

Missed Opportunities in Youth Pathways Through Homelessness

March 2019

The sixth in a series of Research-to-Impact briefs by Chapin Hall at the University of Chicago on understanding and addressing youth homelessness.

Across any 12-month period, more than 4.1 million young people ages 13-25 in the U.S. experience some form of homelessness. Why? The nation's ability to end youth homelessness depends on answering that question. By conducting interviews with 215 youth in five distinct counties across the U.S., we can report their insights into the diverse causes and conditions of housing instability. The findings show that young people experience significant adversity, family disruption, and interpersonal trauma both before and during their homelessness. Factors include, but extend far beyond, each youth's individual characteristics. This brief uses findings to suggest revisions within the [Runaway and Homeless Youth Program Authorizing Legislation](#) (RHYA). By centering youth voices, we highlight countless missed opportunities to mobilize and strengthen existing services outlined within the RHYA.

EXECUTIVE SUMMARY

Voices of Youth: Baylee's Story

Baylee, a 17-year-old multiracial (Latina-White) female living in San Diego, was one of 215 young people who participated in Voices of Youth Count in-depth interviews.¹ Baylee's homelessness started at age 2 when her mom and two older sisters became homeless. Baylee described these childhood years as "mov[ing] around a lot" between hotels, shelters, apartments of friends, and family. Instability marked many areas of Baylee's early childhood. She recalled attending "at least 15 elementary schools" and having "missed the fourth grade entirely." She attributed this instability to her mother's poor health and, as a result, her mom's inability to hold a steady job.

When Baylee was 11, her mom committed suicide, and Baylee entered foster care. She lived in a group home and two foster homes, which she described as abusive. Throughout, she contemplated suicide. It took two years for the court to approve an out-of-state placement with her dad, stepmother, and stepsiblings. Once there, she became the target of ongoing conflict and arguments. Often kicked out, she would temporarily stay with other family members. Baylee increasingly struggled with her mental health and was hospitalized multiple times for attempting suicide. Upon discharge, her required "safety plan" included talking with her dad. Baylee explained, "Because of my mental health issues, like I told my dad that I needed to talk to him, and he was like, 'No!'" Feeling rejected, she left home. Her dad told her to never return. She never did.

Baylee first stayed in a hotel with a friend whose family was also homeless, but then she moved to an emergency shelter for minors. However, she was turned away after her dad refused to sign the required paperwork. Baylee then began to exchange sex and "do stuff" to pay for a hotel room. Not wanting this to continue and afraid of sleeping outside on the streets,

she returned to the emergency shelter at 2:30 a.m. They let her in for the night, and the following morning, the shelter convinced Baylee's father to sign for her to stay. When we met Baylee, her 21-day time limit at the shelter (a federally mandated time limit) was approaching. She was eagerly awaiting acceptance into Job Corps. But as a minor, she needed a 2-week extension in order to remain at the shelter and avoid placement into foster care for 6 months until she turned 18. Baylee felt optimistic that through Job Corps a brighter future was on her horizon.

Voices of Youth Count: Youth Pathways Through Homelessness

This Research-to-Impact brief is the sixth in a series and draws exclusively on the in-depth interview (IDI) component from Voices of Youth Count. Like Baylee, the 215 young people we interviewed across five diverse U.S. counties shared stories of instability—their *pathways through homelessness*—that highlighted missed opportunities for prevention and intervention. Insights point to critical areas for improvement: the need for multilevel supports for individuals and families, the importance of peers for building connections to trustworthy spaces and resources, and the identification of specific changes that need to be made to service systems. For example, Baylee lacked various supports as she moved among family shelters, a youth emergency shelter, a hotel, psychiatric hospitalizations, schools, couch surfing with friends and family, and child welfare systems in two states. This brief centers the insights and perspectives of young people like Baylee whose contributions to our society are profoundly inhibited. Their lives are needlessly constrained by the many opportunities we miss for protecting and fostering their healthy development and well-being.

1. The five counties where we conducted interviews were located in California, Illinois, Pennsylvania, Texas, and Washington.

Our findings support the unquestionable urgency of meeting the needs of young people for permanent housing and safety. But these findings also emphasize that this period of time is developmentally significant and, therefore, developmental awareness must directly inform any strategy for addressing homelessness.

These youths' stories highlight the consequences of chronic interpersonal trauma and loss, and the critical importance of safe emergency shelters and transitional housing. Their stories also show the urgent need to help youth and their families heal the adversity and trauma that preceded and persisted throughout their unaccompanied homelessness. This brief elevates the *voices of youth* as a call to adults to rethink and redouble their efforts in ending youth homelessness. We need to see and directly address the challenges our young people endure and have endured within their families and communities from very early in their lives.

Key Findings - Overview

All 215 young people we interviewed had unique stories of housing instability. We present several key findings that recognize this diversity alongside shared experiences of homelessness:

- Young people link the beginning of their homelessness to earlier disruptions of family and home, including family homelessness and entrance into foster care.
- Young people name multilevel factors—critical conditions—that shaped how pathways through homelessness unfolded.
- Youths' pathways through homelessness reflect geographic mobility (within city/town, county, state, multistate, multination) and fluidity in sleeping arrangements (shelters, couch surfing, streets, etc.).

- Youth pathways through homelessness are also characterized by significant personal losses; 35% of youth experienced the death of at least one parent or primary caregiver.

Moving Toward Solutions

Listening to these first-person accounts challenges us to reconsider when prevention and interventions would be most effective. Their stories underscore that homelessness is symptomatic of much larger and enduring challenges in our society, systems, and institutions, and, consequently, in families who often navigate these challenges on their own. Our findings call for solutions and service systems that are responsive to the level of mobility and fluidity youth experience in their living situations, and the relational complexity youth navigate with family, broadly defined. We emphasize the importance of trauma-informed supports, especially services that are attuned to the developmental needs of youth for belonging and identity through healthy relationships. These social dimensions of well-being should be viewed as essential, rather than supplemental, to the work of ending youth homelessness.

In this brief, we outline the findings and then connect those findings to recommended revisions to the federal Runaway and Homeless Youth Act (RHYA), which authorizes community-based temporary shelter and care, and specifically targets services for minors. Revising RHYA is likely to offer the most direct means to impact the programs and services that are intended to support young people like those who we interviewed. We provide specific revisions to the law via live links. Beyond our recommendations, additional opportunities for change will likely expand outward to include other statutes and multiple federal agencies and program areas. These recommendations are examples, and we invite debate that can strengthen what we propose. We look forward to a vigorous dialogue.

Voices of Youth Count: In-Depth interviews

Voices of Youth Count is a national, multicomponent research and policy initiative designed to have direct impact on our efforts to interrupt and end unaccompanied homelessness among youth and young adults. This brief focuses on a subsection of the IDI component's findings from interviews with 215 young people, ages 13-25, in five U.S. counties: Cook County, Illinois; Philadelphia County, Pennsylvania; San Diego County, California; Travis County, Texas; and Walla Walla County, Washington.

The IDI component is the largest qualitative study of its kind on youth homelessness in the U.S. It is novel in its narrative mixed-method design, national and regionally diverse sample, and breadth of data collected. The purpose of the IDI component was to capture a broad range of youth perspectives and experiences of housing instability and homelessness. We collected three kinds of data from 215 youth who were currently unstably housed: in-depth narrative interviews, housing timelines (exploring all the places and people with whom youth had stayed/slept), and background surveys. This brief shares a portion of the findings. A more comprehensive reporting of the IDI findings, study design, and methods can be found in the component report on the [Voices of Youth Count](#) website and in published journal articles (Samuels, Cerven, Curry, & Robinson, 2018; Samuels, Cerven, Robinson & Curry, in press).

FINDINGS: EXPLORING YOUTH PATHWAYS THROUGH HOMELESSNESS

This brief takes readers on a journey through four distinct but deeply interconnected findings. We start that journey by sharing youth insights about where their pathways through homelessness began. We then explore youth-identified factors that shaped how these pathways unfolded. We label these factors “critical conditions”—youth defined them as significant drivers of the changes and instability they navigated over time. Third, we broaden our focus to explore different kinds of instability across the pathways and look directly at geographic mobility (by city, county, state, nation, multi-nation) and fluidity in the use of different types of sleeping arrangements (couch surfing, streets, and shelters). We conclude by highlighting the presence of loss as both a consequence and a cause of chronic instability. In particular, we show that the death of parents and caregivers were significant losses experienced among youth we interviewed.

Our findings emphasize how early beginnings of instability and other critical conditions work in combination to fuel tipping points into more chronic experiences of homelessness. To illustrate this, we visually map two youth's pathways through homelessness. These visuals bring into focus missed opportunities for early prevention and for mobilizing existing

resources to intervene during moments of crisis. Ending youth homelessness is possible if we catch critical conditions much earlier than we do now, before they become tipping points into chronic homelessness. We suggest direct changes to the RHYA's practices and policies based on insights from young people in our study. By learning from them, we can identify unintended effects of the law, eliminate harmful or ineffective practices or policies, and provide much-needed supports.

Finding 1. Young people link the beginning of their homelessness to early family instability and disruptions of home, including entrance into foster care and family homelessness

The age at which participants first experienced unaccompanied homelessness varied, but occurred largely in the teenage years. Over 50% first experienced homelessness between the ages of 16 and 18, and another 21% became homeless during early adolescence, ages 13-15. Only 1% of youth reported a first-time experience of homelessness after the age of 21. Yet our interviews suggest the *beginnings* of their housing instability occurred far earlier than these statistics imply.

All interviews with youth began with one question: **“If you were to think of your housing instability as a story, where does your story begin?”** The participants’ answers sometimes mirrored research that consistently finds chronic family conflict at the genesis of youth homelessness (Hyde, 2005; Zufferey, 2017). Our study supports those findings. **Most youth said that their first spell of homelessness grew out of volatile or unsafe family contexts that, over time, erupted into parental rejection, getting kicked out, or fleeing family conflict.** Below we highlight two additional themes that youth identified as the beginning of their pathways through homelessness. Both involve early instability and disruptions within their homes and families of origin.

Entrance into Foster Care

Ninety-four of the 215 youth we interviewed had foster care histories. Forty-four percent identified *entrance* into foster care as the beginning of their housing instability. Entrance into foster care is often considered a move toward stability; however, the youth we spoke with experienced it quite differently. Foster care placement meant chronic relationship disruption as youth cycled through various family systems, including in and out of their own families of origin. In the long term, they felt cut off from resources that stable family memberships provide in times of need across one’s life course. For example, Angel, now 22, described being removed from home when he was a toddler. He blamed entering foster care and the prolonged

disconnection from his siblings as causing the loss of family support and his resulting homelessness. “(My story) would begin when I was three years old. . . I was taken away from my mom, my dad was already in prison,” Angel explained. “And they (the child welfare system) made it even worse by keeping me away from my sisters and brothers. . . I would try to reach out to my sisters and brothers and they wouldn’t even help me or. . . share with me their apartment because I wasn’t considered a brother. . . so I had to go through homelessness because of the fact that I didn’t have that relationship with them.” Angel eventually aged out of foster care into homelessness.

Research has clearly identified youth who age out of foster care as a population at risk for homelessness; 23% of all youth in our study had aged out of foster care. But young people in our study who did not age-out and were adopted (12%) or reunified (12%) also reported being removed from their homes of origin as critical to their experience of homelessness. For youth with any foster care background, being removed from home and placed into “new” family systems did not always create a sense of security or belonging. This was true for Ciara, now 22, who entered foster care at birth and was adopted at age 3. Ironically, Ciara noted that her adoption was where her homelessness actually began, “My story? . . . I was adopted at age 3. . . that’s kind of where it starts because I didn’t fit in.”

Four Major Findings

Finding 1. Young people link the beginning of their homelessness to early family instability and disruptions of home including entrance into foster care and family homelessness

Finding 2. Young people name multilevel factors—critical conditions—that shaped how pathways through homelessness unfolded

Finding 3. Youth’s pathways through homelessness reflect geographic mobility and fluidity in sleeping arrangements

Finding 4. Youth pathways through homelessness are also characterized by significant personal losses; 35% of youth experienced the death of at least one parent or primary caregiver

Early Family Homelessness

Nearly one-quarter of participants (24%) experienced family homelessness with their parents. Youth attributed their own unaccompanied homelessness to these earlier experiences of instability. Young people told stories of family homelessness caused by their parents' struggles with mental or physical health, addiction, infidelity, fleeing domestic violence, or from staying attached to an unstable romantic partner. Alex, age 17, revealed his belief that his mother's relationships with men caused their homelessness. "Ever since my mom started cheatin' on my dad. . . we've been like movin' like all over the place. . . livin' with my mom's (male) friends and. . . out of the car. . . it's always been like that kinda thing, you know?"

Other prominent themes included a parent's combined substance use, chronic unemployment, and poverty. This was true for Bobby, age 17, who was homeless with his mom and siblings at the age of 6. Bobby's family stayed in shelters and couch surfed with friends and even found a place paid for by his grandparents. But they ultimately were evicted. "We lost the house. . . .My mom's a single parent, so she's always like struggled just to like keep the places... she always had problems with drugs. . .," Bobby said. Now, the family is split up and Bobby rotates between youth shelters and couch surfing on his own.

Taken together, entrance into foster care and family homelessness disrupted family relationships, was tied to earlier struggles with youth's parents, and ultimately reduced the reliability of a stable physical home space. Instability and loss of these relationships became a familiar normal, rather than atypical, condition that continued across their journeys through homelessness.

Finding 2. Young people name multilevel factors—critical conditions—that shaped how their pathways through homelessness unfolded

During their interviews, we also asked youth what caused them to leave or get kicked out of a seemingly stable housing situation, to avoid finding a place to stay, and what helped or threatened achieving housing stability. Youth identified multilevel drivers of their experiences. We call them "critical conditions" and categorize them into three groupings: **personal** (individual-level factors), **relational** (peer- and family-level factors), and **structural** (factors related to youth's external environments, including service systems and communities). These conditions are critical because they caused youth to cycle in and out of varied sleeping arrangements as well as to move within and beyond their neighborhoods and hometowns. They also represent the broader context in which youth experienced their homelessness. Below, we define, color code, and identify the most prominent themes within each. These colors will be used later to map the critical conditions driving two youth's pathways.

Personal Critical Conditions

Personal level critical conditions (colored **purple**) refer to positive and negative individual attributes and characteristics of the youth that they believed shaped personal pathways through homelessness. **Almost one in every three youth (31%) mentioned navigating "mental health issues." Some named substance use (21%) as a personal barrier to accessing housing or the cause of losing it.** But youth also indicated that their personalities, preferences, temperaments, and personal beliefs and logics about life, relationships, and resources were critical to their pathways. **In fact, 51% identified their own preferences for being self-reliant, not "being a burden," preferring to self-isolate, or having "too much pride" as playing a role in how pathways unfolded.**

These personal-level conditions often caused youth to reject or avoid using a service or resource. This was true for Angel, who explained, “I didn’t enroll in a shelter. I had too much pride. I just slept on the streets.” Sometimes youth talked about feeling distrustful of adults or people in general. This personal resilience and self-protective skill, while often necessary, also constrained them within certain types of sleeping arrangement. As Kyle, age 17, explained his logic, “I never tried to find anyone as a support because people have their own agendas, and I understand that, and I can do things alone.”

Relational Critical Conditions

We use the term “relational” (and the color **orange**) to categorize two themes tied to the social connections youth have with other people in their environments: peers (including intimate partners) and family. Peers play both positive and negative roles in the lives of these youth. On the positive side, **peers are the primary access point for resources and supports. Peers outranked street outreach, helplines, health care providers, police, schools, and family combined as youths’ primary link to informal housing.** Peers were the second most frequently named portal to formal resources, including housing, shelters, transitional living, and employment. And, despite common understandings of peers as facilitating drug use and crime, less than 1% of youth indicated peers were initial portals into illegal activity, including sex work (.02%) and drug use and sales (.08%). Instead, peers and intimate partners more often featured in youth stories as their rescuers, protectors, family attachments, and sources of mutual support. On the negative side, however, 36% of youth also named relationships with peers as the reason why they became or stayed homeless, got kicked out of a shelter, or lost an informal living arrangement. **If pushed to choose, youth consistently prioritized retaining important relationships with peers over securing their access to formal resources, including housing.**

The second relational grouping captures the positive and negative roles of family. Although young people defined family broadly, most often they named parents and families of origin when discussing “family” critical to

their housing instability. Chronic family conflict (for example, volatile verbal fights, name calling, threats of violence, hostility) featured across all youths’ stories. Additionally, 30% of young people believed their homelessness was directly shaped by growing up in families mired in cycles of physical abuse/neglect/violence. Some youth described parents who struggled with addictions (26%) or unaddressed mental health conditions (9%), or both. **Altogether, chronic family conflict was the most frequently mentioned tipping point that caused the loss of housing.**

The second most common family experience among young people was that of family-based stigma and discrimination. **One hundred youth, 46% of our sample, experienced discrimination and stigma directly from family members while living at home. Youth who reported the highest rates included transgender youth (67%); lesbian, gay, bisexual, queer, or asexual (LGBQA) youth, (65%); and multiracial youth (51%).** This family-based discrimination did not always come from a biological parent. As Juan, age 22, explains, his mother accepted his sexuality, but her boyfriend did not, “(M)y mother. . . her partner didn’t accept the fact that I was gay. I was able to stay with my mom, but it was more. . . her partner didn’t accept me being gay. . . my mom just, like, agreed with him.” Similarly, 17% specifically described situations where they were rejected by their parents and denied parental help because, like Juan, a parent chose to protect a relationship with a partner over a relationship with their child.

Structural Critical Conditions

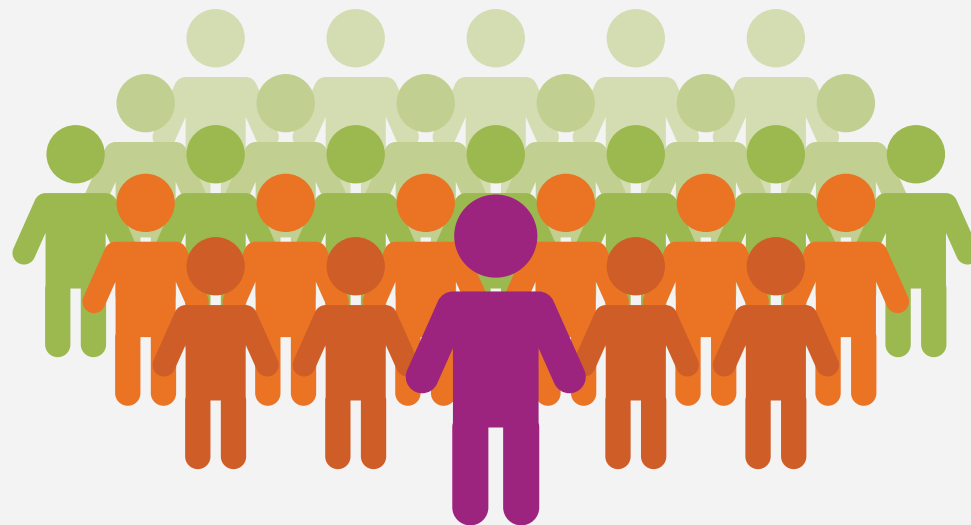
Structural themes (**green**) speak to conditions in youth’s external environments, including policies and agency practices, that young people believed contributed to their experiences of homelessness. During interviews, 30% of youth identified agency staff as positive critical portals to other formal and much-needed resources. But, once they were receiving services, especially housing, like shelters and transitional living, youth identified practices and policies that felt developmentally out of sync and thus “controlling,” shelters that were unsafe or unsanitary, and policies that caused or required them to disconnect from important and valued relationships.

LGBQA and transgender-identified youth also described wanting assurances that an organization or shelter was “geared for LGBT people.” If it was not, they would often reject it. Similarly, youth reported the importance of knowing if a community or neighborhood was (un)safe or (un)welcoming. However, for many youth, their communities were not safe or welcoming. In fact, 44% of young people indicated they had experienced stigma and discrimination within their immediate communities while unstably housed. Experiences of societal stigma and discrimination were most pronounced among youth who identified as transgender (80%), LGBQA (62%), and multiracial (51%). Finally, some youth (20%) described challenges accessing shelters during transitions in or out of systems or barriers caused by policies based on age, time limits, or other criteria (for example, a service eligibility for foster youth only). The presence of Wi-Fi and easy Internet access in a community was also a positive, critical portal to accessing informal and formal resources while unstably housed.

Taken together, these critical conditions mattered in how youth experienced housing instability and also suggest multilevel opportunities of need, prevention, and intervention (see Figure 1). The presence of positive critical conditions (e.g., personal resilience, positive support from peers, family, or service providers) could certainly act as positive tipping points—catalysts that moved youth into greater levels of stability. More often, however, these critical conditions worked together to fuel negative tipping points—crises that created greater instability and more chronic experiences of homelessness.

Figure 1. Multilevel critical conditions

Critical conditions create opportunities to strengthen youth resilience, prevent crises, and interrupt housing instability. Youth need supports from all three of these levels across their pathways through homelessness.



Systems + communities play a critical role in...
 offering developmentally and culturally attuned supports and services, ensuring safety and stability even across transitions, as portals to other services and resources that promote healing, growth, recovery, and economic health in communities, families, and children.

Peers play a critical role in...
 supporting sense of belonging and family/kinship, providing social support, and serving as portals to accessing resources, information, and skill development.

Families play a critical role in...
 providing stability, safety, and nurturance. Family systems are important for creating dynamics that promote and protect the growth, wellness, belonging, and healthy development of their members.

Young people play a critical role...
 as resilient actors making meaning of their lives and identities, fully engaging and contributing to their communities, building or strengthening their capacities for decision making that facilitates and protects their own wellness and health.

(Source: VoYC In-Depth Interviews)

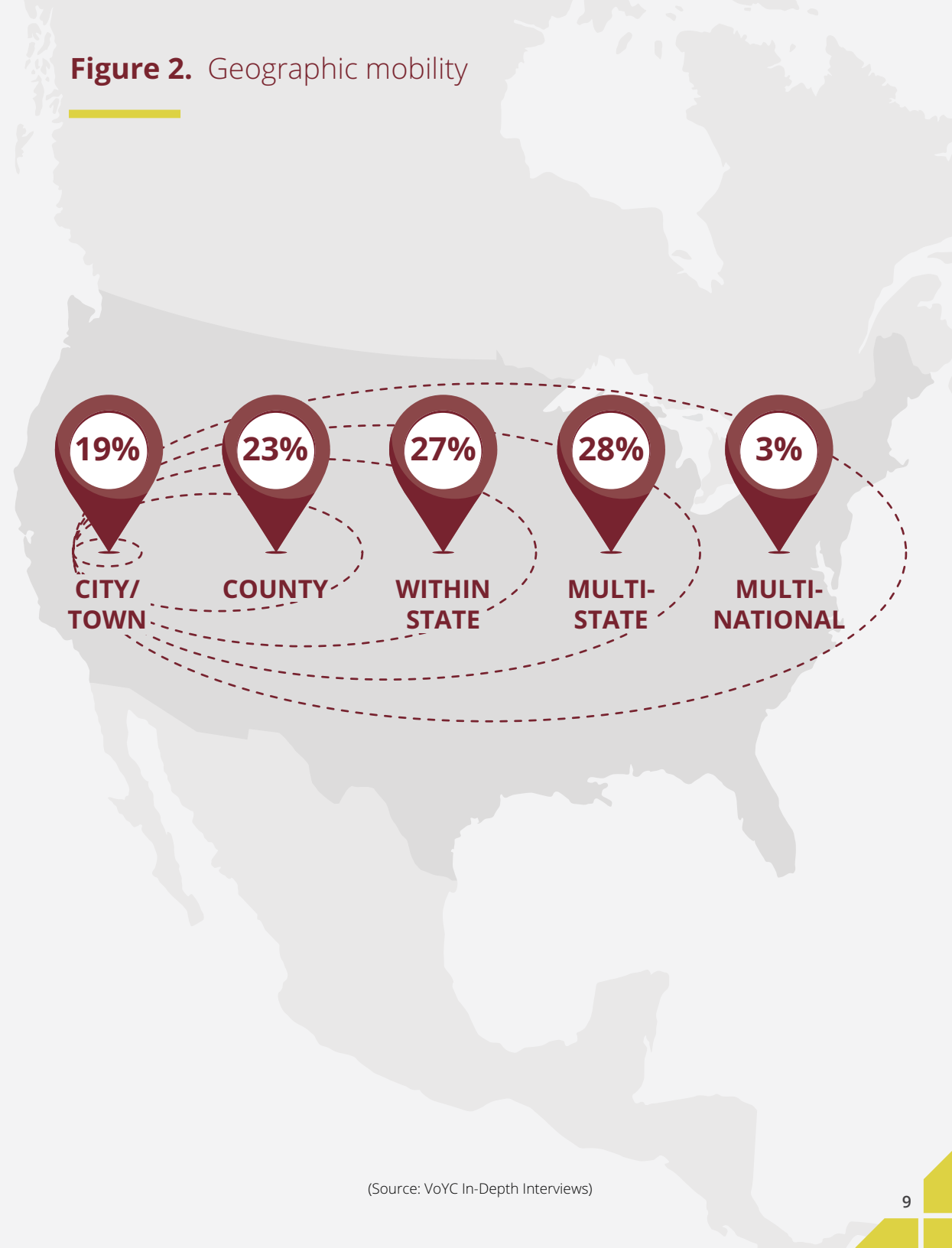
As the next finding illustrates, because opportunities to intervene in these critical conditions were missed, youth experienced significant geographic mobility and fluid changes in sleeping arrangements while homeless.

Finding 3. Youth pathways through homelessness involve both geographic mobility and fluidity in their sleeping arrangements

As young people talked about the critical conditions they navigated they also described having to move frequently—and at times rapidly—from street to street and neighborhood to neighborhood. But their movement largely remained bounded within their own home states (69%); many youth never traveled outside of their original counties (42%). Therefore, while most youth moved in and out of their hometowns (81%), they never traveled beyond their own home states. A smaller group of youth, 28%, did cross state lines and 3% crossed national borders (see Figure 2).

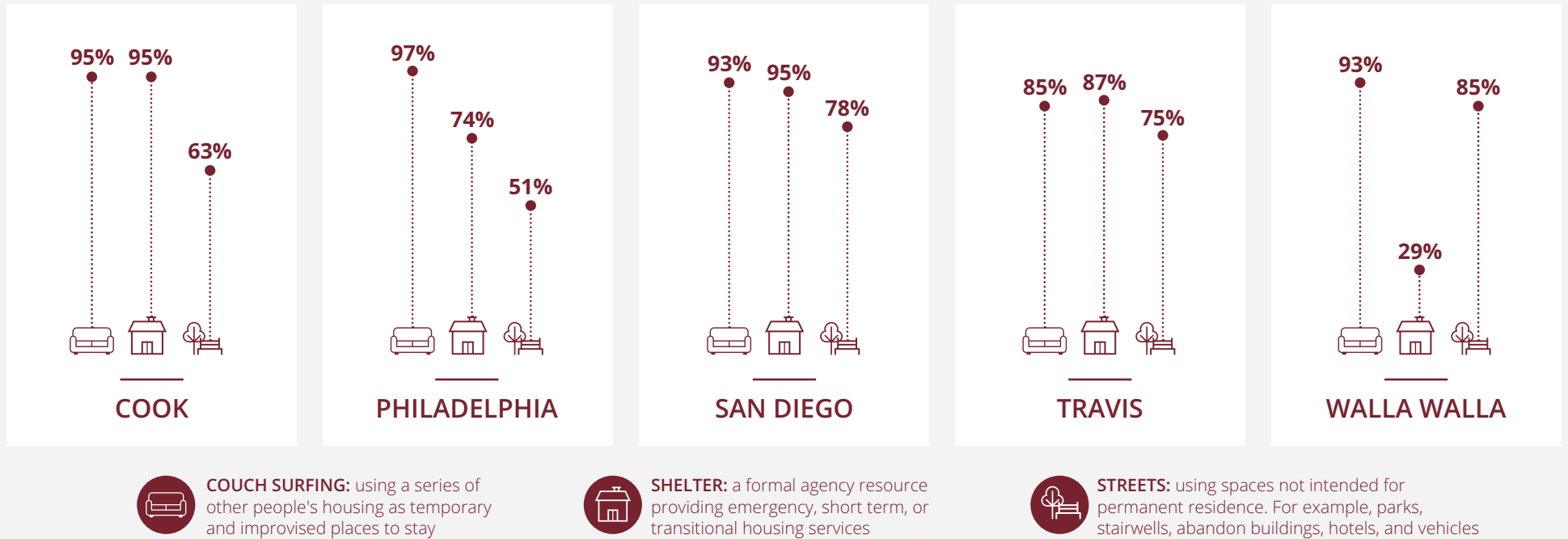
During their interviews, most young people also explained that their current housing instability was only a continuation of the instability they experienced as small children. Many made comments like “to be honest, instability has always been a thing” or “I’ve never experienced stability.” Consequently, youth reported experiencing precarious and temporary sleeping arrangements, especially couch surfing, as a normal part of their lives. As Figure 3 indicates, nearly all youth (93%) experienced couch surfing at some point, or at multiple points, across their pathways. Their choices in sleeping arrangements, however, were affected by availability of formal resource options in their counties.

Figure 2. Geographic mobility



(Source: VoYC In-Depth Interviews)

Figure 3. Types of sleeping arrangements while unstably housed



(Source: VoYC In-Depth Interviews)

For example, our small town site, Walla Walla, lacked shelters for youth who were under the age of 18. Therefore, this site represents the lowest percentage of youth using shelters (29%) and the highest percentage of youth reporting sleeping on the streets (85%).




Few young people reported using only one type of sleeping arrangement across their pathways. Instead, the majority (91%) experienced two to three different types (see Figure 4). While in a single day youth may use one type of sleeping arrangement (for example, staying on the streets),

over the course of a week, youth often cycled between many types. Common drivers of this fluidity included: structural critical conditions such as the appeal, safety, availability, and accessibility of shelters or transitional housing; the availability and safety of informal housing; and navigating personal conditions, including important ties to relationships.

The idea that youth are drawn to what are often called “magnet cities” to seek a more robust array of formal homeless services rarely motivated the majority of moves among youth in our study.

As we will see in the final section of this brief, the critical conditions driving mobility instead included the push and pull of multiple factors: the opportunity to access informal supports from extended family; retaining or preserving an important relationship with a peer or intimate partner; protecting oneself from familial stigma/discrimination; or seeking a more welcoming community or social network. At first glance, their changing sleeping arrangements and geographic mobility may seem erratic and illogical.

Figure 4. Total number of different sleeping arrangements used by youth

	ONE ARRANGEMENT 	TWO ARRANGEMENTS 	THREE+ ARRANGEMENTS 
COOK	5%	38%	58%
PHILADELPHIA	13%	51%	36%
SAN DIEGO	5%	30%	65%
TRAVIS	11%	31%	58%
WALLA WALLA	12%	63%	24%

(Source: VoYC In-Depth Interviews)

But a closer look reveals that youths' desires to manage or protect relationships tied to family, friends, and peers often informed why they used or rejected resources. These considerations deeply shaped their experiences of fluidity and mobility over time.

Finding 4. Young people endure significant personal losses before and during their pathways through homelessness, including deaths of parents and caregivers

Throughout their interviews, youth recalled surviving the loss of parents, caregivers, and extended family members. In fact, 35% reported the death of at least one parent or caregiver. The following groups of youth had higher-than-average rates of parental death: youth with any history in foster care (44%); LGBQA-identified youth (42%); multiracial youth (40%); black youth (40%); and white youth (38%). This final finding emphasizes the degree to which youth pathways are mired in loss, a reality that influenced how their homelessness began, the critical conditions that shaped their pathways, and the instability that followed them throughout.

Youth experienced not only the death of parents but also of other close family members; some endured the death of multiple relatives (6%). The most common themes in the cause of these deaths included (in order of frequency) murder, drug overdose, cancer and other terminal illnesses, heart attack or stroke, and suicide. Four youth reported the death of their own child during childbirth or during their child's first year of life.

These losses were not only traumatic, but frequently created a ripple effect of instability and additional loss in housing, schooling, and changes in neighborhood.

For some, a parent's death was synonymous with the loss of physical home space, especially for youth living with single parents. Other times, the death of a young person's grandparents or siblings caused their parents to spiral back into an addiction or intensified a mental illness. Those youth often found themselves struggling, as children, to support their grieving parents who became emotionally unavailable. None of these young people reported receiving supports in addressing grief. Instead, youth and their families were left to cope on their own while also trying to ensure the survival and functioning of remaining family members.

PULLING IT ALL TOGETHER

When Critical Conditions become Tipping Points

In reality, youth did not experience these four findings separately, but as interwoven critical conditions that fueled tipping points in and out of chronic experiences of homelessness. To illustrate this, we introduce the story of "Unknown" (who chose this name as his pseudonym) and map the critical conditions and tipping points within his pathway through homelessness (see Figure 5). We then revisit Baylee, whose story opened this brief, and also draw her pathway (see Figure 6). As we will see in both, there are many missed opportunities for addressing critical conditions early on, before they become tipping points. Taken together, our findings across all 215 interviews alongside these two illustrative examples are foundational to the recommendations we ultimately propose within the RHYA.

Unknown's Story

"Unknown" was a 23-year-old who identified as a "100% straight,"² African American male. His story of instability began as a teen

while living with his mother in a small town in Cook County, Illinois. He described a family context of extreme conflict, a mother who struggled with a mental health condition, and a larger family system growing intolerant of his mental health condition, what Unknown initially described as his being "different." He would stand alone outside in the dark talking or just silently listening to the "voices" in his head. After turning 19, he wanted to go to Miami, believing it would be "like a movie." With money for train fare from his mother, he said: "I decided to start my life, I could tell they wanted me gone."

But once in Miami, he ended up on the streets. After telling his family about being "kidnapped" and taken to an older man's house, they insisted he leave Miami immediately. A trusted uncle in Michigan convinced him to come and enroll in Job Corps there. After graduating, he felt stigmatized by his peers, and he missed home. He decided to return to his grandmother's house, filled with family, including his brother, mom, and her new fiancé. But after he arrived, he found his grandmother had grown so ill that she was moving into a nursing home. The adult relatives were financially unable to save the family home, and everyone scattered to find new housing. His mother made it clear to Unknown that he could not join her, her new husband, and Unknown's youngest sibling.

Bewildered and again homeless, Unknown couch surfed with friends for about a year. But eventually, his being "different" and "hearing voices" became too much for one of his friends to manage. So Unknown preemptively moved out. He slept in apartment stairwells and on the streets for a year. He recalled one night when a helpful police officer bought him shoes, a night's stay in a hotel, and connected him to a shelter. When we met Unknown, he had just secured a job at a retail outlet in the suburbs of Chicago, but he did not have housing close by. He cycled between couch surfing in the city with family, staying at city shelters, and sleeping in the stairwells of suburban apartments that were close to his new job.

2. Youth were surveyed about their sexuality using a spectrum. Identity choices included 100% gay or lesbian or straight/heterosexual, mostly gay/lesbian/straight, bisexual, not attracted to either sex, and an open option to write in their own identity label.

Explaining how he survived, he also showed the interviewer the unused bottle of prescribed medicine in his backpack “for the voices.”


Figure 5 visually maps the critical conditions and tipping points in Unknown’s story. Each white box represents a distinct phase of his pathway and includes: a) his age; b) a select quote or description highlighting something core about that moment; and c) icons that indicate the sleeping arrangements he experienced at that

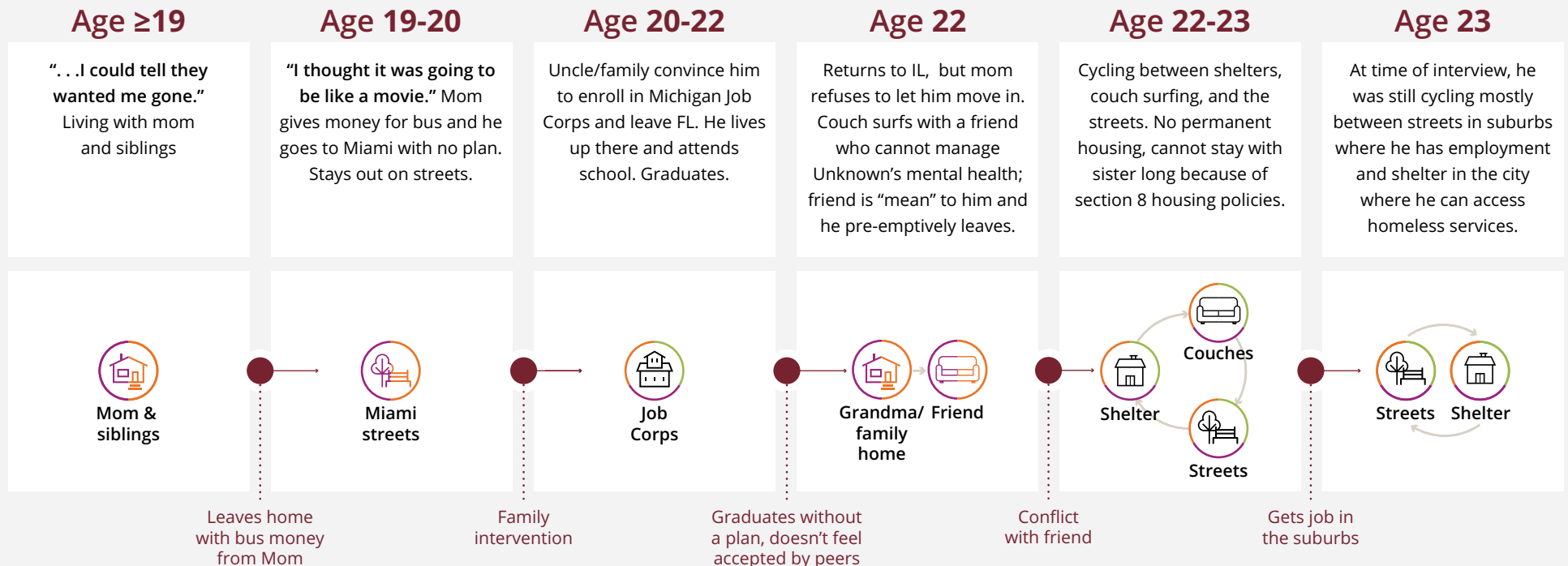
time. Each icon is circled in colors that correspond to the critical conditions that Unknown identified as significant. For example, the first box represents the beginning phase of Unknown’s pathway; it is his last year of living at home with his mom and siblings. Symbolizing that moment is a circle with a house icon inside. According to Unknown, both his personal condition of being “different” (purple) and his family’s struggles with that behavior (orange) are key critical conditions that fueled his ultimate departure from home.

The actual tipping point—the situation or event that fueled a shift into a new phase of his pathway—is depicted by a solid dot and dashed line with a brief description. While there are some positive tipping points upward into phases of stability for Unknown—like the family intervention that occurred to convince him to leave Miami—many others represent missed opportunities to intervene across personal, relational, and structural factors that might have drastically altered Unknown’s story.

Figure 5. Unknown’s pathway through homelessness

Critical conditions driving Unknown's tipping points: ■ Structural ■ Relational ■ Personal

 **Unknown**
 Age 23
 Cook County
 Male
 African American
 100% Straight



(Source: VoYC In-Depth Interviews)

Figure 6. Baylee's pathway through homelessness

Baylee Female
 Age 17 Latina & White
 San Diego County 100% Straight

Critical conditions driving Baylee's tipping points: ■ Structural ■ Relational ■ Personal

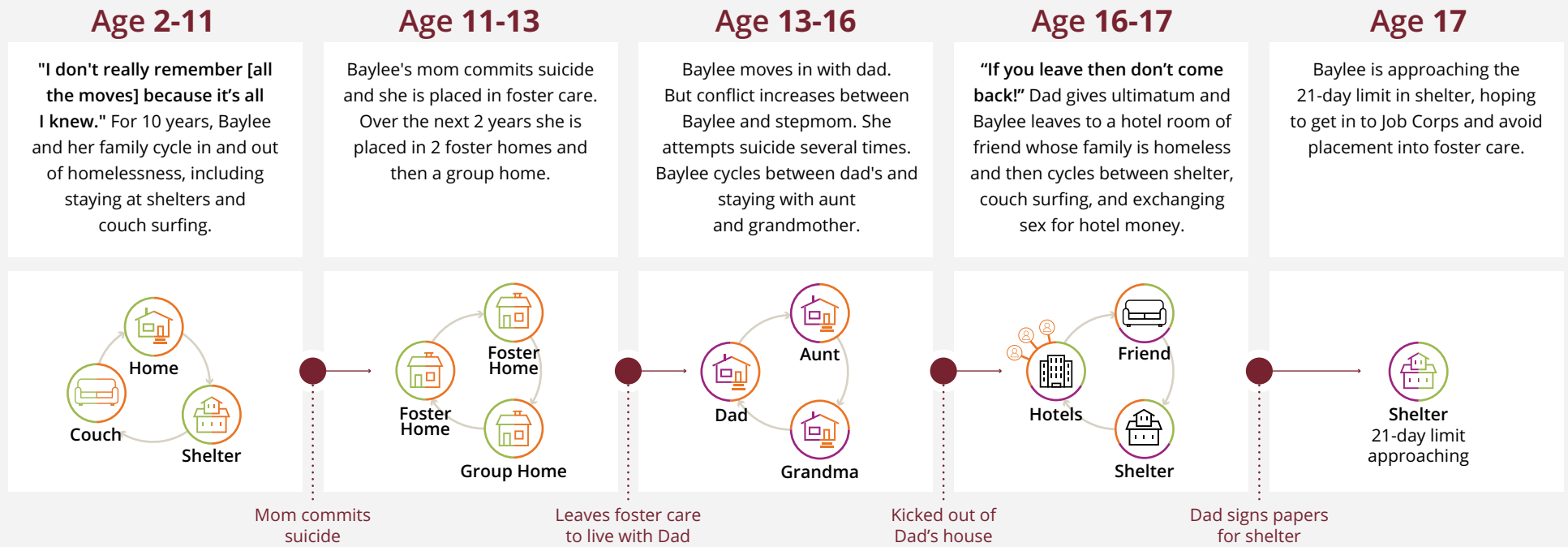
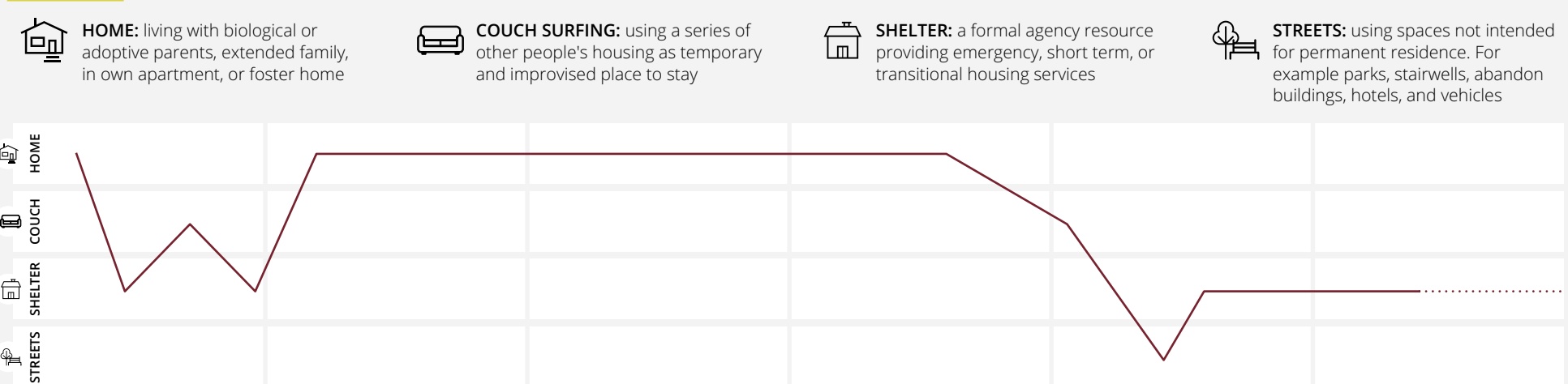


Figure 6a. Types of sleeping arrangements in Baylee's pathway



Summary

Both Unknown and Baylee's stories illustrate the larger findings presented in this brief, and together, point us to important guideposts in our efforts to prevent and end youth homelessness. First, once homeless, youth pathways were driven by multiple critical conditions: (a) cycles of interpersonal trauma; (b) chronic instability; (c) multiple losses; (d) youth's unaddressed developmental and emotional needs; (e) parents' own struggles and constrained abilities to consistently provide stable and safe homes for their children; and (f) a host of policies and practices across multiple service systems. Like all the youth in our study, both Baylee and Unknown experienced significant instability as children and adolescents. But housing alone would have been an insufficient solution (consider Baylee's instability even while living with her father). Our findings suggest interventions must address multiple critical conditions across personal, relational, and structural levels. Finally, the stories of Baylee and Unknown illustrate the heightened vulnerability at moments of transition experienced by all 215 young people we interviewed. As these young people transitioned in and out of service systems, schools, sleeping arrangements, and employment opportunities, they experienced moments of risk for even greater instability. Any solutions to youth homelessness must be attuned to the presence of these many critical conditions much earlier, before they erupt into crises and tip youth into more chronic cycles of homelessness.

IMPLICATIONS & RECOMMENDATIONS

The purpose of Chapin Hall's Research-to-Impact brief series "Missed Opportunities" is to connect the dots between Voices of Youth Count research findings and meaningful policy change. For this brief, the RHYA gives us an appropriate canvas on which to outline specific changes to improve policy. The RHYA consists of three primary program areas to serve youth and young adults who have run away and are at risk of, or already are, experiencing homelessness: Basic Center Program (BCP),

Transitional Living Program (TLP), and Street Outreach Program (SOP). The BCP provides emergency shelter services to youth under age 18 for up to 21 days and also includes home-based services to the family and the young person. TLPs provide transitional residential services for youth ages 16-22 for up to 540 days. The SOP engages youth on the street and provides access to services. Given the direct link these programs have to the population of young people we interviewed, our recommendations focus on how findings from the in-depth interviews can inform improvements to this legislation that would directly impact the lives of youth who are experiencing homelessness.

In the recommendations below, we provide examples where strengthening language in the RHYA could in turn strengthen practices for youth experiencing unaccompanied homelessness. We organize these recommendations into five themes of change: (1) address interpersonal trauma; (2) apply a developmental lens to program practices and rules of participation; (3) match policy to the fluidity of the homeless experience; (4) coordinate with the child welfare systems to enhance our family-based prevention efforts; and (5) improve engagement and share data across service systems and geographic locations. Each theme, discussed below, allows a window into the multiple areas within the statute that could be modified. At the end of each theme, we provide a link to the statute and to a more comprehensive list of suggested changes in the RHYA marked-up document. We welcome providers, Congress, and other stakeholders to debate the potential implications of our findings and recommendations to make them even stronger and more impactful.

Address Interpersonal Trauma

The significant effects of interpersonal trauma and loss are a thread woven throughout many of the stories of youth who experience homelessness. A consistent source of trauma among young people we interviewed was borne from the conflict and struggles youth experienced earlier, within their families. This finding invites us to reorient policies that inform our work by centering family conflict and family disruption as core to the problem of youth homelessness.

This includes the experiences of stigma and discrimination that youth faced in their own family systems. To bolster the trauma-specific nature of services, the RHYA must acknowledge the universality of interpersonal trauma among youth experiencing homelessness and recommend specific evidence-supported practices to address the interpersonal trauma in the lives of these young people. Core to this trauma-informed approach is valuing youth perspectives and insights regarding unique needs for support in achieving their life goals. We recommend revisions to the following sections, specifying the need to address trauma:

- Ensure that the FHYA findings acknowledge that young people link the beginning of their homelessness to earlier disruptions of home and family [34 USC §11201].
- Update services to emphasize that they be trauma-informed as well as focused on the values that these young people cite as they work toward improving their life circumstances with assistance from both formal and informal supports [34 USC §11212 & §11222].
- Coordinate across federal programs, given the many challenges and systems these young people encounter [34 USC §11201 (8)].
- Specify roles for Medicaid, TANF, WIC, and child welfare [34 USC §11201 (8)].
- Place a greater emphasis on trauma-informed care in training for service providers [34 USC §11212 (c)]. This should include training for service providers' use of practice models that are culturally attuned and effective in working with youth who experience stigma and discrimination, especially LGBTQ and multiracial youth.
- Address histories and current experiences of interpersonal trauma, family conflict, grief, and loss for young parents experiencing homelessness [34 USC §11222].

- Strengthen clinical component of technical assistance to ensure programs focus on the most effective practices to meet needs of youth with interpersonal trauma and family histories of stigma/discrimination [34 USC §11242].
- Explicitly cite addressing the trauma associated with the loss of a family member, especially through home-based services [34 USC §11212 (d)].

We provide [this link](#) with examples of the type of language that could be added to each of these sections.

Apply a Developmental Lens

Adolescence and emerging adulthood usher in a time in a young person's life where healthy relationships are critical to fostering growth and healing, especially from relationship-based traumas and losses that have occurred in their families. Our findings also support attention to identity development for youth who experience stigma and discrimination. We recommend revisions to the RHYA that specify a focus on the unique and diverse developmental needs within this population:

First, we make two recommendations related to our findings which would promote healthy development through healing from the interpersonal trauma, family conflict, and disruption that young people reported impacts their relationships, and shapes how/if they engage with people who may be available as resources and supports (family, friends, peers).

- Add relational skill development training and an explicit strategy and practice model in programs covered by RHYA. Here, the aim is to help youth make meaning of and develop skills to manage difficult and complex relationships and help youth foster resilience as they engage or redefine relationships with families [34 USC §11222 (a)].



All young people need opportunities to make mistakes and to recover and learn from them. Our service systems must provide those second chances and critically important developmental supports.

- Allow for appropriate exceptions to the 21-day limit for Basic Center Programs in the case of youth experiencing parental death. The impact of the death of a parent is developmentally significant, particularly given the young age at which these losses occurred. Losing a parent has ripple effects on youth pathways into and through homelessness [34 USC § 11211 (a)].
- Integrate screening protocol to identify youth who experience the death of a parent and provide access to grief counseling for these youth and their families [34 USC § 11212 (b)].

Next, we make recommendations about providing young people with second chances. Developmentally speaking, all young people need opportunities to make mistakes and to recover and learn from them. Our service systems must provide those second chances and critically important developmental supports. This means we need flexibility in our programs and services. Consider that for every participant in our study, peers were a critical factor in their decision making; young people regularly prioritized retaining friends over finding or maintaining housing stability. Youth we interviewed shared that if the rules and requirements of a program placed important relationships at risk, youth prioritized maintaining those relationships. Said differently, if asked to choose, youth would prematurely exit, or altogether avoid, a program instead of abandoning relationships with peers/family/pets that mattered to them.

- Prescribe flexibility in terms of rules regarding entry/exit to and from programs to increase long-term success. Include allowing time for youth to adjust and supporting youth as they learn to balance their needs for stable housing with their needs to retain stability in their important relationships. [34 USC §11222 (a)]

Youth also require extended supports during moments of transition.

- Allow for exceptions to the 21-day limit for youth transitioning into an imminent post-secondary educational opportunity (e.g., Job Corps, community college, college), when the youth's family is currently homeless, when there is parental involvement in residential substance/mental programs, or during parental incarcerations [34 USC §11211 (a)].

Finally, young people whose identities are developing in the context of stigma and discrimination will also avoid service providers and family members who are not sensitive to their developmental needs for identity safety, nurturance, and belonging. This was especially true for youth who identified as LGBTQA.

- Provide greater emphasis on trauma-informed models that also address stigma and discrimination as a type of interpersonal trauma, a developmental harm, and one that is core to the family conflict often experienced among youth who identify as LGBTQA [34 USC §11212 (c)].

We provide [this link](#) with examples of the type of language that could be added to each of these sections.

Youth Homelessness Policy Should Match the Fluidity and Mobility of the Homelessness Experience

Even within a single week, many of the young people in our study cycled among couch surfing, shelters, abandoned buildings, cars, family homes, and the street. Yet most youth remained within their home states. The RHYA should reflect the nature of these patterns in mobility, and this attunement to fluidity should exist across all three program types authorized under RHYA, including Basic Center, Transitional Living, and Street Outreach.

- Given the high mobility and fluidity of youth homelessness, outreach workers should be encouraged to pay particular attention to youth who may not be from the area. We recommend adding standard inquiries to program intake questions that allow outreach workers to pay attention to youth who are from out of town. These youth will likely require additional information about what services are available, where they are located, and how best to access them [34 USC §11212 (c)].

We provide [this link](#) to the RHYA marked-up document with examples of the type of language that could be added.

Coordinate with Child Welfare Systems to Enhance Family-based Prevention Efforts in Families

The Family First Prevention Services Act (FFPSA) of 2018 provides the opportunity for RHYA-authorized service providers to coordinate with child welfare systems when the families of young people require more supports beyond what is allowable through under the RHYA. Child welfare systems can now provide prevention services for families and youth who are at risk of foster care placement. This new legislation allows for a level of coordination among child welfare and RHYA-authorized services that has not been possible before.

- Specify greater coordination through the Basic Center Program with child welfare systems in instances where young people have had prior child welfare involvement to prevent re-entry [34 USC §11211 (a)].
- Leverage FFPSA coordinate and/or offer additional prevention services where home-based services are unavailable through the Basic Center Program for youth who are unable to return home or transition to stable housing at end of 21 days [34 USC §11211 (a)].
- Through FFPSA, coordinate prevention services to provide intensive supports in cases of family disruption and conflict, including death of a parent or caregiver [34 USC §11212 (b)].
- Connect home-based services offered under the Basic Center Program with FFPSA opportunity to allow for intensive, shorter interventions focused on eliminating the crisis. Services currently listed in the Act suggest a longer stay and are not as crisis-oriented. If the home-based services do not fully meet the needs of youth and families, the services under RHYA should be treated as a precursor to services child welfare may be able to offer longer term [34 USC §11212 (d)].
- Given the duration and multiple interpersonal traumas that youth reported experiencing, a new or reconfigured section within RHYA is warranted that moves beyond what the Basic Center Program is able to offer within 21 days. RHYA is best positioned to play a larger role in ending youth homelessness by providing opportunities to address interpersonal trauma for youth and their families earlier, and in turn to prevent the critical conditions of risk from becoming tipping points into more chronic forms of homelessness (34 USC §New Section).



We provide [this link](#) to the RHYA document with examples of the type of language that could be added to each of these sections.

Improve Engagement and Share Data


Getting information to young people about services is crucial. Peers were an especially trusted and frequently utilized bridge to resources. Increasingly, young people and peers have or can easily find access to the Internet, and today's programs should be encouraged to reach youth through social media and other digital methods. Additionally, despite the high mobility and instability of youth pathways, most youth remained within their home states. Our findings suggest in-state data sharing among homeless youth providers is essential. We recommend the following updates to the RHYA to activate these findings:

- Include online and web-based options in outreach efforts of Basic Center Programs. Target efforts to the places and people youth told us they go to for information to potentially also reach youth who are couch surfing and may be identifiable by school personnel, not know where a Basic Center Program is located, or have a means to get to it [34 USC §11212 (b)].

- Add a service requirement for Street Outreach Programs for a stronger online and social media presence [34 USC §11212 (c)].
- Develop a national plan that includes web-based and social media components [34 USC §11231].
- Enable information sharing between Basic Center Programs and Transitional Living Programs and other federally funded programs in other parts of the state where youth may relocate without a stable housing arrangement [34 USC §11212 (b); 34 USC §11222 (a)].

Summary

We provide [this link](#) with examples of the language that could be added to each of these sections within the RHYA. The impact these changes could make to the lives of youth and their families are many, and each are of critical importance. Providing services and supports that foster healthy development, resilience, and mitigate negative effects of interpersonal trauma can protect youth's stability, both at home and during times of transition. This must include directly attending to the causes of family conflict, including parent's own struggles with addiction, mental health, and housing instability.



Our efforts to end unaccompanied homelessness must include meaningful partnerships with young people as critical and resilient individuals with unique contributions to make to their communities and within their own lives.

Prescribing flexibility in terms of rules to programs can increase long-term engagement with supports so that youth do not reject services, needlessly struggle on their own, or fall through the cracks, diving into deeper levels of housing instability and new forms of risk. Creating a more robust array of family-based prevention and intervention efforts could both prevent entrance into foster care (an event youth marked as the beginning of their homelessness) and also strengthen parents' capacities to provide stability and to be supported themselves during moments of crises (such as family death or homelessness). These changes can also build a skilled workforce that is trained to support youth as they heal from interpersonal trauma and navigate parental rejection. They can also provide interventions that nurture youths' healthy identity development. But our findings suggest that a major challenge depends upon our abilities to identify critical conditions early on in order to significantly reshape their pathways. These shifts in our policies and practices can include important strides toward supporting youth in maximizing the contributions they can make within their communities and realizing their full potentials across the course of their lifetimes.

CONCLUSION

Missed Opportunities in Youth Pathways Through Homelessness offers insights into the unique experiences of youth given their shared conditions of housing instability. We highlight needs above and beyond permanent housing and we call for resources that transcend interventions that focus solely on youth. Systems and communities play critical roles in offering flexible, developmentally attuned, and trauma-informed supports and services. Service providers must support and hold youth up during transitions and support them through moments of extreme crisis. Youth need social structures that foster and protect the health of their communities, families, and themselves. Young people's relational systems are equally critical. Family systems are important for providing stability, safety, and nurturance across youth development, especially around identities that are stigmatized. Young people need, but sometimes lack, an experience of family that consistently fosters and protects their growth, wellness, belonging, and healthy development. Our findings point to the critical role of peers in supporting the often unmet needs of youth for belonging, identity affirmation, and family kinship.

Peers offer social support and link each other to resources and information. And finally, our efforts to end unaccompanied homelessness must include meaningful partnerships with young people as critical and resilient individuals with unique contributions to make to their communities and within their own lives. Our work must center on fostering their capacities for decision making and building skills to advance and ensure wellness and health through the relationships they choose into adulthood. This brief is a call for models of practice and policy that can move this work forward; the models must reflect the diversity and resilience that exist among young people who experience homelessness and housing instability.

Youth provided insights into the many ways in which trauma permeates and impacts them and their families. Their trajectories illustrate how critical second changes are within the context of adolescence and emerging adulthood. The stories illustrate the paramount importance of establishing cross-system collaborations that provide a path toward prevention and intervention, how provider outreach and engagement might better reflect the fluidity and mobility of pathways, and underscore the need to adapt to the varied modes of online communication youth use. We have taken these insights and provided a road map for how an existing statute can incorporate some of what we have learned to improve the services available to youth. We believe this model of translating research findings into policy change should be jointly refined and used as an actionable tool across the field.

As a final note, housing-first models are increasingly dominating the landscape of homelessness intervention as an empirically supported, effective approach to interrupting housing instability. Both a model and philosophy of practice, housing first prioritizes ending physical homelessness by securing permanent housing as a platform for other supports. Stable and safe housing is of unquestionable importance, but youth had concurrent (and often unmet) developmental needs that were equally vital to their well-being and long-term stability. Our findings suggest that ending homelessness among youth requires a set of flexible supports and resources that take seriously the developmental needs of youth. These needs are unfolding in real time throughout their pathways through homelessness. Taking the voices of youth seriously requires us to listen to the consequences of the losses, disruptions, and instability that they survived earlier in childhood. Trusted and valued relationships are core to anyone's positive experience of home. Our efforts must synchronize to the multiple needs of youth, rather than privilege just one. We must stop missing critical opportunities to address core, universal developmental needs for relationships that foster growth, healing, and well-being. These needs complement each other. Services that place them in competition stand in the way of young people's achievement of short- and long-term housing stability.

GLOSSARY

Interpersonal Trauma: This is a category of traumatic experiences that are often chronic and relationship-based (Widera-Wysoczańska & Kuczyńska, 2010). Interpersonal traumas for youth in this study were frequently caused by a person with whom youth were in close relationship, like a parent, sibling, grandparent or caregiver. In our study, we use this term to indicate young people's experiences of parental and caregiver abuse and neglect, surviving parental death, within-family sources of stigma and discrimination, and parental rejection and abandonment. Experiencing interpersonal trauma as children is known to have long-term and often harmful consequences on brain development as well as on overall well being into adulthood. Increasingly, approaches to healing this type of trauma center on relational practices; they help persons to make meaning of their traumas, create pathways for healing, and develop skills for resilience and the capacity to engage in growth fostering relationships (Barrett & Stone Fish, 2014).

Relational Practice: This approach positions relationships as the vehicle through which healing, resilience, and change occurs (Freedberg, 2015). Practitioners of relational models also engage individuals, families, and communities in identifying, mobilizing, and building their own social networks and interpersonal connections as critical resources for support and well-being beyond the intervention process. These models have become increasingly paired with trauma-sensitive (Barrett & Stone Fish, 2014) and culturally attuned, socially just approaches to practice in the U.S. and globally (Folgheraiter & Raineri, 2017).

Unaccompanied youth homelessness: To align with language in the Runaway and Homeless Youth Act (2008) we define unaccompanied youth homelessness to include individuals between 13-25 years old who are homeless without a parent or guardian. We use a broad definition of homelessness to include the experience of sleeping in places in which people are not meant to live, staying in shelters, or temporarily staying with others (i.e., couch surfing) and not having a safe alternative.

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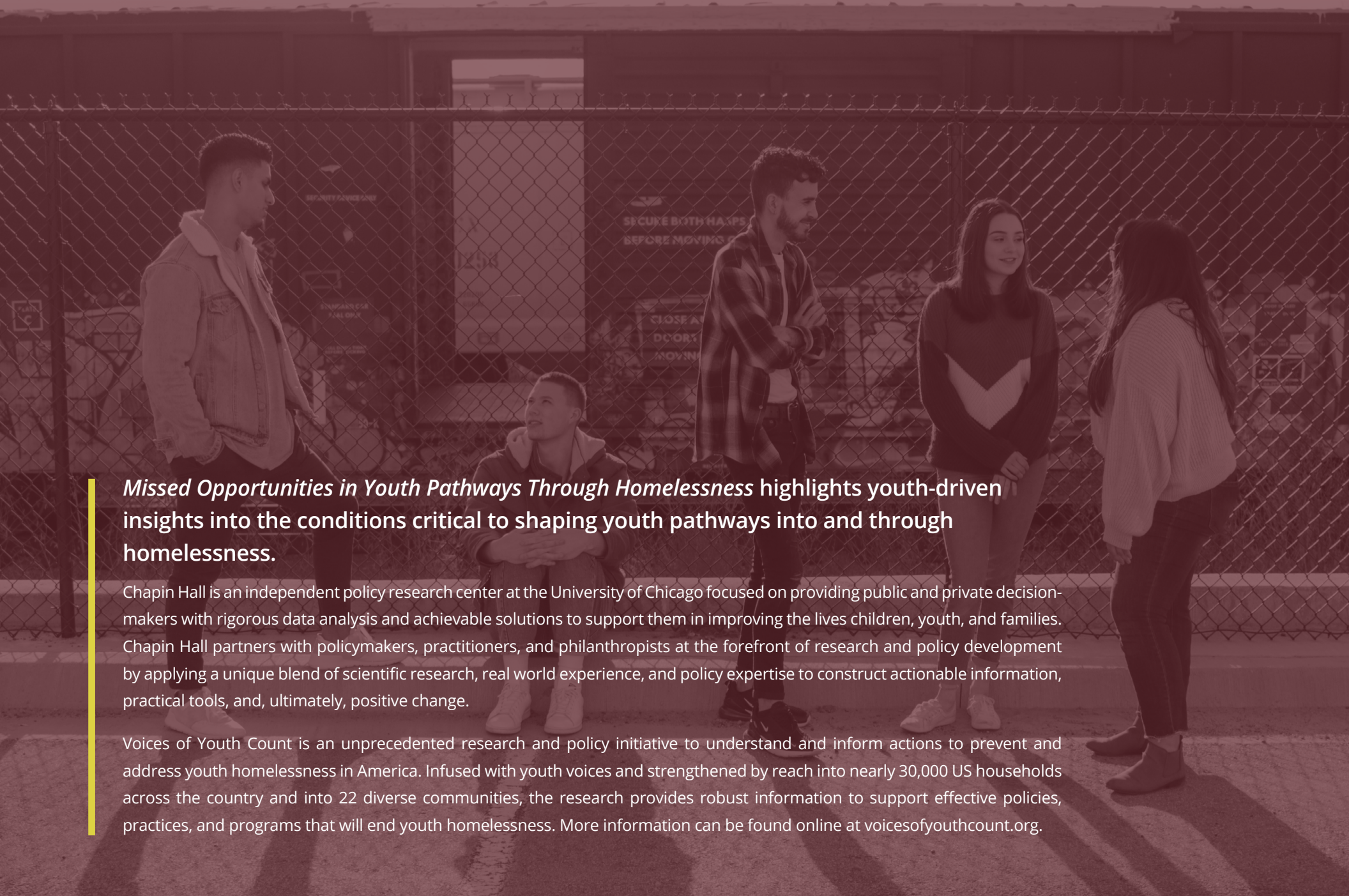
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***Missed Opportunities in Youth Pathways Through Homelessness* highlights youth-driven insights into the conditions critical to shaping youth pathways into and through homelessness.**

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