The Commonwealth of Massachusetts Special Commission on Unaccompanied Homeless Youth

Report to the Great and General Court, Executive Office of the Governor, and the Office of the Child Advocate
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Letter from the Chairs

Message from the Working Group Chairs of the Special Commission on Unaccompanied Homeless Youth:

The Special Commission on Unaccompanied Homeless Youth was established in the FY13 legislative session as the result of the recognition of the tragic consequences and cost of youth homelessness in the Commonwealth.

The goal of our Commission, outlined in the report below, has been to ensure a comprehensive and effective response to the unique needs of unaccompanied homeless youth. As required by the legislation we have analyzed barriers to serving unaccompanied youth who are gay, lesbian, bisexual and/or transgender; we conducted an analysis of the barriers to serving all unaccompanied youth under age 18; we assessed the impact of mandated reporting requirements on unaccompanied youths' access to services; we reviewed the Commonwealth’s ability to identify and connect with unaccompanied youth; and we developed recommendations to reduce identified barriers to serving this population. The attached report constitutes the summary of our work to date.

The Commission would like to gratefully acknowledge the many contributors to this report. Each member of the Commission brought a wealth of experience and commitment, which added significant value. We would like to particularly acknowledge Senator Katherine Clark, Senator Harriette Chandler, Representative Kay Khan and Representative James O’Day for their active involvement. Most importantly we want to acknowledge youth who have experienced homelessness for bringing their insightful and compelling voices to our efforts.
This report represents a solid first step in moving forward to meet the challenges of youth homelessness head-on. Continued partnership between advocates, non-profits, state agencies, legislators, the private sector, and homeless youth themselves will be required for our continued efforts to be effective. We look forward to the work ahead.

Sincerely,

Liz Rogers & Kelly Turley
Co-Chairs
Identification and Connection Working Group

Joan Meschino
Chair
Barriers to Serving Youth Under Age 18 Working Group

Carly Burton
Chair
Services for Lesbian, Gay, Bisexual, and/or Transgender Youth Working Group

Danielle Ferrier & Lisa Goldsmith
Co-Chairs
General Services & Housing Working Group
Executive Summary

The National Incidence Studies of Missing, Abducted, Runaway, and Thrownaway Children estimates that approximately 1.7 million youth under the age of 18 are homeless each year in the United States\(^1\). There is no corresponding data for youth over the age of 18. The Massachusetts Department of Elementary and Secondary Education (ESE) has identified 820 youth as “unaccompanied,” defined as a public school student who is homeless and not in the physical custody of a parent or guardian. Based on this data, ESE estimates there are currently up to 6,000 unaccompanied homeless youth in Massachusetts. The fluctuation in the size of these estimates, and the varying age ranges they cover, is indicative of the lack of reliable and comprehensive information on youth homelessness. These youth are highly mobile and largely invisible. They experience a life that is extremely difficult, often dangerous, and associated with multiple health problems.

The Special Commission on Unaccompanied Homeless Youth (the Commission) was established through Outside Section 208 of the FY2013 Budget, signed into law on July 8, 2012. The Commission was charged with researching and making recommendations relative to services for unaccompanied homeless youth, with the goal of ensuring a comprehensive and effective response to the unique needs of this population. The legislation required that the Commission’s work includes an: (i) analysis of barriers to serving unaccompanied youth who are gay, lesbian, bisexual, transgender,; (ii) analysis of barriers to serving unaccompanied youth under age 18; (iii) assessment of the impact of mandated reporting requirements on youths’ access to services; (iv) assessment of the Commonwealth’s ability to identify and connect with unaccompanied youth; and (v) recommendations to reduce identified barriers to serving this population

In order to accomplish this task the Commission, under the stewardship of Kathy Betts, Deputy Assistant Secretary for Children, Youth and Families at the Executive Office of Health and Human Services, convened four Working Groups to investigate and respond to the issues. The Commission’s Working Groups include: 1.) Identification and Connection, 2.) Barriers to Serving Youth Under Age 18, 3.) Barriers and Services for Lesbian, Gay, Bisexual, Transgender, Queer, and/or Questioning (LGBTQ) Youth, and 4.) General Services and Housing.

The Commission conducted research, interviewed staff from state and community-based agencies, and interviewed current and former unaccompanied homeless youth themselves. Based on this work, the Commission defined “Unaccompanied Homeless Youth” as: A person 24 years of age or younger who is not in the physical custody or care of a parent or legal guardian and who lacks a fixed, regular, and adequate nighttime residence. The Commission then developed the following initial recommendations:

**Identification and Connection Working Group**
1: Develop a uniform survey tool for statewide use.
2: Outline a robust youth engagement strategy.
3: Evaluate potential strategies for creating useful typologies of youth.
4: Leverage existing counting efforts to pilot implementation of statewide count.

**Barriers to Serving Youth under Age 18 Working Group**
1: Research and develop flexible, low-threshold housing and other programming options.
2: Implement training for all mandatory reporters about the law, their role, and what the response from the Department of Children and Families will be.
3: Enhance the working relationship between community providers, schools, and state agencies serving unaccompanied homeless youth.

**Barriers and Services for Lesbian, Gay, Bisexual, Transgender, Queer, and/or Questioning (LGBTQ) Youth**
1: LGBTQ-inclusive data collection across all youth serving state agencies.
2: LGBTQ competency training and awareness campaigns within agencies.
3: Increase number of LGBTQ specific services.

**General Services and Housing**

1: Analyze existing resources and assess for gaps.
2: Launch a minimum of three demonstration sites with evaluation components.
3: Respond to service and housing gaps.
4: Increase connectivity with relevant academic institutions or experts.

**History and Structure of the Commission**

The Special Commission on Unaccompanied Homeless Youth (the Commission) was established through Outside Section 208 of the FY2013 Budget and signed into law on July 8, 2012. The Commission was born from recognition, by the Massachusetts House, Senate, and Office of the Governor, for renewed and intensive investigation into resolutions related to the problem of unaccompanied youth homelessness within the Commonwealth. As such the Commission’s mandate was to conduct research, using the expertise of its appointees as well as information gathered from testimony of known experts in the field, on regulatory and/or legislative action that could be taken that would represent decisive steps toward the implementation of solutions, with special consideration given to timelines for execution, cost estimates, and any identifiable finance mechanisms.

In order to accomplish this task the Commission, convened under the stewardship of Kathy Betts, Deputy Assistant Secretary for Children, Youth and Families at the Executive Office of Health and Human Services, immediately divided into four Working Groups that could appropriately investigate and respond to the issues highlighted by legislators and constituent advocacy groups. These Working Groups are:

I. **Identification and Connection**, charged with examining and reporting on the best methodology for capturing an accurate count of unaccompanied young people experiencing homelessness in the Commonwealth;
II. **Barriers to Serving Youth Under Age 18**, charged with cataloguing the barriers, both in regulation and in statute, that may cause unintended obstructions for both unaccompanied youth seeking services and the agencies that seek to provide those services. Additionally this working group was also asked to research and discuss mandatory reporting and licensing;

III. **Services for Lesbian, Gay, Bisexual, and/or Transgender Youth**, charged with an analysis of the specific to needs of and barriers facing lesbian, gay, bisexual, transgender, queer, and/or questioning unaccompanied youth experiencing homelessness, as well as recommending any specific service delivery alternatives that may be needed to address these barriers; and

IV. **General Services and Housing**, charged with examining the reports of the other Working Groups and creating a preliminary list of recommended services and housing interventions, whether augmentations to existing services or novel approaches that would begin to create the Commonwealth’s systemic response to the issue of unaccompanied youth homelessness.

As the Commission continues its important work, it is expected that each Working Group will continue to meet and investigate these critical issues in order to provide ongoing feedback to legislators, the Office of the Governor, and key state agencies in order to ensure that responsive and appropriate solutions to this critical problem are quickly devised.
Introduction

“I first became homeless when I was 13 because I lost my mom. It’s crazy to become homeless at 13 because you lose your mom and you’ve got nowhere to go”
—Youth testimony

The National Incidence Studies of Missing, Abducted, Runaway, and Thrownaway Children estimates that approximately 1.7 million youth under the age of 18 are homeless each year in the United States\(^2\). There is no corresponding data for youth over the age of 18. Some of these youth may “run away” from home for only one or two nights, others have been living on the street for years; as many as 200,000 are estimated to be living permanently on the street. These youth are highly mobile and largely invisible. They experience a life that is extremely difficult, often dangerous, and associated with multiple health problems\(^3\). They have a wide range of unique developmental needs, and require services to meet these needs.

Despite these sobering estimates, the full scope of the problem is largely unknown. There is no common definition of unaccompanied homeless youth at the state or federal levels. The three primary sources of federal support for unaccompanied homeless youth are the Runaway and Homeless Youth Act under the Administration for Children and Families, the McKinney-Vento Homeless Education Assistance Act of 2002, and the HEARTH Act under the Department of Housing and Urban Development. Each of these entities defines youth homelessness differently, and their funding is restricted to providing services to the young people who fit their specified definition. The estimation of homeless youth differs based on the definition that is used. This lack of a common definition contributes to a lack of a comprehensive, coordinated response to the problems experienced by unaccompanied homeless youth.

\(^2\) Ibid.
\(^3\) http://bphc.hrsa.gov/policiesregulations/policies/pal200110.html
Unaccompanied Homeless Youth in Massachusetts

Currently, data on the numbers and characteristics of homeless youth is primarily collected in Massachusetts through two avenues: 1.) the Annual Homeless Education Data Collection conducted by Massachusetts Department of Elementary and Secondary Education (ESE), and 2.) the Massachusetts Youth Risk Behavior Survey (YRBS), administered by ESE and the Massachusetts Department of Public Health (DPH), in conjunction with the Centers for Disease Control.

Based on data ESE estimates there are currently up to 6,000 unaccompanied homeless students in Massachusetts public and charter schools. “Unaccompanied” is defined under the Federal McKinney-Vento as youth in public or charter schools who are homeless, and not in the physical custody of a parent or legal guardian.

Homelessness can negatively impact learning in a multitude of ways, including dropping out of school, the ability to focus in class, to feel safe in the classroom, and to come to school prepared for the day. ESE further states that going to school homeless can result in multiple school transfers, significant educational gaps, frequent absences and tardy arrivals, a lack of supplies and space to do homework and projects, poor medical, dental and mental health care, distractions, and an inability to attend to lessons.⁴

According to the Massachusetts YRBS, homeless students in the Commonwealth face substantial risk factors related to their health. Homeless youth are more likely to have used drugs such as alcohol, marijuana, and heroin; they are more likely to have attempted suicide; they are more likely to be involved in a gang; and they are more likely to have sexual contact against their will and/or be involved in a pregnancy (see Table 1 below).

⁴ http://www.doe.mass.edu/mv/GoingToSchool.pdf
While these data reflect youth who are known to schools, there is another population of homeless youth who are more difficult to identify. This “invisible” unaccompanied homeless population includes youth who are not connected to caring adults, who are not going to school, who are often highly mobile, and in many cases, reluctant to engage with traditional state or local services. Despite a lack of data, what is clear is that both the causes\(^6\) and course\(^7\) of a young person’s experience with homelessness can vary widely with each individual.

<table>
<thead>
<tr>
<th>Risk Factor</th>
<th>Homeless Students</th>
<th>Housed Students</th>
</tr>
</thead>
<tbody>
<tr>
<td>Members of a gang</td>
<td>32%</td>
<td>5%</td>
</tr>
<tr>
<td>Had alcohol in the past 30 days</td>
<td>67%</td>
<td>39%</td>
</tr>
<tr>
<td>Used marijuana in the past month</td>
<td>57%</td>
<td>27%</td>
</tr>
<tr>
<td>Ever used heroin</td>
<td>21%</td>
<td>1%</td>
</tr>
<tr>
<td>Felt sad or hopeless for 2 or more weeks</td>
<td>47%</td>
<td>24%</td>
</tr>
<tr>
<td>Made a suicide attempt that resulted in injury</td>
<td>17%</td>
<td>2%</td>
</tr>
<tr>
<td>Had sexual contact against their will</td>
<td>43%</td>
<td>8%</td>
</tr>
<tr>
<td>Ever been or gotten someone pregnant</td>
<td>28%</td>
<td>4%</td>
</tr>
</tbody>
</table>

\(^5\) It is important to note that the YRBS is administered only to public and charter school students in grades 9-12. Because of this the data is, again, incomplete.

\(^6\) National trends indicate that 43% of homeless youth report being beaten by a caretaker, 25% have had caretakers request sexual activity and at least 20% have had to leave home due to conflicts with caretakers around their sexual orientation (Alone Without A Home: A State-By-State Review of Laws Affecting Unaccompanied Youth, 2012). However other youth may come to experience homelessness as the result of parental death, personal economic hardship, or other unfortunate circumstances.

\(^7\) A review of relevant literature indicates youth of color have qualitatively different experiences of that white youth because of the multiple forms of oppression and social inequality they face. This can be particularly pronounced in the case of sexual minority youth (Traversing the Margins: Intersectionalities in the bullying of lesbian, gay, bisexual, and transgender youth. Daley et al.; 2007) (Shared differences: The experience of lesbian, gay, bisexual, and transgender students of color in our nations schools. Diaz and Kosciw; 2009) (transgender youth of color and resilience: Negotiating oppression and finding support, Singh; 2012). As one provider member of the Commission said, “Frequently we are forced to realize that, when it comes to inequality, being a person of color, and being trans[gender] does not result in merely additive disadvantage. In the math of inequality one plus one can equal five.”
The Commission has been tasked to study issues and barriers affecting these youth, to identify policy areas ripe for positive change, and to report its preliminary findings and initial recommendations by March 31, 2013. The Commission’s objective is to create strategies and leadership to provide education, supportive housing, and developmentally appropriate services and to support unaccompanied homeless youth in their transition from childhood to adulthood to emerge as self-sufficient adults.

In furtherance of its objective, the Commission makes a series of initial recommendations designed to lay a foundation for its work moving forward. This preliminary report, issued to the Great and General Court, the Executive Office of the Governor, and the Office of the Child Advocate, represents a summary of the Commission’s first three months of work and is intended to be a path for research, policy development, and advocacy strategies to address the unique, unmet needs of these vulnerable youth.

The Commission recommends adopting a comprehensive definition and survey methodology to understand the scope and demographics of this highly mobile and largely invisible population. The Commission recommends piloting a homeless youth survey and count. The Commission seeks to engage homeless youth voices to ensure that strategies to connect them and their peers are effective and have relevancy. The Commission recommends researching and creating low-threshold housing and services programs. The Commission recommends engaging demonstration sites to identify and assess best practices for services and housing models. The Commission recommends cultural competency training for all who work with unaccompanied homeless youth.

We recognize that there is much work to be done. The Commission looks forward to continuing our work over the course of the coming year as we work toward producing our annual report, due December 31st of this year.

Defining Unaccompanied Homeless Youth
The Commission’s first task was to create a definition of unaccompanied homeless youth to facilitate the work of the Commission and the working groups.

The Commission has reached agreement that “Unaccompanied Homeless Youth” shall mean: A person 24 years of age or younger who is not in the physical custody or care of a parent or legal guardian, and who lacks a fixed, regular, and adequate nighttime residence. “Fixed” means a residence that is “stationary, permanent and not subject to change.” “Regular” means a dwelling at which a person resides on a regular basis (i.e. nightly). “Adequate” means that the dwelling provides safe shelter. When defining an adequate living situation for youth, the housing structure is only one element. An assessment of adequate housing should factor in whether or not the home environment meets the physical and psychological needs of the youth.

It is important to understand that all three components (outlined in detail below) of this definition: age, connection to a parent or guardian, and housing status, must be met in order for a person to be considered an unaccompanied homeless youth.

**Definition Component 1:**

**Age Range: Include Youth 24 Years of Age and Younger**

The consensus among the Commission is for the definition to include youth up to and including those 24 years of age. Major federal acts and programs targeting homeless youth do not share a standard age range. Some legislation specifies age ranges by program, while others use a term that targets the services to a particular age group. By way of example, the McKinney-Vento Act applies to “school-aged children.” Growing trends in developmental research, legal theories, public interest policy, and governmental policy support a definition that includes youth up to and including 24 years of age.
Recent research shows that brain maturation continues well into the third decade of life. Accordingly, the psychiatric and developmental psychology communities identify 24 as the end of adolescence. The World Health Organization, the Society for Adolescent Medicine, and the Centers for Disease Control have all described adolescence as a stage occurring until age 24. Moreover, the Supreme Court of the United States has accepted the importance of psychological research and neuroscience in determining the rights and criminal liability of youth. The Court, in *Roper v. Simmons*, cited the following characteristics of youth that distinguish them from adults: “a lack of maturity and an underdeveloped sense of responsibility,” “more vulnerable and susceptible to negative influences and outside pressures” and “personality traits ... [those] are more transitory, less fixed.”

Recent state and federal legislation has begun to reflect the scientific trends regarding adolescence. California currently defines young adult as a person between 18 and 24. Notably in 2011, the U.S. Department of Housing and Urban Development (“HUD”) defined youth, for the first time, as those “less than 25 years of age.” In a model statute applicable to homeless youth, the American Bar Association suggested an age range of “24 and under.” Although most youth attain the legal right to independence at the age of 18, barriers to self-sufficiency remain. The age of majority does not guarantee the ability of youth to avail themselves fully of legal rights and services. For example, an 18-year-old is

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11 Roper, 543 U.S. at 569-70.
12 See CAL. WELF. & INST. CODE §§ 1916, 10545, 114032 (West 2011).
legally permitted to enter into a lease agreement; however, without established (and good) credit and/or extra funds at his/her disposal, (s)he is unlikely to secure housing without the support of an adult. Thus, the development of targeted strategies should reflect the transition of youth across legal age divisions and the need for continued adult support.

**Definition Component 2**

**Status of Connection: Physical Custody or Care of a Parent/Legal Guardian**

The consensus among Commission members is that the term “unaccompanied” refers to the relationship between the youth and his/her parent, legal guardian, or the state. The Commission agrees that the status of connection is best articulated as “not in the physical custody or care of a parent, legal guardian.”

Under Massachusetts law, a youth must remain in the physical custody of a parent, guardian, or the state until the age of majority (age 18)\(^{15}\). Custody is divided into two categories-physical and legal\(^ {16}\). Legal custody refers to the “right and responsibility to make major decisions regarding the child’s welfare, including matters of education, medical care, and emotional, moral, and religious development.”\(^ {17}\) Physical custody refers to a child’s residence and supervision\(^ {18}\).

It is also important to note several complexities with regard to a youth’s status of connection. First, the Commission considered state-involved youth. Homeless youth who are still in the legal custody of their parents while in the physical custody of the state should not be considered unaccompanied for the purposes of this definition because these youth have been identified and are being served. The Commission also discussed youth transitioning to a foster care placement. While it is absolutely vital that children transitioning to a foster care placement continue to have rights to educational stability per the McKinney-Vento Homeless Assistance Act (“McKinney-Vento Act”), the definition of

\(^{15}\) [MASS. GEN. LAWS ch. 231 §85P (West 2012)].  
\(^{16}\) [MASS. GEN. LAWS ch. 208 §31 (West 2012)].  
\(^{17}\) [Id.].  
\(^{18}\) [Id.].
unaccompanied does not include them for purposes of identifying and creating strategies to engage a particular subgroup of the homeless population. Again these youth have been identified and are being served.

Second, the Commission considered youth who are parenting. A youth’s status as a parent does not solely affect whether (s)he is considered unaccompanied for the purposes of this definition because the focus of the definition is on the homeless youth’s status of connection to a caring and competent adult. Thus, if a “couch surfing” youth is doing so with his/her child, (s)he is still unaccompanied under this proposed definition. This is a departure from the existing definition of unaccompanied in the context of adult homelessness. Unaccompanied has traditionally been used to distinguish single homeless adults from homeless adults with children. Currently the Commonwealth uses the parenting status of youth to designate them as families—which allows them to access a different spectrum of services, including housing opportunities. The Commission recommends that young adults be considered as young adults independent of their status as parents. This means that while they should receive the supports necessary to care for their children or family they should also receive the care that they themselves need as young people. Further study will be required to ascertain how housing and services can be designed and targeted in a way that recognizes the unique needs of parenting and non-parenting youth as well as the different housing and service opportunities currently available to these two subpopulations.

**Definition Component 3**

**Location: McKinney-Vento Act**

The consensus of the Commission is that the definition of homeless should be “lacking a fixed, regular, and adequate nighttime residence.” The 2002 Massachusetts State Plan for the Education of Homeless Children and Youths Program defines a fixed residence as one that is “stationary, permanent, and not subject to change;” regular as one that is “used on a regular (i.e., nightly) basis;”
and defines adequate as one that is “sufficient for meeting both the physical and psychological needs typically met in home environments.”19 The Commission emphasized that a residence must meet the criteria of all three terms for a youth to be considered housed. A youth in a residence that fails to meet any one of the three criteria will be considered homeless for the purposes of this definition.

**Youth At-Risk for Homelessness**

It is important to understand that all three components of this definition must be met in order for a young person to be considered homeless. Young people (age 24 and under) who are not connected to a caring adult or lack a fixed, regular, or adequate living situation could be considered at imminent risk of homelessness (having met one of the conditional criteria, but not both) and prioritized for homelessness prevention resources.

While the focus of this Commission is on serving those unaccompanied youth who are currently homeless, the Commission recognizes the importance of prevention strategies for long-term stabilization and positive youth outcomes. Thus, the Commission recommends that further research and resources be applied to identify the most effective means of preventing homelessness and helping youth to maintain positive, caring adult relationships. Further, the Commission recommends that an outline of next steps related to prevention be included in the next report due to the Legislature and Governor’s office on December 31, 2013.

**Working Group Recommendations**

“…From the minute you wake up to the minute you go to sleep someone is telling you to move. All night too, if you’re not lucky…”
—Youth Testimony

Each Working Group’s recommendations were presented to the full Commission, discussed, and then included in this report. These recommendations, in their totality, represent the opinion of the Commission on four key topic areas. The Commission anticipates continuing an investigation of these issues as well as others throughout this year and subsequent years.

Subcommittee on Identification and Connection

As a Commonwealth, in order to understand the characteristics of this heterogeneous group, we must improve our data collection and institute statewide standards for working with unaccompanied homeless youth. The Commission identified two core gaps in knowledge that are critical to address. The first is that while we know unaccompanied homeless youth are present in Massachusetts, we have a limited understanding of who they are and exactly how many there are. In addition, the Commission acknowledges that it does not have a comprehensive understanding of the public and private services that already exist that could help meet the needs of unaccompanied homeless youth now.

Overview of Recommendations

**Recommendation 1:** Develop a uniform survey tool for statewide use.

**Recommendation 2:** Outline a robust youth engagement strategy.

**Recommendation 3:** Evaluate potential strategies for creating useful typologies of youth.

**Recommendation 4:** Leverage existing counting efforts to pilot implementation of statewide count.
In 2012 HUD and the U.S. Interagency Council on Homelessness announced a national strategy to identify unaccompanied youth as a separate population when the annually required Point in Time Counts are performed by each state’s Continuum of Care Programs (COCs) across the country. In the 2013 COCs count, Boston was among the first in the country to incorporate test methods for including youth in the count. To date no state has conducted a statewide count of unaccompanied homeless youth, poising Massachusetts to be a national leader.

A group of providers, advocates, academics, and funders in the City of Worcester—The Worcester Teen Housing Task Force—has implemented an annual count of homeless and at-risk youth over the last four years, providing Massachusetts with experience in administering surveys and counts related to unaccompanied homeless youth. Key lessons from the Worcester count include the importance of early planning and engagement of youth, clear communication, and delegation of tasks. The Worcester Teen Housing Task Force has also outlined critical considerations relevant in the design of any local or statewide count:

- Intended use of the data should drive methodology selection
- Successful implementation factors include surveying and counting for a sustained length of time and youth involvement
- Data analysis and data sharing capacity
- Adequate level of resources available
- Non-negotiable principles guiding the initiative

There is very little research on the characteristics or behavior of homeless youth that indicates their willingness to engage in services. Research indicates that young people utilize drop-in centers and food programs to meet basic needs even if they’re not willing to engage in higher threshold services. More work needs to be done to effectively understand both the scale of unaccompanied youth homelessness in the Commonwealth as well as the barriers (in structure,

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20 Correlated of service utilization among homeless youth, Tyler et al.; 2012
policy/statute, or community perception) that drive or force youth to continue to live on the street rather than enter into services.

The Working Group agreed on a goal statement and common principles for implementation of any counting methodology, specifically:

**Goal statement:**
Identify the population defined by the Commission in order to understand their needs and strengths; count that population in order to scale and distribute resources most effectively; and use the count as an outreach and engagement opportunity, making connections to effective resources.

**Common Principles:**
- Identify all youth who are homeless
- Involve youth in the planning and execution of counts
- Administer a count over time in order to be as inclusive and thorough as possible, while accounting for the potential of duplication
- Work with state agencies and community partners to establish confidentiality standards to guide data sharing.
- Ensure language in tools is culturally and linguistically sensitive and accessible
- Build from local experiences and relationships
- Organize a statewide approach to enhance standardization and data reliability and validity
- Use the counting methodology as a means of outreach and service engagement. Use data from counts to connect youth with the most effective services.

The Commission was required to assess the Commonwealth’s ability to identify and connect with unaccompanied homeless youth and to make recommendations on how the Commonwealth can proceed with developing a mechanism that can be used to identify and count unaccompanied homeless youth. Their four recommendations include:
Recommendation 1: Develop a uniform survey tool for statewide use.

The Commission recommends the creation of a survey that is geared to understanding both the number of unaccompanied youth who experience homelessness as well as a description of unaccompanied youth who experience homelessness so that appropriate services and housing solutions can be developed and/or implemented. The Commission focused on the specialized needs of two recognized groups of youth affected by homelessness: youth under age 18 and youth who are Lesbian, Gay, Bisexual, Transgender, Queer, and/or Questioning (LGBTQ). Later in this report the specialized needs of these two subpopulations will be discussed. The Commission recognizes that there other subpopulations of youth that may also require special attention and is interested in continuing to gather data around the typology of youth who experience homelessness in order to drive research and service responses.

The Commission recommends gaining a deeper understanding of the special needs of unaccompanied homeless youth by building and administering a comprehensive survey tool that will gather information about youth characteristics, background, and service needs. Similar efforts have already been undertaken with success in the City of Worcester and the City of Boston. The Commission will build upon these cities’ experience and work with community stakeholders and experts to develop survey tools that will comprehensively identify special needs and characteristics of homeless youth. The Commission will continue to review different methodologies for counting youth and consider the value and cost of each methodology. The Commission will begin by examining the methods presented to the Interagency Council on Housing and Homelessness and the recommendations to the Commission by Dr. Laurie Ross of Clark University. These methods (categorized by level of comprehensiveness) are detailed in Table 2.

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21 Dr. Ross has coordinated the Worcester Teen Housing Task Force point-in-time youth homelessness count for the past four years.
Another key determinant of cost will be the scale of the count and the associated staffing. For example, piloting counts in a limited number of communities using existing resources will be less expensive than a full-scale, coordinated statewide count. The benefits and disadvantages of each must be considered. The following cost items are essential to any count:

- Tool development
- Tool translation
- Printing
- Postage
- Materials (pens, clipboards, iPads etc.)
- Volunteer recruitment
- Stipends/incentives for “Youth Ambassadors” and youth participating in the survey
- Training
- Outreach
- Data entry
- Synthesis of multiple data sources

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<thead>
<tr>
<th>Table 2</th>
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<tbody>
<tr>
<td>Basic Plan</td>
</tr>
<tr>
<td>Street outreach surveys of youth in known locations</td>
</tr>
<tr>
<td>Get shelter count via phone communication</td>
</tr>
<tr>
<td>Use existing data to set parameters for local count</td>
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Interview school personnel

Use existing data to set parameters for local count
- Data analysis
- Report writing

In addition to a cost analysis, the Commission recognizes there are existing resources that can be leveraged to support a count. The Identification and Connection Working Group has developed a list of potential resources and has recommended ongoing analysis of additional, specific resources that could be leveraged. Such resources include Regional Networks to End Homelessness and other provider relationships; Continua of Care Point in Time count resources; and University partners for data collection, data analysis, and student volunteer staff. The Commission has begun conducting its cost analysis, seeking information from local and national partners. This effort will inform future state budgetary requests.

**Recommendation 2: Outline a robust youth engagement strategy.**

The Commission noted that any successful count would require a strong youth-led component. Young people are more likely to talk openly to other young people. The Commission has already begun to investigate ways of initiating more robust dialogue with young people (see Appendix C). Members of the Commission have repeatedly noted the importance of having a deliberate and well-articulated engagement strategy that creates a structured space for youth participation. As such, the Commission has developed an initial plan for youth engagement that will increase the likelihood of reaching all homeless youth and yield information that will accurately reflect youth voices.

**Recommendation 3: Evaluate potential strategies for creating useful typologies of service needs.**

The purpose of this recommendation is to categorize the needs of youth and the corresponding services needed to address them. For example some youth who are under age 18 may need a brief intervention to connect them back with their family of origin or with another competent, caring adult. This connection
or case management service is time limited and does not require a housing component. Other youth—including those struggling with substance abuse, mental health challenges or other disabling conditions—may require low-threshold supportive housing opportunities. The “count” of youth will reveal the numbers of youth who may need different types of interventions. The Commission can then provide a detailed analysis of the type of service, the volume of each service type and the associated cost. Although the Commission values the data that this process will provide, members were concerned that the typology may create barriers to continuity of services.

**Recommendation 4: Leverage existing counting efforts to pilot implementation of statewide count.**

Following the selection of the appropriate methodology and review of available research, the Commission recommends that there be a pilot youth count. The Commission will develop a 6-month work plan that will include detailed strategies for integrating youth into the identification and connection process, the development of a uniform survey tool, the development of a recommended methodology and roll-out strategy and timeline, and a cost analysis. The Commission has identified core components of a count implementation plan that will continue to be refined in the coming weeks. Components include:

a) Development of a uniform tool  
b) Development of a standardized youth engagement strategy  
c) Selection of survey sites  
d) Recruitment of survey administrators  
e) Training of survey administrators on all protocols, including youth engagement, survey administration, data collection and submission requirements  
f) Data collection and analysis  
g) Reporting results and sharing with the public  
h) Tool and methodology refinement.
The Executive Office of Health and Human services and the Massachusetts Interagency Council on Housing and Homelessness (ICHH) recommend that statewide counting efforts should involve working closely with HUD-funded Continua of Care to identify ways to leverage exiting point in time counts that are already taking place and to take advantage of any existing structures and supports. While the Commission recognizes that there may be instances in which the current point in time count methodology being used has not fully evolved to incorporate best practices in counting unaccompanied youth, it also recognizes the implications of missed opportunities if current resources are under utilized. By coordinating with COC counts there exists a chance to enhance the methodology in order to gather robust and usable data. This information will prove invaluable in forming the bedrock of later analysis and system design.

Taken together, these recommendations reflect only the initial efforts of the Commission in this area. We look forward to continuing to assist the Commonwealth take successful steps toward correctly identifying and engaging with these young people and assuring that they are given the opportunity to thrive.

Working Group on Barriers to Serving Youth Under Age 18

The Commission recognizes the importance of ensuring that unaccompanied homeless youth have access to services including education, housing, and health care. Because these youth are highly mobile and largely invisible, it can be difficult to identify these youth and connect them to needed services. In addition, there are certain barriers that discourage youth from coming forward and seeking access to services.

Based on the experience and expertise of the Working Group members, the Commission identified an initial list of barriers to services experienced by youth under 18 years of age. Many of the barriers are also experienced by youth 18 to 24 years of age as well. Barriers can be thought of in three classifications:
individual, cultural, and institutional. Examples of individual barriers include lack of trusted adult, lack of life skills, and limited access to transportation. Sometimes it is simple things that adults take for granted, e.g. an inability to obtain personal documents (driver’s license, birth certificate, etc.). An example of a cultural barrier is language—how we talk about youth and how they talk about themselves. State agencies and service programs operate within the confines of their mission, funding, and confidentiality requirements, all of which can impede communication. Currently there are limited youth support systems to help youth transition between programs or crossover from youth to adult system.

The Working Group anticipates that further research will demonstrate that subpopulations (immigrants, English language learners, veterans, college students, etc.) experience unique barriers in these classifications as well.

These barriers also include laws and policies established to achieve vital public policy purposes but can create unintended consequences for this unique group of youth. By way of example, this Working Group began to research the ways that mandatory reporting laws might be creating an inadvertent barrier to services. Mandatory reporting laws require certain types of professionals that work closely with youth, such as teachers, doctors, social workers, etc., to report any suspected cases of abuse or neglect to the Department of Children and Families. It is important to remember that the overarching philosophy of mandatory reporting is to protect the best interests of the child. Yet, anecdotally youth report that they fear being reported to the Department of Children and Families (DCF) and avoid accessing services lest they be found out. It has also been brought to the Working Group’s attention that some people working with youth may lack clarity on who is (or is not) a mandated reporter.

This Working Group will continue to analyze laws or policies that limit access to services, especially for those young people under age 18, while identifying other barriers that discourage youth from engaging in services.
Overview of Recommendations

Recommendation 1: Research and develop flexible, low-threshold housing and other programming options.

The Commission identified a need for an inventory of homeless youth services that are currently available, with a special emphasis on those programs that have minimal requirements for entry and ongoing participation, herein known as “low-threshold.” These programs are geared towards meeting young people “where they’re at” and therefore have very few entry requirements, and ongoing tenancy/participation in services is not contingent upon meeting certain clinical benchmarks.

This inventory of services must be accompanied by an understanding of the funding sources, the goals of the service, and corresponding outcomes. This research can begin immediately.

While this specific recommendation is focused on youth under age 18, the Commission also recommends flexible, low-threshold housing and other programming options for youth of all ages.

Recommendation 2: Training for all mandatory reporters about the law, their role, and what the response from the Department of Children and Families will be.

Recommendation 3: Enhance the working relationship between community providers, schools, and state agencies serving unaccompanied homeless youth.
**Recommendation 2:** Training for all mandatory reporters about the law, their role, and what the response from the Department of Children and Families will be.

A training for mandated reporters has been developed by EOHHS and is now available online. The current training would benefit from input from providers regarding the accessibility of the language and presentation for people of diverse backgrounds. While online training may be cost-effective, in-person training could be an important element in building trusting relationships between providers, mandated reporters, and state agencies. DCF provides on-site training free of charge upon request. The state should consider what changes should be made to this training so that all reporters understand their role, have an opportunity to build relationships with state agencies, and also receive information about the complex needs of this particular population.

**Recommendation 3:** Enhance the working relationship between community providers, schools, and state agencies serving unaccompanied homeless youth.

Strong connections between providers and state agencies that serve homeless youth are vital in connecting youth to needed services. Collaboration between state agencies and local authorities can improve outcomes for homeless youth. Certain cities and towns in the state were identified as having exemplary working relationships, especially with regard to how workers “on the ground” communicate with one another. The Commission recommends replication of those community practices that have been successful at collaboration and an assessment of areas in need of improvement.
Working Group on Services for Lesbian, Gay, Bisexual, Transgender, Queer, and/or Questioning (LGBTQ) Youth

While the precise data is unknown about the number of unaccompanied homeless youth who are LGBTQ-identified, (in keeping with broader trends about lack of data) both national studies and the experience of service providers in Massachusetts make clear that LGBTQ identified youth are over-represented among unaccompanied homeless youth\(^\text{22}\). Various counts around the country as well as surveys of homeless service providers have shown that there is a high proportion of LGBTQ young people among all the people they serve.\(^\text{23}\) For this reason, the language creating the Commission mandated that that sexual minority youth\(^\text{24}\) both under and over age 18 deserved careful consideration. In this analysis, care was given to considering what policies and statutes impacted the lives of LGBTQ\(^\text{25}\) young people and the specific healthcare needs of this population, particularly transgender youth\(^\text{26}\).

\(^{22}\) Social services for sexual minority youth: preferences for what, where, and how services are delivered, Wells, et al. 2012; The Health of lesbian, gay, bisexual, and transgender people: Building a foundation for better understanding, Institute of Medicine; 2011.


\(^{24}\) Sexual minority youth are young people who label themselves as gay or lesbian (e.g. individuals’ whose primary sexual/emotional connections are to people of the same sex) or bisexual (e.g. individuals whose sexual/emotional attraction and connections are not limited to one sex or the other) as well as youth who do not ascribe to these identity labels but engage in same-sex sexual or romantic behavior.

\(^{25}\) The acronym LGBTQ is intended to represent all sexual minority and transgender/gender non-conforming youth.

\(^{26}\) Transgender is an umbrella term that includes youth who transition (or aspire to transition) from one gender to another, and/or gender non-conforming youth—defined as youth who defy social expectations of how they should look, act, or identify based on the gender associated with their birth sex. This covers a broad range of people, including: male-to-female (MTF) or female-to-male (FTM) transgender/transsexual youth whose gender identity (how they identify their own gender) or expression (how they express their gender identity) differs from conventional expectations of masculinity or femininity (Massachusetts Transgender Political Coalition, available at: http://www.masstpc.org/media-center/transgender-101/ Accessed on March 19, 2013).
Overview of Recommendations

**Recommendation 1:** LGBTQ-inclusive data collection across all youth serving state agencies.

**Recommendation 2:** LGBTQ competency training and awareness campaigns within agencies.

**Recommendation 3:** Increase number of LGBTQ specific services.

**Recommendation 1:** LGBTQ-inclusive data collection across all youth serving state agencies.

Presently, there is a lack of data on service utilization by LGBTQ youth across the Commonwealth. This is largely due to a lack of a standardized method for the collection of this data. The Commonwealth has had a long history of leadership in addressing the needs of LGB youth and collecting data about the needs of this population via the YRBS and the Massachusetts Department of Public Health Youth Health Survey (YHS). This year the state continued its efforts by adding a question to both tools regarding gender identity. The Commission requests that EOHHS agencies utilize a standardized format for the collection of data around sexual orientation and gender identity. This same format will also be used in any statewide count of unaccompanied homeless youth. Additionally the Executive Office of Health and Human Services should complete an audit of their state agency policies to determine how they impact LGBTQ youth access to public accommodations, healthcare, and identification requirements.

The Commission recommends that this standardized sexual orientation and gender identity format be developed with input from community stakeholders, service providers, youth, researchers, and advocates; with additional input from ESE as is appropriate. It is important that, when complete,
this standard process is utilized by all relevant EOHHS youth-serving agencies at intake so that comparing data across agencies is possible.

The Executive Office of Health and Human services recognizes that these recommendations were developed with the needs of LGBTQ youth in mind in particular. EOHHS recommends that this opportunity be capitalized on by broadly auditing policy and procedure within the Commonwealth as it pertains to unaccompanied homeless youth in general. While data demonstrates that the needs of LGBTQ youth are often substantively different than those of non-SMY (sexual minority youth, see footnote 24) there is a need to continue to gather data on the population as a whole.

**Recommendation 2: LGBTQ competency training and awareness campaigns within agencies.**

Many LGBTQ youth fear accessing services because of their own negative experience or a friend’s negative experience while trying to get help. Other young people report positive experiences with service providing agencies. The Commission noted that the experience of the young person largely depended on the training and skill level of the staff member with whom they interacted. As such the Commission recommends that cultural competency training of youth homeless providers is one way to help improve youth experiences with agencies and providers. Therefore the Commission recommends that standardized core competency training be developed and administered to all staff at state agencies and contracted agencies that serve unaccompanied homeless youth. This training would include information about the support services and other resources available to LGBTQ youth.

The Commission recommends that a more in-depth training be developed for direct service providers serving unaccompanied homeless youth who are LGBTQ identified and experiencing homelessness. The Commission also recommends that a mapping of resources across the state be developed and available for LGBTQ youth seeking services.
All young people should understand that all services are available to them and will not be denied them on the basis of their sexual orientation, gender identity or gender expression. Unfortunately there will continue to be situations in which young people are not provided with the correct information and therefore the Commission recommends ensuring that the grievance or dispute procedures of youth homeless serving agencies are culturally competent (via training of all requisite staff) and easily accessible. This could include a “rights and responsibilities” brochure for every person that accesses any type of service with the name, email, and telephone number for an ombudsman or other designated individual. This individual shall be an appropriately empowered representative with whom the young person can speak should they feel that they have been mistreated on the basis of their sexual orientation, gender identity or gender expression.

**Recommendation 3: Increase number of LGBTQ specific services.**

LGBTQ specific services with staff that are deeply versed in the issues of LGBTQ youth are a critical need. Research has demonstrated that sexual minority youth feel a need for services that are targeted specifically to them; especially among transgender youth\(^\text{27}\). Young people have consistently voiced that they do not feel safe when using mainstream services as they feel more likely to be victimized by other service users, or staff (see Appendix C). As such, the Commission recommends that all aspects of the continuum of care for homeless youth be augmented with LGBTQ specific providers. This would include short-term safe homes, LGBTQ-specific shelters, and specific group homes to address mental health and/or substance abuse issues, and identifying or creating both long-term transitional and permanent housing programs and structures that are LGBTQ competent and specific. Additionally the Commission recommends that there be dedicated staff and resources to serving LGBTQ identified youth within mainstream resources.

\(^{27}\) *Ibid.* at 21.
Working Group on General Services and Housing

The Commission sees the need for a comprehensive system of developmentally appropriate services and housing for this population; one that takes a positive youth development, trauma-informed, and culturally competent approach. However, the Commission recognizes that there is not a clear sense of the population that needs to be served, the types of services needed, and the current services available. There are also many subgroups within the unaccompanied homeless youth population, different ways that this population accesses services, and many barriers to accessing services, as mentioned above. All of these need to be considered before an appropriate continuum of services, including low threshold mental health/substance abuse treatment, basic needs, education, employment, safety planning, parenting, health, transportation, case management/wraparound services, peer support, family services, life skills, and a range of housing options with support services can be created.

The Commission recommends a comprehensive count and continued investigation into the best practices of service and housing modalities to ensure that this population is appropriately served. These recommendations are the initial step towards a more robust analysis and concrete plan for services that the Commission will put forth in its first annual report in December of this year.
Recommendation 1: Analyze existing resources by service type and assess for gaps.

To date there has not been a comprehensive audit of the services available to unaccompanied homeless youth in the Commonwealth or how those services are responsive (or not) to the expressed needs of young people. These services have not all been evaluated for their adherence to best or promising practices or their ability to generate successful outcomes for youth. Therefore the Commission recommends that a Request for Information be issued to providers requesting information about the services that are available and gaps, the populations served, costs, funding streams, and measures of success. This information will then be incorporated with data from the Commission’s youth engagement outreach and the pilot counts (mentioned earlier in this report) in order to provide a comprehensive picture of available services and need.

Recommendation 2: Launch a minimum of three demonstration sites with evaluation components.

The Commission recommends a program demonstration project occur in three sites throughout the Commonwealth. The purpose of these demonstration
project sites would be to solicit and fund providers to either expand their service and/or housing model, serve a different population of youth (e.g. youth with disabilities or LGBTQ youth), expand their service model in a different type of community (e.g. from urban to rural), or create an innovative service or housing program. Selected providers would be required to include a research-based evaluation component and report outcomes. These reports would be due at the 6 month interval with a final report due after one year. All demonstration programs should be youth-focused, trauma-informed, and culturally competent, to best meet the needs of the diverse population of unaccompanied youth. Demonstration projects should be consistently evaluated for activities that produce repeatable outputs and outcomes. The Commission recommends programs be required to track outcomes after youth exit the programs. One of the biggest weaknesses in national information on the effectiveness of UHY programs is the lack of follow up after youth are discharged. Many agencies record “positive outcomes” for youth who end up on the streets again fairly quickly after discharge. Such a follow-up effort would cost additional money, but it would greatly enhance the usefulness of the results, since they would focus on true outcomes not just outputs. By moving towards longitudinal cohort analysis the Commonwealth will be able to better evaluate which strategies have long term positive effects and which strategies provide only temporary relief.

**Recommendation 3: Respond to Service and Housing Gaps**

The Executive Office of Health and Human Services and the Massachusetts Interagency Council on Housing and Homelessness recommend that the Commonwealth continue to investigate what resources exist or can be designed to create supportive housing alternatives to shelter for this population. In responding to these housing gaps, EOHHS and ICHH endorse continuing to work with the federally funded COCs that may prove to be a valuable resource in the implementation of a supportive housing system. Additionally, based on what the Commission has heard from youth and providers, the full Commission and all
of the working groups have heard that the following gaps should be evaluated and remedied where appropriate. These include:

- Lack of youth-focused, low-threshold supported transitional housing or permanent housing opportunities. To do this, the Commission recommends that the Commonwealth move forward to create a continuum of housing programs to meet the unique needs of unaccompanied youth. Lack of supported transitional housing or permanent housing opportunities. Again, this should be done by combining efforts with existing programs, including COCs, wherever possible.
- Lack of access to transportation for young people who have difficulty securing employment or attending educational programming.
- Lack of access to showers, public restrooms, and clothes washing facilities.
- Inability to obtain valid ID due to the difficulty in producing the necessary documentation necessary to get a valid ID. Additionally the costs (amending an ID is $25 and applying for a new ID is $50) can prove to be a financial barrier to young people. The Commission recommends that these service gaps be analyzed further and remedies developed.

**Recommendation 4: Increase connectivity with relevant academic institutions or experts.**

The Commission encourages academic collaborations to support research on this population, specifically:

- Developing relationships with public/private academic institutions that have shown interest in this area
- Reviewing research conducted by state agencies.

The Executive Office of Health and Human Services recommends that as the Commonwealth continues to explore ways to best work with the young people experiencing homelessness that it foster interagency collaboration in order to
conduct the necessary policy reviews and respond to any needs. These agencies include, but are not limited to:

- The Department of Transitional Assistance
- The Department of Children and Families
- The Department of Housing and Community Development
- The Office of Refugees and Immigrants
- MassHealth
- Regional Workforce Investment Boards

As has been shown, the challenges facing unaccompanied homeless youth in the Commonwealth and the services needed to support them are numerous. We commend the legislature for taking the step of convening this Commission and supporting this work. We urge the members of the Legislature to consider all of these recommendations in thinking about how best to ensure that all the youth of the Commonwealth can reach their potential.

Appendix A: Legislative Language

Outside Section 208

SECTION 208. Notwithstanding any general or special law to the contrary, there shall be a special commission for the purpose of studying and making recommendations relative to services for unaccompanied homeless youth age 22 and younger, with the goal of ensuring a comprehensive and effective response to the unique needs of this population. The focus of the commission's work shall include, but not be limited to: (i) an analysis of the barriers to serving unaccompanied youth who are gay, lesbian, bisexual or transgender; (ii) an analysis of the barriers to serving unaccompanied youth under 18 years of age;
(iii) an assessment of the impact of mandated reporting requirements on unaccompanied youths' access to services; (iv) the commonwealth's ability to identify and connect with unaccompanied youth; and (v) recommendations to reduce identified barriers to serving this population including, but not limited to, extending the time for certain categories of mandated reporters to file reports and establishing special licensure provisions to allow service providers to serve homeless youth under 18 years of age. The commission, in formulating its recommendations, shall take account of best practices and policies in other states and jurisdictions.

The commission shall include: the secretary of health and human services or a designee, who shall serve as chair; the commissioner of children and families or a designee; the commissioner of elementary and secondary education or a designee; the commissioner of public health or a designee; the commissioner of mental health or a designee; the director of Medicaid or a designee; the commissioner of transitional assistance or a designee; the undersecretary of housing and community development or a designee; 2 members of the senate; 2 members of the house of representatives; 3 youth who have experienced homelessness appointed by the office of the child advocate; 3 direct service providers who work with unaccompanied homeless youth to be appointed by the governor; and 1 representative from each of the following organizations: the Massachusetts Coalition for the Homeless, the Task Force on Youth Aging Out, the Massachusetts Appleseed Center for Law and Justice, MassEquality, the Massachusetts Housing and Shelter Alliance, the Massachusetts Transgender Political Coalition and the Boston Alliance of Gay, Lesbian Bisexual and Transgender Youth.

The commission shall submit its initial report to the governor, the speaker of the house, the senate president, the joint committee on children, families and persons with disabilities and the office of the child advocate not later than March 31, 2013. The report shall set forth the commission's findings and any recommendations for regulatory or legislative action with a timeline for
implementation, cost estimates and finance mechanisms. Thereafter, the commission shall submit a report by December 31, annually, to the governor, the speaker of the house, the senate president, the joint committee on children, families and persons with disabilities and the office of the child advocate, detailing the extent of homelessness among unaccompanied youth within the commonwealth and the progress made toward implementing the commission’s recommendations, along with other efforts to address the needs of this population.

Appendix B: Members of the Commission

Kathy Betts, Chair, Deputy Assistant Secretary for Children, Youth, and Families
Lauren Almquist, MassHealth
Cheryl Bartlett, Department of Public Health
Stephanie Brown, Department of Transitional Assistance
Maurie Bergeron, LUK Crisis Center
Carly Burton, MassEquality
John Bynoe, Department of Elementary and Secondary Education
Ann Capoccia, Department of Mental Health
Senator Harriette Chandler, Massachusetts Senate
Senator Katherine Clark, Massachusetts Senate
Danielle Ferrier, Rediscovery at the Justice Resource Institute and the Task Force on Youth Aging Out
Caitlin Golden, Massachusetts Housing and Shelter Alliance
Lisa Goldsmith, Dial/SELF
Representative Kay Khan, Massachusetts House of Representatives
Darrell LeMar, Department of Housing and Community Development
Diamond McMillion
Joan Meschino, Massachusetts Appleseed Center for Law and Justice
Amy Mullen, Department of Children and Families
Representative James O’Day, Massachusetts House of Representatives
Appendix C: Youth Testimony

The Commission developed and has begun to implement a series of focus groups in which young people who are either currently or have previously experienced homelessness have the opportunity to share their stories and provide feedback. This information is invaluable when it comes to crafting responsive policies and programs.

These focus groups, even this limited number, have proven to be a rich source of data, both qualitative and quantitative. Using a grounded theory the collected testimony is in the process of being coded and the results have been grouped into broad categories for further analysis. Two categories that the Commission felt particularly useful for inclusion in this report were two broad categories: young people discussing the reasons they think they’ve become homeless and young people discussing the reasons they remain homeless. These remarks should by no means be considered exhaustive, nor do they reflect the totality of what we’ve heard in the groups thus far. However, upon
review of the testimony, the Commission feels these statements to be particularly emblematic.

A sample of the demographic information collected can be found below (see figures). While the statements are indeed emblematic of concerns that have not been properly documented in depth in previous state efforts, the demographic data should not be taken as representative. Due to time constraints the Commission only had time to work with youth organizations that have a strong track record of serving LGBTQ youth and therefore the sexual orientation figures may be inflated.

Quotes from young people: *Circumstances that lead to young people becoming homeless*

“I didn’t really have a choice. My parents said I was no longer welcome in their house so I didn’t have a home anymore. …It was pretty simple, y’know?”

“I became homeless because I was beat by my father when I was younger, like all my life. My mother and father split up and so I stayed with her and all her boyfriends. And when I was 15 turning 16 her boyfriend said I could no longer be in the house.”

“I’m homeless, unfortunately, because my family doesn’t want me. Something happened in one of my programs, I got a bunch of assault charges in one of my programs…and then because of all those charges DCF dropped my case and my parents said they didn’t want anything to do with me. So I went to a shelter for
one night, got into a fight with like a 50-some year old guy, and left and wound up sleeping under the bridge.”

“I first became homeless when I was 13 because I lost my mom. It’s crazy to become homeless at 13 because you lose your mom and you’ve got nowhere to go.”

What are some of the reasons youth stay homeless?

“In my opinion sometimes I like the streets better. More freedom. No rent. I can get whatever I want anytime I want it.”

“Safety. I’ve met people who could’ve stayed at their home but they were being abused or molested there so it was safer for them on the street. It was a guarantee at home.”

“I went to a shelter once and woke up and shoes had been stolen off my feet.”

“Like me, if I stayed home I’d be worse off than I was now. My father once hit me in the back of the head with a frying pan. I have a little bit of brain damage, an indent in the back of my head.”

“I’ve also been abused…my
uncle threw me down an escalator once. …I also don’t talk about how in one of the programs I was raped four times by peers.”

“A lot of what scares me about shelters is the older people. The young homeless people are just like me. But the old guys who have been homeless for 40 years scare me.”

“Another problem that I’ve always run into is that I’ve always had a pet on the streets, for safety reasons, for companionship, for warmth, for many many reasons. And shelters do not let you take your pet with you and I am not willing to leave my animal outside while I’m inside. So that’s always a problem. I certainly will not give up the animal that’s been keeping me safe on the streets for one night in a shelter.”

“If you’re gonna sleep [in a shelter], put your bag under your head, and tie your shoes to the bed.”

Appendix D: Positive Youth Development

The Special Commission on Unaccompanied Homeless Youth fully supports a “Positive Youth Development Approach, (PYD),” in the provision of services to unaccompanied homeless youth and their families, which makes this report consistent with service procurements across the Commonwealth.

A “Positive Youth Development” approach takes into account developmental processes that all children experience, and encourages those who work with youth to provide services that identify and support improved developmental outcomes. Across the country, municipalities and states are adopting and utilizing PYD frameworks to guide decision making related to youth policy. While there are a number of PYD frameworks available, (the Search Institute’s “40 Developmental Assets” approach, the “Social Development Model”
promoted by the Social Development Research Group, etc…), several Massachusetts communities and state agencies have adopted a modified “America’s Promise” framework to help guide youth policy and program development. The framework suggests that youth who have supports in five key developmental areas (the “Five promises,” below) will have better life outcomes than youth who lack supports in these areas.

The Executive Office of Health and Human Services, Office of Children, Youth and Families, (EOHHS/CYF) which oversees child protective services, welfare, juvenile justice and immigrant and refugee services, has adopted the following “Key Components of Positive Youth Development Outcomes,” based on the Five Promises model. Specifically, services provided by agencies should generate positive outcomes in the areas of:

- **Physical and Mental Health** (Youth have access to adequate health and mental health supports);
- **Connection to a Caring Adult** (Youth are connected to caring adults in their schools and communities);
- **Safety** (Youth are safe and live in adequate housing);
- **Education and Employment** (Youth are successful in school and are prepared for the workforce); and
- **Civic Engagement**; (Youth are engaged in decision making, and are an active part of their community).

Additionally, EOHHS/CYF has identified “Key Characteristics of Successful Youth Development Programs and Promotion Approaches” which agencies are also encouraged to utilize. Specifically, that programs and approaches:

- Are youth centered, focused on the youth versus the program;
- Create opportunities for meaningful youth participation

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• Are asset-based and, focusing on positive youth outcomes
• Emphasize and value caring relationships between youth and adults as a key mechanism for building success in youth and communities
• Are culturally competent, and
• Promote civic engagement

Agencies and communities serving homeless and unaccompanied youth are encouraged to integrate these Positive Youth Development components into their strategic planning, program development, service implementation and procurement.

Research Base
The America's Promise Alliance (the Alliance) which developed the “Five Promises” model, consists of 400 national organizations representing nonprofits, businesses, communities, educators and policymakers. The Alliance finds (excerpted below) that children who experience sustained and cumulative benefit of at least four of the Five Promises across various contexts of their lives are much more likely to be academically successful, civically engaged and socially competent, regardless of their race or family income. For example:

• **Academic Achievement**
  Teens and younger children with four or more of the five Promises are more than twice as likely to work up to their abilities and to get mostly A’s in school, as compared to teens and younger children with one or fewer of the developmental resources in their lives.

• **Volunteering**
  Young people with four or more of the five Promises are 40% more likely to volunteer in their communities than those with just one or none of the Promises.

• **Avoiding Violence**
  Teens who receive four or more of the Five Promises are nearly twice as
likely to refrain from using violence compared to teens with only one or fewer core resources.

- **Social Competence**
  Teens who receive four or more of the Promises are nearly two-thirds more likely than those with zero or one Promise to be generous, respectful and empathetic and resolve conflicts calmly. Younger children with four or more Promises are twice as likely to be socially competent than their peers with one or zero Promises.

**Disparity Reduction**

According to the Alliance, the Five Promises help to mitigate the disparities among our nation’s young people. Regardless of race, gender or family income level, children who enjoy at least four of these five core resources are more likely to thrive.

- **Overall Health**
  While 6- to 17-year-old white children are more likely to be in better overall health than African Americans and Hispanics, the presence of four or more of the Five Promises significantly reduces this disparity among 6- to 11-year-olds and eliminates the disparity among 12- to 17 year-olds.

- **Grades and School Attendance**
  Nationally, white students tend to perform better than racial and ethnic minority students in school. However, when African-American and Hispanic students receive four or five Promises, the disparity between whites and these minority students was reduced for 12- to 17-year-olds and eliminated for 6- to 11-year-olds. The presence of the Promises also eliminated disparities in school attendance between white and African-American and Hispanic 12- to 17-year-olds, as well as between 12- to 17-year-olds from higher-and lower income families.

- **Drug Use**
  Receiving four or five of the Promises eliminated disparities among 12- to
17 year-old African Americans, whites and Hispanics when it came to avoiding drug use.

- **Social Competence**
  Having four or five of the Promises significantly reduced the disparities in social skills between 12- to 17-year-old whites and their African-American and Hispanic counterparts. Similar disparities by income were also eliminated for 6- to 17-year-olds.