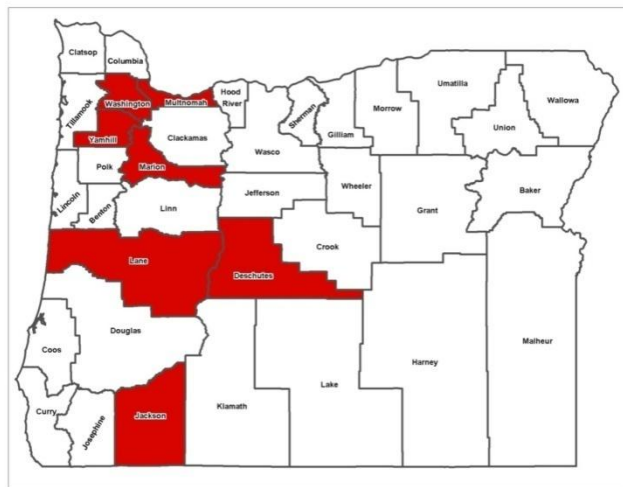
OREGON RUNAWAY AND HOMELESS YOUTH POLICY

Funding

Federal funding, though disconnected and far from comprehensive, is available for runaway and homeless youth services in Oregon. The primary federally funded services (i.e., street outreach, basic center drop-in, & transitional living programs) have traditionally been located in urban centers/metropolitan statistical areas (MSAs) along the I-5 corridor (see Figure 1) with core funding allocated through the Runaway & Homeless Youth Act (RHYA) with oversight by the Family and Youth Services Bureau (FYSB).

A secondary source of Federal funding for Education (ODE) through the McKinney-Vento Act. Each year the ODE receives \$600,000 to provide assistance to all homeless students, which includes homeless youth who are members of a homeless family. According to a report published by the League of Women Voters, approximately 3 out of every 4 dollars are allocated to school districts as sub-grants to use how they feel best for the homeless youth in their communities, with the remaining dollars used to monitor programs throughout the state¹.

Figure 1: Counties with Federally Funded RHY Programs



A third resource for homeless youth over the age of 18 is eligibility to receive Section 8 rental assistance through funds from the U.S. Department of Housing and Urban Development (HUD). Additionally, McKinney-Vento provides funds for emergency shelters, temporary transitional housing, and long-term residence programs for unaccompanied homeless youth over the age of 18².

These Federal dollars pass directly to local communities through Community Development Block Grants, local Housing Authorities, and community homeless providers. While such programs may assist older youth, those younger than 18 years old are prevented from utilizing these services. Additionally, all ages of homeless youth are inclined to refuse services from adult shelter providers as they tend to cater to the severely mentally ill³ and, depending on where the youth is seeking housing, waiting lists in Oregon for a Section 8 Housing Voucher vary from 3-6 months in Marion County⁴ to 18-24 months in Portland⁵.

Although access is difficult, runaway and homeless youth may be eligible for food stamps from a supplemental assistance program through Oregon's Department of Human Services (DHS) and may enroll in the Oregon Health Plan (OHP) if they are pregnant, are a parent, or are determined to have a disability. For youth under age 18, shelter is technically available in the form of foster homes, community shelters, and/or residential treatment facilities⁶. However, with an already overburdened foster care system, policies that prevent underage youth from utilizing adult community shelters, and under equipped residential facilities, the streets are often identified by youth as their best option.

Oregon Runaway and Homeless Youth Policy Development

Lack of sufficient funding for systematic and comprehensive planning to decrease homelessness has resulted in what many advocates consider insufficient services for Oregon's runaway and homeless youth⁷. Because of the lack of sufficient services for RHY, in 2005 the Oregon State Legislature designated the Oregon Commission on Children and Families (OCCF) as the working group responsible for creating state policies that would serve the State's runaway and homeless youth population. Up until the creation of this working group, no state department had been responsible for managing efforts to problem-solve how programs could best serve this population⁸.

In this same year, Oregon House Bill 2202 confirmed what RHY advocates in Oregon had known for decades: the state was severely deficient in developing a systematic plan to expand resources and strategies with intent to reduce the number of youth affected by homelessness or family issues resulting in youth running away from home⁹. House Bill 2202 also

created the Runaway and Homeless Youth Subcommittee of *Oregon Partners for Children and Families* to address the needs of the estimated number of 24,000 runaway and homeless youth residing in Oregon each year¹⁰. Members of the subcommittee set out to collect data through public forums and individual interviews with RHY providers, community advocates, and youth themselves on how each county in Oregon addressed the needs of RHY. Their investigation sought to identify gaps in services as well as existing barriers to local communities trying to provide services to RHY¹¹.

In 2007, this subcommittee presented its findings to the Oregon State Legislature. In a detailed report, the subcommittee stated that rural communities contend with the challenge of not having adequate infrastructures in place to care for even one runaway or homeless youth. While urban communities had infrastructures in place to provide shelter and resources, they often did not have space, resources, or adequate services such as dental, medical, or substance abuse and mental health treatment¹².

At forums held throughout Oregon in 2005, youth described three primary needs that, if met, would help them transition from the streets into a stable living environment. The first need was for attachment. Youth expressed their need for, “one person to be in a meaningful relationship with as an advocate and guide as they move through systems, programs, and life”¹³. Youth also expressed a strong desire for supports that are interlinked and easily accessible. Youth stated they were more likely to utilize supports that are accessible without having to travel long distances for different service components. Finally, youth expressed the need for “basic needs such as food and shelter; then health care, case management and mentoring” throughout the state of Oregon¹⁴.

The outcome to information obtained from these forums was the development of policy and planning recommendations by the subcommittee. The integration of community-based resources with state resources was advised when possible, as well as development of local policies that would support families in crisis, provide youth with access to services, and enhance community supports. Additional recommendations included the examination of barriers for youth exiting state systems, the establishment of long term goals to better understand and

address causes of youth homelessness, and the development of local coordination plans to comprehensively address youth needs, resources available and needed supports.

Advocates recommended that community providers adapt program service delivery based on these findings and advance research towards examining barriers youth are confronted with in transitioning into adulthood. Advocates also expressed that more funding was needed for agencies to carry out adequate services for RHY¹⁵.

Oregon's New Runaway and Homeless Youth Policy

Oregon House Bill 2202 acknowledged that Oregon lacked a “comprehensive policy for systematically addressing the issues and needs of runaway and homeless youth and their families”¹⁶. The bill went on to acknowledge that communities are severely limited in options for serving runaways and their families and that, “significant gaps exist in the availability and coordination of services for runaway and homeless youth.”¹⁷

During the 2007 Oregon legislative session, and building upon work of House Bill 2202, \$1 million was allocated to the Oregon Commission on Children and Families (OCCF) budget. In accordance with previous research-based findings, reported recommendations, and additional input from community leaders, the Runaway and Homeless Youth Initiative Request for Proposal (RFP), drafted by OCCF, sought to recruit applications from all counties, in partnership with local community providers of RHY services, throughout the state of Oregon. The target populations identified for services are classified as youth ages 11-17 at high risk for being separated from their families, have been abandoned, have run away, and/or are experiencing homelessness.

The RFP stipulated applicants must provide two or more of the 18 below listed “commonly accepted service elements for runaway and homeless youth” in order to be considered for funding.

- Outreach
- Basic Needs (food/clothing)
- Emergency Shelter (less than 160 days)
- Long Term Shelter (greater than 160 days)

- Family Reunification
- Case Management/Advocacy
- Drop-In Center
- Recreation and Support Groups
- Medical/Dental Services
- Transitional Housing
- Skills Training
- Independent Living
- Alcohol and Other Drug Counseling
- Mental Health
- Education
- Employment
- Permanent Housing
- Follow-up and Aftercare Services

All eligible applicants to the RFP were required to demonstrate results pertaining to youths' connectivity to resources, continuity of education, and increased safety. Additionally, applicants are required to show evidence of results in the two of the following four listed areas of service activity:

- Expansion of community partnerships
- Increased diversity of community partnerships
- Decreased gaps in service delivery systems
- Increased ability of the community to respond to the need

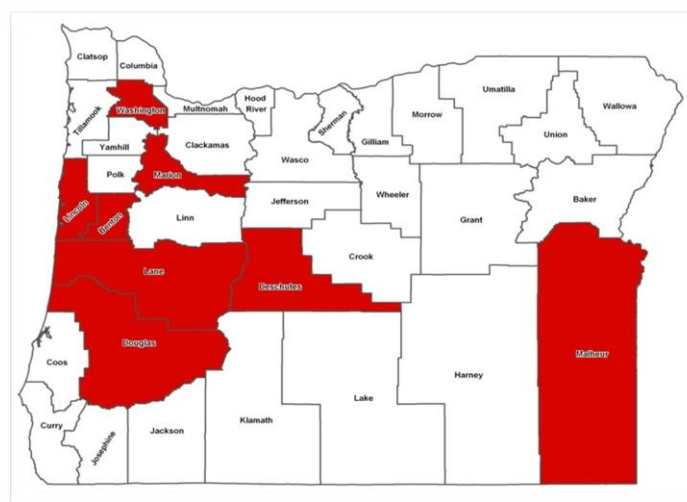
The proposal requirements consisted of:

- Development or improvement of homeless and runaway youth services and supports
- Creation of or building upon existing partnerships
- Identification of services and supports to homeless and runaway youth as a priority

Accepted applicants received funds from a \$900,000ⁱⁱ pool. Funds were required to be used for developing and enhancing services, and not used as supplemental funds, capital development, or “new planning activities” (OCCF, 2007). Additionally, all applicants were to provide a funding match of 10 percent, which could be obtained from cash, in-kind donations, and existing resources.

This funding resulted in eight Rollout Sites being established in a range of counties throughout Oregon (*see Figure 2 and Table 4*). Because this funding is expected to be increased in future legislative sessions, it is important to establish and collect uniform outcome measures that will determine the effectiveness of these new RHY services. Combined with identifying barriers and supports around implementation, this work will assist future new sites as they begin to serve runaway and homeless youth.

Figure 2: Counties with Oregon Funded RHY Programs



ⁱⁱ This is the biennium amount. \$100,000 of the original \$1 million was designated for administration, oversight, and technical assistance.

Table 4: Runaway and Homeless Initiative Rollout Sites 2007-09¹⁸

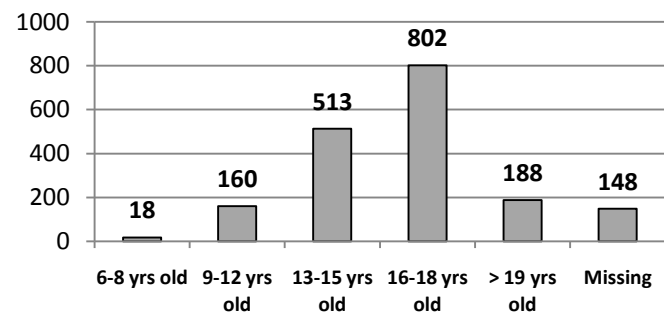
<p>Benton County</p> <p>Program Title: Benton County Partnership</p> <p>Primary Partner: Jackson Street Youth Shelter</p> <p>Focus/Program Elements: Service integration, centralization, and coordination through Outreach Worker and Case Manage</p>	<p>Lane County</p> <p>Program Title: Rural Lane County Runaway and Homeless Youth Initiative</p> <p>Primary Partner: Looking Glass Youth & Family Services</p> <p>Focus/Program Elements: Building a rural service delivery model with case managers in each of three rural communities, connectivity between service and shelter providers, McKinney Vento school staff, and ESDs</p>	<p>Marion County</p> <p>Program Title: Marion County Runaway and Homeless Youth Service Continuum</p> <p>Primary Partners: Northwest Human Services, Mid-Willamette Community Action Agency and Neighbor-to-Neighbor</p> <p>Focus/Program Elements: Multi-disciplinary access for youth reported as runaways and intensive outreach, case coordination, and family based interventions for all identified youth</p>
<p>Deschutes County</p> <p>Program Title: Deschutes County Runaway and Homeless Youth Initiative</p> <p>Primary Partner: Cascade Youth & Family Center (JBarJ)</p> <p>Focus/Program Elements: Loft drop-in and emergency shelter-expansion of transitional housing</p>	<p>Lincoln County</p> <p>Program Title: Lincoln County Coalition for Runaway and Homeless Youth</p> <p>Primary Partner: Community Services Consortium and Lincoln County School District</p> <p>Focus/Program Elements: Drop-In Centers in four community locations and expansion of service coordination, advocacy, and referral with out-stationed youth as workers</p>	<p>Washington County</p> <p>Program Title: Project Home Safe</p> <p>Primary Partners: Boys and Girls Aid Society and First Congregational United Church of Christ</p> <p>Focus/Program Elements: Connections to resources and continuity of education through outreach, case management, and service coordination, bringing stability to the “front end” of Washington County’s RHY Continuum.</p>
<p>Douglas County</p> <p>Program Title: Douglas County Youth Coalition Drop-in Center Program</p> <p>Primary Partner: Homeless Youth Coalition</p> <p>Focus/Program Elements: Drop In-Center w/advocacy, wrap around, basic needs, connectivity to education, independent living skill development, and counseling</p>	<p>Malheur County</p> <p>Program Title: S.E.A.S.O.N. -- Safety Education Advocacy and Support Network</p> <p>Primary Partner: Harvest House Ministries</p> <p>Focus/Program Elements: Outreach to youth identified as runaway in the county’s two largest communities, Ontario and Nyssa, with very short-term and limited long-term shelter and services.</p>	

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- ¹ League of Women Voters of Oregon Educational Fund (LWV). (2006). *Oregon's Homeless Youth*. Retrieved on May 16, 2008 from http://www.lwvrv.org/pdf_docs/homeless-youth%202006.pdf
- ² U.S. Department of Housing and Urban Development. (2006). *Shelter Plus Care Program*. Retrieved on November 25, 2006, from <http://www.hud.gov/offices/cpd/homeless/programs/splusc/index.cfm>
- ³ League of Women Voters of Oregon Educational Fund (LWV). (2006). *Oregon's Homeless Youth*. Retrieved on May 16, 2008 from http://www.lwvrv.org/pdf_docs/homeless-youth%202006.pdf
- ⁴ Marion County Oregon. (2007). *Housing Choice Voucher: Section 8 Program*. Retrieved on November 8, 2008 from <http://www.co.marion.or.us/HA/section8.htm>.
- ⁵ Housing Authority of Portland (HAP) (n.d.). *Section 8 Rental Assistance Program*. Retrieved on November 8, 2008 from <http://www.hapdx.org/resident/sc8intro.html>.
- ⁶ League of Women Voters of Oregon Educational Fund (LWV). (2006). *Oregon's Homeless Youth*. Retrieved on May 16, 2008 from http://www.lwvrv.org/pdf_docs/homeless-youth%202006.pdf
- ⁷ *Ibid*
- ⁸ Oregon Commission on Child & Families, Oregon Partners for Children & Families (2007). *Oregon Runaway and Homeless Youth Initiative: HB 2202 Report to Legislature and Governor*. Salem, Oregon.
- ⁹ *Ibid*
- ¹⁰ *Ibid*
- ¹¹ Oregon Runaway and Homeless Work Group (2005). *From Out of the Shadows: Shedding Light on Oregon's Runaway and homeless Youth*. Report to the Interim Committee on Health and Human Services February 2005
- ¹² Oregon Commission on Child & Families, Oregon Partners for Children & Families (2007). *Oregon Runaway and Homeless Youth Initiative: HB 2202 Report to Legislature and Governor*. Salem, Oregon.
- ¹³ League of Women Voters of Oregon Educational Fund (LWV). (2006). *Oregon's Homeless Youth*. Retrieved on May 16, 2008 from http://www.lwvrv.org/pdf_docs/homeless-youth%202006.pdf
- ¹⁴ *Ibid.*, p 18
- ¹⁵ *Ibid*
- ¹⁶ Oregon House Bill 2202, 73rd Oregon Legislative Assembly, Regular Session Retrieved on December 9, 2008 from <http://www.leg.state.or.us/05reg/pdfmeas/hb2200.dir/hb2202.intro.pdf>.
- ¹⁷ *Ibid*
- ¹⁸ Oregon Commission on Children and Families (2009). *Runaway and Homeless Youth*. Retrieved on April 28, 2009 from http://www.oregon.gov/OCCF/Documents/Agency_Performance/RHY_2009.pdf

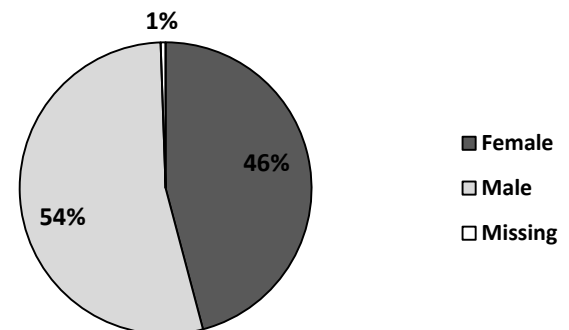
PROGRAM OUTCOMES

As part of their agreement to accept funds, programs provide various levels of demographic data to OCCF about the youth being served in their programs. In regards to age, data is submitted in groups (i.e., 13-15 years old, 16-18 years old, etc.). The graph to side reflects the distribution of youth served by these programs. Gender was also collected on RHY (see pie chart) reflecting an alignment with national data suggesting slightly more females (54 percent) present in RHY programs. Race and ethnicity was also collected from youth (see graph). Data indicates the largest race served by these programs was *White-Caucasian* (61.5 percent) with *Hispanic/Latino* (15.6 percent) and

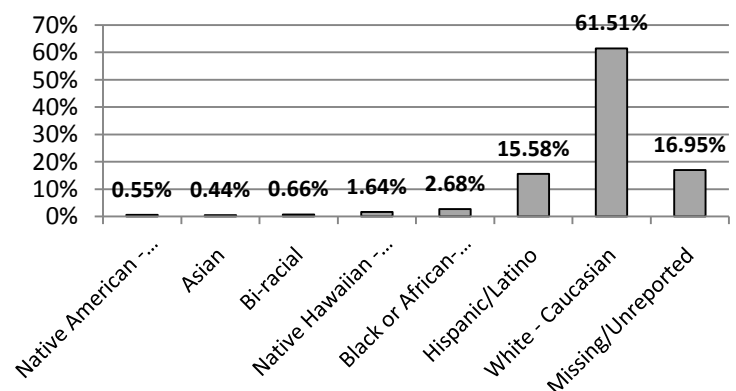
RHY Served by Age



RHY Served by Gender



RHY Served by Race/Ethnicity



Black or African American (2.7 percent) making up the largest groups of race served.

Disproportionality and Disparity among children of color has long been recognized by researchers, service providers, and policymakers in various other systems (e.g., child welfare, juvenile justice, etc.). Disproportionality refers to the overrepresentation of a particular race/ethnicity in a system when compared to that race/ethnicity in the general population. To determine the extent of disproportionality, an index (DI) is calculated to determine the presence and magnitude of disproportionality using the following;

$$DI = \frac{\% \text{ of race in care}}{\% \text{ of race in general population}}$$

A DI greater than 1.0 represents disproportionality is present, less than 1.0 indicates the absence of disproportionality. For youth served in RHY programs, *Hispanic/Latino* (1.47) and *Black or African American* (1.34) indicated moderate levels of disproportionality, while *Native Hawaiian – Pacific Islander* (5.47) all indicated a large level of disproportionality.

Disparity refers to the overrepresentation of a particular race/ethnicity compared to the dominate race in care. Again, an index was calculated using the following;

$$\text{Disparity Index} = \frac{DI \text{ of overrepresented race}}{DI \text{ of dominate race}}$$

As with the DI, a Disparity Index greater than 1.0 represents the presence and magnitude of disparity, while an index less than 1.0 indicates the absence of disparity. **For youth served in RHY programs the index indicated the presence of disparity for the same three groups as above; *Hispanic/Latino* (1.97), *Black or African American* (1.75) and *Native Hawaiian – Pacific Islander* (7.154).** Just as disproportionality and disparity have been identified as concerns for child welfare in Oregon, these findings suggest those same issues are present in this population of youth.

IMPLEMENTATION ANALYSIS

Methodology

For this portion of the project, an implementation analysis was conducted with all eight Rollout Sites. The goal was to determine to what extent the policy had been implemented, identify any barriers to implementation that could assist future Rollout Sites, and determine to what extent system development had occurred. To accomplish this three professionals associated with each Rollout Site were recruited for interviews. To be eligible, individuals were required to have extensive experience with the planning and implementation of the new RHY program. An interview guide was developed to ask questions around policy implementation. Participants were contacted and a time was scheduled for a phone interview. Each interview took approximately 30 minutes to complete.

Analyses

Data obtained through qualitative interviews with three community professionals who had experience in starting programs were cross-analyzed, employing inter-rater reliability methods and using content analysis. Each team member individually analyzed all interviews. Once completed, team members shared developed categories and, through discussion, created a list of categories and themes.

Findings

Safety

Every program interviewed conveyed safety of the youth as their top priority. As described earlier in this report, RHY are at extraordinarily high risk for a multitude of negative outcomes. Programs appeared to be aware of these risks and developed programs that addressed safety consistent with their community's goals and capabilities.

Outreach

The first stage of working with RHY, and consistent with research, is outreach. Programs devised outreach services to locate RHY and begin the process of relationship building, the goal

being to entice youth off the streets and reengage them back into the community. Outreach was conducted using a variety of methods which included teams of staff engaging youth in areas where they congregated (e.g., skate parks, malls, etc.), starting/expanding drop-in centers (considered stationary outreach), and program staff extending their presence in local schools while working closely with school staff. Some programs developed websites, such as MySpace, where local RHY could see descriptions of available services. Other programs were able to use funding to place staff into their county's rural communities, providing a service nonexistent prior to this funding.

Research shows that there are barriers for RHY accessing services on their own. Outreach is an effective intervention to overcome such obstacles. To help minimize service barriers, many of the county programs brought services to the youth. Outreach often included program staff going into the schools to assist youth with filling out paperwork for benefits/services. One program's website included a "how to" section for benefits. Other services brought to youth included case management, mental health and substance use/abuse treatment, medical and dental services, crisis counseling, dual diagnosis support, support for developmental needs, and access to computers for information and referral.

Emergency/Crisis Services

Basic needs services were provided to youth in all counties. These included day-to-day items such as clothing, socks and food, as well as health related services such as medical, dental, and more intensive services such as mental health and drug & alcohol treatment. For some youth, a bus ticket back home was provided. All counties provided some level of crisis intervention service, whether that was making a report to DHS for child abuse, neglect or maltreatment, or working with families in crisis to prevent a runaway event from occurring.

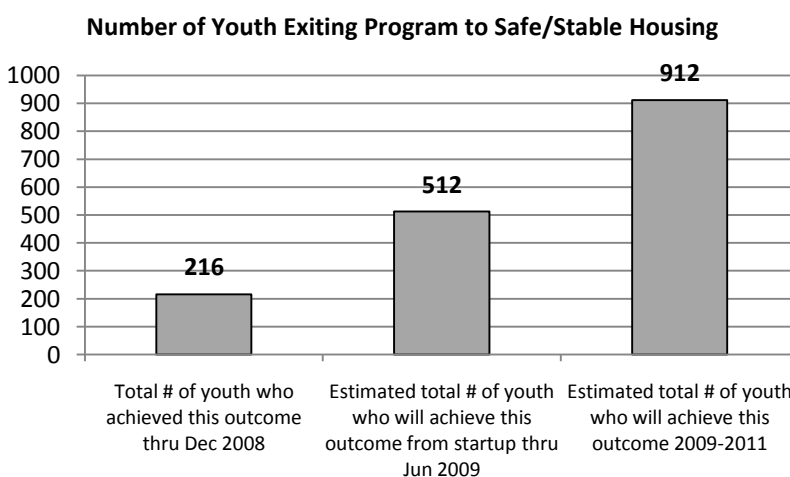
Housing

Youth entering a program via outreach, self-referred to the agency, or who were referred by a community agency/member, were provided some level of safe housing. Housing options varied and depended on the capacity of the community. One example of housing included a Host Home Model, where families in the community provided short-term shelter for youth until

program staff could work with the youth's family to facilitate a return home or find more suitable long-term housing. Some counties had agencies that provided shelter or partnered with an emergency shelter in the community. Other counties partnered with their local community such as the Juvenile Departments, Department of Human Services (DHS) or other non-profit such as the Boys and Girls Club, to find temporary and safe housing. Programs assessed each youth's individual situation and worked to help the youth find the most appropriate placement for longer term housing whether that was the youth's family of origin, extended family, or long-term transitional living programs.

Safe Exits

County RHY programs all focused on "safe exits" for youth leaving their programs. To facilitate this, and consistent with research on best practices, all programs focused their first step on reunifying youth with their families. One program stated that a key to a successful and safe exit was to work with the youth to develop "realistic transition plans". This was to ensure the youth would not fall between gaps in services once they left the program's care. Programs provided a number of services to help facilitate family reunification, which included education to families on issues specific to adolescences and family mediation to assist with reconciling conflict between the youth and their family (one program stated they offered as many as 6 mediations per family). Additional family services included assistance to the family and youth in developing a contract to help improve communications, provision of weekly meetings with the family and youth to ensure the crisis was not reemerging and mediate new conflict, provide family support workers, offer family counseling for more severe issues, and a variety of other services to



help rebuild the relationship between the youth and their family. If families refused to engage in the process, programs referred the case to DHS.

Independent Living Skills

To assist the youth in attaining healthier lifestyles, many programs provided social skills training in the areas of conflict resolution, anger management, nutrition and problem solving techniques. For older youth and when appropriate, programs assisted with apartment applications, job hunting skills, cooking and money management skills.

Connectivity to Resources

To facilitate connectivity to resources, as recommended by research, case management was the foundation of the services provided by programs. Through case management, runaway and homeless youth were connected to services they often already qualified for but, due to barriers, had been unable to access (such as identification cards, which youth are required to have in order to obtain most other services/benefits and the DHS self-sufficiency program).

Case managers worked with youth to identify new resources and help youth connect to community services, such as medical, dental, mental health and drug & alcohol treatment. One program created a policy to perform intakes over the phone in order to help youth access benefits/services without having to travel across the county. This is one example of a program reducing barriers to case management through an agency policy. Another program developed a relationship with the local DHS office so they would allow youth to fax applications. This greatly expedited the process. Case managers also connected RHY to other youth-serving agencies, such as Boys and Girls Club, as well as connecting youth with community mentors. Additionally, the relationships formed between case managers and the McKinney-Vento Homeless School Liaisons appears to be instrumental in reengaging RHY into education.

Continuity of Education

Runaway and homeless youth face a number of barriers to education. The National Law Center on Homelessness and Poverty lists enrollment requirements, high mobility of youth, lack of transportation, lack of school supplies, and poor health as some of the leading obstacles for

runaway and homeless youth in terms of staying connected or reconnecting with school. The Homeless School Liaison, funded by the federal McKinney-Vento Act, is a key member in every school district in Oregon to facilitate runaway and

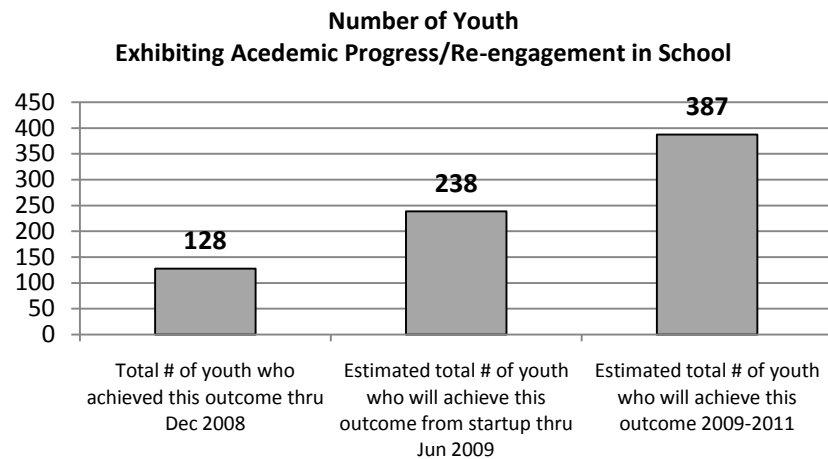
homeless youth staying in, or reenrolling in, school. All county RHY programs reported working especially close with these individuals to help youth get back into school and stay in school.

Many programs also assisted youth in acquiring General Education Diplomas (GED). Programs provided educational tutoring (both within their agency and out in the community) and collaborated with schools to obtain textbooks, get homework assignments, and obtain missing work. Additionally, programs provided school supplies and study guides for help in earning a GED and scoring well on the SAT. One program started a “Homework Club” to encourage RHY to continue with their studies, even in this time of crisis. Programs worked closely with school counselors to identify youth who may be homeless and still in the school, or who were at risk of homelessness or running away. Several programs reported having staff within the schools helped to identify crisis earlier and afforded staff time to work with youth, possibly preventing running away and/or leaving school.

System Improvement

Expand Partnerships

County programs described creating and/or developing partnerships with state agencies such as the Oregon Department of Human Services (DHS), Homeless School liaisons, local Juvenile Departments, Oregon Department of Labor, as well as an increased and improved



partnership with the Oregon Commission on Children and Families (OCCF). At the County level, programs listed local judges and other court/law enforcement personnel along with enhanced partnerships with the local Commission on Children and Families. Additionally, programs reported working more closely with local city government specifically mentioning mayors and city managers.

Programs reported expanding partnerships with other community providers, which expansion was a key ingredient to effectively assist runaway and homeless youth. Programs described local community committees – often including youth – whose sole focus was on the issue of RHY, school improvements, other youth serving agencies, local housing programs, challenges to minority groups, and the status of the faith community, which many programs depicted as a vital source for volunteers. Additional partnerships were described as including local community businesses, specifically mentioning Reality companies, local media, and community consultants.

Expanding these partnerships assisted programs in recruiting volunteers to help with specialized services such as translation/interpretation and medical services. One program expressly described how a group of inmates from the Oregon State Penitentiary responded to the local program after an article ran in the paper. The program recounted how the inmates collected donations of toiletries and socks and sent them to the program along with letters of encouragement.

Increase Partner Diversity

One key component of systems improvement for runaway and homeless youth is increasing community partner diversity. Programs continue to report that creating partnerships with military recruiters, local juvenile departments and law enforcement are critical to helping RHY succeed. Programs described the business community as joining with them to improve services, along with groups from the Hispanic community, GLBTQ groups (e.g., P-flag). Programs also stated how newly formed community committees were bringing a variety of community members to the table who had not been there prior to this funding. Programs continued to mention new partnerships with the faith community as being critical to the recruitment of

assistance, such as faith-based counselors and other volunteers, specifically mentioning how new speaking opportunities at local churches were afforded to them. Programs also described new assistance from service providers in the community, such as alcohol and drug counselors, mental health professionals, and medical and dental providers. Yet, according to programs, a key improvement to partner diversity was that of programs who hired RHY to assist with outreach of other RHY.

Decrease gaps in service delivery

Gaps in services for RHY are well recorded in research and reports. Decreasing these gaps, making it harder for a youth to slip between the cracks, was an additional goal of this funding. Programs described how they could now facilitate benefits and services for youth with relationships they developed from this funding. Specific services mentioned included connections to DHS's self-sufficiency and food stamps program. Programs reported how their relationship to DHS was critical, not only in working with youth, but in assisting the families of youth. One program described how they were able to now intervene and extend deadlines so families would not have to redo DHS paperwork. Programs also described how they were now being invited to state planning sessions and participating in creating housing continuums for youth aging out of foster care.

Other programs described how the relationship with the local juvenile department and police departments had developed into sharing resources and runaway reports being sent directly to the homeless coordinator. System improvements included the ability of several programs to serve youth in outlying, rural communities by being afforded the opportunity to go into the schools. Again, this often helped to prevent a youth from running away or at least helped in keeping youth connected to education.

Programs additionally described how the new funding resulted in service gap reduction in the following ways;

- Youth are now hearing about the services and coming in for services
- Outreach to RHY was nonexistent before funding

- Faith community providing services through volunteers
- Services are now more comprehensive
- Ability to assess needs of youth and direct to appropriate services
- There were no after school programs, no shelter services, and no drop-in services prior to funding
- Minimizes duplication of services
- Medical nurses provide services at drop-in clinic
- Outreach van provides services to youth not served
- Single point of contact for the community
- Improved information and referral process
- Utilizing youth and volunteers to continually assess needs of population.
- Increased agency involvement looking to streamline resources for youth
- Community roundtable communicates resources
- Minimizing barriers
- Youth don't have to be in shelter to receive case management services

Increase Community Response to the Need

An additional goal of this funding was to increase the community's response to the needs of RHY. Programs described how newly developed partnerships had heightened awareness of the needs of RHY, specifically mentioning partnerships with federally funded Runaway and Homeless Youth programs for housing, DHS for benefits and programs, Juvenile Departments and law enforcement for better coordination around runaway reports, and Homeless School Liaisons to increase the school's response to the issue. Partnerships with the school liaisons also assisted schools to reconnect with youth who had dropped out.

Programs also described their community increasing its response to the needs of RHY with volunteers who taught independent living skills, tutored youth, or became host families for RHY. They mentioned how previously described community committees specifically addressed the needs of RHY, brought resources to the table, and identified gaps in services and ways for the community to respond to those gaps. Participating programs expressed a belief that the funding

helped improve staff credibility in the community. The faith community was mentioned as instrumental in expanding social activities for RHY to participate in, as well as dinners for youth. Faith groups also provided a steady base of volunteers, materials, and financial support. Stronger community coalitions were described as resulting in a single point of contact for RHY and the community, providing more efficient and effective services, as well as the development of basic needs provisions, such as medical, dental, mental health and A&D treatment.

Barriers to Program Implementation

Participants were asked a question pertaining to barriers they experienced during start-up program implementation. Five themes were identified as being barriers to program implementation.

Funding

Obtaining funding from city, county, state, and federal agencies is labor intensive for small, start-up programs. Different funding streams impose different mandates and administrative requirements. This makes navigation through individual systems, once funding is granted, challenging to programs unaware of those differences. One respondent indicated that if a program meets requirements for county funding, they don't necessarily meet requirements for city and state funding streams. Because of this, allocation of funds can be delayed until documentation is aligned with each requirement imposed by each funder.

Bureaucratic

Similar to funding stream challenges are bureaucratic barriers. Interviewed participants discussed complexities associated with varying levels of government in relation to differences in protocols and procedures between public agencies. Start-up programs require extra support to understand the nuances of different procedures in order to obtain funding to proceed with program implementation. Interviewees also indicated that the rigidity of rules and procedures in public agencies (the very definition of bureaucracy) can pose barriers to start-up programs.

One participant described a five month delay in funding allocation as a result of time required to learn bureaucratic nuances. They indicated it was important to know who the right

public official was to talk to, but difficult to know who that person was due to the amount of misinformation that occurred through multiple phone transfers by public agency personnel.

Staff Experience

Interview participant themes also pointed towards the importance of staff experience in starting a program. Staff experienced with government protocols and procedures have a higher likelihood of being able to navigate through the appropriate system requirements that have to be met in order for a program to begin. Without such experience, time is spent learning the system and program funding can be delayed for extended periods of time. But experience with formal systems is not the only predictor of success. Staff with experience collaborating with community partners also seemed to be important for the effective implementation of this policy.

Partner Agreements

Low levels of specificity in partner agreements increase barriers confronting start-up agencies. If contracts are vague in language or unclear about program expectations, agencies struggle to understand and follow details of program implementation requirements. Questions about which agency is supposed to provide which service to which client could lead to friction between partners and increase barriers to implementation.

History of Collaboration

Rural communities are less likely to have experience collaborating with formal community supports because there might not be any funded resources to collaborate with. This can be a barrier for rural start-up programs because they are alone in their efforts to serve the runaway and homeless youth population in need. Consequently, they might not have sufficient resources for RHY being served and struggle to identify existing resources due to rural isolation. However, some rural communities are able to participate in state-wide collaborations that provide insight into how to obtain services that are currently unavailable in rural communities. Rural communities can be very creative in establishing informal collaboration however (see 'community partners').

Urban communities have an improved capacity to form formal collaborations due to the increased availability of resources found in urban environments. With experience participating in and forming collaborations, agencies are better equipped to address barriers based on collaborative feedback, support, and sharing of resources. However, as one interviewee pointed out, it is important to note that the *type* (i.e., beneficial, challenging, etc.) of relationship partners have had in the past can also impact implementation.

Benefits of Collaboration

The second question asked of participants pertained to identifying the benefits of working collaboratively with others agencies/organizations. Two key themes were identified from the data.

Program Improvement

Statewide collaborations have the capacity to offer individual service providers information about how other programs serve similar populations and are able to learn what is working and why. Participation in collaborative efforts can inform programs of how to improve service delivery and efficient integration of additional community resources.

Inclusive Collaborations

In order for benefits to be found in collaborations it is necessary for all members to be included in the collaborative group, contribute to attainment of collaborative objectives, and participate in the process to address all member concerns or requests. Successful collaborations utilize everyone's voice to address presenting issues challenging to all or some members. If a member of a collaborative team feels unwelcomed or judged, they are not likely to contribute to collaboration efforts and may stop coming to meetings altogether. Additionally, because collaborations typically offer expertise from multiple leaders, inclusivity enables collaborative efforts to obtain information and resources that might not otherwise be found in their community.

Recommendations to the way programs are implemented

The third interview question asked participants for ideas on how collaborations and/or implementation better could be improved upon. Two themes were identified.

Community Support

In order for start-up programs to succeed, it is important the communities they reside in support program objectives. Integration of services is often necessary for populations with needs that extend beyond services provided by any one agency. Community support enables available community resources to be utilized, provides reassurance to consumers that options for services exists, and enables start-up programs to focus on key programmatic areas of focus without distractions of service needs unable to be addressed by the program.

Client Driven Programs

Sometimes programs are presented with barriers in service delivery due to insufficient information pertaining to client needs. Agencies that are client-driven experience a reduction in this barrier due to access to, and utilization of, client feedback and insight for improvement. By contributing to program sustainability through improved services, consumer voice influences positive outcomes of program goals. Additionally, clients can assist programs in identifying current and changing needs pertinent to the population being served and assist with development of innovative service strategies.

Advice to others

The fourth question asked what advice the participant might offer a program or community partnership that was embarking on this type of work. One major theme emerged from the data.

Healthy Collaborations

Healthy collaborations recruit consumer voice and membership, as well as community leaders, in fields serving populations impacted by proposed policies. On-going maintenance of collaboration efforts is crucial to sustained success. Healthy collaborations are inclusive, a safe place for all views to be heard, and provide on-going support in the form of resources, collective

brainstorming to address challenges, and the sharing of success stories. Collaborations are intended to provide members with information that will benefit collaborative objectives and the communities they serve.

Limitations

It is difficult to provide a thorough and reliable policy analysis with input from such a small sample comprised of one group of administrators involved in systems of care. This report can only provide data that is reflective of the perspective of an administrator with experience starting programs. Without input from consumers and the varying levels of employment positions associated with start-up programs for runaway and homeless youth, policy analysis is void of perspectives that provide rich insight to barriers confronting start-up programs.

An additional limitation for this project is that associated with acquiring a “snapshot” of what is really happening. There is every possibility that if this information were used to assist new programs, we would uncover entirely divergent findings. Yet, the information we have obtained in completing this project has provided a wealth of knowledge and insight researchers may not have otherwise acquired.

A further limitation was the interview guide created for the participants. Patton (2002) describes the various ways in which personal bias of the researcher can impact participant responses. Because we wished to obtain specific information concerning barriers to policy implementation, we may have inadvertently biased the responses by preparing an interview guide beforehand. However, because separate members of the research team were interviewing separate participants, we felt it was important to develop questions so that answers would be grouped together based on the question.

Additionally, the convenience sample and the size of the sample were further limitations. Although this type of sampling was “fast and convenient” (Patton, 2002), it limits us on the extent of the findings generalizability. Because there may be specific barriers associated with bureaucracies our project missed, it would have been preferred to have had the ability to interview individuals who have had more relevant experience working with public agencies.

However, because identifying barriers to implementation was only one aspect of this project, we felt this sampling strategy was appropriate.

OUTCOME SURVEY

Capturing meaningful outcomes for runaway and homeless youth has been one of the highest priorities of this project. Outcome measurements serve as effective program management tools as well as informing funding sources of the value of their investments. While service delivery statistics (logic model inputs), e.g. number of youth served, number of survival kits distributed, number of referrals made, etc. are important to track, equally important are the impacts programs have in supporting youth to achieve goals for a safe and healthy lifestyle. It is also important to develop outcomes that both “make sense” and are not overly complicated or time consuming for local programs to administer. However, prior research in the area of outcomes for RHY is extremely limited. In light of this, an outcome survey was developed through a combination of a review of literature on runaway and homeless youth^{1,2,3}, an examination of the outcomes tracked in the Federal Runaway and Homeless Youth Management Information System, an assessment of agency logic models, and conversations with OCCF and program staff. Through this process, it was determined this outcome survey meet the criteria of “administer-ability” and began to capture key behavioral changes in the lives of runaway and homeless youth – changes programs will be able to showcase stakeholders and potential funding sources.

The survey captured information from the following domains;

- Housing status
- Level of family support
- Level of school engagement
- Employment status
- Risk-taking behavior
- Juvenile justice involvement
- Level of community attachment

Additionally, data was gathered at intake to program, at discharge, and six weeks post discharge. Collecting data across time, versus a point in time, provides the opportunity to detect changes in behavior. This information not only provides us with how the program impacted the

youth, but provides key indices to programs that can be used for program improvement. Because this data is gathered over time, levels required for statistical analysis are only now being met. Analysis was conducted on the RHY data from Benton County (a shelter program), which had been able to obtain all three time points of data. The following are the findings from that analysis.

Confirming previous other research, the majority of youth (72.9 percent) experienced some level of family conflict occurred prior to entering shelter, with the remainder arriving from a detention center (8.3 percent), homeless – on the streets (6.3 percent), living with relatives (4.2 percent), a residential drug and alcohol treatment program (4.2 percent), or living with friends (2.1 percent). Although some youth reported having graduated from high school (6.3 percent) or had obtained a General Education Degree (GED) (2.1 percent), a large proportion of youth (39.6 percent) were not enrolled in public education or an alternative education program upon entering shelter.

In the area of risk behavior, 46.7 percent of males and 53.3 percent of females had been sexually active in the six weeks prior to entering the program. Almost 27 percent of 13-15 year olds were sexually active, which is over 4 times higher than the rate of all 8th graders in Benton County (6.6 percentⁱⁱⁱ). More than 73 percent of 16 & 17 year olds were sexually active, reflecting a rate 3.4 times higher than all 11th graders in Benton County (21.3 percent^{iv}). This indicates the need to work with high risk youth to prevent hazards such as sexually transmitted diseases, pregnancy, and HIV/AIDS, all of which costs communities large amounts of money if such education is withheld.

Youth were asked to rate their perception of family support at entrance to the program (T1), at discharge from the program (T2), and six weeks post discharge (T3) on a scale of 1-10. A paired sample t-test was conducted to evaluate the impact of RHY services with youth and family on youths' perception of family support. Analysis indicates there was an increase in youths'

ⁱⁱⁱ For this survey, youth were asked if they had been sexually active over the past 6 weeks. The Oregon Healthy Teens Study asked if youth had been sexually active over the past 3 months.

^{iv} For this survey, youth were asked if they had been sexually active over the past 6 weeks. The Oregon Healthy Teens Study asked if youth had been sexually active over the past 3 months.

perception of their family support approaching significance from T1 to T2 with a moderate effect, a statistically significant improvement from T2-T3 with a moderate effect, and overall statistically significant improvement from T1-T3 with a large effect^v (see Table 5 below for statistics).

Table 5: Statistics

Time	Mean	Std. Deviation	t	df	Sig.	Eta ²
T1 – T2	-.3170	1.3228	-1.643	46	.107	.06
T2 – T3	-.7900	2.2949	-2.177	39	.036	.11
T1 – T3	-1.1125	2.4820	-2.835	39	.007	.17

Discussion

Aside from abuse and neglect, research suggests family conflict is the chief reason youth run away from home⁴. Therefore, working to resolve that conflict not only assists youth in exiting to a safe home when they leave the program, but will then positively impact the likelihood of the youth staying home and potentially promoting the adoption of additional healthy behaviors and a rejection of risk taking activities. In a review of federal studies on effective family intervention programs designed to prevent adolescent delinquency, University of Utah researchers Karol Kumpfer and Rose Alvarado state, “a positive family environment...is the major reason youth do not engage in delinquent or unhealthy behaviors.”⁵ Additionally, in their study on the effects of parental monitoring and support (two distinct constructs) on risk behaviors, researchers Jennifer Parker and Mark Benson found the parental support was associated with a reduction in *every* risk factor they assessed. Furthermore, they stated that, “Adolescents who perceived their parents as supportive were more likely to have less delinquency, school misconduct, drug, and alcohol abuse.”⁶ Moreover, the national research center Child Trends find these positive attributes persist even for families considered low-income.⁷ The findings from this analysis suggest services provided by this RHY provider, which includes working with both youth and families to ameliorate the conflict that resulted in the youth leaving home, can positively impact youth’s perception of family support, which is the first step in acquiring the positive outcomes other studies suggest.

^v Cohen’s (1988) guidelines for magnitude of effect (Eta²); .01=small, .06=moderate, and .14 and above = large.

The scientific literature suggests that youth who access this type of shelter program are often first-time runners who still have some level of emotional attachment to their families. The high incidence of youth in the study whose prior living arrangement was their family (72.9 percent) helps explain the success of this particular program with their clientele. It further implies, as the literature does, youth who have engaged with the street culture rarely utilize this level of service and require directed interventions such as street outreach programs or drop-in centers.

Additionally, this is a promising example of outcomes tracking. Because there are no evidenced-based-practices for working specifically with runaway and homeless youth, the ability to capture meaningful outcomes associated with program services is critical. The RHY Rollout Sites provide an array of services (e.g., shelters, host homes, case management only, street outreach only, etc). As such, tailored adjustments to the survey are required. However, because of the work done to date, the foundation has been established to gather similar outcomes over time for all Rollout Sites which receive ongoing investment.

¹ Thompson, S.J., Pollio, D.E., & Bitner, L. (2000). Outcomes for Adolescents Using Runaway and Homeless Youth Services. *Journal of Behavior in the Social Environment*. 3(1), 79-97.

² Thompson, S.J., Pollio, D.E., Constantine, J., Reid, D. & Nebbitt, V. (2002). Short-term Outcomes for Youth Receiving Runaway and Homeless Shelter Services. *Social Work Practice*. 12(5), 589-603.

³ Pollio, D.E., Thompson, S.J., Tobias, L., Reid, D., & Spitznagel, E. (2006). Longitudinal Outcomes for Youth Receiving Runaway/Homeless Shelter Services. *Journal of Youth and Adolescence*. 35(5), 859-866.

⁴ National Alliance to End Homelessness (NAEH) (2007). *Fact Checker: Accurate Statistics on Homelessness*. Retrieved on October 21, 2008 from http://www.endhomelessness.org/files/1659_file_10606_NAEH_YouthHomelessness_4_.pdf.

⁵ Kumpfer, K.L. & Alvarado, R. (2003). Family-strengthening approaches for the prevention of youth problem behaviors. *American Psychologist*. 58(6/7), p 457.

⁶ Parker, J.S. & Benson, M.J. (2004). Parent-adolescent relations and adolescent functioning: Self-esteem, substance abuse, and delinquency. *Adolescence*. 39(155), p 527

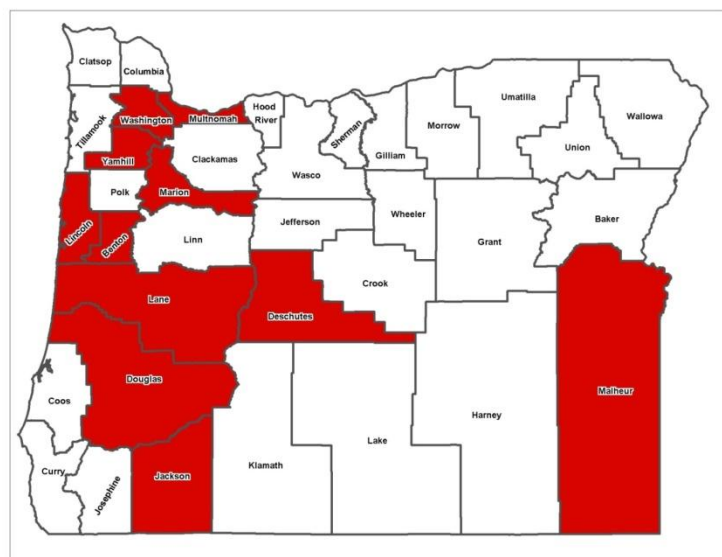
⁷ Moore, K.A., Whitney, C., & Kinukawa, A. (2009). Exploring the links between family strengths and adolescent outcomes. *Child Trends Research Brief*. Publication #2009-20.

NEED FOR FUTURE RESEARCH

Combined with Federal funding, the current investments made by the state of Oregon in runaway and homeless youth has made great strides in building a statewide system of care for these vulnerable youth (see Figure 3). Yet there are 12 more counties who have identified services for these youth as a need and 12 counties who submitted proposals for Oregon funding but were not funded because of the limited money.

Moreover, the literature is missing the answers to key questions about this population. Questions such as, how many youth are associated with each of the above types of RHY? Is there a predominate group that makes up the overall RHY population? Which practices are most effective for each type of youth? Certainly, much more work needs to be done to fully understand this population.

Figure 3: Current RHY System of Care





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