Homeless Children and Youth
Causes and Consequences

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September 2009
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ACKNOWLEDGMENTS
This project was funded by the Columbia Center for Homelessness Prevention Studies. Special thanks to Janice L. Cooper, Morris Ardoin, Diana Barnes-Brown, Shannon Stagman, Telly Valdellon, and Amy Palmisano.
Housing plays a pivotal role in the well-being of children and families. Stable housing is a critical factor for positive child and youth development. Unfortunately, the number of homeless families with children has increased in recent years due to the lack of affordable housing. On top of that, the current economic recession and the housing crisis further increase the likelihood of homelessness among children and youth.

Who are Homeless Children and Youth?

By and large, homeless children and youth fall into one of two groups: children and youth who experience family homelessness and those identified as unaccompanied youth. While the definitions of homeless may vary slightly by federal agencies, the Department of Education has a broad and comprehensive definition of homeless children and youth established under the McKinney-Vento Act. The education law defines homeless children and youth as those who do not have a stable, consistent place to stay at night.

For the purpose of this brief, children and youth who are homeless with their parents will be referred as children living in homeless families and those who are homeless on their own are referred to as unaccompanied youth.

According to the McKinney-Vento Homeless Assistance Act, which was reauthorized as Title X, Part C, of the No Child Left Behind Act (P.L. 107–110), the term “homeless children and youths”

♦ means individuals who lack a fixed, regular, and adequate nighttime residence

♦ includes:

(i) children and youths who share the housing of other persons because of loss of housing, economic difficulties, or other similar reasons; those living in motels, hostels, trailer parks, or camping grounds because they lack alternative adequate accommodations; those living in temporary housing such as emergency or transitional shelters; being abandoned in hospitals; are waiting to be placed in foster care;

(ii) children and youths whose primary nighttime residence is a public or private place not designed for or generally 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 automobiles, public spaces such as parks, bus or train stations, or other type of public areas, abandoned buildings, substandard housing, or similar settings; and

(iv) migratory children (as defined in section 1309 of the Elementary and Secondary Education Act of 1965) who qualify as homeless because the children are living in circumstances described in above conditions (i) through (iii).

Children Living in Homeless Families

More than 1.5 million children live in families without a home. Among those, 42 percent are under the age of 6. African-American children disproportionately experience homelessness (47%), and children of American Indian and Alaska Native backgrounds have a slightly higher proportion of homelessness (2%), compared with their representation in the population. Homeless families are more likely to be led by a single-mother in her twenties with young children.

Unaccompanied Youth

An estimated 1.6 to 1.7 million youth join the ranks of runaways and homeless each year. The group identified as unaccompanied youth can be categorized into sub-groups:

1) runaway-homeless youths, who stayed away at least overnight without parents' or guardians' permission;
2) so-called 'throwaway' youths-who left home because parents encouraged them to leave or locked them out of the home;
3) independent youths who feel that they have no home to return to due to irreconcilable familial conflicts or have lost contact with their families.

Females are larger in number among runaway-homeless and independent youths, and African-American and Native American youth tend to be over-represented among all three types of unaccompanied youth. Further, between 20 and 40 percent of all homeless youth identify themselves as lesbian, gay, bisexual or transgender (LGBT).

Factors that Contribute to Homelessness

Homelessness represents deprivations from basic human needs. However, while other types of deprivations, such as hunger, mainly occur as a result of poverty and economic insecurity, factors that contribute to homelessness are multi-faceted; the factors also vary by the type of homelessness experienced by children and youth. These factors include lack of affordable housing, economic insecurity, violence at home, behavioral health, lack of social support, and involvement in the child welfare system.

Lack of Affordable Housing

For over a decade, the number of affordable housing units declined. Between 1993 and 2003, the proportion of low-cost rental units shrunk by 13 percent due to the loss of older, lower-quality apartments in the private market. In 2005, about 40 percent of households with children ages birth through 17 reported one or more of the following housing problems: physically inadequate housing, crowded housing, or the associated cost burden. Generally, when a household pays more than 30 percent of its annual income on housing, it is considered to be a cost burden. While there was a decrease in the percentage of households reporting physically inadequate housing or crowded housing between 1978 and 2005, 34 percent of families reported in 2005 a cost burden resulting from rent greater than 30 percent of their income. In 1978 only 15 percent of families reported this cost burden.
Overall the number of households with children reporting “severe” housing problems has increased from eight percent in 1978 to 13.8 percent in 2005. Unmet needs for decent and affordable rental housing have been increasing even before the current housing crisis.

**Economic Insecurity**

In 2005, more than 60 percent of families with income less than 30 percent of the HUD-adjusted area median family income were paying more than half of their income for rent, and about the same proportion of families were also living in severely inadequate housing. Lack of affordable rental housing and the current economic recession will most likely contribute to the increasing number of homeless families and children. Since the start of the recession in December 2007, the number of unemployed individuals has increased by more than seven million, to 14.5 million, and the unemployment rate has risen to 9.4 percent overall. The unemployment rate is even higher among blue-collar workers or those with non-professional jobs, which makes low-income families particularly vulnerable to layoffs. Among homeless families with children, more than 80 percent are female-headed, and 54 percent of children in low-income families live with a single parent. The majority of homeless mothers rely on public assistance.

**Violence at Home**

Violence at home is one of the major predictors of whether children and youth will experience homelessness. Among homeless mothers with children, more than 80 percent previously experienced domestic violence. Women with children in homeless shelters and domestic violence shelters are found to have very similar characteristics, including their exposure to traumatic experiences. Intimate partner violence is a known determinant of housing instability. Unaccompanied youth often have prior experiences of violence, either witnessing violence or being abused physically or sexually. More youth in runaway and homeless programs report fights and physical or emotional abuse from their family members, compared with those without such experiences. The majority of youth in runaway and homeless youth programs report their biological mothers as a main perpetrator of maltreatment.

**Behavioral Health**

Behavioral health problems are predictors of youth running away from home or becoming homeless. Higher risks of exposure to violence or trauma can contribute to behavioral health problems among homeless children and youth. Unaccompanied youth are more likely to be depressed and to have mental health or substance abuse problems compared with housed youth. While runaway and homeless experiences influence mental health status, youth who experience homelessness exhibit more behavioral problems prior to their runaway or homeless experiences compared with youth without runaway or homeless episodes, as shown in the figure below.

![Average behavioral health score reported by youth prior to reported homeless/runaway experiences](image)


**Lack of Positive Social Support**

Homeless families with children and unaccompanied youth tend to have weak or unstable social supports. Some research shows that they have fewer social networks and less social support. Even homeless families with larger social networks
neither perceive their social networks as resources for positive support nor as a base of strong relationships. Unaccompanied youth are more likely to report family problems. Further, they tend to report their friends as a source of support more frequently than their own parents and try to substitute street networks for their failed family networks.

Involvement in the Child Welfare System

Youth in foster care are at higher risk of homelessness. Forty nine percent of youth in foster care report a history of running away from home. Further, American-Indian youth in foster care are twice as likely to run away as their white counterparts. Previous research indicates between 14 and 50 percent of foster youth experienced homelessness.

The Impact of Homelessness on Children and Youth

Food Insecurity

While nutritious meals are increasingly available at soup kitchens and homeless shelters, there is little research on food insecurity based on a national sample of children living in homeless families and unaccompanied youth. Existing research is based on adults or limited small samples. A study based on a national sample of homeless adults reports that about 60 percent reported inadequate food consumption in terms of quantity and preference as well as frequency of meals. About 40 percent reported fasting for an entire day and the same proportion of homeless adults also reported not being able to afford food during the past month. This study and others suggest that children living in homeless families, and unaccompanied youth possibly experience more serious food insecurity given their lessened capability to secure food. Another study found that fruit and dairy products served for children or youth in homeless shelters, are often below recommended nutritional levels. Another study shows that homeless children and youth in shelters have inadequate intakes of necessary nutrition, such as iron, magnesium, zinc or vitamins.

Health

Food insecurity associated with homelessness impacts the health of children living in homeless families as well as unaccompanied youth. Based on a small sample, about 45 percent of homeless children and youth are overweight or at-risk of being overweight due to inappropriate food consumption, and another case study also shows that being overweight and obesity are prevalent among homeless children and youth.

Homelessness has been associated with other health risks among children and youth. One study reports that homeless children are more likely to have fair or poor health compared with housed low-income children, and homeless mothers are more likely to report that their children experienced various health problems, such as fevers, ear infection, diarrhea, bronchitis or asthma. Based on a city sample, 40 percent of children with homeless experiences had asthma. However, other studies found no significant difference in health outcomes of homeless and poorly housed children.

Unaccompanied youth, research suggests, are at a higher risk of contracting sexually transmitted diseases due to risky sexual behaviors, such as inconsistent use of condoms, multiple sexual partners or injection drug use. Further, unaccompanied youth are at high risk of teenage pregnancy and those with sexually transmitted diseases (STDs) are also more likely to be pregnant than those without STDs.
**Mental Health and Exposure to Violence or Trauma**

Children living in homeless families and unaccompanied youth also have a greater risk of experiencing mental health problems, compared with their housed peers. It has been reported that young children with homeless experiences had more behavioral problems based on the Child Behavior Check List (CBCL) than housed children. A study on school-aged children of homeless families reported that a higher proportion of homeless children experienced mental disorders with impairment, such as disruptive behavior disorders, social phobia, and major depression, as compared to their low-income housed counterparts.

While homeless children and youth are more likely to witness or experience violence prior to homeless episodes, they are also exposed to violence due to the public nature of their lives and vulnerable living conditions associated with poverty. Unaccompanied youth are also more vulnerable to physical or sexual victimization. More than one-third of the adolescents met lifetime criteria for post-traumatic stress disorder (PTSD). Among those adolescents, an estimated 45 percent of PTSD males and 28 percent of females experienced assault with a weapon; 42 percent of female runaways experienced sexual assault. LGBT homeless youth have an even higher likelihood of being victimized on the streets, compared with their heterosexual counterparts (59% vs. 33%). Nearly one in five homeless youth attempted suicide, and more than half of heterosexual homeless youth had suicidal thoughts while about three-fourths of LGBT youth have had such thoughts. The majority of homeless youth on the streets use substances such as tobacco (81%), alcohol (80%), or marijuana (75%), while those in shelters had slightly lower substance use (52%, 67% and 71% respectively).

**Education**

Family residential stability is highly associated with educational success of children and youth and conversely, homelessness contributes to poor educational outcomes for children and youth. Homeless children and youth are significantly more likely to report grade retention than their never-homeless counterparts. Former homeless children attended an average of 4.2 schools since kindergarten, while children who never experienced homelessness attended an average of 3.1 schools. An estimated 39 percent of sheltered homeless children missed more than one week of school in the past three months and changed school from two to five times in the last 12 months. Absenteeism and school mobility are among the major mechanisms that impact school success for children living in homeless families and for unaccompanied youth. Across age levels, homelessness impacts academic achievement and homeless children's reading, spelling, and mathematics scores are more often below grade level, compared with housed children. Almost half of sheltered homeless children merit a special education evaluation. Yet, less than 23 percent of those with any disability had ever received special education evaluation or special education services. Runaway and homeless youth are much less likely to complete high school, compared with those without runaway or homeless experiences.

**Juvenile Delinquency**

Unaccompanied youth tend to engage in delinquent survival strategies on the streets and several factors account for this. First, youth on the streets in particular have few legitimate means to support themselves. Second, those with more frequent runaway experiences are more likely to be involved in delinquent survival strategies, such as selling drugs, shoplifting, burglary, robbery or prostitution. Runaway youth are more likely to have been arrested as juveniles (not including the arrest for being a runaway). A study in Canada shows that the longer unaccompanied youth experience homelessness, the higher the probability of committing a crime; and further, in addition to being homeless, the lack of financial assistance from the state also increases the likelihood of youth being involved in violent crime.
Current Policies and Practices

Major laws and fiscal policies were designed to improve outcomes for children living in homeless families and unaccompanied youth. These include the following:

♦ The Runaway and Homeless Youth Protection Act
♦ The McKinney-Vento Homeless Assistance Act
♦ 34 CFR Part 200: Improving the Academic Achievement of the Disadvantaged
♦ Housing Subsidy (Section 8 and Public Housing) Programs
♦ Chafee Foster Care Independence Act

Below, we provide highlights of the provisions of these laws.

The Runaway and Homeless Youth Protection Act

The Runaway and Homeless Youth Act (RHY) established programs that are administered by the Family and Youth Services Bureau, the Department of Health and Human Services (DHHS)’ Administration for Children and Families. The RHY Act includes the following four programs:

1) Basic Center Programs, which includes emergency shelter and services related to food, clothing, counseling, and access to health care and reunification when possible.

2) Transitional Living Programs, which support long-term (up to 18 months and additional 180 days for those under age 18) residential services to homeless youth ages 16 to 21 for self-sufficiency living.

3) Maternity Group Homes for Pregnant and Parenting Youth programs, which support long-term residential services (up to 18 months and additional 180 days for those under age 18) for homeless pregnant and parenting young people aged 16 to 21, and their dependent children.

4) Street Outreach Programs, which provide financial assistance to private and nonprofit agencies for their outreach efforts targeting getting youth off the streets including information and referrals to crisis interventions.

In October 2008, President Bush signed the Runaway and Homeless Youth Protection Act into law, which improved existing programs. It has:

♦ increased the authorization level of runaway and home youth act programs (basic center programs at $150 million and street outreach programs at $30 million);
♦ mandated that HHS get better national data on the number of homeless youth;
♦ increased the length of stay (in shelter or temporary housing from 14 to 21 days; in the Transitional Housing Program from 18 to 21 months);
♦ mandated that DHHS complete performance standards for all RHY programs; and
♦ required DHHS to ensure funded programs that implement the use of positive youth development perspectives.

The McKinney-Vento Homeless Assistance Act

The American Recovery and Reinvestment Act of 2009 (ARRA) provides $70 million in fiscal year (FY) 2009 funds under the McKinney-Vento Education for Homeless Children and Youth program, which is authorized under Title VII-B of the McKinney-Vento Homeless Assistance Act.

34 CFR Part 200: Improving the Academic Achievement of the Disadvantaged

To reflect the changes of NLCB, the Department of Education in 2002 amended regulations governing programs administered under Title I, part A, of the Elementary and Secondary Education Act of 1965. It requires that states include homeless students, as defined in the McKinney-Vento Act, in its academic assessment reporting, and accountability systems.
The McKinney-Vento Homeless Assistance Act was originally authorized in 1987 and re-authorized by the No Child Left Behind Act (NCLB) of 2001 to address educational needs of homeless children and youth. “Under this program, State educational agencies (SEAs) must ensure that each homeless child and youth has equal access to the same free, appropriate public education, including a public preschool education, as other children and youth... States and districts are required to review and undertake steps to revise laws, regulations, practices, or policies that may act as a barrier to the enrollment, attendance, or success in school of homeless children and youth.”

This act uses a broader definition of homelessness and also differs from the previous programs in the following ways:

♦ prohibits states to segregate homeless children and youth in a school or a program within a school based on their homeless status;
♦ requires states and local educational agencies (LEAs) to provide transportation to and from school of origin at the request of the parent or guardian (or in the case of the unaccompanied youth, the liaison);
♦ requires LEAs admit a homeless child or youth to the school where enrollment is sought by the parent or guardian, if there is a dispute while pending resolution of the dispute;
♦ makes school placement determinations on the basis of the best interest of the child or youth, and in determining the best interest, states must keep a homeless child or youth in the school of origin unless doing so contradicts the wishes of the child or youth’s parent or guardian;
♦ mandates that every LEA regardless of McKinney-Vento subgrant receipt designate a local liaison for homeless children and youth; and
♦ enables states that receive an allocation greater than the state minimum allotment to subgrant to LEAs at least 70 percent and those states with minimum allotment to subgrant to LEA at least 50 percent.


Housing Subsidy Programs (Section 8 and Public Housing)

There are a variety of housing programs for low-income families, such as Section 8 programs and public housing. Residents are usually required to pay 30 percent of their income in rent.

Section 8 rental vouchers and public housing provide housing assistance to low-income families (in general those with family incomes between 50 to 80 percent of the median income of the county of their residence). Section 8 programs provide vouchers and certificate programs that allow more than 1.4 million families to live in private housing. Public housing includes buildings owned by the public housing authority and its eligibility is determined based on family income, being elderly, or disability status. Approximately 1.2 million households live in public housing units, managed by some 3,300 housing authorities.

Other programs where families are required to pay well over 30 percent of their income for units include low-income housing tax credit (LIHTC) and home investment partnership (HOME). The LIHTC provides funding for developers to cover costs of low-income housing development through a federal tax credit. LIHTC currently adds 90,000 units each year for low-income renters.

Chafee Foster Care Independence Act

The John H. Chafee Foster Care Independence Program (CFCIP) provides various types of assistance to help current and former foster care youths make the successful transition to adulthood and prevent homelessness. Grants are offered to states with a plan to assist youth in a wide variety of areas, such as help with education, employment, financial management, housing, emotional support and targeting older youth in foster care as well as youth aged 18 to 21 who have aged out of the foster care system. In 2002, the Educational and Training Vouchers Program (ETV) for Youths Aging out of Foster Care was added to the CFCIP. It provides funding that targets the education and training needs of youth aging out of foster care. In addition to the existing authorization of $140 million for the CFCIP program, the law authorizes $60 million for...
payments to states for post secondary educational and training vouchers for youth who are more likely to experience difficulty after the age of 18. This program offers vouchers of up to $5,000 per year per individual for post secondary education and training for eligible youth. The estimated total allocation for 2008 was $138 million for CFCIP and $45 million for ETV.82 For youth who are in foster care, the Foster Care Independence Act of 1999 (P.L. 106-169) and the Deficit Reduction Act (DRA) of 2005 (DRA, P.L. 109-171) also allow states to extend Medicaid coverage for youth who have aged out of foster care and over 40 percent of the states have used the Chafee option or plan to use the option to extend Medicaid.83

Key Recommendations for Policy Action

♦ Increase housing subsidies to provide permanent housing for children living in homeless families, and unaccompanied youth. Homeless families who received housing subsidies are 20 times more likely to have housing stability after shelter use, compared with those who did not receive a subsidy.84

♦ Increase school-based and community-based health and mental health services, including assessment and screening for homeless children and youth. Focus on using a trauma-informed approach. Homeless youth who used a mobile health or mental health unit for five months or more were more likely to report being stabilized on medications and counseling, decreased substance use, received regular birth control and immunizations, and treated and referred medical conditions.85 Homeless youth prefer to receive health care services at clinics that are “youth friendly.”86

♦ Target and increase programs that better identify and serve children living in homeless families and unaccompanied youth with developmental delays or at-risk developmental delays and disabilities.

♦ Increase funding for transitional and independent living programs for youth who are aging out of foster care. Iowa, Texas, Connecticut, Utah, and Maryland implemented a range of initiatives including workforce investment strategies to post-secondary support.87 In Kentucky, the CFCIP program successfully helped more than 200 youth attain post-secondary education.88

♦ Provide nutritiously adequate food and nutrition outreach at shelters and other temporary housing. A special supplemental nutrition program for Women, Infants and Children (WIC) were designed to reach WIC-eligible families in homeless shelters, to identify nutrition inadequacies among those homeless families and to provide them with nutrition supplements through the WIC food package.89

♦ Provide educational services to facilitate high school completion for unaccompanied youth who dropped out of high school. Those who had a high school equivalent degree were more likely to have lawful employment.90

♦ Provide vocational training and employment services for unaccompanied youth to achieve economic self-sufficiency. Approximately 60% of homeless young adults who participated in job training class found employment within three months following the training.91

♦ Provide funding to collect data for a national longitudinal sample of children and youth who experienced homelessness as current research is largely based on selected samples from metropolitan areas and often do not include those who experience homelessness in non-urban areas.
Endnotes


4. Ibid.


7. Ibid.

8. Ibid.

9. Ibid.


11. This is a technical term used by Ringwalt et al. 1998. See endnote 12 for the details.


13. Ibid.


19. Ibid.


34. Based on the author's analysis using NLSY 1997 sample. Runaway and homeless experiences were measured for the year 1998-2000 and the analysis excludes those who have run away from home in 1997 or earlier to insure the causality, and the behavioral health report was taken from 1997. Behavioral and Emotional Problems (Youth report) was created by summing the responses to the four questions for total possible score of 8 points. Higher scores suggest more frequent and/or numerous behavior problems. The age of NLSY97 used was limited to those who were age 14 or younger in 1997. The sampling weights were used for the analysis.


40. Ibid. One of the measurements for food insecurity was quality and whether respondents do not get type of food they prefer to eat.

41. Ibid.


44. Ibid. One of the measurements for food insecurity was quality and whether respondents do not get type of food they prefer to eat.

45. See endnote 43.


64. Ibid.


66. See endnote 63.


68. See endnote 65.

69. See endnote 65.

70. See endnote 32.


81. See endnote 16.


