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UTAH FORUM ON TRANSITION AGE YOUTH HOMELESSNESS MARCH 23, 2018



Summary Report

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OVERVIEW

UTAH FORUM ON TRANSITION AGE YOUTH EXPERIENCING HOMELESSNESS

On March 23, 2014 over 90 people gathered together to hold facilitated discussions on homelessness impacting Utah's young people between the ages of 16 and 24. Providers, program administrators, state and community leaders as well as over 20 youth spent the day reviewing information on the status of young people in Utah with lived experiences of homelessness. Subjects covered were housing, substance abuse and mental health, education, juvenile justice, vocational training and employment, child and family services and health.

Introductory and welcome remarks began the day. Utah Field Office Director Kelly Jorgensen, Salt Lake City Mayor Jacki Biskupski, HUD's Acting Regional Administrator for Region VIII and Co-Chair of the Federal Regional Council on Homelessness, Eric Cobb, Patricia Julianelle, Director of Program Advancement and Legal Affairs for SchoolHouse Connection, Inc. and Katie Jennings, Policy and Program Analyst of the USICH all addressed the attendees at the beginning of the day setting a framework for the discussions to follow.



Information from the USICH on the criteria and benchmarks for achieving the Goal of Ending Youth Homelessness is provided at the end of report summary (pp). The information provides a foundation for community actions for guiding planning strategies for effectively ending youth homelessness.



Specific discussion topics were introduced by local subject matter experts and at the end of each topic discussion, a member of each group reported on key items the group felt to be most important to share with all participants. After all group discussions were completed and report outs finished, young people participated in a panel discussion moderated by Salt Lake County Mayor Ben McAdams. The Mayor asked for feedback on issues that may not have been covered during group discussions. Following the panel, each young adult received a certificate of appreciation for attending the Forum and all participants were

asked to come to a follow-up meeting on April 11, 2018 coordinated by SchoolHouse Connection. The information that follows includes the main discussion points raised by participants and how they ranked in importance for action within the next 12 to 18 months. Also included responses to questions

provided in the registration process aligned to the priorities for action identified by Forum attendees. Included in the report is also key information given to all participants upon their arrival. This information includes key indicators and factors concerning youth homelessness in Utah and provides information on some of the current programs serving homeless youth in Utah.

“The cost of homelessness is high, not only in terms of the array of traumatic experiences of those who are homeless, but in monetary terms for society. It costs between \$20,000 and \$40,000 annually for one homeless individual to cycle through public service systems such as emergency rooms, jail, mental health care facilities, and shelters. This annual cost can add up quickly with long periods of homelessness. For half of homeless youth (age 14–24), homelessness will not end during adolescence. Lack of steady employment is one of the largest barriers for youth experiencing homelessness to become permanently self-sufficient.

Examining the factors that contribute to the employability of these youth is critical to developing interventions. For many, education is the key to becoming self-sufficient and exiting homelessness. The unemployment rate is significantly lower for Americans who obtain a high school diploma. The unemployment rate declines further with increases in college education. The findings of this paper are a needs assessment of sorts, pointing to considerable gaps in educational services currently available to youth experiencing homeless, and invalidating the idea that homeless youth do not wish to attain high school, technical school, and college degrees. On the contrary, these youths have high educational aspirations, and while capable of succeeding in education, may require support beyond that of their housed peers because of the additional barriers they face. This desire to pursue education is an important consideration and should inform the way we approach youth experiencing homelessness with educational services.”

PQDT Open

Abstract (Summary)

Educational experiences and goals of homeless youth and barriers to reaching these goals
by Peterson, Rachel, M.S., *Utah State University*, 2016, 65; 10130220

“There is evidence that when young people exit homelessness and become housed, the outcomes are not strong and housing stability is elusive (Kozloff et al. 2017). Without providing young people with a broader range of supports that are both comprehensive and developmentally appropriate, we risk condemning young people to a life of extreme poverty, social exclusion and potentially a return to homelessness. In other words, if we don’t support young people well at this crucial juncture in their lives, we may be unwittingly creating the chronically homeless adults of tomorrow.”

This is Housing First for Youth: A Program Model Guide

Stephen Gaetz

Canadian Observatory on Homelessness: homelesshub.ca

A Way Home, Vers Un Chez-Soi, Canada

“Homeless adolescents often suffer from severe anxiety and depression, poor health and nutrition, and low self-esteem. In one study, the rates of major depression, conduct disorder, and post-traumatic stress syndrome were found to be 3 times as high among runaway youth as among youth who have not run away (Robertson, 1989).

Furthermore, homeless youth face difficulties attending school because of legal guardianship requirements, residency requirements, improper records, and lack of transportation. As a result, homeless youth face severe challenges in obtaining an education and supporting themselves emotionally and financially. “

Homeless Youth Fact Sheet

Published by the National Coalition for the Homeless, June 2008

YOUTH HOMELESSNESS IN UTAH

By the Numbers

The number of unaccompanied* youth under 25 identified as being homeless during the 2017 Point-In-Time Count = **180**

- 18-24 = **151**
- Under 18 = **29**

The number of unaccompanied pregnant / parenting youth under 25 = **37**.

The UT Department of Education reported the number of homeless students enrolled in Utah schools 2015-2016 = **15,049** included in this number were **2,039** unaccompanied homeless students.

13,005 – were living in doubled up situations due to economic necessity or other reasons not by choice.

994 - were living in shelters

636 - were unsheltered

459 – hotels / motels

*unaccompanied youth are not in physical custody of a guardian or parent.

YOUTH HOMELESSNESS IN THE UNITED STATES

- [The National Center for Housing and Child Welfare](#) states there are between 1 million and 1.7 million homeless youth who have runaway or have been asked to leave their homes. The National Network for Youth report that over 1.9 million youth (ages 12-24) experience homelessness. Of these, 1.3 million will return home during the week. However, a half a million will be homeless for more than a week.

- According to the [US Department of HHS](#), 61.8% of homeless youth reported depression, 71.7% reported experiencing major trauma such as physical or sexual abuse, 79.5% experienced symptoms of post-traumatic stress disorder for more than a month.

- National Network for Youth report in “Youth Homeless in America”, 40 to 60 percent of all homeless youth have experienced physical abuse, and between 17 and 35 percent have experienced sexual abuse. They also cite that up to one-third of youth aging out of **foster care** experience homelessness.

- According to the [US Interagency Council on Homelessness](#), in 2014, 11-37% of former **foster youth** reported having experienced homeless and

1/4 to 1/2 experienced housing instability of some sort after aging out of the **foster care** system.

- Homeless youth are evenly male-female, although females are more likely to seek help through shelters and hotlines.
- According to the [National Conference of State Legislatures](#), between 6% and 22% of homeless girls are estimated to be pregnant. There are approximately 60,000 young parents with children living on their own and 24,000 are under 18 years of age.
- The Office of Juvenile Justice and Delinquency Prevention reports, of 13,000 juveniles arrested for sex offences in 2010, 48% were under the age of 15. This is despite the regulations outlined in the Trafficking Victims Protection Act (TVPA), which protects trafficked youth from being legally responsible for crimes committed because of being trafficked, these youths are criminalized and placed in the juvenile justice system.
- Covenant House in N.Y. found during client interviews, that of 700 youth reported to have been victims of sex tracking, 48% said their first experience was due to seeking shelter.

- 75% of homeless or runaway youth have dropped out or will drop out of school.
- 1 in 10 young adults ages 18-25 experienced homelessness over a 12-month period.
- 1 in 30 youth ages 13-17 experienced homelessness over a 12-month period.
- The prevalence of homelessness is nearly identical in urban and rural areas (9.6% in urban areas; 9.2% in rural.)
- About half of the youth who experienced homelessness over a year were homeless for the first time. In other words, there is a large, constant stream of new youth falling into homelessness.
- The top risk factor for young adults to experience homelessness was not having a high school diploma or GED. The second highest risk factor was being a single parent. The third highest risk factor was being in poverty.
- Between 20% and 40% of homeless youth identify as LGBT.
- Resources – In 2013, 223 applications were submitted for the Runaway Homeless Youth Act (RHYA) Street Outreach Program and only 50 grants were awarded. Only 10 out of 223 applications were funded for the RHYA Transitional Housing Program and only 97 of 185 Basic Center Grants were awarded during the competition. (Youth Homelessness in America – National Network for Youth)

[NATIONALLY RECOGNIZED NEEDS & ISSUES OF YOUTH EXPERIENCING HOMELESSNESS \(YEH\)](#)

[Trauma informed providers](#) – Providers with an understanding of the pervasiveness and effects of trauma in the lives of YEH. The impact of trauma is far-reaching and has a developmental impact physically, emotionally, cognitively, socially, and spiritually. Providing TIC means that services are centered in safety and empowerment through healing, hopeful and trusting relationships.

[Developmentally appropriate services](#) – Services for transition age youth (15 through 24) are limited. These youths often find themselves having to negotiate the move from children/adolescent focused medical and behavioral health care services into adult services. Adult services are rarely equipped to meet the complex needs of YEH in a manner that is developmentally appropriate, in light of their age, trauma experiences and life experiences.

[Physically and emotionally safety](#) – YEH often don't have distance from the traumatic events they have endured. As a result, the youth are easily triggered by seemingly "normal" environments and interactions. For example, a crowded, noisy waiting room or being asked questions by an untrained intake worker may prevent the youth from pursuing services.

[Low barrier access to services](#) –YEH face many barriers to care. Transportation, identification, insurance, co-pays, location, substance use, mental health issues, fear of the unknown and provider attitude and response, are just a few such barriers. Ideal services should be located in a central area, easily accessible via public transportation, providing a warm and welcoming environment and the continuation of services, *despite multiple missed appointments*. As youth often engage in services when at the point of crisis, the ability to respond to such is highly desired.

[Culturally responsive assistance](#) – YEH come from a variety of backgrounds. To be culturally responsive is to be aware that that into each interaction individuals bring all that has shaped how they think, feel, behave and interact. Many YEH initially respond to unfamiliar situations/individuals from experiences that have negatively impacted their trust of adults and systems.

[Decisions about services and assistance are made jointly between a youth and their case manager or treatment team](#)– Youth have a choice in sharing information with their identified support team.

WHAT DOES BEING HOMELESS MEAN?

US Department of Housing and Urban Development

Under 24 CFR Parts 91, 582, and 583 “Homeless Emergency Assistance and Rapid Transition to Housing: The HEARTH ACT final rule maintains four categories regarding what constitutes a person or family experiencing homelessness. The categories are: (1) Individuals and families who lack a fixed, regular, and adequate nighttime residence and includes a subset for an individual who resided in an emergency shelter or a place not meant for human habitation and who is exiting an institution where he or she temporarily resided; (2) individuals and families who will imminently lose their primary nighttime residence; (3) unaccompanied youth and families with children and youth who are defined as homeless under other federal statutes who do not otherwise qualify as homeless under this definition; and (4) individuals and families who are fleeing, or are attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions that relate to violence against the individual or a family member.

McKinney-Vento Definition - Department of Education

Subtitle VII-B of the McKinney-Vento Homeless Assistance Act (per Title IX, Part A of the Elementary and Secondary Education Act, (as amended by the Every Student Succeeds Act) defines homeless as follows:

The term "homeless children and youths"

(A) means individuals who lack a fixed, regular, and adequate nighttime residence (within the meaning of section 103(a)(1)); and

(B) includes--

(i) children and youths who are sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason; are living in motels, hotels, trailer parks, or camping grounds due to the lack of alternative adequate accommodations; are living in emergency or transitional shelters; or are abandoned in hospitals;

(ii) children and youths who have a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings (within the meaning of section 103(a)(2)(C));

(iii) children and youths who are living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings; and

(iv) migratory children (as such term is defined in section 1309 of the Elementary and Secondary Education Act of 1965) who qualify as homeless for the purposes of this subtitle because the children are living in circumstances described in clauses (i) through (iii).

Unaccompanied Youth

A child or youth who meets the McKinney-Vento education definition of homelessness and is not in the physical custody of a parent or guardian.

RESOURCES AVAILABLE TO HOMELESS YOUTH IN UTAH

During the registration process for the Utah Forum registrants were asked to respond to a series of questions. The first question asked: **What are the main services your agency provides for youth who are homeless?**

Utah agencies responded that they provide:

- National and state policy advocacy; Community Dashboards to support effective and consistent system measurement; 100-Day Challenges to catalyze community efforts to end youth homelessness. Advocacy on ending homelessness. Medicaid for former homeless youth and homeless adults.
- Homeless service provider oversight; accountability and funding; funding for Continuum of Care homeless service agencies; Federal funding and pass through dollars for programs and services; technical assistance collaboration; program alignment for agencies that house youth; address foster care transition; find set asides for former foster care youth who have aged out; oversight to coordinate funding and oversee planning; systems alignment for high risk youth; coordination of services and informal supports skills for independent living.
- Housing; overnight shelter; food; housing case management including rental and utility assistance (HEAT); food pantries; emergency shelter age 18+, rapid rehousing, permanent supportive housing; day skills residential services; transitional housing case management and therapy; Basic Center Service; financial and training services at the Youth Resource Center for homeless or at-risk youth; shelter drop-in and Street Outreach; support to transition out of foster care; medical and dental care; shelter with psycho-educational group support; and, night time teen programs.
- TALS Scholarship, educational assistance for students transitioning out of foster care; Lockers for clothing, warm showers; warm food 3 days weekly at LDS Institute; housing security deposit assistance and barrier reduction; referrals to services in the community; space for young people to participate and build a sense of community; facilitate support groups; activities for life skills development; transportation; reduction in underemployment.
- Intensive case management; commercial sexual exploitation prevention statewide and trainings on stopping/preventing human trafficking; crisis respite care, crisis counseling for youth and family, transitional support services; mental health and substance use disorder prevention and treatment; rape recovery services; utilize YES grants to provide wraparound services to assist youth at risk or currently experiencing severe mental health conditions.
- Child Welfare, Foster Care, Runaway and Homeless Youth programs; screening, assessment, treatment and recovery support services.
- High school completion courses, GED prep courses, resource advocacy; McKinny-Vento services; education school stability; advocacy and technical assistance to access public education and postsecondary education. High school education; trade education;
- Education Vocational Training Community Service; job search assistance, job placement, room and board while on Job Corps Center; education assistance; behavioral modification counseling.

- Workforce Development; work search assistance; UTA transit passes.
- Coordination of services for refugee youth; ensure services are inclusive and accessible to youth from refugee backgrounds.
- Legal counsel, courtroom advocacy, resource management.
- Sexual and reproductive health care services contraception and abortion care. Reproductive health services; Sexual health education, STI testing and supply various contraceptives; reproductive health care research on care preferences and links to other support services; Represent/support Health Centers (FQHCs) who provide direct access to primary and preventive health care for homeless youth; Child Abuse Pediatrics and Mental Health; Health Care Education and Advocacy; Medicaid coverage for former foster care youth; Medicaid for children under age 19; Medicaid for homeless individuals age 19+.

This list of resources, programs and supportive services is extensive. What was not asked, and what needs further exploration, is the level of service available vs. demand.

The effectiveness of services and the level of resources are not meeting demands as evidenced by the issues outlined in the following sections of this report. Action items that received high prioritization should be weighed against the level of resources available, the capacity of organizations to modify or develop programs and the long-term outcomes expected from program implementation.

The following section outlines the resources identified by young people who have experienced or who are struggling with homelessness and/or housing instability. The information combines what was discussed and prioritized at the Forum with information obtained from the registration process.

EXISTING SERVICES vs NEEDS

Although many services are available and are offered to young people, youth attending the Forum expressed that they did not find the service system adequate nor did it meet their needs. In the Forum registration process each participant was asked to **list two actions that policy makers, program administrators and local leaders can do to address the flow of young people falling into homelessness.**

The following Section contains statistics and information on the existing services available to transition age youth experiencing homeless in Utah prepared by subject matter experts from various government and nonprofit agencies. Included are the responses to the second registration question and suggestions offered by participants during the Forum. Forum participants prioritized their recommendations and they are listed accordingly.

Topics covered during the forum were:

- Child and Family Services
- Health Care
- Mental Health / Substance Abuse
- Housing
- Juvenile Justice and Human Trafficking
- Education
- Employment/VOC/Training

CHILD AND FAMILY SERVICES

Key Statistics:

- In **2017, 172** youth in the Division of Child and Family Services (DCFS) **custody aged out** statewide. This is defined as youth who turned 18 in DCFS care and their case was closed after the age of 18.

Youth by Region:

- Eastern: 13
 - Northern: 26
 - Salt Lake Valley: 63
 - Southwest: 20
 - Western: 50
- Using national studies on young people aging out of **foster care**, these young Utahans would experience these life events by the time they turned 21:
 - **22%** would have fathered or given **birth to a child - 37**
 - **24%** would be jailed or **commit a crime - 41**
 - **90%** would have had a **substance abuse issue** at some point in their life - **154**
 - **37%** would report they had been **homeless** at some point in their life - **63**
 - Would have lower math and reading skills and only half complete high school
 - Would likely to be involved in the criminal justice system with a **19 percent rate of incarceration – 32**

<https://dcfs.utah.gov/services/youth-services/>

https://dcfs.utah.gov/wp-content/uploads/2018/01/DCFS-Annual-Report-FY17_no-appendix.pdf

- In Salt Lake County – Volunteers of America Resource Center served 800 youth ages 14 to 22 in 2017. Of the **800, youth served, 47% or 376 youth served were in foster care at some point or had a case worker. 26% or 208 youth served had aged out of DCFS.** 10% of youth that received services from VOA were from out of state.

RECOMMENDATIONS – REGISTRATION

Case Management

Registration Response - Adopt evidence-based programming that supports intensive case management after transitioning out of custody. Increase and strengthen street outreach programs; connect youth to transition services enabling them to leave the street. Develop youth advisory models to support interventions. Develop opportunities where a safe adult is vital to the success of a young person's ability to overcome homelessness. Strengthen **foster care** transitions to community. Extend transitional services to serve youth up to age 24. implement and fund more mentoring services to provide youth with meaningful connections. Better support for LGBT youth in our community. Increase and improve mental health services and access to them. Take a more proactive approach to start identifying and engaging youth at risk of becoming homeless before it happens.

RECOMMENDATIONS – FORUM PARTICIPANTS BY PRIORITY:

(This recommendation received the most votes in the prioritization exercise, as a first, second and third priority among all Forum attendees.)

1. Increase Case Management Resources to decrease the number of cases per manager. Have managers remain engaged after youth are released from **Foster Care** or ensure mentorship or other support staff are available to support a former **Foster Care Youth** as they move to independence. Support systems should be available until age 24, or at least until age 21.

HEALTH CARE

Medicaid Availability for Young Adults

Youth aging out of foster care may qualify for 1 of 2 Medicaid programs, the Former Foster Care Youth program and the Foster Care Youth Independent Living program.

546 young adults age 18-26 are enrolled in Medicaid under the Former Foster Care Youth program and the Foster Care Youth Independent Living program. Independent Living Medicaid covers youth until age 21. No income test and could have been in foster care in a different state as long as they live in Utah now.

Targeted Adult Medicaid is a new program for people age 19 to 65 who are homeless or are in supported housing and were previously homeless, and people involved with the justice system.

102 young adults (18-26) enrolled in the Targeted Adult Medicaid program.

Low income parents, Pregnant Women, and Primary Care for adults with limited income.

1,440 young adults (18-26) in the Primary Care Network, of which 600 are parents with young children.

The Utah Premium Partnership helps cover cost of employer-sponsored insurance.

Medicaid covers mental health and substance abuse treatment

Health, Behavioral Health Concerns

1. Of **45** women between 18 and 45 identified as homeless or facing housing instability in locations across Salt Lake City in 2017; 47% had a history of forced sex; 78% had sex with a man in the past 3 months; 27% had a history of sex exchange and 13% desired pregnancy within the next year. Within this group:
 - a. 53% stated they had a chronic medical condition
 - b. 58% had a mental health condition
 - c. 38% had a substance abuse disorder
 - d. 58% were dependent on tobacco
 - e. 80% of the respondents had been pregnant at one time
 - f. 33% had no insurance and 53% reported to have Medicaid
 - g. 67% had a HS education or less (Kozlowski, Feb. 9, 2018)¹

The following table lists health information from a study conducted by Dr. David Turok, Dr. Jessica Sanders, and Dr. Kyl Myers, University of Utah.

¹ Assessing the Contraceptive Needs of Homeless Women in Salt Lake City, Zoe Kozlowski, Utah Conference for Undergraduate Research, February 9, 2018.

Characteristics associated with reproductive disparities in young (<26) HER Salt Lake participants, by Federal Poverty Level (FPL)¹

Variable	<100% FPL (n=1627)	101-300% FPL (n=1305)	Pearson chi-2(p-value)
Age			<0.001
18-19	559 (34.4%)	306 (23.4%)	
20-25	1068 (65.6%)	999 (76.5%)	
Race			<0.001
Non-white	291 (25.1%)	193 (17.5%)	
White	869 (74.9%)	909 (82.5%)	
Ethnicity			<0.001
Hispanic or Latino	486 (35.9%)	235 (20.5%)	
Non-Hispanic or Latino	869 (64.1%)	909 (79.5%)	
Sexual minority²			0.405
Yes	480 (29.5%)	371 (28.4%)	
No	1147 (70.5%)	934 (71.6%)	
Has children in household			<0.001
Yes	720 (44.3%)	350 (26.8%)	
No	907 (55.7%)	955 (73.2%)	
Housing insecurity³			<0.001
Yes	386 (24.1%)	213 (16.3%)	
No	1192 (74.5%)	1080 (82.8%)	
Prefer not to answer	22 (1.4%)	11 (0.8%)	
Food insecurity⁴			<0.001
Yes	459 (28.7%)	206 (15.8%)	
No	1131 (70.6%)	1097 (84.1%)	
Prefer not to answer	11 (0.7%)	1 (0.08%)	
On any public assistance⁵			<0.001
Yes	203 (12.5%)	53 (4.1%)	
No	1424 (87.5%)	1252 (95.9%)	
Health insurance status⁶			<0.001
None	814 (51.3%)	438 (33.6%)	
Private	85 (5.4%)	40 (2.3%)	
Public	571 (35.9%)	764 (58.6%)	
Other	118 (7.4%)	71 (5.4%)	
Study Period⁷			<0.011
Control	304 (18.7%)	195 (15%)	
Intervention	1321 (81.3%)	1107 (85%)	
Partner Status			<0.001
Married	80 (5.1%)	130 (9.9%)	
Living together	781 (49.3%)	672 (51.6%)	
Actively dating	360 (22.7%)	261 (20.1%)	

Variable	<100% FPL (n=1627)	101-300% FPL (n=1305)	Pearson chi-2(p-value)
Divorced/separated	34 (2.1%)	13 (1%)	
Single, no relationship	266 (16.8%)	193 (14.8%)	
Other	49 (3.1%)	31 (2.4%)	
Prefer not to answer	14 (0.9%)	2 (0.15%)	
Pregnancy Plans			
Never	294 (18.4%)	242 (18.6%)	0.226
Next 12 months	18 (1.1%)	9 (0.7%)	
Next 2-5 years	360 (22.6%)	325 (24.9%)	
Next 5-10 years	601 (37.7%)	483 (37.1%)	
Uncertain	313 (19.6%)	241 (18.5%)	
Reason for Visit			
Annual visit	30 (1.9%)	19 (1.5%)	0.455
Contraception	815 (51.2%)	707 (54.5%)	
EC	45 (2.8%)	24 (1.8%)	
Pregnancy test	33 (2.1%)	19 (1.5%)	
STI/STD testing	89 (5.6%)	63 (4.9%)	
Abortion	156 (9.8%)	119 (9.2%)	
Free/low-cost BC	231 (14.5%)	183 (14.1%)	
HER study	183 (11.5%)	155 (11.9%)	
Other	10 (0.6%)	8 (0.6%)	
How many times in your life have you been pregnant when you did not want to be?			
None	169 (36.9%)	66 (22.8%)	<0.001
1	204 (44.7%)	186 (64.4%)	
2+	84 (18.4%)	37 (12.8%)	
Methods Selected			
None	5 (0.31%)	7 (0.5%)	0.003
Long-Acting	844 (51.9%)	754 (57.8%)	
Short-Acting Hormonal	754 (46.3%)	529 (40.5%)	
Non-Hormonal	13 (0.8%)	13 (1%)	
Behavioral EC	11 (0.7%)	2 (0.1%)	

¹ The 2017 Federal Poverty Level is set at \$12,060/year for individuals; the definition varies based on household size.

² Sexual minorities include individuals identifying as “mostly heterosexual,” “bisexual,” “mostly or exclusively gay/lesbian” or “other”

³ Housing insecurity was defined as individuals who reported being currently homeless/in a shelter, in temporary or transitional housing, staying temporarily with a friend or family member, and/or reported difficulty paying for housing within the past 12 months

⁴ Food insecurity was defined as individuals who reported receiving food stamps, and/or reported difficulty paying for food within the past 12 months

⁵ Public assistance includes: food stamps, WIC, unemployment, or Temporary Aid to Needy Families

⁶ Private insurance includes insurance received through an employer, student insurance, or

parental insurance plans; Public insurance includes Medicaid, Disability or Medicare, and military or VA benefits; Other insurance status includes individuals who did not know their insurance status and those who preferred not to answer.

⁷ Control period refers to the 6-month control period where women received standard of care at all clinics; Intervention periods to a year-long period where clinics improved stocking & provider coverage and women could receive all methods at no cost.

⁸ Participants could select multiple reasons for a visit; thus, numbers may not total participation numbers.

RECOMMENDATIONS – REGISTRATION

Support access/funding for contraceptive care to avoid unintended pregnancy which can push adolescent women into homelessness. Support wide range of preventative services for minority populations. Improve access to healthcare for all health needs including mental health. Recognize poverty as a public health crisis not a lack of will. Provide Medicaid Expansion integrated with access to employment with living wages.

RECOMMENDATIONS – FORUM PARTICIPANTS BY PRIORITY

1. Create One-Stop Shops for health services including sexual health care services and prevention. Services offered should include; substance abuse, mental health, homelessness and financial education.
2. Health insurance aid applications are difficult to complete, take significant time and effort, and basic information to complete the forms may not always be available. Peer advisers or assistance with the process needs to be made available and marketed. Education on insurance coverage needs to be comprehensive and made readily available to YEH.
3. Increase mental health support services.

MENTAL HEALTH / SUBSTANCE ABUSE

- Nationally, research shows that TA youth living on the streets or in shelter evidence a greater frequency and greater severity of mental health problems than housed peers.
- In the Journal of the Society of Social Work and Research (2014), between 40% and 80% of youth experiencing homelessness had suicidal ideation and between 23% and 67% made at least one suicide attempt. These issues are also shown to predict failure over time in other important areas such as academics.
- Due to the differing criteria between HUD and the Department of Education, estimates for the number of young people who are homeless and exhibiting mental health, substance abuse or other psychological problems is extremely hard to calculate with any accuracy.
- Studies varying in sample size have reported rates of depression for homeless youth age 18-24 ranging between 16-54% compared to a rate of 10% for the general youth population of the same age group.
- It is estimated that rates of disruptive behaviors among homeless youth are four time higher compared to housed youth. One study of 444 homeless youth reported 76% met the diagnostic criteria for conduct disorders.
- One in every four to five youth in the general population meet criteria for a lifetime mental disorder that is associated with severe role impairment and/or distress (11.2% with mood disorders, 8.3% with anxiety disorders, and 9.6% behavior disorders). (from youth.gov)
- The rate of serious mental illness was higher for 18 to 25-year olds (7.4 percent) in 2008 than for any other age group over 18. In addition, the onset for 50 percent of adult mental health disorders occurs by age 14, and for 75 percent of adults by age 24. (from youth.gov)

In a sample of 16-19 year old runaway and homeless youth from the Midwest (Youth.Gov Behavioral Health) <https://youth.gov/youth-topics/runaway-and-homeless-youth/behavioral-health>

- 42% met the criteria for alcohol abuse and 39% met the criteria for drug abuse
- 74% met the criteria for conduct disorder
- 31% met the criteria for major depression
- 36% met the criteria for post-traumatic stress disorder
- ±66% met the criteria for co-morbid disorders

Studies have shown that family dysfunction and history of psychiatric disorders is one of the most important risk factors for poor behavioral outcomes in youth. Family issues include: physical, emotional, or sexual abuse; parental neglect; and, family conflict. Individual factors including age, history of justice system involvement, length of time homeless having risky sexual behaviors, and coping abilities are also associated with psychiatric disorders.

Rates of mental illness and substance abuse can vary considerably by population subgroup. Homeless youth that identify as lesbian, gay, bisexual or transgender are at greater risk of deleterious outcomes compared to their peers. They experience higher rates of familial rejection, pervasive societal discrimination, violence and trauma which can contribute to serious mental health problems.

Mental Health Issues Impacting Young People		
Issues	What's available now?	Challenges Identified Needs
Youth need education on mental illness and resources	NAMI has MH education programs. Family Resource Facilitators and Case Management services are available within public MH/SA systems. 211 is developing a resource list for transition age youth.	NAMI programs may not be available statewide. There is a lack of education on resources available in the community. It is difficult to navigate the system. The initial process of getting into services could be arduous.
Access to treatment	Public MH/SA systems provide comprehensive MH/SA services	Many public MH/SA centers primarily serve Medicaid clients. There could be a long wait list for public services. Private providers are available only to people with insurance.
Changing of therapists results into gaps or cessation of treatment entirely	Department of Human Services (DHS) is developing an Integrated Service Delivery (ISD) model which encourages seamless treatment planning and cross system collaboration (DCFS/DSPD/DJJS/DSAMH/etc.)	ISD primarily affects clients receiving services from DHS. ISD has not been fully implemented.
Transitioning from children to adult MH/SA systems	DHS has a federal grant to help young people with or at risk of developing MH challenges transition into adulthood. Public rural MH/SA facilities often don't differentiate between children and adult programs	The grant is time-limited and not statewide, Children and Adult services are often not developmentally appropriate or appealing to transition age youth. Many public urban MH/SA providers have separate children and adult programs with specific age requirements.
Treatment should be strength-based and involve youth and family voice;	There has been increased focus and training on strength-based approach.	In addition to training, there needs to be regular coaching to ensure strength-based approach. We need to teach youth to use strengths in their daily lives.
Treatment plan should incorporate person-centered and a cross system collaborative approach with attention to vocation, education, housing, independent living skills and wellness,	There has been increased focus and training on person-centered approach. Local Interagency Councils or Multi Agency Staffing occurs throughout the state regularly.	Collaboration among transitional services including vocation, education, housing, MH/SA, and health sectors are inconsistent. Not all services focus on developmental issues based on mental health needs.

Lack of family and social support	Family and adult peer support services are available through public MH/SA systems.	Not enough family and adult peer support staff are employed in the human services system. There is difficulty accessing community resources. Continuing and follow up care is not always present in discharge planning.
Frequent crisis scenarios may impede youth's ability to grow/progress	DHS is developing a Stabilization and Mobile Response model and partnering with the public MH system to better address mobile solutions.	Individualized crisis prevention services may not be a focus of treatment.

RECOMMENDATIONS – Several issues listed in the column Challenges / Identified Needs were raised in group discussions during the Forum and are related to recommendations listed under other topics.

HOUSING

Findings from Voices of Youth Count, an initiative of Chapin Hill at the University of Chicago, Nov. 2017

“one major challenge to putting solutions in place has been the lack of credible data on the size and characteristics of the youth population who experience homelessness and a way to track how this population changes over time”.

- Nationally, 1 in 10 young adults ages 18 to 25 endures some form of homelessness in a year. Half of the prevalence involves couch surfing only.
- 1 in 30 adolescent minors ages 13 to 17 endures some form of homelessness in a year. A quarter of the prevalence involves couch surfing only.

STATE HOMELESS MANAGEMENT INFORMATION SYSTEM (HMIS) STATISTICS:

The Salt Lake County PIT counts for unaccompanied youth 2017

- # of **youth under 25** identified in the **2017 sheltered PIT Count = 146**
- # of **youth under 25** identified in the **2017 unsheltered PIT count 34**
- # of **parenting youth** in the **2017 sheltered PIT count = 22 (14 in 2016); 0 unsheltered**
- Salt Lake County **LES** (5 school districts and 5 charter schools) reported **617 unaccompanied homeless youth for 2016**, submitted in the EdFacts file)

Statewide housing information			
Housing Inventory by County	2010	2018	Difference
Emergency Shelter – Salt Lake	6 (reduced from 24 SL Co receiving center total)	36	+30
Emergency Shelter – Weber	0	16	+16
Emergency Shelter – Utah Co	0	12	+12
Transitional Housing (TH)– group homes, FUP vouchers	37	62	+25
Permanent Supportive Housing, including Rapid Rehousing	0	34	+34

Some data may be missing. New 16 bed youth shelter in St. George is being planned and will be operating by the summer of 2018.

Between 2010 and 2018, 58 shelter beds were added to the inventory of beds dedicated to serving homeless youth. In addition, 20 transitional housing units and 34 housing options were increased to now total 112 housing opportunities.

Youth who are 18+ can also benefit from adult programs i.e., TANF, Section 8, Rapid Rehousing. These options are not included in the above options.

The Housing Authority of the County of Salt Lake has prioritized youth who have aged out of **foster care** and offers a Family Unification Program Voucher (FUP). This program's cap changed in August of 2016 from an 18 month to 36-months.

Results for the 39 young adults that were placed on this voucher:

- 4 Did not recertify after the first year (12.23 months)
- 14 Fully Participated (18.25 months)
- 5 Evicted (8 months)
- 5 Expired vouchers (12.96 months)
- 2 Non-compliant (7.97 months)
- 6 Requested to be closed (10.04 months)

Housing Insecurity:

In the Salt Lake County, Health Education Research (HER) study as reported by Dr. Lori Gawron, 82% (1,080) of women surveyed reported housing insecurity while only 16.3% reported they were secure in their housing. All the women surveyed were between the ages of 18 – 25. These women, all had incomes below the 100% Federal Poverty Level (FPL). Additionally, 24.1% of those between 101% - 300% (386) reported housing insecurity. Therefore, young women under the age of 24 who are living below 100% FPL, face a high level of housing insecurity.

Affordable Housing Availability:

Utah Housing Coalition / Volunteers of America, Utah Identified:

Lack of affordable housing options where households pay 30% of income toward rent

Ex: Wage: \$9 hr.

Gross Monthly Income: \$1,560

30% of monthly income for rent: \$468

The Fair Market Rent (FMR) for a 1 Bedroom Unit is currently \$800 if utilities are included in rent.

- Rents are too high for low wage earners.
- Supply of housing does not meet the demand, so rents becoming more expensive.
- Development of affordable housing is too slow to meet demand.
- Eviction rates of youth from some TH and permanent housing programs is 50% or higher.
- Dedicated housing for homeless youth is not available in every county.

RECOMMENDATIONS – REGISTRATION

Recognize youth ages 18-25 as a unique group of individuals that need specialized services as they “age-in” to adulthood. Increase housing opportunities to include: more set aside units within developments; expansion of the FUP or other housing voucher program; expand short term, transitional and long-term housing opportunities; develop programs where young people can share housing. Even with money in hand, the housing inventory is too limited and the cost too high to sustain. Prioritize youth housing projects in the Utah Tax Credit process and allow for congregate housing or group homes.

RECOMMENDATIONS – FORUM PARTICIPANTS BY PRIORITY:

1. Create more housing opportunities that include more vouchers
2. Offer eviction prevention, and life skill training, increased case management, etc.
3. Create/advance more opportunities for young people to co-locate with others
4. Offer more deposit assistance, leasing and unit securing assistance

JUVENILE JUSTICE

During 2016, Utah's population of 10 to 17-year-old youths numbered 399,262, a 2.2% increase over 2015. Continuing a trend that began in 2003, the group is expected to grow substantially over the next several years and exceed 433,000 by 2020. During FY 2016, most of Utah's youths (74.8%) lived in four urban counties along the Wasatch Front (Weber, Davis, Salt Lake, and Utah). Another 10.8% lived in three of the state's fastest growing counties (Cache, Washington, and Iron).

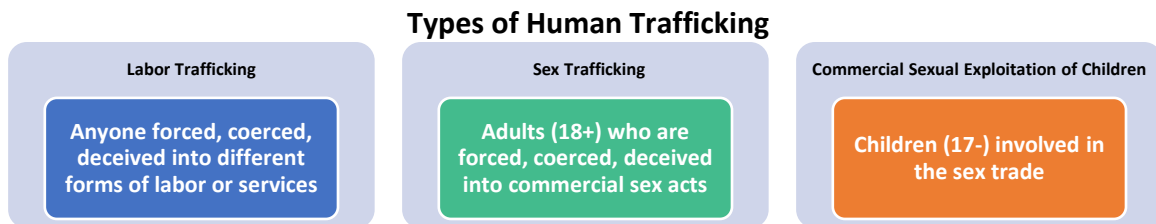
Based on an analysis of individuals who turned 18 during the 2015 calendar year, 23.4% of Utah's youths will have contact with Utah's juvenile justice system by age 18; 2.6% of Utah's youths will be found to be victims of dependency, neglect, or abuse; and 17.9% will be charged with a felony- or misdemeanor-type offense. For some youths, these events will lead to supervision by Juvenile Court Probation or custody to the Division of Juvenile Justice Services or the Division of Child and Family Services

- The Utah Division of Juvenile Justice Services (JJS) provides a continuum of intervention, supervision and rehabilitation programs to at-risk and delinquent youths. JJS operates or contracts
 - 12 receiving centers for runaway, homeless or arrested youths;
 - 11 secure detention centers for arrested and adjudicated youths;
 - 6 long-term secure facilities for youth in confinement up to age 21.
 - Additionally, JJS operates or contracts for residential treatment for youths ordered into state custody.
- In fiscal year **2017, JJS provided program services to 6,411 youths in both custody and non-custody setting.** Programs include early intervention, youth services, receiving centers, home and locked detention, community-based programs, secure facilities, and transition services.
- A **2016 statewide analysis** report from Utah's Juvenile Justice Working Group, **51% of juveniles are re-adjudicated or re-convicted of a felony or misdemeanor within two years. The data also indicates that 40% of youth reoffend within the first three months of release.**
- Youth in JJS custody have case management to support and monitor progress on their targeted risk factors in individualized treatment plans. Youth participate in monthly Child & Family Team meetings with their support network to plan for their transition back home. In **2017**, approximately **500 youth transitioned out of JJS into housing options** that included, home, kinship placements, and independent living. Youth who reoffend may end up in the adult corrections system.
- The **average age of youth transitioning out of JJS yearly is 17.7 years**, (13% females and 87% males.) Youth transition locations are 80 % in urban areas and 20% in rural areas. Racial disparities increase as the youth progress deeper into the system, especially once they are removed from their home. **Youth of color, though they make up 25% of Utah's youth population, comprise nearly 50% of the secure care (youth prison) population.** In fiscal year **2017, 108 youth were returned to the community in an independent living placement.**
- Transitioning youth can become homeless due to a variety of reasons including fleeing or being forced out of homes, feeling unwanted because of their sexual orientation or gender identity,

lack of employment skills, unmet mental health or substance abuse issues, negative peer associations, and poor living conditions. (See JJS: <https://jjs.utah.gov/>)

Human Trafficking

The following information has been collected from the Trafficking in Persons Program (RIC-AAU)'s Case Management and Out Reach services, and from the 'Labor and Sex Trafficking Among Homeless Youth, A Ten-City Study' from the Modern Slavery Research project of the Loyola University of New Orleans in effort to show correlation between labor and sexual exploitation and homelessness.



Human trafficking refers to anytime a woman, man, or child is forced to have sex or work while someone else profits. The Commercial Sexual Exploitation of Children (CSEC) is the only type of trafficking where force, fraud, or coercion does not have to be present. CSEC includes survival sex (food, shelter, clothing, money, etc.) and the exchange of sex for anything else of value.

I. Labor and Sex Trafficking Among Homeless Youth – A Ten-City Study **Loyola University of New Orleans**

Between February 2014 and June 2016, researchers from Loyola University New Orleans's Modern Slavery Research Project were invited by Covenant House International and ten of their individual sites in the United States and Canada to serve as external experts to study the prevalence and nature of human trafficking among homeless youth aged 17 to 25. Researchers interviewed 641 homeless and runaway youth.

Key Findings

68% of the youth who had either been trafficked or engaged in survival sex or commercial sex had done so while homeless.



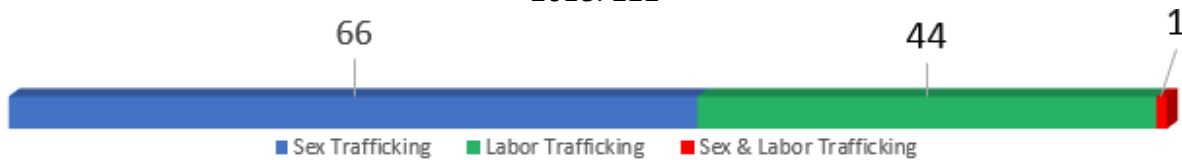
91%
of youth reported being offered lucrative work opportunities that turned out to be fraudulent, scams, or sex trafficking.

RISK FACTORS for Victimization:

- ✓ Poverty
- ✓ Unemployment
- ✓ History of sexual abuse
- ✓ History of mental health issues
- ✓ Family involvement in the sex trade or gangs

II. The following data was collected by the Trafficking in Persons (TIP) Program at Refugee & Immigrant Center – Asian Association of Utah.

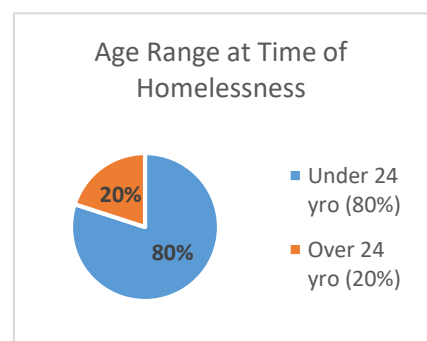
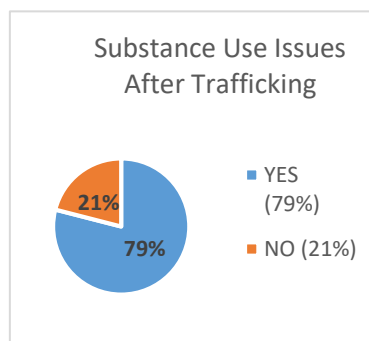
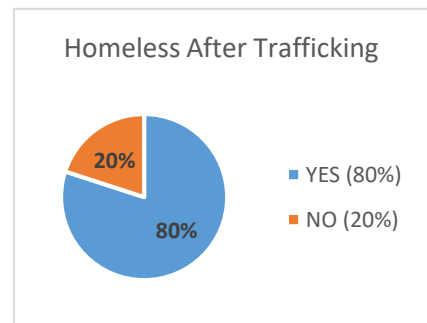
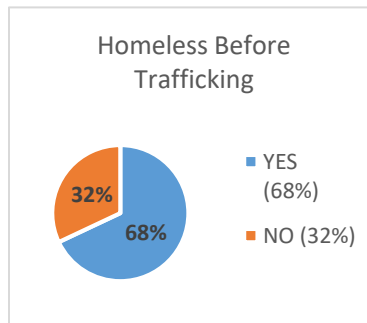
Individuals receiving services through TIP Program from October 1st, 2016 - February 28th, 2018: 111



**SEX TRAFFICKING DATA
Case Management Services TIP Program**

The National Human Trafficking Hotline received 724 calls that referenced Utah since 2007. The total number of cases reported was 164. For the current year, the NHTH has received 102 human trafficking calls resulting in 33 human trafficking cases.

Of these, 18 involved sex trafficking, 6 Labor trafficking and 3 involved both. Nine cases involved minors, 22 involved adults.



Between December 2017 and February 2018, the TIP Drop-In Center provided basic needs (food, clothing and hygiene) and medical care to 85 individuals. Of those 85, 21 individuals were identified as survivors of sex trafficking and were successfully enrolled in comprehensive case-management services.

Individuals Served at TIP's Drop-In Center: 85



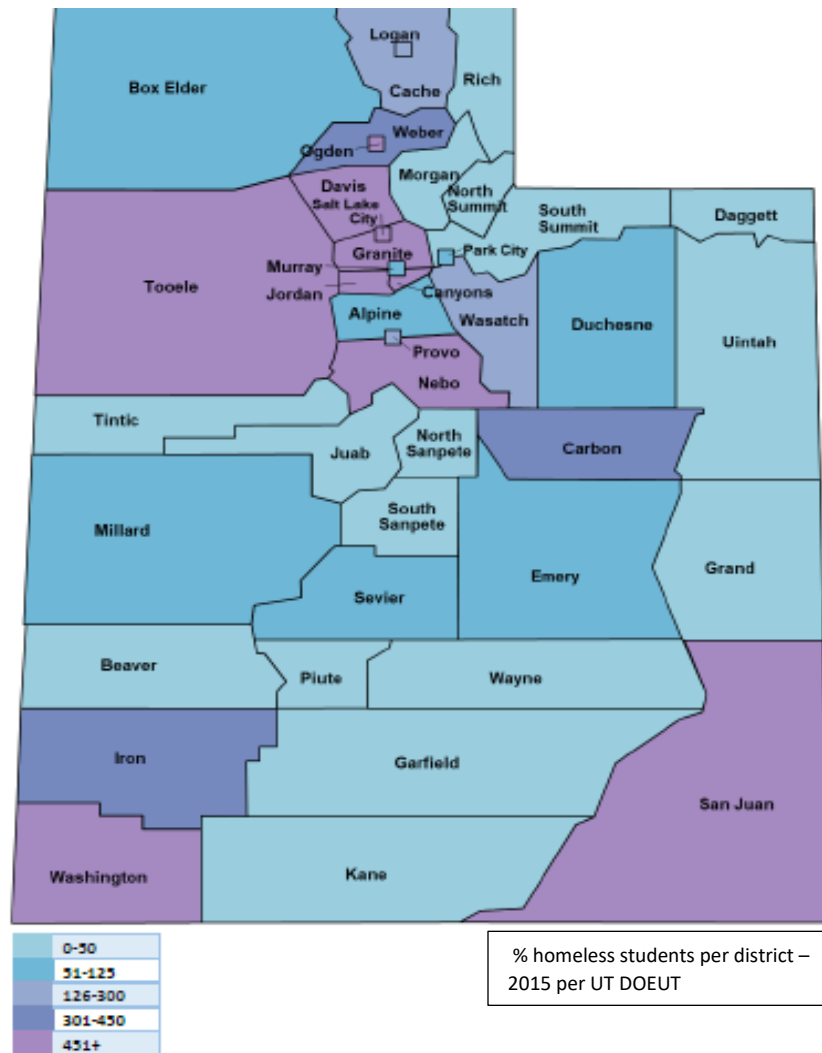
RECOMMENDATIONS – FORUM PARTICIPANTS BY PRIORITY:

1. Invest in more residential safe houses when detention and state custody are not the answer.
2. Adopt restorative justice versus punitive measures.

EDUCATION

- In the US, most students identified as homeless share housing with others due to loss of housing, economic hardship, or a similar reason. Shelters are the next most commonly used type of housing, with others having a primary nighttime residence of hotels or motels. Nationally, 3% were identified as unsheltered. (CSPR summary)
- The Department of Education under the McKinney-Vento legislation Homeless Education Act of 1987 has a broader definition of homelessness than used by the US Department of Housing and Urban Development. In addition to youth living on the street, shelter, transitional housing or places not fit for human habitation, the DOE includes youth who are sharing the housing of another person because of economic hardship. DOE also counts abandoned children and children awaiting foster care placement. Using the DOE definition, the number of homeless youth is significantly higher than reflected by HUD’s HMIS or PIT data.

- Local Education Agency (LEA) Consolidated State Performance Report (CSPR) for **Utah, School Year (SC) 2015-2016 reported 2,039 Unaccompanied Homeless Youth** by student characteristics statewide.



- **The total number of all homeless youth in Utah enrolled in school for 2014-2015 using the DOE definition was 14,999.**

- (In the US, 1,260,721 children were reported as being homeless during this time)

UT School District - 2017	Total Number of Homeless Students
Canyons	1,398
Davis	1,238
Granite	942
Jordan	2,211
Tooele	483
Washington	830
Nebo	1,345
Ogden	895
Salt Lake	920
San Juan	712

- Homeless Children/Youth (HCY) by Nighttime Residence for 2015-2016 SC reported 86.16% (13,005) were doubled up; 3.04% (459) were in hotels/motels; 6.59% (994) were in shelters, transitional housing or awaiting foster care; and 4.21% (636) were unsheltered.

- For 2017, the highest number of students who reported as homeless using DOE criteria by school district were:

NOTE:

TITLE 1 PART A

1. Starting in 2017-2018, all States must disaggregate achievement and graduation rates for homeless students
2. All LEAs that receive Title 1 Part A funds must reserve funds to provide educationally related support services to homeless children and youth. These funds should be used as a last resort when other resources are not available (the National School Lunch Program, access to public health clinics, etc.). These funds can cover costs associated with but not limited to:
 - a. Items of clothing
 - b. Clothing and shoes for physical education classes
 - c. Personal school supplies
 - d. Birth certificates and other documentation
 - e. Immunizations
 - f. Food
 - g. Medical and dental services, eye glasses and hearing aids
 - h. Counseling to address anxiety related to homelessness impeding learning
 - i. Outreach to students in shelters, motels or temporary residences
 - j. Extended learning time to compensate for lack of quiet time for homework and educational activities and tutoring
 - k. Improving parental involvement
 - l. Fees for AP, IB testing, and for college entrance exams such as the ACT or SAT testing



RECOMMENDATIONS – REGISTRATION

Outreach to at-risk school age youth. Coordinate services to include education and training for transition age youth with mental health needs. Grow successful local programs. Develop ways to foster stronger trusting relationship between youth and educational providers. Reduce stigma of

homelessness. Implement programs to evaluate if high school students' needs are being met and developing individualized programs to prevent homelessness if they are at risk for homelessness or McKinney Vento youth.

RECOMMEDATION - FORUM PARTICIPANTS BY PRIORITY

1. Do more to keep kids in school and modify “Zero Tolerance” policies which can further prevent young people from staying in school.
2. Look to replicate programs that offer students showers, food, clothing assistance, etc.
3. Increase prevention programs in schools or in-home programs for addressing trauma and other mental health issues.
4. Ensure HS credits are transferable between schools and districts. (model the migrant student program.)

EMPLOYMENT/VOC/TRAINING

- **The Workforce Innovation and Opportunity Act (WIOA)** is a federal law enacted in 2014 and was designed to help job seekers gain access to training, education, employment and support services. At-risk youth ages 14-24 are among the target populations identified to receive services. The WIOA Youth Program is administered through the Department of Workforce Services (DWS). According to the DWS Annual Report for 2015:
 - 2,540 youth are served per year
 - Requirement to expend 75% of funds on Out of School Youth
 - Additional funding is provided to WIOA Youth Program Transition to Adult Living for children who have aged out or are about to age out of foster care.

**Key measures have changed so current data is not available.*

- **Division of Rehabilitation Services** assists individuals with disabilities prepare for and attain meaningful employment and independence.
 - 5,746 Utahans were served
 - 26% of individuals served were transition age youth with disabilities.
- **Job Corps** is a government program under the Department of Labor that provides free trade training and high school education to youth 16-24. There are two centers in Utah.
 - Clearfield currently serves 895 students and has the capacity for 1002.
 - Weber Basin currently serves 155 and has a capacity for 170.

Labor

- **Youth Labor Statistics**
 - Utah labor Force- 20% or 283,376 are age 16-24.
 - Unemployed youth in Utah - 6% (2016 Department of U.S. Bureau of Labor)

CTE

- Career and Technical Education (CTE) provides students with a distinct set of skills, yielding specialized knowledge to succeed in future careers. Utah State Board of Education (USBE), Utah System of Higher Education (USHE), and Utah College of Applied Technology (UCAT) are responsible for providing the majority of the network of resources for individuals seeking career and technical education in Utah.
 - i. USBE- average student age- Between 15.2 and 16.8
 - ii. USHE- average student age- Between 23.8 to 25.2
 - iii. UCAT- average student age- Between 27.6 – 28.9
- The top 10 fast growing occupation groups (according to DWS Career and Technical Education Report) are as follows:
 - iv. 44.4% Computer and Mathematical Occupations
 - v. 35% Healthcare Support Occupations
 - vi. 32.7% Personal Care and Service Occupations
 - vii. 32.6% Construction and Extraction Occupations
 - viii. 32.5% Business and Financial Operations Occupations

- ix. 32.2% Healthcare Practitioners and Technical Occupations
- x. 32.1% Food Preparation and Serving Related Occupations
- xi. 27.3% Management Occupations

Obstacle: There is limited data concerning the transition age homeless population.

FORUM PARTICIPANTS BY PRIORITY

CREATE MORE EMPLOYMENT MENTORING OPPORTUNITIES AND JOB TRAINING PROGRAMS

1. Offer private business owners funding for training/hiring homeless youth. Broaden case management to include job and career training. Provide funds ear-marked for transitional programs serving Youth and work; Improve placement into career training programs. Focus on Youth Employment and Budgeting while in High School.
2. Develop more job mentorships for young people and request employers to help young people remain employed.
3. Create a robust program for young people to engage in on-the-job training with jobs that pay a living wage.

RECOMMEDATION - FORUM PARTICIPANTS BY PRIORITY

The following additional recommendations were also identified but are not linked to a previously listed topic.

1. Improve agency coordination to make sure youth are not falling through the cracks. Develop an interdepartmental committee to coordinate services (e.g. housing, employment...) for transition age youth.
2. Improve outreach, information provided in places youth will see it.
3. PREVENT homelessness by reducing the out-of-home care population in child welfare.
4. prioritize reunification for appropriate youth
5. Create and improve transportation access and transit resources for young people who need to work, stay in school and/or access services while homeless.
6. Develop additional peer to peer mentoring programs
7. Aggressively utilize electronic media, social media and other marketing tools to connect youth to service providers, including all High School youth not just those experiencing homelessness. (suggestion - Promote information on public transit)
8. Increase the age to leave DCFS custody to 21, and support services to 24.
9. Promote ways to reduce the stigma of Homelessness to aid young people to see help.

FOLLOW-UP EVENT

STATE ADVOCACY INSTITUTE

April 11, 2018, STATE HUMAN SERVICES OFFICE - 1:30 – 4:30

Changing State Policies in Utah – Hosted by SchoolHouse Connection

Schoolhouse Connection is a national organization working to overcome homelessness through education. They have chosen Utah as one of 10 states to work with to support policies that directly reduce the number of youth experiencing homelessness. Staff from SchoolHouse Connection attended the March 23, 2018 Forum and returned to Utah on April 11th to host a follow-up event.

At the State Advocacy Institute, the following findings from the Forum were discussed:

State policies:

HOUSING

1. Allow minors to access housing/shelter without parental consent.
2. Allow young people to share housing
3. Resurrect the program which gave landlords incentives to accept vouchers, especially from young people.
4. Prioritize youth housing set-aside units within the Utah Tax Credit application process, incorporating this preference in the Allocation Plan. Allow for congregate housing (roommates, multiple units in the same building, etc.)

EDUCATION

1. Increase high school graduation and intervene in the school-to-prison pipeline.
2. Restorative justice move away from suspension, expulsion, punitive discipline.
3. Modify “Zero Tolerance” policies
4. Develop individualized programs for McKinney Vento students.
5. Ensure full and partial high school credits are accrued and transferable between schools and districts.
6. Increase options for parenting youth
7. Provide K-12 and college students access to showers, food, clothing assistance, etc.
8. Liaisons on college campuses to support students experiencing homelessness, as well as those who have aged out of foster care and transitioned out of JJ facilities
9. Create a priority for on-campus housing, including housing that stays open year-round.

EMPLOYMENT

1. Fee waivers for birth certificates and IDs.
2. Allowance for unaccompanied homeless youth under 16 to get IDs without parental signature.
3. Offer private business owners a tax credit for training/hiring homeless youth.
4. Fund a new young adult employment program for recently homeless young adults and those who have aged out of foster care.

5. Young people will provide peer support for teenagers in care and McKinney-Vento high school students.
6. Self-advocacy, life skills, tenant self-advocacy, services availability/access/coordination, housing navigation, soft skills to applications to job retention to skill acquisition to advancement.
7. Creates immediate jobs for the young adults, increases employment for teens.

MENTAL HEALTH

1. Insurance – Youth have 1) a lack of insurance, 2) a lack of knowledge of how the insurance system works
2. Co-pays – Youth have limited resources and cannot cover insurance premiums or co-pays.

FEDERAL AGENCY POLICIES AND PROGRAMS

Housing

- HUD's more restrictive definition of what constitutes homelessness for youth creates some barriers for unaccompanied youth who need housing.
- FUP vouchers should allow for shared housing for young people leaving homelessness.
- Housing assistance and supportive housing options should be readily available to homeless young people after release from substance abuse treatment programs.

Education

- Coordination of funding on should maximize resources and ensure that Title 1 Part A dollars are used in the most effective ways to fill gaps in existing support system. Reporting systems should allow for flexibility and be supportive of local decision making.

Follow-up webinar planned for July 13, 2018

Federal Policy Observations and Recommendations to Support Efforts to End Youth Homelessness

**(developed from: *Federal Policy Solutions to Prevent and End Youth and Young Adult Homelessness, Proposed Systems Series, Vol.1 March 2017*
National Network for Youth, Washington, DC)**

DATA: improve data collection, assessment and coordination between federal agencies: Data collection and tracking systems need to be coordinated and streamlined to gain a better understanding of the number of youth experiencing homelessness. Community data collection should include should utilize multiple methodologies to capture both couch-surfing and street homeless.

HOMELESS DEFINITION: align federal definitions of homelessness to ensure every youth can be served through utilization of all federally funded programs designed to assist persons experiencing homelessness: Continuums of Care should have flexibility in designing service delivery systems that support homeless youth using federal funds under an expanded definition of homeless.

RESOURCES: increase community system resources to quickly respond to short and long-term episodes of homelessness experienced by youth and young adults

SUBSTANCE ABUSE: improve access to treatment options for youth who are addicted or experiencing substance abuse disorder: Housing options incorporating treatment and support using evidence- based designs should be encouraged.

FEDERAL AGENCY COORDINATION: improve coordination of services and programs between DOJ, HUD and HHS in partnership with RHY to ensure justice involved youth are presented with appropriate housing and services to lessen recidivism and smooth their reentry into the community

FOSTER CARE: incentivize development of collaborative public systems that prevent or shorten experiences of homelessness among young people with child welfare involvement, whether aging out or exiting to another setting (adoption, reunification, kinship care, etc.).

CONGREGATE CARE: secure federal support for congregate care programs tailored specifically addresses the needs of homeless youth

EDUCATION: assist homeless youth overcome barriers to accessing and completing secondary and post-secondary education by developing and issuing guidelines for school districts

HUMAN TRAFFICKING: equip RHY providers with the resources necessary to protect youth from human trafficking

MENTORING: Enable RRY to secure employment and achieve financial independence by developing additional work mentoring and supportive employment programs

Appendix

**Forum presentation – United States Interagency Council on
Homelessness**

PRESENTATION - United States Interagency Council on Homelessness

UTAH'S FORUM ON TRANSITION AGE YOUTH EXPERIENCING HOMELESSNESS: OVERVIEW OF FEDERAL EFFORTS

March 23, 2018

Our Vision

No one should experience homelessness.

No one should be without a safe, stable place to call home.



Start at the end. Aim high.

Every community will have a **comprehensive response** in place that ensures **homelessness is prevented whenever possible**, or if it can't be prevented, it is a **rare, brief, and non-recurring** experience.

Driving Progress

Federal Vision: Coordinated Community Response

#1 - Build the **foundation** for a coordinated and comprehensive community response

#2 - Build the **capacity of local communities** to implement the components of a coordinated and comprehensive community response

Learn more: [Coordinated Community Response to Youth Homelessness](https://www.usich.gov/tools-for-action/coordinated-community-response-to-youth-homelessness) (<https://www.usich.gov/tools-for-action/coordinated-community-response-to-youth-homelessness>)

Achieving the Goal

Criteria and benchmarks define the **essential elements of a comprehensive response** and the **outcomes** that response must be able to achieve.

The Essential Elements

Criteria

- Identify all unaccompanied youth experiencing homelessness
- Prevention and diversion strategies; immediate access to low-barrier crisis housing and services
- Coordinated entry processes
- Act with urgency
- Continue to prevent and quickly end future experiences of homelessness

Benchmarks

- Few youth experiencing homelessness at any given time
- Swiftly connected to safe and stable housing opportunities and permanent housing options
- Core Outcomes

The Work Underway:

A Snapshot

- Strengthening **Federal Strategic Plan to Prevent and End Homelessness**
- Sustaining **Data-Driven Focus**
 - Federal efforts
 - Chapin Hall: Voices of Youth Count
- Piloting **Criteria and Benchmarks**
- **Coordinated Community Response**
- Expanding **Evidence Base** and **Building Capacity**
 - Federal Grants
 - 100-Day Challenges
 - TLP Special Population Demonstration Project
- Ongoing **collaboration** with **A Way Home America**

Adding to Your Toolbox

- **Coordinated Community Response**
https://www.usich.gov/resources/uploads/asset_library/Youth_Homelessness_Coordinated_Response.pdf
- **Criteria and Benchmarks for Achieving the Goal of Ending Youth Homelessness**
<https://www.usich.gov/tools-for-action/criteria-and-benchmarks-for-ending-youth-homelessness>
- **Using Homelessness and Housing Needs Data to Tailor Local Solutions**
<https://www.usich.gov/tools-for-action/using-homelessness-and-housing-needs-data-to-tailor-and-drive-local-solutions>
- **Findings and Implications from Recent Reports** <https://www.usich.gov/tools-for-action/the-challenges-we-must-face-together-findings-and-implications-from-recent-reports-and-data>
- **USICH - Ending Youth Homelessness** <https://www.usich.gov/goals/youth>
- **HUD Resources for Youth Homelessness** <https://www.hudexchange.info/homelessness-assistance/resources-for-homeless-youth/>
- **HHS/ACF - Runaway and Homeless Youth** <https://www.acf.hhs.gov/fysb/programs/runaway-homeless-youth>
- **Coordinated Entry Processes: Building Mutual Engagement between Schools and Continuums of Care** <https://nche.ed.gov/downloads/briefs/coord-entry.pdf>
- **Case Studies: Building School/Housing Partnerships for Families Experiencing Homelessness**
<https://www.usich.gov/tools-for-action/case-studies-building-school-housing-partnerships-for-families-experiencing-homelessness>

- [Case Studies: Higher Education Partnerships for Ending Unaccompanied Youth Homelessness](https://www.usich.gov/tools-for-action/case-studies-higher-education-partnerships-for-ending-unaccompanied-youth-homelessness)
<https://www.usich.gov/tools-for-action/case-studies-higher-education-partnerships-for-ending-unaccompanied-youth-homelessness>

Get Involved

Sign-up: [Bi-Weekly Newsletter and Social Media \(@USICHgov\)](#)

Speak up: Stakeholder Input and Feedback – piloting criteria and benchmarks, revising the federal strategic plan

Join In: Federal Regional Interagency Efforts, State and Local Efforts (e.g., YHDP, 100-Day Challenges)