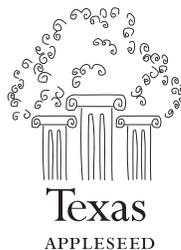


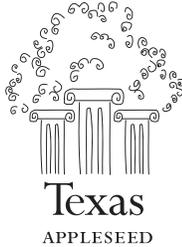


Young, Alone, and Homeless in the Lone Star State

Policy Solutions to End Youth Homelessness in Texas



TNOYS
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YOUTH SERVICES



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Texas Appleseed Mission

Texas Appleseed's mission is to promote social and economic justice for all Texans by leveraging the skills and resources of volunteer lawyers and other professionals to identify practical solutions to difficult systemic problems.



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Texas Network of Youth Services Mission

The mission of TNOYS is to strengthen, support, and protect critical services for Texas youth and their families in order to ensure their success.

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Additional Publications

If you find this publication of interest, please be sure to check out these additional publications:

Texas Homeless Youth Handbook

<http://homelessyouthtexas.bakermckenzie.com/>



Understanding Youth Rights: Helping Providers Navigate the Laws and Policies Affecting Unaccompanied Homeless Youth

http://tnoys.org/wp-content/uploads/Youth-Rights-Guide_New-Version-2.pdf



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“The mental struggle that kids like me endure is not cliché. It is not something you can be taught. People’s thought processes are exclusive to their struggle. Since you are not that person. Since you have not endured what they have endured, you will not be able to understand where they come from. Even if they explain themselves to you, you will never be able to fully understand where they are coming from. When they get in those situations or those fits of rage, fits of depression, when they feel like no one can help and they’re just out...All you have to do is be considerate to the possibility that this could happen to me...Once you open up that part of you, you are better received by us.”

–C.F., Houston youth

Introduction

Texas Appleseed became interested in systemic problems that fuel youth homelessness as a result of its work on other child- and youth-focused projects. We frequently saw children and young people whose juvenile justice involvement or problems at school were the result of homelessness or housing instability. We met former foster youth who reported that they were inadequately prepared for adulthood when they aged out and, consequently, ended up on the streets for some period of time. And our fair housing work has revealed to us the difficulties that communities and families across the state struggle with caused by the lack of affordable and safe housing.

Our interest led to a partnership with the Texas Network of Youth Services (TNOYS), an organization that also has a long history of advocating for young people in Texas. Their membership of service providers and partnership with the state on *Youth Count Texas!*, a statewide look at youth homelessness mandated by the 84th Texas Legislature, make them experts in the issue.

In the summer of 2016, Texas Appleseed and TNOYS began our research for this report, assisted by pro bono partners **Vinson & Elkins LLP**. Our research included:

- Over 100 interviews with young people who had experienced or were experiencing homelessness in Texas.
- More than 50 interviews conducted by Vinson & Elkins' team of pro bono volunteers with school homeless liaisons, juvenile justice stakeholders, members of law enforcement, foster care stakeholders, and service providers.
- Data requests to Texas agencies that serve youth or touch on issues related to youth homelessness.
- Research around existing programs and best practices.

What we discovered over the course of this research is that the issue of youth homelessness is one that is called by different names depending on the system the youth touches. If a Texas youth is on the street, is picked up by law enforcement, and is under the age of 17, she is a “runaway,” a status offender who is referred to the juvenile justice system for rehabilitation. If the youth instead appears in a shelter and the shelter contacts the child welfare system, she may be deemed a victim of abuse or neglect and placed in the foster care system for protection. Thus the same youth, depending on which system she encounters first, is either a victim or an offender.

If a young person is not living on the street but is “doubled up” and living with friends or relatives, whether or not she is deemed homeless depends on which system of services she tries to access. Her school would count her as homeless, entitling her to educational services and protections, but the community organization her school might refer her to for services may not, making her ineligible for their help. The same youth is in one setting “homeless” and in another is not.

This is perhaps one of the clearest findings from the hours of interviews, data analysis, and exhaustive research flowing from this report: A disjointed policy and funding approach to youth who are without a home results in disjointed services. Reducing or resolving the issue of youth homelessness and improving outcomes for young people is going to require a cohesive approach that brings all child-serving systems together to provide a full continuum of services.

Finding solutions is critical. Research shows that young people who encounter homelessness are at high risk of poor outcomes, including:

- Educational failure. Youth experiencing homelessness are more likely to be retained a grade or drop out altogether.
- Juvenile or criminal justice contact. Criminalization of homelessness and survival behavior may lead to justice system contact, which heightens the risk for ongoing homelessness.
- Victimization. Youth experiencing homelessness are at high risk for becoming victims of crime, including human trafficking.
- Health and mental health problems.

The goal of this report is to identify multi-system policy solutions that could prevent youth homelessness or provide better interventions to ensure youth who encounter homelessness get back on their feet quickly. We hope to shed light on what C.F. asked us to consider: how policymakers and stakeholders, understanding the reality that homelessness could happen to any one of us, can better open ourselves to compassionate, caring responses that are not only better for young people but better for our communities as a whole.

Frequently Asked Questions Related to Youth Homelessness

Texas policymakers are just beginning to grapple with the issue of youth homelessness. Though federal legislation passed in the 1970s and 1980s created a framework for federal initiatives and funding, it wasn't until schools began collecting and reporting reliable data that Texans began to get a more complete sense of the number of young people in the state who experience homelessness or housing instability.

“[T]he general population, unfortunately, hasn't been...educated to the fact that homeless youth do exist. They are usually hidden. They are very good at hiding. So you may not see them, but they are out there.”

—North Texas service provider

There are a number of frequent questions that come up about young people who experience homelessness in Texas and nationally. This chapter focuses on those questions as a starting point for this report.

FAQ #1: How many homeless young people are there in Texas?

Unfortunately, there is no single data source that comprehensively and accurately documents the number of “unaccompanied” youth experiencing homelessness in Texas—a youth who is not living with his/her parent or guardian. We instead look to a number of different indicators to give us some sense of the scope of the problem and the age of youth affected. For purposes of this report, we rely on several data sources:

- Data from the Texas Education Agency regarding the number of accompanied and unaccompanied homeless students attending public schools in the state.
- Data from the Texas Department of Public Safety (DPS) related to the number of young people reported missing to law enforcement each year;
- Data from DPS and the Texas Juvenile Justice Department regarding the number of children and young people who are arrested or referred to juvenile probation for running away;
- Data from the Department of Family and Protective Services related to parents who refuse to accept parental responsibility for a young person or for youth who run away from a foster care placement;¹ and
- Data from *Youth Count Texas!*, the study that included a point-in-time count of youth experiencing homelessness as well as analysis of some of the data sets mentioned above, conducted pursuant to a bill passed by the Texas Legislature in 2015.

While these sources give us glimpses of the problem, they are not comprehensive. For example, while there are approximately **16,000 unaccompanied homeless students** attending Texas public schools, we know the dropout rate is higher for youth experiencing homelessness, and homeless liaisons report difficulty identifying homeless students. Nor does that number include youth who may have become homeless after graduating from high school, as was the case for many of the former foster youth we met. Thus, even this is likely to be an undercount of the number of young people who are unstably housed or unhoused. Similarly, though DPS reports arresting around **6,500** young people for running away, **more than 45,000** young people are reported missing in Texas every year, and not all young people who are without housing come into contact with law enforcement. **More than 1,000** youth are reported as having run away from a foster care placement in 2016—but DFPS acknowledges problems with their own data. And while a point-in-time count is an excellent source of information about youth experiencing homelessness, it is a poor means of quantifying the extent of the problem due to the transient nature of this population, among other variables.

“Just because we’re in an upper-class neighborhood doesn’t mean there are no homeless. You just don’t see them. Either the cops take them in for the night to the county prison or they find a friend’s house to sleep at. But they’re still homeless. It occurred to me, especially when I was looking for places, that there’s nowhere for me to go in this area. There’s literally nothing out here to help homeless people because they want to ignore it. They want to say because we’re an upper-class neighborhood we don’t have it.”

–K.S., Dallas youth

¹ Texas Network of Youth Services sent an open records request and related payment to DFPS for data in July 2016. As of October 2017, the agency still had not fulfilled the request or provided information indicating when it would be fulfilled. We instead rely on the agency’s own reports and secondary sources that report DFPS data.

FAQ #2: At what age are young people in Texas encountering homelessness and housing instability?

Data from TEA shows that even young children experience homelessness. However, young children generally experience homelessness when their families lose their housing; these children are “accompanied” by an adult or guardian. While younger students are represented in the number of unaccompanied homeless students, the number of unaccompanied homeless students jumps dramatically between 8th and 9th grades, according to TEA data.²

Similarly, data on runaways indicates that children as young as 10 are arrested or referred to juvenile probation for running away—and therefore likely experience some period of time “on the streets” before being picked up by law enforcement or referred to juvenile probation. However, the runaway numbers increase dramatically beginning at about age 13. These numbers are consistent with those reported by DFPS regarding children and youth who ran away from foster care: While DFPS reports children as young as 12 ran away from a placement in 2016, the majority were between the ages of 15 and 17.³

Other data sources document a high percentage of youth encountering homelessness after turning 18. For example, just under 50 percent of youth who participated in *Youth Count Texas!* were between the ages of 19 and 24.⁴ Almost 29 percent were between the ages of 13 and 18.⁵

“Older youth, 18 to 21, they’re not afraid of going home. They’re adults. Most of them are pretty savvy and know that at 17, you’re not considered a runaway in Texas, and they cannot make you go home. When they come to us for these other services, the 18- to 21-year-olds, there’s no fear. They will divulge any information requested in order to get them into the program. It’s the ones under 18 that are very tight-lipped.”

—Central Texas service provider

FAQ #3: Why aren’t these kids in foster care?

If a child is under the age of 18 and homeless, and they come to the attention of an adult, particularly an educator or service provider, the adult has an obligation to alert Child Protective Services (CPS) to the child’s homelessness within a certain period of time.

This drives young people to hide—either because they have already had a bad experience with foster care or because they have heard about bad experiences that others have had. Texas’ foster care system has been in crisis for years, with problems making newspaper headlines on a regular basis. If a youth has not already had a bad experience in care, they may be afraid of identifying themselves as homeless because they are aware of the problems that exist with the system.

² The very young children who were listed as “unaccompanied” in the TEA data were likely foster youth awaiting placements.

³ TEX. DEP’T OF FAMILY AND PROTECTIVE SERVICES (DFPS), ANNUAL RUNAWAY AND HUMAN TRAFFICKING REPORT, FISCAL YEAR 2016 7 (2017).

⁴ SARAH C. NARENDORF, YOUTH HOMELESSNESS IN TEXAS: A REPORT TO FULFILL THE REQUIREMENTS OF HOUSE BILL 679 26 (2016).

⁵ *Id.*

We also heard from young people that we interviewed and from service providers that older youth are not considered a priority population for CPS. So even if they are reported to CPS, they may not be taken into care.

“Seventeen-year-olds are in no man’s land, and it’s really frustrating. At that point, police don’t have to return them to a guardian if they’re a runaway. CPS is also usually hesitant to get involved with a 17-year-old. But they can’t sign a lease and they can’t go into adult shelters. So I feel really stuck when we get a 17-year-old.”

–Austin service provider

“I’ve called CPS a few times on a 15-year-old being beaten, and they’ve followed up on it. But because they’ve got so much to do with the young ones, unless those teens are in major abusive situations, there’s just not a lot of action taken. Which I hate to say, but that’s just the reality—they’re going to focus on getting a 5-year-old placed before they are a 16-year-old male.”

–North Texas service provider

“You see a lot of young people who just float around between 17 and 18. If they choose to run away from foster care at the age of 17, they’re marked as a runaway, and CPS really doesn’t put a whole lot of energy into finding them. And so then for a year, they’re homeless and they have no options. There’s no program that can take them and so it’s only once they turn 18 that we help. So that’s a huge obstacle for minors: just being willing to identify yourself because a lot of these programs will try to re-unify them with their families if they ran away or will report them to the foster care system, which they don’t want to do.”

–Dallas service provider

FAQ #4: Why don't these kids just go to a shelter?

Few shelters exist for young people under age 18, but those that do require a parent to consent to their child staying at the shelter. Even when a parent consents, funding constraints may limit the amount of time that a minor can stay in an emergency shelter without being in CPS custody. Safety concerns keep young adults from utilizing the adult shelters, a problem that service providers confirm. Older youth report feeling safer on the street than in adult shelters.

"The last place you want a vulnerable teenager is in one of those [adult] shelters. You might as well paint a bull's eye on the kid's back and shove them through the front door."

**-Homeless liaison at a
Texas school district**

"I stayed in a shelter one time. I really don't like shelters. My first shelter experience...was like a 7th realm of hell. It was just so crazy...I was so scared, and after two or three days I said I would never do it again."

-D.T., Houston youth

"Most of our youth will not go to the adult shelters. If they have...not all of them have been victimized, but they definitely feel at risk in that situation. That means they're just staying on the streets."

-Austin service provider

FAQ #5: Why does this report include young adults in the definition of homeless youth?

The needs, experiences, and policy failures that push young people into homelessness and housing instability tend to differ from those of older adults. And brain science tells us that lumping older youth in with adults ignores developmental differences between an 18-year-old and a 25-year-old. For this reason, rather than focusing solely on children and young people under age 18, advocates and policymakers include youth up to age 24 in discussions focused on youth homelessness.

This also mirrors expectations that we have for our own children: Parents rarely assume that 18-year-olds are truly ready to live completely independently. Instead, most young people continue to need support to help prepare them for adult life into their early 20s.

“[T]his is a really challenging time...There’s a lot of growth and a lot of learning that happens during that time. These are youth that are pretty profound and resilient and have gone through a lot. Homelessness can be very traumatic...Going to school or going to college, and at the same time not having a place to stay during the night while trying to handle and manage all of the ‘normal’ teenage and early 20-something life experiences, it’s just challenging...There are certainly some unique challenges that you face.”

–Austin advocate

FAQ #6: Are there really that many unaccompanied homeless young people in Texas? I don’t ever see them on the streets.

Most young people who are homeless in Texas and elsewhere don’t want to be seen. This is true for two reasons: First, there is a stigma associated with homelessness. Consequently, young people said that they worked hard to conceal their status as homeless, something that stakeholders we interviewed also confirmed.

Second, youth under the age of 18 who are without a permanent home fear the consequences of being discovered. Many of them fear being pulled into the foster care system—particularly if they, or other young people they know, have had bad experiences in the foster care system in the past. Others may fear being returned to an abusive home that they fled. This fear of being discovered often means they avoid places where they are most likely to encounter help—they work hard to be invisible.

The desire to avoid detection creates real barriers to connecting youth with available services and supports—this has to be considered when developing policy solutions to end youth homelessness.

“[In Collin County]...people do not believe we have a homeless issue with the youth. So much so that someone actually posted on our website after the homeless youth count came out...‘Where are the youth? I don’t believe that there’s youth because where are they? I don’t see any under the bridge.’ Fortunately, they’re not under the bridge. What they’re doing is they’re doing couch to couch...they may spend a night or two on the street, but then they’re able to get somewhere else.”

–North Texas service provider

“The under 18 population is a lot more hidden. I think a lot of that is fear of system involvement and shame. If they’re in school, they don’t want their peers to know what’s going on. So it’s very difficult for us to locate those youth.”

–Austin service provider

FAQ #7: What are the living situations for most homeless youth?

There are also misunderstandings about *where* youth experiencing homelessness are living. Often, when we think of homelessness, we think only of people who are unsheltered and living on the street. This misses the scope of the problem, since many who are homeless are in shelters, are living with friends or relatives temporarily (“couch surfing”), or are living in motels or hotels.

While a significant—and likely under-reported—number of youth are unsheltered, many without permanent housing are sheltered, but unstably housed, and at high risk of ending up on the streets. This contributes to the problems associated with identifying the true number of youth experiencing homelessness.

FAQ #8: Why do young people find themselves homeless or unstably housed?

This report will discuss the way that some systems operate to push young people into homelessness and will offer policy solutions. For example, former foster youth and young people who have had a brush with the law are at higher risk of homelessness. Recognizing this helps formulate better responses to youths’ needs that help avoid this risk.

Other research reveals the myriad reasons that young people may find themselves without permanent housing. According to the surveys youth completed for *Youth Count Texas!*, the most reported causes of youth homelessness were financial reasons. There were a variety of non-financial reasons:

- 19 percent reported “family-related” reasons
- 15 percent reported having been kicked out by family
- 10.5 percent reported foster care or CPS-related reasons
- Almost 8 percent reported having run away from home
- A little more than 7 percent reported having left to protect him or herself or a family member⁶

“All of the years that I’ve been here, I’ve heard, ‘Yeah but your clients don’t want housing. They chose to be homeless.’ That’s just completely false. It might be the best option that they have at this particular moment because they would rather be homeless than go back to an abusive household. On intake, 75 percent of our youth say that they really want to be in housing. Shelter is always a need that youth report when coming in.”

—Austin service provider

FAQ #9: Are some youth at higher risk of homelessness than others?

Yes. Data collected for this report, as well as other Texas-based studies, shows that young people of color and those with disabilities—particularly mental health problems—are overrepresented among youth experiencing homelessness. And while it is not clear that girls are overrepresented among youth experiencing homelessness as a whole, there are slightly more girls than boys arrested and referred to juvenile probation for running away.

Research has also shown that a high percentage of young people who become homeless identify as lesbian, gay, bisexual, transgender, or questioning (LGBTQ).⁷ Anecdotally, LGBTQ youth report that they are often forced out of their homes by unaccepting parents or guardians. Though only about 5 to 7 percent of the general youth population identify as LGBTQ, according to surveys completed by youth for *Youth Count Texas!*, 16.3 percent of youth who participated identified as LGBTQ.⁸ This is relatively consistent with another Texas-based study by a service provider that indicated that close to 15 percent of youth experiencing homelessness who had been clients identified as LGBTQ.⁹ However, national studies have reported up to 34 percent or more of youth experiencing homelessness identifying as LGBTQ, and stigma may prevent young people from self-identifying, particularly in the South.¹⁰

6 NARENDORF, *supra* note 4, at 29.

7 See NEST COLLABORATIVE TO PREVENT LGBTQ YOUTH HOMELESSNESS, STRATEGIC PLAN 10 (2015).

8 NARENDORF, *supra* note 4, at 26.

9 ELIZABETH A. SCHOENFELD & SUSAN MCDOWELL, VULNERABILITIES & OPPORTUNITIES: PROFILES OF FOSTER AND NON-FOSTER YOUTH SERVED BY LIFEWORKS (2016).

10 ADMIN. FOR CHILDREN & FAMILIES (ACF), STREET OUTREACH PROGRAM DATA COLLECTION STUDY FINAL REPORT 45 (2016); NEST COLLABORATIVE, *supra* note 7, at 10.

“We are seeing a huge population of [LGBTQ youth]...The majority of them are saying once they say they’re LGBTQ to their family, then they are being kicked out. It’s become such an epidemic that we’re finally going to pastors and saying please tell your congregation not to.”

–North Texas service provider

A high percentage of youth experiencing homelessness also report having a mental health problem. In fact, the youth who participated in *Youth Count Texas!* reported mental health problems more often than any other health condition. Almost 40 percent of youth indicated they struggled with mental illness, and close to 16 percent reported having post-traumatic stress disorder.¹¹ Of those who reported having a mental health issue, 20 percent reported that it kept them from holding a job.¹² This is consistent with other research, which similarly showed that youth experiencing homelessness struggled with depression and other mental health issues at high rates.¹³

FAQ #10: Why can’t we just get these youth into housing?

While housing was the resource that many service providers said was most needed, there are barriers to getting young people into housing that don’t exist for adults. If they are under 18, those barriers are legal—a minor cannot sign herself into a shelter, and landlords will not typically rent to them.

For those who are 18 or older, there may be other barriers—a criminal history of any kind can be a barrier to renting an apartment and may be a barrier to public housing. Affordable housing is in short supply throughout the state.

In addition, for this age group, housing is just one piece of the puzzle. Particularly for youth transitioning out of foster care, young people may not have the life skills needed to jump into living on their own in an apartment. They may not know how to go about applying for housing programs or how to find and lease an apartment. Many of them need a supportive adult who can assist them in gaining the life skills that would allow them to live on their own. For this reason, some of the models that work well to assist homeless adults—like rapid rehousing—might need to be re-tooled to work well for young people.

“Homelessness for young people is extremely hard. Most of them have been kicked out of their house. They’re off on their own but they have no idea how to survive out there. Not like people who have been working before. There are some people that do not let their kids work, so when they get kicked out they ask themselves, ‘What do I do now?’ I was always supported by my parents, and now I have nothing. It’s extremely hard to transition from your parents to this.”

–T.H., San Antonio youth

¹¹ NARENDORF, *supra* note 4, at 33.

¹² *Id.*

¹³ ACF, *supra* note 10, at 55–57.

“The 18 to 24 population, they have more control, but they don’t have access. They don’t know how to access a lot of things, they don’t have the life skills, and they don’t have the life experiences the older adults have had yet. They’re still learning. Many of them have never had to take care of a house so even when we get them into housing, they don’t think about needing to take the trash on what day and what time. They’ve never cooked a meal for themselves. Adjusting to sleeping in a bed when they’ve been sleeping on a sidewalk for a long time is its own challenge for them. The feeling of isolation and loneliness too. On the streets, you’re always around people, but you never feel 100 percent connected or safe. Then you’re in housing and feel isolated and unsure of how to go forward.”

–Austin service provider

Educational Outcomes for Accompanied & Unaccompanied Homeless Students

Introduction

Studies have shown that students who experience homelessness are at higher risk for poor educational outcomes, largely as a result of their frequent moves.¹⁴ Students who are homeless tend to have lower test scores and are more likely to repeat a grade or drop out.¹⁵ They are also at increased risk of being chronically absent, which is also a risk factor for dropping out and low academic achievement.¹⁶ As a result, both the federal government—through the McKinney-Vento Homeless Assistance Act (McKinney-Vento Act)—and the state of Texas have put measures in place to try to ensure that homeless students do not experience a disruption of their education as a result of being without permanent housing.

“It’s really, really hard. When I was going to school and back, it was really hard being homeless. Sometimes you don’t really have the best clothes, and people are making fun of you. People say, ‘ewww she’s wearing the same pants she wore last week.’ It’s just because you don’t have many clothes.”

—C.M., Houston youth

14 U.S. DEP’T OF EDUC., EDUCATION FOR HOMELESS CHILDREN AND YOUTHS PROGRAM NON-REGULATORY GUIDANCE 2 (2017).

15 URB. INST., HOMELESSNESS AND HOUSING INSTABILITY: THE IMPACT ON EDUCATION OUTCOMES (2014).

16 U.S. DEP’T OF EDUC., FACT SHEET: SUPPORTING THE SUCCESS OF HOMELESS CHILDREN AND YOUTHS (2016).

“I started walking around the neighborhood, and I was just crying thinking to myself what am I going to do? Now I’m homeless, and I’m 17. I’m supposed to be in school. That’s all that ran through my head—school, school, school.”

—C.J., Houston youth

Despite these efforts, our analysis of Texas Education Agency (TEA) data indicates that Texas students who experience homelessness, and particularly those students who are unaccompanied by an adult, struggle academically. The data analysis shows:

- The number of students identified by schools as homeless grew by about 12 percent between the 2012-2013 and 2014-2015 school years;¹⁷
- While urban areas have the highest *number* of students who are identified as homeless, many rural and suburban districts have high *rates* of homeless students; when rates are compared by region, Abilene, Amarillo, Victoria, Corpus Christi, and Midland were the five regions with the highest rates of student homelessness;
- Black students are overrepresented among students experiencing homelessness;
- Students with disabilities are slightly overrepresented among those experiencing homelessness; and
- Educational outcomes for students experiencing homelessness show the extent to which housing instability can affect student progress, particularly for unaccompanied students:
 - Unaccompanied youth are 5 times more likely to repeat a grade in middle school than other students, and 2½ times more likely to repeat a grade in high school.
 - Unaccompanied students are approximately 10 times more likely than non-homeless students to drop out of school.
 - Unaccompanied students are 2 times more likely than non-homeless students to be referred to in-school suspension, 2½ times more likely to be suspended out of school, and 5 times more likely to be referred to a Disciplinary Alternative Education Program (DAEP).
 - Homeless students with disabilities are at particularly high risk for these poor outcomes.

Schools are increasingly asked to shoulder the burden for providing services to youth for a range of needs. While they are asked to do a lot, schools were often cited by the youth we interviewed as a place where they enjoyed a sense of normalcy during periods of homelessness. Our review of both juvenile justice and educational data sets show that many students are still in school when they run away, and often stay in school even during bouts of homelessness. As such, schools are a critical resource for reaching and providing prevention and intervention services to young people who need them. But to do so effectively, they must be adequately resourced.

¹⁷ It is not clear whether this is because the number of youth experiencing homelessness is increasing. It may instead be that schools are simply doing a better job of identifying and reporting data regarding students experiencing homelessness.

“There are already so many stressors just being a teenager or a kid, and to throw the housing instability on top of it, it’s almost too much. They know they need to go to school regularly, but if you’re facing all of the regular things and you only have two outfits to wear and no way to wash either one of them, it’s just a feeling of hopelessness.”

–Homeless liaison at a Texas school district

Federal & State Statutory Framework

The McKinney-Vento Act, recently reauthorized as part of the Every Student Succeeds Act (ESSA), is intended to ensure that students don’t fall behind in school as a result of housing instability. The Act’s definition of homelessness is broader than definitions found in other laws and regulations, and includes not only youth who are living in shelters or on the streets, but also students who are “doubled up” with other family or friends, and those living in motels or hotels.¹⁸

The Act dictates that:

- homeless students may attend their school of origin or the school in the attendance area where the family resides even if they are in a shelter, motel, or other temporary housing;
- homeless students must be permitted to immediately enroll in school, even if they lack records traditionally required for enrollment, such as residency documents or immunization records;
- the school district must provide transportation to the homeless student’s school of origin (if requested, even if the student moves outside of the school’s zone of attendance or the school district’s boundaries); and
- homeless students must not be segregated from a school’s general population nor excluded from its typical programming.¹⁹

In order to ensure implementation, it also requires school districts and charter schools to designate homeless liaisons, tasked with identifying homeless students and facilitating their enrollment and attendance in education.²⁰

States are awarded formula grants by the U.S. Department of Education to implement McKinney-Vento Act provisions. For the 2015-2016 school year, Texas was awarded \$5.8 million in McKinney-Vento funding.²¹ The vast majority of these funds (86 percent) are administered to school districts by the Texas Education Agency (TEA) through a competitive sub-grant process carried out by the Region 10 Education Service

18 TEX. HOMELESS EDUC. OFFICE (THEO), THE MCKINNEY-VENTO ACT AT A GLANCE (2008), available at http://www.theotx.org/wp-content/uploads/2015/03/MV_At_Glance.pdf

19 *Id.*

20 See Tex. Educ. Agency (TEA), Education of Homeless Students, https://tea.texas.gov/Texas_Schools/Support_for_At-Risk_Schools_and_Students/Education_of_Homeless_Students/ (last visited October 7, 2017).

21 THEO, ANNUAL REPORT 2015-2016 3 (2016).

Center (Region 10 ESC).²² Each year, the Region 10 ESC awards sub-grants to approximately 130 Texas school districts,²³ or roughly 10 percent of the total school districts in the state. The remaining 14 percent of the funds are used for statewide activities.²⁴ These funds help to support The University of Texas at Austin's Charles A. Dana Center's Texas Homeless Education Office (THEO), which provides training and technical assistance services to school districts to support McKinney-Vento implementation.²⁵

Regardless of whether a school district is awarded federal funding, it must comply with McKinney-Vento Act provisions, leading many that we interviewed to refer to McKinney-Vento as an "unfunded mandate." While the grant funding awarded by Region 10 is the only funding directly tied to provisions of McKinney-Vento's mandated services, policy guidance from the Department of Education and provisions in the Every Student Succeeds Act (ESSA) specify that Title I funds, which are federal funds that are targeted for services for students from low-income families, should be used to support homeless students.²⁶ In fact, all school districts (and charter schools) receiving Title I, Part A, funds are required to set aside a portion of their Title I funds specifically for this purpose.²⁷ Schools that do not receive Title I funds for school-wide programs²⁸ are able to tap into the funds set aside by their district for students who need services related to homelessness, and even those schools that receive school-wide Title I funding can use set-aside funds for supplemental services.²⁹ Policy guidance from the Department of Education also specifies that Title I funds may be used by schools to meet McKinney-Vento requirements related to transportation or homeless liaisons.³⁰

While HUD does not play a role in funding or overseeing educational requirements for youth experiencing homelessness, it does require Continuum of Care (CoC) programs that receive funding for housing programs to demonstrate that they are collaborating with local education agencies.³¹ Among other things, HUD requires the CoC to show it is assisting in identification of homeless families, that it is informing these families and youth of their eligibility for McKinney-Vento education services, that it is considering the educational needs of children when families are placed in emergency or transitional housing, and that they are placing children as close as possible to their school of origin.³² They are also required to show that they are designating a staff person to ensure that children are enrolled in school and connected to appropriate services.³³ However, stakeholders report that a lack of oversight and technical assistance from HUD limits the impact of these requirements.

The Texas Education Code entitles students who are homeless to many of the same educational rights afforded by the federal McKinney-Vento Act in addition to other state-specific protections. For example, the Texas Education Code requires that a student's records be transferred to his or her new school (if applicable) within 10 working days.³⁴ It also requires TEA to develop procedures to provide partial

22 *Id.*

23 *Id.* at 5.

24 *Id.* at 3.

25 LEGISLATIVE BUDGET BD. (LBB), HOMELESS STUDENTS IN TEXAS PUBLIC SCHOOLS 2 (2016), available at http://www.lbb.state.tx.us/Documents/Publications/Issue_Briefs/3088_Homeless_Students.pdf

26 U.S. Dep't of Educ., Letter to Title I and Homeless Education Coordinators (August 14, 2015), available at <https://www2.ed.gov/programs/homeless/homelesscoord0815.pdf>

27 *Id.*

28 Schools in which children from low-income families make up at least 40 percent of enrolled students may use Title I funds for school-wide programs. U.S. Dep't of Educ., Improving Basic Programs Operated by Local Education Agencies (Title I, Part A), <https://www2.ed.gov/programs/titleiparta/index.html> (last visited October 7, 2017).

29 TEA, *supra* note 20.

30 See U.S. DEP'T OF EDUC., *supra* note 14, at 3.

31 NAT'L ASS'N. FOR THE EDUC. OF HOMELESS CHILDREN & YOUTH, NAEHCY SAMPLE HUD-LEA COLLABORATION POLICY, available at <http://www.naehcy.org/educational-resources/housing>

32 *Id.*

33 *Id.*

34 TEX. EDU. CODE § 25.007(b)(1)

credit for homeless students who change schools during the school year, as well as promote practices that facilitate access to extracurricular activities for homeless students.³⁵ A student who is homeless is also entitled to admission in any Texas school district: The Education Code also entitles a student who is homeless to admission regardless of their residence, or their parent or guardian's residence.³⁶ The state of Texas does not appropriate state funds specifically for educating homeless children and youth or meeting relevant requirements in state or federal statute.³⁷

"Educating is difficult when a child is hungry, or so tired they fall asleep in class, or can't focus because they are worried about hygiene."

–Homeless liaison at a Texas school district

"There are good supports when students are in school. But winter break and spring break? Nothing. And normally 30 to 45 days in summer. A homeless liaison will try to keep a homeless kid in summer school, but there is still a month or so of drop off, and what do they do?"

–Houston advocate

National & State Resources for Technical Assistance and Information

Both the federal and state government have centers devoted to providing information, resources, and technical assistance to districts and schools serving students experiencing homelessness.

National Center for Homeless Education (NCHE):

the U.S. Department of Education's technical assistance center, which provides resources and information to parents and educators. They also provide self-paced training materials and webinars on their website: <https://nche.ed.gov/>

Texas Homeless Education Office (THEO):

the federally funded state resource center, which provides resources, training, and technical assistance to parents and educators in Texas. Resources are available on their website: <http://www.theotx.org/>

National Association for the Education of Homeless Children and Youth (NAEHCY):

a nonprofit membership association dedicated to ensuring educational equity and excellence for students experiencing homelessness. NAEHCY provides policy and technical assistance to its members, and information and resources are available on its website: <http://www.naehcy.org/>

School House Connection: a national organization promoting success for children and youth experiencing homelessness, from birth through higher education. They engage in strategic advocacy and provide technical assistance in partnership with early care and education professionals (including school district homeless liaisons and state homeless education coordinators), young people, service providers, advocates, and local communities. Information and resources are available on its website: <https://www.schoolhouseconnection.org/>

35 TEX. EDU. CODE § 25.007(b)(3) & (4); 19 TAC §74.24, 74.26.

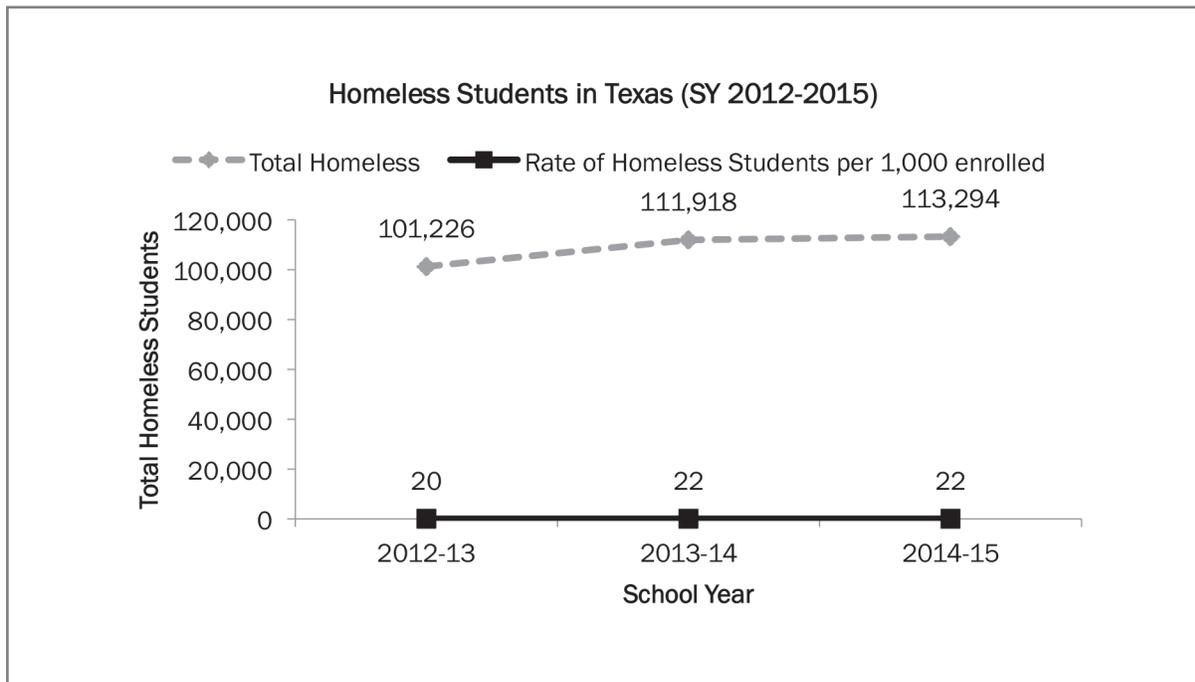
36 TEX. EDU. CODE § 25.001(b)(5).

37 LBB, *supra* note 25, at 2.

Number of Homeless Students in Texas

In the **2014-2015 school year**, the most recent year for which we have data, there were **more than 113,000 homeless students enrolled in Texas' public schools**.³⁸ Considering student population size, that amounts to about 22 homeless students per thousand students enrolled. *Almost 16,000 of these students, or approximately 14 percent, are unaccompanied by any adult.*³⁹

While the number of homeless students identified by Texas schools has increased, it is likely that much of that increase is simply the result of better identification by schools.⁴⁰ However, the increased identification means that schools are required to meet the needs of a higher number of students according to the provisions set out in McKinney-Vento and state law.

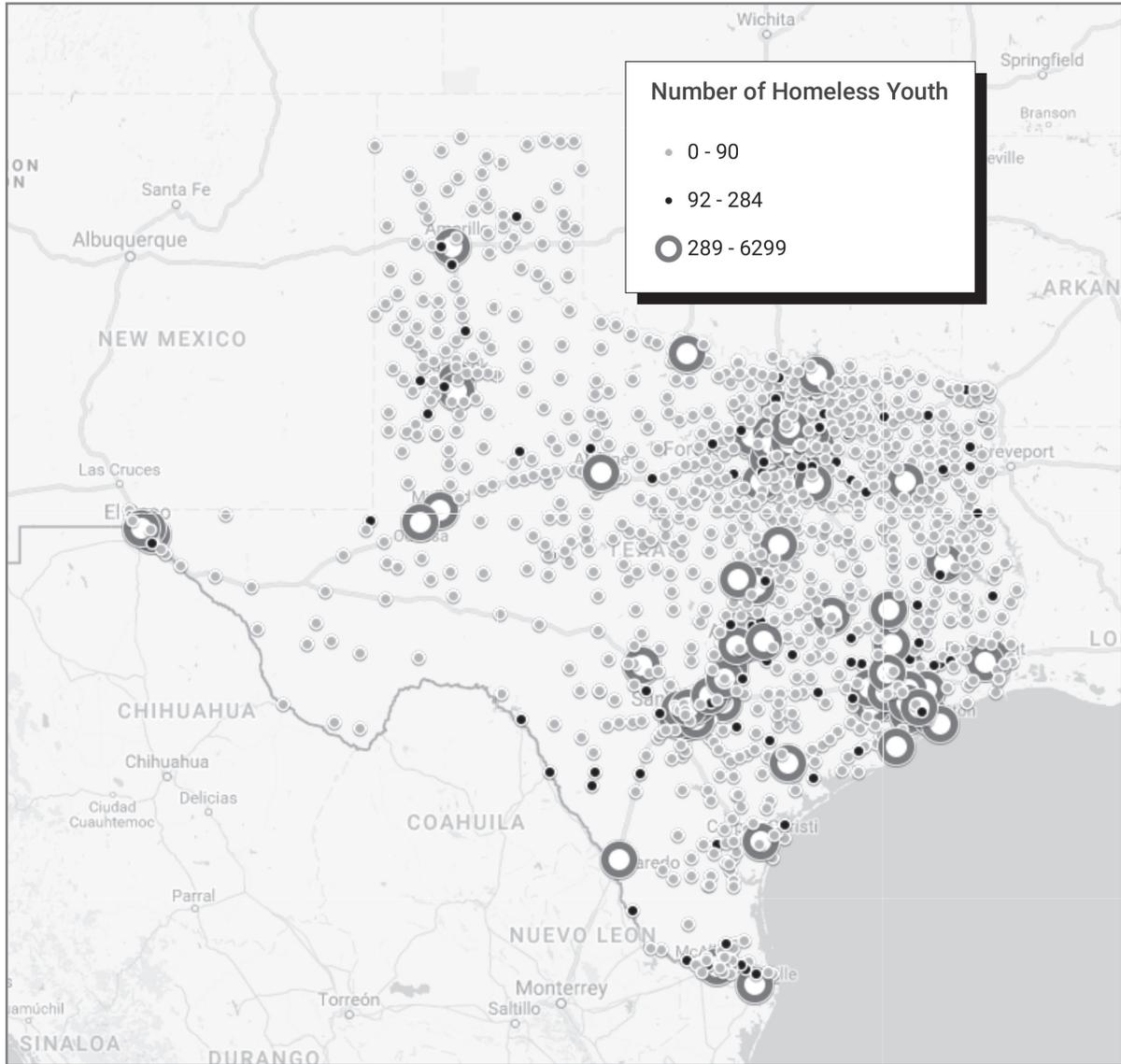


38 Data obtained by Texas Appleseed through open records request from THEO. Certified counts are completed and released through TEA with some lag time due to de-duplication of homeless students who enrolled in more than one school district in one school year.

39 *Id.*

40 THEO, *supra* note 21, APPENDIX E: THE COMPLETE TEXAS PICTURE: 2012-13, 2013-14, 2014-15, at 13-14.

Looking at this data spatially, homeless students appear to be concentrated in large metropolitan areas and in the northeastern and southeastern regions of the state, though there is also considerable variability in population size across regions. A link to an interactive version of this map is available in our online report.



When assessed by the total number of youth experiencing homelessness, Houston ISD, San Antonio ISD, and Dallas ISD had the highest count of homeless students, accounting for 12 percent of all homeless students statewide.

The 15 school districts with the highest count of homeless students in the state educate close to a third of all of Texas' homeless students.

**Top 15 Districts with the Highest Count of Homeless Students
(Accompanied & Unaccompanied), Ranked by Count (School Year 2014-2015)**

Rank	District	Count	District Enrollment
1	Houston ISD	5,937	230,720
2	San Antonio ISD	2,920	60,053
3	Dallas ISD	2,918	172,638
4	Austin ISD	2,486	90,181
5	Amarillo ISD	2,102	34,876
6	Corpus Christi ISD	2,101	41,306
7	Arlington ISD	1,922	69,856
8	Fort Worth ISD	1,916	93,039
9	Cypress-Fairbanks ISD	1,610	119,055
10	Pasadena ISD	1,575	58,884
11	Grand Prairie ISD	1,536	30,138
12	Alief ISD	1,531	51,349
13	Brownsville ISD	1,426	50,722
14	Galena Park ISD	1,390	23,944
15	McKinney ISD	1,362	25,860
Grand Total		32,732	

When you break out the number of *unaccompanied* homeless students, there is some overlap between districts with the highest count of students, but it is not complete.

**Top 15 Districts with the Highest Count of Unaccompanied Homeless Students,
Ranked by Count (School Year 2014-2015)**

Rank	District	Count	District Enrollment
1	Houston ISD	721	230,720
2	San Antonio ISD	537	60,053
3	Corpus Christi ISD	427	41,306
4	Brownsville ISD	415	50,722
5	Killeen ISD	275	47,450
6	Fort Worth ISD	250	93,039
7	Galena Park ISD	231	23,944
8	Clear Creek ISD	230	42,530
9	Pasadena ISD	226	58,884
10	Austin ISD	219	90,181
11	Abilene ISD	214	18,697
12	Cypress-Fairbanks ISD	214	119,055
13	Grand Prairie ISD	202	30,138
14	Arlington ISD	201	69,856
15	Garland ISD	192	60,853
Grand Total		4,564	

Note: Trinity Charter School was taken out of these analyses because they specifically serve youth living in shelters.

While many of these districts are located in urban centers, it is not necessarily the case that districts with high enrollments also have the highest numbers of unaccompanied homeless students. In fact, a glance at the list shows that several of the districts with the highest enrollment numbers do not appear, including Dallas ISD, the second largest district in the state.

“We make sure that campuses know about the needs that our unaccompanied youth have because they need that extra support when they don’t have family members. We have a lot of families that are living in homeless situations, but when the family unit stays intact, they can weather...storms pretty well. But our kids that are separated from their families—living with one friend a week, they need so much.”

**—Homeless liaison at a
Texas school district**

However, as is true of other data analyzed for this report, an analysis by rate shows that districts outside the state's urban centers, and districts that are not among those that have the highest enrollments, often have higher *rates* of students identified as homeless than the urban districts.

**Top 15 Districts with Highest Rate of Homeless Students
(Accompanied & Unaccompanied), Ranked by Rate (School Year 2014-2015)**

Rank	District	Count	District Enrollment	Homeless student rate per hundred enrolled
1	Hull-Daisetta ISD	100	474	21
2	Gustine ISD	34	169	20
3	Prairie Lea ISD	25	130	19
4	Iredell ISD	20	108	19
5	Two Dimensions Prep Academy	91	499	18
6	Damon ISD	32	185	17
7	Loraine ISD	25	145	17
8	Rule ISD	18	112	16
9	Sidney ISD	16	101	16
10	Lasara ISD	66	424	16
11	Santa Anna ISD	32	205	16
12	Hamlin ISD	54	352	15
13	Electra ISD	50	338	15
14	Tenaha ISD	67	467	14
15	Gorman ISD	32	227	14
Grand Total		662		

Note: Trinity Charter School was not included in these analyses since they specifically serve youth living in shelters.

By school district in 2015, Hull-Daisetta ISD and Gustine ISD had a particularly high proportion of homeless students considering their overall student enrollment.

While there is some overlap between districts with high rates of unaccompanied homeless students, there are many districts that have a high rate of unaccompanied students that do not have a high rate of homeless students overall.

**Top 15 Districts with Highest Rate of Unaccompanied Homeless Students,
Ranked by Rate (School Year 2014-2015)**

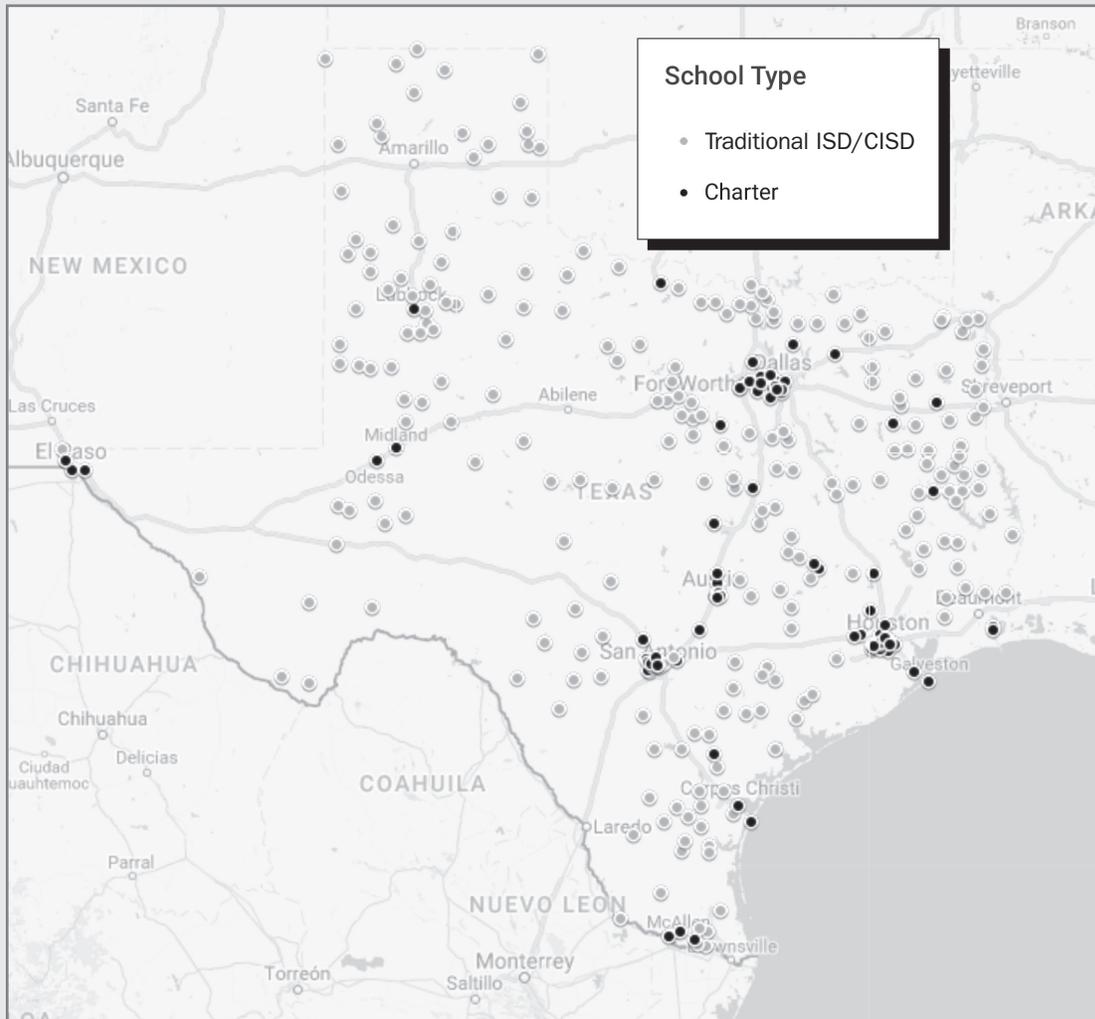
Rank	District	Count	District Enrollment	Homeless Student Rate per hundred enrolled
1	Hull-Daisetta ISD	50	474	11
2	Iredell ISD	11	108	10
3	Santa Anna ISD	18	205	9
4	Lueders-Avoca ISD	7	91	8
5	Brazos ISD	56	783	7
6	Loraine ISD	10	145	7
7	Cranfills Gap ISD	5	89	6
8	Saint Jo ISD	11	198	6
9	Rising Star ISD	7	137	5
10	Fruitvale ISD	17	345	5
11	Gorman ISD	10	227	4
12	Gustine ISD	7	169	4
13	Brookeland ISD	17	413	4
14	Kennard ISD	8	213	4
15	Pringle-Morse CISD	3	84	4
Grand Total		237		

Note: Trinity Charter School and University of Texas Charter School were not included in these analyses since they specifically serve youth living in shelters.

When assessed by region, in the 2014-2015 school year, Abilene, Amarillo, and Victoria had the highest rates of homeless students enrolled considering their overall total student enrollment.

Which districts struggle to identify homeless students?

Despite federal and state requirements related to identification of homeless students, during the 2014-2015 school year, **more than 25 percent of Texas districts** (335 of the 1,247 school districts) **reported no homeless students** in their student enrollment. While it is possible that many of these districts are not educating any homeless students, it seems unlikely that such a significant percentage do not have even a single student who falls within the McKinney-Vento definition that qualifies a student for assistance.



A map shows the location of these districts. While there appear to be clusters in the west and in the Panhandle, the districts are scattered throughout the state.

Though many of these districts are small, rural districts, some are very close to other small, rural districts that have high rates of homeless students given their size. Furthermore, a look at a chart breaking these districts out by size shows that almost half of the smallest school districts

in the state and well over half of districts with fewer than 1,000 students report having at least one homeless student. Some smaller districts may have unique challenges when it comes to identification of students experiencing homelessness or housing instability. **This follows a larger trend that exists beyond schools: Homelessness tends to be under-reported in rural communities.**⁴¹

A survey of homeless liaisons by TNOYS, discussed on page 38, which indicated that identification was particularly challenging, had a high percentage of participants from rural school districts.⁴² Many of these liaisons also reported not having enough time for their duties as the homeless liaisons.⁴³ This may be a problem for federal ESSA compliance, since ESSA requires that liaisons must be “able to carry out their duties.”⁴⁴ Guidance from the Department of Education specifies that local education agencies must allocate sufficient time for liaisons to do their jobs effectively.⁴⁵

A look by TEA Education Service Center regions shows the areas of the state where districts may struggle the most to identify students as homeless.

41 See Pew Charitable Trust, *Stalene: States Struggle with 'Hidden' Rural Homelessness* (June 26, 2015), available at <http://www.pewtrusts.org/en/research-and-analysis/blogs/stateline/2015/6/26/states-struggle-with-hidden-rural-homelessness>; NPR, *In Rural America, Homeless Population May Be Bigger Than You Think*, Feb. 18, 2016, available at <http://www.npr.org/2016/02/18/467217588/in-rural-america-homeless-population-may-be-bigger-than-you-think>; U.S. GOV'T ACCOUNTABILITY OFFICE, *RURAL HOMELESSNESS: BETTER COLLABORATION BY HHS AND HUD COULD IMPROVE DELIVERY OF SERVICES IN RURAL AREAS* (2010).

42 About 63 percent of the liaisons who participated in the survey identified their county as being rural. CHRISTINE GENDRON ET AL, *SUPPORTING STUDENTS EXPERIENCING HOMELESSNESS: INSIGHTS FROM A SURVEY OF HOMELESS LIAISONS IN TEXAS PUBLIC SCHOOLS* (TNOYS 2017), available at <http://tnoys.org/wp-content/uploads/Homeless-Liaison-Survey-Report-27Feb2017-1.pdf>

43 *Id.* at 6.

44 42 USC 11432(g)(1)(J)(ii).

45 U.S. DEP'T OF EDUC., *supra* note 14, at 15.

Top 15 Regions with the Highest Proportion of Districts Reporting No Homeless Students, Ranked by Rate (School Year 2014-2015)

Rank	Region (Region Number)	Districts Reporting No Homeless	Total Districts	Rate Reporting No Homeless*
1	Lubbock (17)	29	59	49%
2	Corpus Christi (2)	21	46	46%
3	Midland (18)	15	36	42%
4	Amarillo (16)	23	62	37%
5	El Paso (19)	7	19	37%
6	Wichita Falls (9)	13	38	34%
7	Edinburg (1)	14	44	32%
8	Kilgore (7)	32	103	31%
9	Victoria (3)	12	39	31%
10	Houston (4)	29	95	31%
11	Beaumont (5)	10	35	29%
12	San Antonio (20)	22	80	28%
13	Mount Pleasant (8)	12	47	26%
14	Fort Worth (11)	23	91	25%
15	Huntsville (6)	15	60	25%

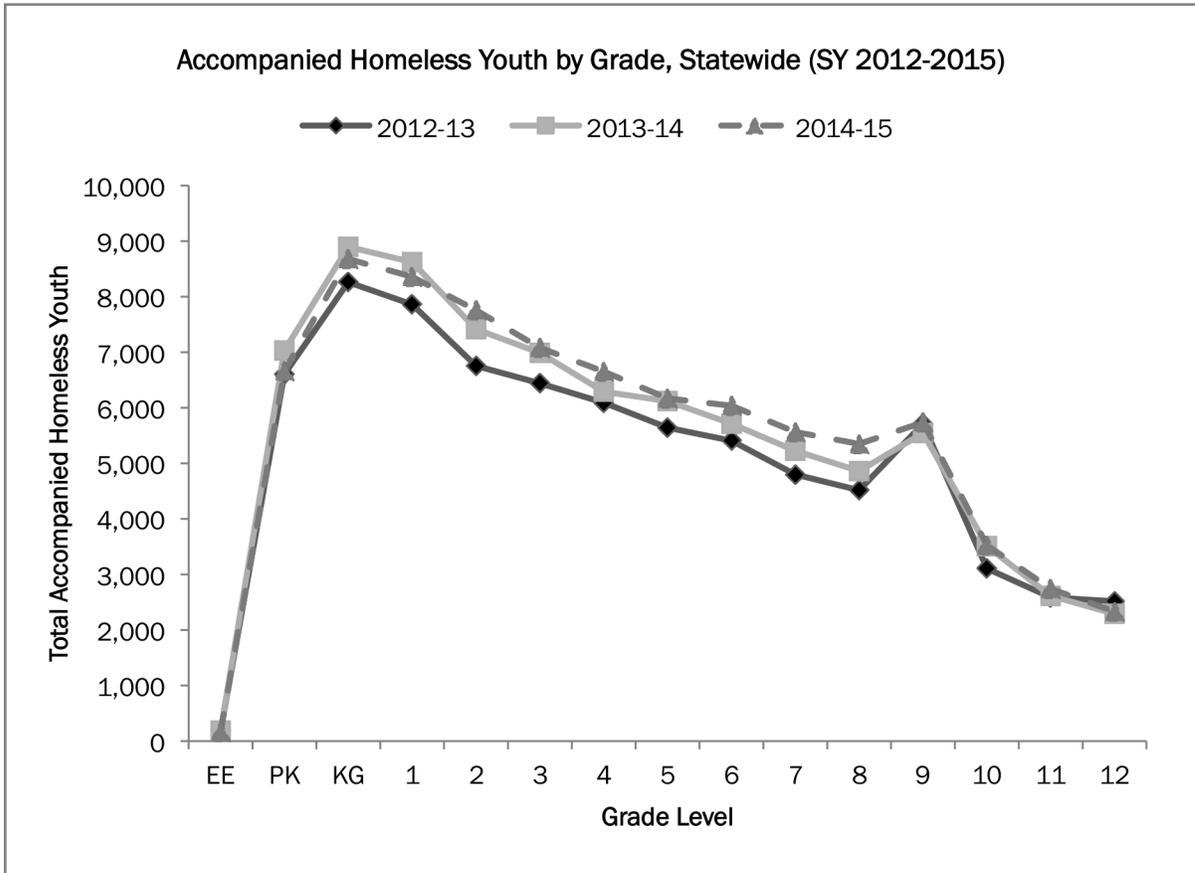
**Percentages calculated out of total districts for that region*

One of the barriers that may prevent homeless students from being identified is the failure to tie funding to identification. Once students are identified, services must be provided, according to federal law. In a report by the U.S. Government Accountability Office, the GAO found that schools have a disincentive for identifying homeless students due to the costs associated with meeting their needs.⁴⁶ Our interviews with homeless liaisons pointed to requirements surrounding transportation, in particular, as a problem. A current Texas homeless liaison explained, “I could deal with these other things if I didn’t have to spend so much time worrying about how we are going to pay for transportation. I think any liaison would say it’s a huge issue.”

46 U.S. GOV’T ACCOUNTABILITY OFFICE, EDUCATION OF HOMELESS STUDENTS IMPROVED PROGRAM OVERSIGHT NEEDED (2014).

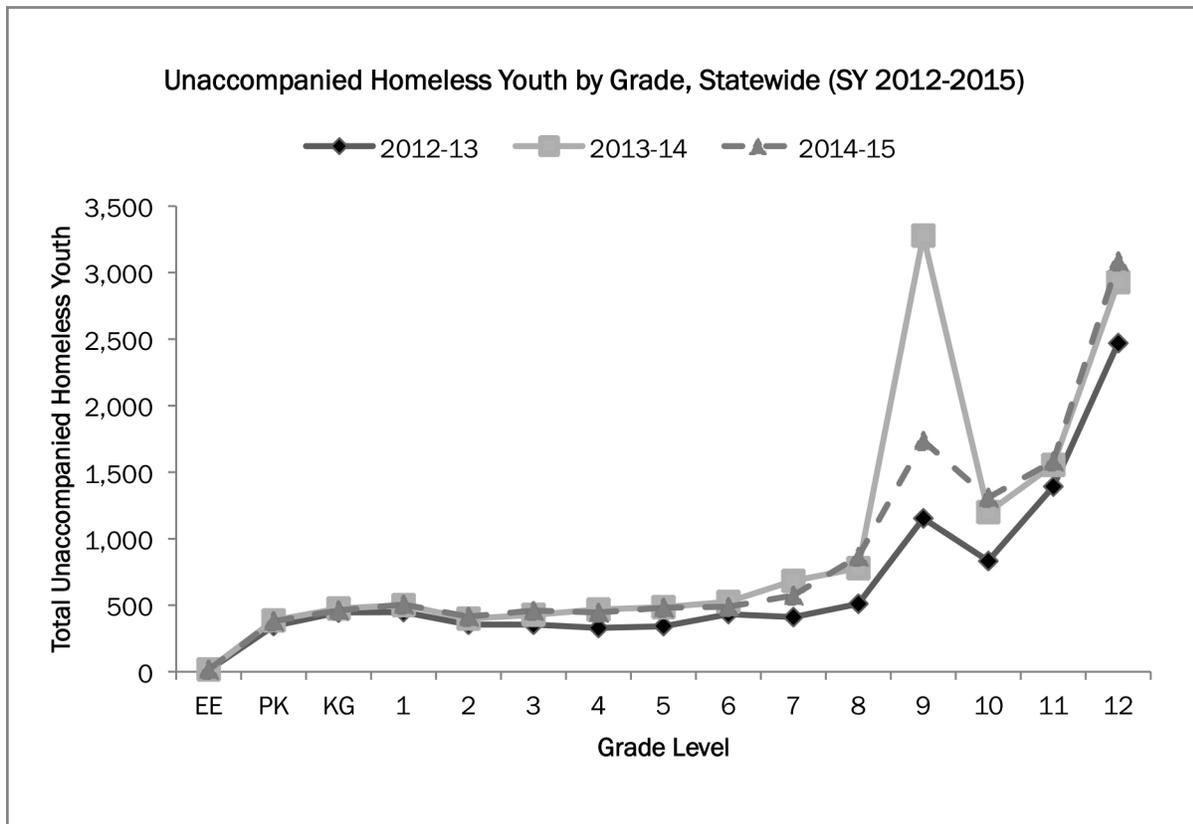
Grade, Race, Ethnicity, Gender & Special Education Status of Students Identified as Homeless

While even young students experience homelessness, TEA data shows that most of the younger homeless students are accompanied by an adult.



The number of identified accompanied students are highest in pre-kindergarten, then steadily decline, though there is a small spike again between 8th and 9th grades.

The trend for unaccompanied youth is opposite that of accompanied youth: The number of identified unaccompanied homeless students spikes in 9th grade, more than doubling. The number then drops in 10th grade, goes back up in 11th, and almost doubles between 11th and 12th.



While the spike in 9th grade and subsequent drop off may in part be explained by students dropping out, it may also be the result of differences in efforts to identify youth and their unwillingness to self-identify. One member of the Houston ISD homeless outreach team explained:

We know we have a lot of homeless unaccompanied youth, but they don't self-identify so we're still having difficulty identifying those [kids]. We know they're there, but we're not getting them so our numbers appear that most [homeless youth] are on the elementary level. But those are the kids whose parents are reaching out and saying, 'I'm homeless.' Our numbers at the middle school and high school level begin to taper off, but I don't think it's because they're not there. It's because they are not self-identifying. There's a stigma attached to homelessness...A lot of times these kids are on their own so they're not going to identify because they don't want to be picked up by CPS. They don't want any outside intervention.⁴⁷

Another homeless liaison spoke of the lack of capacity they had to carry out the identification process: "Another barrier for us in terms of identifying is just manpower. We're still calling as late as October for forms filled out at the beginning of the year. The immediate crisis, meaning families that have very little means, we tend to identify sooner."⁴⁸ Similar findings related to capacity emerged from the TNOYS survey of homeless liaisons. While a majority of liaisons (88 percent) said that they had enough time to meet the legal requirements of interacting with homeless students and their parents or guardians, a

⁴⁷ Interview on file with author.

⁴⁸ Interview on file with author.

smaller proportion (68 percent) said they had enough time to adequately perform their duties.⁴⁹ This means nearly one-third reported they do not have time to adequately perform their duties, and it suggests a stark disconnect between legal standards and existing need, which may be exacerbated by the nature of the homeless liaison position. Respondents also indicated they have little time to spend on their homeless liaison duties. For the overall sample, liaisons reported spending a median of just two hours per week serving homeless students.⁵⁰ When the sample was limited to respondents who indicated that they work directly with homeless students, the median number of hours reported increased to three hours per week.⁵¹

Part of the problem is that homeless liaison duties are only one component of these professions' occupational duties. Most respondents also reported serving at a district-wide level, and nearly 43 percent reported holding at least *three* separate job titles (with one particularly over-burdened respondent indicated that she had over 25 distinct job duties).⁵² Only 2 percent of respondents listed the word "homeless" as part of their primary job title. This issue aligns with general public sentiment that teachers and other school personnel are over-worked and over-stretched. According to a recent survey by the Texas State Teacher's Association, school personnel spend an average of 17 hours per week outside the classroom on work duties.⁵³ ESSA is aiming to change this with statutory language that liaisons must have the capacity to fulfill their duties.

These findings are at odds with stakeholders' perceptions of the importance of this role. One liaison noted that the schools may be the only place where youth experiencing homelessness are being counted—making school identification critical: "I am putting a lot of pressure on the city to create resources for a group of kids that they have no data on. It doesn't even show that they exist in our community because these aren't kids that are coming to the shelters. They're not showing up at the food pantry, yet they're here. So the best way for us to capture their existence is through the school district."⁵⁴ One service provider spoke of the districts as the "hub" for services for youth experiencing homelessness: "It really starts with the school districts. Our biggest platform is that the school districts have to understand that they are the hub. Because there's not many agencies in this area doing this work...providing services for homeless youth."⁵⁵

Black students are consistently overrepresented, compared to the student body as a whole, in those identified by schools as experiencing homelessness. Black students comprised 13 percent of the entire student body in Texas but were at least 24 percent of all homeless students in 2015.

49 GENDRON ET AL., *supra* note 42, at 6.

50 *Id.*

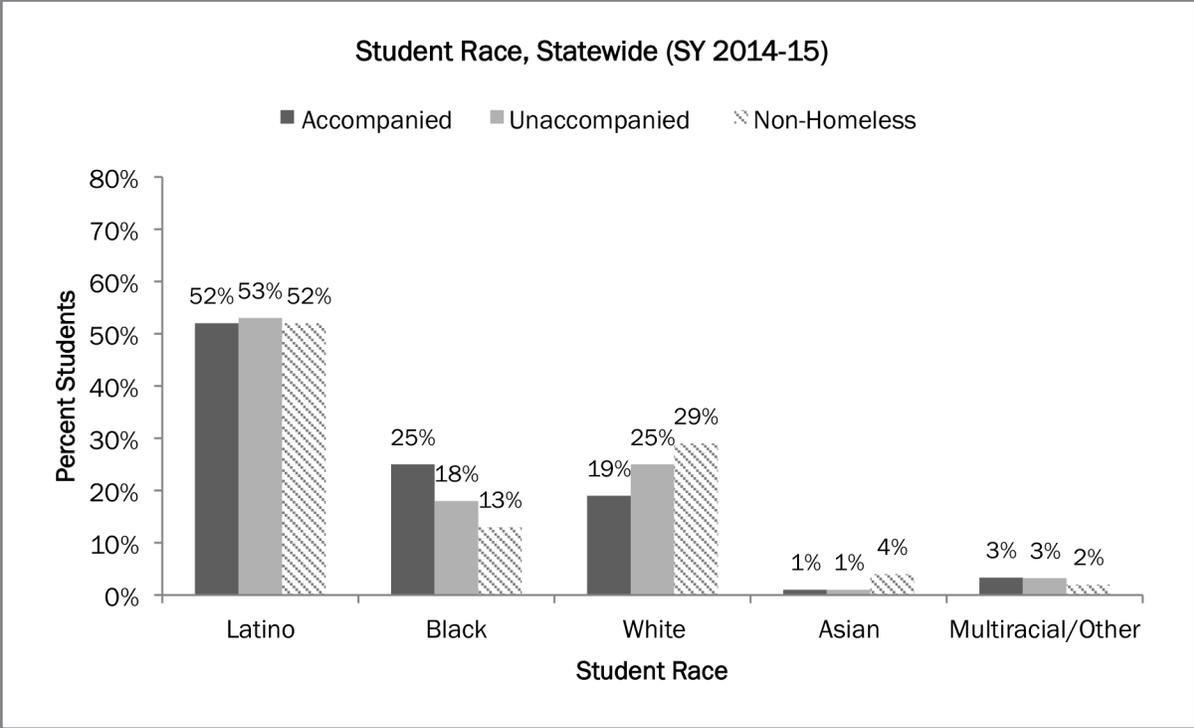
51 *Id.*

52 *Id.*

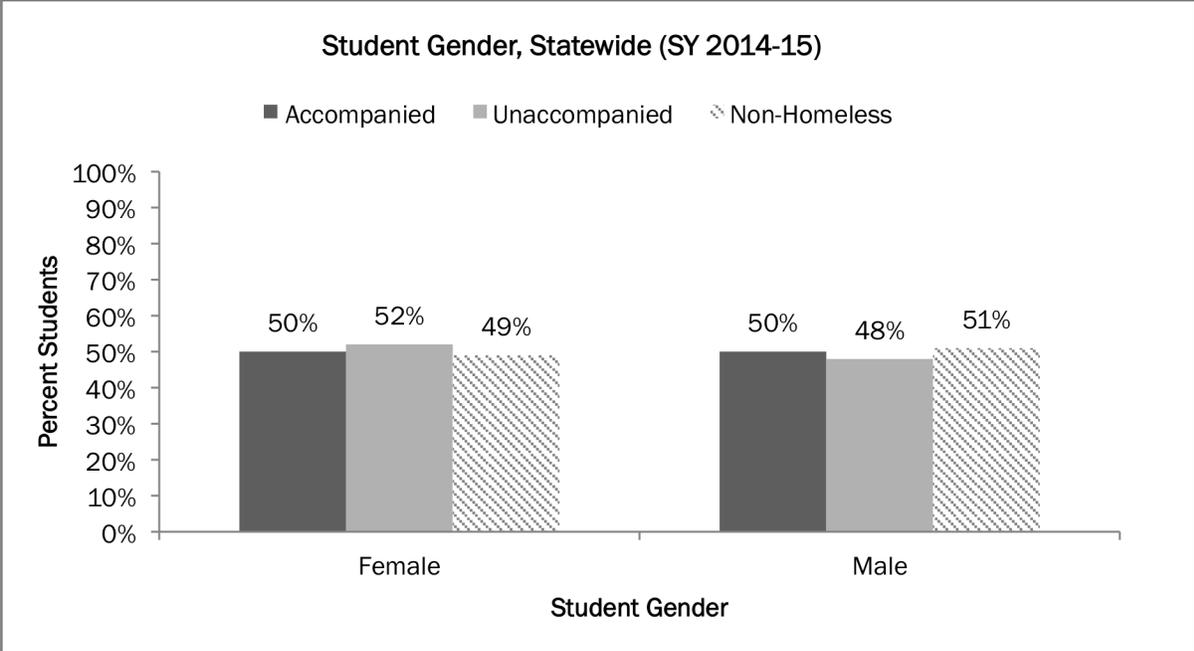
53 Press Release, Texas State Teacher's Association, Nearly one-third of teachers moonlight to support families (Aug. 25, 2016), available at http://tsta.org/sites/default/files/One-third_teachers_moonlight.pdf

54 Interview on file with author.

55 Interview on file with author.

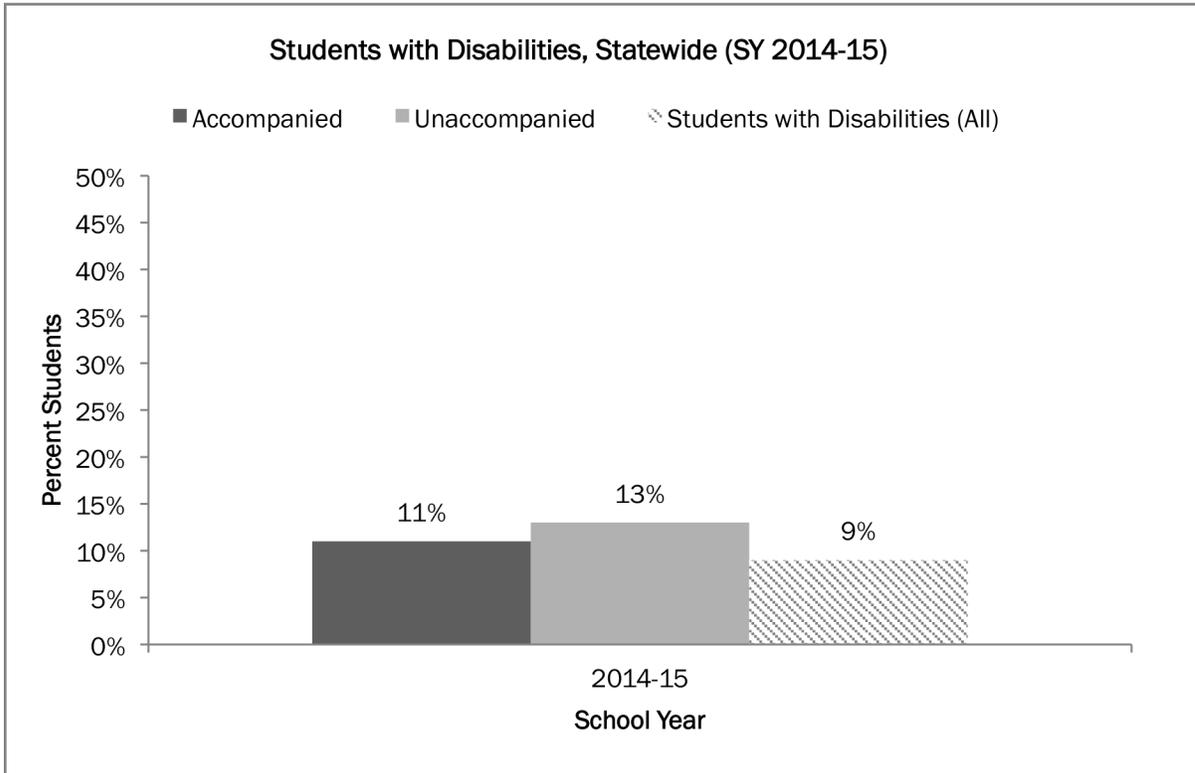


Male and female students are evenly represented in those identified by their schools as homeless; however, when accompanied and unaccompanied students are compared, slightly more unaccompanied students are female.⁵⁶



⁵⁶ During the 2014-15 school year, approximately 49 percent of the total enrolled students were female.

By special education status, students with disabilities may be slightly overrepresented in homelessness statewide.⁵⁷ In 2015, students with disabilities were at least 11 percent of all homeless students, though they made up only 9 percent of the student population overall. However, when you break the numbers out between unaccompanied and accompanied students, the disparity is higher for unaccompanied homeless students.



“My need [for special education] wasn’t exactly [for] educational reasons; it was behavioral. I had developed a fear of other people because of the things I went through. So they couldn’t really [put] me in a room full of people. I need more one-on-one.”

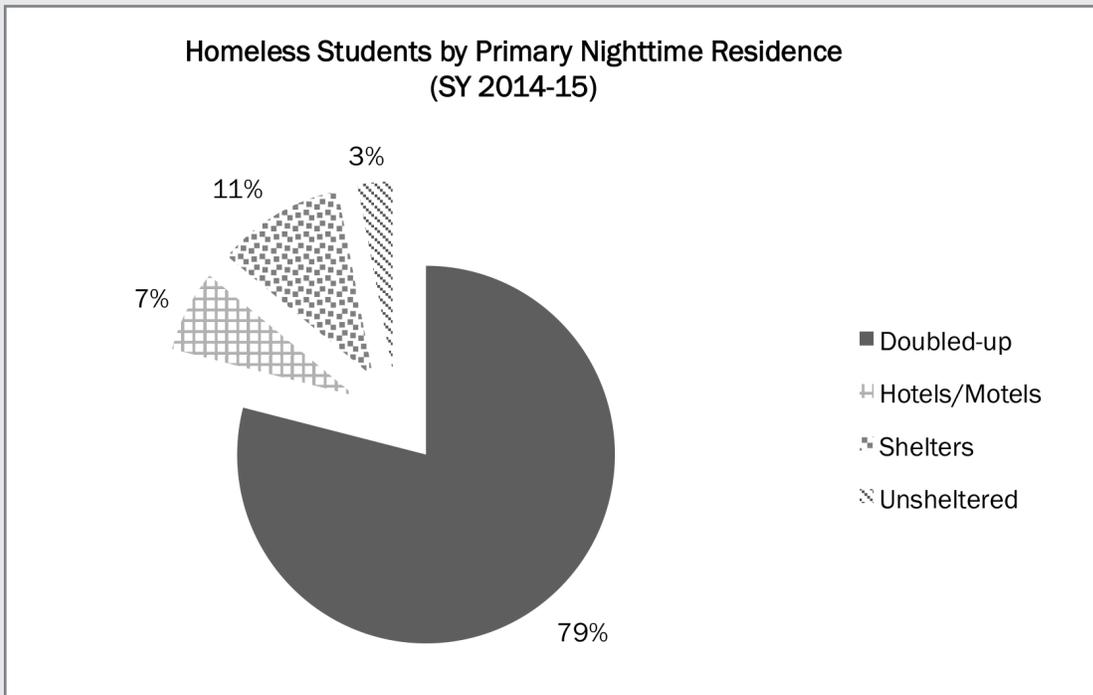
–R.G., Austin youth

⁵⁷ The difference between percentage of homeless students with disabilities (11%) and the percentage of students with disabilities overall (9%) may not be statistically significant.

Where are students identified by districts as homeless living?

As discussed, the definition of “homeless” for McKinney-Vento purposes includes those who are unstably housed,⁵⁸ as well as those who are living in shelters or on the streets. So where are the more than 113,000 students identified by Texas schools staying at night?

TEA data indicates that the majority of homeless students are “doubled up,” or sharing housing with others.⁵⁹ While these students are not living “on the street,” their living situation is considered precarious because they have no legal right to stay and can be forced to leave at any point.⁶⁰



Young people we interviewed spoke of stringing together arrangements like these until they simply ran out of friends or relatives who they could ask for shelter. One homeless liaison noted, “I had over 90 kids last year who were couch surfing. They’re unaccompanied and they’re at school unsure of where they are going to sleep that night. We are really looking for a solution in this community for those kids. We’ve got to figure out a safe solution. We’re seeing a lot of human trafficking and other stuff. These kids belong to this community. This is beyond the school district’s problem so I am making our community aware that we have to take care of our kids.”⁶¹

58 “Unstably housed” is a HUD term, since HUD does not consider those who are doubled up to be homeless; educators do not use this term because the McKinney-Vento definition includes those who are doubled up in its definition of homelessness.

59 THEO, *supra* note 21, at 2. Note that anything that does not fit into the “doubled up,” “hotels/motels,” or “shelters” categories are reported as “unsheltered,” including those living in substandard housing.

60 *Id.* at 17.

61 Interview on file with author.

The Charles A. Dana Center's Texas Homeless Education Office (THEO) points out that these numbers differ from district to district, principally reflecting the resources available in that community. In other words—if a community does not have a shelter, its numbers will differ from those communities that do. For this reason, THEO urges districts to make themselves familiar with the statistics for their district:

It is crucial for each Local Education Agency (LEA) to understand how the primary nighttime residential categories break down for their own homeless student population. Every LEA needs to keep track of this information in order to know how to address the needs of their homeless students. For example, it is important for an LEA to know that they have a large number of homeless students in hotels/motels or no students in shelters and most in doubled-up situations. Such information should be factored into all planning, from transportation infrastructure to physical plant decisions to Title I district improvement plans.⁶²

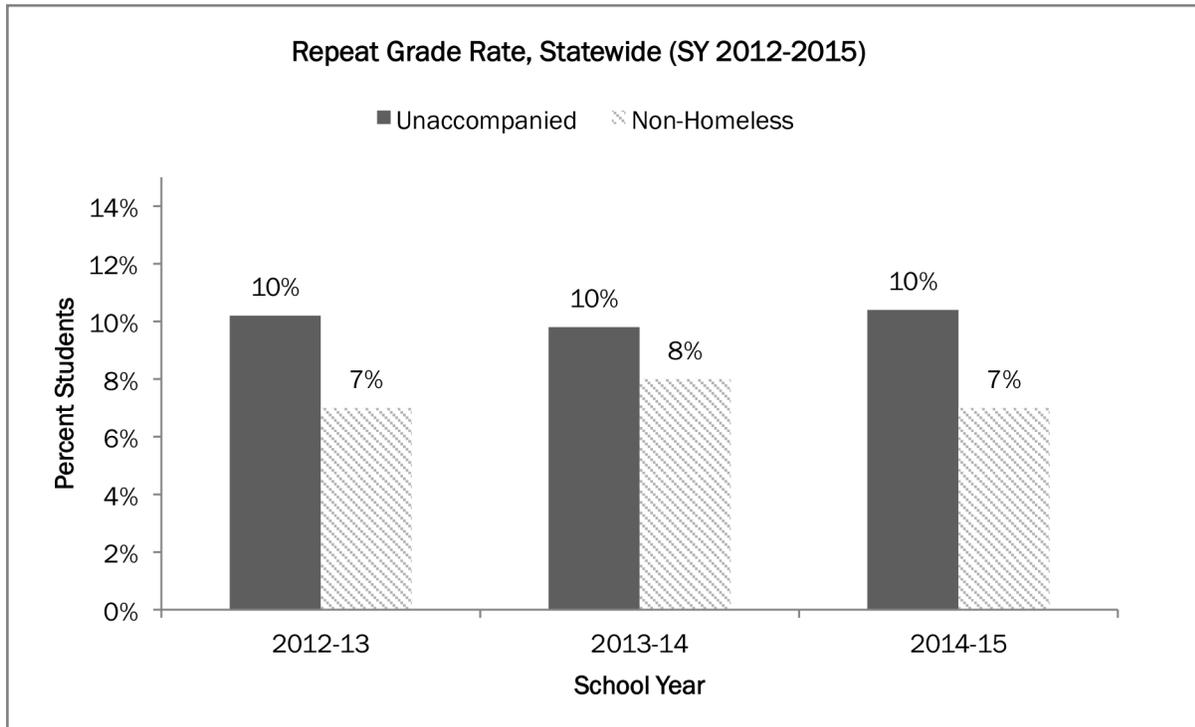
Educational Outcomes of Students Experiencing Homelessness

Across all of the outcomes reported to TEA by school districts, the data indicates that students who are reported to be homeless by their schools struggled academically. When broken out between students who are accompanied by an adult and those who are unaccompanied, outcomes for unaccompanied students are particularly stark.

⁶² THEO, *supra* note 21, at 17-18.

Students Who Repeat a Grade

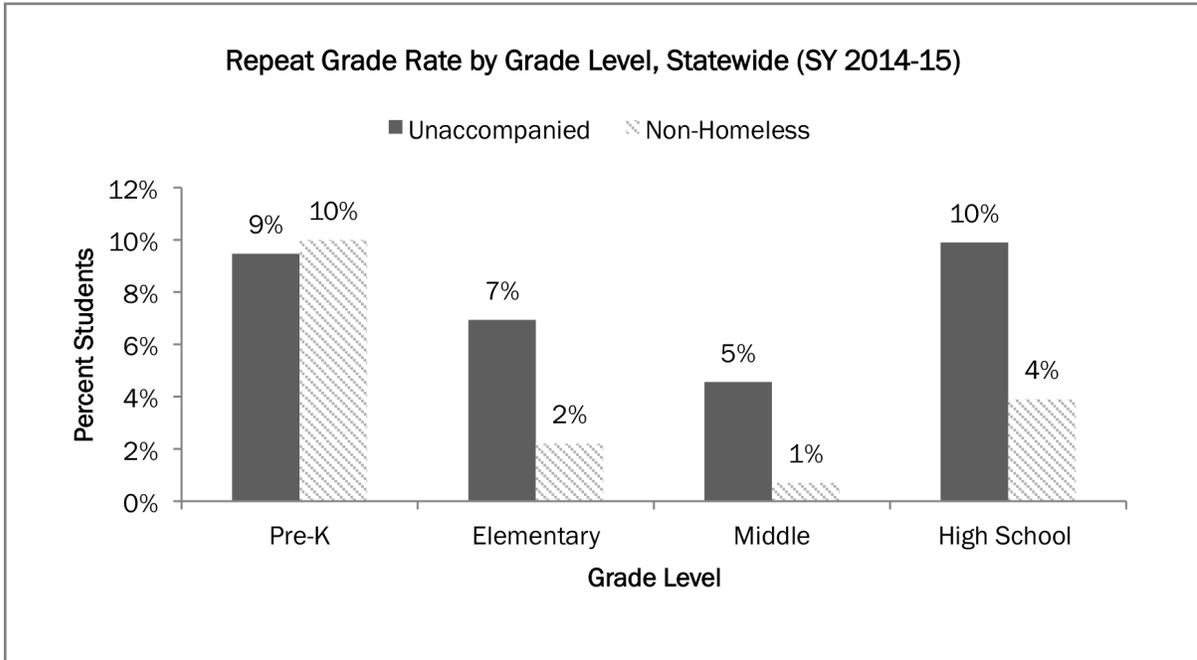
Each school year, at least 1,000 youth experiencing homelessness must repeat a grade. When broken down further, unaccompanied youth experiencing homelessness repeat a grade at a higher rate than accompanied youth experiencing homelessness. Additionally, in 2015, at least 10 percent of unaccompanied youth experiencing homelessness repeated a grade in school, whereas only 7 percent of non-homeless youth repeated a grade in school.



“Attendance and truancy is a huge issue because of the high mobility. If you’re not getting to school in a timely manner, and you’ve got a lot of absences, it starts a downward spiral...Every time a kid changes schools, they fall behind three to six months academically. That creates a really big challenge for schools and for families.”

**–Homeless liaison at
a Texas school district**

When broken down by grade level, unaccompanied youth experiencing homelessness consistently repeat a grade at a higher rate than accompanied youth experiencing homelessness. Additionally, in the 2014-2015 school year, unaccompanied youth experiencing homelessness repeat a grade at a higher rate than non-homeless youth at nearly every grade level.

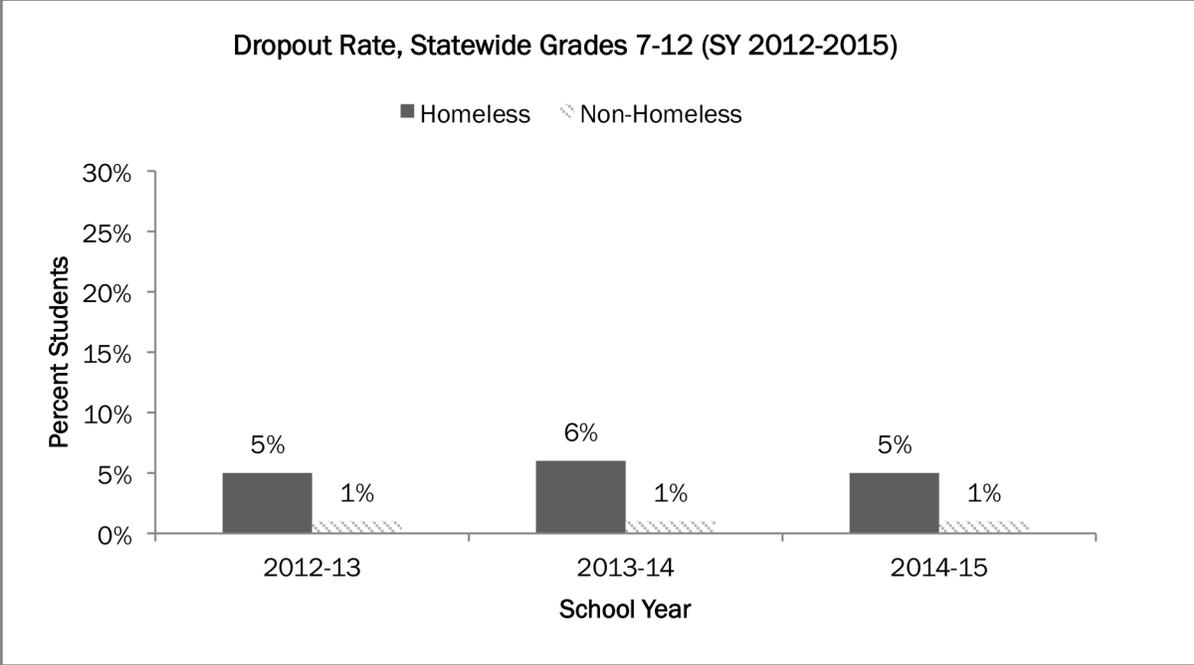


“If you can get them to get that diploma and show them they have potential—that can be the difference.”

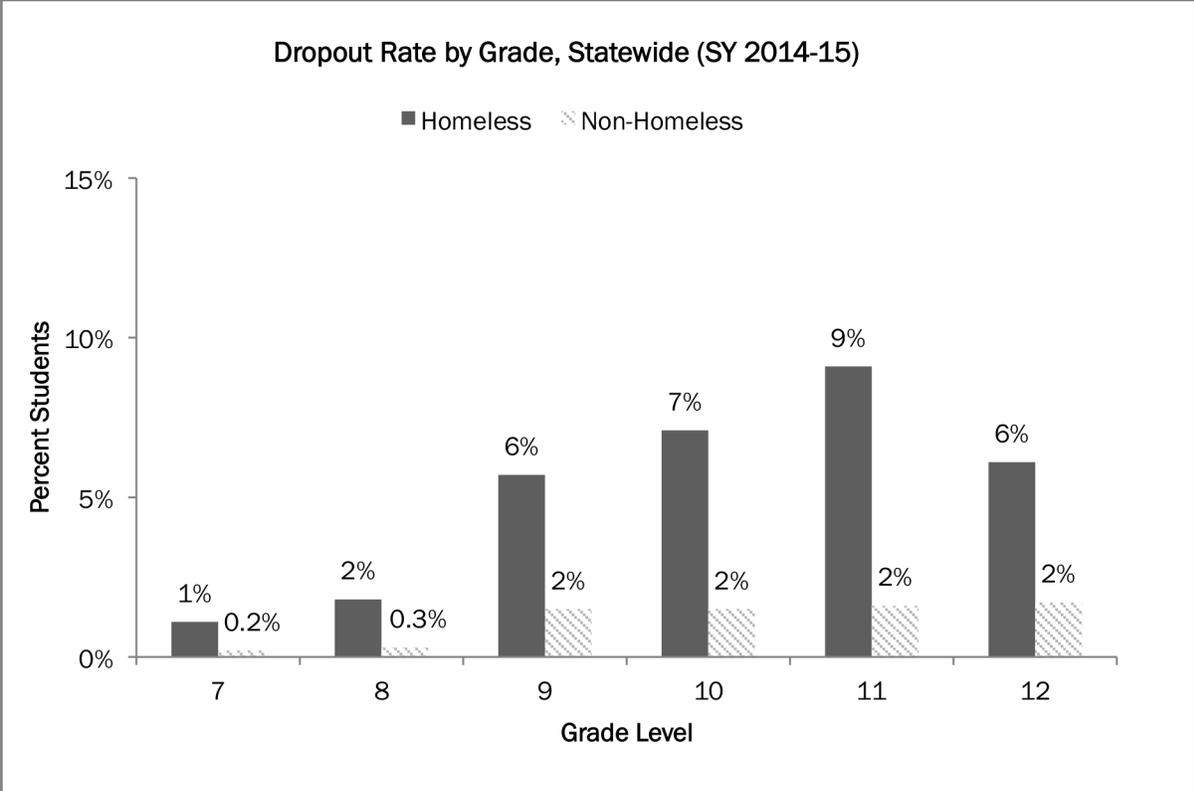
—Dallas service provider

Students Who Drop Out

Every year in Texas, about 1,400 youth experiencing homelessness drop out of school. Youth experiencing homelessness consistently drop out at a higher rate than non-homeless youth. In 2015, at least 5 percent of the youth experiencing homelessness population statewide dropped out of school, whereas only 1 percent of the non-homeless youth population statewide dropped out of school.



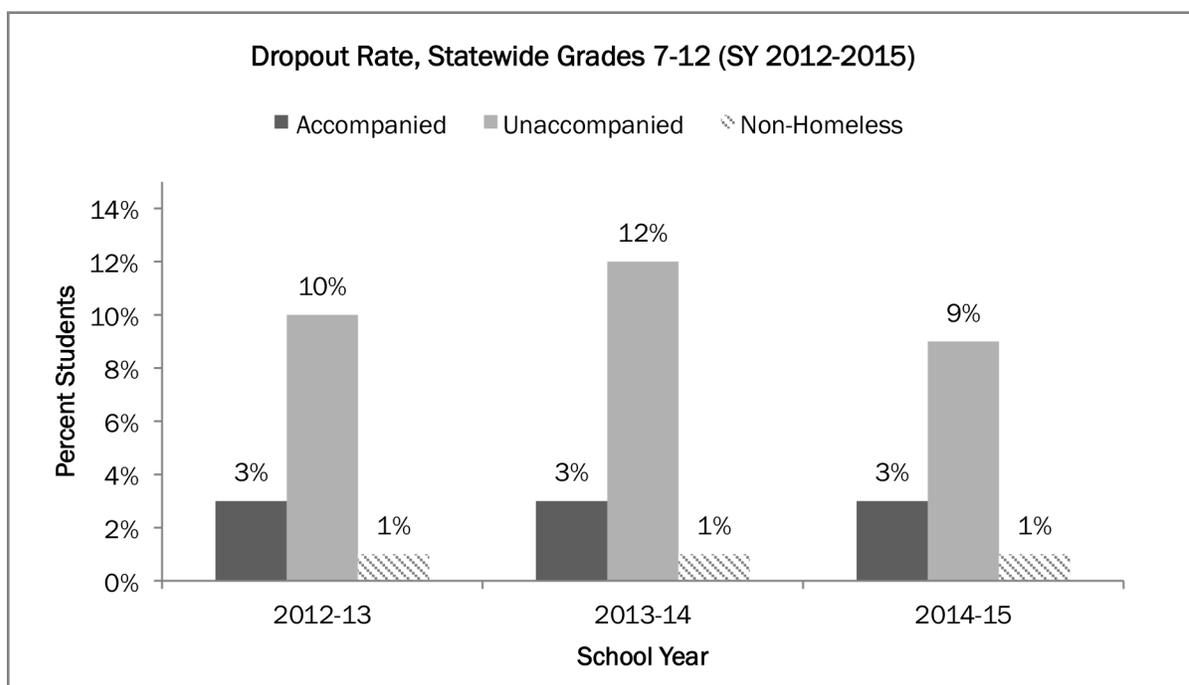
In the 2014-2015 school year, youth experiencing homelessness consistently dropped out at a higher rate than non-homeless youth across all grade levels. However, the dropout rate for youth experiencing homelessness triples between eighth and ninth grade, and grows in high school.



“I’ve been trying to get back into school so I can get a degree and get an awesome career going, but not having that stability of: Is this place that I’m staying currently going to be raided by the police? Are they going to cut up the tents like they’ve been doing in some camps around here? Is this one place I’m staying at, how long will I be able to stay? Are they going to work with me on that? It stresses me out. On top of that, I’m running into people, and their lives are together. They’ve got a place to stay, they have food in their mouth every day and all of that stuff. I’m walking in that crowd, and what do I say to people? I don’t want to be an outcast from the group because I don’t have what people assume are an automatic given.”

–W.P., Houston youth

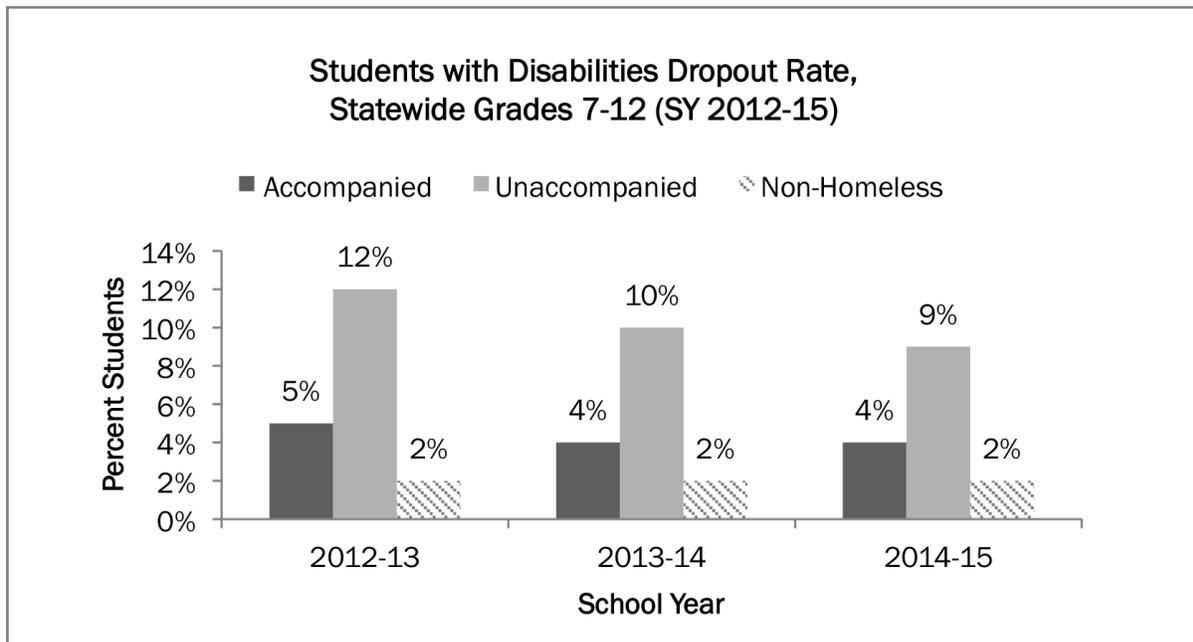
When broken down by accompaniment, unaccompanied youth experiencing homelessness consistently drop out at a higher rate than accompanied youth experiencing homelessness.



Despite the higher rate of dropout, during our interviews with homeless liaisons, they often spoke of students who overcame the obstacles and graduated. One liaison said, “We’ve worked with just amazing situations where students have to fight to get to graduation every day. When you have to worry about where you are going to stay that night but still make it to school the next day, where are you going to get food, and you continue to go so that you can graduate...that’s amazing. We’ve worked with many students like that.”⁶³

63 Interview on file with author.

By special education status, homeless students with disabilities drop out at a higher rate than non-homeless students with disabilities. In 2015, at least 5 percent of all homeless students with disabilities dropped out of school, while only 2 percent of non-homeless students with disabilities dropped out of school.



In addition to being at higher risk of repeating a grade and dropping out, data collected by THEO indicates that students who are homeless or unstably housed do not perform as well as other students on state-mandated assessments.⁶⁴

Texas Network of Youth Services' Survey of Texas Homeless Liaisons

The McKinney-Vento Act requires every school district to designate a homeless liaison, whose role is to identify homeless students and facilitate their enrollment and attendance in school. In 2016, TNOYS sent a survey to Texas school districts' homeless liaisons to gain a better understanding of the circumstances of homeless students and those who serve them. Just under one-third of Texas' liaisons responded.⁶⁵ Several important findings emerged:

- **Homeless liaisons find it challenging to identify students who are homeless.** In fact, despite the growing number of students identified as homeless, more than a third of the liaisons who responded indicated they did not work with *any* homeless students during the 2015-2016 school year.
- **Homeless liaisons report that they do not have enough time to carry out their duties.** Most liaisons serve district-wide, and close to 43 percent have at least three separate job titles.

⁶⁴ THEO, *supra* note 21, at 19-20.

⁶⁵ GENDRON, *supra* note 42, at 4. While a very high percentage of those who received the survey responded, TNOYS had a very high "bounce back" rate from their e-mail to homeless liaisons about the survey. Since the e-mail list came from THEO, which should have the most current contact information for all the homeless liaisons in the state, this raises concerns about turnover in these positions or the seriousness with which districts treat the positions.

- **Homeless students are most in need of housing and support services outside of school.** Service unavailability was particularly acute in rural areas.
- **Homeless liaisons are generally positive about the training and support they receive from the education system, as well as support they receive from the community.**

Consistent with this, our interviews with homeless liaisons repeatedly raised concerns surrounding the failure to provide adequate resources to ensure they could carry out their jobs. The only specific funding for homeless liaisons' salaries and homeless student support is provided through Title I and the federal McKinney-Vento grant program, with TEA sub-grants made to only 131 school districts in the 2015-2016 school year.⁶⁶ No state funding is provided to supplement the federal funding.⁶⁷ One homeless liaison said, "The federal government is really good at telling school districts what they have to do, but you can't create resources where they don't exist. They're saying we have to provide school supplies, backpacks, and uniforms, but there's no money to do that. That's hard. That's really hard."⁶⁸

Lack of resources hits smaller districts the hardest, with many liaisons having other responsibilities within the district. One liaison interviewed for the report noted that when she called some of her counterparts in other school districts, some of them did not even realize they carried the title.⁶⁹ One liaison listed all the roles she plays, "I have many job titles... Professional School Counselor, District Homeless Liaison, Foster Care Liaison, Cinderella's Closet, Good News Club Contact, Elementary At-Risk Monitor."⁷⁰

Service providers noted that in some cases, because they were stretched so thin, the homeless liaisons were not able to function the way they are intended to: "They may have a liaison but that's the principal saying, 'Hey guess what? You're the homeless liaison for the school district. Here's the paperwork and good luck.' So then we have to tell them from a practical matter what that means in terms of being compliant with the law."⁷¹ Another service provider said, "The reality is that we need to consider the homeless liaison being someone who can really take on that role because it's a bigger role than I think we were made aware of in the beginning. That would be one of our big desires—for the homeless liaison to be focused on this issue rather than spread too thin."⁷²

Despite these challenges, service providers often spoke of the importance of school and homeless liaisons. One service provider noted, "I had a recent graduate [of our program] once tell a group, 'No matter what, I always went to school because I knew I needed to get my education. But it was also a warm place or a cool place, and I could get food there.' The schools are the primary contact for homeless youth, so we work closely with the homeless liaisons."⁷³

66 THEO, *supra* note 21, at 5.

67 *Id.*; LBB, *supra* note 25, at 2.

68 Interview on file with author.

69 Interview on file with author.

70 Interview on file with author.

71 Interview on file with author.

72 Interview on file with author.

73 Interview on file with author.

School Discipline

This section describes the frequency at which homeless students are recipients of exclusionary discipline, including in-school suspensions (ISS), out-of-school suspensions (OSS), and assignments to Disciplinary Alternative Education Programs (DAEPs). **Homeless students are consistently overrepresented in every type of disciplinary referral.** Texas Appleseed has thoroughly researched and reported on the poor outcomes associated with exclusionary discipline—the phenomenon commonly referred to as the “school-to-prison pipeline.” Students who receive exclusionary discipline are significantly more likely to be held back a grade, drop out, and become involved with the juvenile justice system later.⁷⁴

“Behavioral issues do occur a lot with these students just because of the inconsistency that’s in their lives.”

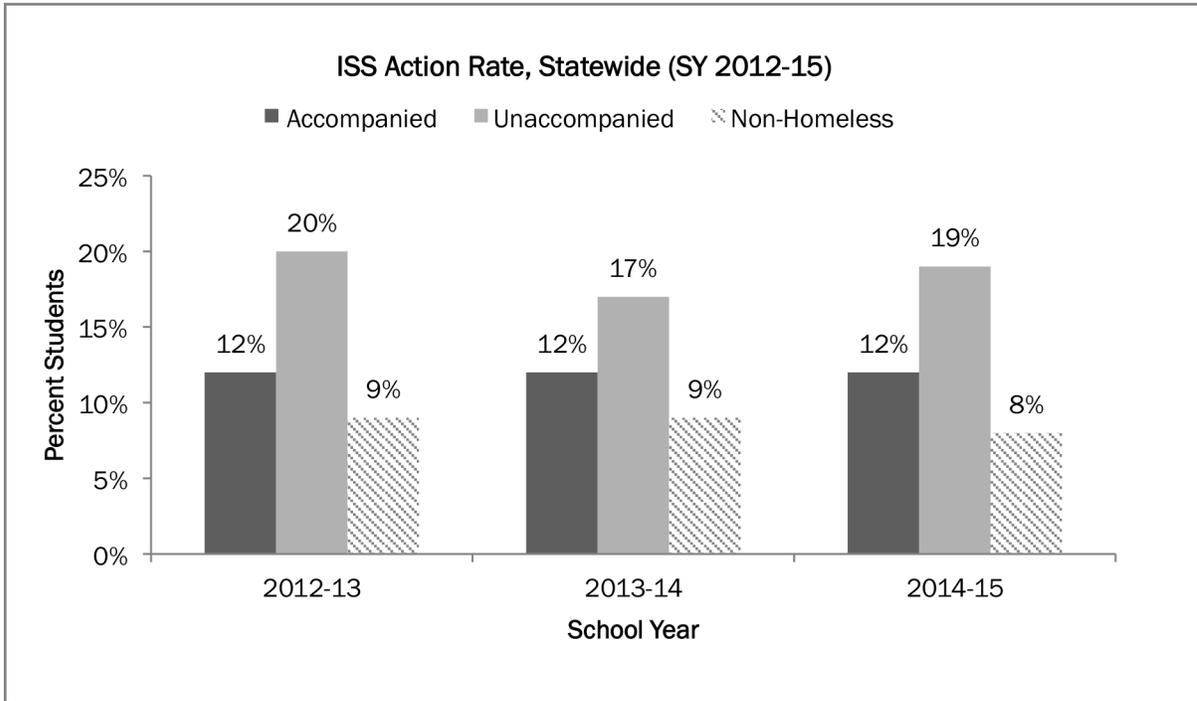
–Homeless liaison at a
Texas school district

“Kids tend to act out more because they’ve fallen behind in school and it’s stressful.”

–Homeless liaison at a
Texas school district

74 COUNCIL OF STATE GOVERNMENTS, JUSTICE CENTER, BREAKING SCHOOLS RULES (2011).

In-School Suspensions. Overall, at least 11,886 homeless students receive in-school suspensions each school year. Youth experiencing homelessness are more frequent recipients of in-school suspensions than are non-homeless youth. For instance, in the 2014-2015 school year, at least 13 percent of all youth experiencing homelessness received an in-school suspension, whereas only 8 percent of non-homeless youth received an in-school suspension.

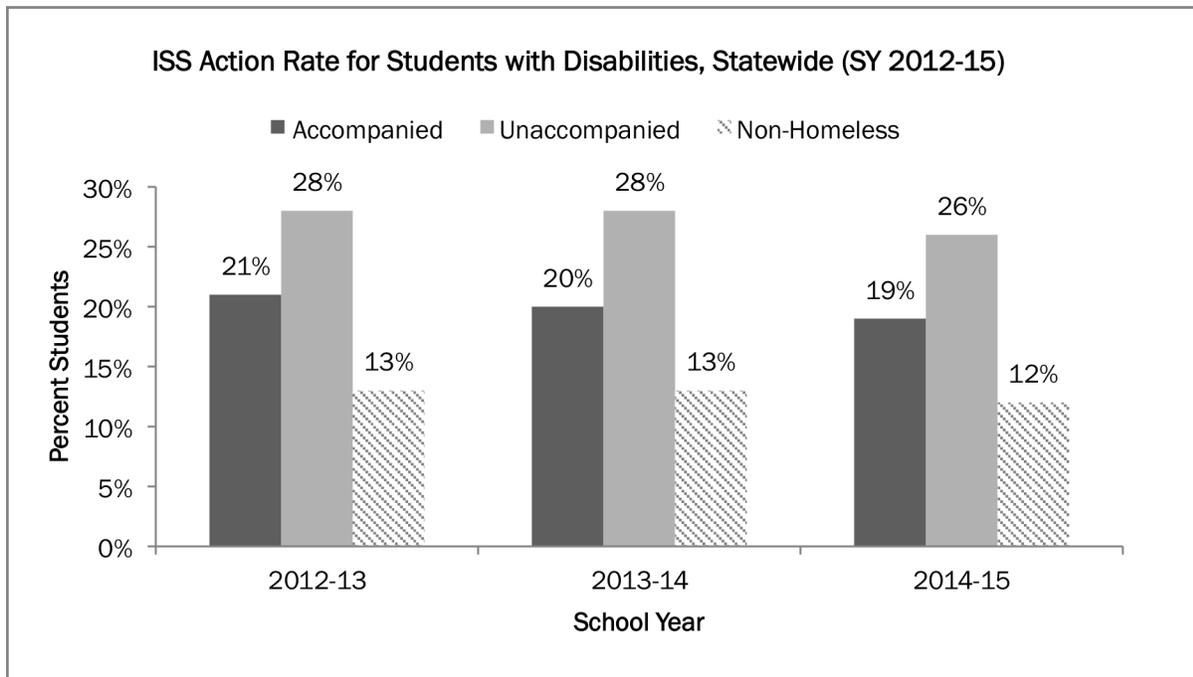


TEA data reveals that **the most common reason homeless students are sent to ISS is for violations of a school's code of conduct**, accounting for 91 percent of all ISS actions in the 2014-2015 school year. In Texas, disciplinary referrals are made for mandatory or discretionary reasons. Mandatory disciplinary referrals are outlined in the Texas Education Code, and consist of serious behaviors that pose a safety risk or violation of criminal law.⁷⁵ A code of conduct violation is the lowest level of discretionary referrals, and generally consists of behavior that schools may consider disruptive, but not law-breaking, like talking back to a teacher, being late to class, or being too loud in class.

When broken down further, unaccompanied youth experiencing homelessness are more frequent recipients of ISS than accompanied youth experiencing homelessness. In the 2014-2015 school year, at least 20 percent of unaccompanied youth experiencing homelessness received an in-school suspension, whereas only 12 percent of accompanied youth experiencing homelessness received an in-school suspension.

By special education status, homeless students with disabilities are more frequent recipients of ISS than non-homeless students with disabilities. In the 2014-2015 school year, at least 20 percent of homeless students with disabilities received in-school suspensions, while only 12 percent of non-homeless students with disabilities received in-school suspensions.

⁷⁵ See TEX. EDUC. CODE §§ 37.001 et seq.



Do McKinney-Vento requirements speak to school discipline issues?

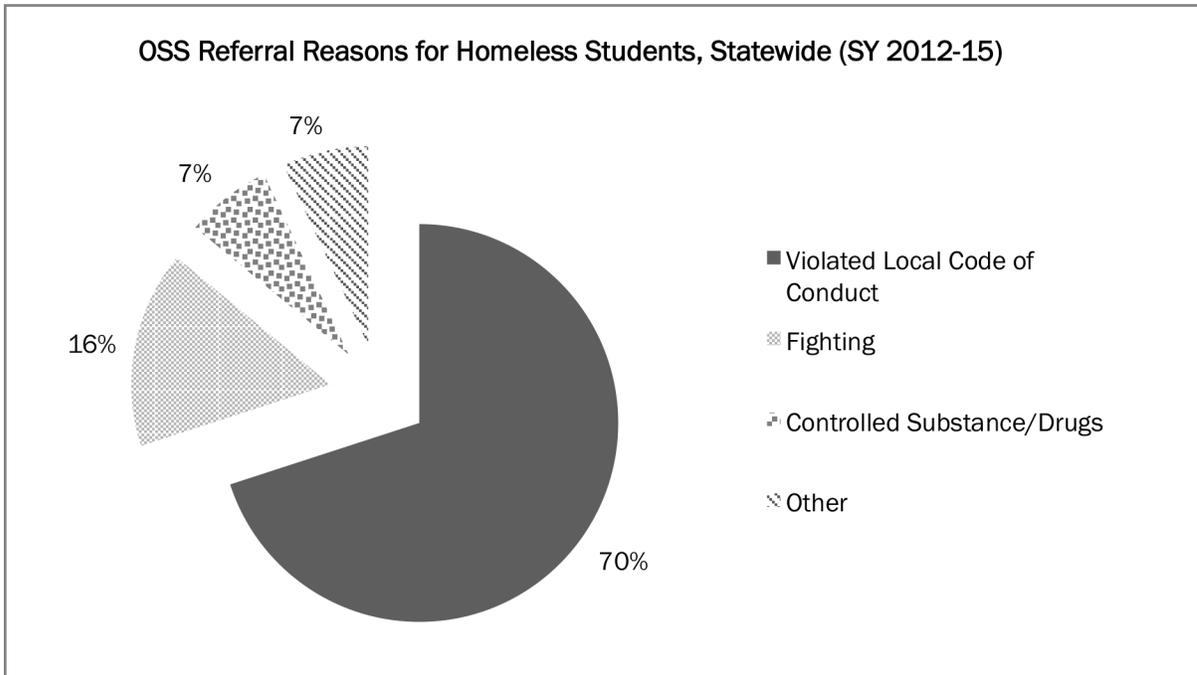
Under McKinney-Vento, schools and districts have an ongoing obligation to review and revise policies or practices that act as barriers to identification, enrollment, attendance, and school success for homeless students.⁷⁶ **Recent guidance issued by the U.S. Department of Education indicates that this process of reviewing policies, practices, and procedures should include a review and revision of school discipline policies that disproportionately impact homeless students.**⁷⁷

Out-of-School Suspensions. Overall, at least 7,102 homeless students receive out-of-school suspensions in Texas each school year. Youth experiencing homelessness are more frequent recipients of out-of-school suspensions than are non-homeless youth. For instance, in the 2014-2015 school year, at least 9 percent of youth experiencing homelessness received an out-of-school suspension, whereas only 4 percent of non-homeless youth received an out-of-school suspension.

When broken down by referral reason, OSS referral reasons are similar to ISS referral reasons. Again, the most common reason for OSS actions is for violations of codes of conduct, accounting for 70 percent of all OSS actions.

⁷⁶ U.S. DEP'T OF EDUC., *supra* note 14, at 6.

⁷⁷ *Id.* The guidance specifically states that the process should include a look at whether those policies or practices disproportionately impact homeless students of color, those who identify as LGBTQ, English learner, and students with disabilities.



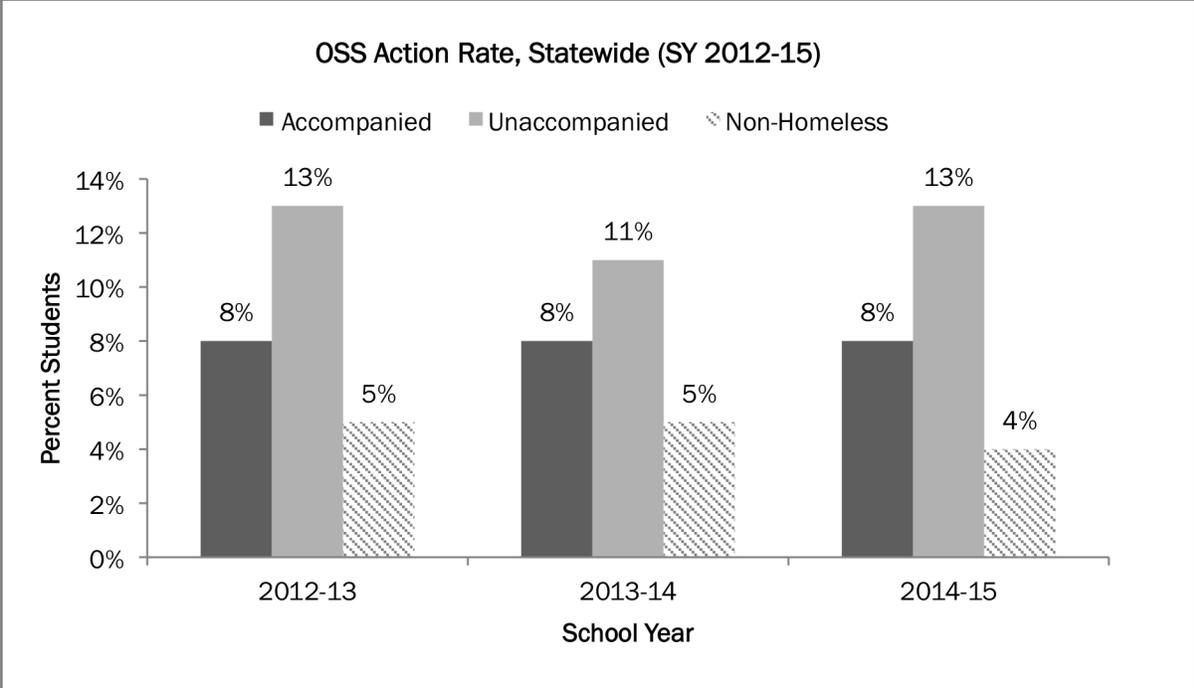
Quite simply: Suspending a youth experiencing homelessness out of school for low-level code of conduct violations makes no sense. Texas Appleseed has written extensively about the poor outcomes associated with exclusionary discipline.⁷⁸ But even aside from the compelling reasons that suspension should be abandoned as a common disciplinary practice for all students, the use of suspension for homeless students presents even more obvious problems.

Unaccompanied youth are more frequent recipients of OSS than accompanied youth. In the 2014-2015 school year, at least 13 percent of unaccompanied youth experiencing homelessness received an out-of-school suspension, whereas only 8 percent of accompanied youth experiencing homelessness received an out-of-school suspension.

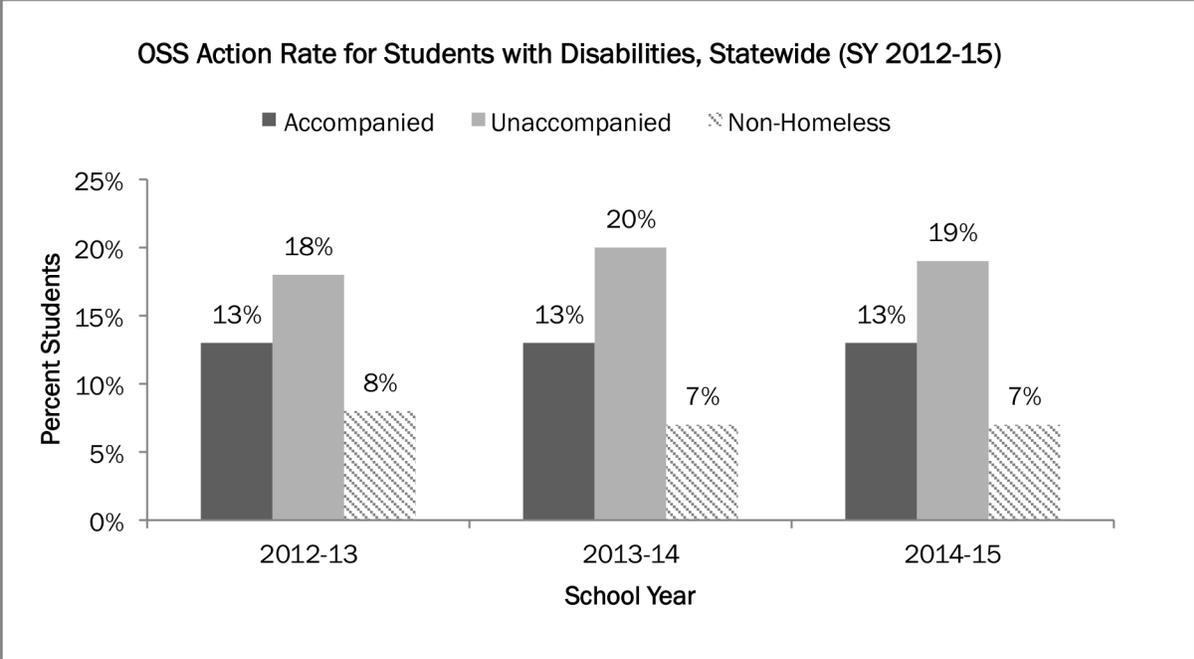
“Transportation is a huge barrier because that trickles into all things. It can also lead to test scores and behavioral issues if there is inconsistency of being present at school. It’s all very interconnected.”

–Homeless liaison at a Texas school district

⁷⁸ See Tex. Appleseed, School to Prison Pipeline, <https://texasappleseed.org/school-prison-pipeline> (last visited October 7, 2017).

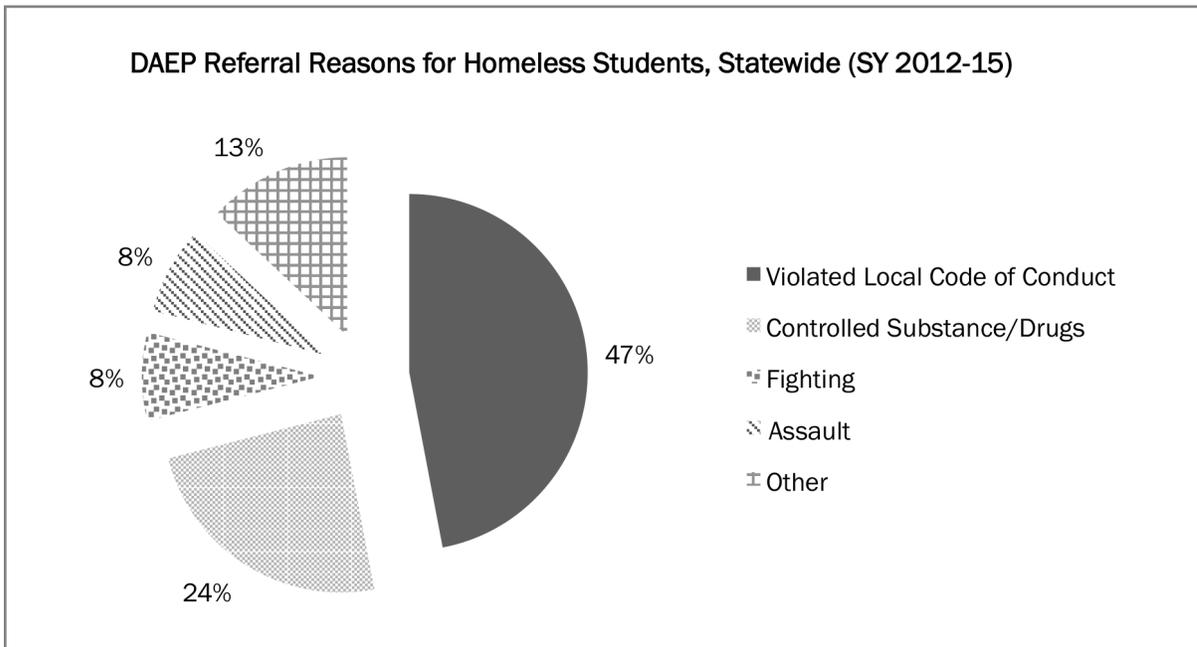


By special education status, homeless students with disabilities are more frequent recipients of OSS than non-homeless students with disabilities. In 2015, at least 14 percent of all homeless students with disabilities received out-of-school suspensions, while only 7 percent of non-homeless students with disabilities received out-of-school suspensions.

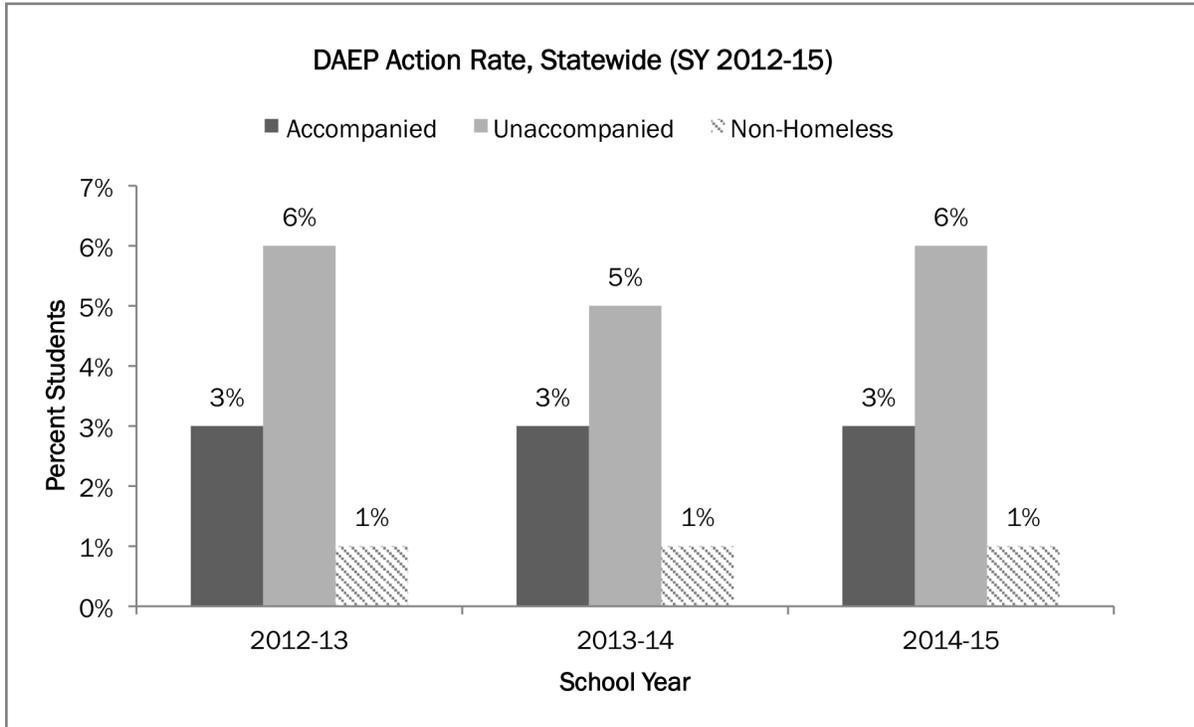


Disciplinary Alternative Education Programs. Overall, at least 2,676 homeless students are placed in DAEPs each school year. Youth experiencing homelessness are more frequently placed in Disciplinary Alternative Education Programs than are non-homeless youth. For instance, in the 2014-2015 school year, at least 3 percent of youth experiencing homelessness were placed in Disciplinary Alternative Education Programs, whereas only 1 percent of non-homeless youth were placed in Disciplinary Alternative Education Programs.

When broken down by referral reasons, once again the most common reason for DAEP actions are violations of codes of conduct, accounting for 47 percent of all DAEP actions over the three-year period for which we have data.



Unaccompanied youth experiencing homelessness are more frequently placed in DAEPs than accompanied youth experiencing homelessness. In the 2014-2015 school year, at least 6 percent of unaccompanied youth experiencing homelessness were placed in Disciplinary Alternative Education Programs, whereas only 3 percent of accompanied youth experiencing homelessness were placed in these programs.



By special education status, homeless students with disabilities are potentially more frequently placed in Disciplinary Alternative Education Programs than non-homeless students with disabilities. In 2015, at least 5 percent of all homeless students with disabilities were placed in DAEPs, while only 2 percent of non-homeless students with disabilities were placed in Disciplinary Alternative Education Programs.

Conclusion & Policy Recommendations

While both Texas and the federal government have prioritized supports for students experiencing homelessness, their school outcomes still lag behind those of their peers. This is true across every measurable outcome that we examined—grade retention, dropout, and school discipline. There may be a variety of explanations for this—but one critical element revealed by both the TNOYS survey of homeless liaisons and our interviews is that most liaisons feel under-resourced.

Young people interviewed indicated that school was often a place where—despite the hardships they were experiencing—they could feel a sense of normalcy. Many of them indicated that education was a high priority for them, but that the challenges associated with homelessness made it difficult to attend consistently or stay focused on schoolwork. Their testimony to school as a positive source of stability points to the importance of ensuring that schools are adequately resourced to assist students experiencing homelessness.

FINDING: While the number of students identified as homeless in Texas has grown over the last four school years, indicating schools are getting better at identifying homeless students, the high percentage of districts in Texas that did not identify *any* homeless students suggests barriers may still exist to identification.

- Inadequate funding may contribute to this barrier, acting as a disincentive to identification for districts that may not feel they have the resources to provide McKinney-Vento services once they do identify students.
- Stigma or fear of system involvement may also pose a barrier to self-identification for middle and high school students, particularly those who are unaccompanied, making it critical for schools to take a proactive approach to identification.

Policy Recommendation: More funding should be provided by the federal government to support schools in complying with McKinney-Vento requirements, particularly transportation requirements, so that a disincentive to identification does not exist.

Policy Recommendation: Local education agencies should increase their Title I funding set-asides for services to homeless students.

- This “set-aside” funding should be based on a needs assessment, done in consultation with the homeless liaison.
- If the local education agency does not have other sources of funding for the homeless liaison’s salary, set-aside funds should be devoted to ensuring that the district or charter school funds the liaison at the equivalent of a full-time employee.

Policy Recommendation: Texas should also provide funding to school districts to supplement federal funds. One possibility might be a funding weight for homeless students that would entitle districts to a higher level of funding, similar to that created for special education students. Weighting funding for youth experiencing homelessness incentivizes schools to identify homeless students and provides high-need districts with the resources necessary to support their homeless population.

Policy Recommendation: Homeless liaisons should not be the only staff trained in identifying homeless students; schools should provide training to teachers and other staff to help ensure that those who are likely to interact with students on a daily basis are able to identify signs and symptoms of homelessness and connect students with the homeless liaisons.

FINDING: Schools are an important resource in identifying young people experiencing homelessness and connecting them with outside services and supports.

- Though youth experiencing homelessness may hide from authorities outside school settings for fear of being returned to an abusive home or of CPS involvement, many are still attending school. Yet, few schools are participating in “point-in-time” counts, an important process for determining how many young people need access to services and supports provided by entities outside school systems.

Policy Recommendation: Schools should participate in “point-in-time” counts, which are used to inform policymakers’ understanding of the need for services.

- HUD and TEA should reassure schools that participation will not violate student privacy laws.
- HUD should align its definition of “homeless” with the McKinney-Vento education definition.

Policy Recommendation: Texas already requires school districts that maintain a website to post information on their websites about local programs and services available to assist homeless students. School districts should go a step further and create a database of resources available within the community and district that assist and support homeless students and families, update these regularly, and make this information easily available to all homeless liaisons to ensure that it is not only publicly available but internally useful. This would better enable schools to become hubs where students and families are connected with resources.

- Schools and districts should consider how community-based service providers could be invited to make resources available while students are on campus, increasing the odds that they will be accessible to the student.
- Schools should reach out to and coordinate with the faith-based community for resources and volunteers.
- As youth approach high school graduation, schools should have counselors work with students to identify funding and resources that may be available to support a youth’s housing, educational or vocational, and other basic needs.

Policy Recommendation: Federal and state agencies should require that any recipient of funding meant to serve youth experiencing homelessness should be required to show, as a condition of funding, that they are collaborating with educators and service providers.

- The Administration for Children & Families should require recipients of Runaway & Homeless Youth Act (RHYS) funding to show they are collaborating with local school districts.
- The U.S. Department of Housing & Urban Development should more closely monitor HEARTH Act requirements, which says that Continuum of Services programs and project applicants collaborate with schools, providing technical assistance where needed.

- The U.S. Department of Education & the Texas Education Agency should require school districts receiving Title I funding or McKinney-Vento sub-grants to show that they are collaborating with local service providers as a condition of funding.
- The Texas Department of Family and Protective Services should require STAR providers to show they are working with school districts to provide supports and services to runaways and students who are experiencing conflict that puts them at risk of homelessness.

FINDING: Homeless liaisons in Texas are not always adequately resourced, particularly given the breadth of tasks they perform and the importance of their role.

- Many homeless liaisons are wearing more than one hat, often dividing their time between competing duties.
- Lack of prioritization of the position in some districts may lead to high turnover from year to year, leading to a lack of expertise and institutional knowledge, which may affect quality of services being provided to students, as well as identification of students as homeless.

Policy Recommendation: Texas should create a state funding stream to support homeless liaisons, school counselors, and other resources for homeless students, particularly for smaller districts that struggle to meet students' needs.

- As a first step, create state-funded grants for districts with the highest rate of homeless students, so that rural districts with high rates may be eligible even when they do not fall within the districts with the highest overall count of homeless students.

FINDING: Homeless students in Texas experience poor academic outcomes, with homeless students significantly more likely than their peers to repeat a grade or drop out of school.

- Students of color and students with disabilities are overrepresented among homeless students. Their overrepresentation among homeless students may contribute to achievement gaps for these young people.

Policy Recommendation: School districts should make clear that Title I set-asides are available to support the needs of homeless students.

- Schools should make dropout prevention and tutoring resources available to homeless students, tapping into district Title I set-asides where needed; if a student is living in a shelter and unable to stay after school for tutoring, schools should consider having tutors who are able to work with students at the shelter to assist them with homework and provide additional support.

Policy Recommendation: Texas should create incentives for youth to stay in school and work toward higher education goals, and find ways to eliminate barriers to higher education for youth experiencing homelessness.

- Texas should increase accessibility to the high school equivalency test by waiving or subsidizing the \$145 fees for youth experiencing homelessness. The prohibitive costs of the exam are especially burdensome for youth experiencing homelessness and create a significant barrier to gainful employment.

- Texas should designate homeless liaisons at all public colleges and universities. The needs of youth experiencing homelessness evolve as they enter higher education. A college homeless liaison would create a much-needed support system for these high-risk students.⁷⁹
- Texas should consider waiving in-state tuition for youth identified by their school as homeless, and accepted to a college or university but unable to pay tuition.

FINDING: Homeless students in Texas are experiencing exclusionary discipline at disproportionate rates. Across disciplinary referral types, the majority of referrals are for low-level code of conduct violations rather than for behavior that poses a safety threat.

- Behavior that leads to disciplinary action may actually be a manifestation of trauma, given the high rate of abuse, neglect, and victimization that youth experiencing homelessness have experienced.
- Suspending a homeless student out of school is particularly problematic, given that they may rely on school for meals during the day, and may not have a place to go if they are not in school.

Policy Recommendation: Texas should eliminate suspension as a disciplinary option for homeless students, except in situations involving a threat to campus, student, or staff safety.

Policy Recommendation: School districts should take into consideration whether a student's homelessness or history of trauma contributed to a disciplinary infraction, and where homelessness or trauma was a contributing factor, refer the student to supports or services rather than make a disciplinary referral.

Policy Recommendation: TEA should alert school districts that have high rates of exclusionary discipline for homeless students and provide funding to THEO to provide technical assistance to districts that create proven alternatives to traditional disciplinary models, like Social and Emotional Learning, school-wide Positive Behavioral Interventions & Supports, or Restorative Justice.

Policy Recommendation: School districts should put alternatives to traditional disciplinary models into place that are trauma-informed and better support students' behavioral needs.

⁷⁹ For more, see NAT'L ASSOC. FOR THE EDUC. OF HOMELESS CHILDREN AND YOUTH, COLLEGE ACCESS AND SUCCESS FOR STUDENTS EXPERIENCING HOMELESSNESS 46-47 (2013), available at <http://www.naehcy.org/sites/default/files/dl/toolkit.pdf>

Intersections between Youth Homelessness and the Juvenile or Criminal Justice Systems

Youth homelessness intersects with the juvenile or criminal justice systems in several ways. Young people may encounter homelessness because a prior juvenile record or a criminal conviction caused housing and employment barriers later in life: Even a misdemeanor conviction can pose problems for young people attempting to rent an apartment or obtain a job. Similarly, as young people who have been adjudicated delinquent or convicted of a crime are transitioning out of a juvenile facility, jail, or prison, poor transition planning may result in homelessness, particularly if the youth is not able to return to the home they lived in prior to justice system involvement.

But perhaps the most direct intersection between these issues results from the way that the symptoms of homelessness—or for young people under the age of 17, the act of running away from home or of violating a county or municipal curfew—may be punished as a violation of the law. This is sometimes referred to as the “criminalization” of homelessness and although criminalization impacts all homeless populations there are specific areas in which it is especially problematic for young people.

Whether criminal or juvenile justice involvement later contributes to a young person’s homelessness, or they became justice system involved as a result of their homelessness, there is no denying the link: A national survey of youth experiencing

homelessness showed that more than half the respondents had been arrested at some point.⁸⁰ Of the youth who participated in *Youth Count Texas!*, almost 33 percent indicated they had legal problems or a prior conviction.⁸¹ Similarly, a survey of Austin youth found that just under 45 percent had a history of juvenile or criminal justice involvement.⁸²

Homeless Youth & Victimization

In addition to the role that homelessness plays in putting young people in direct contact with the juvenile or criminal justice system, being without housing also places them at high risk of victimization. Those who are homeless experience higher rates of sexual and physical assault.⁸³ One survey of youth experiencing homelessness found that 28 percent had experienced two or more forms of victimization while living on the streets.⁸⁴ Data from *Youth Count Texas!* indicates:

- 34 percent of youth had experienced child abuse or neglect;
- 23 percent had experienced sexual assault; and
- almost 17 percent had been a victim of physical or sexual assault on the streets.⁸⁵

One young woman we interviewed described being assaulted:

One day I was walking and there was a girl walking by who had a problem with me, and she just beat me up out of nowhere. My friend took me to Starbucks to clean up my face. [Then] this guy got in my face, and I told him to [stop], but I said it loudly. Instead of having one cop on me, I had five. They surrounded us. It doesn't take five cops to check one person my size.⁸⁶

A growing body of research shows that youth experiencing homelessness are also at heightened risk of human trafficking. Runaway youth and youth experiencing homelessness may be forced into trafficking by economic necessity: A study of runaways found that most youth did not plan their departure and had \$10 or less when they left home, forcing them to find a source of money to survive on the street.⁸⁷

80 ACF, *supra* note 10, at 63

81 NARENDORF, *supra* note 4, at 35.

82 ELIZABETH A. SCHOENFELD & SUSAN MCDOWELL, *supra* note 9, at 24.

83 Margot Kushel et al, *No Door to Lock: Victimization Among Homeless and Marginally Housed Persons*, 163 JAMA 2492 (2003).

84 Susan M. Snyder et al, *Homeless youth, strain, and justice system involvement: An application of general strain theory*, 62 Children & Youth Services Review 90-96 (2016).

85 NARENDORF, *supra* note 4, at 36.

86 Interview on file with author.

87 NAT'L RUNAWAY SAFELINE, NATIONAL RUNAWAY SAFELINE'S 2015 REPORTER'S SOURCE BOOK ON RUNAWAY AND HOMELESS YOUTH 7 (2015), available at <https://www.1800runaway.org/wp-content/uploads/2015/09/2015-Media-Source-Book-FINALv2.pdf>

A University of Texas study estimated that 25 percent of youth experiencing homelessness are trafficked.⁸⁸ This is consistent with a survey of youth experiencing homelessness in New York, which found that one in four of the youth surveyed had been a victim of trafficking or had engaged in “survival sex.”⁸⁹ Similarly, a national survey found that approximately a quarter of the surveyed youth reported having traded sex with someone for something they needed while on the streets.⁹⁰ A report based on interviews with close to 1,000 youth in 13 cities across the United States and Canada, showed that nearly 1 in 5 of these youth were victims of trafficking.⁹¹ Of those, 95 percent reported a history of child abuse or neglect and 63 percent had been involved with the child welfare system.⁹²

During our interviews, we often heard about the problems related to trafficking. One school district’s homeless liaison said, “I have kids who are trading their bodies. Survival sex is not a new concept. They do it for food, money to get a haircut, buy medicine or any number of things.”⁹³ A law enforcement officer interviewed for this report said, “If you’re 16 years old, what do you have? You can sell drugs, and you can sell your body. That’s just the way it is. So there was a lot of prostitution and a lot of drug use.”⁹⁴

“People were like, ‘Baby girl, you don’t have it? I can get your nails done. I can get you a car. All you gotta do is just love me and be with me. Be my baby girl.’”

–C.J., Houston youth

88 UNIV. OF TX AT AUSTIN, INSTITUTE ON DOMESTIC VIOLENCE & SEXUAL ASSAULT, HUMAN TRAFFICKING BY THE NUMBERS: THE INITIAL BENCHMARK OF PREVALENCE AND ECONOMIC IMPACT FOR TEXAS (2016).

89 COVENANT HOUSE, HOMELESSNESS, SURVIVAL SEX, AND HUMAN TRAFFICKING: AS EXPERIENCED BY THE YOUTH OF COVENANT HOUSE NEW YORK (2013).

90 ACF, *supra* note 10, at 47.

91 Debra Schilling Wolf, *95 Percent of Homeless Youth Who Experienced Sex Trafficking Say They Were Maltreated as Children*, CHRON. OF SOC. CHANGE, September 14, 2017, available at <https://chronicleofsocialchange.org/research-news/majority-of-homeless-youth-who-experienced-sex-trafficking-say-they-were-maltreated-as-children/28103>

92 *Id.*

93 Interview on file with author.

94 Interview on file with author.

The director of an outreach and transitional living program for youth experiencing homelessness described the way that young women were targeted and pulled in by traffickers:

*In our experience, with the girls that we work with, it starts off with them meeting a guy and having a relationship with him. Then he puts her out as part of their relationship as a way to “take care of” them. There have been a few situations where our girls have been walking to come to the center and they have been approached on the street by men saying they want to take them away. A lot of our girls are on social media, and they get approached that way by traffickers. This is a new thing in this country, and people are just now starting to talk about it.*⁹⁵

Service providers noted that those under 18 are particularly vulnerable because traffickers know that minors cannot access services without providers notifying CPS, something that the youth may be more afraid of than the trafficker.⁹⁶ One service provider said that traffickers know where to find vulnerable youth, making it challenging to reach the youth before traffickers do: “We’ve got to get to the kids...faster because within the first 48 hours, they’re almost always approached by a sex trafficker because they go to the bus stations. The traffickers have recruiters there, and they can spot [vulnerable youth] a mile away.”⁹⁷

Governor Abbott has prioritized addressing the problem of trafficking, establishing a child sex trafficking team.⁹⁸ The team’s initial focus was on determining the scope of the problem and gaps in services.⁹⁹ Having done so, the Governor’s office is beginning to develop regional plans and distribute grant funding to address service gaps, including funding to serve youth who are homeless and have been trafficked or are at risk of trafficking.¹⁰⁰

95 Interview on file with author.

96 Interview on file with author.

97 Interview on file with author.

98 See Office of Governor Greg Abbott, Child Sex Trafficking, https://gov.texas.gov/organization/cjd/topic_trafficking (last visited October 7, 2017).

99 *Id.*

100 *Id.*

The Runaway and Homeless Youth Act (RHYA)

The Runaway Youth Act was first passed in 1974 as part of the Juvenile Justice and Delinquency Prevention Act (JJDP).¹⁰¹ The legislation created a funding stream for programs aimed at runaway youth, and later expanded through reauthorizing legislation to include services for youth experiencing homelessness who were not involved with the juvenile justice or child welfare systems (becoming the Runaway and Homeless Youth Act, or “RHYA”).¹⁰² The U.S. Department of Health & Human Services’ Administration for Children and Families (ACF) is responsible for distributing this funding, which is detailed in Chapter 6 of this report related to services and supports for youth experiencing homelessness.¹⁰³ The RHYA was meant to “decriminalize” runaways by ensuring that their needs were met outside the juvenile justice system.¹⁰⁴ This is consistent with language in the JJDP that requires participating states to deinstitutionalize status offenders, including runaways.

101 CONG. RESEARCH SERVICE, RUNAWAY AND HOMELESS YOUTH: DEMOGRAPHICS AND PROGRAMS 1 (2016).

102 *Id.*

103 *Id.*

104 See CONG. RESEARCH SERVICE, RUNAWAY AND HOMELESS YOUTH: DEMOGRAPHICS AND PROGRAMS (2013), available at http://www.nchcw.org/uploads/7/5/3/3/7533556/crs_2013_rhya_history_and_lit_review.pdf; NAT’L CLEARINGHOUSE ON FAMILIES & YOUTH, WITNESS TO HISTORY: BRIAN SLATTERY REMEMBERS TESTIFYING BEFORE CONGRESS (2014), available at <https://ncfy.acf.hhs.gov/features/celebrating-40-years-rhya/witness-history-brian-slattery>

Criminalization of Homelessness Children Under Age 17

Runaways

Unaccompanied minors who are homeless often have run away from either a foster care placement (as discussed in Chapter 4) or the home of a parent or guardian. Young people reported as missing and later found may simply be returned to a parent or guardian by law enforcement.¹⁰⁵ In other cases, rather than returning the child to parents or guardians, law enforcement may bring the child to a juvenile processing center, and the local juvenile probation department will then determine what step to take next. Our research shows that the response to runaways varies from county to county.

Each year in Texas, around **2,000 youth are referred to the juvenile probation system** for having run away.¹⁰⁶ Significantly more young people come into contact with law enforcement, with close to **6,000 children aged 10 to 16, and more than 450 17-year-olds arrested in 2015 for running away.** Data indicates that children younger than 10 have been arrested for running away, though older teens are more commonly arrested.¹⁰⁷

Young people in Texas under the age of 17 are considered “juveniles” by the Penal and Family Codes and are not prosecuted criminally.¹⁰⁸ Instead, they are referred to juvenile probation departments and may be civilly adjudicated for “delinquent conduct” or for Conduct in Need of Supervision (CINS) offenses in juvenile court.¹⁰⁹ Civil juvenile courts were created at the turn of the 20th century to “remove the taint of criminality” from the process for children, creating a system more focused on rehabilitation than punishment.¹¹⁰ CINS offenses, also referred to as status offenses, are offenses only

105 TEX. CODE CRIM. PROC. § 63.009(g).

106 Data obtained from Texas Juvenile Justice Department by Texas Appleseed through open records requests.

107 TEX. DEP’T OF PUB. SAFETY, THE CRIME IN TEXAS REPORT FOR 2015 (2016), available at http://www.dps.texas.gov/administration/crime_records/pages/crimestatistics.htm

108 See TEX. PENAL CODE § 8.07; TEX. FAM. CODE TITLE 3

109 TEX. FAM. CODE § 51.03

110 SHAY BILCHIK, JUVENILE JUSTICE: A CENTURY OF CHANGE, OFFICE OF JUVENILE JUSTICE AND DELINQUENCY PREVENTION 2 (1999).

by virtue of the child’s status as a minor—in other words, they describe behavior that would not constitute a criminal offense for an adult. In Texas, running away from home is one of the status offenses included in the definition of “Conduct in Need of Supervision.”¹¹¹

“I had left my house, and they got me for being a runaway. I was very shocked at how strict...the [punishments] were for being a runaway...I was in detention for two months, and my mom wouldn’t get me out. So then I went to a placement facility out in Bryan, Texas. I did my year of probation out there.”

–C.F., Houston youth

Number and Rate of Runaways Referred to Juvenile Probation in Texas Counties

Some juvenile probation departments see a higher number of referrals for running away than others. For example, while Harris County has a higher child population, Dallas County has a higher number of referrals for runaways.¹¹² The number of runaway referrals is not driven by youth population, as can be seen from the next chart.

Top 15 Counties with the Highest Total Runaway Referrals to Probation and Total Runaway Youth Referred to Probation, Ranked by Total Referrals (Fiscal Year 2015)

Rank	County	Total Referrals	Total Youth	Population (Ages 10-17) ¹¹³
1	Dallas	681	485	291,431
2	Cameron	324	226	59,829
3	Brazos	213	126	18,230
4	Harris	199	153	526,959
5	Hidalgo	190	129	123,322
6	McLennan	180	106	26,698
7	Webb	159	96	39,464
8	Nueces	136	90	41,033
9	Collin	106	78	118,516
10	Tarrant	82	72	239,222
11	Denton	77	56	93,750
12	Montgomery	61	50	66,680
13	Bexar	57	44	219,493
14	Tom Green	51	33	11,786
15	El Paso	44	41	102,335
Grand Total		2,560	1,785	

111 TEX. FAM. CODE §51.03(b)(2)(definition of conduct indicating a need for supervision includes “the voluntary absence of a child from the child’s home without the consent of the child’s parent or guardian for a substantial length of time or without intent to return”).

112 Data obtained from Texas Juvenile Justice Department by Texas Appleseed through open records requests.

113 National Center for Health Statistics (2017). *Vintage 2016 postcensal estimates of the resident population of the United States (April 1, 2010, July 1, 2010-July 1, 2016), by year, county, single-year of age (0, 1, 2, ... 85 years and over), bridged race, Hispanic origin, and sex*. Prepared under a collaborative arrangement with the U.S. Census Bureau. Available online from http://www.cdc.gov/nchs/nvss/bridged_race.htm as of June 26, 2017, following release by the U.S. Census Bureau of the unbridged Vintage 2016 postcensal estimates by 5-year age groups. [Retrieved 7/8/2017]

Dallas County’s unusually high numbers may be driven by the police department’s creation of a specialized task force that prioritizes “high risk victims,” which appear to be defined as repeat runaways at high risk of exploitation and child trafficking.¹¹⁴ However, the overwhelming majority of Dallas County’s referrals are not repeat runaways; while there were a total of 681 *referrals* for runaway youth, these referrals were made for 485 youth.

And while urban counties like Dallas and Harris tend to have the highest *number* of referrals for runaways, some suburban and rural counties have a comparatively high *rate* of runaway referrals, given the child population in that county.¹¹⁵

Top 15 Counties with Highest Rates for Runaway Referrals to Juvenile Probation (Fiscal Year 2015)

Rank	County	Total Referrals	Population Total¹¹⁶ (Ages 10-17)	Referral Rate per Thousand Youth
1	Brazos	213	18,230	12
2	Hockley	26	2,749	9
3	Ward	10	1,452	7
4	Gray	17	2,514	7
5	McLennan	180	26,698	7
6	Howard	23	3,594	6
7	Cameron	324	59,829	5
8	Hutchinson	11	2,535	4
9	Tom Green	51	11,786	4
10	Reeves	6	1,415	4
11	Webb	159	39,464	4
12	Milam	9	2,581	3
13	Nueces	136	41,033	3
14	Kerr	15	4,539	3
15	Burnet	15	4,772	3

Note: Blanco County, Culberson County, Menard County, and Red River County were excluded from this analysis due to low population sizes (<300 youth) and/or fewer than 5 “Runaway” cases in 2015.

¹¹⁴ See Dallas Community High Risk Victims Task Force, <https://dallascommunityhrvtf.wordpress.com/> (last visited October 7, 2017); see also Dallas High Risk Victims Model PowerPoint (2008), available at <https://www.doi.state.wi.us/sites/default/files/ocvs/specialized/Fassett-%20National%20Research%20Council%20Sex%20Trafficking.pdf>; Dallas Police Dep’t., High Risk Victims and Trafficking Program, PowerPoint (2008), available at http://www3.dallascityhall.com/committee_briefings/briefings0308/PS_HighRiskVictims_030308.pdf

¹¹⁵ Data obtained from Texas Juvenile Justice Department by Texas Appleseed through open records requests.

¹¹⁶ National Center for Health Statistics, *supra* note 113

How many young people who run away are reported missing in Texas?

It is important to remember that the youth who are arrested by law enforcement or referred to juvenile probation departments do not represent the total number of children who have run away from home. In fact, the number of youth who are reported missing to law enforcement is much higher.

Even the youth who run away and are reported missing to law enforcement may represent just a small percentage of those who actually run away. According to a national study, only 21 percent of youth who ran away were reported missing to law enforcement.¹¹⁷ Of the parents or caretakers who did not report the youth missing, most indicated they either knew where the child was, did not think the police were needed, or the child was not gone long enough to make a report.¹¹⁸

In Texas, close to 45,000 children were reported missing in 2016.¹¹⁹ While children reported missing may include youth who were abducted or lost, the vast majority—90 percent—are runaways.¹²⁰ Research suggests that most runaway youth—77 percent—return (or are returned) within a week.¹²¹ A smaller group—15 percent—are gone for more than a week but less than a month, with only 7 percent gone for more than a month.¹²² These figures suggest that in Texas each year, more than 9,000 children and youth run away and are gone for more than a week, and more than 3,000 run away and are gone for more than a month.

Top 15 Counties with the Highest Count of Youth Reported Missing to Law Enforcement (2016)

Rank	County	Youth Reported Missing
1	Harris	8,343
2	Dallas	6,072
3	Bexar	4,645
4	Travis	2,985
5	Tarrant	2,820
6	Hidalgo	2,281
7	El Paso	1,478
8	Cameron	1,293
9	Nueces	968
10	Bell	938
11	Webb	639

117 U.S. DEP'T OF JUSTICE, OFFICE OF JUVENILE JUSTICE AND DELINQUENCY PREVENTION (OJJDP), NATIONAL INCIDENCE STUDIES OF MISSING, ABDUCTED, RUNAWAY, AND THROWN AWAY CHILDREN (2002), available at <https://www.ncjrs.gov/html/ojjdp/nismart/04/>

118 *Id.*

119 Data provided to Texas Appleseed by the Texas Department of Public Safety, on file with author.

120 Nat'l Ctr. for Missing & Exploited Children, *Key Facts: NCMEC by the Numbers*, <http://www.missingkids.org/keyfacts> (last visited October 7, 2017).

121 NAT'L RUNAWAY SAFELINE, *supra* note 87, at 8.

122 *Id.*

12	Lubbock	588
13	Jefferson	586
14	Collin	563
15	Fort Bend	544

These numbers are far higher than the number of Texas youth who are arrested by law enforcement or referred to juvenile probation departments for running away. Even if we exclude 77 percent of the youth and assume that they returned home within a week, the number of youth in that remaining 23 percent who are gone for more than a week are higher. It is difficult to know the reasons for the large disparities between these numbers. Possible explanations include:

- Youth returned home before being picked up by law enforcement;
- Law enforcement returned the youth to their parent or guardian without making a formal arrest or referral to the juvenile system;
- The youth is still missing.

This, in part, reflects something we heard during our interviews: Jurisdictions have very different responses in responding to runaways. Several police officers indicated that their department policy required them to take the youth to the juvenile detention center. Others indicated that if the youth's home was within their jurisdictional boundaries, they would attempt to contact the parent or guardian, or the youth would be taken to an emergency shelter for minors. In those jurisdictions, only youth from outside the county are taken to juvenile detention.

"If we encounter a runaway and they are local, we call their parent [or] guardians. If they are not local, we take them to our juvenile detention facility, and they contact guardians and keep the minor until they can be picked up. CPS becomes involved when there is no guardian or the parents are deemed unfit to release the minor to their custody."

**–Patrol Lieutenant,
Municipal Police Department,
North Texas**

“If they’re listed as [a] runaway...then of course they go to the juvenile detention center, and they fall within the...statutory provisions for a runaway there...If they’re not listed, depending on the age...I would venture to guess that most officers are going to recognize... that the child is in some kind of need or distress and try to do some outreach to locate the parent and...make sure that you’re not just leaving a child unattended in what might be a dangerous situation.”

**–Executive Chief Deputy
Sheriff’s Department, North Texas**

“[When a minor is identified as a runaway] the youth is usually returned to a family member. If a family member cannot be located, CPS will be contacted for their assistance.”

**–Community Response Officer
Municipal Police Department,
East Texas**

“Once the officer finds out and verifies that they’re listed as [a] runaway, then they try to call the parents. If they can’t get ahold of the parents, and they’re listed as a [local] runaway, we take them to [the local emergency shelter]. If they’re from another jurisdiction, then we’ll take them to [juvenile detention] and drop them off there. [Juvenile probation] has to carry on the procedure of finding the parents or a guardian.”

**–Sergeant,
Municipal Police Department,
Central Texas**

“By department policy, if they’re 16 or below and they’re a listed runaway, we take them to our juvenile [detention facility], and juvenile probably takes them to CPS or they’ll ask us to.”

–Sergeant,
Homeless Outreach Team, Municipal
Police Department, Southeast Texas

While these differences may reflect local differences in resources, they may also reflect limitations in the way existing resources are being used. The Texas Department of Family and Protective Services administers the “Services to At-Risk Youth,” or STAR program, which was designed specifically to provide services to runaway and truant youth in all 254 Texas counties. STAR providers offer crisis intervention services, including family counseling and respite care, twenty-four hours a day, seven days a week at no cost to the youth and family served. However, in recent years, the program has evolved to focus on a broader variety of problems. Less than 1 percent of youth who received services through STAR in FY 2016 were receiving services because they had run away from home.¹²³ Data shows that STAR programs are effective at resolving the presenting issues for youth and families, keeping nearly 98 percent of young people served safely living at home, indicating these interventions could be helpful for resolving problems for youth who have run away. Similarly, due to lack of available funding, some emergency youth shelters will not take youth who are not CPS-involved, further limiting services that are available for runaway youth and their families.

Several stakeholders interviewed for this report noted the frustration that law enforcement officers express when the only system they had to rely on for assistance is the juvenile justice system. These officers recognize that this system is not well-suited to intervene with runaways, particularly given the frequency with which the youth’s decision to leave resulted from abuse or neglect. However, they felt the juvenile system was the only system that was at all responsive.

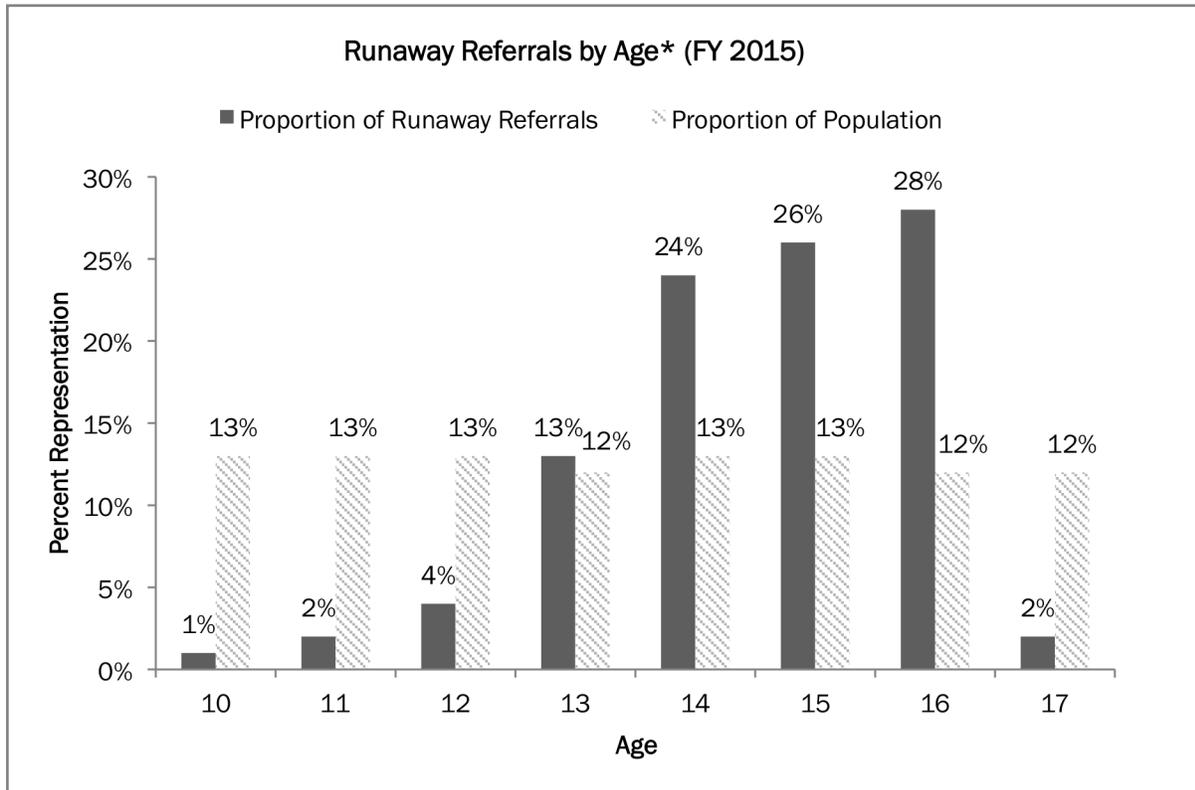
“I ran away from home when I was 11 years old, and I ran away to my father. The only reasons I left home was that I was getting abused and raped by my mother and her boyfriend. I don’t know how to describe my parents. She chose her husband over me plenty of times, so I was just stuck. I was a lonely kid basically.”

–T.S., Houston youth

¹²³ Only 176 Texas youth who had run away from home received services through STAR in FY2016. DFPS, 2016 Data Book, Prevention and Early Intervention: STAR Youth by Presenting Problem, https://www.dfps.state.tx.us/About_DFPS/Data_Book/Prevention_and_Early_Intervention/STAR_Youth_by_Presenting_Problem.asp (last visited October 7, 2017).

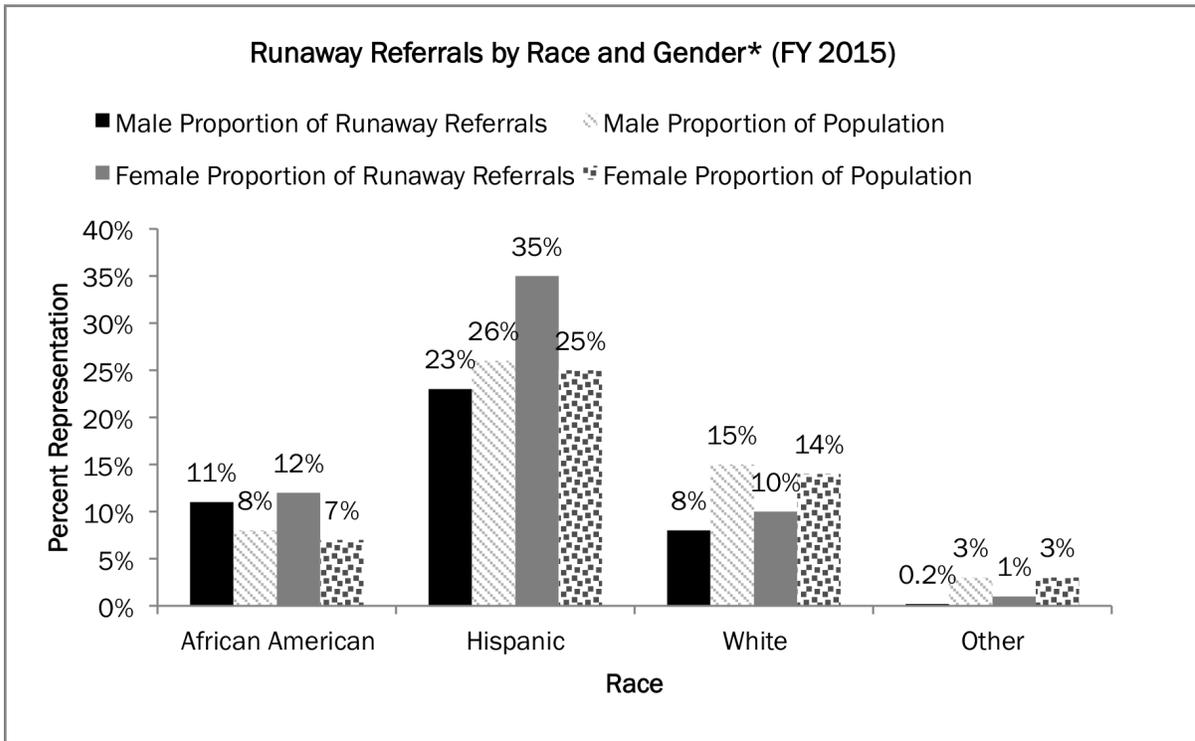
Demographics of Runaway Youth

Of the counties that had 50 or more runaway referrals, youth referred to juvenile probation were, on average, 15 years old. However, children as young as 10 were referred to juvenile probation for having run away. The low number of 17-year-olds referred is explained by Texas' treatment of those youth as adults.



**In counties with 50 or more runaway youth referred*

Latinas were referred most often, though Black youth of both genders were overrepresented compared to their total population.



**In counties with 50 or more runaway youth referred*

While the percentage of youth who had dropped out of school prior to running away was higher than the percentage of dropouts in the overall population of Texas students,¹²⁴ **the overwhelming majority of students who were referred were still in school when they ran away.**

School Status of Youth with Runaway Referrals to Probation (Fiscal Year 2015)

School Status	Count	Proportion/Total Referrals*
Regular School	1,775	73.7%
Dropped Out	70	2.9%
Suspended/Expelled	8	0.3%
Home School	39	1.6%
Alternative Education	175	7.3%
Other	341	14.2%

**Percentage calculated out of total runaway referrals in counties with 50 or more referrals*

¹²⁴ According to TEA, about 2.2% of Texas students dropped out of school in 2015. See TEA, Snapshot 2015: State Totals, <https://rptsrv1.tea.texas.gov/perfreport/snapshot/2015/state.html> (last visited October 7, 2017).

Referral Source of Youth Referred for Runaway (Fiscal Year 2015)

Referral Source	Count	Proportion/Total Referrals*
Police	2,335	97.0%
School	11	0.5%
Other	62	2.6%

**Percentage calculated out of total runaway referrals in counties with 50 or more referrals. Percentage rounded to tenths.*

Most youth who were referred to probation for running away were referred by police, with only a few referred by schools or other sources. More than half of the youth who were referred to probation had never been in contact with the juvenile system.

Prior Referrals of Youth Referred for Runaway (Fiscal Year 2015)

Prior Referrals	Count	Proportion/Total Referrals*
No Prior Referrals	1,283	53%
Prior Referrals	1,125	47%

**Percentage calculated out of total runaway referrals in counties with 50 or more referrals*

However, even for those who had a prior referral, the data discussed in the next section suggests that many of those prior referrals may have been for another runaway incident.

Use of Detention

Despite a federal prohibition on detaining young people for status offenses,¹²⁵ young people who are referred to the juvenile system for running away are being detained in Texas.

Youth Detained for Running Away, Statewide (Fiscal Year 2013-2015)

Year	Detained Less than or Equal to 24 Hours	Detained for at least 2 Days
2013	715	152
2014	663	183
2015	709	165

The federal law that prohibits use of secure detention for runaways carves out exceptions for youth who are charged with violation of a valid court order (the “VCO” exception).¹²⁶ Violating a court order may simply mean failing to comply with all the terms of probation, which can include terms unrelated to refraining from criminal behavior.¹²⁷ A youth could violate his or her probation order by getting into trouble at school, or by staying out past curfew, for example.

A youth might also violate probation by running away. In other words—running away could be the offense resulting in the VCO finding that allows the youth to be detained. In addition to the VCO exception, a youth who is referred to the juvenile system for running away could also be detained if they were referred for another offense at the same time.

“I don’t believe runaways or status offenses should be locked up ever. I think it’s a social services response that needs to be made for those children. Not lock them up.”

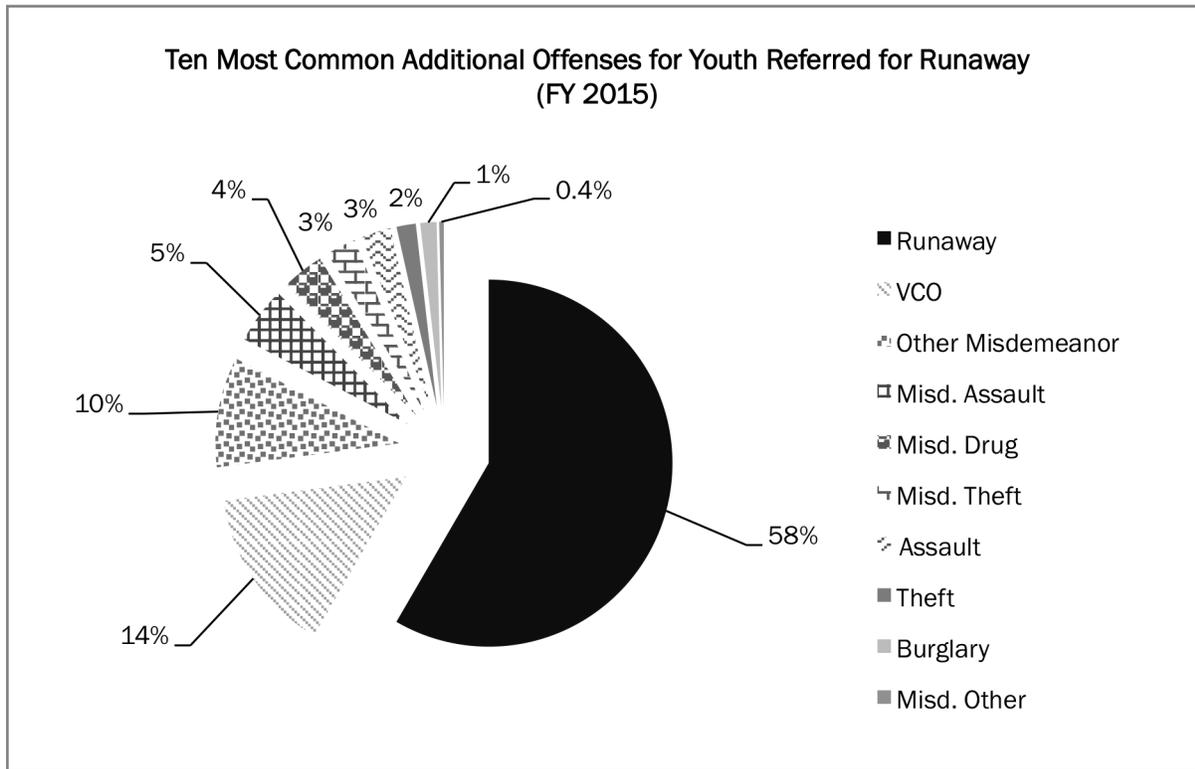
–Austin judge

¹²⁵ OJJDP, LITERATURE REVIEW: STATUS OFFENDERS (2015) (discussing requirement of JJDP that status offenders not be placed in secure detention or locked confinement), available at https://www.ojjdp.gov/mpg/litreviews/Status_Offenders.pdf. Federal law includes exceptions for secure detention up to 24 hours and for the “VCO” exception discussed later in this report.

¹²⁶ *Id.*

¹²⁷ For example, some probation orders include language related to behavior at school and school attendance.

However, of the Texas youth who were referred to the juvenile system for running away at the same time they were referred for another offense, the most common additional offenses were another (or multiple) runaway offenses and VCO. In fact, the additional runaway offenses constitute well over half of all the “other” offenses that youth are charged with at the same time that they are referred to juvenile probation for running away.



This suggests that many Texas youth run away more than once, indicating that our current response is not effective for these young people. It is possible that some portion of the Texas youth who spend time in detention as a result of a VCO may have simply run away for a second time—in other words, their violation was merely the result of running away, a prohibited action outlined in an order. Multiple runaway events, which carry their own risks, are only compounded by repeated contact with the juvenile justice system.

This data also makes clear that most young people who run away are not simultaneously committing serious crimes, even when they are charged with something other than a status offense. The vast majority of criminal offenses that runaways are simultaneously charged with are misdemeanors—crimes that, in and of themselves would rarely warrant detention, which should be reserved only for those who cannot be safely kept in their community.

Some Texas counties use detention for runaways more often than others.

**Top 15 Counties with the Highest Number of Runaway Youth Detained,
Ranked by Count (Fiscal Year 2015)**

Rank	County	Count	Proportion/Total Detained*
1	Brazos	169	19%
1	McLennan	169	19%
3	Webb	109	12%
4	Harris	58	7%
5	El Paso	43	5%
6	Bexar	34	4%
7	Denton	27	3%
8	Dallas	26	3%
9	Tarrant	26	3%
10	Hidalgo	23	3%
11	Hays	19	2%
12	Travis	17	2%
13	Starr	16	2%
14	Collin	14	2%
15	Harrison	14	2%
Grand Total		764	

**Percentage calculated out of total youth detained*

Of these, the five counties that had the highest number of youth staying in detention for two or more days were McLennon (46), Hidalgo (19), Harris (16), Bexar (15), and El Paso (10).

The use of secure detention for runaways is not only inconsistent with best practices—it can cause more problems than it solves.¹²⁸ Research consistently shows that housing runaway youth with young people who have committed more serious offenses places the youth who have run away at higher risk of poor outcomes, including more serious offending later.¹²⁹ Furthermore, a high percentage of young people run away due to trauma they experienced in their own homes. Placing them in a secure setting, where they are confined and monitored and away from familiar places, increases the risk of re-traumatization.¹³⁰ It also fails to address the underlying problem that caused the youth to run from home.

128 VERA INST. OF JUSTICE, FROM COURTS TO COMMUNITIES: THE RIGHT RESPONSE TO TRUANCY, RUNNING AWAY, AND OTHER STATUS OFFENSES (2013); COAL. FOR JUV. JUST., NATIONAL STANDARDS FOR THE CARE OF YOUTH CHARGED WITH STATUS OFFENSES (2015).

129 *Id.*

130 See SUE BURRELL, TRAUMA AND THE ENVIRONMENT OF CARE IN JUVENILE INSTITUTIONS (2013), available at http://www.njjn.org/uploads/digital-library/NCTSN_trauma-and-environment-of-juvenile-care-institutions_Sue-Burrell_September-2013.pdf

While our conversations with stakeholders suggest that the use of detention may be perceived as essential because shelter services aren't available or because of the risk that a trafficked youth will return to the trafficker, it is critical to distinguish a youth's *needs*—in this case, their need for safe housing—from *risks*. **Where the youth does not pose a risk, use of detention to meet housing needs is an inappropriate use of those resources.**¹³¹ The potential harms associated with detention make it inappropriate as a housing option, or as a precaution for keeping youth safe from harm or victimization.¹³²

“When we contact runaways and homeless youth on the street, they are very worried, very street-wise, and very careful. Runaway homeless youth are afraid that you will make them go back to the home they ran from; therefore, they fly under the radar. I did it. I was in a school where I had 68 kids in my class in a town of less than 5,000, and I flew under the radar and finished high school. Only a handful of friends who helped me by allowing me to couch surf even knew I was homeless.”

—Service Provider, Central Texas

Beyond the use of secure detention prior to disposition of a runaway case, most of these cases are disposed of through “supervisory caution,” which allows juvenile probation departments to dispose of a case without putting a youth through any court process.¹³³ Many of the remaining cases are dismissed outright, with only a handful being forwarded to a prosecutor or the court.¹³⁴

For example, of the 3,236 runaway cases that were disposed of in 2013, **1,983 of the youth received a supervisory caution, and 493 had their cases dismissed** by juvenile probation.¹³⁵ Two hundred twenty-eight received a deferred disposition from juvenile probation. This left only 532 cases to be referred on to a prosecutor or court.¹³⁶ Of those, 228 were dismissed by the prosecutor.¹³⁷ Only 275—a mere 8 percent—were sent to a court—151 of which were consolidated with another case, indicating that the youth likely had more serious charges pending at the same time.¹³⁸ **The low percentage of cases requiring prosecution indicates that cases involving youth who run away could be safely addressed outside the juvenile system.**

131 COAL. FOR JUV. JUST., ADDRESSING THE INTERSECTIONS OF JUVENILE JUSTICE INVOLVEMENT AND YOUTH HOMELESSNESS: PRINCIPLES FOR CHANGE 7 (2017).

132 *Id.*

133 TJJJ, THE STATE OF JUVENILE PROBATION ACTIVITY IN TEXAS 2013 (2016).

134 *Id.*

135 Data obtained from TJJJ through open records request from Texas Appleseed.

136 *Id.*

137 *Id.*

138 *Id.*

Specialized Training for Law Enforcement

Interviews with police officers revealed the need for specialized training for officers, both to make them aware of issues surrounding homelessness, and to sensitize them to the trauma histories that may affect behavior and responses to interactions with police officers. An Austin service provider said, “If we had more community policing with trained mental health professionals, that would be fantastic.”¹³⁹

Some of the officers that we interviewed did not seem familiar with the issues specific to youth homelessness. One officer that we interviewed told us:

*[T]he majority of the time, they're not seeking help other than maybe a handout (laughs). They're content with their situation...I can think of one female, her name is Heather, who is probably in her early 20s...and she did not have any obvious mental illness or anything like that. So, you know, you look at somebody like that [and] you're thinking, "O.K., why are you here and why do you want to stay in this situation?" I asked her basically those questions. She said she didn't get along with her parents; she couldn't live at home with her dad anymore. I didn't go into that any further because she wasn't volunteering anything. I asked her, "Why aren't you staying at the shelter over at Salvation Army?" [She] said it's safer on the street than it is in the shelter. Now, I don't know if that's a perception thing or a story she's heard or what; I'm certainly not agreeing with that.*¹⁴⁰

Several officers indicated that they did not believe their community had a problem with youth homelessness because they never saw youth experiencing homelessness on the street.¹⁴¹ Another officer expressed frustration at the cyclical nature of the traditional law enforcement response to homelessness:

*There's aggressive panhandling; there are people urinating and defecating in the alleys in front of us. They're drunk in public. There's people camping out and trashing the place. All of that becomes a problem for the police. We have to come address it. The homeless youth don't like that we're addressing it. We have to enforce laws. Sometimes people have to get arrested and go to jail. It just becomes a constant back and forth between them and the police. The police are just doing the only thing they know how to do, which is law enforcement, and there's a lot of pushback from the homeless youth...police come in, everyone scatters, the police leave, and everyone comes back. Unless there's a systemic change to homelessness...that's the way it's been in my 22 years, that's the way it was before I got here, and that's the way it's going to be when I leave unless something changes.*¹⁴²

¹³⁹ Interview on file with author.

¹⁴⁰ Interview on file with author.

¹⁴¹ Interviews on file with author (officer does not think they have any youth experiencing homelessness and can't remember an encounter with a youth he knew to be experiencing homelessness); (“I don't see homeless youth out on the street languishing”); (officer believes most youth experiencing homelessness are staying in shelters with a guardian, but says he has not seen many homeless youth); (officer says they don't encounter many youth experiencing homelessness but when they do it is generally a whole family).

¹⁴² Interview on file with author.

Some cities, like Houston and Austin, have created units within their municipal police departments that are specially trained to respond to those who are homeless. These officers prioritize connecting people with social services rather than relying on a traditional law enforcement model.¹⁴³ The Sergeant of the Houston unit describes the effectiveness of their approach:

*We've kind of changed the relationship paradigm between law enforcement and the folks on the street. We've got a great relationship with them. When we first started the unit, we couldn't find anyone who was "hugging the homeless" as they once said. Now there are scores of people waiting to do a rotation with our unit. So they do a rotation with us and take back what they've learned to whatever part of the city they are working in. I get calls or e-mails every day about officers who have talked to somebody, and they're ready to get off the street. They just need to know what the next step is, and we'll go out and help them.*¹⁴⁴

He explains that this approach gives officers tools that are more effective than the traditional model of relying on the penal code or city ordinances to address homelessness.¹⁴⁵ One Houston youth described a positive interaction with an officer: "[M]y best friend was out on the street with her baby, and a police officer came up and paid for us to be in a hotel for a month. We were good for a month with the babies. I didn't know there were police like that out here."¹⁴⁶

County & Municipal Curfew Ordinances

Daytime & Nighttime Curfews for Youth Under 17

Some Texas counties and municipalities create an additional status offense not named in state law: violation of a daytime or nighttime curfew. These curfew ordinances may also serve to push youth experiencing homelessness into the court system. Curfew ordinances prohibit young people from being in public places during certain hours.

Curfew ordinances vary among the Texas cities that have passed them. Some cities have adopted both daytime curfews, effective during school hours, and nighttime curfews. Others have adopted only a nighttime curfew. Nighttime curfew hours vary from city to city—Fort Worth's nighttime curfew, for example, starts at 11:00 during the week and midnight on weekends, while Round Rock's nighttime curfew starts at midnight during the week and at 1 a.m. on weekends.¹⁴⁷

143 See Houston Police Officer's Union, Badge & Gun, HPD's Homeless Outreach Team recognized as outstanding example of community policing and trainers of other PD's (January/February 2016), <http://www.hpou.org/hpds-homeless-outreach-team-recognized-as-outstanding-example-of-community-policing-and-trainers-of-other-pds/> (last visited October 7, 2017); Austin Police Dep't, Homeless Outreach Street Team, <https://www.austintexas.gov/department/homelessness-outreach-team> (last visited October 7, 2017).

144 Interview with Sergeant Steve Wick, Houston Police Dep't Homeless Outreach Team, on file with author.

145 *Id.*

146 Interview on file with author.

147 FORT WORTH CODE OF ORDINANCES § 23-19; CODE OF ORDINANCES CITY OF ROUND ROCK, TEXAS, ARTICLE II—YOUTH CURFEW.

“The problem isn’t necessarily the initial charge, it’s the cumulative charge. They don’t go to court, they’re not represented, they have a warrant out for their arrest, and then it becomes a big hairy deal. It’s just the not getting things taken care of right up front.”

–Houston-area service provider

Despite the fact that these offenses are also status offenses charged only against children, they are charged as Class C misdemeanors in adult criminal courts—Texas’ justice and municipal courts.¹⁴⁸ Children and young people may be fined up to \$500 and will have a criminal record if convicted.¹⁴⁹ In fiscal year 2015, 4,808 cases of daytime curfew violations were processed through these courts in Texas—the majority in municipal courts, since they are charged as a violation of a municipal ordinance.¹⁵⁰ Prosecution rates vary from city to city, with only a handful of counties prosecuting cases in justice courts.¹⁵¹

**Top 10 Cities for Prosecution of Juvenile
“Violation of Local Daytime Curfew” Cases (Fiscal Year 2015)**

Rank	City*	Count
1	El Paso	641
2	Houston	553
3	Dallas	536
4	Lubbock	409
5	Pasadena	393
6	Austin	338
7	Fort Worth	194
8	Temple	102
9	La Porte	95
10	Aransas Pass	75

*Municipal courts by city

While these ordinances are not necessarily directed at youth experiencing homelessness, young people experiencing homelessness may be more likely to be charged.¹⁵² Though curfews were encouraged as a method of preventing juvenile crime, there is little evidence supporting them as an effective crime deterrent.¹⁵³

148 See TEX. APPLESEED & TEXANS CARE FOR CHILDREN, DANGEROUS DISCIPLINE (2016), available at <http://stories.texasappleseed.org/dangerous-discipline>

149 *Id.*

150 TEX. OFF. OF COURT ADMIN., 2015 ANNUAL STATISTICAL REPORT, available at <http://www.txcourts.gov/statistics/annual-statistical-reports/2015/>

151 *Id.*

152 See Sana Johnson, What City Leaders Should Know About Curfews for Minors (April 28, 2016), <https://cityspeak.org/2016/04/28/what-city-leaders-should-know-about-curfews-for-minors/> (last visited October 7, 2017).

153 See Elyse R. Grossman et al, *A Systematic Review of the Impact of Juvenile Curfew Laws on Public Health and Justice Outcomes*, 49(6) AM. J. PREV. MED. 945 (2015).

Survival Behavior & Criminalization of Homelessness - Young People Age 17 & Older

Those 17 and older are “adults” in the eyes of the Texas Penal Code and are not subject to Family Code provisions related to running away or municipal codes regarding curfews.¹⁵⁴ However, older youth may also be subject to criminal prosecution for crimes directly related to their homelessness. Some of these are violations of municipal ordinances that directly target the status of being without housing—like camping or sitting or lying on a public sidewalk. Others are Texas Penal Code violations—like theft or trespassing—that result from attempts to meet basic needs. **The Department of Public Safety shows more than 200 young people aged 17 to 24 are arrested each year for “vagrancy.”**¹⁵⁵

“Some nights when I didn’t go prostitute, I decided to go steal, and I almost went to jail like four or five times for stealing food out of the stores.”

–T.S., Houston youth

“We took things from stores and pawned it. I pawned my own stuff. Steal stuff. Go through a drive through and say that we didn’t get our food and they’d give us food.”

–H.H., Dallas youth

“Most of the young people I ran into were just doing anything to make money. Panhandling or joining a gang if they could stay in a house with a couple of gang members. They were pretty much doing anything just to have a place to stay or make money until they could get a motel for a few nights or something.”

–W.P., Houston youth

¹⁵⁴ This may be the underlying reason behind what many of the youth we talked to reported to be a policy of DFPS not to pursue 17-year-olds who run away from a placement.

¹⁵⁵ TEX. DEP’T OF PUB. SAFETY, *supra* note 107.

Municipalities across the state have passed ordinances that criminalize panhandling, sitting or lying on a public sidewalk, and camping.¹⁵⁶ Many of the youth we interviewed spoke of having been charged with violating one of these ordinances. One youth described getting arrested while trying to charge her cell phone at a McDonald's. Another youth said:

Businesses will call [the police] if we loiter or try to get a drink of water. If we sit at a restaurant for a couple of hours, the next thing we know the police are getting on our butts about it. It just feels like we can't be normal people because we always have the issue of looking behind us wherever we go or want to hang out. Are the police going to harass us for this, that or the other? Especially because we're younger.

In Texas, a violation of these ordinances is also a Class C misdemeanor that may carry a fine of up to \$500, and results in a conviction that creates a criminal record. In Dallas alone, between 2012 and late 2015, over 11,000 citations had been issued to people who were homeless for violating a local ordinance that prohibited sleeping in public.¹⁵⁷ And in 2015 alone, more than 2,000 citations were issued for panhandling in Dallas.¹⁵⁸ In Austin, more than 15,000 citations were issued for violation of the city's "no sit/no lie" ordinance between 2011 and late 2015.¹⁵⁹ Not surprisingly, the vast majority of the fines assessed went unpaid.¹⁶⁰

"Whenever you don't generally have something to do, just finding somewhere where you can sit down and relax. I think that's the main problem. I have so many countless tickets... for just sitting down somewhere downtown for just 10 minutes and having police pull up and give me a ticket. I've never had the money...and I always thought it was kind of ridiculous anyway that they were giving me a ticket. So I just let the warrant come out, spent the night in jail."

-T.N, Austin youth

When young people who are homeless commit crimes, they are most often non-violent crimes like these, related to their status as homeless or that arise from "survival behavior."¹⁶¹ Research indicates that the most common survival behaviors for homeless young people include panhandling, survival sex or prostitution (also discussed above in the section discussing victimization & human trafficking), drug dealing, and theft.¹⁶² Difficulty that youth who are not housed experience in finding employment—and keeping employment—often leads them to engage in survival behavior; unemployment is one of the risk factors most strongly associated with engaging in survival behaviors.¹⁶³

156 See NAT'L LAW CENTER ON HOMELESSNESS & POVERTY, HOUSING NOT HANDCUFFS (2016), available at <https://www.nlchp.org/documents/Housing-Not-Handcuffs>

157 *Id.* at 11.

158 *Id.*

159 Andrew Weber, *No Sit/No Lie Citations Handed Out by the Thousands, and Most Go Unpaid*, KUT.ORG, October 5, 2015.

160 *Id.*; Makeda Easter, *Nowhere to Go Young Homeless and Slipping Through the Cracks*, AUSTIN CHRON., November 6, 2015.

161 See Kristin M. Ferguson et al, *Correlates of Street-Survival Behaviors in Homeless Young Adults in Four U.S. Cities*, 81 AM. J. ORTHOPSYCHIATRY No. 3, 401-409 (2011).

162 *Id.* at 402; NAT'L CENTER FOR HOMELESS EDUC., BEST PRACTICES IN INTERAGENCY COLLABORATION: YOUTH HOMELESSNESS AND JUVENILE JUSTICE, available at http://nche.ed.gov/downloads/briefs/juv_just.pdf

163 Ferguson, *supra* note 161, at 406.

“The only time [the police] have really bothered me is when I’m sleeping somewhere I’m not supposed to. I only got criminal trespassing once, and it was because I was in an area I didn’t know I wasn’t supposed to be in. I went to jail for it.”

–R.G., Austin youth

“I slept in a very tight space between two buildings because it was the only place I could find where I could hide away from the police so I didn’t get caught up. I ate out of dumpsters. I flew a sign to make money and got into the drug scene.”

–B.H., Austin youth

Transition Out of the Juvenile or Criminal Justice System

In addition to the very direct ways that being homeless can result in juvenile or criminal justice involvement, involvement in those systems can also place young people at heightened risk of homelessness. A survey of youth who participated in street outreach programs showed that more than 60 percent had been arrested at some point.¹⁶⁴ Twelve percent of those youth indicated they had been arrested more than eight times, indicating that some get caught in a cycle of criminal justice or juvenile justice involvement and homelessness.¹⁶⁵ And approximately 7 percent directly attributed their first experience of homelessness to exiting jail or prison.¹⁶⁶

Having a juvenile or criminal record can make finding a job and obtaining housing difficult.¹⁶⁷ A criminal history is a barrier to both public and private employment in Texas, and can act as a bar to professional licensing, which is needed for more than 150 occupations.¹⁶⁸ Depending on the conviction, a criminal record can also mean the loss of federal benefits.¹⁶⁹ One Houston youth we interviewed told us about his experience:

[Finding a job after graduation] was the big reason that led me to my homelessness. When I was younger I was hanging with a bad crowd and got felony charges [for breaking into a house and stealing food out of the refrigerator]. I was in grade school... Then when I went to college, I had work study the whole time, but that was through the school. But when I graduated, welcome to the real world, and I had felonies... Every job was like ‘no, no, no.’ That was my main barrier against employment. A lot of the [employers] wouldn’t even hear the story. I got breaking and entering charges, but when you look it up, I stole food.¹⁷⁰

164 ACF, *supra* note 10, at 63.

165 *Id.*

166 *Id.* at 31.

167 HELEN GAEBLER, CRIMINAL RECORDS IN THE DIGITAL AGE: A REVIEW OF CURRENT PRACTICES AND RECOMMENDATIONS FOR REFORM IN TEXAS 5-6 (2013).

168 *Id.*

169 *Id.* at 7.

170 Interview on file with Texas Appleseed.

“Over-criminalizing the behaviors of young people is a huge problem. Putting young people into impossible situations with probation and detention—it disrupts their neighborhood continuity, it disrupts their education continuity, and we definitely find that young people who we talk to who are homeless have had past histories with juvenile justice, juvenile probation, and the child welfare system. What we’re doing isn’t working, and we’re losing generations of particularly young African American men. And we’re going to have a major crisis coming up soon.”

—Houston advocate

It poses a barrier to housing, with many landlords refusing to consider renting to someone with a criminal history.¹⁷¹ Even public housing options may be limited, though HUD recently issued guidance indicating that use of criminal history to deny housing could run afoul of federal fair housing law.¹⁷² These barriers place those transitioning out of the juvenile or criminal justice system at increased risk of homelessness, which in turn increases their risk for recidivism.¹⁷³

“A lot of them can’t get jobs because of their background. That makes them turn around and do things that on an average day they probably wouldn’t have done if they had a different way of getting help.”

—J.P., Houston youth

Young people who transition out of the juvenile system may face a different barrier: Their parent or guardian may not be an option for housing once they are ready to leave a secure facility.¹⁷⁴ In addition to being a potential indicator for housing instability and a possible risk factor for future homelessness, this can also lead to youth being held in secure facilities longer.¹⁷⁵ This can occur when a youth is ready to leave either a county probation juvenile facility, or a state secure facility run by the Texas Juvenile Justice Department (TJJD).

While county juvenile probation departments in Texas are not tracking the number of youth who cannot be discharged to their parent or guardian or the home they lived in prior to placement, juvenile probation chiefs report that this is a barrier to releasing youth. **In FY 2015, DFPS indicated that 874**

171 Gaebler, *supra* note 167, at 6.

172 U.S. DEP’T OF HOUSING & URB. DEV., OFF. OF GEN. COUNS., GUIDANCE ON APPLICATION OF FAIR HOUSING ACT STANDARDS TO THE USE OF CRIMINAL RECORDS BY PROVIDERS OF HOUSING AND REAL ESTATE-RELATED TRANSACTIONS (2016), available at https://portal.hud.gov/hudportal/documents/huddoc?id=HUD_OGCGuidAppFHASandCR.pdf

173 GAEBLER, *supra* note 167, at 6.

174 See COLUMBIA LEGAL SERVICES, FALLING THROUGH THE GAPS: HOW A STAY IN DETENTION CAN LEAD TO YOUTH HOMELESSNESS (2015).

175 *Id.*

children were in care as a result of a “refusal to accept parental responsibility” (RAPR).¹⁷⁶ Since this term is used whenever a child has been absent from the home for any reason and is not allowed by their parent or guardian to return, it isn’t clear how many of these were juvenile justice-involved youth. But based on our interviews and research, it is safe to assume that a significant number are young people who were not allowed to return home after being in a juvenile facility. Stakeholders interviewed as part of *Youth Count Texas!* noted that this is a problem for youth exiting juvenile facilities, indicating that young people “are sometimes stuck when parents refuse to pick them up” from detention.¹⁷⁷

One juvenile probation officer interviewed for this report noted that they encountered this problem and tried to assist youth in preparing to be on their own. He noted, “Kids don’t always stay with their families when they get off of probation, so we try to prepare them for adulthood and adult living. What I mean by that is getting the documents that adults have like a birth certificate, a social security card, and an ID. That’s a very difficult process to navigate if you don’t have one of those documents... You can’t get an ID if you don’t have an original birth certificate and social security card. You can’t get a social security card if you don’t have a birth certificate. What comes first? The chicken or the egg? When kids are homeless, they need an easier route to obtain these documents.”¹⁷⁸

The same probation officer said that even when a home is approved for the youth to return to, the trauma they have encountered during their time away from home makes it difficult for them to return, particularly if they were trafficked. He said, “It’s very difficult for them to go back to living at home because their parents want them to be a kid, and they’ve just experienced too much to be a kid. It’s a tough role for them to be in. There needs to be some kind of living situation where they can prepare for living on their own.”¹⁷⁹

And though counties do not track this data, TJJD does track the number of youth for whom the parent or guardian’s home was not approved for release once the youth was ready to transition out of a state secure facility. TJJD’s data indicates that **from 2013 to 2015, 321 youth were unable to return to the home they lived in** prior to being committed because TJJD disapproved it for the youth’s release.¹⁸⁰

Regardless of the reason that the home was disapproved, the inability of the youth to return home on release could signal longer-term housing instability.¹⁸¹ In fact, TJJD’s data shows that of these 321 youth, 93 were unable to return home because the agency wasn’t able to locate the youth’s family at all.¹⁸² Another 54 were unable to return because of the physical absence of a residence.¹⁸³ In 53 cases, the youth was over 18 and the parent or guardian was unwilling to accept them back into their home.¹⁸⁴ And in 35 cases, the home was disapproved due to serious physical or sexual abuse, neglect, or because parental rights had been terminated.¹⁸⁵

176 NARENDORF, *supra* note 4, at 22.

177 *Id.* at 36.

178 Interview on file with author.

179 Interview on file with author.

180 Data obtained from TJJD through open records request by Texas Appleseed.

181 PAUL A. TORO ET AL, HOMELESS YOUTH IN THE UNITED STATES: RECENT RESEARCH FINDINGS AND INTERVENTION APPROACHES 6-11 (2007), *available at* <https://www.huduser.gov/portal/publications/pdf/p6.pdf> (“Without a positive support network or stable living arrangement to which they can return, these juvenile and young adult offenders are at high risk of becoming homeless after their release.”).

182 Data obtained from TJJD through open records request by Texas Appleseed. In data showing reasons for disapproval, a youth may be counted more than once.

183 *Id.*

184 *Id.*

185 *Id.*

This data is consistent with data from other states. For example, one youth shelter in New York reported that of the approximately 30 percent of the youth they served who had been detained or incarcerated before being homeless, 68 percent had lived with family or guardians prior to their incarceration.¹⁸⁶ Similarly, a Washington study showed that court-involved youth participating in a workforce program were less likely to be living with their parents and more likely to have no permanent address.¹⁸⁷ And as is true of their adult counterparts, young people released from juvenile facilities without stable housing can become trapped in a cycle of homelessness and incarceration.¹⁸⁸

While TJJD offers youth who may not be able to transition home a subsidy to support living expenses when they transition out, the program is rarely utilized. In 2015, only 17 youth were enrolled in the “Subsidized Living Support Program.” This is likely because the eligibility requirements make it difficult for youth to qualify for the program. For example, in order to qualify, a youth must both complete an independent living preparation curriculum and have enough personal savings to pay all deposits and the first month’s rent for an apartment.¹⁸⁹

Statutory Requirements for Youth Released from TJJD Facilities

The Texas Human Resources Code requires that prior to releasing youth from their secure facilities, the Texas Juvenile Justice Department must create a comprehensive re-entry and reintegration plan that assures continuity of care.¹⁹⁰ The plan is required to include an array of services:

- Housing assistance
- Family counseling
- Academic and vocational mentoring

The agency is required to assess children committed to its facilities to determine what skills the youth needs to develop to be successful in the community following release, and then provide those programs, including life-skills training, education and employment training, and appropriate treatment programs. It is also required to identify transition programs that the agency will contract with to aid the youth with re-entry.

186 PAUL A. TORO ET AL, *supra* note 181, at 6-11.

187 *Id.*

188 *Id.*

189 TEX. JUVENILE JUSTICE DEP’T, GENERAL ADMINISTRATIVE POLICY 380.8583.

190 TEX. HUM. RES. CODE § 245.0535

Conclusion & Policy Recommendations

The intersections between the juvenile and criminal justice systems and youth homelessness occur at multiple levels. There are direct contacts with these systems resulting from homelessness, when charges are the direct result of lack of housing or its symptoms. But another intersection exists when contact with the juvenile and criminal justice systems leads to or perpetuates homelessness. Effective policy solutions must be rooted in an understanding of both these “push” and “pull” effects—the juvenile and criminal justice systems pull in youth experiencing homelessness when symptoms of homelessness or survival behavior are criminalized, but also push young people into homelessness as a result of system involvement.

FINDING: Homelessness carries increased risks of victimization for youth, including heightened risks of human trafficking.

Policy Recommendation: Texas should place a priority on preventing youth from encountering homelessness, recognizing that investing in prevention will save lives and state resources by avoiding poor outcomes that place a higher burden on other systems in the long term.

Policy Recommendation: Texas should continue to invest resources in protecting youth and helping them recover from human trafficking, creating an appropriate, trauma-informed continuum of care outside the juvenile justice system for youth who have been trafficked.

FINDING: Young people who are picked up by law enforcement after running away from home are met by varying responses, depending on the county where they are found. In some counties, youth are detained, despite federal law prohibiting use of detention for runaways.

Policy Recommendation: Law enforcement officers should be educated about best practices for identifying and interacting with homeless youth and about the services available in their community. As the first line of defense, a well-trained police force can drastically change the chance of success for a youth experiencing homelessness.

FINDING: The high number of youth in Texas who run away from home more than once shows that the current response is ineffective. Young people who run away from home are often running from abuse, neglect, or family conflict, and need a therapeutic, rather than court-based, response. The juvenile system is not well poised to address these issues, releasing youth with a supervisory caution in well over half the cases. Fewer than 10 percent of runaway cases are adjudicated, usually after being consolidated with another case, indicating that these issues can be effectively handled without juvenile justice involvement.

Policy Recommendation: Texas should remove runaway cases from the juvenile system, instead responding through a child welfare lens, emphasizing trauma-informed community-based family interventions and services.

- Schools should be brought into the conversation about solutions and made a partner in prevention, since data shows that the overwhelming majority of youth who were referred to probation for running away were still in school.

Policy Recommendation: Congress should eliminate the Violation of Court Order (VCO) exception to the prohibition on the detention of status offenders. In the meantime, Texas should clarify that youth cannot be sent to detention for VCO where the violation was another status offense.

Policy Recommendation: Pending a change in law, TJJD should partner with DFPS and other agencies to identify appropriate alternatives to juvenile justice involvement for youth who run away from home and have not committed a more serious offense.

Policy Recommendation: Stakeholders should conduct a review of STAR services and provider capacity to determine whether there are barriers to effectively utilizing the existing STAR program to address the needs of runaway youth.

- If capacity is an issue, funding should be provided to ensure adequate resources, recognizing that an appropriate response has the dual purpose of preventing human trafficking and other forms of victimization and poor outcomes in the long term.
- Texas should work with service providers to explore the possibility of using Victims of Crimes Act (VOCA) funds to support programs for youth who have been victims of abuse or neglect, or who have been trafficked.

Policy Recommendation: Conduct a review of the emergency shelters in Texas that are able to take runaway placements and assess their capacity versus need.

Policy Recommendation: Communities should look at how runaways are handled locally, and should work with stakeholders to ensure that there is an appropriate response system in place for runaway youth. Runaway youth should be diverted from detention if they are not being held for another offense. Detention should not be viewed as a viable solution, even short-term, to housing instability or homelessness. STAR providers and other youth service providers, CoCs, local child welfare boards, and faith-based partners should be included in the process of finding creative solutions that keep runaway youth out of the juvenile system, particularly in rural counties that may be starved for resources.

FINDING: Symptoms and survival behavior associated with youth homelessness is criminalized, leading to a cycle of juvenile or criminal justice system involvement that does little to meet the needs of youth and instead serves to perpetuate homelessness.

Policy Recommendation: The Texas Family Code allows youth under 17 to be charged with prostitution as a status offense and referred to the juvenile system. The law should be changed to align more completely with the prevailing understanding of minors, including youth aged 17, as victims rather than perpetrators, diverting them away from the juvenile or criminal justice system completely.

Policy Recommendation: Municipalities should review ordinances and eliminate those that criminalize youth experiencing homelessness, including juvenile curfew ordinances, and should instead prioritize connecting youth with services and supports that meet their housing and other needs.

Policy Recommendation: Law enforcement agencies should create specialized units, like those in Houston and Austin, that take a different approach to responding to calls involving those who are homeless. The approach should emphasize complete diversion away from the justice system where they do not pose a threat to public safety, and favor connecting youth experiencing homelessness with local supports and services.

Policy Recommendation: Local stakeholders, including service providers, child welfare boards, and CoCs should work together to develop a continuum of community-based services and supports that will assist diverted youth in securing housing and assistance to meet basic needs, and to address any mental health, substance abuse, or other treatment needs. Where gaps in the continuum exist, stakeholders should develop a plan for addressing the gap.

FINDING: The transition out of a juvenile secure facility is a point at which youth are at risk of homelessness, if their family is not willing or able to welcome them back home.

Policy Recommendation: Transition planning should begin immediately upon the youth's entry to a secure county or state juvenile facility. Planning should consider and include housing stability, and should consider any unique circumstances that could lead to long-term housing instability, such as foster care involvement or issues related to pregnant and parenting youth.

Policy Recommendation: TJJD should examine and eliminate eligibility barriers that keep youth from accessing benefits through its "Subsidized Living Support Program."

Policy Recommendation: State and local juvenile justice officials should explore contracting with transitional living programs for youth exiting secure facilities who are not able to return home.

Policy Recommendation: Juvenile probation departments should identify and put into place best practice protocols for youth transitioning out of secure facilities who are not able to return home.

Policy Recommendation: Even for youth able to return home, TJJD and juvenile probation departments should consider providing services to youth and family members, including crisis intervention services and mediation, to ease the transition back into the household. This will prevent crises that could result in probation violations like running away, or later homelessness.

Youth Homelessness and the Texas Foster Care System

As is true of the juvenile justice system, the foster care system intersects with youth homelessness at several junctures. First, runaways who are not able to be returned home immediately may ultimately be placed in the state’s care for a longer term if an investigation substantiates concerns surrounding abuse or neglect. As discussed in the previous chapter, in some counties, runaways are taken directly to emergency shelters instead of being referred to the juvenile system—but in many places, they are first detained in a juvenile facility. And, as discussed, some young people who are released from the juvenile system are abandoned at that point by family and referred to the Texas Department of Family and Protective Services (DFPS) when a family member refuses to pick them up.

But, in addition to responding to runaway and abandoned youth, the foster care system (like the juvenile and criminal justice systems) may also contribute to their number. Even under the best circumstances, foster care placements sometimes result in a youth running away.¹⁹¹ But in Texas, the foster care system has been under considerable strain with too few appropriate placement options and high caseworker turnover.¹⁹² Problems within the foster care system can contribute to youth running away from placements for a variety of reasons.

In addition, every year around 1,000 Texas youth “age out” of the foster care system on their 18th birthday. Research shows that these young people are at heightened risk of homelessness.¹⁹³ Many of the young people we interviewed during our research had aged out of the foster care system. Many said they opted not to extend care beyond age 18 because they had such a bad experience in foster care. While DFPS is a line of defense against youth homelessness—systemic problems within foster care may also contribute to the problem of homelessness.

191 See CHAPIN HALL, *YOUTH WHO RUN AWAY FROM SUBSTITUTE CARE* (2005), available at https://www.chapinhall.org/sites/default/files/old_reports/174.pdf

192 See *CPS: The Evolving Foster Care Crisis*, DALLAS MORNING NEWS, <https://www.dallasnews.com/news/child-protective-services/collection/cps-evolving-foster-care-crisis-texas>

193 See Amy Dworsky et al, *Homelessness During the Transition from Foster Care to Adulthood*, 103 AM. J. PUB. HEALTH 318–23.

Foster Youth Runaways

Youth in foster care may encounter temporary or longer-term homelessness when they run away from a placement. During our interviews with youth, many told us that once foster youth turn 17, DFPS will not try to locate youth who run from a placement.

“The important thing for those that flee [from a placement]...is to keep looking for them just like a parent would keep looking for them. Maybe one day they’ll realize they matter. That somebody cares and wants them to be safe.”

—Austin judge

According to DFPS, **during FY 2016, 1,068 children ran away from a foster care placement.**¹⁹⁴ However, the agency also acknowledges that the agency’s case management system does not easily allow for tracking the number of youth who run away from a placement, calling the accuracy of these numbers into question.¹⁹⁵

This is particularly true for the number of children that the agency reports as having returned to care.¹⁹⁶ The agency reported that determining which of the children who had run away were back in care was done by cross checking completed surveys of youth who had returned with data in their case information management system (which the agency itself notes is an unreliable indicator).¹⁹⁷ Using this method, DFPS reports that 776 of the youth who had run away were located.¹⁹⁸ The agency also reported:

- Of the youth who were located, it took an average of six weeks to locate them.
- 219 children and youth who were under 18 had not been located by the end of the fiscal year, and had been missing for an average of 21 weeks.
- 73 youth turned 18—or “aged out”—while on runaway status.¹⁹⁹

194 RUNAWAY AND HUMAN TRAFFICKING REPORT, *supra* note 3, at 7. Texas Appleseed and TNOYS sent an open records request in August 2016 for data related to runaways. The agency still has not produced any data in response to this request, despite the fact that Texas Appleseed and TNOYS paid for data the agency said it would produce.

195 *Id.* at 2-3.

196 For example, the endnotes in the report note that only 640 surveys were completed for located children, representing 494 unique children. *Id.* at endnote viii. However, the agency reports having located 776 youth, relying on a cross-reference of the IMPACT system, which it described as inadequate for tracking runaway youth just a few pages earlier, and the surveys. *Id.* at 3, 5-6, 14.

197 *Id.* at 4.

198 *Id.* at 6.

199 *Id.*

Of the youth that the agency reported as having run away, most (456) were in “permanent managing conservatorship,” meaning they had been in the state’s care for more than 18 months.²⁰⁰ The highest number of youth ran from an emergency shelter, closely followed by foster homes for children with emotional disorders, and residential treatment centers.²⁰¹ Emergency shelters are often the placement of last resort for foster youth who have run repeatedly from placements, with other placements unwilling to accept a youth who is a high runaway risk.²⁰²

“I got off the bus, and I started walking. I had no idea where I was going. I had no idea where I was. I was in some random town at the time. I didn’t care where I was. All I cared about was that I was safe. In my eyes, that’s all I cared about. The fact that I was safe.”

–R.G., Austin youth
(on running away from foster care)

DFPS reported that Bexar, Harris, and Dallas counties had the highest number of youth who ran away from care:

**Top 15 Counties with Highest Number of Children who Ran Away
From a DFPS Placement (Fiscal Year 2016)²⁰³**

Rank	County	Number of Children that Ran Away
1	Bexar	129
1	Harris	129
3	Dallas	81
4	Tarrant	70
5	Travis	39
6	Lubbock	24
7	El Paso	21
8	Nueces	19
9	Hidalgo	18
10	Webb	17
11	Cameron	16
12	Galveston	15
13	Bell	14
13	Montgomery	14
15	Tom Green	13

²⁰⁰ *Id.* at 8.

²⁰¹ *Id.*

²⁰² See Monica Rhor, *A Vicious Cycle*, HOUS. CHRON., June 10, 2017.

²⁰³ RUNAWAY AND HUMAN TRAFFICKING REPORT, *supra* note 3, at 9.

While Bexar and Harris Counties do not have the highest number of youth in substitute care in Texas, both counties have a high number of youth in emergency shelters and Residential Treatment Centers (RTCs), two of the settings that children most commonly ran from.²⁰⁴

“The ones who have come out of the foster care system absolutely don’t trust anybody. We find if you’re in a suit and tie, if you look or sound official, they’re not talking to you. They’ll tell you what you want to hear so that you leave them alone.”

–Central Texas service provider

Of the 1,068 youth that DFPS reported as having run away, 306 ran away more than once:²⁰⁵

- 212 children ran twice.
- 71 ran away three times.
- 23 ran away four or more times.

Though only 53 youth who were surveyed after returning to care reported having been victimized while they were on their own, a University of Texas study projects that approximately 25 percent of youth who are in foster care are estimated to be victims of human trafficking.²⁰⁶ The underreporting in the agency’s surveys is likely due to the reluctance of trafficking victims to self-report.

Running from foster care is not an issue that is unique to the Texas system. A longitudinal study of runaways found that youth who had been in foster care were over three times more likely to run away from home than youth who had never lived in a foster home.²⁰⁷ The study also found that verbal, physical, and sexual abuse before the age of 18 were all correlated with a higher runaway rate.²⁰⁸ Foster youth runaways are also unique from runaways who are not foster-care involved because in some cases, these youth are not running *away* from their home but rather running *to* their biological parents or relatives.²⁰⁹ In fact, DFPS reports that “desire to see family” is one of the top reasons youth list for running away when they return to care.²¹⁰

In our interviews, we often heard from both youth and service providers that once teens reach a certain age, they are no longer a priority for Child Protective Services (CPS). Many of the youth we spoke to told us that there is an understanding among youth that once they turn 17, CPS will not attempt to find them if they run from care. One Dallas service provider said, “If they choose to run away from

204 DFPS, 2015 ANNUAL REPORT AND DATA BOOK 54 (2016).

205 RUNAWAY AND HUMAN TRAFFICKING REPORT, *supra* note 3, at 9.

206 HUMAN TRAFFICKING BY THE NUMBERS, *supra* note 88.

207 JENNIFER BENOIT-BRYAN, THE RUNAWAY YOUTH LONGITUDINAL STUDY 17 (2011).

208 *Id.* at 18.

209 CHAPIN HALL, *supra* note 191, at 6.

210 RUNAWAY AND HUMAN TRAFFICKING REPORT, *supra* note 3, at 6.

foster care at the age of 17, they're marked as a runaway, and CPS doesn't really put a whole lot of energy into finding them."²¹¹ An Austin provider noted, "CPS is...usually hesitant to get involved with a 17-year-old."²¹² DFPS reports that the "vast majority" of youth who run from care are aged 15 to 17.²¹³

The CPS data that indicates that some youth age out of the foster care system while they are on runaway status²¹⁴ also raises concerns related to their ability to access benefits intended to support youth and prevent homelessness as they transition out of foster care and into adulthood. Without access to these supports and services, youth may be more vulnerable to homelessness after aging out. In fact, in addition to the obvious concerns surrounding a youth's safety and well being while they are on the street, running from care presents another concern: A study of foster youth who became homeless after aging out of care found that **running from care is, in and of itself, a predictor of later homelessness.**²¹⁵

[R]unning away while in foster care and frequent placement changes are associated with an increase in the relative risk of becoming homeless. Both are markers of instability. This instability may prevent youths from developing strong ties to their caregivers or supportive relationships with other adults. It may also limit their ability to connect with community-based resources, including programs that could provide assistance with housing.²¹⁵

211 Interview on file with author.

212 Interview on file with author.

213 RUNAWAY AND HUMAN TRAFFICKING REPORT, *supra* note 3, at 7.

214 *Id.* at 6.

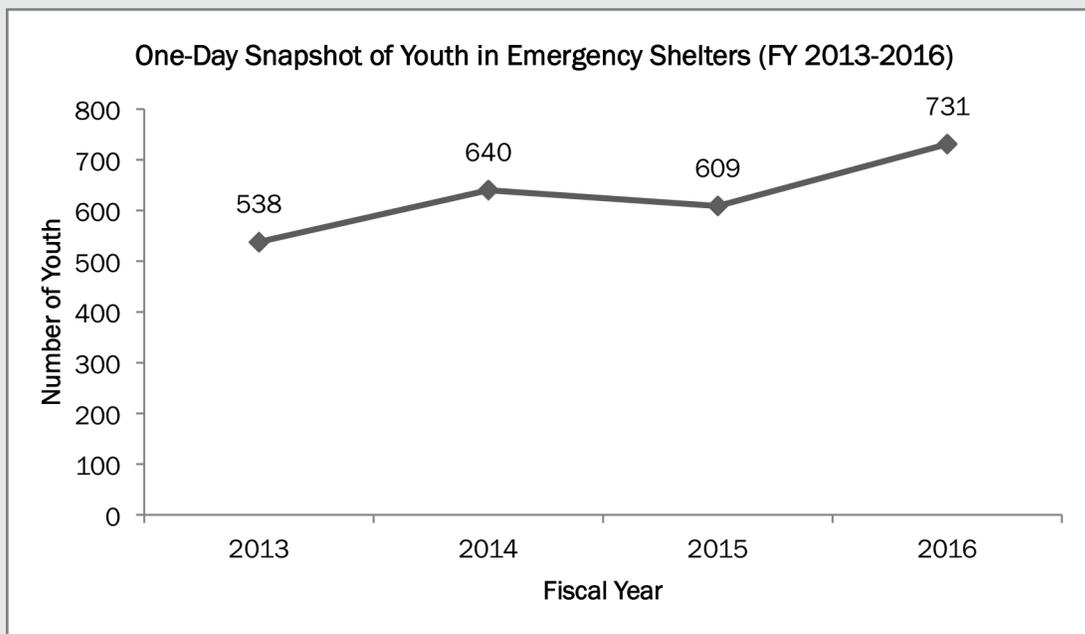
215 Dworsky et al, *supra* note 193, at 320.

Emergency Shelters

Within the DFPS system, emergency shelters traditionally serve two purposes. They serve as short-term placements for foster youth when a placement disrupts, or when they are waiting for a placement. Emergency shelters are meant to house youth for 30 days or less.

Funding permitting, emergency shelters also house youth who may not be DFPS involved who run away from home. These children may be immediately taken to an emergency shelter or transferred from a juvenile facility.

In 2015, emergency shelters in Texas housed approximately 550-600 youth on a daily basis.²¹⁶ The number of youth housed in an emergency shelter on a daily basis is on the rise.



In some counties, juvenile probation staff assist in running facilities that are licensed as emergency shelters by DFPS. For example, while Dallas County's Letot Center is licensed by DFPS, it is staffed by juvenile probation officers, and is used to house youth who have been referred to the juvenile system for having run away.²¹⁷

216 DFPS, *supra* note 204, at 48.

217 See Dallas County, Letot Center, <http://www.dallascounty.org/department/juvenile/letot.php> (last visited Oct. 24, 2017).

John H. Chafee Foster Care Independence Act

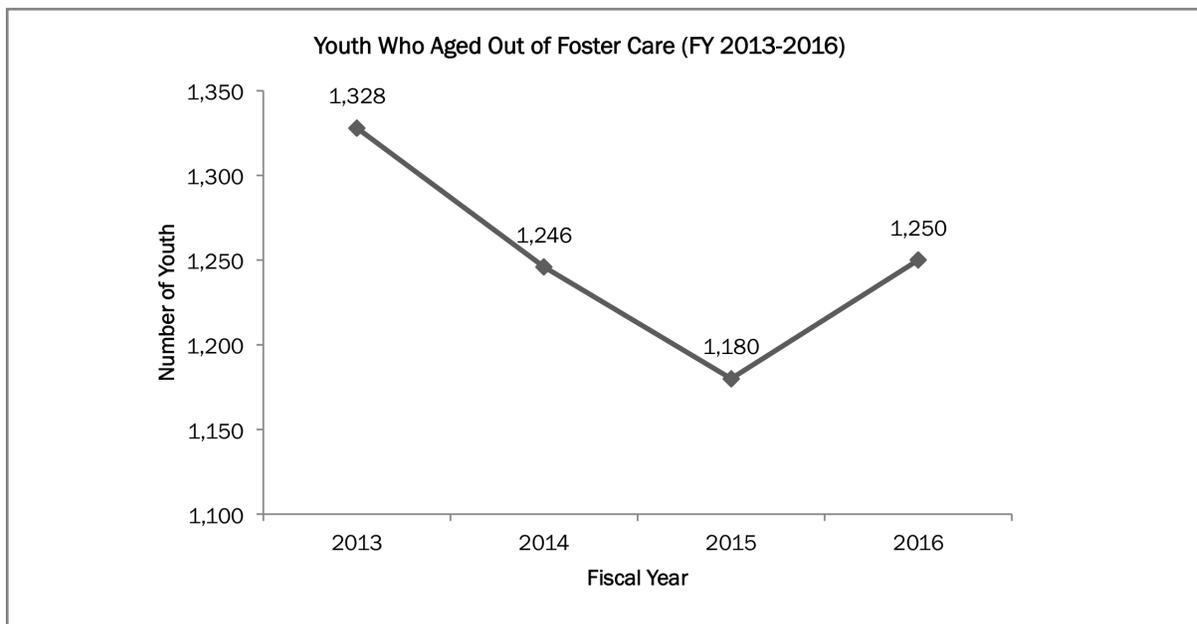
In 1999, the John H. Chafee Foster Care Independence Act was passed with the goal of ensuring that youth who “age out” of foster care are ready for the transition to adulthood.²¹⁸ As a result, federal funds also support programs for foster youth who are transitioning to adulthood, with a focus on meeting youth’s needs for a successful transition out of care.²¹⁹ These funds flow from the Administration for Children and Families (ACF) to its state agency counterpart, DFPS.²²⁰ Eligibility for these programs is restricted to foster youth or former foster youth.²²¹ This funding also requires compliance with provisions that speak to best practices that ACF is trying to encourage through the funding scheme. DFPS is required to ensure compliance with these provisions in order to continue to receive funding for Texas programs.

Aging Out & Homelessness

Youth who age out of foster care are at heightened risk of homelessness. Many of the young people we interviewed for this report had aged out of foster care and spoke to the link between aging out and subsequent homelessness. Service providers also spoke to the link.

Number of Youth Who Age Out

On a foster youth’s 18th birthday, unless they opt to extend care, they “age out” of the foster care system. In Texas, approximately 1,100 to 1,200 youth age out of the foster care system every year. While these numbers declined between 2013 and 2015, they crept back up in 2016.²²²



218 See Admin. for Children & Families, Children’s Bureau (Children’s Bureau), John H. Chafee Foster Care Independence Program, <https://www.acf.hhs.gov/cb/resource/chafee-foster-care-program> (last visited Oct. 24, 2017).

219 *Id.*

220 *Id.*

221 *Id.*

222 For this analysis, Texas Appleseed used data available in the DFPS Annual Report and Data Books for FY 2013–2016, available at https://www.dfps.state.tx.us/About_DFPS/Annual_Report/archive.asp

In 2016, DFPS Service Region 3 saw the highest number of youth who aged out of care.²²³

Youth Aged Out of Foster Care by Region, Statewide (Fiscal Year 2016)

Rank	Region Name (Region Number)	Number of Youth Aged Out
1	Arlington (3)	267
2	Houston (6)	237
3	San Antonio (8)	204
4	Austin (7)	158
5	Edinburg (11)	99
6	Tyler (4)	93
7	Lubbock (1)	72
8	Midland (9)	38
9	Abilene (2)	37
10	Beaumont (5)	23
11	El Paso (10)	22
Grand Total		1,250

While Harris County and Dallas County had a predictably high number of youth who aged out, Bexar County had more youth age out of care in 2016 than Dallas County. This may be due to the location of foster care providers, particularly for older youth.²²⁴

Top 15 Counties with Highest Number of Youth Aged Out of Foster Care, Statewide (Fiscal Year 2016)

Rank	County	Number of Youth Aged Out
1	Harris	163
2	Bexar	136
3	Dallas	98
4	Tarrant	83
5	Travis	52
6	Montgomery	29
7	Hidalgo	28
8	Williamson	24
9	Bell	22
10	El Paso	21

²²³ Data downloaded from DFPS Data Book FY 2016, available at https://www.dfps.state.tx.us/About_DFPS/Data_Book/default.asp

²²⁴ *Id.*

10	Webb	21
12	Potter	18
13	Cameron	17
13	Lubbock	17
13	McLennan	17
Grand Total		746

The link between aging out of foster care and the likelihood of homelessness is well established.²²⁵ But recent data from a survey of former foster youth in Texas gives a sense of how many Texas youth who age out of the system experience homelessness within four years of aging out.

Texas, like every state that relies on federal Chafee grants to help fund services aimed at youth transitioning out of care, participates in the National Youth in Transition Database (NYTD), which was launched in 2011 to evaluate outcomes for foster youth who transition to adulthood. As part of this effort, foster care systems around the nation are asked to survey 17-year-old youth who participated in independent living services provided by the state in 2011 before they aged out of care, then again two years later, and a final time two years after that, when the youth are 21.²²⁶ Youth are asked a series of questions aimed at understanding how well they were equipped to transition to adulthood and what outcomes they experienced.²²⁷

According to the survey data reported by the state for the first cohort of Texas youth, 16 percent of 17-year-old youth surveyed had been homeless at some point prior to aging out of care.²²⁸ **By the time they were 19 years old, 25 percent of surveyed Texas former foster youth had experienced homelessness in the two years since they had aged out of care.**²²⁹ **Two years later, 27 percent of surveyed youth had experienced homelessness within the previous two years.**²³⁰

Since this survey relies on the ability to find youth who have aged out, the number of youth surveyed shrank from more than 1,200 in the year before they aged out, to less than 300 in each of the two follow-up surveys. This may mean that these numbers—25 percent and 27 percent—underreport the youth who experience homelessness. Even so, the number of surveyed Texas youth who had experienced homelessness in the two years before they turned 19 was higher than the national average. Nationally, only 19 percent of surveyed 19-year-olds had experienced homelessness within two years, though that number climbed to 26 percent by the time they turned 21.²³¹

The high numbers in Texas may also point to differences between national data and Texas data for another outcome—incarceration. While the survey showed that Texas’ 17-year-old foster youths’ experiences were consistent with the national average (with 36 percent of 17-year-olds reporting having been incarcerated at any point, compared to a national average of 37 percent), by the time they were 19, 28 percent of Texas former foster youth reported having been incarcerated within the previous two years, four points higher than the national average of 24 percent.²³² And by the time Texas youth

225 See Dworsky, et al, *supra* note 193.

226 Children’s Bureau, About NYTD, <https://www.acf.hhs.gov/cb/resource/about-nytd> (last visited Oct. 24, 2017).

227 *Id.*

228 CHILDREN’S BUREAU, NATIONAL YOUTH IN TRANSITION DATABASE, DATA SNAPSHOT: TEXAS (on file with authors).

229 *Id.* at 2.

230 *Id.* For purposes of this survey, “homelessness” does not include youth who are doubled up or unstably housed.

231 CHILDREN’S BUREAU, DATA BRIEF #5 HIGHLIGHTS FROM THE NYTD SURVEY: OUTCOMES REPORTED BY YOUNG PEOPLE AT AGES 17, 19 AND 21 (COHORT 1) (2016).

232 CHILDREN’S BUREAU, *supra* note 228; DATA BRIEF #5, *supra* note 231, at 5.

turned 21, 25 percent reported having been incarcerated in the previous two years, compared to the national average of 20 percent.²³³ Given the correlations between incarceration and homelessness, these two problems in Texas could be feeding each other, since a criminal record can operate as a bar to housing, and homelessness places youth at higher risk for incarceration.

Foster Care and the Juvenile or Criminal Justice Systems

Another theme we often heard when we raised the risks associated with foster care and homelessness was the intersection of the foster care system and the juvenile or criminal justice systems, and the increased risk of homelessness due to justice system involvement. One service provider spoke of the tie between the sexual victimization that brings girls into the system, and their increased risk for trafficking, which can lead to prostitution charges: “One in three girls that are in jail for prostitution are from foster care. They have victim on their head already. They’ve already been sexually abused. They already have big holes where nobody loves them so they are the perfect victim.” National estimates indicate that as many as 30 percent of youth involved with the child welfare system are involved with the juvenile justice system.²³⁴

Unfortunately, Texas has not collected sufficient data on youth who have been involved in both systems to determine how many Texas youth are dually involved.²³⁵ However, the NYTD baseline data for Texas’ 17-year-olds indicates that 36 percent of the surveyed foster youth had been “incarcerated” at some point.²³⁶ Since not all youth who touch the juvenile or criminal justice systems will spend time in jail or prison, this serves as a low estimate of the percentage of foster youth in Texas who may have contact with these systems.

During our interviews, service providers also spoke to the problems that juvenile or criminal justice involvement created for foster youth after they aged out of care. One Houston provider said, “When they have done certain things while they were in foster care, they sometimes get juvenile records. That makes it more challenging.” Another said, “[If] foster youth are living in a group situation, if there is a violence issue or if there is an assault, the police are called. Because it is a home, a group home, it’s family violence, which is a huge red flag. If you’re charged with that you can never rent an apartment for the rest of your life in the corporate world. That’s crazy...So you’re 17 years old and you come out with that already.”

233 *Id.*

234 TEXANS CARE FOR CHILDREN, ENSURING THE SUCCESS OF YOUTH DUALLY INVOLVED WITH CPS & JUSTICE SYSTEMS: TESTIMONY TO THE HOUSE JUVENILE JUSTICE AND FAMILY ISSUES COMMITTEE (2016), available at <https://static1.squarespace.com/static/5728d34462cd94b84dc567ed/t/57d083bc46c3c45c1a068601/1473283006332/JJFI-Testimony-Dually-Involved-Youth.pdf>

235 *Id.*

236 CHILDREN’S BUREAU, *supra* note 228.

Programmatic Support Prior to Aging Out

In Texas, before a young person ages out of foster care, DFPS is required to provide services intended to increase contacts with supportive adults who can be a resource after aging out, and training in life skills. This is done in two ways: first, through “Circles of Support” (COS) meetings that include supportive adults identified by the youth, and second via transitional living services that include life skills classes.

When a Texas foster youth turns 16, a Circles of Support meeting is held to identify supportive adults who can continue to be a resource after the youth ages out of care.²³⁷ It may include members of the youth’s birth family, foster care family, teachers, church members, or other adults the youth has identified.²³⁸ The goal of the meeting is to develop and review the youth’s permanency and transition plan and to identify needs prior to aging out of care.²³⁹ Ideally, these meetings would take place regularly prior to a youth’s aging out of care. Unfortunately, lack of resources and caseworker capacity means that youth often have only one or two COS meetings prior to aging out—and little follow up is done in between meetings to ensure that goals identified during those meetings are met.²⁴⁰

In addition to the COS, once they turn 16, youth are assessed to determine strengths and needs using a life skills assessment.²⁴¹ They then complete six life skills courses—called “Preparation for Adult Living” (PAL) classes—intended to teach life skills in several core areas like job readiness, financial management, and housing.²⁴² Foster youth are required to complete all of these courses in order to be eligible for a “transitional living allowance” upon aging out, which provides financial support to youth up to \$1,000 for rent or other costs associated with independent living.²⁴³ In FY 2015, 1,725 youth received life skills training in a classroom setting, and 87 completed the training through independent study.²⁴⁴

“If a youth ages out of foster care and they’re not connected to a foster family or at least one significant caring adult, it’s a cliff. There are no resources for them, and they don’t have a lot of support. Unfortunately, too many of them end up homeless or in jail.”

–Houston service provider

237 DFPS, BRIEF OVERVIEW OF TRANSITIONAL LIVING SERVICES 1 (2017), https://www.dfps.state.tx.us/Child_Protection/Youth_and_Young_Adults/Transitional_Living/documents/Transitional_Living_Services_Handout.pdf

238 *Id.*

239 *Id.*

240 Based on interviews with stakeholders and youth. DFPS does not keep data showing the number of youth eligible for a COS, though it does keep data for the number of youth, by region, who received a COS. This makes it impossible to determine whether all youth who are eligible are receiving a COS. See DFPS, THE STATE OF TEXAS 2016 ANNUAL PROGRESS AND SERVICES REPORT, TITLE IV-B CHILD AND FAMILY SERVICES PLAN FISCAL YEARS 2015-2019 408 (2016) (“DFPS will look into using existing data to clarify what percentage of eligible youth have participated in Circles of Support and gather information to get clarity on the current capacity of Circles of Support. This information will be used to determine if adjustments need to be made to ensure that DFPS is providing Circles of Support to as many qualified youth as possible.”).

241 TRANSITIONAL LIVING OVERVIEW, *supra* note 237, at 3.

242 *Id.*

243 *Id.*

244 DFPS, THE STATE OF TEXAS 2017 ANNUAL PROGRESS AND SERVICES REPORT, TITLE IV-B CHILD AND FAMILY SERVICES PLAN FISCAL YEARS 2015-2019 491 (2017), available at https://www.dfps.state.tx.us/About_DFPS/Title_IV-B_State_Plan/2017_Progress_Report/2017_Title_IV-B_State_Plan_entire_report_accessible.pdf

Many of the youth we interviewed did not find the PAL classes particularly helpful. One youth said, “The PAL classes kind of helped, but what is it, six classes? Six classes isn’t enough for the real world. I knew a lot because I wasn’t in foster care my whole life, but for someone who was, I don’t think they’d be able to learn from just six classes. And the foster parents that I had just had their hands full because we had so many kids (11) in one house.”²⁴⁵ Another youth said, “We need more help. A lot more help. Years of help. Start at 14 and 15. Help us get through it. Don’t just say we need to take PAL classes. For kids who don’t know anything, we have to start at a young age.”²⁴⁶

Others spoke to the difficulty of completing PAL classes before aging out. One youth said, “I tried signing up for PALS [sic] but because of my school hours, I wasn’t able to make it to the classes on time. Then I was out of state for about a month, and the next set of classes wouldn’t start until August. But because I was already turning 18, they told me I was too late to take the classes.” Another said, “[M]y foster care caseworker, she literally took me to Houston. She dropped me off. She did not talk to me for months and months on end. I tried to talk to her. I did not know that I was getting ready to leave until the night before when the people at the RTC were trying to shove me to do PAL. I literally did my entire PAL classes the day before I left.”²⁴⁷ A school district homeless liaison also spoke of the challenges associated with completing the courses by saying, “[I]f they’re moving and bouncing around between different homes, [PAL is] not available to them because they have to attend four to six classes. The classes are on a Saturday, and they’re four or five hours. So if they don’t have a stable placement and they don’t have a person who can take them to those classes, they lose out. They lose out on the money, they lose out on the stipend for transitional housing.”²⁴⁸

However, in some places, the PAL contractors were providing services in addition to the classes that the youth did find helpful. One youth said, “I’ve been calling the PAL office, which is a resource...to help me get through school, help me look for a better job. I have mentors there that I can talk to. I spoke to them, and that’s when I found out about Turning Point.”²⁴⁹ One PAL provider spoke of her own frustrations with the lack of preparation foster youth are given for adulthood: “Where we fail our kids is that we all know at 18 none of us were prepared to navigate life on our own. People say at some point you have to kick them out of the nest, and they have to fly. That’s a fine analogy except for with birds the parents fed them. They made sure they were safe. They made sure a cat didn’t get them. They don’t kick them out of the nest until they think that they can do it. Our kids are just kicked out of the nest. Without any feathers, with no skills.”²⁵⁰

Service providers also had suggestions for changes that could help foster youth make the transition to adulthood. One PAL provider said, “What we see is our youth who have a mentor are doing a lot better. So I would like more funding so that every youth has a volunteer engaged with them before they leave foster care.”²⁵¹ The director of a program that provides services to youth experiencing homelessness said, “As far as the foster care system, for those youth that age out with no skills and become homeless instantly, what would help there is when they’re 16 years old, if they had a monthly transition team that met with them and identified what they’re missing... There needs to be a set of goals for what that youth needs before they age out, what the plan is, and someone needs to be there for them.”²⁵²

245 Interview on file with author.

246 Interview on file with author.

247 Interview on file with author.

248 Interview on file with author.

249 Interview on file with author.

250 Interview on file with author.

251 Interview on file with author.

252 Interview on file with author.

“If you look at the research on foster youth, they’re more likely to be homeless when they age out because they don’t have a support system. They don’t have anybody to lean on. There’s no one who can help float them rent, no one who can help co-sign a lease, no one who can really give them the support that they need to maintain that apartment. Also, so many of them end up with a mental health issue, and they aren’t stable at 18. They’re not developmentally stable [enough] to keep an apartment.”

–Dallas service provider

Aside from the PAL classes, DFPS relies on foster care placements to provide experiential life skills training to young people (meaning, life skills training that is “hands on” rather than classroom based). It is not clear the extent to which this is taking place—and many of the youth experiencing homelessness we spoke with who had aged out of foster care reported being totally unprepared for adult living.

Recent research suggests that courses like PAL are not an effective way to teach life skills to young people, and suggests abandoning this approach.²⁵³ Instead, research supports precisely the type of services that foster youth in Texas do not seem to get prior to aging out—intensive case management that is individualized to each youth.²⁵⁴ While youth may receive some transition-specific case management prior to aging out, DFPS reports that these services “may begin at age 16, but typically do not begin until just before a youth turns age 18.”²⁵⁵

Extended Care

In recognition of the challenges youth face upon aging out, foster youth in Texas have the option of extending their time in foster care if the youth is between the ages of 18 and 22 and is still in high school, or is between the ages of 18 and 21 and meets one of the following conditions:

- Is attending college or a vocational program;
- Is participating in an employment program;
- Is employed at least 80 hours per month; or
- Is incapable of doing any of these because of a medical condition.²⁵⁶

253 See U.S. DEPT OF HEALTH & HUMAN SERVICES, ADMIN. FOR CHILDREN & FAMILIES, EVALUATION OF LIFE SKILLS TRAINING PROGRAM: LOS ANGELES COUNTY v-vi (2008), available at https://www.acf.hhs.gov/sites/default/files/opre/eval_1st.pdf (“The impact evaluation found few impacts on any outcome assessed...The evaluation calls into question the notion that classroom-based life skills training, in and of itself, is likely to have much impact on the well-being of foster youth in transition to adulthood.”).

254 See MARK COURTNEY ET AL, EVALUATION OF THE MASSACHUSETTS ADOLESCENT OUTREACH PROGRAM FOR YOUTHS IN INTENSIVE FOSTER CARE: FINAL REPORT OPRE REPORT # 2011-14 (2011), available at https://www.acf.hhs.gov/sites/default/files/opre/eval_mass.pdf

255 2017 DFPS REPORT, *supra* note 244, at 502.

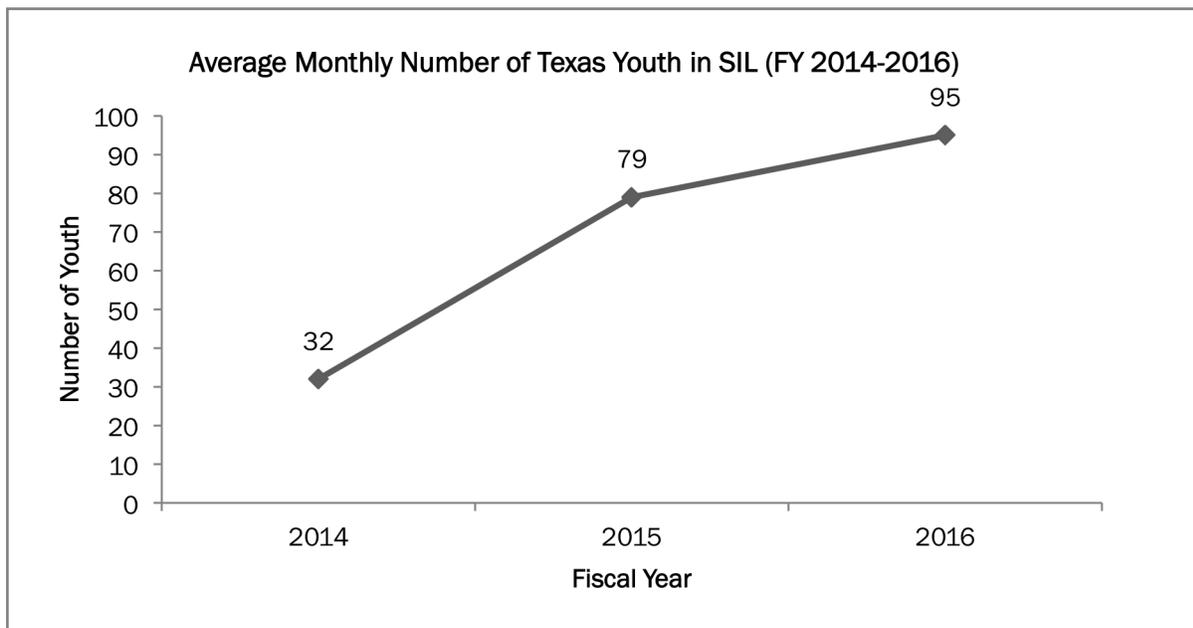
256 TRANSITIONAL LIVING OVERVIEW, *supra* note 237, at 3.

Youth who remain in Extended Foster Care (EFC) have better outcomes, but most youth who are eligible do not take advantage of this option. While the number of youth who opt to extend care in Texas has increased, they still tend to leave care before they turn 21.²⁵⁷ Youth may return to extended care at any time after aging out or leaving, assuming there is an available placement, and they meet one of the criteria outlined above within 30 days of returning to care.²⁵⁸

“I think it looks great in writing, ‘oh, we offer extended care,’ but it’s a caveat. If they’re not working or they’re not in school, boom, they’re out.”

–Dallas service provider

For youth who opt to extend care, DFPS has created a Supervised Independent Living (SIL) Program that is similar to some of the transitional living programs that offer assistance to youth experiencing homelessness.²⁵⁹ However, while use of SIL has increased, it is woefully underutilized with only 252 youth receiving SIL since 2013.²⁶⁰ In 2016, the average monthly number of young people in SIL was the highest it has been, yet was only 95 statewide.²⁶¹ Youth must submit an application for SIL, with providers and caseworkers determining who should be accepted into the program.²⁶²



257 DFPS reports the average length of stay in EFC is 12 months.

258 TRANSITIONAL LIVING OVERVIEW, *supra* note 237, at 4.

259 *See id.* at 3.

260 Data on file with author.

261 Data from DFPS 2016 Data Book, http://www.dfps.state.tx.us/About_DFPS/Data_Book/Child_Protective_Services/Purchased_Services/Paid_Foster_Care_Avg_Monthly.asp

262 TRANSITIONAL LIVING OVERVIEW, *supra* note 237, at 4.

Foster youth who opt to extend care and are accepted into a SIL program may live in an apartment, dorm, shared housing, or host home, depending on the program.²⁶³ They are “allowed increased responsibilities, such as managing their own finances, buying groceries/personal items, and working with a landlord.”²⁶⁴

The underutilization of the SIL program appears to be due to low reimbursement rates for providers. DFPS has only been able to attract nine providers around the state, a number of whom have waitlists for the program.²⁶⁵ A number of providers have suggested that they would like to help meet this need and have explored opening SIL programs, but found that the reimbursement rate is simply too low, making it an unattainable goal.

“Only 2 percent of kids who age out of foster care will graduate a four year university. Some kids will be in 30 placements by the time they graduate high school. They’re graduating, but they’re not graduating with any preparation for going to college and living independently. They are completely 100 percent unprepared.”

—Houston service provider

Other Benefits

Youth may access other benefits prior to or after aging out that assist with the transition to adulthood, including:

- Education and Training Voucher (ETV)—youth in foster care and those who have aged out are eligible to receive up to \$5,000 per year to help them reach post-secondary educational goals if they have a high school diploma or GED, or they are still in high school and are enrolled in a dual credit course. During the 2014-2015 school year, 611 youth were awarded ETVs, 250 of which were new. This was a drop from the previous school year, when 1,000 ETVs were awarded, 400 of which were new.²⁶⁶
- College Tuition and Fee Waiver—Texas state colleges and universities exempt most foster and former foster youth from tuition and fees. In the 2014-2015 school year, 3,195 tuition exemptions were granted.²⁶⁷
- Transitional Living Allowance—up to \$1,000 distributed in increments of \$500 to help with “start-up” costs for transition to adult living. In FY 2015, 971 youth received assistance.²⁶⁸
- Aftercare Room and Board Assistance—based on need, up to \$500 per month for rent, utilities, utility deposits, not to exceed \$3,000. In FY 2015, 822 young adults received assistance.²⁶⁹
- Medicaid—former foster youth are able to keep their medical coverage through age 25, assuming they have no other health care coverage and they meet income requirements.

²⁶³ *Id.* at 3-4.

²⁶⁴ *Id.*

²⁶⁵ See DFPS Active/Open Residential Contracts, https://www.dfps.state.tx.us/PCS/Residential_Contracts/active_contracts.asp#SIL (last visited Oct. 24, 2017).

²⁶⁶ 2017 DFPS REPORT, *supra* note 244, at 537.

²⁶⁷ *Id.* at 498.

²⁶⁸ *Id.* at 492.

²⁶⁹ *Id.*

Conclusion & Policy Recommendations

As is true of the juvenile and criminal justice systems, intersections with the Department of Family and Protective Services (DFPS) are the result of a “pull” into the system when minors are rendered homeless by a parent or guardian who refuses to allow them to return home, or when the youth runs away, as well as a “push” into homelessness when youth run away from a foster care placement or age out of the system.

While DFPS involvement should not come with the same set of concerns that juvenile or criminal justice system involvement carries, system involvement may create similar risks for homelessness and poor outcomes, even under the best circumstances. In Texas, problems with the system itself need to be addressed in order to reduce these risks. Policy solutions also need to address the family disruptions and crises that may act to pull youth into foster care unnecessarily.

But once a youth is in care, more should be done to ensure that it does not become a pipeline to homelessness. While there are risks associated with involvement in the foster care system, there are unfortunately times when it is unavoidable. For youth for whom foster care placement is the best option, the system should offer a place of healing that provides, to the greatest extent possible, the safety and resources that assist youth in making the transition to adulthood successfully. Much can be done at the federal, state, and local levels to prevent homelessness among foster youth and former foster youth.

FINDING: Texas is not appropriately tracking the number of youth who run from foster care placements.²⁷⁰

Policy Recommendation: Once Texas improves its data keeping so that it is able to tell in “real time” how many youth are on runaway status, DFPS should periodically review and publish aggregate data and analysis to determine whether improvements need to be made or issues addressed based on trends or correlations with other youth characteristics, for example:

- Trends in youth running from a particular placement;
- Trends in youth running from particular types of placements;
- Trends in youth with specific needs running from placements;
- Trends based on youth demographics, like race or ethnicity, that may point to a need for cultural competency training for providers.

FINDING: Too many foster youth run from care in Texas, with some running more than once. More should be done to ensure placement stability and prevent foster youth from running from care.

Policy Recommendation: DFPS should review its policies to determine what should be done to provide more support to foster families and other providers, as well as youth, to ensure stability in placements.

- DFPS should ensure that foster care providers receive training to assist them in meaningfully integrating trauma-informed principles into their programs in order to create cultures of care that prevent challenging behaviors and conflict from escalating into crises that can result in a youth running from placement.

²⁷⁰ DFPS has indicated that improvements will be made to the IMPACT system sometime in 2018 that will allow it to keep more accurate data related to youth who run from a placement. RUNAWAY AND HUMAN TRAFFICKING REPORT, *supra* note 3, at 3.

- Counseling, crisis intervention, and/or respite services should be offered at the first sign that a placement is in danger of failing. DFPS could facilitate this by allowing foster families access to STAR or similar crisis intervention services.
- DFPS should ensure that providers are tapping into the full range of in-home behavioral health supports and services available to foster youth through Superior Health.

Policy Recommendation: DFPS should provide training to drop-in centers around safe return to care, so that drop-in centers are able to communicate with youth about their options if a foster youth runs away and seeks services in a drop-in center.

Policy Recommendation: When a youth runs from care more than once, a review of the youth's placement and history should be done to determine what is causing the youth to run from care to ensure that it is not the result of unaddressed needs or hidden abuse or neglect. This could be done by regularly including these cases in Starfish staffings.

Policy Recommendation: DFPS should change its rules for the Supervised Independent Living program to allow youth to opt into SIL beginning at age 16, when it is determined that the youth is ready for more independent living, and that this will result in a more stable placement.

FINDING: The average length of time a youth who runs away is out of care (six weeks) leaves youth highly vulnerable to victimization and trafficking.

Policy Recommendation: DFPS should improve its response when a youth runs from care, utilizing in-house investigators to assist law enforcement in finding youth, and should review its policies to ensure that they incentivize prompt notification by caregivers when a youth runs from a placement.²⁷¹

Policy Recommendation: DFPS should work with law enforcement organizations and regional CPS offices to develop a model protocol or MOU that local CPS offices and law enforcement could be encouraged to adopt that would better ensure a quick response when a child runs from care, and trauma-informed practices when a child is located. DFPS should also work with providers to integrate trauma-informed practices for runaways who are returning from care, so that they are not inappropriately punished for “bad” behavior.

Policy Recommendation: DFPS should develop and encourage joint training for local CPS staff and law enforcement as a means of facilitating relationship building and identification of ways to collaborate when a child runs from care.

²⁷¹ We note there are positive signs that DFPS has taken steps to change its internal process when youth run from care. See DFPS, LOCATING MISSING CHILDREN IN CPS CONSERVATORSHIP—RESOURCE GUIDE (2017), available at http://www.dfps.state.tx.us/handbooks/CPS/Resource_Guides/Missing_Children_Resource_Guide.pdf

FINDING: Too many foster youth who age out of care age out into homelessness, indicating youth are not prepared for adulthood.

Policy Recommendation: Texas should revamp its Preparation for Adult Living program, with an eye toward individualized services that support a youth's strengths and needs rather than relying on a static set of classes.

- DFPS should adopt an intensive case management approach for youth 14 and older with more accountability for ensuring:
 - youth are connected with at least one caring adult;
 - the youth, caseworker, and supportive adult(s) begin developing a transition plan with concrete, identified goals that contemplates the youth's housing, job, and workforce training or educational needs;
 - the transition plan clearly states who is responsible for assisting the youth in reaching the goals outlined in the plan;
 - that there is consistent follow-up between meetings and meaningful progress is being made toward reaching goals; and
 - youth are connected with service providers who will continue to assist them after they age out.
- DFPS should schedule regular transition planning meetings or Circles of Support with youth once they turn 16, with the goal of having a meeting every three months to check on progress toward meeting goals.
- DFPS should explore building more flexibility into the requirements surrounding completion of PAL classes, and the impact of completion on benefits youth are eligible for after turning 18.
- DFPS should work with stakeholders to evaluate models for transitional living and determine how licensing can help facilitate development and sustainability of transitional living programs.

Policy Recommendation: County Child Welfare Boards should work with the COC and other stakeholders to examine the impact of foster care on youth homelessness in their jurisdictions, develop local responses that take into account the need for a full continuum of care to prevent youth homelessness from occurring, and provide trauma-informed interventions for youth who encounter homelessness or are at risk.

FINDING: While the number of youth extending foster care beyond the age of 18 has increased, the average length of stay in care is only 12 months. Youth often leave prior to turning 21, abandoning support and services that could assist them in preparing for adult living.

Policy Recommendation: The process for extended care should change to be an “opt out” rather than “opt in” for youth.

FINDING: DFPS's "Supportive Independent Living" (SIL) program is woefully underutilized, principally due to low reimbursement rates.

Policy Recommendation: DFPS should raise reimbursement rates for SIL so that more providers are able to participate.

Policy Recommendation: DFPS should review the application process for SIL to determine what barriers prevent more youth from participating, and should develop a plan for streamlining the application process and addressing those barriers.

FINDING: Foster youth who come into contact with the juvenile or criminal justice systems are at heightened risk for homelessness later.

Policy Recommendation: DFPS should work with foster care providers to identify alternatives to law enforcement involvement for youth whose behavior does not pose a safety risk.

- This should include training providers in the poor outcomes associated with juvenile or criminal justice system involvement.
- DFPS should make crisis intervention and respite care available to foster care providers as alternatives to law enforcement involvement, where doing so would not pose a safety threat.
- Where the youth's behavior poses a safety threat, local stakeholders in CPS and probation should work together to determine whether the youth's behavior is the result of unmet treatment needs that should be prioritized and met in place of juvenile or criminal justice involvement.
- Where justice-system involvement cannot be avoided, both systems should work together to ensure they are not duplicating services and are collaborating on the youth's treatment needs, maximizing the resources each system may have to offer.

Policy Recommendation: The Supreme Court of Texas Children's Commission should provide training to attorneys ad litem (AALs) regarding how to expunge and/or seal juvenile and criminal justice records, and should reach out to legal aid providers and state university legal clinics in an effort to identify and/or develop resources for foster youth who are about to age out who need assistance expunging or sealing a record.

Physical and Behavioral Health Needs and Access to Care for Homeless Youth

“[Youth] have regular developmental stages where it’s more difficult to think about the long term. Their risk-taking activities are higher. It’s also difficult without the Medicaid expansion. All of our youth who were not in foster care have probably never had a formal diagnosis. It’s difficult to meet that criterion and get them Medicaid. And those that were in foster care have had more than enough of being medicated, seeing different doctors and having different diagnoses. They’re just ready to be on their own and not deal with any medications. We’re also dealing with the age where the onset of a lot of mental health issues comes out. It’s very confusing for the youth, and there’s still a lot of stigma. People definitely don’t want to be seen as crazy. They don’t want their peers to think they’re crazy. So there’s always a hesitancy to really engage with the counseling services and be forward with what’s going on mental health wise. Substance abuse treatment is also really difficult to get right now.”

—Austin service provider

Health care needs also come with “push” and “pull” factors for youth homelessness: health problems can pull a young person into homelessness and homelessness can push a young person into poor health. If a parent loses their job, economic instability may result in homelessness at the same time that the loss of employer-sponsored health insurance (coupled with homelessness) pushes the family into poor health.²⁷² By the same token, health needs and lack of access to health care can lead to youth homelessness because of the economic and emotional tolls they take. For example, if a parent is unable to find appropriate resources for a child’s mental health issues, the child’s needs could lead the parent to abandon the child in hopes that the state will step in with appropriate care, becoming a statistic reported by DFPS as a child whose parent “refused to accept parental responsibility” (RAPR). Or, and probably more commonly, the youth’s unmet behavioral needs lead to a familial crisis that results in the youth leaving home or being pushed out of the home.

Further, youth already experiencing homelessness often do not know of the health care options that may be available to them. They remain on the streets getting sicker until they are forced to seek care at an emergency room. If youth are constantly sick, injured, or malnourished, they cannot successfully attend school or go to work—creating a cycle of economic instability that can make it difficult for the youth to move out of homelessness.

While youth experiencing homelessness face many of the same issues the homeless adult population faces regarding health and mental health care, the changes inherent to adolescence, combined with the stresses of housing instability and a likely precarious family history, create a unique set of physical and mental health care challenges for youth experiencing homelessness. Indeed, homeless minors face legal challenges in accessing services without the consent of a parent or guardian. And youth experiencing homelessness of all ages harbor a tendency to distrust adults, and rigid, complicated systems make the process more difficult.

As a result of these challenges, young people who are homeless often have more health care needs than their peers, including needs for mental health care services and substance use treatment. Youth experiencing homelessness often identify a health related problem as the cause of their homelessness, including issues such as physical disability, hospital discharge, mental illness, and substance abuse.²⁷³

While all youth undergo significant physical, psychological, and cognitive changes during adolescence, the chronic stress and deprivation characteristics of the state of homelessness can have lasting consequences for a youth’s development and ability to function in society, pushing youth further into chronic homelessness.²⁷⁴ With limited access and low utilization rates of the services that are available, youth experiencing homelessness are one of the most underserved, vulnerable populations in the United States when it comes to health care. One service provider explained, “If we don’t fix the underlying issue, it doesn’t matter how many GEDs we give you. You still have alcoholism issues, drug issues or you’re still a schizophrenic.”²⁷⁵

272 See NAT’L HEALTH CARE FOR THE HOMELESS COUNCIL, HOMELESSNESS & HEALTH: WHAT’S THE CONNECTION? 1 (2011) available at http://www.nhchc.org/wp-content/uploads/2011/09/Hln_health_factsheet_Jan10.pdf; see also NAT’L CONF. OF STATE LEGISLATURES, HOMELESS AND RUNAWAY YOUTH (2016) available at <http://www.ncsl.org/research/human-services/homeless-and-runaway-youth.aspx>

273 See NARENDORF, *supra* note 4; see also ENDING COMMUNITY HOMELESSNESS COALITION, YOUTH HOMELESSNESS NEEDS ASSESSMENT AUSTIN/TRAVIS COUNTY 14, 19 (2016), available at <http://www.austinecho.org/wp-content/uploads/2016/11/161214-FINAL-youth-homelessness-needs-assessment-1.pdf>

274 URB. INST., THE NEGATIVE EFFECTS OF INSTABILITY ON CHILD DEVELOPMENT: A RESEARCH SYNTHESIS 13 (2013), available at <http://www.urban.org/sites/default/files/publication/32706/412899-The-Negative-Effects-of-Instability-on-Child-Development-A-Research-Synthesis.PDF>

275 Interview on file with author.

Health Needs of Homeless Youth

Youth experiencing homelessness face challenges both as developing adolescents and unstably housed people. Both of these experiences drastically increase their chances of physical injury or exposure to disease and the need for emergency and sustained physical and behavioral health services.

“The hardest part was the physical toll it takes on your body because while your mental condition can be in a stable place—you’re not completely wrecked and depressed—you’re still living on the streets. You don’t have a consistent way to stay clean. You don’t have a consistent way to stay fed. And you’re living on the streets so you’re subject to a lot of sicknesses, scars and bites. The physical toll was almost unbearable. There would be times where I would just sleep for two days straight because I couldn’t get up. I felt like I smelled so bad, my body was so hungry, my body was so weak. I hadn’t eaten in this amount of time. I hadn’t bathed in this amount of time. I just felt weak, and that was maybe one of the most stressful things I’ve ever endured as far as being on the streets because...God, it’s unimaginable.”

—C.F., Houston Youth

Physical Health Needs

Though we all face a wide range of physical ailments on any given day, from minor injuries to the flu, those without a stable housing environment face increased risks of and consequences from physical injuries and diseases. Easily remedied health issues, such as early signs of high blood pressure, can become major health issues without access to balanced nutritional resources.²⁷⁶ A minor cut can become infected from lack of access to cleaning facilities. A case of mild dehydration can turn into an emergency case of heat stroke without shelter and water.²⁷⁷ Keeping common health conditions like diabetes and asthma under control become more difficult without access to medication, or even a place to store medication.²⁷⁸ Moreover, living in crowded conditions or on the streets “is personally stressful and made worse by being exposed to communicable disease (e.g., TB, respiratory illnesses, etc.), violence, malnutrition, and harmful weather exposure.”²⁷⁹

It does not take much for a person’s mild health conditions to take a turn for the worse when living in an unstable environment, and physical health needs that go without being assessed and addressed for extended periods of time can lead to more resource-intensive, chronic health issues, such as liver conditions, chronic bronchitis, and tooth loss.

276 See NAT’L HEALTH CARE FOR THE HOMELESS COUNCIL, *supra* note 272, at 1.

277 See ENDING COMMUNITY HOMELESSNESS COALITION, *supra* note 273, at 24.

278 *Id.*

279 NAT’L HEALTH CARE FOR THE HOMELESS COUNCIL, *supra* note 272, at 1.

Dental Care

When asked what service youth experiencing homelessness needed that was not currently being addressed, 1 in 5 youth (20.6 percent) answered dental care.²⁸⁰ Dental care was also a frequent response youth gave when being interviewed for the purposes of this report, when asked the question: “Are there any important things that you need help getting?” Although dental care is rarely a policy priority, multiple studies have shown oral hygiene is a chronic problem for homeless people of all ages.²⁸¹ Poor oral health can have detrimental effects on not only physical health, but emotional health and economic prospects as well.

Although not youth-specific, a 2009 Health Resources and Services Administration study found that 90 percent of the homeless adults surveyed had experienced dental problems in the last six months.²⁸² One common dental problem for people experiencing homelessness is periodontal disease, a gum disease that can lead to tooth loss. The disease is entirely preventable with consistent teeth brushing, flossing, and routine dentist appointments, but with extremely limited resources, people experiencing homelessness often get the disease. In the short term, lack of access to proper oral health care can lead to physical pain, such as bleeding gums, and functional restrictions, like the ability to chew and talk. In the long term, problems can become much more pervasive.

If enough teeth are lost or the pain becomes severe, eating habits can be disrupted to the point that nutrients are not consumed at a sufficient level, and a youth’s physical development can be stunted. Visibly missing teeth also have a strong negative social stigma that can lead to social difficulties with peers, as well as potential employers. This rejection based on stigma from tooth loss can further lead to low self-esteem, anxiety, and depression in youth experiencing homelessness.²⁸³

This is particularly true for young people experiencing homelessness, that already face the prospect of a body going through a myriad of changes, who face significant challenges in meeting their daily health needs, including hygiene, dental care, and nutrition. Access to quality food is essential to good health. A consistent lack of nutritious food can stunt both physical growth and behavioral learning and development. Toxic stress (i.e., unrelieved activation of the body’s stress management system), malnutrition, and limited cognitive bandwidth can all result from a lack of nutritious food.²⁸⁴ It has been consistently shown that all of these effects then result in youth who are unable to concentrate in school or lay a strong foundation for upward mobility and further development.²⁸⁵ Of the youth experiencing homelessness surveyed for *Youth Count Texas!*, 17.1 percent reported needing help accessing hygiene supplies, 10.7 percent reported needing help accessing showers and restrooms, 18.7 percent reported needing help accessing emergency food, and 10.8 percent said they needed routine medical care and weren’t getting it.²⁸⁶

280 NARENDORF, *supra* note 4, at 38.

281 See Nat’l Health Care for the Homeless Council, Oral Health, <https://www.nhchc.org/resources/clinical/diseases-and-conditions/oral-health> (last visited Oct. 23, 2017).

282 Lebrun-Harris, L.A., et al., Health Status and health care experiences among homeless patients in Federally Supported Health Centers: Findings from the 2009 Patient Survey, 48 HEALTH SERV. RES. 3 992-1017 (2013).

283 *Vision & Oral Health Among Individuals Experiencing Homelessness*, in FOCUS (Nat’l Health Care for the Homeless Council, Nashville, TN) June 2015, available at http://www.nhchc.org/wp-content/uploads/2015/06/in-focus_vision-oral-and-homelessness_june20153.pdf

284 AM. PSYCHOL. ASS’N, WHAT ARE THE PSYCHOLOGICAL EFFECTS OF HUNGER ON CHILDREN?, available at <https://www.apa.org/about/gr/issues/socioeconomic/hunger.pdf>

285 See URB. INST, *supra* note 274, at 13.

286 NARENDORF, *supra* note 4, at 37-38.

The basics of health (e.g., water, food, clean clothing, etc.) are required for youth experiencing homelessness to succeed and to allow them to face the more complex aspects of their lives.

While risk-taking and experimentation are characteristic of all adolescents,²⁸⁷ the absence of stable housing, familial support, and supervision puts youth experiencing homelessness at a greater risk of harming themselves or being harmed by others. Moreover, youth experiencing homelessness experience high rates of a number of types of physical victimization, including being picked up by human traffickers to become labor and/or sex workers.²⁸⁸ *Youth Count Texas!* found that 16.8 percent of youth experiencing homelessness had experienced physical or sexual violence while living on the street, 23 percent had been sexually assaulted, and 34 percent had experienced child abuse or neglect. *Voices of Experience*, a study completed by TNOYS in 2011, through which 16 homeless young adults interviewed 135 of their peers across Texas who were also homeless, found that 62 percent of homeless young people interviewed reported that they had been a victim of emotional, physical, or sexual abuse by a family member.²⁸⁹

These high rates of sexual violence, sexual assault, and survival sex leave youth experiencing homelessness at a much higher risk of sexually transmitted diseases and unplanned pregnancies.²⁹⁰ Without access to prenatal care and a sufficiently healthy diet, youth experiencing homelessness who are pregnant carry a higher risk of miscarriage, giving birth to underweight babies, and infant mortality.²⁹¹ Immunodeficiency diseases, like HIV, put youth at a higher risk of contracting almost all other diseases, which pregnant and breastfeeding moms could then pass along to their children.

Other national and state studies have estimated between 6 percent and 22 percent of girls experiencing homelessness are pregnant.²⁹² *Youth Count Texas!* found that 15 percent of youth experiencing homelessness were pregnant or expecting a child, 48 percent of whom were 18 or younger.²⁹³ Moreover, 31.8 percent of youth experiencing homelessness already had a child—25 percent of these youth were 18 or younger.²⁹⁴

Unfortunately, each and every one of these physical health concerns can lead to mental health concerns for youth already dealing with heavy burdens.

287 “[T]he frontal cortex of the brain, the area that controls reasoning and helps us think before we act...continues changing and maturing well into adulthood.” AM. ACAD. OF CHILD & ADOLESCENT PSYCHIATRY, FACTS FOR FAMILIES GUIDE: TEEN BRAIN: BEHAVIOR, PROBLEM SOLVING, AND DECISION MAKING (2016), https://www.aacap.org/aacap/families_and_youth/facts_for_families/FFF-Guide/The-Teen-Brain-Behavior-Problem-Solving-and-Decision-Making-095.aspx

288 See DFPS, HUMAN TRAFFICKING OF DOMESTIC MINORS (2014), available at <https://traffickingresourcecenter.org/sites/default/files/HT%20of%20Domestic%20Minors%20TX%20DCF.pdf>; Unbound, The Unheard Voices of Trafficking (Jan. 5, 2016), <https://unboundnow.org/the-unheard-voices-of-trafficking> (last visited Oct. 24, 2017); NARENDORF, *supra* note 4, at 36.

289 TNOYS, VOICES OF EXPERIENCE: IMPROVING MENTAL HEALTH SUPPORTS FOR HOMELESS AND TRANSITIONING YOUTH (2011), available at <http://tnoys.org/wp-content/uploads/Voices-of-Experience-FINAL.pdf>

290 Texas currently has the fifth highest rate of teen pregnancies and the highest rate of repeat teen pregnancy in the United States. Gwen Daverth, *Texas has the Highest Rate of Repeat Teen Pregnancy in the Country*, DALLAS MORNING NEWS, April 13, 2017.

291 HUM. RESOURCES & SERVICES. ADMIN. HEALTH CENTER PROGRAM, UNDERSTANDING THE HEALTH CARE NEEDS OF HOMELESS YOUTH, available at <https://bphc.hrsa.gov/archive/policiesregulations/policies/pal200110.html>.

292 Nat’l Conf. of State Legislatures, Homeless and Runaway Youth, *supra* note 272.

293 NARENDORF, *supra* note 4, at 30.

294 *Id.*

“There were a few other peers that I could speak to that were going through similar things, but one of the girls ended up committing suicide herself because of the things going on. So it was basically me against the world.”

–R.G., Austin youth

Behavioral Health Needs

Mental Health

While the physical health needs of youth experiencing homelessness are significant, their mental health needs are often immense and can be exacerbated by physical illnesses, and vice versa. Not only are youth experiencing homelessness undergoing significant brain development,²⁹⁵ but the chronic stress of housing instability and common history of previous trauma make youth experiencing homelessness extremely vulnerable to the development of mental health disorders.²⁹⁶ Some of the most common mental illnesses faced by youth experiencing homelessness are depression, anxiety, post-traumatic stress disorder (PTSD), and suicidal behaviors.²⁹⁷

Rates of having at least one psychiatric disorder among youth experiencing homelessness may be as high as four times the rate of having at least one psychiatric disorder for the general population.²⁹⁸ Estimates for the rate of substance use among youth experiencing homelessness range from 28 percent to 81 percent, but there is some consensus that substance use among youth who are homeless is elevated compared to substance use among other populations.²⁹⁹

Voices of Experience found that mental health issues are some of the biggest challenges homeless young people face. Youth were asked to rate the severity of various challenges they may face, which were pulled from literature regarding challenges for youth experiencing homelessness. Overwhelmingly, youth indicated that mental health issues, including controlling anger, difficulty sleeping, depression, and anxiety/nervousness, in that order, are their biggest challenges. Also rated highly as challenges were relationship conflicts, work issues, past abuse/victimization, disturbing thoughts, and loneliness.³⁰⁰

In the *Voices of Experience* study, more than one-third of the sample rated controlling anger and difficulty sleeping as challenges with a severity score of 6 or higher out of 10 and nearly one-third rated disturbing thoughts, past abuse/victimization, and relationship conflicts with a score within that range. Youth who did not age out of foster care were significantly more likely to rate many of these issues as challenging than youth who did age out of foster care. The study attributes this to the mental health

295 FACTS FOR FAMILIES, *supra* note 287. Developmentally, the late teens and early twenties are the age when several mental illnesses begin to appear in the general population. Tomáš P. et al., *Why do many psychiatric disorders emerge during adolescence?* NATURE REVIEWS NEUROSCIENCE 947-957 (2008).

296 *Protecting the Mental Health of Homeless Children & Youth*, HEALING HANDS (HCH Clinician's Network, Nashville, TN) February 2000, available at https://www.nhchc.org/wp-content/uploads/2012/02/hh.02_00.pdf.

297 See, e.g., NAT'L COALITION FOR THE HOMELESS, HOMELESS YOUTH: NCH FACT SHEET #13 2 (2007); Covenant House: Homelessness in America, Mental Health, <https://www.covenanthouse.org/homeless-teen-issues/mental-health> (last visited Oct. 24, 2017).

298 Nat'l Health Care for the Homeless Council, Behavioral Health among Youth Experiencing Homelessness, IN FOCUS, October 2015, available at <https://www.nhchc.org/wp-content/uploads/2011/09/in-focus-behavioral-health-among-youth.pdf>

299 *Id.*

300 VOICES OF EXPERIENCE, *supra* note 289.

services that young people in foster care receive, whereas young people who are homeless and on their own typically do not receive consistent mental health services.

Covenant House, a network of homeless shelters and service providers in 24 cities across the United States, states that 1 in 5 youth they serve have a mental illness, and 2 in 5 have severe depression and feelings of anxiety and aggression.³⁰¹ “Sexual and physical relationship violence as a teen increase the risks of depression, anxiety, and post-traumatic stress disorder (PTSD),” and it has been found that at least 1 out of every 3 student-aged youth experiencing homelessness have experienced such relationship violence.³⁰² “Suicide is the third leading cause of death for youth between the ages of 10 and 24 and results in approximately 4,600 lives lost each year,”³⁰³ according to the Centers for Disease Control and Prevention. It has been found that homeless teens are 3 times more likely to attempt suicide than their housed peers.³⁰⁴ For the *Youth Count Texas!* survey, 39.9 percent of youth experiencing homelessness *self-reported* that they had a mental illness, a surprisingly high number when the stigma of mental illness is considered.³⁰⁵ When asked to rate how challenging certain issues were for them, the most challenging item was housing, but the next five all dealt with mental health: depression, trouble sleeping, anger, anxiety, and disturbing thoughts.³⁰⁶

“With your parents you kind of felt safe—you know no one is going to hurt you. But moving to these places, you have people that you don’t get along with. For me, I’m pretty much scared of people I don’t know. I don’t like talking to people that I don’t know. And people that I do know, I’m always cautious around them.”

–T.H., San Antonio youth

Youth Count Texas! found that 8.6 percent of youth interviewed said they needed mental health care and were not getting it.³⁰⁷ Evidence suggests this number is likely low given limited available resources and the level of trauma and number of mental health concerns youth who experience homelessness state they have.³⁰⁸ It seems that many youth are going to emergency rooms or getting other temporary or piecemeal mental health counseling, rather than the comprehensive and consistent mental health assistance that is necessary to allow for positive mental health progress.³⁰⁹

301 Covenant House, Homelessness in America, <https://www.covenanthouse.org/homeless-teen-issues/mental-health> (last visited Oct. 24, 2017).

302 INST. FOR CHILDREN, POVERTY & HOMELESSNESS, MORE THAN A PLACE TO SLEEP: UNDERSTANDING THE HEALTH AND WELL-BEING OF HOMELESS HIGH SCHOOL STUDENTS (2017), available at http://www.icphusa.org/new_york_city/homelessstudenthealth/.

303 Centers for Disease Control and Prevention, Suicide Among Youth, <https://www.cdc.gov/healthcommunication/toolstemplates/entertainment/tips/suicideyouth.html> (last visited Oct. 24, 2017).

304 INST. FOR CHILDREN, POVERTY & HOMELESSNESS, *supra* note 302.

305 NARENDORF, *supra* note 4, at 33.

306 *Id.* at 39.

307 *Id.*

308 See, e.g., ENDING COMMUNITY HOMELESSNESS COALITION, *supra* note 273, at 23-24.

309 *Id.* at 23 (reporting 33% of surveyed youth have “gone to the emergency room because they weren’t feeling well emotionally or because of their nerves”).

Schools can be a critical identification point for youth who have mental health needs, since federal and state laws require them to both identify and provide supports and services to students who have a disability, including a mental illness.³¹⁰ However, a recent analysis of special education services in Texas public schools suggests that this represents a missed opportunity. According to the analysis, Texas students are 31 percent less likely than the national average to receive school-based services for a mental health issue.³¹¹ Stakeholders interviewed for this report suggest this is driven by both a workforce shortage³¹² and a lack of funding for social workers and counselors in schools.

“I’ve seen some very traumatizing things. I’ve seen people get shot in front of me. People run over. I’ve seen homeless people locked up just because they were sitting there on the sidewalk flying a sign.”

–B.H., Austin youth

“The hardest thing is how people treat you. People really treat you and look at you like you are the scum of the earth. I ended up internalizing it. Now I’ve got a job and I’m housed, but I will always think people think I’m homeless.”

–D.T., Houston youth

The Impact of Pre-Existing and Continuing Trauma

As discussed throughout this report, one of the most common reasons youth find themselves homeless is because of problems at home, causing many youth to experience trauma even before they experience homelessness. The HCH Clinician’s Network, part of the National Health Care for the Homeless Council, describes trauma in this way:

[Trauma is] an experience that creates a sense of fear, helplessness, or horror, and overwhelms a person’s resources for coping. The impact of traumatic stress can be devastating and long-lasting, interfering with a person’s sense of safety, ability to self-regulate, sense of self, perception of control and self efficacy, and interpersonal relationships. Traumatic experiences include neglect, psychological abuse, physical abuse, and sexual abuse during childhood; community violence;

310 See THE ARC OF TEX & DISABILITY RIGHTS TEX, IDEA MANUAL 2016, available at https://www.disabilityrightse.org/uploads/IDEA_Manual_Fall_2016_with_SEARCH.pdf

311 Brian M. Rosenthal, *Denied: Mentally Ill lose out as special ed declines*, HOU. CHRON., November 9, 2016.

312 See TEX DEP’T. OF STATE HEALTH SERVICES, THE MENTAL HEALTH WORKFORCE SHORTAGE IN TEXAS (2014).

*combat-related trauma; domestic violence; accidents; and disasters, and research has found that early developmental trauma—including child abuse, neglect, and disrupted attachment—provides a subtext for the narrative of many people’s pathways to homelessness. Moreover, homelessness itself involves an array of traumatic experiences and increases the risk of further victimization and continuous retraumatization.*³¹³

The Texas Department of Family and Protective Services’ (DFPS) data on referral criteria in 2015, state that over three quarters (75.4 percent) of referred cases had indication of neglectful supervision, 22.5 percent of physical abuse, 20.3 percent of neglect, and 11.9 percent of sexual abuse.³¹⁴ These child welfare numbers are important because a significant percentage of youth—anywhere from 25 percent to 50 percent—are, or were, system-involved at some point in time before, during or after becoming homeless.³¹⁵ Healthy youth development requires self-esteem, a sense of belonging, and some consistent, positive connection to caring adults. This is very difficult for youth who have a history of trauma and have experienced childhood maltreatment and homelessness at a young age. In one of our interviews, a youth experiencing homelessness compared herself to a crinkled up dollar bill—still worth a dollar, but no one wants it.³¹⁶

A report by the Ending Community Homelessness Coalition (ECHO) found that 56 percent of youth surveyed had experienced emotional, physical, psychological, sexual or some other type of trauma or abuse in their life.³¹⁷ In 2015, a study of 601 youth experiencing homelessness ages 18 to 24 in Los Angeles, Denver, and Austin found that 79 percent of youth experiencing homelessness experienced two or more childhood abuses prior to leaving home, and 28 percent reported two or more victimizations while on the streets.³¹⁸ The researchers found that:

*Each additional type of childhood abuse experienced almost doubled the odds for meeting criteria for PTSD and depression but was not significantly associated with substance use disorder. Each additional type of street victimization experienced significantly increased the likelihood for meeting criteria for PTSD by approximately 40 percent, substance use disorder by 90 percent, and nearly doubled the odds of depression.*³¹⁹

The trauma from life events before becoming homeless are further exacerbated by the high levels of youth victimization and chronic stress of experiencing homelessness. Lack of stable housing, hunger, lack of sleep, and fear leads to an increased production of cortisol, a stress hormone that can wreak havoc on young developing brains.³²⁰ A study by the Institute of Child Development at the University

313 HCH Clinicians’ Network, *Substance Use Among Youth Experiencing Homelessness*, HEALING HANDS, Vol. 20, No. 2 (Sept. 2016) (citing Hopper EK, Bassuk, EL, Olivet, J. (2010). Shelter from the storm: Trauma-informed care in homelessness services settings, 3 OPEN HEALTH SERVICES AND POLICY JOURNAL 80-100 (internal quotations omitted).

314 DFPS, ANNUAL REPORT & DATA BOOK (2015), https://www.dfps.state.tx.us/About_DFPS/Annual_Report/2015/pdf/DFPS_2015_Annual_Report_and_Databook.pdf

315 See, e.g., Chapin Hall, Inside the Research: Predictors of Homelessness during the Transition from Foster Care to Adulthood, <http://www.chapinhall.org/research/inside/predictors-homelessness-during-transition-foster-care-adulthood> (last visited Oct. 24, 2017); Nat’l Alliance to End Homelessness, End Homelessness Today: Foster Kids and Homelessness: What are the Risk Factors?, <https://endhomelessness.org/foster-kids-and-homelessness-what-are-the-risk-factors/> (March 17, 2015).

316 Interview notes on file with author.

317 ENDING COMMUNITY HOMELESSNESS COALITION, *supra* note 273, at 26.

318 Kimberly Bender et al., *Multiple Victimization Before and After Leaving Home Associated With PTSD, Depression, and Substance Use Disorder Among Homeless Youth*, CHILD MALTREATMENT, 20(2):115-24 (2015).

319 *Id.*

320 J.J. Cutuli et al., *Cortisol Function Among Early School-aged Homeless Children*, *Psychoneuroendocrinology*, 35(6): 833-845 (2010).

of Minnesota found that negative life events were associated with heightened cortisol levels in young children while socioeconomic status was not, indicating that trauma could have a more significant effect on brain development than poverty does.³²¹ When asked what the leading indicator of youth homelessness is, one service provider responded, “If I had to pick one, I would choose the lack of understanding in the system on trauma and about its impact on the kids.”³²² Indeed, many systems are recognizing the need to focus on “trauma-informed care” in all facets of systems and services—schools, foster care, and juvenile and criminal justice—the same systems that most frequently touch youth experiencing homelessness.³²³

“I never thought [homelessness] would happen, and it changed my mood a bit too. Once you realize you don’t have as much as everyone else, you start to get anxiety, depression and mood swings. You start putting yourself down or think of yourself as less than everybody else. We have feelings too. Just because we don’t have as much as someone else doesn’t mean we should be treated like we’re nothing.”

–W.P., Houston youth

“I think people don’t realize how high the prevalence of past trauma and abuse is among homeless youth. I think some people believe, just like with adult homelessness, that it’s a moral failing. It’s something they did wrong rather than something that happened to them. Along with the lack of understanding about having experienced trauma, people don’t understand the effects of trauma on the brain and their ability to cope and so forth.”

–Austin service provider

When mental illness and trauma are left unaddressed, youth experiencing homelessness suffer in school, are more likely to become involved in the juvenile and criminal justice systems, can have difficulty forming healthy relationships with others, and struggle with substance abuse issues, often as a method to cope.

321 *Id.*

322 Interview on file with author.

323 See THE MEADOWS MENTAL HEALTH POLICY INSTITUTE FOR TEXAS, TRAUMA-INFORMED CARE: FINAL REPORT (2017), available at <http://35xs6ulzhs1u1p3cy926rkn4-wpengine.netdna-ssl.com/wp-content/uploads/2017/08/mmhpi-final-trauma-informed-care-report.pdf>

Substance Abuse & Co-Occurring Disorders

Substance abuse rates are elevated among youth experiencing homelessness, which increases the risks of overdosing, disease spreading, and a multitude of other short and long-term health consequences specific to each youth experience and substance at issue. Over the years, studies have found that substance abuse rates for youth experiencing homelessness can vary anywhere from 28 percent to 81 percent.³²⁴ According to *Youth Count Texas!*, 46.8 percent of youth experiencing homelessness in Texas have experienced alcohol abuse or addiction.³²⁵ Polysubstance use and co-occurring disorders (i.e., the coexistence of both a mental health disorder and substance abuse) are also common among youth experiencing homelessness.³²⁶ Severe physical, psychiatric, substance abuse, and social problems are often co-occurring because coping with one illness or disorder can feed into another.³²⁷ Unsurprisingly, some studies have found a correlation between length of homelessness and an increase in severity or number of disorders.³²⁸

“It’s easier to get crack cocaine than it is to get your regular mental health meds.”

—Travis County judge

There are a number of reasons drug and alcohol abuse may be so common among youth experiencing homelessness, or at least more common than among their continuously housed peers. Some examples include that youth experiencing homelessness:

- self-medicate due to a lack of access to services and medication for pre-existing physical or mental illness;³²⁹
- utilize drugs and alcohol to cope with the stress of homelessness itself;³³⁰ and
- get involved in selling drugs on the street, often for survival purposes.³³¹

The consequences of substance abuse can be dire and permanent, particularly for youth. For example, youth who rely on drugs and alcohol are exposed to memory lapses, kidney or liver damage, greater risk of contracting infectious disease, brain damage, and other cognitive behavioral problems—lifelong problems with addiction may emerge as well.³³²

324 Nat’l Health Care for the Homeless Council, *supra* note 298, at 2.

325 NARENDORF, *supra* note 4.

326 Nat’l Health Care for the Homeless Council, *supra* note 298, at 2.

327 See NAT’L HEALTH CARE FOR THE HOMELESS COUNCIL, *supra* note 272.

328 Nat’l Health Care for the Homeless Council, *supra* note 298, at 3.

329 See *Id.*

330 *Id.*

331 “I slept in a very tight space between two buildings because it was the only place I could find where I could hide away from the police so I didn’t get caught up. I ate out of dumpsters. I flew a sign to make money and got into the drug scene.” B.H., Austin Youth, interview on file with author; “If you’re 16 years old what do you have? You can sell drugs and you can sell your body. That’s just the way it is. So there was a lot of prostitution and a lot of drug use.” Houston Law Enforcement Officer, interview on file with author.

332 See INST. FOR CHILDREN, POVERTY & HOMELESSNESS, *supra* note 302. (citing National Institute on Drug Abuse, Drugs, Brains, and Behavior: The Science of Addiction, revised July 2014).

"I hear a lot of the youth we work with referred to as 'hard to reach' or 'service resistant,' and I can't disagree more with those statements. ... They want services, but the truth is they want services that accept them the way they are [and] provide them with the things they need by people that treat them as individuals with respect and dignity. I always reflect on my own experiences with medical providers, teachers, even probation officers, the ones I respected and built relationships with. ... [It was] because I could be honest with them, and they wouldn't shame me, punish me or try to change me."

–Mary Howe
Executive Director of the
Homeless Youth Alliance³³³

While some service providers find that substance abuse, in and of itself, can perpetuate a youth's homeless status, few find that it should be a barrier to help because it is not a problem that can or should be "siloed."³³⁴ Substance abuse, mental health, physical health, and common issues facing youth experiencing homelessness (e.g., limited and expensive housing markets, family breakdowns, inadequate support when transitioning out of foster care, the justice system, or inpatient mental health) all feed into one another and play a part in blocking youth from reaching their full potential.³³⁵ These are all interacting systems issues that must be addressed to help youth succeed.

Coping Strategies

Young people who are homeless also have constructive mechanisms for coping with past trauma and the challenges that they face. In the TNOYS *Voices of Experience* study, youth were asked to report on how they cope with stress and other problems using a validated list of coping techniques. The coping methods that youth reported using most often were thinking about how things will get better in the future, learning from the bad experience, and realizing that they are strong and can deal with whatever is bothering them. Most youth reported that they do not use less healthy coping techniques to deal with problems such as trying not to think about it or using drugs and alcohol. These findings may support research suggesting that feelings of self-esteem and social connectedness contribute to resilience among youth experiencing homelessness.³³⁶

333 HCH Clinicians' Network, *supra* note 313, at 4.

334 *Id.*

335 *Id.*

336 S. Kidd & G. Shahar, *Resilience in homeless youth: The key role of self-esteem*, AM. J. OF ORTHOPSYCHIATRY, 78(2), 163-172 (2008).

LGBTQ Youth Experiencing Homelessness & Greater Health Needs

According to the National Health Care for the Homeless Council, youth experiencing homelessness that identify as lesbian, gay, bisexual or transgender are at a greater risk of major psychiatric disorders and substance abuse than cis-gender, heterosexual youth experiencing homelessness.³³⁷ “Transgender youth experiencing homelessness may experience intense distress during puberty that can contribute to severe mental illness and consequences on physical health through self-mutilation and use of unmonitored hormone and silicone injections obtained from street suppliers.”³³⁸ Substance abuse is also prevalent in both the LGBTQ and youth experiencing homelessness populations separately. Consequently, where those two populations intersect in an individual, that individual has a significantly higher likelihood of having experienced some form of substance abuse.³³⁹ This is all due in large part to the fact that LGBTQ youth experiencing homelessness endure “higher rates of familial rejection, pervasive societal discrimination, violence, and trauma, which in turn can contribute to self-hatred, the development of psychiatric disorders, suicidal ideation” and various forms of self-medication.³⁴⁰

The Overuse of Psychotropic Medication in Foster Care

Another potential contributor to substance abuse and co-occurring disorders in the population of youth experiencing homelessness is the overuse of medication in foster care. As discussed in Chapter 4, a large number of youth who have or are experiencing homelessness have spent time in the child welfare system. In its data report from 2008, the Government Accountability Office (GAO) stated that foster children were prescribed psychotropic medications (i.e., any medication that affects a consumer or patient’s mind, emotions or behavior) at rates 2.7 to 4.5 times higher than non-foster children on Medicaid in five states, one of which was Texas.³⁴¹ Though data from 2008 is almost 10 years old, it encompasses youth experiencing homelessness today who would have been in care at that time. The agency also found that thousands of foster and non-foster children on Medicaid were prescribed doses higher than the maximum dosages for children and adolescents cited in FDA-approved product label guidelines or medical literature.³⁴² Multiple cases were identified where youth were put on multiple psychotropic drugs concurrently when interventions other than medicine could have been considered instead.

337 Nat'l Health Care for the Homeless Council, *supra* note 298.

338 See NAT'L LGBTQ TASK FORCE & TRUE COLORS FUND, AT THE INTERSECTIONS: A COLLABORATIVE REPORT ON LGBTQ YOUTH HOMELESSNESS, PHYSICAL HEALTH (2016), available at <http://attheintersections.org/physical-health/>

339 See *Id.*

340 *Id.*

341 U.S. Gov't ACCT. OFF., FOSTER CHILDREN: HHS COULD PROVIDE ADDITIONAL GUIDANCE TO STATES REGARDING PSYCHOTROPIC MEDICATIONS 7 (2014), available at <https://www.gao.gov/assets/670/663661.pdf>.

342 *Id.*

These findings are consistent with the belief of many of the youth and stakeholders interviewed for this report. One youth experiencing homelessness in Dallas explained, “Because CPS put me on the wrong dosage of medication, I feel like I am a legalized drug addict. When I try to get off the medication, I go through withdrawal. It is the worst thing ever. I will be up for nights on end. I can’t sleep because of the headaches, and my body just hurts.”³⁴³ In another interview, a service provider articulated why she believes foster youth are drugged at such high rates and the impact it can have:

*The mindset toward these kids is they’re disruptive and willfully disobedient. We can’t control their behavior so we’re going to drug them and try to make them zombies or we’re going to kick them out of the foster home because the foster parents are frustrated. No wonder they can’t do well in school, but imagine what the constant rejection does to the kid’s psyche.*³⁴⁴

Psychotropic drugs alter the chemical balance of the brain, and while they can serve an important medical purpose, their overuse is dangerous for children and youth, especially at doses above the medically recommended maximum.³⁴⁵ Foster youth can become dependent on these drugs, creating a significant health care obstacle if they become homeless,³⁴⁶ including the fact that illegal drugs are often more accessible and can become a surrogate for psychotropic medications when they are no longer available.

Health Barriers for Youth Experiencing Homelessness

Health Care Providers

Many health care providers are available to youth experiencing homelessness, but there are often barriers to utilization, such as the limited availability of transportation and state laws about the types of services that youth can receive without parental consent. The following table lists and describes a number of different types of service providers that could potentially serve unaccompanied youth experiencing homelessness.

343 Interview on file with author.

344 Interview on file with author.

345 See AM. BAR ASSOC., PROTECTING FOSTER YOUTH FROM UNSAFELY ADMINISTERED PSYCHOTROPIC DRUGS (2016), available at <http://apps.americanbar.org/litigation/committees/childrights/content/articles/winter2016-protecting-foster-youth-from-unsafely-administered-psychotropic-drugs.html>.

346 See, e.g., Alex Zielinski, *How Texas’ Overburdened Foster Care System has Produced a Generation of Lost Adults*, SAN ANTONIO CURRENT, Jan. 17, 2017, available at <https://www.sacurrent.com/the-daily/archives/2017/01/17/how-texas-overburdened-foster-care-system-has-produced-a-generation-of-lost-adults>.

Facility Type	Description
General Acute Care Hospital	<ul style="list-style-type: none"> • licensed to operate 24 hours per day • diagnostic treatment, emergency care, and critical care available • good for immediate, short-term intervention
City/County Hospital	<ul style="list-style-type: none"> • full range of inpatient services
Children’s Hospital	<ul style="list-style-type: none"> • specialized care for infants, children, and adolescents with staff trained in pediatric care
Community Clinic	<ul style="list-style-type: none"> • consumer-based, community-controlled, nonprofit • provides basic health care on an outpatient basis • also known as a “free clinic” • part of a network of federally qualified health centers
Public Clinic	<ul style="list-style-type: none"> • county or city operated • broad range of diagnostic and treatment services on an outpatient basis • can include prenatal care, dental care, and laboratory and/or radiology services
Women’s Health Center	<ul style="list-style-type: none"> • provides comprehensive diagnostic and treatment services focused on women • places emphasis on educational programs regarding women’s health
Hospital-Based Outpatient Services	<ul style="list-style-type: none"> • provides basic and/or specialized diagnostic and treatment services on a walk-in, walk-out basis • can be a free standing clinic or department within a hospital
Nonprofit Hospital	<ul style="list-style-type: none"> • must provide a certain amount of free health care to people with no insurance or who cannot afford to pay • information about the charity care program must be posted in the emergency room, general waiting areas, business office, and other visible areas

Additionally, the Health Care for the Homeless Program (HCH) was created in 1985 “to determine if a specialized model of delivering services could improve the health of individuals experiencing homelessness.”³⁴⁷ These programs were eventually consolidated with community health centers and other primary care projects and are community-based, patient-directed organizations that serve low-income populations with limited access to health care.³⁴⁸ While services are provided based on ability to pay, no patient can be turned away because of a lack of funds.³⁴⁹ The original 19 demonstration programs have grown to 208 HCH programs nationally, with 10 locations across the State of Texas.³⁵⁰ Programs must receive 8.7 percent of federally appropriated health center funds.³⁵¹ While youth can access these programs, some programs or procedures available through these programs require parental consent, which can be a barrier to youth experiencing homelessness accessing services.

347 Nat’l Health Care for the Homeless Council, When and how was the Health Care for the Homeless Program Created?, <https://www.nhchc.org/faq/health-care-homeless-program-created-do/> (last visited Oct. 24, 2017).

348 *Id.*

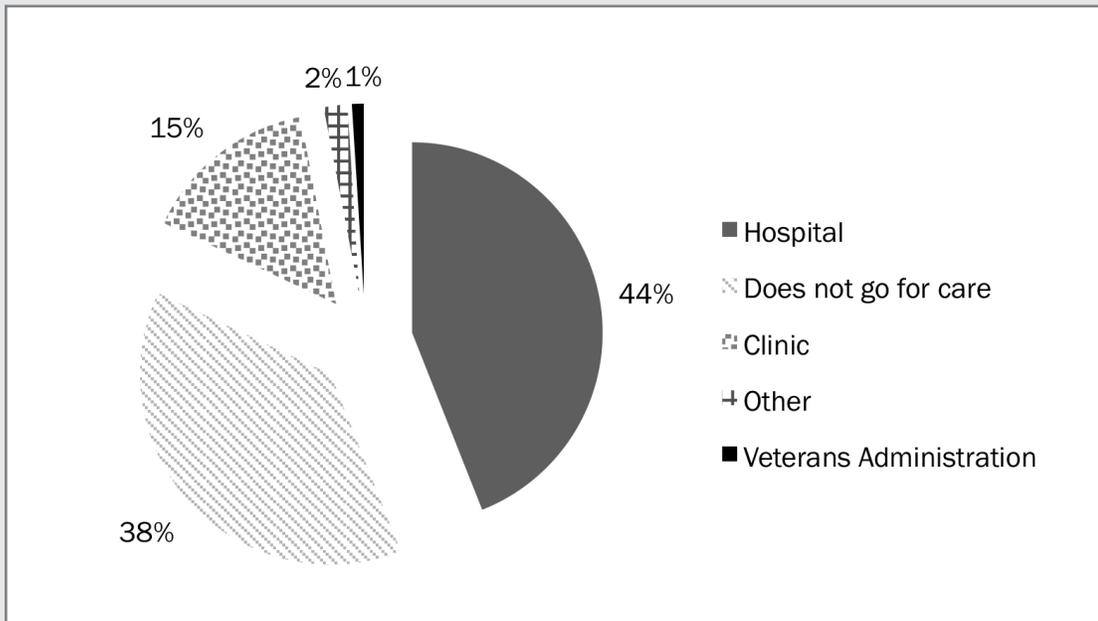
349 *Id.*

350 *Id.*

351 *Id.*

Multiple studies have found that youth rely heavily on emergency services for their health care needs.³⁵² In their youth homelessness needs assessment, ECHO found that 62 percent of surveyed youth reported having been to the emergency room in the six months previous to the intake of responses, 40 percent had been taken to a hospital, and 27 percent had been hospitalized.³⁵³ ECHO discusses a number of reasons why it is believed that youth rely so heavily on emergency hospital services, including that they do not have enough access to health insurance, sometimes do not know when to seek out medical assistance until the situation becomes dire, want to avoid being put into any system for fear of stigma or an inability to leave when they choose, and lack other service options available to them within their community.

Where Travis County Youth Seek Care When They Are Not Feeling Well³⁵⁴



In addition to the common barriers health care providers may encounter when attempting to serve youth experiencing homelessness—such as a youth’s inability to gain parental consent and young people’s mistrust of adults and systems—the services and care offered may be imbalanced and can vary widely across the state.³⁵⁵ Few, if any, areas have *all* of the services that could be beneficial to youth

352 See, e.g., THE NAT’L NETWORK FOR YOUTH, POLICY BRIEF: RUNAWAY AND HOMELESS YOUTH ACT 4, available at <http://www.chapinhall.org/sites/default/files/documents/nn4youth-policy-brief.pdf>; J.L. Mackelprang et al., *Predictors of Emergency Department and Inpatient Readmissions among Homeless Adolescents and Young Adults*, MED. CARE, 53(12), pp. 1010-1017 (2015).

353 ENDING COMMUNITY HOMELESSNESS COALITION, *supra* note 273, at 26.

354 *Id.*

355 See NARENDORF, *supra* note 4, at 33 (“They noted that some young people resist seeking treatment due to stigma but even those who are committed to getting help have to fight hard and be persistent to access the service system and simply get an assessment.”)

experiencing homelessness, leaving significant service gaps in the youth-centered continuum of care. As discussed in Chapter 6, there is very little funding specifically for programs that serve youth experiencing homelessness, let alone for the health or mental health of those youth. In the realm of health, resources for certain communities are growing more scarce, particularly rural areas, further limiting access to services for youth experiencing homelessness.³⁵⁶

“We rely too heavily on residential treatment in this community. We don’t have enough facilities where we can do intensive outpatient mental health services for children. That’s a huge gap in our array of services. They rely on it a lot more in other states than we do, and we don’t have it.”

–Travis County judge

“Well, it’s just that there’s not good alternatives. As far as mental health providers for mental health intervention at this time, really the only thing we’ve got is emergency mental detentions. They get, you know, acute care, and then usually they’re out the door in 72 hours. And, then, if they’re 17 years or above, they end up making some kind of misdemeanor violation of the law and end up in our jail...which is not a good place for somebody that has a mental illness. But if they’re not a clear and present danger to themselves or someone else, and they are culpable to whatever extent they are, then police officers to a large extent have their hands tied. There’s not an alternative location to take them and say, ‘Hey, this juvenile who’s sleeping on the steps of Target and refuses to leave’ and they end up getting arrested for criminal trespass. Which is crazy. But they end up in our jail.”

–Tarrant County law enforcement

356 Bill Hanna, *Small-town Hospital Closings Leave Rural Texans Far From Medical Care*, STAR-TELEGRAM, Nov. 25, 2016, available at <http://www.star-telegram.com/news/state/article116987298.html> (stating 15 rural hospitals across Texas have closed since 2013).

Insurance

Health insurance is a vital necessity for accessing quality health care in America. Many young people never concern themselves with the issue of insurance until they are no longer under the care of their parents because they do not have to, but for youth experiencing homelessness, knowledge of how to obtain and utilize health insurance can be lifesaving. While many youth experiencing homelessness may not be aware of what is available to them, there are some options, though they each come with their own barriers.

“I didn’t have Medicaid. There weren’t even any split-second clinics where you could go to get a shot or a checkup. Everyone expected some kind of coverage. And I was a minor. I was about 17 at the time. I had to have my parent present. How do you explain that? There was no hope so I would just pray.”

–C.F., Houston Youth

Medicaid

Medicaid provides for free or low-cost health coverage for a select variety of individuals, including adults who have disabilities, children, seniors aged 65 or older, and for some former foster care youth.³⁵⁷ In Texas, those adults or emancipated minors with a household income of 133 percent of the federal poverty level may qualify.³⁵⁸

Medicaid covers a range of health services, including, but not limited to:

- Doctor and clinic visits
- Hospital visits
- Emergency care
- Medicine
- Medical equipment and supplies
- Glasses
- Tests and X-rays
- Family planning
- Pregnancy and childbirth care
- Mental health treatment

357 TEX. HEALTH & HUM. SERVICES, MEDICAID AND CHIP, <https://hhs.texas.gov/services/health/medicaid-chip> (last visited Oct. 24, 2017); TEX. HEALTH & HUM. SERVICES, TEXAS MEDICAID AND CHIP IN PERSPECTIVE (11th ed. 2017), *available at* <https://hhs.texas.gov/sites/default/files/documents/laws-regulations/reports-presentations/2017/medicaid-chip-perspective-11th-edition/11th-edition-chapter3.pdf>.

358 Obamacare.net, ACA Information, <https://obamacare.net/2017-federal-poverty-level/> (last visited Oct. 24, 2017).

- Treatment for drug or alcohol abuse issues
- Personal care services
- Care in a nursing home or other place of care
- Care in your home
- Rides to your doctor, dentist, or drug store
- Speech therapy—help learning to speak again or speak better
- Physical therapy—help learning how to move around better or become stronger
- Occupational therapy—help learning how to do everyday activities like getting around your home, getting in a car, and getting dressed³⁵⁹

Unfortunately, being homeless does not automatically qualify a child or young adult for Medicaid.³⁶⁰

In addition to Medicaid, there is the statewide STAR program, which “is managed care Medicaid.”³⁶¹ Managed care Medicaid means that a patient picks a main doctor who takes care of a majority of their health needs, gets to know them, and connects them to various specialists and other types of medical assistance.³⁶² Those on Medicaid who receive TANF (Temporary Assistance for Needy Families) benefits, are pregnant, have limited income or are a newborn baby must enroll in STAR.³⁶³ As of November 1, 2016, there is now also STAR Kids for children and adults 20 or younger who have disabilities.³⁶⁴

For youth with a serious emotional disturbance, a Youth Empowerment Services (YES) Waiver can provide “comprehensive home and community-based mental health services to youth between the ages of 3 and 18, up to a month before a youth’s 19th birthday, who have a serious emotional disturbance.”³⁶⁵ The barrier to youth who are experiencing homelessness utilizing the YES Waiver is that youth must live in a home setting with a legal guardian or on their own, if legally emancipated.³⁶⁶

Another barrier to some youth receiving mental health services through Medicaid has been the Institutions for Mental Diseases (IMD) exclusion. This exclusion “prohibit[ed] the use of federal Medicaid financing for care provided to most patients in mental health and substance use disorder residential treatment facilities larger than 16 beds,” and had been in the law since Medicaid’s enactment.³⁶⁷ This rule was in place because states were responsible for providing mental health services to those staying in state hospitals, but over time there has been a push to deinstitutionalize mental health services. As such, the Center for Medicaid & Medicare Services (CMS) now provides that if “a facility that would be considered an IMD under the statute is providing psychiatric or substance abuse care to an adult ages 21 to 64 for a Medicaid-covered individual in a managed care plan, the facility can

359 TEX. HEALTH & HUM. SERVICES, YOUR HEALTH CARE GUIDE: 2017 EDITION 5, *available at* http://www.tmhp.com/TMHP_File_Library/Medicaid/Client/2017%20FFS%20Handbook_English.pdf.

360 NAT’L ASSOC. FOR THE EDUCATION OF HOMELESS CHILDREN AND YOUTH, UNACCOMPANIED YOUTH TOOLKIT FOR FINANCIAL AID ADMINISTRATORS: ACCESS TO MEDICAID FOR UNACCOMPANIED YOUTH 2 (Nov. 2011).

361 Tex. Health & Hum. Services, STAR Medicaid Managed Care Program, <https://hhs.texas.gov/services/health/medicaid-chip/programs/star-medicaid-managed-care-program> (last visited Oct. 24, 2017).

362 *Id.*

363 *Id.*

364 Tex. Health & Hum. Services, Medical and Dental Plans, *available at* <https://hhs.texas.gov/services/health/medicaid-chip/programs/medical-dental-plans> (last visited Oct. 24, 2017).

365 Tex. Health & Hum. Services, Youth Empowerment Services (YES), *available at* <http://www.dshs.texas.gov/mhsa/yes/> (last visited Sept. 29, 2017).

366 Texas Health & Hum. Services, FAQs, <http://www.dshs.texas.gov/mhsa/yes/FAQ.aspx> (last visited Oct. 24, 2017).

367 LEGAL ACTION CENTER, THE MEDICAID IMD EXCLUSION: AN OVERVIEW AND OPPORTUNITIES FOR REFORM (2014), *available at* https://lac.org/wp-content/uploads/2014/07/IMD_exclusion_fact_sheet.pdf

treat that patient for 15 days and be paid by the state Medicaid program with the state receiving the federal matching payment for the service.”³⁶⁸

In Texas, Medicaid covers 2.59 million low-income children, and children account for 70.5 percent of people on Medicaid in Texas.³⁶⁹ Medicaid pays for 86 percent of births to adolescents in Texas.³⁷⁰ There are estimated to be just under 700,000 children under 18 who are uninsured in Texas, and 89.8 percent of them are eligible for Medicaid or CHIP but are not enrolled.³⁷¹ It is highly likely that there are youth experiencing homelessness who fall into that category—eligible, but not enrolled.

Children’s Health Insurance Program (CHIP) and Children’s Medicaid

The Children’s Health Insurance Program (CHIP) covers a wide variety of health needs including doctor’s visits, teeth cleanings and fillings, prenatal services, mental health care, and may even cover special services for individuals with a disability or other long-lasting illnesses.³⁷² In order to qualify, a child must be 18 or younger, a Texas resident, and a U.S. citizen or legal permanent resident.³⁷³ Individuals who can apply include the following:

- “Any adult who lives more than half the time with an uninsured child may apply. This includes parents, stepparents, grandparents, other relatives, legal guardians, or adult brothers or sisters;
- Anyone age 19 or younger who lives on their own can apply; and
- A pregnant person of any age can apply for CHIP [pre]natal services for her unborn child or apply for Medicaid.”³⁷⁴

While there is no cost for Children’s Medicaid, enrollment fees (\$50 or less per family, per year) and co-pays (anywhere from \$3 to \$35) based on family income are required for CHIP beneficiaries.³⁷⁵ Youth experiencing homelessness may be loath, or unable, to pay these costs because such funds are extremely limited.

There is a Medicaid Buy-in for Children for families “who have a child with a disability, but earn too much money to get regular Medicaid.”³⁷⁶ For a monthly fee, families can buy-in to Medicaid that will cover doctor’s visits, vaccines, doctor-ordered and prescribed drugs, lab tests, X-rays, hospital care, vision, hearing, and dental, among a variety of special needs services.³⁷⁷

368 Rodney Whitlock, *The IMD Exclusion: Changes Now and Changes to Come*, Health Law & Policy Matters Blog, April 27, 2016, <https://www.healthlawpolicymatters.com/2016/04/27/the-imd-exclusion-changes-now-and-changes-to-come/>; see DEPT. OF HEALTH & HUMAN SERVICES, CENTER FOR MEDICARE & MEDICAID SERVICES, MEDICAID AND CHILDREN’S HEALTH INSURANCE PROGRAM (CHIP) PROGRAMS: MEDICAID MANAGED CARE, CHIP DELIVERED IN MANAGED CARE, AND REVISIONS RELATED TO THIRD PARTY LIABILITY 220 (2016), available at <https://s3.amazonaws.com/public-inspection.federalregister.gov/2016-09581.pdf>

369 AM. ACAD. OF PEDIATRICS, MEDICAID FACTS: TEXAS 2 (2017), available at https://www.aap.org/en-us/Documents/federaladvocacy_medicaidfactsheet_texas.pdf.

370 Daverth, *supra* note 290.

371 AM. ACAD. OF PEDIATRICS, *supra* note 369, at 2.

372 Texas Health & Human Services, How to Get Help: CHIP and Children’s Medicaid, <https://yourtexasbenefits.hhsc.texas.gov/programs/health/child/childrens-medicaid> (last visited Oct. 24, 2017).

373 *Id.*

374 *Id.*

375 *Id.*

376 Texas Health & Human Services, How to Get Help: Health Care, <https://yourtexasbenefits.hhsc.texas.gov/programs/health/child/buy-in> (last visited Oct. 24, 2017).

377 *Id.*

Assuming there are no significant changes to the Affordable Care Act (ACA), “youth who are not eligible for Medicaid or CHIP, but have household incomes between 100-400% of the [federal poverty level], may be eligible to purchase coverage from the health insurance Marketplace with financial assistance.”³⁷⁸ This can still be cost prohibitive for youth experiencing homelessness. Further, even if a youth is not in close contact with his or her parent, he or she may still remain on their parents’ insurance until the age of 26.³⁷⁹ One barrier here is that a youth may need to communicate with their parent to obtain proof of insurance or even find out if this is an option for them. Communicating with an estranged parent brings its own challenges, including the potential of exposing the youth to an abuser.

Health Care for Former Foster Care Children

If a youth was in Texas foster care on his or her 18th birthday or older, got Medicaid when he or she aged out of care, and is currently 18 to 25 years old, that youth is eligible for Medicaid for Former Foster Care Children.³⁸⁰ For children in foster care, primary and emergency care are covered.³⁸¹ Dental care is also covered for those 20 years of age and under.³⁸² For former foster youth who did not get Medicaid when he or she aged out of care, they may be eligible for Medicaid for Transitioning Foster Care Youth if they are 18 to 20 years old, were in Texas foster care on their 18th birthday or older, do not have other health coverage, and do not surpass the allowable monthly income limits.³⁸³ Additionally, STAR Health, which “is a statewide, comprehensive healthcare system that was designed to better coordinate and improve access to health care” for current and former foster youth, provides access to additional services including online mental health resources, access to diversion programs, and membership to Boys & Girls Clubs and other sports camps.³⁸⁴

Local Options

Sometimes there are local health care options that cover individuals that might fall through the rather large gaps in the system. For example, in Travis County there is the Medical Access Program (MAP). MAP is a local health care option that provides access to primary care, urgent care, prescription drug services, emergency transportation, and general dental services.³⁸⁵ The MAP program does not include mental health care or rehabilitation services.³⁸⁶ In order to be eligible for MAP services, an individual—at minimum—must live in Travis County and have no Medicaid, Medicare, or other health care coverage.³⁸⁷ Local municipalities and cities can play a key role in creating health care options and insurance programming that serves members of their community that may be left without access to national or statewide programs.

Overall, it can be difficult for youth to determine which health insurance they might qualify for, if any. Once a decision to apply has been made, the process of acquiring the insurance can be daunting, as documentation will be required, and it can be a waiting game: two things that are hard when one lives a transient life.

378 U.S. DEP’T OF HEALTH & HUM. SERVICES, HEALTH COVERAGE OR HOMELESS AND AT-RISK YOUTH 1, *available at* <https://aspe.hhs.gov/system/files/pdf/198441/HomelessHealth.pdf>. This resource also provides a list of services that must be covered by an Affordable Care Act Marketplace plan.

379 *Id.*

380 Tex. Health & Human Services, How to Get Help: Medicaid for Former Foster Care Children, <https://yourtexasbenefits.hhsc.texas.gov/programs/health/child/former-foster-care> (last visited Oct. 24, 2017)

381 *Id.*

382 *Id.*

383 Tex. Health & Human Services, How to Get Help: Medicaid for Transitioning Foster Care Youth, <https://yourtexasbenefits.hhsc.texas.gov/programs/health/child/transitioning-foster-care> (last visited Oct. 24, 2017).

384 Tex. Department of Family and Protective Services, STAR Health - A Guide to Medical Services at CPS, https://www.dfps.state.tx.us/Child_Protection/Medical_Services/guide-star.asp#what (last visited Oct. 24, 2017).

385 Central Health, Medical Access Program, <http://www.medicalaccessprogram.net/> (last visited Oct. 24, 2017).

386 *See id.* (“Benefits”).

387 *Id.* (“Do I Qualify?”)

Food Access

As discussed previously, youth experiencing homelessness often face food scarcity and are therefore at risk of malnutrition and going hungry.³⁸⁸ There are a couple of programs that youth can apply to, in order to obtain food, including Temporary Assistance for Needy Families (TANF) and the Supplemental Nutrition Assistance Program (SNAP).

TANF is a support service for families that provides monthly cash payments to help pay for food, clothing, housing utilities, transportation, and other basic needs.³⁸⁹ Funding for TANF comes to the states in the form of block grants.³⁹⁰ The program was not designed with unaccompanied youth experiencing homelessness in mind, but they can take advantage of the resource under the specific application guidelines.

SNAP, formerly food stamps, helps people buy food by loading benefits onto a Lone Star Card, which can be used just like a credit card.³⁹¹ Though there are some restrictions on purchases, many places accept the Lone Star Card.³⁹² Benefits are limited to three months in a three-year period but can be extended with proof of work or job training program enrollment.³⁹³

Homeless families and youth often face barriers in accessing food programs, including TANF and SNAP, due to lack of documents, high mobility, and lack of transportation.³⁹⁴ As such, school is one of the most important places where homeless students receive a complete meal, including before and after-school meal programs. Aside from school, youth experiencing homelessness must rely on summer food programs and more traditional food pantries, food vouchers, and soup kitchens—exposing them to an adult population they often seek to avoid for their own safety.

Youth experiencing homelessness—minors in particular—also encounter problems when applying for any type of benefits because records may show that someone within their household is already receiving benefits, preventing the youth from applying for benefits in their own name.

Cleaning Facilities

When children and youth have access to bathing and laundry facilities they are more likely to attend class or show up to work.³⁹⁵ This is in large part because they do not have to be worried about whether they will face stigma or be rejected by their peers or others for lack of cleanliness; this is a very real concern for youth experiencing homelessness, particularly as the lack of cleanliness may expose their homeless state. Moreover, when schools recognize this type of student need, they demonstrate that someone cares and is able to provide much-needed support. Schools that have had washers and dryers installed, making them accessible to students at no cost, have seen large increases in attendance, particularly for high-risk kids (i.e., students with 15 or more absences during the school year).³⁹⁶ According to

388 NARENDORF, *supra* note 4 at 37 (finding 18.7% of surveyed Texas youth reported needing emergency food assistance).

389 Texas Health & Human Services, How to Get Help: TANF Cash Help, <https://yourtexasbenefits.hhsc.texas.gov/programs/tanf/families> (last visited Oct. 24, 2017).

390 CENTER ON BUDGET AND POLICY PRIORITIES, POLICY BASICS: AN INTRODUCTION TO TANF (2015), *available at* <https://www.cbpp.org/research/policy-basics-an-introduction-to-tanf>

391 Texas Health & Human Services, SNAP Food Benefits, <https://yourtexasbenefits.hhsc.texas.gov/programs/snap> (last visited Oct. 24, 2017).

392 *Id.*

393 *Id.*

394 NAT'L CENTER FOR HOMELESS EDUC., ACCESS TO FOOD FOR HOMELESS AND HIGHLY MOBILE STUDENTS (2012), *available at* <http://www.theotx.org/wp-content/uploads/2016/02/Access-to-Food-for-Homeless-and-Highly-Mobile-Students.pdf>

395 See Allison Slater Tate, *Parents, Schools Find One Simple Answer to Attendance Problem: Washing Machines*, TODAY.COM, Aug. 28, 2017, *available at* <https://www.today.com/parents/schools-find-one-simple-answer-attendance-problem-washing-machines-t101318>

396 Care Counts by Whirlpool Home Page, <https://carecounts.whirlpool.com/> (last visited Oct. 24, 2017).

Whirlpool's Care Counts program, 86 percent of high-risk students increased their attendance during the 2016-2017 school year.³⁹⁷ Moreover, "89% of kids participated more in class, 95% interacted with their peers more, and nearly all of them were reported as being more motivated."³⁹⁸ Programs and partnerships are relatively new and are not yet commonly available in the state.³⁹⁹

Consent

Texas generally adheres to the principle that a parent's right to rear their child as they see fit is fundamental. As such, there is no "mature minor doctrine"—i.e., policy that accepts that an unemancipated minor may possess the maturity to choose or reject health care treatment on his or her own behalf. However, in Texas, there are certain situations where unaccompanied youth can generally get medical care without parental consent. Unfortunately, due to the complex nature of what consent rules apply when, consent to medical care can cause great confusion on the part of both unaccompanied youth and health care and shelter providers.

Under Texas law, a minor may consent to medical, dental, psychological, and surgical treatment if the minor is 16 years of age or older and resides separate and apart from his or her parents, managing conservator or guardian, and the minor is managing his or her own financial affairs, regardless of source of income.⁴⁰⁰ A minor can also consent to treatment if he or she is legally emancipated or married because their disability of minority has been removed by one of these life events, under the law.⁴⁰¹ Additionally, a minor on active duty in the military can consent to his or her care.⁴⁰² According to the National District Attorneys Association, married minors in Texas can consent to contraceptives, all minors can consent to STD testing, all minors can consent to prenatal care, and parental consent and notice is required prior to any minor receiving abortion services.⁴⁰³

Further, grandparents, adult brothers or sisters, and adult aunts or uncles can consent for most treatments (but not immunizations) if a parent or conservator cannot be contacted.⁴⁰⁴ There is no need to obtain consent for emergency care if there is a life-threatening injury or illness and a parent or guardian is not present to give consent.⁴⁰⁵

Minors can also consent to counseling for suicide prevention, chemical addiction or dependency, or sexual, physical or emotional abuse, but a minor cannot consent to inpatient counseling.⁴⁰⁶ Texas relieves parents of the financial responsibility for care if the child consents to counseling treatment without parental consent. This means that those health care providers engaged in counseling (e.g., physicians, psychologists, counselors or social workers) may be less likely to conduct counseling with a minor without parental consent because they are less likely to be compensated for their services.⁴⁰⁷

397 *Id.*

398 Chris Weller, *Whirlpool gave washers and dryers to 17 schools in Illinois and California and attendance rates shot up—here's why*, BUS. INSIDER, Aug. 30, 2016, available at <http://www.businessinsider.com/washing-machines-solve-schools-big-problem-2016-8>.

399 Sanya Mansoor, *As Families Choose Between Laundry and Food, Dallas Schools Add Washer/Dryer Sets*, DALLAS MORNING NEWS, Oct. 26, 2016, available at <https://www.dallasnews.com/news/education/2016/10/26/washerdryer-sets-high-demand-dallas-schools-children-come-school-filthy-monday>.

400 TEX. FAM. CODE § 32.003.

401 TEX. FAM. CODE § 101.003.

402 TEX. MED. ASSOC. OFF., CONSENT FOR TREATMENT OF MINORS (2009), available at <https://tma.custhelp.com/ci/fattach/get/19231/0/filename/Consent+for+Treatment+of+Minors+July+2009+Final.pdf>

403 NAT'L DISTRICT ATT'Y ASSOC., MINOR CONSENT TO MEDICAL TREATMENT LAWS (2013), available at [http://www.ndaa.org/pdf/Minor%20Consent%20to%20Medical%20Treatment%20\(2\).pdf](http://www.ndaa.org/pdf/Minor%20Consent%20to%20Medical%20Treatment%20(2).pdf)

404 TEX. FAM. CODE § 32.001.

405 TEX HEALTH & SAFETY CODE § 773.008.

406 TEX. FAM. CODE § 32.004.

407 TEX. FAM. CODE § 32.004(e).

One thing that is particularly perplexing for some service providers is that youth can give consent to immunization *only* if they are either pregnant or are the parent of a child and have custody of that child *and* “the Centers for Disease Control and Prevention recommend or authorize the initial dose of an immunization for that disease to be administered before seven years of age.”⁴⁰⁸ Immunizations are essential for school attendance, and while an unaccompanied youth can be enrolled without immunization records initially,⁴⁰⁹ a school is going to keep following up with that child about any missing immunizations, and that may drive a minor to leave school because he or she cannot consent to immunizations on his or her own behalf.

Another perplexing consent rule concerns pregnant and parenting teens. Teen parents have medical authority over their children, but they do not have the ability to make decisions about their own health care.⁴¹⁰ That means they cannot get birth control without their parents’ approval, even though they are already parents themselves. Further, for many pregnant youth, it is not an insignificant fear that parents who they may be estranged from will be contacted about their pregnancy or that they are seeking care after having a child. Some service providers believe this policy defies common sense and creates an unnecessary barrier for youth to prevent repeat pregnancies.⁴¹¹

“Only us and Utah have a law that if you’re already a parent, you are the legal medical guardian of your baby, but you cannot make your own medical decisions without the now-grandma involved.”

–Gwen Daverth
CEO of the Texas Campaign to
Prevent Teen Pregnancy⁴¹²

While it is important to preserve the parent’s right to raise their child, it is necessary for unaccompanied youth to be able to access and consent to all the health care services they may require. As the law stands, there is some confusion on not only what youth can consent to, but also what health care providers and parents may be liable for based on the medical procedures and counseling a child may seek.

408 TEX. FAM. CODE § 32.101(a).

409 42 U.S.C. § 11432(g)(1)(I).

410 TEX. FAM. CODE § 32.003.

411 Daverth, *supra* note 290.

412 Lauren Silverman, *In Texas, Abstinence-Only Programs May Contribute to Teen Pregnancies*, NPR, June 5, 2017, available at <http://www.npr.org/sections/health-shots/2017/06/05/530922642/in-texas-abstinence-only-programs-may-contribute-to-teen-pregnancies>.

Access to Medical Records

Another significant barrier to youth who need physical and behavioral health services is access to medical records, both because there are barriers to authorizing release of the records and the costs of obtaining them. Youth can generally request their medical records or authorize medical professionals to access or receive them, if the youth was able to consent, under state law, to the treatment documented within those records without the consent of a parent or guardian.⁴¹³ If a youth could not consent to the care without parent or guardian authorization, then they likely do not have the authority to grant access, and a parent or guardian release of information will be required.⁴¹⁴

A medical professional or entity will not release a youth's records if, when exercising professional judgment, a doctor or other professional believes that it would not be in the youth's best interest and believes that the youth may have been subjected to domestic violence, abuse, or neglect by the person seeking to receive the records, or that releasing the youth's records could endanger the child's life.

The costs of acquiring one's own medical records can also be a barrier to acquiring quality care, as it can be vitally important for doctors and other health care professionals to be knowledgeable about a patient's medical history. While a doctor or health facility may not require individuals to pay for their medical records if the request is related to a benefits or assistance claim based on the individual's disability or mental health concern, hospitals and medical professionals are not otherwise required to provide medical records unless their required "reasonable" fees are paid.⁴¹⁵

Continuity of Care

Continuity of care can act as a prime point of stability for this population. Most people strive to maintain the same doctor or therapist because it ensures both a relationship of trust between patient and professional, and a prior and continuous knowledge of a patient's needs on the part of the health care professional. For youth experiencing homelessness, this need for continuity with one's health care professionals is even greater because that relationship may be one of the only consistent relationships in that child's life; a life where trust of adults and authority figures is already strained.

Unfortunately, continuity of care can be very difficult to achieve for youth experiencing homelessness. The transient nature of the population makes it hard to stay with the same doctors or even keep appointments, and if the individual is able to keep the same doctors, lack of transportation is often a barrier. Further, despite consistent health care being essential, it often does not take precedence over food, employment or housing, which means that it is sometimes difficult to get engagement and retention on the part of a 16-, 17-, or even 22-year-old. Lack of continuity of care leads to treatment disruptions, duplication, and sometimes more distrust of the systems that are supposed to provide youth with some support.

413 TEX. DEP'T OF STATE HEALTH SERVICES, ADOLESCENT HEALTH: A GUIDE FOR PROVIDERS 8, (2016), available at <https://www.dshs.texas.gov/thsteps/pdfdocs/AHG-08-2016.pdf>

414 *Id.*

415 TEX. ADMIN. CODE § 165.2 (e) & (k).

Distrust of System

An additional barrier to youth experiencing homelessness seeking out or receiving medical care is a complete distrust of the very systems that are available to provide them with services. This distrust is born out of a number of experiences and preconceived notions. To name a few:

- Past experiences with adults, sometimes including their own parents;
- A fear of being judged;
- Uncertainty about being reported to Child Protective Services;
- Uncertainty about whether they will have a choice to leave the service provider once they enter and request services; and
- Belief that some service providers are out of touch and do not understand or cannot know the realities and stresses of living on the street.

“If your child [has a mental illness], why are you going to take them to CPS? That makes zero sense. That just really made my situation worse because I felt like I was not wanted. It was already bad enough that everyone hated me because I was gay, because I identified as transgender.”

–T.F., Dallas Youth

“We are not very successful with our psychiatric emergency crisis response. We have to go through the police department to get a youth into inpatient care anywhere. That tends to exacerbate the crisis. The mental health trained officers are few and far between. Depending on the day and what they’re dealing with, we’ve had a suicidal client have to wait for upwards of eight hours for a mental health deputy to come and assess them for mental health treatment. We can’t call out the mobile crisis outreach team directly. That has to be called through APD. We’ve had youth who we’ll take to the Brackenridge psychiatric emergency department, and they’re released 5 minutes later and come right back to us. I don’t feel like those interactions are super successful. And they’re not typically very youth focused or even person focused. If the youth is saying I don’t want to be on this medication, it makes me feel X, Y and Z, they’re essentially told if you refuse to be med-compliant, we can’t help you. That’s a challenge.”

–Austin service provider

Indeed, some youth do not trust medical professionals because of prior experience with medical professionals through Child Protective Services. They may feel that they were drugged into obedience and overmedicated while in care, whether the medication and diagnosis was in fact necessary or not, and that experience colors their potential relationship with future medical professionals. Mary Green, HAY Center Director of Transition Services, describes the confusion saying, “The story out there is all of these kids are misdiagnosed and overmedicated. What we found is that’s not really the case. What we’ve found is that these kids just don’t understand their diagnosis.”⁴¹⁶

Confidentiality

A slightly different take on the issue of distrust is the issue of confidentiality. Even if a child does not live with a parent, parents who have not had their rights terminated can access a minor’s physical and behavioral health records, unless the health care professional believes that he or she will be putting that minor in danger by handing those records over.⁴¹⁷ Alternatively, a medical professional, counselor, social worker, or other such professional, with or without the consent of a child who is a patient, can inform a parent or guardian of treatment or counseling that has been or will be given to a child.⁴¹⁸

Often youth under the age of 18 are worried that if they seek some form of treatment from any system they, or the fact that they are seeking treatment, will be reported to a parent, guardian or CPS. This fear of a lack of confidentiality creates a barrier to youth receiving treatment.

Stigma

The stigma attached to needing care, especially for mental health, is exacerbated for youth experiencing homelessness who highly value their independence and the opinions of their peers. As is true for society at large, youth experiencing homelessness resist admitting that they have a problem, let alone seek treatment to address it. During an interview, one service provider explained:

*We’re also dealing with the age where the onset of a lot of mental health issues come out. It’s very confusing for the youth, and there’s still a lot of stigma. People definitely don’t want to be seen as crazy. They don’t want their peers to think they’re crazy. So there’s always a hesitancy to really engage with the counseling services and be forward with what’s going on mental health wise.*⁴¹⁹

Lack of Youth-Friendly Services

It is not surprising that the complexities of the health care system and its lack of youth-friendly practices have created a systemic lack of understanding for youth experiencing homelessness when it comes to accessing health care. The American health care system is infamous for its complexities. After passage of the Affordable Care Act, most young people do not have to navigate health care by themselves until their 26th birthday, when children can no longer stay on their parents’ insurance or remain eligible for Medicaid, if they were eligible for Medicaid when they aged out of care. While most minors and young adults depend on parents or other caring adults to help them through doctor’s appointments, hospital bills, insurance and so on, unaccompanied youth experiencing homelessness do not have someone to guide them through the system, and they have to find insurance on their own at a much younger age.

If unaccompanied youth did not come from a family where doctor visits were routine, they may be unaware of what is expected of them, as health care consumers and patients. The private nature of most

416 Interview on file with author.

417 TEX. HEALTH & SAFETY CODE §§ 611.004(4) & 611.0045(b).

418 TEX. FAM. CODE §§ 32.003(d) & 32.004(b).

419 Interview on file with author.

unaccompanied youth makes medical intakes that require disclosing information about their lifestyle, family history, and medical history very difficult. Medical jargon and strict rules and regulations from service providers and insurance companies often intimidate youth experiencing homelessness, further decreasing their chances of utilizing health services. Additionally, youth experiencing homelessness do not always know when a health issue is worthy of a doctor’s appointment and wait until medical conditions can no longer be ignored before they try to access care. This leads to health issues becoming much worse than necessary, potentially past the point of remedy, and increases costs for care.

The World Health Organization found that “to be considered adolescent friendly, health services should be accessible, acceptable, equitable, appropriate and effective.”⁴²⁰

Accessible	Adolescents are able to obtain the health services that are available.
Acceptable	Adolescents are willing to obtain the health services that are available.
Equitable	All adolescents, not just selected groups, are able to obtain the health services that are available.
Appropriate	The right health services (i.e., the ones they need) are provided to them.
Effective	The right health services are provided in the right way, and make a positive contribution to their health.

World Health Organization, Developing National Quality Standards for Adolescent Friendly Health Services (2012), pp. 7-8.

An example of youth-friendly services is the Mobile Adolescent Health Services Program - Teen Van (“Teen Health Van”), a community project of the Lucile Packard Children’s Hospital Stanford and the Children’s Health Fund, with support from Samsung, that serves at-risk children and youth up to age 25. “Program staff includes a physician specializing in adolescent medicine, a nurse practitioner, a social worker, a dietitian and a registrar/driver.”⁴²¹ The Teen Health Van is a literal van that provides an array of services; everything from physical exams and immunizations to pelvic exams and substance abuse counseling, including referrals.⁴²² All services and medications are provided at no charge.⁴²³ It parks outside of schools and shelters and has been seeing approximately 400 patients annually, including some who have never seen a doctor, which indicates youth trust them enough to tell their friends and return themselves for many years.⁴²⁴ Mobile health clinics can be a premium tool to meet youth experiencing homelessness where they are.

420 WORLD HEALTH ORGANIZATION, DEVELOPING NATIONAL QUALITY STANDARDS FOR ADOLESCENT FRIENDLY HEALTH SERVICES (2012) at 7-8, available at http://apps.who.int/iris/bitstream/10665/75217/1/9789241503594_eng.pdf

421 Stanford Children’s Health, Mobile Adolescent Health Services Program - Teen Van, available at <http://www.stanfordchildrens.org/en/service/teen-van>

422 *Id.*

423 *Id.*

424 See Farida Jhabvala Romero, *Teen Health Van Delivers More Than Medical Care to Homeless Youth*, NPR, Feb. 17, 2016, available at <http://www.npr.org/sections/health-shots/2016/02/17/466945298/teen-health-van-delivers-more-than-medical-care-to-homeless-youth>

“Services around mental health and behavioral health, as well as substance abuse are always two key things to keep on the table. For youth that are struggling with mental health issues, ensuring that there are services that are accessible and targeting their population as well is really important.”

–Austin service provider

Unfortunately, “no amount of health care can substitute for stable housing” because stable housing provides a consistent place for rest and recovery, as well as ensures a person has a place to store food and medicine, or can be found consistently to receive necessary care.⁴²⁵

Conclusion & Policy Recommendations

Navigating physical and mental health care services, processes, procedures, and insurance can be difficult even for those with the most resources and support. While services do exist that cater to youth experiencing homelessness, youth have almost as many barriers to receiving those services. If Texas wants this vulnerable population to prosper, it is going to have to meet youth where they are with regard to the issue of health, and find a more effective balance between youth autonomy, youth safety, and parental prerogative.

FINDING: Trauma looms large in the lives of youth experiencing homelessness, making them hesitant to seek out help from unknown adults and systems.

- Being homeless is traumatic in and of itself.
- Large numbers of youth who have experienced or are experiencing homelessness have endured trauma, usually at the hands of a previously trusted adult or system, prior to becoming homeless, leaving them hesitant when it comes to seeking health care assistance.
- Homelessness at an early age can define a youth and leave them with fears that they will always be seen as the negative connotations that are stereotypically associated with homelessness.

Policy Recommendation: All staff serving youth experiencing homelessness should receive training on both trauma-informed care and positive youth development. For example, providers should be trained in strategies to build rapport and trust by working collaboratively with young clients.

425 See Nat'l Health Care for Homeless Council, *supra* note 272, at 2-3.

Policy Recommendation: Health care providers must create youth-centric services and programs because they are essential to ensuring that youth experiencing homelessness seek out and actually obtain consistent physical and behavioral health services. They should consider marketing their services as youth-specific to encourage youth to seek out services.

- Youth-centric must mean not only that youth understand what services are available to them but that services are made available on their terms. For example, services should:
 - Allow for flexible hours;
 - Not use jargon to explain health conditions and disorders;
 - Utilize technology effectively (e.g., text youth to remind them about appointments or medications);
 - Ensure on-site, same-day treatments whenever possible;
 - Encourage questions and feedback from youth;
 - Respect “homeless youth culture” by understanding that friends often serve as family and may be a youth’s only support system; and
 - Recognize their independence and ability to survive independently.
- When health care providers serve youth who are experiencing homelessness, they should set expectations for small steps (e.g., work to reduce harm first, then to change bad habits). Long-term relationships with a provider will be beneficial to youth and create an opportunity to educate the youth about their current and continuing health.

Policy Recommendation: Health care providers with specific programs for low income or at-risk youth should consider making at least some of their services mobile.

- Funding for a mobile van or bus is likely a barrier to implementing this recommendation. The solution to this problem may be to partner with a university or corporate sponsor that may supply the necessary transportation.
- If health care providers cannot come to their patients, providers should consider available funding to help bring youth to their facilities.

Policy Recommendation: Federal, state, and local government, as well as funders to the provider community must affirmatively invest in evidence-based prevention and early intervention.

- One publication noted in February 2000, that the “literature clearly indicates what is needed to protect mental health and prevent prolonged homelessness in minors and young adults. Comprehensive, integrated services that promote the well being of the whole family.”⁴²⁶ This is still true today. Investments in preventative care are necessary to ensure families are able to stay together, preventing or limiting youth homelessness altogether, and resulting in stronger mental states for youth who would otherwise be at risk of developing a mental illness due to family stress and homelessness.

426 HCH Clinicians’ Network, *supra* note 296.

Policy Recommendation: Those providing case management to youth should work with them to ensure they feel in control of their health, including using a risk-reduction approach that allows youth to set their own health care and recovery goals.

- Intensive, youth-focused case management, recognizing that health is a high stress topic, is necessary to teach youth how to be good health care consumers and help navigate the system.

Policy Recommendation: Health care providers should partner with other youth-focused agencies to gain access to youth in need of services and to ensure that youth are being referred by service providers and peers they already have a relationship with.

- Health care providers must meet unaccompanied youth experiencing homelessness where they are, both metaphorically and in reality, to effectively serve the population. Partnering with drop-in centers, schools, meal providers, and shelters, and going to those locations to serve youth on-site can ensure youth are in surroundings with which they are already comfortable and that they are not in a situation where they are surrounded by strangers.
- Health care clinics and programs connected to other youth-focused agencies and organizations can then be a bridge to other, more specialized health care professionals, if necessary.

FINDING: Minor consent laws are confusing, or unnecessarily complicated.

- Health care is a necessity that, once received, is potentially life changing. Youth surviving on their own may have no control over whether they have the chance to take advantage of such a resource, due to state consent laws that do not adequately account for a minor with no guardian.

Policy Recommendation: The State of Texas should simplify current consent laws so that youth are able to access and consent to all health care services they require.

- It should be clear that unaccompanied youth age 14 and older should be able to consent to physicals and immunizations so that they can fully participate in school activities.

Policy Recommendation: The State of Texas should enact clear, affirmative laws allowing minors to contract for necessities, including in the definition of “necessity” medical and behavioral health requirements and services.

- Health care providers must be held to, at minimum, a good faith standard when providing services to unaccompanied youth consenting to their own care.

FINDING: Economic barriers prevent youth from obtaining health care.

Policy Recommendation: Federal and state statutes, policies, rules, and guidance for Medicaid and CHIP should clearly provide for unaccompanied minors as a population, and ensure that unaccompanied minors can apply.

- Implementing this policy would, by necessity, include removing any existing application barriers for unaccompanied minors (e.g., proof of parental income, a permanent residence or address, and other documentation that unaccompanied youth may not have).

Policy Recommendation: Expand CHIP to age 21, and reduce enrollment fees and co-pays for unaccompanied youth covered through CHIP.

Laws Regarding the Age of Majority that May Act as a Barrier to Getting Help or Services

Ed, who is 16, left home after a fight with his stepfather became physical. Ed's father is deceased, and his grandparents live across the country in another state. Ed's best friend, Mike, invited him to stay at his house, with permission from Mike's parents. Ed's parents do not want him to stay with Mike, but Ed is afraid to go home after the fight with his stepfather resulted in a minor injury.

What are the implications for Mike's parents? What are the implications for Ed, should his injury become something that requires medical attention? If Mike's parents cannot allow Ed to stay, will a shelter be required to call Ed's mother and stepfather? Can Ed rent an apartment on his own?

For more information on the rights of youth experiencing homelessness and the responsibilities of providers, see these resources from TNOYS and Texas Appleseed:

Texas Network of Youth Services, [Understanding Youth Rights: Helping Providers Navigate the Laws and Policies Affecting Unaccompanied Homeless Youth](#) (2016).

Texas Appleseed, Baker & McKenzie LLP & Weatherford International, [Texas Homeless Youth Handbook: Legal Issues and Options](#) (2017).

Providers serving youth who are experiencing homelessness often find themselves working in the “age abyss,” or the gap between laws that consider a young person an adult for some purposes and a child for others. For example, under Texas law, 17-year-olds are considered adults for the purposes of the criminal justice system, but, with certain exceptions, are considered children with regards to consent for medical treatment and emergency shelter stays.

Under Texas law, parents or guardians have a legal obligation to take care of their child until he or she reaches the age of majority. For that reason, the law often presumes (or affirmatively requires) that a child's parent will play a role in major decisions. However, providers, temporary guardians, and youth themselves often have questions about a young person's legal rights and responsibilities when that young person is seeking help or independence without guardian consent and the child is not yet 18 years old.

Emergency Shelter Care & Couch Surfing

While shelters are usually required to notify a minor's parents when a youth seeks help, they are generally able to offer shelter for a limited period without parental consent. Youth care facilities may provide shelter to unaccompanied youth in cases of emergency, when the physical health or safety of the youth is threatened. The maximum time limit for care in emergency situations is 15 days without parental consent.⁴²⁷ Youth are able to consent to their own care if they are either pregnant or a parent of a child, or if they are 16 or older, living apart from their parent or guardian, and managing their own financial affairs.⁴²⁸

427 TEX. FAM. CODE § 32.201.

428 TEX. FAM. CODE § 32.202; TEXAS NETWORK OF YOUTH SERVICES, UNDERSTANDING YOUTH RIGHTS: HELPING PROVIDERS NAVIGATE THE LAWS AND POLICIES AFFECTING UNACCOMPANIED HOMELESS YOUTH at 11-12 (2016), available at http://tnoys.org/wp-content/uploads/Youth-Rights-Guide_New-Version-2.pdf

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In all other circumstances the shelter must try to notify a minor’s parent(s) within 24 hours.⁴²⁹ If it is impossible to contact a parent or guardian, the shelter must notify the appropriate public agency—e.g., CPS, juvenile probation, or the police.⁴³⁰ All efforts to contact parents or the pertinent agency must be recorded.⁴³¹

Texas law allows unaccompanied youth ages 16 and over to stay in a transitional living program without parental consent.⁴³² Programs are required to attempt to notify parents of the youth’s whereabouts, but the youth can remain in the program even if parents object.⁴³³

Caregivers who allow a minor to stay in their home—for example, the parent of a friend who allows a youth to “couch surf”—may also encounter problems if the youth’s parent has not consented to the living arrangement. A person is in violation of Texas law if he or she knowingly harbors a runaway youth less than 18 years of age and who has escaped from the custody of:

- A peace officer;
- A probation officer;
- The Texas Juvenile Justice Department (TJJD);
- A detention facility for children; or
- If the youth is voluntarily absent from home without the consent of a parent or guardian for a substantial length of time or without the intent to return.⁴³⁴

However, it is possible to formalize a “respite care” arrangement so that caregivers are not subject to these penalties. A respite care agreement allows parents to agree to allow an adult caregiver to provide temporary care for a child.⁴³⁵

Signing a Lease

Though most do not realize this, there is no prohibition in Texas on minors signing contracts. However, a contract (including a lease) entered into by a minor is usually “voidable,” which can make renting to minors unattractive to landlords.⁴³⁶ In other words, the landlord is bound by the agreement—but the youth is not. This can make landlords hesitant to rent to minors and therefore make it difficult for those under 18 to access housing on their own.

429 TEX. ADMIN. CODE § 748.4201(a).

430 TEX. ADMIN. CODE § 748.4201(b).

431 TEX. ADMIN. CODE § 748.4201(c).

432 TEX. FAM. CODE § 32.203.

433 *Id.*

434 TEX. PENAL CODE § 25.06.

435 TEX. FAM. CODE § 34.002.

436 See TEXAS APPLESEED ET AL, HOMELESS YOUTH HANDBOOK: LEGAL ISSUES AND OPTIONS TEXAS 59 (2016).

To get around this issue, many states have allowed youth to contract for “necessities”—such as food, clothing, and housing—so that youth can live independently, where appropriate.⁴³⁷ Allowing youth to contract for necessities under State law would make it so that minors cannot back out of a good faith contract for such goods and services, removing a significant disincentive for landlords who might otherwise rent to youth seeking to live on their own.

Ability to Consent to Medical Treatment

Generally speaking, minors who are under 16 cannot consent to their own medical care; they need a parent or guardian to consent.⁴³⁸ Sixteen-year-olds can consent if they are living away from their parent or guardian and managing their own finances.⁴³⁹ There are some other exceptions, and in some cases, another adult may be able to consent if they have permission from their parent or guardian.⁴⁴⁰ A minor can be treated without consent for a *life-threatening* injury or illness if their parent or guardian is not present.⁴⁴¹ These laws pose a barrier for youth who are living away from their parent or guardian from accessing routine medical care.

Emancipation

A parent generally remains responsible for his or her child until the child has reached the age of 18, or the parent’s rights have been terminated by some means of law.⁴⁴² This operation of law is called emancipation or “removal of disabilities of minority.” Under Texas law:

A minor may petition to have the disabilities of minority removed for limited or general purposes [in his or her own name] if the minor is:

- (1) a resident of [Texas];
- (2) 17 years of age, or at least 16 years of age and living separate and apart from the minor’s parents, managing conservator, or guardian; *and*
- (3) self-supporting and managing the minor’s own financial affairs.⁴⁴³

437 NATIONAL LAW CENTER ON HOMELESSNESS & POVERTY, *ALONE WITHOUT A HOME: A STATE-BY-STATE REVIEW OF LAWS AFFECTING UNACCOMPANIED YOUTH* 119 (2012), available at https://www.nlchp.org/Alone_Without_A_Home

438 HOMELESS YOUTH HANDBOOK, *supra* note 436, at 160-61.

439 *Id.*

440 *Id.*

441 *Id.* at 162.

442 See TEX. FAM. CODE § 101.003.

443 TEX. FAM. CODE § 31.001 (emphasis added).

Emancipation must be in the best interest of the minor.⁴⁴⁴ A minor can also become emancipated by getting married, joining the Armed Forces, or reaching the age of majority, *i.e.*, 18.

There are a number of reasons why a minor might seek emancipation, but overall, obtaining an emancipated status allows a minor to function as an adult in society when the parent-child relationship has broken down and the child, perhaps better described as a young adult, cannot identify another adult willing or able to support them.⁴⁴⁵ They can enter into legally binding contracts, *i.e.*, contracts are no longer voidable even though the individual is under 18. The emancipated minor can make all their own educational and medical decisions. It also becomes easier for a minor to prove that they are no longer members of their parents' household when applying for government benefits, such as SNAP and TANF, in their own name. Youth who are emancipated still cannot drink, vote, quit school, or obtain a driver's license before turning the required legal age for all individuals under the law.

Though not a law that acts as a barrier to youth accessing resources and services *per se*, emancipation itself is a very difficult status for youth to obtain unless a youth gets married or joins the military;⁴⁴⁶ even then parental consent and/or court approval is often required before either of these actions can be taken.⁴⁴⁷ First, parental consent can be difficult to obtain, especially where the parent-child relationship has been particularly volatile, and parental prerogative (*i.e.*, parents can raise their children as they see fit within legal bounds) is generally given priority under the law. Second, what is actually required to prove financial self-sufficiency is vague, but usually financial stability must be based on employment and not reliant on government aid. Third, whether a minor is sufficiently mature to make decisions and function as an adult is a subjective judgment call, and it could be argued that many 18-year-olds are not yet prepared to make such decisions, while some 16- or 17-year-olds may be fully prepared to step out on their own.

Some jurisdictions have established procedures that allow a parent and child to agree to emancipation without court involvement, which eliminates some barriers, but could create other problems where youth are not truly prepared to be independent.⁴⁴⁸

444 TEX. FAM. CODE §§ 31.002(a)(5) & 31.005.

445 TEX. FAM. CODE § 31.006.

446 See UNDERSTANDING YOUTH RIGHTS, *supra* note 428, at 13.

447 See, *e.g.*, TEX. FAM. CODE § 2.003.

448 ALONE WITHOUT A HOME, *supra* note 437, at 105.

Services and Supports for Youth Experiencing Homelessness

Best Practices for Serving Youth Experiencing Homelessness

Meeting the needs of young people experiencing homelessness can be a formidable challenge for governments and communities at all levels. Youth rarely state a single issue that led to their homelessness, and their situations often arise from a complex mix of behavioral, economic, and developmental issues, as well as unhealthy family dynamics or family conflict. In addition to theoretical and organizational frameworks for approaching the problem of youth homelessness, policies, programs, and services must be tailored to the individual circumstances of the youth they are designed to help. Confronting the issue of youth homelessness with a holistic strategy can help localities avoid setting up a patchwork of programs that are difficult for young people to navigate. And providing services that meet the avowed needs of youth experiencing homelessness may encourage these young people to seek out services.

This chapter explores best practices for addressing the challenge of youth homelessness. It first identifies a set of broad strategies for meeting the needs of young people experiencing homelessness, both concrete and perspective-based. It then fills in these frameworks with categories of specific programs and services that aim to serve youth experiencing homelessness, and it provides a discussion of how policymakers, program designers, and service providers can best meet the needs of special populations within the broader youth experiencing homelessness population. Ultimately, the chapter pivots to examine the background of federal and state policies aimed at reducing youth homelessness and their associated funding streams. It notes tensions and conflicts that arise at the service level due to overlapping, contradictory or insufficient regulations, in addition to highlighting funding scarcity for critical services. The chapter concludes by identifying gaps in services for youth experiencing homelessness in Texas and providing recommendations for creating a more robust and coordinated safety net for young people experiencing homelessness.

Frameworks for Tackling Youth Homelessness

This section provides a brief overview of models for addressing social challenges and how they could be applied in the youth homelessness context. Some of these frameworks lend themselves to specific programs and services or are a set of principles, while others are more process oriented. They are not mutually exclusive and may be bolstered when implemented in concert with one another.

Collective Impact

The Collective Impact approach rests on the premise that large-scale change requires cross-sector collaboration. While the model can be utilized in a range of contexts, it is a promising model for reducing homelessness among youth because it tends to be user-oriented, and homeless young people are a diverse set of individuals that require unique services. Part of the challenge of addressing youth homelessness is that young people find it difficult to navigate a patchwork of discrete organizational protocols. By aligning disparate stakeholders, Collective Impact minimizes gaps in policies and programs and builds capacity among service providers.

According to research published in the *Stanford Social Innovation Review*, “[Collective impact] initiatives share five key conditions that distinguish [them] from other types of collaboration: a common agenda, shared measurement systems, mutually reinforcing activities, continuous communication, and the presence of a backbone organization.”⁴⁴⁹ The following table provides a description of these conditions.⁴⁵⁰

The Five Conditions of Collective Impact

Condition	Description
Common Agenda	All participants have a shared vision for change including a common understanding of the problem and a joint approach to solving it through agreed upon actions.
Shared Measurement	Collecting data and measuring results consistently across all participants ensures efforts remain aligned and participants hold each other accountable.
Mutually Reinforcing Activities	Participant activities must be differentiated while still being coordinated through a mutually reinforcing plan of action.
Continuous Communication	Consistent and open communication is needed across the many players to build trust, assure mutual objectives, and create common motivation.
Backbone Support	Creating and managing collective impact requires a separate organization(s) with staff and a specific set of skills to serve as the backbone for the entire initiative and coordinate participating organizations and agencies.

The Collective Impact model requires a significant amount of time and resources to be established and maintained, but failure to ensure homeless young people have access to opportunity may be even more costly. According to research funded by the Annie E. Casey Foundation and Bill and Melinda Gates Foundation, homeless and disconnected youth “costs taxpayers \$13,900 per year between the ages of 16 and 24, and a total of \$148,790 over the rest of their lifetime. This translates to \$4.75 trillion for the aggregate lifetime costs to society for [this] population. . .when factoring in lost earnings, costs to victims of criminal activity, private health expenditures, and lost economic gains from a less educated workforce.”⁴⁵¹

449 Hanleybrown, F. et al, *Channeling Change: Making Collective Impact Work*, STAN. SOC. INNOVATION REV., Jan. 26, 2012 at 1.

450 *Id.*

451 MIMI CORCORAN ET AL, COLLECTIVE IMPACT FOR OPPORTUNITY YOUTH 7 (2012).

Best Practices for Collective Impact

These best practices were adapted from research by FSG, a social impact consulting firm.⁴⁵²

- **Evaluation:** Analyze the baseline data to identify key issues and gaps; establish shared metrics of success; collect, track, and report progress; identify areas for improvement.
- **Governance:** Identify collaboration partners and champions, including a backbone organization; facilitate and refine these relationships.
- **Involvement:** Facilitate community outreach; engage community organizations and leaders to build public will around the collaboration's mission.
- **Planning:** Use data to map the landscape of the issue being addressed; establish common goals among collaboration partners; align strategies and tactics under a shared agenda.

Continuum of Services

The Continuum of Services model is an approach for addressing social challenges that accounts for the fact that there are often several steps along the path to well-being. Commonly used in special education and child welfare systems, the model is particularly apt for addressing the issue of youth homelessness because it emphasizes access to a full spectrum of services which can meet the needs of teenagers with differing circumstances and motivations for seeking help. Additionally, the system helps assure that youth experiencing homelessness do not fall between the cracks, as it guides and tracks them along a comprehensive set of services as they progress toward stability.

Key steps along the continuum include:

- Prevention to divert at-risk young people from homelessness;
- Outreach, identification, intake, and assessment of services;
- Emergency shelters and other short-term housing to provide an immediate response to youth homelessness;
- Transitional housing, permanent supportive housing, and other longer-term services to help young people transition out of homelessness and to self-sufficiency; and
- After-care support services to ensure the person does not re-experience homelessness.

One example of this model is the homelessness system created by the federal government through localities in accordance with the requirements of Continuum of Care (CoC) grants, which are administered through the federal agency for Housing and Urban Development (HUD).⁴⁵³ With these funds, grantees are able to develop services addressing many of the areas listed above, as well as “necessary linkages and referral mechanisms” among components of the continuum “to facilitate the movement of individuals and households towards stable permanent housing.”⁴⁵⁴

452 Hanleybrown et al., *supra* note 449, at 2.

453 CoC's history and funding levels will be discussed in greater detail later in this chapter; this section is primarily concerned with the program's strategic underpinnings, which are aligned with the Continuum of Services model.

454 U.S. DEP'T OF HOUSING AND URBAN DEV., HUD'S HOMELESS ASSISTANCE PROGRAMS: CONTINUUM OF CARE 101 9 (2009).

It is important to note, though, that with the exception of a recent federal Demonstration project, CoC grants do not focus on youth homelessness, but rather homelessness for all populations. The CoC model has to date been more effective for developing community models to address homelessness among other populations, such as veterans who are homeless, than it has been for homelessness among youth. HUD's Youth Homelessness Demonstration Grant Program, which is detailed later in this chapter, seeks to help address gaps in the CoC model in regard to services for young people who are homeless and on their own.

In comparison, the National Network for Youth offers its own model for a continuum of care that is appropriate for young people, titled "Proposed System to End Youth and Young Adult Homelessness." The National Network's proposed system ties strategies, housing, and services together at each stage of the continuum, including prevention, early and crisis intervention, longer-term services/housing, and after-care services for youth who are at risk of or are experiencing homelessness.⁴⁵⁵

Best Practices for Continuum of Services

The following best practices were adapted from a set of programs implementing the Continuum of Services strategy.

- **Centralized Intake:** Establish a centralized location or process for young people to access an array of services.⁴⁵⁶
- **Responsiveness:** Balance available capacity in each of the key steps of the continuum and respond to changing needs in the community.⁴⁵⁷
- **Seamlessness:** Evaluate whether young people can easily move along the continuum of care or if there are programmatic barriers to their achieving stability.⁴⁵⁸

Obviously, when developing a continuum of services for young people, it is also critical to consider best practices specifically for serving young people that are outlined elsewhere in this report.

Family Strengthening and Reunification

Youth homelessness differs from family homelessness and individual adult homelessness because it is not simply an economic issue. Our society does not expect typical young people to support themselves until they reach a certain age; rather, their parents are expected to support them. This means that youth homelessness is often the result of a breakdown in the family system. A framework that acknowledges the importance of the family unit, as well as works to strengthen the family unit when possible, is critical for effectively addressing youth homelessness, in contrast to a framework that focuses on homelessness simply as an economic or affordable housing issue.

Family strengthening and reunification efforts aim to improve relationships between youth and their families to help young people to stay or return home. Compared to other homeless populations, a key distinction among youth experiencing homelessness is the prevalence of family issues and conflict. According to the U.S. Department of Health and Human Services, "Almost 90 percent of runaway

455 National Network for Youth, A Systems Approach to Youth and Young Adult Homelessness in America, www.nn4youth.org/learn/proposed-system (last visited Oct. 24, 2017).

456 POLK COUNTY HOUSING FUND, CONTINUUM OF CARE: BEST PRACTICES 4 (2012).

457 U.S. DEP'T OF HOUSING AND URBAN DEV., *supra* note 454, at 10.

458 *Id.*

youth in shelters run by the Family Youth Service Bureau (FYSB) and 75.5 percent in residential programs reported family dynamics as critical issues leading to their homelessness.⁴⁵⁹ Indeed, 41 percent of young people attribute running away to poor relationships with their parents, and 7 percent of parents of runaways say the same.⁴⁶⁰

The family-based approach encompasses both prevention and intervention strategies to keep young people from leaving homes, or to get them home safely once they have left. Program models include support groups for parents, parenting skills classes, and teaching conflict resolution skills.⁴⁶¹ According to researchers from the University of Chicago and Wayne State University, “The assumption is that these programs will lead to improved family relationships, and thus prevent youth from becoming homeless.”⁴⁶²

A report by the Urban Institute, commissioned by the U.S. Interagency Council on Homelessness, designated a number of family-centered crisis intervention models as either evidence-based or evidence-informed but also suggested that more research is needed in order to determine the effectiveness of other models.⁴⁶³ Specifically, the study designated Ecologically Based Family Therapy and Functional Family Therapy as evidence-based. It designated Multidimensional Family Therapy; Multisystemic Therapy; Treatment Foster Care Oregon; and Support to Reunite, Involve, and Value Each Other as evidence-informed interventions to promote family reunification.⁴⁶⁴

Best Practices for Family Strengthening and Reunification

The following best practices were developed by researchers at the Urban Institute.⁴⁶⁵

- **Trust:** Service providers noted the importance of gaining parents’ trust, working with—not against—parents, and recognizing and addressing parents’ barriers to engagement (e.g., stress, multiple responsibilities). Beyond the relationship with the parent(s), it is imperative that programs also build trust with the young person in crisis in order to identify what the underlying issue causing the crisis is.
- **Family-Driven Interventions:** Key informants suggested that case plans may be more effective when developed in collaboration with families, youth, and the various service providers in their lives (e.g., education, child welfare, juvenile justice). They also noted that case plans should be driven by goals set by youth and their families.
- **Holistic Approaches:** Effective interventions often combined several types of services, such as clinical services, case management, and parent training, all tailored to a youth’s needs.
- **Healthy Social Networks:** Service providers suggested that helping youth foster healthy relationships with supportive social networks, not just families, could build stability.

459 Family Conflict and Violence, youth.gov, <http://youth.gov/youth-topics/runaway-and-homeless-youth/family-conflict-and-violence> (last visited Oct. 24, 2017).

460 *Id.*

461 PAUL TORO ET AL, HOMELESS YOUTH IN THE UNITED STATES: RECENT RESEARCH FINDINGS AND INTERVENTION APPROACHES 14 (2007).

462 *Id.*

463 URB. INST., FAMILY INTERVENTIONS FOR YOUTH EXPERIENCING OR AT RISK OF HOMELESSNESS 29-34 (2016).

464 *Id.*

465 *Id.*

- **Flexibility:** Providers may want to allow for flexible intervention settings to make it easier for youth and families to attend multiple sessions. For example, providing sessions in the family home may facilitate participation even if the youth is no longer living there. Flexibility is also seen in the form of having multiple options available; every young person and/or their family will present a unique set of needs, and systems as a whole must allow them to choose and move through different interventions as they progress toward reunification, when that is safe and appropriate.
- **Aftercare:** Providers noted that successful family reunification and reconnection require supportive services even after youth and families reconnect. Several of the most rigorously evaluated interventions include frequent coaching and check-in calls with parents after reunification and continued check-ins and services for youth.

“One service that is a bit more unique to the younger population is thinking about prevention in regards to family reunification and really providing family support. That is something that I think is unique. Many youth that do run away, it’s often time rooted in issues or conflict in their family. Figuring out and prioritizing how to do prevention work in that aspect [is needed].”

–Texas CoC representative

Housing First

The Housing First model holds that the first step to serving homeless populations should be to provide them with stable places to live. The model diverges from other approaches to addressing homelessness in that it sets no preconditions for those seeking help. Many housing programs, particularly residential initiatives, require that clients first receive substance abuse counseling or participate in some other program before being placed. Proponents of Housing First often point out that offering immediate permanent housing to those living on the street is not only more humane than just offering temporary shelter or another comparable arrangement, but it is also more cost-effective for society. In fact, a review of 12 published studies and 22 unpublished studies found that Housing First resulted in a net decrease in overall costs.⁴⁶⁶

When implemented in the context of youth experiencing homelessness, Housing First programs prioritize moving young people into permanent housing. Once they are in stable housing, youth are provided with additional services and supports as needed. Research suggests that this approach may be a particularly effective option for young people. In one of the only long-term studies conducted on youth experiencing homelessness aged 18 to 25, researchers found that young people who spent less time on streets were more likely to seek psychological assistance, earn a high school diploma, and become employed. These young people were 40 percent to 50 percent more likely to achieve stability than their counterparts that spent more time on the streets.⁴⁶⁷ Evidence suggests that the Housing First approach works for most young people, apart from some who are very challenged by intravenous drug use or serious mental health conditions.

⁴⁶⁶ Latimer, E. & Ly, A., *Housing First Impact on Costs and Associated Cost Offsets: A Review of the Literature*, CAN. J. PSYCH., Vol. 60, No. 11, pp. 475-87 (2015).

⁴⁶⁷ Roy et al, *Predictors of residential stability among homeless young adults: a cohort study*, 16 BMC PUB. HEALTH 131 (2016), available at <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4746879/>

“At least half of the kids that come to us don’t have their diploma, they don’t have any work history, they don’t have housing, so it’s a steep hill to climb because you have to stabilize their housing first. Because if they don’t have a stable place to live, then they can’t get a job, they can’t go to school. So that’s why a lot of what we do is focused on housing.”

–DFW service provider

Best Practices for Housing First

These best practices were adapted from research by Stephen Gaetz.⁴⁶⁸

- **Choice:** Emphasize a client-centered approach, including client choice in the kind of housing they need and the extent and nature of supports and services they want.
- **Community:** Helping people integrate into communities requires socially supportive engagement and the opportunity to participate in meaningful activities.
- **Unconditional Access:** Provide rapid access to safe, secure and permanent housing, without the condition that they are “ready” for housing.

Trauma-Informed Care

There are a range of factors that contribute to youth homelessness, and young people experiencing homelessness are a diverse set of individuals with unique backgrounds and experiences. Dysfunctional family dynamics, economic hardship, and the transition from state systems (e.g., the foster care system) are common reasons youth become homeless, and evidence shows that vulnerable, marginalized populations of young people are more likely to leave home. For these reasons, it is imperative that service providers use trauma-informed methods when working with homeless young people.

According to the Runaway and Homeless Youth Training and Technical Assistance Center, the consensus definition of Trauma-Informed Care is “...a strengths-based framework that is grounded in an understanding of and responsiveness to the impact of trauma, that emphasizes physical, psychological, and emotional safety for both providers and survivors, and that creates opportunities for survivors to rebuild a sense of control and empowerment.”⁴⁶⁹ While the idea of traumatic stress has been around for at least four decades, the Trauma-Informed Care approach only recently became widely acknowledged and instituted among policymakers and providers of services.

468 Stephen Gaetz, *Can housing first work for youth?*, EUR. J. OF HOMELESSNESS, Vol. 8, No. 2, at 165 (2014).

469 RUNAWAY AND HOMELESS YOUTH TRAINING AND TECHNICAL ASSISTANCE CENTER, WHAT IS TRAUMA? 1 (2012).

Best Practices for Trauma-Informed Care

These best practices were adapted from the Substance Abuse and Mental Health Services Administration's (SAMHSA) key principles of Trauma-Informed Care.⁴⁷⁰

- **Check Biases:** Move past cultural stereotypes and biases based on race, ethnicity, sexual orientation, age, religion, gender identity, geography, etc.
- **Empowerment:** Foster a belief in the primacy of the people served, in resilience and in the ability of individuals, organizations, and communities to heal and promote recovery from trauma.
- **Mutuality:** Level power differences between staff and young people to demonstrate that healing happens in relationships and in the meaningful sharing of power and decision-making.
- **Peer Support:** Emphasize peer support and mutual self-help as key vehicles for establishing safety and hope, building trust, enhancing collaboration, and utilizing their stories and lived experience to promote recovery and healing.
- **Safety:** Ensure the youth feels physically and psychologically safe; the physical setting should be safe, and interpersonal interactions should promote a sense of safety.
- **Transparency:** Make organizational operations and decisions with transparency to build and maintain trust with young people. A key way to do this is to involve young people in developing organizational policies. For example, a youth advisory board led by program alumni and informed by current program participants.

Youth Development

The Interagency Work Group on Youth Programs describes positive youth development as “an intentional, prosocial approach that engages youth within their communities, schools, organizations, peer groups, and families in a manner that is productive and constructive; recognizes, utilizes, and enhances young people’s strengths; and promotes positive outcomes for young people by providing opportunities, fostering positive relationships, and furnishing the support needed to build on their leadership strengths.”⁴⁷¹ The concept has its roots in the study of factors that help build resilience among youth, such as family support and monitoring; caring adults; positive peer groups; strong sense of self, self-esteem, and future aspirations; and engagement in school and community activities.⁴⁷² It also emphasizes prevention strategies where factors that contribute to risky behavior are identified and minimized.

When Trauma-Informed Care is implemented in the context of youth experiencing homelessness, prevention and resilience are particularly important components of the model. Instead of simply ensuring young people know the risks of certain behaviors, the youth development perspective holds that young people must be afforded a range of positive opportunities in order to heal from traumatic experiences and avoid risky behaviors. Such opportunities encourage youth to “...[develop] nurturing and mutual relationships with adults and peers; explore talents and interests and develop a sense of competence and personal identity; engage in leadership and decision making and develop a sense of self-efficacy and control over their future.” Positive opportunities can take many forms: “For instance, a substance abuse program might incorporate the dramatic arts [...] to provide for self-expression and an opportunity to tap into latent talents, not only in performing, but in organizational and technical skill areas such as event management, stage direction, sound and lighting.”⁴⁷³

470 SAMHSA, SAMHSA'S CONCEPT OF TRAUMA AND GUIDANCE FOR A TRAUMA-INFORMED APPROACH 11 (2014).

471 Positive Youth Development, youth.gov, <http://youth.gov/youth-topics/positive-youth-development> (last visited Oct. 24, 2017).

472 U.S. DEP'T OF HEALTH AND HUM. SERVICES, PROMISING STRATEGIES TO END YOUTH HOMELESSNESS 24 (2007).

473 *Id.* at 25.

These best practices were adapted from research by the National Clearinghouse on Family & Youth.⁴⁷⁴

- **Cultural Competence:** Respect cultural differences of youth and recognize the impact of biases against their identity.
- **Encouragement:** Encourage adolescents to engage in activities that promote self-understanding, self-worth, and a sense of belonging and resiliency.
- **Opportunity:** Make youth aware of various options, both preventative and interventionist, that could meet their needs, developmental or otherwise.
- **Partnerships:** Consider young people partners, rather than clients, in designing, delivering, and assessing programs and services.

Types of Programs and Services Needed to Support Homeless Youth

A range of programs and services can be implemented within the frameworks for approaching youth homelessness that were discussed in the previous section. With some overlap, they generally fit into three categories that are listed in the following table.

Types of Programs and Services for Servicing Homeless Youth

Categories	Description
Prevention	To stabilize the situations of youth at risk of homelessness
Identification	To identify young people experiencing homelessness
Intervention	To provide housing and other services to prepare young people for adulthood

Prevention

Prevention services are designed with the goal of keeping young people at risk of homelessness from becoming homeless. As discussed earlier, a key lever for helping young people avoid homelessness is the family. Addressing the challenges of maladaptive development among youth via family-based approaches can keep young people from leaving home in the first place. One evidence-based prevention service aimed at improving family dynamics is Functional Family Therapy. Generally, this intervention consists of 12 to 14 sessions and targets young people between the ages of 11 and 18.⁴⁷⁵ Conducted in a variety of settings, including homes and clinics, this technique seeks to ameliorate behavioral and emotional problems young people face.⁴⁷⁶ The five-step program consists of the following major components, each with its own goals, focus, and technique: engagement, motivation, relational assessment, behavior change, and generalization.⁴⁷⁷

474 NATIONAL CLEARINGHOUSE ON FAMILIES & YOUTH, RECONNECTING YOUTH AND COMMUNITY: A YOUTH DEVELOPMENT APPROACH 15 (1996).

475 Functional Family Therapy, <http://www.fftllc.com/about-fft-training/clinical-model.html> (last visited Oct. 24, 2017).

476 *Id.*

477 *Id.*

Likewise, the public school system is well-positioned to provide services that prevent homelessness, as young people at risk of homelessness regularly interact with school personnel. Nearly half of the youth experiencing homelessness in a survey by Pergamit and Ernst said they were attending school while being away from home, and two-thirds said they attended regularly.⁴⁷⁸ Additionally, the foster care system may be an ideal place to target prevention services, given that young people with foster care histories are more likely to experience homelessness after exiting care than are their peers without histories of foster care involvement. In addition to family supports discussed earlier, other supports that may prevent a young person from ending up homeless include financial assistance, positive relationships with caring adults who are not their parents, transition planning, and respite housing.

“Dollars in prevention would be a really wonderful, refreshing thing.”

–Austin Judge

Best Practices for Prevention Services

The following best practices were adapted from resources by Centrepoin.⁴⁷⁹

- **Family Engagement:** Enable families to gain support as a unit, as well as work with parents and youth one-to-one.
- **Relationship Building:** Encourage staff to identify and build positive relationships with young people at risk of becoming homeless.
- **Single Front Door:** Establish a centralized place, hotline, or online portal where youth who may become homeless can seek services to keep themselves off the street.

Identification

Identifying homeless teenagers can be difficult for service providers. Some homeless young people stay with friends or couch surf, allowing them to blend in with the non-homeless population. Fortunately, there are a range of services and programs aimed at identifying homeless young people so they can be connected with the services they need to achieve stability. Some of the most common services include school homeless liaison programs (discussed in Chapter 3), crisis hotlines, the Street Outreach Program (SOP), drop-in centers, and the national Safe Place program. These programs all also play critical roles in the area of prevention, which is discussed earlier.

Research suggests that crisis hotlines and other technology-based channels for youth to connect with service providers may be an effective route for identifying homeless young people, as many young people have access to phones and the internet even after becoming homeless. The Pergamit and Ernst survey found that 20 percent of youth experiencing homelessness own a phone, giving them the ability to call hotlines, shelters, and other service providers; over 70 percent said they have access to email, three quarters of whom access it at least once a week; and 75 percent of those surveyed had a social media page, and over half accessed it at least once a week.⁴⁸⁰

478 PERGAMIT, M.R. & ERNST, M.E., RUNAWAY YOUTH'S KNOWLEDGE AND ACCESS OF SERVICES 47 (2010).

479 CENTREPOINT, PREVENTING YOUTH HOMELESSNESS: WHAT WORKS? 7-8 (2016).

480 PERGAMIT, *supra* note 478 at 52-55.

Street Outreach Program and drop-in center professionals make in-person contact with young people experiencing homelessness and seek to build relationships with them with the aim of finding them stable housing and helping them transition to independence and self-sufficiency. These programs target young people who have been subjected to, or are at risk of being subjected to, sexual abuse or sexual exploitation. Street outreach, which is conducted in areas where street youth congregate, is designed to provide access to essential services, such as food and shelter in the short-term, and to assist them in making healthy choices over a longer time.

The national Safe Place program is a collaborative community initiative that provides outreach and prevention services for young people up to age 18 or 21 (depending on the community) who are in need of immediate help and safety. Safe Place designates businesses and organizations, such as libraries, YMCAs, fire stations, public buses, and various businesses and social services facilities, as Safe Place locations where help is readily available. When a youth asks for help, an employee at the Safe Place business or organization finds a comfortable place for the youth to wait while the employee calls a designated Safe Place agency, such as a Street Outreach Program or drop-in center. Within 30 minutes, a qualified Safe Place volunteer or agency staff member arrives to talk with the young person and connect him or her to transportation and services.

Best Practices for Identification Services

These best practices were adapted from a report by the Urban Institute, commissioned by HUD.⁴⁸¹

- **Channels:** Utilize communication channels used by young people to make it easier for youth experiencing homelessness to reach out for help.
- **Collaboration:** Organize the community to improve targeting, develop strong collaborations, and involve mainstream agencies.
- **Data Systems:** Develop useful data systems, and use the resulting data to reflect and improve system performance.
- **Targeting:** Recognize that the effectiveness of any activity is only as good as the efficiency with which it is targeted to the [young people] most likely to become or remain homeless if they do not receive help.

Intervention

Intervention services target young people who are experiencing homelessness and are seeking short-term or longer-term shelter/housing and support services. Crisis intervention services that are centered around family reunification were discussed earlier in this chapter. Examples of programs that deliver intervention services for youth who are homeless and either cannot return home safely or do not want to return home include emergency shelters, transitional living programs, and host homes.

Some communities establish and operate emergency shelters that provide residential housing and counseling services to youth who have left home. Generally, shelters have a requirement for how long a youth can stay, with the idea that temporary sheltering should lead to more permanent or long-term kinds of residential care. Some shelters operate as assessment centers that work to provide young people with psychological testing in preparation for longer-term care, and some provide short-term respite

481 URB. INST., STRATEGIES FOR PREVENTING HOMELESSNESS (2006).

care for youth who need to resolve conflicts with their parents or caregivers so they can return home. In communities lucky enough to obtain coveted federal funding, the Basic Center Program provides more structure and consistency than a typical emergency shelter program and guarantees a young person a place to stay for 21 days with intensive services.

“I called [a shelter], and that night they came and picked me up. You have no idea what a weight was lifted off my shoulders. Though I didn’t necessarily know I needed it, God I did. I was relieved. So relieved.”

–C.F., Houston Youth

Transitional living programs (TLPs) are a longer-term intervention intended to provide a safety net and strong emotional support to young people transitioning to adulthood. TLPs generally provide about two years of residential services for youth between the ages of 16 and 22.⁴⁸² Providers offer young people stable and safe living accommodations in addition to services to help them develop the skills necessary for independence. Youth in TLPs can practice life skills while under the guidance of staff who function as mentors rather than monitors.⁴⁸³ Unlike shelters, TLPs help homeless young people establish themselves in successful independent living situations.⁴⁸⁴ In Texas, youth can sign themselves into and participate in services in TLPs without the consent of an adult as long as the youth is 16 or older, can prove they are living apart from their parents and are financially independent.⁴⁸⁵

Host homes are being implemented across the country as an alternative to residential group programs such as shelters or TLPs, especially for special populations such as LGBTQ youth and youth in rural areas. In Texas, host homes are defined as “...a family home with a rented room or garage apartment with access to a kitchen and preferably laundry facilities in the home. The young adult agrees to the household rules and has the independence to come and go as needed for employment, school and other personal and social activities.”⁴⁸⁶ Youth who are having challenges attaining self-sufficiency skills may live in host homes for a transitional period.

“There’s no shortage of good Samaritans who want to take these kids in. What we have to do is train these families on what to expect.”

–Homeless liaison
in Central Texas

482 Family and Youth Services Bureau, Transitional Living Programs Fact Sheet (2016), <https://www.acf.hhs.gov/fysb/resource/tlp-fact-sheet> (last visited Oct. 24, 2017).

483 Id.

484 S. J. Lee, *Independent living programs and changes in resilience of transition-age foster care youth* (2016), available at [Lee_umaryland_0373D_10713.pdf](#)

485 TEX. FAM. CODE § 32.203

486 DFPS, Types of Supervised Independent Living (SIL) Settings, https://www.dfps.state.tx.us/Child_Protection/Fostering_Connections/sil_setting_types.asp

Best Practices for Intervention Services

These best practices were adapted from a congressional report by the Department of Health and Human Services.⁴⁸⁷

- **Gateway Options:** Provide gateway services to meet the urgent and basic needs of youth in an effort to gain their trust and eventually help them access a broader range of services.
- **Stabilization:** Focus on sheltering and stabilizing youth experiencing homelessness through reunification with their family or appropriate transitional placement outside their families.
- **Supportive Services:** Provide intentional and intensive services to specific populations with special health care needs, including youth with drug and alcohol abuse and mental health problems, youth living with HIV/AIDS, transgender youth, and pregnant and parenting teens.
- **Transitions:** Make longer-term housing options and services available to young people who will not be returning to their families in order to assist their transition to independence.

Considerations for Serving Special Populations

Certain populations of youth experiencing homelessness are at a greater risk for negative outcomes. By being aware of the experiences and backgrounds of these populations, service providers can work with the young person to design appropriate, inclusive, and supportive programs to meet their needs. This section explores characteristics of high-risk groups and provides best practices for engagement. Section size varies according to amount of available research on the population specific to homelessness.

Youth with Histories of Foster Care Involvement

As previously discussed in this report, young people who have been in the foster care system are overrepresented in the overall youth experiencing homelessness population. It is estimated that 25 percent of foster youth will experience homelessness within two to four years of leaving the system.⁴⁸⁸ Youth who have been in foster care, run away from care or aged out of care have increased challenges making a successful transition to independence. But there are services available to these young people that are often underutilized. Therefore, it is critical that they know about and understand how to access the benefits available to them through the foster care system. If community-based service providers do not have this information, they should connect youth to programs and resources that can offer information and guidance.

In the effort to prevent homelessness (including running away from care), service providers can:⁴⁸⁹

- Focus on school stability and progress. This includes communicating with school staff to enroll/re-enroll youth, as well as alerting the school to any personal situations that may interfere with schooling.
- Ensure school counselors are connected with these students. Stability in education is one key factor in successfully preventing homelessness.
- Support the youth in seeking out connections to extended family members or mentor figures if it is safe to do so.

487 PROMISING STRATEGIES, *supra* note 472.

488 Covenant House, *supra* note 301.

489 COLUMBIA LEGAL SERVICES, PROMISING STRATEGIES FOR PREVENTING YOUTH AND YOUNG ADULT HOMELESSNESS (2014).

- Ensure staff have training on the factors that may result in a youth becoming disconnected from family and school or becoming homeless. This includes understanding why youth run away from foster care placements.
- Utilize evidence based systems that match foster parents and youth based on pre-determined characteristics of what makes the most stable placement option. Also ensure that young people are able to participate in court hearings and have a voice in decisions about their placement.
- Begin planning for the transition to adulthood at age 14 or earlier, or whenever the young person enters foster care, if he or she enters after the age of 14. Transition planning may include an assessment of the youth's current life skills. In the years following, youth can be referred to independent living programs, and their transition plans can include educational or career plans, financial management, etc., but most importantly experiential learning opportunities so they can gain skills necessary for their independence.
- Ensure that youth exiting foster care have access to copies of their records, such as a government ID, birth certificate, social security card, family and personal health history, as well as names and contact information for health care providers (medical, dental, mental health) and family members or adults who can serve as a support system.

To best support youth experiencing homelessness who have experience with the foster care system, providers can:⁴⁹⁰

- Build relationships with service providers who focus on foster youth and former foster youth.
- Receive training on the unique experiences and needs of youth in foster care and methods for engaging these young people, including Trauma-Informed Care.
- Assist youth in building or repairing their credit histories so they can more successfully obtain housing.
- Support youth in securing year-round housing. Lack of year-round housing near a college campus is a major barrier for youth who wish to pursue higher education. Additionally, educate local universities about students experiencing homelessness or exiting foster care and work with them to implement year-round dorm programs.
- Assess a former foster youth's needs in a variety of domains, including health, mental health, employment, financial stability, substance abuse, education, relationships, and more to design individual service plans. Former foster youth who have become homeless tend to have significant needs in the areas of health, mental health, income generation, and substance abuse.⁴⁹¹
- Build supportive relationships with youth, and assist them in building a network of support that includes peers and adults.

By understanding the experiences and needs of foster youth, service providers and programs can help reduce homelessness rates among this especially vulnerable population.

490 CAL. COMMUNITY COLLEGES STUDENT MENTAL HEALTH PROGRAM, SUPPORTING TRANSITION-AGED FOSTER YOUTH (2015).

491 Bendera, K. et al, *Experiences and Needs of Homeless Youth with a History of Foster Care*, 55 CHILD & YOUTH SERVICES REV. 222-231 (2015).

Gang-Affiliated Youth

While there is research about the prevalence of gang involvement among youth experiencing homelessness, there are limited resources on best practices for how to serve this population. It is important for providers to understand gang culture and dynamics to best serve youth who are affiliated with gangs, as well as to provide services in areas that are controlled by a gang. For example, providers in Houston have reported that they separate members of rival gangs in residential programs.

Human Trafficking Victims

It can be difficult to pinpoint youth experiencing homelessness who are human trafficking victims because they are a hidden population within another hidden population. And, while their exact numbers are unknown, certain vulnerable groups are at a greater risk of being trafficked than others. Indeed, up to 60 percent of human trafficking victims that have been recovered by law enforcement were once in foster care;⁴⁹² and LGBTQ youth are at a greater risk than other groups of young people of being sexually exploited or engaging in survival sex in exchange for shelter and other necessities.^{493 494}

Because of the traumatizing nature of human trafficking, it is imperative that service providers working with this population have appropriate training. Providers should be knowledgeable of the victimizing dynamics of human trafficking. Such trainings can help staff support young people who have yet to reveal that they have been trafficked, as well as victims who have already identified themselves. It may also help providers notice warning signs of sexual exploitation among the other youth they serve. If there is a local or state organization that specializes in this topic, providers can request staff training and build a working relationship through collaboration and referrals.⁴⁹⁵

Additionally, service organizations can hire outreach staff with experience working with human trafficking victims in their street outreach efforts. They can also develop comprehensive drop-in services that include resources related to human trafficking. Finally, service providers can offer young people food and shelter, as these necessities are the two main reasons they engage in survival sex.

“Running into the trafficking aspect of it, they’re looking for a connection. They’re looking for someone to love them unconditionally, and they think they get it with the trafficker, but ultimately they’re being used...Hearing interviews with these girls, they talk about even though it was so bad there, they still had a home. They still had a family with the other girls that were being prostituted, and so they stayed. It was the only place they felt connected to a home.”

–Stakeholder

492 Carrie Johnson et al, *Finding and Stopping Child Sex Trafficking*, NPR, Aug. 1, 2013, available at <http://www.npr.org/templates/story/story.php?storyId=207901614>

493 COVENANT HOUSE, *supra* note 89.

494 URB. INST., *EXPERIENCES OF LGBTQ YOUTH, YMSM, AND YWSW ENGAGED IN SURVIVAL SEX* (2015).

495 COVENANT HOUSE, *supra* note 89.

“I have kids who are trading their bodies. Survival sex is not a new concept. They do it for food, money to get a haircut, buy medicine or any number of things.”

–Homeless liaison
in Central Texas

“Also being a female and walking around on the streets every day trying to find a job makes you get targeted by a lot of men. They come onto us, and some might be pimps. We have to watch out for that too.”

–C.M., Houston youth

“I also work with victims of sex trafficking. It’s not restricted to just girls—boys can also engage in prostitution and be victims of trafficking. That’s a population that is homeless often. They live on the streets, and they engage in survival sex. It’s very difficult for them to go back to living at home because their parents want them to be a kid, and they’ve just experienced too much to be a kid. It’s a tough role for them to be in. There needs to be some kind of living situation where they can prepare for living on their own. There still need to be improvements there.”

–Stakeholder in Houston

Immigrant, Undocumented, and Refugee Youth

Only a small number of the hundreds of thousands of youth that attempt to enter the United States each year become legal citizens. The remaining youth face unique barriers to long-term safety and security, as they’re particularly vulnerable to homelessness and exploitation. Nevertheless, fear of deportation results in a large share of these young people not seeking out services. Service providers can best support immigrant, undocumented, and refugee youth by understanding their situations, backgrounds, and options.⁴⁹⁶

496 NAT’L COLLABORATION FOR YOUTH & NAT’L JUV. JUST. NETWORK, UNDOCUMENTED IMMIGRANT YOUTH: GUIDE FOR ADVOCATES AND SERVICE PROVIDERS (2006).

To support immigrant, undocumented, and refugee youth experiencing homelessness, service providers can:

- Receive training specific to immigrant and undocumented populations, including information on the prevalence of trauma, as well as on relevant cultural backgrounds and cultural factors. This includes practical information on what benefits and services the youth is eligible to receive, as well as their legal rights.
- Understand that immigration laws are complex and constantly changing, so it is best to know the protocols of schools and other service providers and consult with legal experts as needed.⁴⁹⁷
- Ensure that translation services are available for a young person or family, if appropriate. Also ensure that provider organizations have bilingual staff.
- Ensure the youth is connected to their school district homeless liaison and receiving benefits and services.⁴⁹⁸
- Design an inclusive, welcoming organizational culture and programs that do not require a youth to have documentation or legal status to receive services. This can include confidentiality procedures and intake practices that inform the youth of these protocols.
- Build relationships with other community services and gather information on their eligibility requirements before making referrals.

With this special population on the rise in Texas, it is critical that service providers take steps to become allies and advocates for immigrant, undocumented, and refugee youth experiencing homelessness.

LGBTQ Youth

LGBTQ youth are overrepresented in the youth experiencing homelessness population. It is estimated that 7 percent of all youth are LGBTQ, while up to 40 percent of the youth experiencing homelessness population is LGBTQ.⁴⁹⁹ Because their sexual orientation or gender identity may have been a contributing factor in their becoming homeless, these young people may be reluctant to disclose their circumstances to service providers. Accordingly, it is safe for service providers to assume that at least some of the youth they serve are LGBTQ even if they do not disclose it.

In their 2014 survey of service providers, The True Colors Fund and its partners found that 20 percent of youth seeking homeless services identify as gay or lesbian; another 7 percent identify as bisexual; and 2 percent say they are questioning. In terms of gender identity, 2 percent identify as transgender female, 1 percent identify as transgender male, and 1 percent identify as gender queer.⁵⁰⁰ LGBTQ youth of color are even more disproportionately represented among youth experiencing homelessness; and these young people tend to experience homelessness longer than their white or non-LGBTQ counterparts.⁵⁰¹

Service providers can work to prevent LGBTQ youth from becoming homeless through focused and affirming counseling services with the youth and family when it is safe to do so. Richard Hooks Wayman, national executive director of the Children's Defense Fund, and others have reviewed various counseling approaches with homelessness prevention in mind and offer clinical recommendations for

497 *Id.*

498 NAT'L CENTER FOR HOMELESS EDUC., IMMIGRANT AND HOMELESS: INFORMATION FOR SCHOOL DISTRICT TITLE III PROGRAMS AND COMMUNITY AGENCIES 2 (2006).

499 True Colors Fund, Our Issues, <https://truecolorsfund.org/our-issue/> (last visited Oct. 24, 2017).

500 TRUE COLORS FUND, THE NEEDS AND EXPERIENCES OF LESBIAN, GAY, BISEXUAL, TRANSGENDER, AND QUESTIONING YOUTH EXPERIENCING HOMELESSNESS 4 (2015).

501 *Id.*

counselors.⁵⁰² Based on research and consultation with LGBTQ youth, service providers, and advocates, the National Alliance to End Homelessness and its partners suggest several best practices for serving LGBTQ youth experiencing or at risk of homelessness.⁵⁰³

Services can be delivered with the following in mind:

- At the most basic level, all staff members should work to create a safe, respectful, and welcoming environment. This includes asking staff to examine their own values and beliefs to ensure they can professionally serve LGBTQ youth, use appropriate terminology and preferred pronouns, and intervene if they witness any anti-gay harassment by other staff or youth.
- Staff should be educated in the experiences LGBTQ youth faced prior to becoming homeless (e.g., rejection by family members, being kicked out, stigma and shame, etc.). They should be trained in LGBTQ basics (e.g., the difference between sexual orientation and gender identity) and know what to do if a youth discloses that they are LGBTQ.
- At intake, all forms and questions asked to a youth should be inclusive and not make assumptions about sexual orientation. LGBTQ-specific resources should be included in standard resource lists, and non-discrimination policies should be shared with youth and made public for all.
- If youth are in school, providers can ask if they feel safe there and support youth in addressing bullying.
- Make referrals to health care providers that are welcoming to LGBTQ youth and comfortable openly discussing sexual orientation, gender identity and expression, and sexual behaviors. Support transgender youth in accessing transition-related treatment and health services.
- Ensure that all handouts and resources about health and sexual practices are inclusive and affirming of LGBTQ youth.
- Allow transgender youth to express their preferred gender identity through their personal style, hair, etc. Ensure that all staff and youth are using a youth's preferred pronouns (or know how to politely ask if they are unsure).
- Locate or create services to assist transgender youth with their unique legal issues (obtaining documentation with their preferred gender identity and name). Ensure that transitional living and employment-related service providers are educated about the unique needs of transgender youth and able to help them find meaningful education and employment opportunities that support long-term stability and independence.
- Offer meaningful opportunities for LGBTQ youth to connect with other LGBTQ youth and mentors (e.g., through counseling groups, drop-in centers, or activities).

Organizational culture can support the needs of LGBTQ youth by:

- Ensuring that all staff and volunteers receive regular training about LGBTQ youth.
- Ensuring that program and marketing materials are explicitly inclusive to LGBTQ youth.
- Ensuring that the program environment is welcoming (e.g., through rainbow or “safe space” stickers, inclusive language, non-discrimination and confidentiality policies).

502 Hooks Wayman, R.A., *Homeless Queer Youth: National Perspectives on Research, Best Practices, and Evidence Based Interventions*, SEATTLE J. FOR SOC. JUST., Vol 7, Issue 1 (2008).

503 NAT'L ALLIANCE TO END HOMELESSNESS, LGBTQ YOUTH NATIONAL POLICY STATEMENT (2012), available at <https://endhomelessness.org/resource/lgbtq-youth-national-policy-statement/>

- Offering services or resources aimed at family members that promote acceptance and family reunification if possible.
- Implementing hiring procedures where organizational goals and values are made explicit, and candidates are screened to ensure they are an appropriate fit for the program.
- Encouraging staff to visit and make connections with other community resources for LGBTQ youth.
- Including questions about sexual orientation and gender identity in data collection to track program outcomes for LGBTQ youth.

Residential programs can be responsive to the needs of LGBTQ youth by:

- Ensuring that LGBTQ youth do not face additional restrictions in shelter services (e.g., they are not automatically isolated, segregated, etc.).
- Discussing sleeping arrangement options with LGBTQ youth (e.g., some may prefer to be within eyesight/earshot of staff overnight).
- Conducting an individual needs assessment of transgender youth when placing them, including a consideration of their safety and gender identity.
- Creating safety plans with youth to respond to harassment, sexual exploitation, and violence; checking in with the youth regularly.

By implementing these recommendations, service providers can be critical allies for LGBTQ youth who are experiencing homelessness.

Native Populations

Native populations living in the United States such as American Indians and Alaska Natives are at increased risk of child welfare and juvenile justice system involvement and homelessness. Just as with the other special populations discussed in this section, training and awareness around the experiences and needs of this population are key to better meeting their needs and supporting their stability and successful independence in adulthood.

Pregnant and Parenting Youth

Youth who are pregnant and parenting, as well as those who are homeless (or at risk of becoming homeless), face unique challenges to stability. While they tend to be motivated to improve their situations, pregnant and parenting youth may also have challenges or fears around seeking services. Programs that serve teens and young adults may not accept younger children. Pregnant and parenting young women may fear that their homelessness could result in their losing custody of their child(ren). They may feel on display with their parenting challenges as they attempt to follow program rules in a shelter, for example.⁵⁰⁴ Additionally, their education or attendance in a program may be disrupted due to a lack of child care, and they may need assistance in understanding how to appropriately advocate for themselves.

504 ELLA KUSKOFF & SHELLEY MALLETT, YOUNG, HOMELESS, AND RAISING A CHILD: A REVIEW OF EXISTING APPROACHES TO ADDRESSING THE NEEDS OF YOUNG AUSTRALIAN PARENTS EXPERIENCING HOMELESSNESS (Life Course Centre 2016), available at <http://www.lifecoursecentre.org.au/wp-content/uploads/2016/06/2016-13-LCC-Working-Paper-Kuskoff-Mallett1.pdf>.

“People tell me not to think about the future, just to think about today. But you can’t do that when you have kids because in the future, you don’t know if you’re going to be homeless. You don’t know if something will happen, and you have both of your kids on the street with you. You have to think about things like that.”

–H.H, Dallas youth

“If you have a pregnant girl, a lot of times they will run away and refuse to come back because they are afraid CPS will take their baby.”

–Service provider
in the Houston area

To engage pregnant and parenting young women who may need services, providers can:⁵⁰⁵

- Conduct outreach (e.g., flyers, visits, and building relationships with staff) at places where pregnant and parenting teens are likely to be, such as schools, pediatricians’ offices, WIC offices, clinics, and hospital emergency rooms.
- Design a program that is welcoming to mothers and fathers with approachable staff. Allow for flexibility in program requirements and schedules.
- Offer child care access as well as transitional housing and employment support.
- Receive training on the developmental needs and specific experiences common in these youth, such as trauma histories, disconnection from family, and isolation from peers who are not pregnant or parenting.
- Emphasize education and provide support for school enrollment and retention.
- Offer parenting support to strengthen family relationships and prevent child welfare system involvement, and support reunification with a child placed in foster care. This can include peer-to-peer support and discussion-based approaches.
- Assemble an array of service options for young parents in a single location so receiving services is more efficient and convenient.

Existing programs and services, such as RHY Funded Maternity Group Homes (MGH), that specialize in serving young parents may offer an opportunity to better tailor services to this population.

505 PROMISING STRATEGIES, *supra* note 472.

Youth in Rural Areas

Due to high poverty rates, limited access to community services, and inadequate affordable housing stock, homeless young people in rural areas are at a greater risk of negative outcomes; this is especially true for LGBTQ youth from rural areas.⁵⁰⁶ While youth experiencing homelessness may seek out urban areas where services are more readily available, it is estimated that at least 7 percent of all populations of homeless individuals live in rural areas;⁵⁰⁷ the exact figures, especially for youth, are not known, as rural areas tend to be spread out and difficult to sample.

When planning and conducting outreach in rural areas, providers should make themselves widely known in the community, as opposed to the more urban street outreach approach of targeting areas where youth experiencing homelessness are known to congregate. In rural areas, providers can reach vulnerable youth by becoming visible to all youth as well as to other organizations serving youth. This could include:

- Use of social media and websites to provide information and support.
- Marketing (posters, presentations, visits) at schools, youth health care settings, and other youth programs.
- Handing out bracelets at community events with the provider's contact information.
- Community marketing (billboards, posters, television/radio/bus ads).
- Hiring/engaging youth to advise program staff on reaching other youth and help raise awareness by word of mouth.

While youth experiencing homelessness in rural areas may be even more hidden than other populations of youth experiencing homelessness, there are ways to reach them, provide support, and earn their trust.

Youth Under Age 18

While teenagers and young adults experiencing or at risk of homelessness face many of the same situations and challenges, there are additional legal and programmatic considerations for service providers serving unaccompanied youth who are under 18 years old.

To offer effective prevention services to minors at risk of homelessness, providers can:⁵⁰⁸

- Develop capacity within schools to be able to quickly intervene with student and family crises.
- Offer education in schools and to other youth-serving organizations on avoiding the risk of homelessness and developing personal safety plans for crisis situations.
- Focus on supporting vulnerable youth in building relationships with caring adults who can act as resources—either from among program staff or through community activities.

506 Nat'l LGBTQ Task Force & True Colors Fund, *At the Intersection: Rural Homeless Youth*, <http://attheintersections.org/rural-homeless-youth/> (last visited Oct. 24, 2017).

507 NAT'L ALLIANCE TO END HOMELESSNESS, *RURAL HOMELESSNESS* (2010), available at <https://endhomelessness.org/resource/rural-homelessness/>

508 NAT'L ALLIANCE TO END HOMELESSNESS, *ENDING HOMELESSNESS FOR UNACCOMPANIED MINOR YOUTH* (2015), available at <https://endhomelessness.org/resource/ending-homelessness-for-unaccompanied-minor-youth/>

- Focus on supporting families in resolving conflict and improving communication through counseling programs and related services (e.g., anger management, substance abuse treatment).
- Identify or build programs that can offer emergency financial assistance so that families can meet basic needs while staying intact and participate in other support services such as counseling.
- Identify resources or build capacity to offer respite housing when minors and their families need a safe way to take a break from one another. Basic Center Programs funded by the federal Runaway Homeless Youth program may be able to serve this function.

To offer effective intervention services to minors experiencing homelessness, providers can:⁵⁰⁹

- Consider alternatives to shelter entry, such as acting as a mediator between a youth and their family or connecting the youth to a trusted extended family member while offering the youth other support services as needed. To support the child if they are temporarily living with a relative, relatives and parents can access an Authorization Agreement for a Non-Parent Relative (Chapter 34 agreement) which is a notarized document that assists the relative in meeting the child's needs, such as going to the doctor, without negatively impacting a parent's right.⁵¹⁰
- Use a strengths-based, youth-guided family intervention approach to engage both youth and family members in working toward reunification.
- Utilize crisis shelter programs or, when shelters are full or otherwise unavailable, use backup community arrangements (e.g., an agreement with other organizations to provide overflow beds or even sleeping supplies). This can help an unaccompanied minor avoid unsafe situations.
- Emphasize discharge planning and aftercare from crisis programs, including follow-up services to ensure the youth's situation remains stable.
- Clearly understand the laws and regulations that provide this population with access to services and certain benefits, such as medical and counseling services.

Finally, when serving minors in residential living programs, providers can:⁵¹¹

- Individualize services and service plans that are developmentally appropriate for the youth and are based on the young person's stated goals, realizing that a youth's needs will evolve over time.
- Offer youth opportunities for transitioning to greater independence, such as single-site housing, where all youth live in one building, versus scattered-site housing, where youth may have their own apartment or only a roommate.
- Emphasize discharge planning and aftercare from transitional living programs, including follow-up services to ensure a youth's situation remains stable. This includes consideration of education, employment, mental health, permanent relationships/connections, and independent living skills.

509 *Id.*

510 Form agreement available at http://www.dfps.state.tx.us/Site_Map/forms.asp

511 *Id.*

“It’s the problem between 17 years old and 18 years old. By law, you’re an adult at 17 years old, but the shelters will not take you. The men’s emergency shelters will not take you until you’re 18 years old. So the 17 to 18 year old dilemma is a problem. We’ve got young people who have aged out of the foster care system, but they’re too young to get into the emergency shelter.”

–Law enforcement officer

“It is very hard if you’re 16 to 18 to access services. It’s hard to get your driver’s license, it’s hard to register for school, and it’s hard to get into a shelter because people are afraid of [serving] minors. That still needs a lot of work.”

**–Stakeholder in
the Houston area**

Funding, Service Gaps, and Limitations Related to Support Services for Youth Experiencing Homelessness

There is no single piece of legislation or single agency at the federal or state level that comprehensively directs and manages regulations and resources aimed at addressing the issues of youth homelessness. There are instead multiple pieces of legislation and multiple agencies, at both the federal and state levels, that are connected to the issue. This dynamic creates challenges for coordinating policies, programs, and services; it also produces ambiguity about stakeholder roles and accountability.

Major Legislation to Provide Services to Texas' Homeless Youth

The Runaway and Homeless Youth Act (1974) and McKinney-Vento Homeless Assistance Act (1987) are two of the primary pieces of federal legislation that make resources available for youth experiencing homelessness. The federal Family and Youth Services Bureau (FYSB) within the U.S. Department of Health and Human Services' Administration for Children and Families (ACF) is responsible for distributing funding and technical assistance services related to Runaway and Homeless Youth Act programs, which is earmarked for direct services for homeless young people, through basic center, transitional living, and street outreach programs.⁵¹² McKinney-Vento funding, on the other hand, applies strictly to supporting educational access and related rights for homeless students in public K-12 schools and is administered by the U.S. Department of Education (ED) and the U.S. Department of Housing and Urban Development (HUD), depending on which agency's definition of homelessness is being used and whether services are related to schooling or housing.

In recent years HUD has been directed to provide appropriate services and supports for young people who are homeless. This direction came from the first federal strategic plan to prevent and end homelessness: *Opening Doors*.⁵¹³ HUD is now beginning to fund programs to meet the needs of another special population for which homelessness is a major concern. HUD's efforts can greatly enhance the funding that is available to communities throughout the country to address youth homelessness, but its involvement may also be increasing system fragmentation by developing a system to respond to youth homelessness that has additional and unique regulatory restrictions which differ from the systems that have traditionally served young people experiencing homelessness, such as RHY programs and child welfare.

In Texas, there is not a state agency that is officially responsible for meeting the needs of youth and young adults experiencing homelessness. Issues related to youth homelessness may intersect peripherally with the work of a number of state agencies, including the Texas Department of Family and Protective Services (which houses Child Protective Services), the Texas Department of Housing and Community Affairs, the Texas Juvenile Justice Department, and the Texas Education Agency, among others. The intersection between many of these agencies and youth homelessness is detailed in other chapters of this report.

Rising public concern about the challenges facing youth experiencing homelessness has triggered recent interest in Texas in taking steps to improve their circumstances. In 2012, for example, the Texas Interagency Council for the Homeless (TICH), an advisory committee to the Texas Department of Housing and Community Affairs (TDHCA), launched an annual report titled *Pathways Home* that takes inventory of programs and services in the state and proposes a framework for the coordination of

512 Family and Youth Services Bureau, Runaway & Homeless Youth, <https://www.acf.hhs.gov/fysb/programs/runaway-homeless-youth> (last visited Oct. 24, 2017).

513 U.S. INTERAGENCY COUNCIL ON HOMELESSNESS, *OPENING DOORS: THE FEDERAL STRATEGIC PLAN TO PREVENT AND END HOMELESSNESS* (2015) available at https://www.usich.gov/resources/uploads/asset_library/USICH_OpeningDoors_Amendment2015_FINAL.pdf

local service organizations in addressing homelessness. This publication explores the unique challenges and needs of special populations of homeless individuals, including youth aging out of foster care and unaccompanied youth experiencing homelessness.

In 2015, in order to gather additional information about homeless young people in Texas, the 84th Texas Legislature passed HB 679, which required the TDHCA, in conjunction with the TICH, to conduct a study (published December 1, 2016) of youth homelessness in Texas and submit a report to the legislature outlining its findings and recommendations.⁵¹⁴

State and federal efforts to address the challenge of youth homelessness have long been supplemented by a wide network of local nonprofit and philanthropic organizations providing a variety of services for this population. Many of these community-based organizations are faith-based, and there is great disparity from community to community and program to program.

Government funding that is available to community-based organizations serving youth experiencing homelessness does come with stipulations and therefore helps to ensure a degree of consistency between recipient programs. Funding and other support for community organizations flows through both federal and state agencies, but it is extremely limited in terms of both dollars and scope. For example, HUD grants may be administered via TDHCA or directly to a service organization through HUD's Continuum of Care (CoC) system, but youth-serving organizations are not prioritized for these funds, and there are a number of limitations and challenges associated with them. Some state funding is available to providers through DFPS, for the purpose of serving young people exiting foster care. Community-based organizations serving homeless young people in Texas must rely on private philanthropic funding to supplement government funding they receive, as available government funding is woefully insufficient, and private philanthropic funding is often insufficient to meet need.

The decentralized nature of how different levels of government fund and regulate services for homeless young people creates challenges for service providers, and, as a result, broadens the chasm between the level of need in a particular area and the availability of services to meet those needs. Financial and regulatory challenges make it difficult for providers to offer and sustain consistent services to all youth experiencing varying degrees of homelessness. Further, without a clear mandate or agency responsible for serving youth experiencing homelessness at either the state or federal level, it is not clear where responsibility lies for supporting the planning and provision of a full continuum of services appropriate for youth experiencing homelessness.

Regulation Conflicts

The existence of multiple agencies focused on different aspects of youth homelessness has created multiple eligibility criteria, resulting in a range of regulatory implications for those providing services to young people experiencing homelessness.

The Runaway and Homeless Youth Act includes two definitions of "homeless youth," based on differences in age that are tied to different RHY programs funded by FYSB. For purposes of a youth seeking shelter in a basic center program, "youth" applies to minors under the age of 18;⁵¹⁵ and for a youth seeking services in a transitional living program, "youth" is defined as those between the ages of 16 and 21.⁵¹⁶

⁵¹⁴ Tex. HB 679, 84th Reg. Sess. (2015).

⁵¹⁵ CONG. RES. SERVICE, RUNAWAY AND HOMELESS YOUTH ACT: CURRENT ISSUES FOR REAUTHORIZATION 2 (2014).

⁵¹⁶ *Id.*

Similarly, there is no consensus about what situations qualify as “homelessness.” In accordance with the McKinney-Vento Act, ED provides school-based assistance to students that “lack a fixed, regular, and adequate nighttime residence,” including those who are staying with friends or family (“couch surfing”) due to loss of housing, economic hardship or a similar reason, or living in motels or hotels due to lack of adequate accommodations.⁵¹⁷ HUD, on the other hand, employs a more narrow definition for eligibility for its CoC-funded housing programs that includes only those who are literally homeless, chronically homeless, or those who are escaping a violent household (e.g., domestic violence or trafficking victims), though there are some nuances to this rule. Individuals who would be homeless under other federal definitions may be served, but they may only be served with very limited funding if the CoC applies for it and proves they have made significant progress toward resolving homelessness for HUD’s priority populations. Additionally, young people who couch surf, who are doing so out of necessity, meet the technical definition of being “imminently at-risk of homelessness,” but this category of HUD’s homeless definition is not an eligible population for many CoC-funded programs, and for those who can serve this population, the requirements to prove they are “imminently at-risk” are an impossible burden to overcome. These irregular and competing definitions reveal a deep tension between understanding youth homelessness as either a child welfare issue or a housing issue, and the resulting ambiguity strains relationships across agencies, reduces leadership and accountability, and can lead to “turf wars.”

“When you look at the funding, something has to give. HUD says Runaway and Homeless Youth funding should house homeless youth so HUD [says] we don’t really want to do those programs anymore, whereas Runaway and Homeless Youth says, well, we’re dealing with runaways and the kids on the street, but you’re dealing with housing so you need to do the funding that puts them into housing. And so there’s this argument of who’s responsible, and the people that are caught in the middle are the programs who are actually trying to house the kids and trying to figure out how to play those games. And so it’s very difficult when you’re dealing with two very large federal programs that aren’t on the same page.”

**–Service provider
in the DFW area**

“If you’re dealing with the ISD, their definition of homeless is different than HUD’s definition of homeless, which might be different than a privately-funded housing program’s definition of homeless. And so everybody’s on a different page, and that’s challenging.”

**–Service provider
in the DFW area**

517 Nat’l Center for Homeless Educ., The McKinney-Vento Definition of Homeless, <http://nche.ed.gov/legis/mv-def.php> (last visited Oct. 24, 2017).

“If they’re sleeping on my couch, and I say that they can stay there forever, then they’re not homeless. But if you’re sleeping on my couch tonight because I said, ‘Oh yeah, you can sleep here tonight, but you’re going to have to leave tomorrow’ or ‘Oh, you can sleep here tonight if you have sex with me’ or ‘Oh, you can sleep here tonight if you pay me \$100’ or whatever, then that’s homeless.”

**–Service provider
in the DFW area**

There are also issues that arise from the federal government seeking to advance compliance by tying funding to it. This can create challenges for state regulatory agencies that license federally funded facilities or even distribute the funds. On the provider side, multiple, and sometimes even conflicting, requirements result in cases where youth experiencing homelessness can receive housing but are not permitted other services, and vice versa. For instance, federal Runaway and Homeless Youth Act programs regulate age eligibility, length of stay, and requirements around calling a minor’s parents or guardians, which are not necessarily consistent with Texas’ licensing regulations for residential child care providers. In fact, 78 percent of respondents in a recent TNOYS survey of youth service providers stated that they faced barriers in providing services to youth experiencing homelessness because of laws, licensing regulations, eligibility criteria, or other rules that are misaligned, over-restrictive, or unclear.⁵¹⁸ These barriers may be most challenging for providers working to serve young people who identify as LGBTQ.

“We’ve had situations in the past where the contract required us to do something that violates our license. They came from the same department.”

**–Service provider
in Central Texas**

“You see a lot of homeless minors that are LGBTQ who were kicked out of their homes or who left home because they felt unsafe there and so then, when you look at that population, shelters are designed—and they have to be designed—according to licensing for male and female. Well if you were born a biological male, but you are living your life as a female so you identify as a female, you are sleeping in the male wing—which, if you look at any legislation or any research—they are going to be raped in that shelter. That is going to happen. They will be traumatized again because that is not a safe place for them to be, and so they won’t do it.”

**–Service provider
in the DFW area**

518 Survey TNOYS administered by TNOYS via SurveyMonkey through its listsev in July 2016.
http://tsta.org/sites/default/files/One-third_teachers_moonlight.pdf

These issues echo the findings of an extensive survey of homeless liaisons conducted by TNOYS in August 2016.⁵¹⁹ Over one-quarter of respondents indicated their school or district has experienced challenges associated with identifying homeless students, and liaisons noted the identification of homeless students as the most difficult challenge they face.⁵²⁰ Responses suggest that some difficulties in identifying homeless students arise from a misunderstanding about what “counts” as homeless. Respondents also felt that laws and regulations are overly burdensome and restrictive. For instance, facilities seeking to provide shelter for a youth must be licensed as child care facilities and meet standards generally geared toward large commercial operations, even though homeless liaisons target a different population with discrete needs that may be able to be served outside of a large commercial operation.

Licensing and contractual regulations may limit the ability of providers to serve youth and young adults of various ages who are experiencing homelessness. Some providers offer programs to assist young people who are under the age of 18, as well as young adults up to the age of 24 who are experiencing homelessness, but others report reluctance to serve a wide spectrum of age groups out of fear of losing their residential child care licenses or other licenses and/or due to the threat of litigation.

“There’s lots of rules and regulations. So if you’re providing emergency shelter to a minor, you follow different licensing standards. There’s a shelter in Dallas and there’s a shelter in Plano that work with minors, but you cannot put an overage—an 18-plus—in there with a minor. So if a homeless person comes to us and we may be able to get them into an apartment on Monday, but it’s Friday, where are they going to stay over the weekend? And really, they’re not going to go. Dallas has several shelters that do a lot of good work, but our youth typically would rather find somewhere to sleep on the streets or just survive for the weekend than go to one of those shelters—that’s a problem.”

**—Service provider
in the DFW area**

Major Funding Streams for Homeless Youth

The nonprofit community-based organizations that serve youth who are homeless in Texas are funded by a patchwork of federal, state, local, and private dollars. Service providers compete for available funding, which may come with a set of stipulations that limits the provider’s ability to best meet youths’ needs. Funding is overwhelmingly inadequate throughout Texas and the country to meet the level of demand.

Federal Funding

There are multiple federal funding streams to support community-based services for youth experiencing homelessness that are disbursed through more than one agency and tied to multiple pieces of legislation. The following table provides an overview of major federal funding sources that support community-based services (outside of school) for young people experiencing homelessness.⁵²¹

519 Gendron, *supra* note 42.

520 *Id.* at 5.

521 National Alliance to End Homelessness, FY 2016 Budget Rundown, <https://endhomelessness.org/heres-a-breakdown-of-funding-levels-for-homeless-programs-in-the-presidents/> (last visited Oct. 24, 2017).

Federal funding sources for services to address youth homelessness

Program	What is Funded	Funding Amount
Runaway and Homeless Youth (RHY) program	This has traditionally been the only government funding consistently available to Texas providers to serve youth who are homeless. RHY grants support street outreach services, short-term crisis housing, and longer-term transitional living programs including maternity group homes.	FY 2016: \$6,307,274 to Texas; \$119,121,000 nationally
Continuum of Care (CoC)	These funds are not specific to youth programs, and youth programs are typically a lower priority for these funds than programs serving veterans, chronically homeless adults, and homeless families. These funds are distributed by HUD through a competitive but coordinated process facilitated by CoC organizations in local communities.	None of this funding is earmarked for youth or young adults. In FY 2015, a total of \$87,150,963 was available to Texas (\$1.9 billion nationally) to support homeless programs, including for veterans and families.
Youth Homelessness Demonstration Program (YHDP) through HUD	This funding is part of a recent pilot project developed and launched by HUD to address youth homelessness, partially in recognition that CoC funding (above) may not be appropriate, accessible, or sufficient. Ten communities in the U.S. received YHDP grants to develop and execute a coordinated community approach to preventing and ending youth homelessness.	This new HUD pilot project provides \$33 million to 10 communities nationally, including one community in Texas (Austin).
Family Unification Program Vouchers (FUP)	Housing Choice Vouchers (section 8) are provided to families when housing is a primary risk factor in imminent placement of their child or the inability of their child to return home from placement, as well as for youth (18-24) who left foster care or will leave in 90 days. Unfortunately, the waitlists for these vouchers frequently make them unattainable.	FY 2016: \$20 million, but these primarily serve families experiencing homelessness rather than unaccompanied youth experiencing homelessness.

The Runaway and Homeless Youth Act (RHYA) provides coveted funding to providers who serve youth and young adults experiencing homelessness. The RHY program supports street-outreach services, basic center program services for minors, and longer-term transitional living programs for youth ages 16-22, including maternity group homes. It is worth noting that RHY grants do not support emergency shelter services for young people ages 18-21, and not all 18- to 21-year-olds who are homeless desire to participate in a transitional living program or are emotionally ready. Emergency shelter services for youth ages 18-21 have been identified by stakeholders as a major need in Texas' urban areas, including Dallas, Austin, and Houston.⁵²²

⁵²² Information gathered by TNOYS through conversations with service providers.

RHY funds help communities meet key needs of the youth experiencing homelessness population; however, many providers feel they cannot rely on securing Runaway and Homeless Youth Act funding from year to year because they are competing with providers across the nation, and there are not enough funds available to meet need. In 2015, for example, Texas did not receive a single new Street Outreach Program award, and in 2016,⁵²³ Texas received only one new award.⁵²⁴ A provider in the Dallas-Fort Worth area reported loss of RHY funding in 2015 due to the end of a grant cycle, and being forced to close one of its programs and turn away nearly 100 prospective young clients experiencing homelessness over the course of the year as a result.⁵²⁵

“We are turning people away and keeping a log of who would be eligible if we had more space. We lost our street outreach funding last year, and that’s the emergency shelter equivalent for the older kids between 18 and 24. Now we only have two beds—we went down from 10. We turned away, I think, 85 kids in nine months.”

**–Service provider
in the DFW area**

“We also have the issue that RHY is only funded for 21 days. Most of the time we cannot get these kids out into a safe place in 21 days.”

**–Service provider
in the DFW area**

The federal Continuum of Care (CoC) program is designed to promote community-wide planning for and commitment to the goal of ending homelessness. Administered by HUD, the CoC program provides another funding stream to support homeless services. Provider organizations access HUD CoC funds via application to their local CoC program. Currently it does not appear that HUD is tracking the level of CoC funding that is being utilized to support youth-appropriate programs, but discussions with providers and other stakeholders suggest that the portion of funding going to youth-appropriate programs is small.

Not all youth-serving organizations have relationships with their local CoC, and even service providers who do report having a strong, collaborative relationship with their CoC suggest that HUD’s funding priorities put them at a competitive disadvantage. For example, HUD now prioritizes rapid re-housing over transitional housing for CoC funding. Transitional housing traditionally provides longer-term

523 Family and Youth Services Bureau, 2016 Street Outreach Program Grant Awards, <https://www.acf.hhs.gov/fysb/resource/2016-sop-awards> (last visited Oct. 24, 2017).

524 Family and Youth Services Bureau, 2015 Street Outreach Program Grant Awards, <https://www.acf.hhs.gov/fysb/resource/2015-sop-awards> (last visited Oct. 24, 2017).

525 Information gathered by TNOYS through conversations with service providers.

and more comprehensive supports that some youth and young adults need as they transition to self-sufficiency. Additionally, HUD's scorecard, which is used to essentially score each program and determine funding levels, is skewed to provide more points for providing certain services that youth may not need or requirements that youth may not be able to meet. For example, HUD weighs employment outcomes for clients very heavily, which may not be appropriate for young people given that many of them are in school rather than working. Many youth service organizations that have received HUD funding through their CoC in the past may not be eligible for these funds in the future, even though they are adhering to best practices.

"We absolutely are under-resourced and underfunded in our community. We don't have enough resources to meet the needs and that's a huge issue."

**–Representative from
a Texas CoC organization**

Even once a youth-serving program obtains HUD funding, its ability to serve young people experiencing homelessness may be limited by HUD requirements and/or perceived requirements. For example, certain HUD funding may only be used to serve people who have been literally homeless—based on HUD's definition of homelessness—for a minimum numbers of days. Providers have expressed concern that this requirement delays access to housing, or makes it completely inaccessible, for certain young people, given that youth experiencing homelessness are more likely to stay with a friend or family member, making it difficult to document their homelessness. Each time a young person finds a place to stay for one night, even if that place results from engagement in survival sex or victimization, the young person is no longer eligible for certain HUD-funded services until he or she has been literally homeless again for one or more nights, depending on the services being sought and eligibility requirements. This limitation further extends the young person's homelessness.⁵²⁶ Similarly, there have been reports from homeless liaisons who faced challenges accessing HUD-funded services for students experiencing homelessness due to an inability to prove that the student was homeless without a hotel receipt or other documentation that may be more challenging to obtain for a young person than for an adult.⁵²⁷

"HUD gives some real barriers, and rightly so, to how their money can be used. People have to be literally homeless. That means they're on the streets or in an emergency shelter. For the vast majority of our young people, that's not how they experience homelessness. Nor should they. We don't want to force people to the streets or shelters to get a resource."

**–Representative from
a Texas CoC organization**

526 Interview with Houston service provider by TNOYS.

527 E-mail from ISD Homeless Liaison, on file with TNOYS.

“You have to ask what people need. You can’t just assume. And that’s a problem with many of our funding sources. They’re very strict about, ‘you cannot spend money on this, this or this,’ yet those are three of the top needs homeless kids are telling us. So we have to go out and do fundraising and whatever it takes to get the funds necessary to meet those needs.”

**–Service provider
in Central Texas**

“All of this funding comes with criteria regarding who they can and cannot serve. Who is a youth and how is that defined. Having all of these variables in terms of the age group for eligibility is a big challenge. One youth may be 17 and a half but until they’re 18 years old, may not be eligible for this transitional program for youth. The kind of bureaucracy of program eligibility can be a really big challenge for that age group.”

–Texas CoC representative

“There is a HUD funding requirement for one of our programs where we have to show that the youth was homeless by taking a picture of where they were living, whether it be in an alley, a cardboard box, a car or a home. That’s just silly. Some of the homeless youth we serve live in abandoned homes with other homeless youth, and they’re not going to give them up so we can serve them.”

**–Service provider
in Central Texas**

“You cannot access any HUD housing without an ID. That’s a huge barrier, especially if you’ve never had an ID before. We do an ID letter. My team does an ID letter that we got approved by our department and DPS. In the last two years, we’ve probably done hundreds and hundreds and hundreds of them. Those allow people to access the services that are out there. But if they’ve never been in the system, and they’ve never had an ID, we’re not supposed to do a letter for them. They’ve got to have an ID before they can access HUD services.”

–Law enforcement officer

After a Senate Appropriations Hearing on HUD's Response to Youth Homelessness, Congress appropriated \$33 million to HUD for the creation of a Youth Homelessness Demonstration Program (YHDP) for 10 communities (four of which are rural). These communities applied through their local CoC organizations, and the funds are to facilitate the development and execution of a coordinated community approach to address youth homelessness.⁵²⁸ Austin, Texas, was selected as one of the 10 communities to receive funding, being awarded \$5.2 million for tackling the challenge of youth homelessness.⁵²⁹ Austin was the only Texas community selected, but HUD has suggested that there may be opportunities for other communities to apply for another round of YHDP grants in the near future. The planning that is taking place under HUD's YHDP grant program in Austin and in other sites across the country will provide valuable information for the agency as it makes plans to better support services for youth and young adults who are homeless moving forward.

State-Level Funding

At the state-level, there are a handful of funding streams and programs that aim to prevent youth homelessness. **HUD channels funding to the state through the TDHCA as part of its Emergency Solutions Grants (ESG) program.** ESGs are awarded to counties, cities, and nonprofit organizations to assist persons who are at risk of homelessness. ESG funds also help those who have recently become homeless to quickly regain stable housing. In some cases, the grant application process is managed by the local CoC organization, but in other cases, applicants apply directly to the TDHCA for grant funds. The ESG program has proven to provide critical resources for some organizations serving homeless young people. Other organizations have not been able to access ESG funds, due to a number of challenges and limitations, including a required 1:1 match ratio.

The TDHCA also administers funding to serve homeless individuals and families through the Homeless Housing and Services Program (HHSP), which was established during the 81st Legislature through an appropriations rider and codified during the 82nd Texas Legislature. Through HHSP, the state provides funding to organizations to support the provision of services to homeless individuals in the eight largest cities in Texas (Arlington, Austin, Corpus Christi, Dallas, El Paso, Fort Worth, Houston, and San Antonio).⁵³⁰ Our research suggests that with the possible exception of funding in Houston, HHSP funds are not currently being utilized to support services that are designed for youth experiencing homelessness or young adults.⁵³¹ Rather, HHSP funds are being used to support organizations that provide services to homeless adults and homeless families with children.

The Texas Department of Family and Protective Services (DFPS) administers federal funds for a range of child welfare programs that have some intersection with youth homelessness. The following list describes some of the primary programs that DFPS funds.

- The Services to At-Risk Youth (STAR) program contracts with community-based organizations to provide family counseling and other crisis intervention services to children and youth up to age 17 and their families in all 254 Texas counties.⁵³² STAR provides research-based crisis intervention services for young people and their families who are experiencing conflict and other struggles. STAR works to prevent youth homelessness by providing a research-based intervention for runaways and resolving family conflict so

528 HUD, Youth Homelessness Demonstration Program, <https://www.hudexchange.info/programs/yhdp/> (last visited Oct. 24, 2017).

529 HUD, Youth Homelessness Demonstration Program Announcement, <https://www.hudexchange.info/news/youth-homelessness-demonstration-program-community-selection-announcement/> (last visited Oct. 24, 2017).

530 TDHCA, Homeless Housing and Services Program (HHSP), <https://www.tdhca.state.tx.us/home-division/hhsp/index.htm> (last visited Oct. 24, 2017).

531 Based on interviews with cities receiving HHSP funds by TNOYS.

532 DFPS, Prevention and Early Intervention Programs, https://www.dfps.state.tx.us/Prevention_and_Early_Intervention/About_Prevention_and_Early_Intervention/programs.asp (last visited Oct. 24, 2017).

that young people can remain at home safely with their families. STAR does not provide housing or transitional services for young people who are on their own and cannot return home. Although outcomes data suggest that STAR services are effective at strengthening families and keeping young people home safely with their parents, last year runaways were less than 1 percent of the population served.⁵³³

- The Texas Youth and Runaway Hotline is a 24-hour toll-free hotline staffed by volunteers that offers crisis intervention services, telephone counseling, and referrals to youth and families who are struggling.⁵³⁴ The Texas Youth and Runaway Hotline was recently integrated into the state's Child Protective Services hotline in order to achieve administrative efficiencies.
- The Supervised Independent Living (SIL) program provides independent living services in a variety of settings for young adults who opt into extended foster care at ages 18 to 22. SIL settings include apartments, non-college dorms, college dorms, shared housing, and host homes with minimal supervision and case management, allowing clients to practice living independently and achieve self-sufficiency in a supportive environment.⁵³⁵ These services are available only to young people in the foster care system who choose to remain in care between their 18th and 22nd birthday.
- The Section 811 Project Rental Assistance Program provides project-based rental assistance for extremely low-income persons with disabilities linked with long-term services, including youth exiting foster care. The program is the result of a partnership between TDHCA, the Texas Health and Human Services Commission, and eligible multifamily properties. The Section 811 PRA program coordinates voluntary services and provides a choice of subsidized, integrated rental housing options. Youth with disabilities exiting foster care were selected as a target population because they often become homeless without long-term housing and comprehensive support services.⁵³⁶ TDHCA reported in 2016, however, that there has been limited participation among young people with foster care histories in the program.⁵³⁷

Unfortunately, there are not any state-level funding streams or programs specifically devoted to serving youth experiencing homelessness. Although STAR potentially provides funding to prevent youth homelessness, the program primarily focuses on working with youth dealing with family conflict, truancy, and misdemeanor offenses. In fact, in FY 2015, running away was the presenting issue for only 0.9 percent of clients served.⁵³⁸ Additionally, when runaways are not able to return home safely or enter Child Protective Services, STAR does not provide funding to shelter them or help them transition to self-sufficiency. Similarly, the Texas Youth Hotline does not actually provide services for young people who need shelter or longer-term housing, just referrals to community-based organizations and Child Protective Services.

Eligibility for SIL is based on foster care history and willingness to remain in and abide by the requirements of extended foster care, as well as on capacity. There is not currently capacity to serve all young people who opt into extended foster care, and young people who are homeless but who were not

533 DFPS, DATA BOOK PREVENTION AND EARLY INTERVENTION: YOUTH SERVED—FISCAL YEAR (2016), available at https://www.dfps.state.tx.us/About_DFPS/Data_Book/Prevention_and_Early_Intervention/Youth_Served-Fiscal_Year.asp

534 DFPS, Texas Youth Hotline, http://www.dfps.state.tx.us/Youth_Hotline/ (last visited Oct. 24, 2017).

535 DFPS, Supervised Independent Living, https://www.dfps.state.tx.us/Child_Protection/Fostering_Connections/supervised_independent_living.asp (last visited Oct. 24, 2017).

536 TDHCA, Section 811 Project Rental Assistance Program, <https://www.tdhca.state.tx.us/section-811-pra/> (last visited Oct. 24, 2017).

537 Interview with TDHCA official by TNOYS.

538 2015 DFPS DATA BOOK, *supra* note 314, at 125.

in the foster care system are not currently eligible for SIL services. Inadequate program capacity, due to low provider reimbursement rates, is a major limitation of the program. The eligibility requirement for foster care history may also be a limitation, given that research suggests many homeless young people have experienced past abuse or neglect and would have been eligible candidates for foster care services but nobody identified their needs and made a referral.

Some providers, especially those serving youth who age out of foster care, are able to creatively piece together funding from various sources in order to provide a continuum of services. One example of this is transition centers, which are essentially “one-stop shops” for youth and young adults with foster care histories to get support with various challenges related to the transition to adulthood. Transition centers draw funds from Preparation for Adult Living (PAL) contracts with DFPS, After Care contracts with DFPS, and from support from the Texas Workforce Commission and other government agencies and philanthropic organizations. Nevertheless, in most cases, this funding remains inadequate. For example, a number of transition centers have reported that they struggle to identify housing solutions for young clients who are homeless. In addition, there is only one transition center per region, which can serve as a barrier to access for those youth who live in geographically large areas and don't have access to transportation.

Local and Private Funding Sources

Because federal and state funding streams for youth experiencing homelessness are insufficient, most service providers rely on private funding to support youth and young adults experiencing homelessness. Service providers may also receive funding through their city or county, often via Community Development Block Grants or Community Services Block Grants; but such funding varies from place to place. In Austin there is an organization called the Religious Coalition to Assist the Homeless, which was created by an Austin City Council ordinance passed in 1996. Congregations from across the city pool resources that would otherwise go to city drainage fees (that are waived) to support emergency shelter beds, transitional housing, permanent supportive housing, and the services for the formerly homeless. Some of these funds support services for youth experiencing homelessness and young adults in Austin.⁵³⁹

Gap in Services and Geographic Coverage

While there is an array of mission-driven organizations across the State of Texas committed to serving homeless young people, their efforts are too often thwarted by insufficient and restrictive funding mechanisms. The resulting gaps in services and geographic coverage make it difficult for these organizations to serve the youth experiencing homelessness population in accordance with best practices. Despite it being a best practice to quickly provide housing for young people, only a small proportion of service providers in the survey referenced above that was completed by TNOYS said they offered services related to affordable housing (11 percent), rapid rehousing (13 percent), moms and babies programs (15 percent), and permanent supportive housing (18 percent). Case management (65 percent) and youth counseling (55 percent) were more common, with a slightly smaller share providing transitional living services (33 percent), family counseling (44 percent), and emergency shelters (45 percent).⁵⁴⁰

539 Interview by TNOYS with staff from the Religious Coalition to Assist the Homeless.

540 *Id.*

“We have so many who are really ready to take some steps towards self-sufficiency, but they’re working or going to college, and they’re living in a tent and their books get ruined because it rains. So having some place that would be safe and tailored to their needs until something more...we just really need a whole continuum of services for youth. Housing first is obviously the goal, but we’re not there yet because we don’t have enough housing. We need a continuum of services because there’s a continuum of needs as well.”

–Service provider in Austin

Programs serving youth experiencing homelessness are generally concentrated in larger cities such as Austin, Dallas, Houston, and San Antonio, which have larger populations of youth experiencing homelessness than smaller towns. But only about one-third of respondents, particularly those in suburban and large urban areas, indicated that community services are sufficient to meet the needs of referred youth experiencing homelessness. For the most part, unmet needs fell into the category of housing issues (46 percent), followed by health and mental issues (17 percent), and case management (9 percent).⁵⁴¹ Other conversations with providers support the findings from the survey. For example, a provider in Houston reported having nearly 300 young adults on a waitlist for housing in late 2016. Some of these young people may not have met eligibility criteria for Houston’s sole transitional living program. Many others simply could not obtain services due to its lack of capacity and could not obtain other housing due to lack of affordable housing options.

“I was basically flat out on the street. No shelters, not anything. Being in Humble, there’s no shelters around there. There’s no resources to go to. The only place that had shelters was the Houston area, but there was no way I could get down here because there’s no bus lines in Humble either. I had to call an outreach program eventually, and I thought it was a bit of a stretch, but they came out and got me.”

–C.F., Houston Youth

These responses also echo findings from the survey of homeless liaisons who recognize “supportive services outside of school” and “connection to housing support” as two of the top three needs of homeless students. The availability of housing and shelter services, however, was the number one issue identified as unavailable, with respondents indicating that there were no youth shelters (74 percent), transitional living programs (73 percent), homeless shelters (71 percent), or other housing programs (65 percent) available in their area for homeless students.⁵⁴² There was a particular dearth of services in rural

⁵⁴¹ *Id.*

⁵⁴² *Id.*

areas, with upwards of 93 percent of respondents indicating that there were no known youth shelters or transitional living programs in their area, and nearly 90 percent reporting there were no known homeless shelters in their community at all.⁵⁴³

“There’s always a waitlist. Very rarely are there situations where a family can call me and say I need a place to stay, and I can say call this place and you’ll have a place to stay tonight. Which is a big frustration I experience and a lot of other organizations experience for their clients as well.”

**–Homeless liaison
in the Austin area**

Responses from the *Youth Count Texas!* survey further confirm which services are lacking or difficult to access. Services most commonly identified as unavailable were dental care, followed by government benefits, transportation, employment services, case management, and permanent housing.⁵⁴⁴ Additionally, when youth experiencing homelessness who were surveyed as part of *Youth Count Texas!* were asked what they would change if they could change one rule or law, the overwhelming response was that they would open more shelters and/or increase access to housing.⁵⁴⁵

Despite urban and suburban service providers offering a wider variety of services than their rural counterparts, these providers indicated that they had more difficulty serving all youth in need in their service area. For instance, only 16 percent of service providers from large urban areas and 11 percent from suburban areas claimed to be able to serve all youth.⁵⁴⁶ Conversely, 52 percent and 63 percent, respectively, stated that they have *never* been able to serve all youth.⁵⁴⁷ Linked to this finding, 17 percent of respondents in each area stated that they must often turn down clients, compared to just 5 percent in rural areas and 6 percent in small urban areas.⁵⁴⁸ Similarly, 32 percent (large urban) and 29 percent (suburban) of providers noted having a waitlist, compared to just 6 percent in rural areas and 14 percent in small urban areas.⁵⁴⁹

The extreme lack of resources reserved for young people experiencing homelessness that is reported by nearly every stakeholder engaged in serving them is exacerbated by the high, and possibly increasing, levels of need of the young people themselves. One provider of emergency shelter services reflected, “We’re at capacity because we’re seeing even more emotionally disturbed children and when that happens we have so many [more] staff to child ratio. With our limited staff, we’re having to say we’re at capacity even though maybe we have an empty toddler bed, an empty infant bed and another empty bed.”

543 *Id.*

544 NARENDORF, *supra* note 4.

545 *Id.*

546 GENDRON ET AL., *supra* note 42.

547 *Id.*

548 *Id.*

549 *Id.*

Conclusion & Policy Recommendations

Despite recent increased federal and state-level interest in understanding the needs of youth experiencing homelessness, there is still significant work needed in order to ensure availability and sustainability of a full continuum of services across Texas. The following findings and recommendations identify opportunities for policymakers to better support this vulnerable but resilient population.

FINDING: Lack of funding has severely restricted the development and sustainability of a robust continuum of services to address youth homelessness. As a result, Texas lacks a clear and sustainable continuum of services that are appropriate for youth who are homeless or at-risk.

Policy Recommendation: The Texas Legislature should create dedicated funding streams to support services for youth and young adults who are experiencing homelessness and/or who are at-risk within both the state child welfare and housing agencies. This proposed funding setup would mirror the federal funding landscape and reflect that youth homelessness is both a child welfare issue that involves the family and an economic or affordable housing issue.

Some of these funding streams could be created by expanding programs that exist already. Texas should work to identify existing funding streams that may be able to fund services for youth who are homeless, including the following:

- **Increase funding for the Services to At-Risk Youth (STAR) program in the PEI Division at DFPS and better prioritize prevention of youth homelessness, as well as intervention for runaways who are homeless as a STAR service.** STAR has the potential to be used to help bring stability for youth who are couch surfing, doubled up, or in other unstable living arrangements that qualify as homelessness or lead to a high risk of homelessness. STAR also has the potential to reduce homelessness by resolving family conflict and to reunite runaways who are already homeless with their families and return them to their own homes safely.

Many STAR providers are already serving youth who are homeless or at risk, but policy changes could help ensure that the program is used to its potential. For example, STAR providers could be required to articulate a plan to build or strengthen relationships with homeless liaisons in the school districts they serve, in order to obtain a STAR contract. PEI could re-evaluate the billing structure for STAR contracts in order to ensure that it adequately reimburses providers for costs associated with respite care when it is provided to a runaway or youth in crisis who cannot immediately return home safely. PEI could also strengthen outreach regarding the program, with a focus on the services available to youth who are homeless or at risk of homelessness.

- **Increase funding for the Homeless Housing and Services Program (HHSP) housed at TDHCA and earmark the increase to support services designed for youth experiencing homelessness and young adults.** This program is funded by General Revenue, which means there are no strings attached, such as unrealistic match requirements. HHSP funds could therefore be easily accessible for the providers who need it most. TDHCA currently administers HHSP funds through the eight largest Texas cities, which have the highest rates of youth homelessness. Earmarking HHSP funds for youth services would provide cities with the resources and autonomy to fund programs to fill or prevent critical gaps in their continuum of services for homeless young people.

- **Recognize that homeless young people are often victims of crime and guarantee their eligibility for Victims of Crime Assistance (VOCA) funds available through the Office of the Governor.** Young people who are in foster care are considered to be victims of crime and are eligible for services supported by VOCA funds. Young people who are homeless often come from similar traumatic backgrounds as well as face additional trauma and violence on the street, making them victims of crime and potentially eligible to benefit from VOCA funds.
- **Continue to engage providers who serve youth who are homeless and work to develop a continuum of services for minors who are victims of domestic sex trafficking, as well as fund programs serving youth experiencing homelessness with trafficking dollars that are available.** Young people who are homeless are at high risk for trafficking, and trafficking victims often end up homeless or are homeless. The Child Sex Trafficking Team within the Office of the Governor has done an outstanding job of partnering with youth service organizations to develop a continuum of care for these victims of domestic sex trafficking and should continue in this work.

Policy Recommendation: Establish a statewide task force that is specifically charged with identifying funding strategies and opportunities to support and sustain a full continuum of quality services for young people who are experiencing homelessness and who are at risk.

FINDING: There are some strong programs in place in Texas to support services for youth who age out of foster care. These programs are underfunded. Furthermore, youth experiencing homelessness, who may have similar histories of abuse, neglect, and trauma, and who may be without a parent or legal guardian, are not eligible for many of these services.

Policy Recommendation: Texas should fully fund successful and promising programs for young people who age out of foster care, in order to prevent their homelessness. This includes fully funding the Supervised Independent Living (SIL) program for young people who age out of foster care. There is currently a shortage of SIL placements due to the low reimbursement rate. Many providers have expressed that they would provide SIL services if they could afford to do so. Increased funding could also provide options for SIL or transitional living programs to work with youth who struggle with independence due to mental health and/or substance use challenges. Texas should also expand the type of placements available to youth who age out and stay in extended care by both cultivating foster homes to continue housing these youth and by clearing up state regulations that make it difficult for providers to house young adults in extended foster care if they are housing other young people who are minors.

Policy Recommendation: Texas should also build on successful and promising programs for young people who age out of foster care by expanding the eligibility criteria to include certain youth and young adults who are homeless and on their own. For example, lawmakers should allow young people who are homeless and who have a documented history of abuse or neglect to opt in to an SIL program without opting into foster care. The Legislature should appropriate funding to reimburse SIL providers for serving these young people, for whom a provider is not currently eligible for the reimbursement rate.

Texas should also consider increasing funding for benefits offered by transition centers, which are “one-stop shops” to serve youth who age out of foster care, and expanding eligibility criteria for services through those centers to include homelessness. Agencies such as the Texas Workforce Commission that help support transition centers should make youth experiencing homelessness a priority population, as well as foster youth.

FINDING: It is unclear at both the state and federal levels who is responsible for addressing youth homelessness. This ambiguity has resulted in a lack of leadership and accountability, conflicting regulations and expectations, and other challenges that have limited the success of strategies to end youth homelessness.

Policy Recommendation: Adopt one clear definition of youth homelessness. The federal government should establish one clear definition of homelessness and utilize that definition for all of its programs. The State of Texas should honor the federal definition.

Policy Recommendation: Require state agencies to show leadership to address youth homelessness. The Texas Legislature should mandate that both DFPS and TDHCA demonstrate leadership in the area of addressing youth homelessness and that the two agencies work together. This would be similar to the federal structure for addressing youth homelessness, in which ACF and HUD each offer their own programs but work together.

Policy Recommendation: Align Residential Child Care Licensing Standards, state law, and federal requirements and expectations. The Texas Legislature should review residential child care licensing standards and the Texas Family Code in order to determine which policies and laws may reduce barriers for providers in serving youth and young adults who are homeless. The Legislature should also determine which policies and laws are aligned with federal requirements and then call on HHSC to rewrite challenging standards in order to facilitate the best services for young people and align state and federal requirements and expectations.

FINDING: There is significant research available on best practices for serving young people experiencing homelessness. There are also many promising and innovative nonprofit programs serving youth who are homeless in Texas. Additionally, communities in Texas and across the country have the opportunity to learn even more about best practices for serving youth who are homeless through HUD's Youth Homelessness Demonstration Program.

Policy Recommendation: Identify and build on lessons learned about ending youth homelessness from the research and work that has been done already as well as from the YHDP grant program. State and federal policymakers and other stakeholders should study the research that has been conducted already on best practices for serving young people who are homeless. State and federal policymakers, CoCs, providers, and other stakeholders should also look to the work that is currently being completed under HUD's YHDP in order to understand how communities can come together to effectively tackle youth homelessness. Additionally, state and federal policymakers should continue to invest in the evaluation of programs that serve youth experiencing homelessness, in order to measure and grow their effectiveness.

Conclusion and Cross-System Policy Recommendations

While each chapter's focus leads to a specific set of findings and recommendations, when we pull back and consider the data and research as a whole, we find several themes. Based on the cross-system data we were able to analyze for this report, there is simply no question that **homelessness is a significant problem impacting Texas' youth**. While we need more and better data, the data is not needed to make the case that too many young Texans experience homelessness—rather, the data are important in helping us understand the best way to reach youth experiencing homelessness and develop appropriate prevention and intervention strategies.

It is also clear that youth **homelessness is not simply an economic or housing issue, but is often a family issue**. When a 15-year-old is on the streets, the problem is not caused by a lack of affordable housing—but more likely a familial issue, such as family conflict or poverty-related trauma. While Texas has a prevention infrastructure in place, the state is not capitalizing on opportunities to prevent youth homelessness by ensuring that the problems that result in a youth running or getting pushed out of a home are addressed before conflict or crisis results in homelessness. At the federal level, though the recent push to make the Department of Housing and Urban Development responsible for leading the charge to address youth homelessness looks promising in terms of the potential to bring new resources and housing supports for youth who are homeless, it is critical that child welfare stakeholders maintain engaged in the provision of services and planning and decision-making processes. The issue of youth homelessness will not be addressed with housing alone.

Our cross-systems analysis also shows that **youth homelessness touches many systems**, including education, child welfare, juvenile justice, and health and mental health. Solutions should draw upon the strengths of each system, while recognizing their shortfalls. For example, **schools are uniquely positioned to identify students who are homeless or at-risk and to serve as a resource for youth experiencing homelessness**—and capacity should be commensurate with the potential for the benefits this system offers. Many of the young people we interviewed had positive school experiences, and data overwhelmingly shows that youth who ran away were still in school before they left home, and that many unaccompanied youth continue to attend school even after they become homeless.

Over the course of our research, it struck us that **whether or not a youth experiencing homelessness enters the child welfare or juvenile justice system seems arbitrary**, and may often depend on where the youth lives, and on local priorities and capacity. Yet, while each system carries risks for poor outcomes, each also offers benefits. While system-involvement may not be the first or best option, there are beneficial elements of each that could be replicated in policy solutions for youth experiencing homelessness in programs outside the CPS and juvenile systems. For example, although the child welfare system has major flaws that contribute to homelessness among young people who age out of foster care, it also offers critical supports that may be of value to young people who are homeless and who have experienced similar abuse, neglect, and other trauma but who are not system-involved.

We were also struck by the lack of ownership, accountability, and strategic coordination among state government agencies and stakeholders for addressing youth homelessness. As a result, despite best efforts among non-profit providers, Texas lacks an effective and sustainable continuum of services for youth experiencing homelessness. There is no state agency responsible for youth who are homeless in Texas and no agency that has stepped into the role. In contrast, at the federal level, both the child welfare and housing agencies have taken leadership roles.

Although a number of government agencies at the federal level are demonstrating interest in addressing the issue of youth homelessness, that coordination is not without its limitations or challenges. **For example, the failure to agree on a consistent definition of youth homelessness compounds problems** associated with lack of ownership.

Finally, **the glaring problem that we saw across systems is that services for youth experiencing homelessness are severely and consistently underfunded.** Texas does not dedicate any state funding to meet the needs of unaccompanied youth experiencing homelessness. Federal funding is insufficient and with the exception of extremely limited RHY funding, has not traditionally been designed to meet youths' needs. Existing funding is disjointed, which results in disjointed services for youth. **Yet, the costs of not intervening are high:** child welfare, juvenile justice, and emergency rooms are expensive. **Prevention and community-based alternatives are a more effective and less costly alternative.**

Overarching Policy Recommendations

While each chapter addresses recommendations consistent with the chapter's focus, there are a number of cross-system recommendations that emerge, based on the conclusions discussed above.

Policy Recommendation: Texas should establish a statewide task force⁵⁵⁰ that is jointly led by DFPS and TDHCA, and specifically charged with:

- identifying funding strategies and opportunities to support and sustain a full continuum of quality services for young people who are experiencing homelessness and who are at risk;
- identifying and finding solutions to address issues in child-serving systems that may operate to push young people into homelessness or place them at higher risk of homelessness; and
- identifying and building upon the strengths of child-serving systems to address homelessness or youth who are at risk of homelessness.

550 While this could fall within the scope of the Texas Interagency Council for the Homeless (TICH), the child welfare issues raised by issues related to unaccompanied youth experiencing homelessness justify a separate task force jointly led by DFPS.

Policy Recommendation: The Texas Legislature should create dedicated funding streams to support services for youth and young adults who are experiencing homelessness and/or who are at-risk within both the state child welfare and housing agencies. This proposed funding setup would mirror the federal funding landscape and reflect that youth homelessness is both a child welfare issue that involves the family and an affordable housing issue.

Some of these funding streams could be created by expanding programs that exist already. Texas should work to identify existing funding streams that may be able to fund services for youth who are homeless.

Policy Recommendation: The state should invest in strengthening prevention and early intervention services including family counseling services and parenting skills. These services are proven to keep families together safely and prevent causes of youth homelessness, including running away and being kicked out.

Policy Recommendation: Texas should invest in initiatives that would raise public awareness about the services that exist, modeling a campaign after successful public health campaigns. Texas should also develop a directory with information on services for young people who are homeless or at-risk, including youth-appropriate shelter, street outreach, and transitional living services, as well as family crisis intervention services.

Policy Recommendation: Efforts addressing youth homelessness should include child welfare stakeholders, as well as stakeholders from other systems that can provide appropriate supports and services in keeping with the best practices outlined in this report.

Policy Recommendation: Benefits that serve to prevent homelessness for juvenile or CPS-involved youth, like SIL and education benefits, should be explored as potential models for meeting youths' needs outside these systems in an effort to prevent homelessness.

Policy Recommendation: Youth-serving systems, including schools, should coordinate and cooperate in point-in-time counts that provide information about the extent and contributors of youth homelessness.

Educational Outcomes for Accompanied & Unaccompanied Students Methodology

Data Collection

Beginning in June 2016, Texas Appleseed requested data from the Texas Education Agency for every school district in Texas. Data was requested and obtained primarily through Open Records Requests pursuant to the Texas Public Information Act. In total, we requested statewide-level spreadsheets from academic year 2012-2013 through academic year 2014-2015, disaggregated by district for the following topics:

- Total number of homeless and non-homeless youth
- Total number of disciplinary actions and reasons for disciplinary actions received by homeless and non-homeless youth
- Total number of homeless and non-homeless dropouts
- Total number of homeless and non-homeless youth who repeated a grade
- Nighttime residency of unaccompanied homeless youth

We also asked that data be broken down by key demographic characteristics, including:

- Accompaniment (i.e., whether a homeless youth was accompanied or not)
- Race/ethnicity
- Gender
- Grade level
- Special education status

Much of the data was provided free of cost. However, wherever necessary and within reason, Texas Appleseed paid for modest processing expenses such as compiling or programming data.

Data Processing and Analysis

TEA redacts data points that reflect fewer than five students, thus the numbers presented in this report are conservative estimates. All analyses were conducted assuming all redacted cells were the minimum possible value (1). Analyses were conducted in Excel and Google Maps.

Youth Homelessness and the Texas Foster Care System Methodology

Data Collection and Analysis

In August 2016, Texas Appleseed and Texas Network of Youth Services sent an open records request and related payment to DFPS. As of October 2017, the agency still had not fulfilled the request or provided information indicating when it would be fulfilled.

Instead, data were pulled directly from the DFPS' own Annual Runaway and Human Trafficking Report, Fiscal Year 2016 (2017) or downloaded from various years of the DFPS Annual Report and Data Book Archive.¹ Any analyses were conducted in Excel.

¹ See DFPS Annual Report & Data Book Archive, https://www.dfps.state.tx.us/About_DFPS/Annual_Report/archive.asp

Intersections between Youth Homelessness and the Juvenile or Criminal Justice Systems Methodology

Data Collection and Analysis

Beginning in August 2016, Texas Appleseed requested data from the Texas Juvenile Justice Department. Data was requested and obtained through Open Records Requests pursuant to the Texas Public Information Act. All of the data were provided free of charge. Specifically, we requested spreadsheets of statewide-level data from fiscal year 2013 through fiscal year 2015, disaggregated by county regarding:

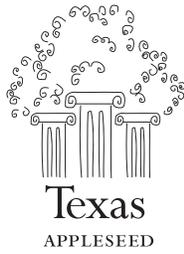
- The total number of runaway cases in the state
- The total number of youth referred for runaway
- The total number of runaway referrals
- The total number of youth referred for only a runaway offense and number of youth referred for runaway with additional offenses
- The total number of offenses of youth referred for runaway with additional offenses
- The total number of youth referred for runaway and detained
- In counties with greater than 50 youth referred for runaway, the total number of runaway youth referred broken down by prior referrals (i.e., whether or not a youth had a runaway referral previously)

Additionally, in counties with greater than 50 youth referred for runaway, we also asked for data to be broken down by key demographic characteristics, such as:

- Race/ethnicity
- Gender
- Age
- Referral source
- School status

Population data was taken from the Office of Juvenile Justice and Delinquency Prevention juvenile population profiles.² Analyses were conducted in Excel.

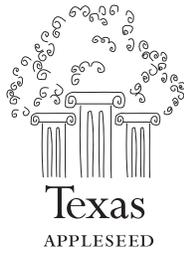
2 National Center for Health Statistics (2017). *Vintage 2016 postcensal estimates of the resident population of the United States (April 1, 2010, July 1, 2010-July 1, 2016), by year, county, single-year of age (0, 1, 2, ..., 85 years and over), bridged race, Hispanic origin, and sex*. Prepared under a collaborative arrangement with the U.S. Census Bureau. Available online from http://www.cdc.gov/nchs/nvss/bridged_race.htm as of June 26, 2017, following release by the U.S. Census Bureau of the unbridged Vintage 2016 postcensal estimates by 5-year age groups. [Retrieved 7/8/2017]. Available at: https://www.ojjdp.gov/ojstatbb/ezapop/asp/profile_selection.asp



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