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Urban Youth Homelessness: The Role that Past Trauma has upon Housing Instability

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Urban Youth Homelessness: The Role that Past Trauma has upon Housing
Instability

by

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Clinical Research Report

Presented to the Faculty of the School of Social Work St. Catherine University and the
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Degree of

Master of Social Work

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The Clinical Research Project is a graduation requirement for MSW students at St. Catherine University/University of St. Thomas School of Social Work in St. Paul, Minnesota and is conducted within a nine-month time frame to demonstrate facility with basic social research methods. Students must independently conceptualize a research problem, formulate a research design that is approved by a research committee and the University Institutional Review Board, implement the project, and publicly present the findings of the study. This project is neither a Master's thesis nor a dissertation.

Table of Contents

1. Abstract-----3

2. Background-----4

 2.1. Past Trauma and Retraumatization-----5

 2.2. Adverse Experiences Connected to Youth Homelessness -----6

 2.3. Definition of a Homeless Youth-----9

3. Psychosocial Aspects of Housing Instability-----10

 3.1. Trauma-----10

 3.2. Survival Behavior-----11

4. Methods-----12

 4.1. Search Terms, Specificity and Sensitivity-----12

 4.2. Review Protocol-----13

 4.3. Inclusion Criteria-----13

 4.4. Exclusion Criteria-----14

Figure 1.-----15

Table 1.-----16

5. Findings-----17

 5.1. Research Synthesis-----17

 5.2. Thematic Analysis of Literature-----18

 5.2.1. Contributing Factors of Homelessness for Youth-----18

 5.3. Links between Past Trauma and Homelessness-----20

 5.4. Interventions-----21

6. Discussion-----23

 6.1. Strengths and Limitations-----26

 6.2. Implications for Social Work & Conclusion-----26

7. References-----29

8. Appendix-----32

 8.1. Appendix A-----32-41

Abstract

A homeless teen or unaccompanied youth that has no permanent place of shelter will be in need of having basic needs met. Their needs will include food, shelter, connecting with educational services, clothing, skills for job seeking and supervision and care. As homelessness persists in their lives, the youth will face unintended consequences that contribute to their homelessness like victimization. Data available about homeless youth discusses poor home dynamics that lead the child to feeling unwanted and seeking other places to live, being kicked out due to low income or poverty within the household, volatile home dynamics that force the youth to leave home or being considered a “throwaway” and youth aging out of the foster care system and faced with living on the streets unprepared for independent living. Psychosocial factors, like physical and sexual assault that contribute to past traumatic experiences further cause subjective wellness impacts for the youth to face and increase the likelihood of their vulnerability to environmental and contextual factors that are harmful and encourage housing instability. Recommendations for interventions to encourage and support homeless youth to self-sufficiency suggest that there may be options to positive change. The literature concerning these factors is reviewed and recommendations for additional research is included.

Keywords: homeless youth, trauma, emotional trauma

Background

In the United States there are approximately 1.5 million youth that are considered unaccompanied youth or homeless teens. The actual number of homeless youth is yet unknown. Although, according to the National Alliance to End Homelessness (NAEH) (2016) about 500,000 youth are reported as being unaccompanied on the streets at any given time, with 380,000 of those youth are under the age of 18. The NAEH further reported, “about 50,000 youth per year are served at targeted homeless youth programs/agencies for basic needs.” Of all the age groups, youth between the ages of 14 years old to 24 years of age represent 16% of the total homeless population in Minnesota. According to the Housing and Urban Development’s (HUD) 2014 point in time report, 34% of the total homeless population in the United States are under the age of 24. According to an article reporting on homelessness by the Star Tribune (2016) “homelessness in general, is trending downward in Minnesota for the first time since 2006.” Yet many teens are still living on the streets unable to change their status.

The issue of youth homelessness is complex in nature resulting from negative contextual and environmental factors. Homeless youth are the most at risk to experiencing harmful and life long effects of living homeless (Wilder Research Study, 2015). The data available repeatedly show consequences of homelessness being associated with the following risk factors: stressful conditions within their home, poverty and the risks associated with being homeless (Buckner, 2008; Thompson et al., 2010). Low socioeconomic factors and family housing issues lead in the outcomes of youth becoming homeless. Interventions have been made on the local and national levels to provide solutions to this challenge, yet youth homelessness remains a lingering issue for society. Housing instability and homelessness amongst the urban youth population is a product of youth homelessness and it is a continuing and growing issue in the United States.

Past Trauma and Retraumatization

The experience living in homelessness is a form of retraumatization that the youth is left to deal with alone. All homeless youth have experienced adversities connected to past trauma in their past. Many have faced poverty, abuse, neglect, or rejection as well growing up as children. Youth are living on the streets unable to change their lives. The aspect of youth homelessness has many levels and dimensions that prevents the youth from having healthy mental and behavioral health, encourages educational deficits as a result of irregular school attendance and school dropping out, and prevents the youth from being able to have liveable earning wages to care for themselves.

Some youth are barely teenagers before they are inducted into a life of further uncertainty, shame, and the inability to change their life standards due to being homeless and unable to navigate through the social service systems. For example, a youth may know that there are community based agencies that assist with the basic needs but as a qualifying standard, an individual may need to verify their identity or address. The youth may not have vital documents like their birth certificate or social security card and become discouraged because the youth does not possess the skill to seek support to attaining the necessary documents. The reason many youths have remained homeless is still an unanswered question to date.

Homeless youth tend to be underserved by social service agencies that campaign being equipped to support and serve their needs. Even with social service agencies striving to provide a variety of services for the homeless, youth fall through the cracks of the social welfare system (van Wormer, 2003). The gaps in service pushes the youth to make poor decisions and welcomes vulnerabilities to risk factors that prevent them from being able to connecting to supportive services and getting basic needs met (Thompson et al.,2010). The basic needs include

The Impact of Homelessness on Youth

food, stable and safe shelter, good and consistent health care and positive support to improve their quality of life. These supports can afford the youth the opportunity to be able to progress towards an improved quality of life.

Risk factors associated with a longer period of homelessness for youth include trauma, emotional distress, risky sexual behavior, family problems, criminal or delinquent behavior, and substance abuse (USICH, United States Interagency Council on Homelessness, 2012). The efforts to abolish homelessness, in general, has been reignited with a goal that was set in 2010 by the USICH with an action plan to be able to recognize and implement evidenced based practices, leveraging upon resources that exist within the private and public sector and homeless assistance and mainstream systems (USICH, 2012) . This goal proved to report a reduction in youth homelessness, but not a remedy as many youths are still living unstable in communities all over the United States.

Adverse Experiences Connected to Youth Homelessness

According to a study conducted by Thrane et al (2006, pp. 1122) on a sample of 602 youth between the ages of 12-22 years of age, being served in 6 midwest social service agencies, physical abuse was much more commonly reported than sexual abuse. Youth enter homelessness being ill equipped and lacking resources to care for themselves and the likelihood of being victimized while living homeless increases. Slenick et al., (2016, pp. 147) “reported that a connection between experiences of childhood abuse and later street victimization has an infinite connection.” Exposure to factors that contribute to trauma, like stress, for example, will increase the likelihood of vulnerability to environmental and contextual factors that further their inability to attain stable housing. Elevated stress places the youth in vulnerable situations and at harm and risk for victimization. Negative behaviors will increase the likelihood of their

The Impact of Homelessness on Youth

vulnerability to environmental and contextual factors that will compromise the overall quality of life for the youth. Psychosocial factors, like physical and sexual assault, can cause diminished subjective wellbeing impacts for them to face daily. The youth will also be at risk for victimization and vulnerable to poor decision-making to survive while living on the streets. Survival becomes the priority of their lives at this point.

The stressors of poverty can place the youth into situations that will welcome vulnerability to abusive and risky situations that rob the youth of a happy life. Poverty related stressors tend to be greater to the youth than homelessness specifically (Buckner, 2008). The stress of the contextual factors of homelessness may lead the teento feeling ashamed or unwanted and seeking coping mechanisms that will further put the youth's physical and mental health and wellness at risk. Housing instability and childhood abuse are common amongst homeless youth which often lead the youth to experience housing instability and victimization into adult homelessness (Robertson & Toro, 1999; Slesnick et al, 2016).

Homeless youth are at the extreme end of this continuum due to being exposed to multiple adverse experiences and stressors, in addition to the stress of homelessness itself (Buckner, 2008; Wilder Research Study, 2015).” The stressors that a homeless youth are faced with, will eventually lead to poor choices that forces the youth to engage in activities that will allow needs to be met temporarily yet keep them in a state of risk. The youth is left to decide to engage in *survival behavior* (the exchange, whether consensual or coercive, of sex for basic survival needs such as food, clothing, shelter, protection, or money for food and other basic needs. and shelter is to engage in negative behaviors that puts them at risk of victimization and forced into criminal activity while living on the streets or moving from place to place to stabilize

The Impact of Homelessness on Youth

their lives. The abilities and skills needed to navigate themselves to safe and stable surroundings are absent.

The impact of youth homelessness causes huge financial and social deficits for society, communities, and the youth themselves. “Past trauma during childhood sets the tone for victimization while living on the streets and is a significant predictor of robbery, aggravated assault, and involvement in group fights (Thompson et al, 2010)” The trickle down effect of the crime being committed leaves the community, law enforcement system, the youth in a whole in opposition. The youth can become targets for sexual exploitation, using drugs and alcohol to cope is a reality placing the youth at more risk for both physical and mental anguish. The unintended consequences of this welcomes deviant behavior, affects mental health, physical health, encourages substance use and risky sexual behavior. The relationship to youth homelessness and substance is not totally clear as it exists as a part of the youth’s life (Thompson et al, 2010). These factors all contribute to and prevent the youth from being able to progress later in life as well.

Housing instability and victimization as a product of trauma becomes familiar to the youth as they lose hope of bettering their lives to stable housing and a better future. There is an interrelationship between poverty and homelessness that a homeless youth has experienced. Adverse childhood experiences is the gateway to factors of victimization and subjective wellness. Poverty prevents adequate nourishment and limited amounts of food to be available, inadequate or unsafe housing for the teen and being asked to leave the home or “kicked out. When poverty and homelessness are intertwined there tends to show a high likelihood of past trauma affecting the youth. Street culture while homeless predicts and promotes antisocial behavior which includes associating with deviant peers and means of subsistence (Patterson et

al., 2015, pp. 2). Understanding why and what causes homelessness in the youth population is an important factor to society and research is needed in order to find answers. This systematic literature review will analyze literature to understand what research has found out about contextual factors that cause youth homelessness. The following question will be used as the guide of the research: Does past trauma and victimization have a relationship to and influence over housing instability in the urban homeless youth population?

Definition of a Homeless Youth

The homeless youth population not only includes youth living on the street but also include youth that *couch-hop* (e.g. youth that live in unstable living conditions where survival skills are used to attain temporary housing and the youth is moving from place to place usually a couch in someone's home used temporarily for sleeping), youth *aging out* of foster care (e.g. youth that turns 18 years of age that has been served in the foster care system and is considered and expected to be on their own) and *throwaways* (e.g. a youth that is forced to leave home by their parent). Homeless youth will be the base phrase used to describe youth in this literature review. The definition of the term phrase will be describing youth between the ages of 15 years old to 24 years of age that have lived in temporary housing settings that are designated housing settings, temporary shelters, transitional living setting, or places not designated for human habitation. Most homeless teens are faced with hard decisions daily with no one to help them through their decision-making process.

Psychosocial Aspects of Housing Instability Defined

Trauma

Research shows that childhood trauma is common and has a profound impact to many areas of life (van der Kolk 2005, p. 205). *Trauma* (the experience of multiple, chronic and prolonged,

The Impact of Homelessness on Youth

developmentally adverse events.) For example, a child is disciplined by a parent or caregiver and the act leaves lasting scars and cuts on the child's body. The cycle that trauma can perpetuate can reduce an individual's quality of life especially when the possibility of multiple traumatic episodes has been experienced. Trauma can leave lasting effects upon a person's emotional and behavioral health that can connect. van der Kolk (2005) states that "3 million children are reported to authorities for abuse or neglect in the United States with about 1 million cases substantiated." According to Edidin, et al (2011), "homeless youth experience trauma and abuse prior to their experience of homelessness." Past abuse and neglect within the home, street influences and other delinquent behaviors like substance use/abuse, health constraints, financial issues and, family conflict are all contributors to a youth feeling overwhelmed and their quality of life standard being low.

According to Barczyk, Thompson & Rew (2014, p. 172) "*subjective wellbeing* (how people experience the quality of their lives and this includes both emotional reactions and cognitive judgments) components such as overall life satisfaction, satisfaction within particular life domains, presence of positive mood, and absence of negative mood are influenced by how a person perceives their overall life satisfaction and the inputs of life around the person." Contextual factors that affect subjective well-being is a lack of interpersonal and intrapersonal skills are present, familial or relational issues exist and prevent reconciliation from occurring, and environmental issues encourage running away or being kicked out/thrown away. School and social settings cause more prominent sources as well for the youth that experiences homelessness. Fear, shame, and a purely being uneducated and unable to plan for and access resources to change their lives is a source of negative subjective well-being.

According to Slesnick, Zhang, & Brakenoff (2016) “homeless youths who live on the streets are particularly vulnerable to victimization and continued homelessness.” The cycle that trauma can keep a person within can reduce their quality of life over time. In a teen, the continuation of the brain and physical development is still under construction and will be affected. The chance for healthy social skills to be gained can be impaired and affect an aspect of living called, subjective wellness. Barczyk, Thompson & Rew (2014) stated “understanding subjective well-being is important because of its inherent value to the individual and the society as a whole.” According to Diener, Lucas, & Oishi (2000) “subjective wellness refers to how a person experiences their quality of life which includes both emotional and cognitive judgements” For example, a homeless youth may have frequent flashbacks to sexual and physical abuse sustained as a child and then neglects to make healthy decisions about their sexual health and supports an abusive partner faithfully. The decision can lead to vulnerabilities that pushes the youth into engaging into survival behavior. Lowered emotional perception and esteem leads to negative subjective wellbeing.

Survival Behaviors

Most if not all homeless youth are faced with engaging in “survival behaviors” in order to maintain existence living on the streets. *Survival sex* (engaging in sex work as a means of income and survival on the streets puts youth at further risk for diseases like HIV and sexually transmitted infections and sexual exploitation (Thompson et, al., 2010). Survival behaviors include stealing, having sex in exchange for money, food, a place to sleep as well as using social service agencies that provide the same or similar services but not disclosing this to the workers. The natural reaction to engaging in the behavior is for the youth to feel shame, guilt, and even

concern. The survival sex can also be a trigger to past abuse experienced as a child. The youth feel as if there are no alternatives to meeting their immediate needs.

Engaging in survival sex in a safe manner can be seen as a form of resilience or tool for survival, unprotected sex work is a major risk factor among homeless youth (Thompson et, al., 2010). The survival behavior does not come with zero cost or effect to the youth. This therefore leads to the youth having a diminished perception of themselves, and poor decision making occurs which may lead to survival behaviors that puts the youth at risk. The negative impacts of survival behaviors affect the youth socially and emotionally and reduces the youth's perception of life satisfaction. Homeless youth lack the income to pay for basic needs like food and shelter. And the likelihood of connecting with community agencies that can assist and provide for the basic needs is unlikely in many instances for homeless youth

Method

Search Terms, Specificity and Sensitivity

A systematic literature review is intended to be authoritative on the topic, drawing from all relevant research within the specified parameters. In order to pull all relevant research from the chosen databases, both a sensitivity and a specificity search must be conducted. A sensitivity search will retrieve a high number of studies, including both relevant and irrelevant studies. It in essence casts a large net around studies, hoping to capture all potentially relevant studies. A specificity search will be more focused on all of the aspects of the topic and retrieve a smaller number of studies. These studies will be highly specific to the topic, but the search will likely miss other relevant studies due to its narrower lens (Petticrew & Roberts, 2005). These two searchers help establish initially the potential scope of the search project.

For the sensitivity search, the two terms used included "homeless youth" and "trauma" and the

age group of “adolescence (13 yrs -17 yrs.)”, which returned 119 results on the PsycInfo database. The three terms used for the specificity search included “trauma”, “emotional trauma”, and “homeless”, which returned 19 results on the PsycInfo database.

Review Protocol

The search terms that will be used include: "emotional trauma," , “trauma”,and “homeless youth”.The databases that will be used to retrieve the peer reviewed articles for this literature review include SOCIndex, PILOTS, PsycINFO, Social Work Abstracts, Child Development & Adolescent Studies. The search for grey literature will come from The United States Interagency Council on Homelessness’ (USICH) strategic plan, The Star Tribune, The Wilder Foundation and, The National Alliance to End Homelessness (NAEH) (reference figure 1. below).

Inclusion Criteria.

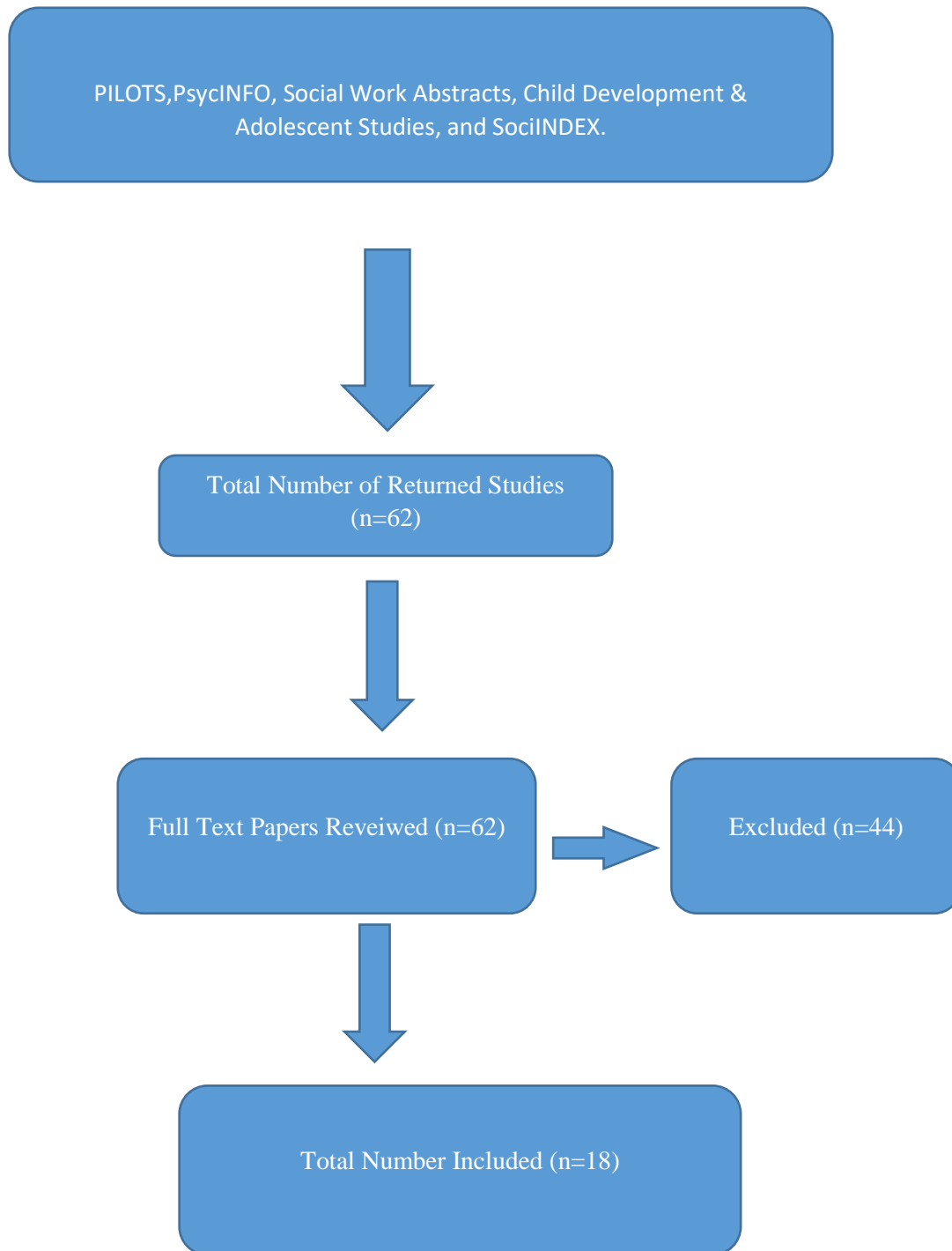
In the databases of SocIndex and PsychINFO, searches were carried out using the following combinations of search terms: “emotional trauma” AND “homeless youth”. All of the articles that showed up when using these search terms in the specified databases were published after 2000. Accordingly, a total of 20 scholarly and peer reviewed articles fulfilled the search criteria and all of the results were generated using the prescribed search terms as well as being published by the 2000 or later. In the databases of Social Work Abstracts, PILOTS and Child Development & Adolescent Studies searches were carried out using the following combination of search terms: “trauma” and “homeless youth”. All articles that resulted from the search were kept between 2000 to 2017. A total of 42 scholarly and peer reviewed articles fulfilled the search criteria and all of the results were generated using the search terms and being published by the year 2000 or later

With homeless youth, housing instability and trauma as the focus of this systematic literature review, articles were chosen to based on the amount of relevance to the chosen search words and the timeliness of the article being written. Additional attention was given to how much information the abstracts could lend to the topic being discussed as it pertain to contextual and environmental factors that lead to youth homelessness. Then a particular interest was taken for articles that discussed and recommend tools for the practice of social work, social workers policy and ongoing interventions in housing instability amongst urban youth that have experienced past trauma, risk/vulnerability to exploitation, poverty and family homelessness. References from articles and papers were included for relevant material. Additionally, data from reports from of the following agencies were included: The Wilder Foundation, The Star Tribune, The National Alliance to End Homelessness, The Unites States Interagency Council on Homelessness Other supportive data was compiled to gather statistics that were derived from websites of advocacy groups in support of the research of this literature review.

Exclusion Criteria.

Of the 62 scholarly articles that met the initial search criteria, only 18 satisfied criteria to be incorporated into this systematic literature review. The inclusion criteria were 1) the papers had to have been published in peer-review journals; 2) the papers were empirical in content, i.e. including quantitative and/or qualitative data (see Figure 1 and Table 1). Books were excluded. The material chosen ranged from the year 2000 to 2016, and in English and studies deriving within the United States. The responsibilities of social workers were not included into this review explicitly. Since the roles of social workers is a crucial component to change occurring that will be examined in this study for future social work implication, discussion and policy change/ research. Inclusion and exclusion decisions were made based on the title and

Fig. 1. Overview of Literature Review search strategy.



information that the abstract of the articles could lend the review perspective of social justice upon housing instability, trauma and youth homelessness.

The final review consisted of the following :11 used samples of youth that had experienced poverty and past abuse (physical or sexual), 2 used samples of youth who had been in the foster care system. 4 were literature review and 1 scholarly article were included. Literature and articles that are over 20 years old was discarded. Current policies, federal and local government strategies and, methods for evaluating frameworks and interventions implemented to remedy the aspect of housing instability and trauma as it relates to victimization were included in the search. Of the studies 2 used a mixed method approach where a survey was conducted and used a longitudinal method, 8 based their methods on cross sectional design, 3 used randomized control trial, 4 were literature reviews on the topic of youth homelessness and the contextual factors, and 1 was a published scholarly article (reference table 1. below for article methodology).

Table 1. List of studies by general methodology.

Mixed Method= 4	Cross Sectional Design= 9	Literature Review/Other=5
Santa Maria et al. (2015)	Heinze et al. (2010)	Fry et al. (2016)
Patterson et al. (2015)	Thrane et al. (2006)	Edidin et al. (2012)
Backer & Howard (2007)	Barczyk et al. (2014)	Thompson et al. (2010)
Van Womer (2003)	Dworsky et al. (2013)	Buckner (2008)
	Fowler et al. (2009)	Van Der Kolk (2005)
	Crosby (2015)	
	Deiner et al. (2009)	
	Washington (2001)	
	Slesnick et al. (2016)	

Findings

Research Synthesis

The purpose of this literature review was to explore the presented research question: “Does trauma has a role or influence upon housing instability for urban homeless youth?” Using SociIndex, PscyINFO, PILOTS, Social Work Abstracts, Child Development & Adolescent Studies within the exclusion and inclusion criteria 18 articles were chosen and reviewed. The results of the literature spoke to contextual and environmental factors like poverty, home life conflicts or trauma existing within the home encouraging youth to runaway from home, or being kicked out. Leaving many teens left with the decision to live on the streets with no resources and unable to change their lives to better standards. Due to the past adverse experiences that cause trauma, retraumatization while living on the streets becomes a factor of housing instability as risk and vulnerability comes into play.

The results of the search derived three main pillars within the research and are follows: contributing factors and characteristics of homelessness for youth, links between past trauma and homelessness, and interventions to possible change for the youth. 4 (22%) articles of the 18 chosen articles focused upon the contextual and environmental factors that affect youth homelessness (Edinin et al., 2012; Fry et al., 2016; Thompson et al., 2010; Washington et al., 2001) 10 (56%) articles used a study design including youth that had experienced poverty and past abuse (physical and sexual) (Backer & Howard, 2007; Barczyk et al., 2014; Crosby, 2015; Deiner et al., 2009; Dworsky et al., 2013; Fowler et al., 2009; Heinze et al., 2010; Santa Maria et al., 2015; Slesnick et al., 2016 Thrane et al., 2006;). 2 (11%) used samples of youth who had been in the foster care system and aged out (Patterson et al., 2015. 1 (5%) article was a systematic literature review upon the effects of childhood trauma on development (van Der Kolk,

2005) and 1 article (5%) discussed and defined the aspect of subjective well being exclusively (van Wormer, 2003).

All the articles in the literature review discussed the focus of the problem leading to homelessness and interventions that could allow change. Using self-reported, qualitative data acquired through in-depth interviews and reviewing previous literature was used to derive detailed information. While youth homelessness and trauma was the focus of the article research approach awareness upon interventions that support and encourage positive subjective wellbeing and housing stability, healthy life standards broadens the focus of the research.

Thematic Analysis of the Literature

Contributing factors of homelessness for youth

Understanding the differences between causes and consequences of homelessness can be difficult to determine. The contributing factors of youth becoming homeless are associated with trauma/and or abuse, neglect, experiences where the youth may have had temporary or multiple housing experiences and adverse unhealthy home situations that forced them to leave the family home. Family transitions due to the death of a family member, remarriage, single parenting household and multiple caretakers often resulted in reports of rebelliousness, social challenges, delinquent behaviors, educational difficulties, and substance abuse (Dworsky et, al., 2013, Fowler et, al., 2009; Patterson et, al., 2015). Youth who have experienced homelessness with their family is one of the beginning causers of youth homelessness. Poverty and abuse (both sexual and physical) has also shown to contribute to the youth running away or considered a throwaway.

All youth faced with homelessness enter where family homelessness occurs or out of home placement being system involved. (e.g. Barczyk et al., 2014; Thompson et, al., 2010; Buckner, 2008). Foster care youth who have aged out of care have been shown to be apart of the

The Impact of Homelessness on Youth

homeless youth population as well. Foster care youth that have aged out of care are also ill equipped with skills to care for their basic needs. Once immersed into the street culture of homelessness, youth are faced with hard and risky decision making. A factor of homelessness that youth are faced with daily to survive on their own.

Homeless youth lack the basic economic, social, and emotional resources required to meet their immediate needs for food, clothing, and shelter; this lack of knowledge to connect to resources has dire consequences for their physical and emotional health. Homeless youth are a particularly vulnerable population that have dealt with difficult family situations before leaving home and must find ways of coping with the stress of living on the streets. (Santa Maria et, al., 2015, pp. 2). The impact of past childhood adverse conditions connected to trauma and poverty allows negative subjective wellbeing to appear and the vulnerability to victimization.

Homeless youth may be exposed to factors that negatively affect decision making, including substance use and stress. Coping mechanism to survive living (e.g. survival sex, using drugs and alcohol) on the streets lead the youth to make poor decisions that compromise their mental and behavioral health, and increases risk factors (e.g. lack of resources to stable housing and food). Sexual experiences living on the streets heightens risk and exposure to sexually transmitted infections. Survival behavior such as risky sexual encounters are used as coping mechanism for financial gain where forced and voluntary trade sex, and sexual victimization experienced during childhood and during homelessness (Edidin et, al., 2012).

Stigma and shame (e.g. using prostitution as a means to make money or being made feel down about the decision to exchange sex for basic needs or being victimized) associated with the homeless youth population is also a contributing factor that prevents the youth from seeking out positive avenues to attain support and resources to stabilize thier situation. The youth will

then immerse themselves into a negative peer group culture where deviant behavior is the norm that further diminishes their quality of life (Backer & Howard, 2007).

Links between past trauma and homelessness

Childhood trauma experiences is a common aspect of youth homelessness and public health. The literature shows strong evidence supporting an association between the two and contributing to other contextual factors that further influences a youth's inability to steer their lives to positive venues of life (Van der Kolk, 2005, Thrane et, al., 2006; Thompson et, al., 2010). Housing instability has a strong connection to past trauma and victimization that sets the youth up for a lifelong path of instable housing (Slesnick et, al., 2016; Buckner, 2008). The discord and lifelong affect that trauma has upon a homeless youth prevents improved life standards to be discovered on their own. Past trauma, where maltreatment, physical/ and or sexual abuse places the youth at higher risk for vicitimization living on the street and diminishes subjective wellness. The youth loses hope of bettering their life on their own.

Homeless youth often have histories of experiencing adversities that are difficult to escape (e.g. being treated unfair and neglected due to stigmas that exist about homeless youth) and victimization that may influence their decision making and increase their risk of engaging in sexual risk behaviors. According to a study conducted by Santa Maria et, al, (2015) 47% of homeless youth reported sexual abuse, 51% said that they had been thrown out of their homes by their parents and 31% reported that they had left home because of parental sexual abuse. Youth that have survived traumatic experiences may have relied upon their own resilience banks to be self reliant in order to provide for their basic needs (e.g. using survival sex to attain housing and food). A homeless youth's resilience bank and pride will prevent them from using the

appropriate resources available to meet basic needs and it is likely that this lifestyle will not encourage meaningful change (Santa Maria et, al., 2015; Edidin et, al., 2012).

Victimization while living on the streets further supports the inability of the teen to attain healthy living standards. Homeless youth have diverse backgrounds and experiences that require services that meet their unique needs (Thompson et al., 2010). The diversity of their backgrounds includes negative experiences where family circumstances and exposure to victimization is heightened. The severity and amount of time spent living on the streets without the proper connection of care for homeless youth can elevate to adult homeless sector (Thompson et al., 2010).

Continued unachieved and low socioeconomic status is a factor that keeps them within poverty. Delinquent behaviors eventually elevate to criminal behavior, sentences, and incarceration. For example, criminal activity in the area where the youth are residing may increase if homeless youth are committing crimes so that they can feed and clothes themselves. Poor quality of living that diminishes life satisfaction and encourages mental health illnesses like depression, suicide, and emotional distress. Substance use/abuse may be used to cope with it all and leaving the youth vulnerable to being victimized at times. Other products of negative life trajectories are poor physical health and educational difficulties.

Interventions

The timing of policy change over the last 28 years since interventions have been introduced to eliminate homelessness has been a factor to review and change as far as homeless youth are concerned. A number of interventions that have been proposed to assist with youth homelessness. Improvements within available interventions have been shown to support education, improve housing options for low income or people experiencing poverty as well as

The Impact of Homelessness on Youth

policy changes and funding. Any interventions that are available are limited. For example, policies like the McKinney-Vento Homeless Education Assistance Improvements Act of 2001 and the Homeless Youth Act 2015, have been put in place to assist homeless youth with difficult situations. Along with the actions of legislative planning, community based agencies like youth shelters, drop in centers and transitional housing programs can assist in serving the basic needs like shelter and food for homeless youth.

Eliminating barriers to service in education, housing, medical was shown to have high success for youth outcomes. According to Thompson et al. (2010) “the importance of providing services that would be less restrictive and finding a balance between respecting the youth’s independence and providing support is a value to all.” Including perspectives of how the youth would like to be supported with needs to change yet understanding the scope of training and support that the caregiver or service provider lacks in order to adjust to the needs of the youth. Solutions to assisting highly mobile youth access to educational services to ensure that homeless youth can meet state academic achievements. Connecting to the youth through outreach services, creating drop in centers where homeless youth can be served in an integrated utopia style setting with diverse service providers ranging from social service providers, dentist, legal services, employment training and school enrollment to name a few of the services.

Relationship building where client and clinician ties can be built is a focus of intervention. According to Heinze et al. (2010) “breakdowns in the servicing process accounts for about 50% less youth that could be accessing the programs due to, factors associated with client satisfaction, youths’ experience in the program and engagement services. “The importance of relationship building is vital to programming (Heinze et al., 2010, p. 1369).” The information correlates with the understanding of how to serve the homeless youth population with positive

outcomes that can be celebrated. “Findings of research informs funding, programming, front line staff with program implementation and development (Heinze et al., 2010, p. 1372).”

Advocacy groups, think tanks on homelessness, and councils to end homelessness are a few groups designed to help with the decision making process to construct steps, plans and goals around the needs of youth homelessness. When empowerment is included in servicing, youth would be more likely to seek out the services and see a beneficence to increasing prosocial behaviors to gaining education and support towards housing stability. Along with an understanding of how past trauma affects functioning by social workers and social service workers alike will allow homeless youth being serviced to be educated and supported in manner that will guide and encourage relationship building for improved life trajectories.

Discussion

The aspect of youth homelessness has negative impacts upon their lives. Childhood trauma is one of the first negative impacts and predictors of victimization that will follow and encourage episodes of risky behaviors and vulnerability to victimization in later life experiences like youth homelessness. The negative impacts connected to unstable housing can persist for many years and encourage reduced quality of living and decision making. The results of the negative impacts cause the youth to make decisions to engage in survival behavior and use the negative behavior as a coping mechanism and a way of getting their basic needs met. Yet the individual finds reasons why survival behavior is necessary to fulfilling their basic needs and means to tapping into their own resilience and resource base to survive. The possibility of cognitive issues existing for homeless youth amongst and a part of the trauma and victimization that occurs is likely to appear in the negative behaviors and poor decision making in the youth.

The Impact of Homelessness on Youth

During times of crisis, youth with a past of multiple caretakers, limits the youth ability to have a safety network and an increased vulnerability to risk (Slesnick et al., 2016, p.148).” The connection that possibly exists within early childhood trauma and abuse and victimization and housing instability is yet still unclear (Slesnick et al., 2016 p. 148).” Yet issues around multiple care providers were due to having a history in foster care placement and multiple living arrangements. The experiences can have an effect on future life trajectories. Yet it is believed that individuals facing the most severe hardships desire to build upon their strengths and find joy in their life (Barczyk et, al., 2014, p.172). Childhood trauma has a huge impact on decision making whether the youth is resilient and strong enough to make decisions or not. Trauma creates negative impacts on their life in the long run and affects the paths they take in life.

The research conducted within this literature review cannot conclusively determine the best course of action for the future of homeless youth. Research conducted to date on homeless youth has illuminated a fair amount of knowledge about current needs and the impact of homelessness (Buckner, 2008, p. 732). Remaining within the two domains of homelessness for research prevents clarifications of any inconsistencies in the findings. Interventions that could advance the care of homeless youth that have been affected by negative impacts of life both physically and emotionally will not be discovered. According to Buckner (2008, p. 733), “it would be useful to clarify the relative impact and range of negative life events and chronic strains that children living in poverty experience as a means to better target treatment resources and preventive efforts to those who are most in need.” Implementing early interventions that could divert homelessness in the youth population if at all possible could be the answer to the problem of youth homelessness that in turns encourages problems like housing instability. Reaching families and youth alike with issues that experience poverty, traumatic experiences,

The Impact of Homelessness on Youth

low socioeconomic status that prevents being able to purchase food, pay rent and buy basic care needs, addressing mental health issues and physical health issues as well. Knowing the risk factors that youth and their families face that cause discord and lack social support to move through or past the discord is an approach that research can take and cause huge positive impacts.

Plans and actions should be creatively derived to preventing homelessness well before the affects of environmental and contextual factors persist. If nothing is done to work towards interventions, change cannot occur. The cycle that trauma can keep a person within can reduce their drive for betterment and persist lifelong effects of trauma. Consistent and ongoing research is needed due to the changes in life dynamics, culture, society and environmental effects that can affect and influence the youth's life and supports like homeless youth serving agencies have the keys to bridging them to the resources that will be lifelong and life changing.

The systematic literature review examines the literature available for the correlation and cohesion of literature that could be referenced for interventions and supports with assisting homeless youth that have experienced childhood trauma. This examination could in turn allow homeless youth to obtain stable housing and have healthier life standards physically and psychologically. Trauma was not defined in a unified manner in the literature and this may have been a limitation with finding literature available on past trauma and youth homelessness. interventions that could be used as the framework when working with homeless youth that have experienced childhood trauma. There were several approaches to seeking literature of trauma. There is ongoing planning and developing of policies, program and funding to diminish and eventually eliminate homelessness wholly.

Strengths and Limitations

While this systematic review was designed to include all pertinent and current research on the topic of youth homelessness, past trauma and housing instability, interventions taken by social workers as a means of education and support for connecting youth to services was not at the top of the priorities. With topic being very broad, limiting your search allows for lots of data to not be included in the search results. Amongst the several articles that did discuss the topic of youth homelessness and trauma there were even fewer articles that took into consideration past trauma affecting housing instability. Therefore one of the major limitations of this systematic review has to do with the small sample of research available for review. This systematic review was limited to articles and research that were peer-reviewed, scholarly, and written in English, which was done to ensure the thoroughness of the study but may have resulted in the omission of some less structured and reviewed research. Likewise, by focusing specifically on literature that was peer-reviewed, scholarly, and evidence-based meant the exclusion of other pieces of literature, such as grey literature, that have not been formally published. With interventions to improve childhood nutrition at the center of this research, only articles involving efforts by school social workers to improve childhood nutrition were included in the research.

Implications for Social Work and Conclusion

Understanding what and who homeless youth are and the barriers that they face in society is vital in order to be able to plan for change. The youth population is one that is diverse in gender and culture. When situations within their home with their parents or caregivers that introduce the youth to victimization like physical/and or sexual abuse the youth will leave the home. Usually either running away to escape the situation or being asked to leave or kicked out

The Impact of Homelessness on Youth

of their home. Multiple and unstable housing situation will encourage risky behaviors and encourage the already negative impacts in the youths' life. Stigma and shame can prevent the youth from seeking prosocial behaviors that can connect them to interventions and supports that can allow housing instability to be changed. Negative impacts associated with youth homelessness is a lingering issue for the youth, communities and society as a whole. A homeless youth's perceptions and ability to use personal resources within their own resilience and personal strengths will increase aptitude to survival maintenance. Knowing that youth are sometimes afraid, unaware or even not ill equipped and unwilling to seek support.

A trauma-informed care approach to service is an approach that should be seriously considered for the advancement of care and service for homeless youth. Considering an approach that would lead to a path either to family reunification or long term supportive services. Extensive outreach efforts would be the umbrella that housed the intention path to stable housing services. These efforts would include proactive channels of connections to youth that either shy away, lack trust or are intimidated by social service agencies that support and serve homeless youth. Outreach is a valuable and missing component of servicing and mostly due to poor planning or a lack funding. By implementing this component of servicing allows for relationship building and connecting to long term supportive services. Outreach can attend to immediate yet temporary needs of the youth but planting the seed of hope in the youth.

The next component of trauma informed care service would be properly assessing the reality of a youth being reunified with their family and both the youth and their family being supported to maintain and sustain a health, nurturing and enriching homelife. The second path could lead the youth that is unable to return home to a person centered long term supportive program that included independent living support services where the youth could be in control of

The Impact of Homelessness on Youth

their programming and life. Case management, aftercare services, skills development and some basic needs supports could be provided. Effective programming encourages healthy development to the paths that lead to higher education, sustainable employment and learning skills of independent living. This could then encourage and facilitate a better outlook for youth and their families in crisis where without the support would lead to social issues that diminish living and encourage an unhealthy life.

Examining the impacts of victimization and housing instability can deem important information for social work practice. Social workers should work to conceptualize the many theories that the social work practice can be possibly be used to inform the work in servicing homeless youth. Social justice is increasingly becoming a way of seeing for all and an aspect of social standards not just for the social officers of the field. New structures in the agencies that the work with this precious population can be of benefit to their lives lifelong. Incorporating questions that assess needs and guide standards and case planning. If the youth can be connected to better social supports, consistent coordination of services that lead to a better living standard increased subjective well-being will reduce risk and victimization and eliminate housing instability.

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Appendix A

Table 2. Literature Reviewed

Title, Date and Author(s)	Sample	How is the data analyzed?	Findings	Conclusion
<p>Backer, T. E., & Howard, E. A. (2007). Cognitive impairments and the prevention of homelessness: Research and practice review. <i>The Journal of Primary Prevention</i>, 28(3-4), 375-388.</p>	<p>Five areas of are explored that address impairments in preventing homelessness: (1) the nature and estimated prevalence of cognitive impairments among people who are homeless, especially those with vulnerabilities like mental illness or substance abuse; (2) the multiple origins of these impairments; (3) how these impairments impact services for people at risk for homelessness; (4) good practice approaches to handling cognitive impairments in homeless shelters, supported housing programs, and other service systems for people at risk for homelessness; and, (5)</p>	<p>A review of the data to determine how impairments can be addressed in planning, policy making and servicing of individuals.</p>	<p>Further research is needed to improve upon the research and practice models used to improve and intervene in understanding how much of an impact that cognitive impairments have upon homelessness.</p>	<p>While research and improved practice models can change servicing, stigmas will need be reduced through educating people about the impacts of homelessness and cognitive impairments that affect homelessness.</p>

The Impact of Homelessness on Youth

	important research and practice issues requiring further action.			
Barczyk, A.N., Thompson, S.J., Rew, L. (2014). The impact of psychosocial factors on subjective well-being among homeless youth adults. <i>Health and Social Work (39)3</i> . 172-180.	185 homeless young adults that were identified by drop in center staff as being 18-23 years of age and known to use alcohol or drugs.	Descriptive statistics using correlations, t test, and analysis of variance determine significance between study variables and scores on subjective wellness.	The evidence from the study shows that social support and a positive attitude can buffer hardships of street involvement and increase feelings of subjective well-being.	Having a network of close relationships provides the individual with a reference of group that may foster subjective well-being.
Buckner, J. C. (2008). Understanding the impact of homelessness on children: Challenges and future research directions. <i>American Behavioral Scientist</i> , 51(6), 721-736.	13 articles published between 1987-2005 pertaining the effects of homelessness on mental health, behavior and physical health and academic performance of youth between two groups: low income homeless children and children living in low income household	Literature was analyzed to determine the impacts of the aspects of homelessness upon the youth by gathering the contextual and environmental factors of homelessness experienced by the child.	Homeless youth had a range of health and mental health problems that needed immediate attention and impact upon homelessness for children. Limitations within the methodology of the literature prevent findings that could detect further or other comparisons that would state whether one group showed higher likelihood to experience homelessness oppose to the other based upon the factors of homelessness faced as a child.	The literature found the apparent negative effects caused by exposure to a common set of poverty-related risks of homelessness. Those risks would test the risks between two groups: low income homeless children and children living in low income household faced with the negative environmental and contextual factors

The Impact of Homelessness on Youth

<p>Crosby, S.D. (2015).</p> <p>An ecological perspective on emerging trauma-informed teaching practices. <i>Children & Schools</i>, 37(4), 223-230. doi: 10.1093/cs/cdv027</p>	<p>Traumatized children in the school setting and any other child serving agency, children that have been in foster care, juvenile detention centers and youth of color of lower socioeconomic status.</p>	<p>Reviewing practices in the mesosystem, microsystem, exosystem and macrosystem environmental levels of Bronfenbrenner's ecological theory. Implications for practice relevant to each level was provided.</p>	<p>Helping traumatized children to be successful requires a departure from the status quo or what is normal in the workplace. Finding that the ecological perspective is useful when taking initial and subsequent steps toward building a trauma-informed servicing environment.</p>	<p>Staff that are knowledgeable in trauma and effective ways to addressing it requires child serving agencies and practitioners to consider the impact this awareness has upon improving the child's ecologies and potential for trauma-informed practices to improve their ecologies</p>
<p>Deiner, E., Oishi, S., Lucas, R. (2009) Subjective well-being: The science of happiness and life satisfaction. <i>The Oxford Handbook of Positive Psychology</i> (2 ed.). 63-73.</p>	<p>Examining the responses between a person's momentary responses and their connection to mood.</p>	<p>Mix method analyzation to differentiate the data gathered: situational variables that impact life satisfaction and mood and theoretical approaches</p>	<p>Contextual factors related to events and situations that occur in a person's life, personality, temperament and demographics influenced subjective well-being</p>	<p>More research is needed to learn and implement more theoretical approaches that can enhance a person's outlook and ability to have a clearer understanding of how subjective well-being impacts the outcomes of their lives</p>
<p>Dworsky, A., Napolitano, L., & Courtney, M. (2013). Homelessness during the transition from foster care to adulthood. <i>American Journal of Public Health</i>, 103(S2), S318–S323.</p>	<p>624 youth were followed over a 10 year period from Iowa, Illinois and Wisconsin beginning in 2002. The sampling frame included all the Iowa and Wisconsin youths and two thirds of the Illinois youths who had entered foster</p>	<p>Using estimated cumulative percentages of youths who become homeless during the transition to adulthood and also estimated discrete time hazard model that predicted first reported episode of homelessness.</p>	<p>Youth aging out of foster care are at high risk of becoming homeless during their transition to adulthood. Specifically, 36% of the 624 Midwest Study participants whose outcomes we could observe reported at least 1 episode of homelessness by age 26 years, high rates of abuse, males had a higher risk of</p>	<p>Policy and practice changes are needed to reduce the risk that youths in foster care will become homeless after aging out.</p>

The Impact of Homelessness on Youth

	care before their 16th birthday, were still in foster care at age 17 years, and had been removed from home for reasons other than delinquency		becoming homeless over females,	
<p>Edidin, J., Ganim, Z., Hunter, S., & Karnik, N. (2012).</p> <p>The mental and physical health of homeless youth: A literature review.</p> <p><i>Child Psychiatry & Human Development</i>, 43 (3), 354-375. doi:10.1007/s10578-011-0270-1</p>	<p>Studies were chosen to conduct an examination of neurocognitive functioning, academic achievement, high risk behaviors and activities, financial and legal issues, abuse and violence on the street, and mental and physical health care.</p>	<p>Compare results of studies and perform meta-analyses to synthesize data.</p>	<p>Homeless youth face a variety of stressors and risk factors from a lack of basic necessities, such as inadequate food and shelter, to more complex psychological and medical problems. Interventions that target only one aspect of an individual's life will likely not effect meaningful change; rather, a more holistic approach to intervention is required.</p>	<p>Researchers need to move beyond convenience samples and recruit from multiple sources and preferably from multiple cities so that the findings generalize more broadly. Multimethod, multi-informant data collection would further strengthen the studies.</p>

The Impact of Homelessness on Youth

<p>Fowler, P. J., Toro, P. A., & Miles, B. W. (2009).</p> <p>Pathways to and from homelessness and associated psychosocial outcomes among adolescents leaving the foster care system.</p> <p><i>American Journal of Public Health</i>, 99(8), 1453–1458</p>	<p>265 adolescents who left the foster care system in 2002 and 2003 in a large midwestern metropolitan area were evaluated over a 2-year follow-up period.</p>	<p>Using housing and psychosocial outcomes analyses conducted was to identifying latent housing trajectory categories across the first 2 years after participants' exit from foster care.</p>	<p>Findings revealed 4 latent housing classifications. Most participants (57%) had experienced stable housing situations since their exit from foster care. Those in the remaining 3 categories endured housing problems, and 20% were chronically homeless during the follow-up period. Housing instability was related to emotional and behavioral problems, physical and sexual victimization, criminal conviction, and high school dropout.</p>	<p>Adolescents in foster care are at considerable risk of homelessness. Preventive initiatives can reduce homelessness in this population by implementing improved foster care programming and developing empirically informed interventions targeting foster care adolescents</p>
<p>Fry, C.E., Langely, K., Shelton, K.H., (2016).</p> <p>A systematic review of cognitive functioning among young people who have experienced homelessness, foster care or poverty.</p> <p><i>Child Nuerology</i>, p. 1-28.</p>	<p>31 studies were systematically compiled.</p>	<p>Using the preferred reporting items for Systematic Reviews and Meta-Analyses (PRISMA; guidelines, a checklist for ensuring the transparent reporting of systematic reviews that is recognized worldwide. An electronic search of Web of Science , MEDLINE and PsycINFO (via Ovid) was conducted</p>	<p>Young people who have experienced homelessness, foster care, or poverty tend to demonstrate poorer performance on cognitive tasks than young people who have not had these experiences, or are found to show below average performance compared to published norms. Poverty is consistently associated with performance across a wide range of cognitive domains, while the findings for foster care are mixed.</p>	<p>The cognitive performance of young people who have experienced homelessness, foster care, or poverty tends to be below that of their non-disadvantaged peers. The evidence presented highlights the importance of cognitive functioning, which may be neglected in vulnerable populations in favor of more immediate needs like shelter, food and support.</p>

The Impact of Homelessness on Youth

<p>Heinze, H.J., Jozefowicz-Hernandez, D.M., Toro, P.A. (2010).</p> <p>Taking the youth perspective: Assessment of program characteristics that promote positive development in homeless and at-risk youth.</p> <p><i>Children and Youth Services Review</i> 32, 1365-1372. doi: 10.1016/j.childyouth.2010.06.004</p>	<p>Six agencies providing services to homeless youth in a large Midwestern metropolitan area. The majority of the youth (80%) were homeless, residing in emergency shelters or transitional or assisted housing.</p>	<p>The questionnaires included assessing demographic and background characteristics, overall satisfaction with agency, and agency programming.</p>	<p>Fewer than 50% of the youth who experienced homelessness are accessing shelter services within the 6 agencies. Factors associated with client satisfaction sheds value on the perception of quality of experience within the agencies and engagement.</p>	<p>The strength of relationships between service providers and program dimensions are associated with each other. The results provides insight into youth assessment and service provision and the degree these assessment are linked to overall program satisfaction.</p>
<p>Patterson, M. L., Moniruzzaman, A., & Somers, J. M. (2015).</p> <p>History of foster care among homeless adults with mental illness in Vancouver, British Columbia: A precursor to trajectories of risk.</p> <p><i>BMC Psychiatry</i>, 15(1), 32–42.</p>	<p>449 homeless adults in the Vancouver, B.C. area that has past foster care experiences and mental health illnesses</p>	<p>Descriptive statistics (median and inter-quartile range for continuous variables; frequency and percentage for categorical variables) were used to characterize the sample. All continuous variables included in statistical analyses (i.e., age at randomization, duration of homelessness, age first homeless, age of first drug/alcohol use) were transformed into categorical variables. For dichotomous variables, median values were used as the cut-off point. Comparisons of categorical data between participants who completed or did not complete the foster care items, and those</p>	<p>A history of foster care placement independently predicted incomplete high school, duration of homelessness, discontinuous work history, less severe types of mental illness, multiple mental disorders, early initiation of drug and/or alcohol use, and daily drug use.</p>	<p>It is important to screen homeless youth who exit foster care for substance use, and to provide integrated treatment for concurrent disorders to homeless youth and adults who have both psychiatric and substance use problems. This intervention may allow for other confounding factors that affect the ability to attain stable housing and health standards of living.</p>

The Impact of Homelessness on Youth

		who did or did not report a history of foster care, were conducted using Pearson’s chi-square test.		
<p>Santa Maria, D., Narendorf, C., Yoonsook, H., Bezette-Flores, N., (2015).</p> <p>Exploring contextual factors of youth homelessness and sexual risk behaviors: A qualitative study.</p> <p><i>Perspectives on Sexual and Reproductive Health</i> (47)4, p. 195-201</p>	<p>64 homeless youth aged 14–24; participants were recruited from a variety of venues in Houston between October 2013 and March 2014.</p>	<p>A dominant qualitative study design with an embedded quantitative component was used to address research questions.</p>	<p>Exploring Contextual Factors of Youth Homelessness And Sexual Risk Behaviors: A Qualitative Study</p> <p>Participants were predominantly black (75%), sheltered (67%) and aged 18 or older (77%). Youth discussed how the circumstances of their homelessness and the struggle to meet their immediate needs led to behaviors and experiences that put them at risk for HIV. Three themes emerged: Homeless youth frequently engage in risky sexual behavior, sometimes as a way to cope with stress; they often trade sex, either voluntarily or involuntarily, for such necessities as money or a place to sleep; and many experienced childhood sexual victimization or have been victimized since becoming homeless. Youth also described how stress, stigma and self-reliance contributed to their involvement in HIV risk behaviors.</p>	<p>Methods that target stress and stigma while respecting youths’ self-reliance may help reduce sexual risk behaviors. Further research is needed to determine suitable behavioral change techniques to address these potentially modifi able factors.</p>

The Impact of Homelessness on Youth

<p>Shane, P. (1991). A sample of homeless and runaway youth in new jersey and their health status. <i>Journal of Health and Social Policy</i>, 2(4), 73-82.</p>	<p>536 homeless youth participated in the study who had mental illness, chemical use and physical health issues that were not maintained</p>	<p>Descriptive variables used within the survey and interviews to answer questions where health issues and chemical use affected their standard of living and impacted their ability to connect to service and care.</p>	<p>Participants were unable to take the necessary steps to get medical care for health ailments. It was found that issues within mental health and chemical use/abuse prevented connection care and an understanding to connect to resources</p>	<p>Homeless youth are faced with barriers when connecting to services for care. Variables of homeless like chemical use/abuse and mental illness prevents proper care for better health standards.</p>
<p>Slesnick, N, Zhang, J., Brakenhoff, B. (2016). Homeless youths' caretakers: The mediating role of childhood abuse on street victimization and housing instability. <i>Social Work (61)2</i>. 147-154. Doi: 10.1093/sw/sww009</p>	<p>79 substance-using, street living youth, ages 14 to 24 years of age were recruited through outreach services to participate in the study.</p>	<p>Multivariate path analysis was conducted using Mplus software to examine the relationship between multiple caretakers, childhood abuse experiences, housing instability and victimization experiences.</p>	<p>The results of the study showed childhood sexual abuse were significantly correlated to multiple caretakers and high instances of housing instability. Physical abuse did not have a relationship to multiple caretakers or changes if multiple caretakers caused neglect to occur. Yet it could not show how much of an impact that multiple caretakers have on housing instability or street victimization.</p>	<p>Examining the impact of victimization and housing instability can deem important information for service providers to incorporate into their assessment and program standards and case planning.</p>
<p>Thrane, L. E., Hoyt, D. R. Whitbeck, L.B. Yoder, K.A. (2006). Impact of family abuse on running away, deviance, and street victimization among rural and urban youth. <i>Child Abuse & Neglect</i>, 30, 1117-1128</p>	<p>A convenience sample of 602 adolescents was interviewed between 1995-1996 in Missouri, Iowa, Nebraska, and Kansas</p>	<p>Multiple regression was used to examine the association between gender, neglect, sexual abuse, physical abuse, geographic and family structure change, and community size of first runaway to predict age at first runaway, deviant subsistence strategies, and street victimization.</p>	<p>Findings indicate that adolescents exposed to neglect and sexual abuse ran away sooner and were more likely to be victimized on the street. Rural adolescents who experienced higher levels of physical abuse relied more heavily on deviant subsistence strategies and remained in abusive homes longer than their similarly situated urban counterparts.</p>	<p>Rural youth who have been subjected to elevated levels of familial abuse are at greater risk of deviant subsistence strategies, which increase the likelihood of street victimization. While their counterparts, urban youth,</p>

The Impact of Homelessness on Youth

<p>Thompson, S.J., Bender, K., Windsor, L., Cook, M.S., Williams, T., (2010).</p> <p>Homeless Youth: characteristics, contributing factors, and service option. <i>Journal of Human Behavior in the Social Environment</i>, 20, 193-217. doi: 10.1080/10911350903269831</p>	<p>Youth experiencing homelessness immersed in street culture</p>	<p>Contributing factors and were reviewed based upon reports and other scholarly studies conducted to derive information about characteristics that exist and affect the population and contribute to homelessness including service options available to provide supportive services to examine what is working to address youth homelessness and what barriers exist.</p>	<p>When factors prevent youth from remaining in their “homes”, youth runaway, get kicked out or get asked to leave. The youth then immerse themselves into a culture where risk to personal safety and health becomes an issue. Barriers to service exist as youth seek to fulfill basic living needs and accessing resources to supportive services.</p>	<p>Homeless youth are a diverse population with diverse factors contributing and challenges exist that reduce their quality of life. With the complexity of these youth and the issues they face they require services that will consider their unique needs and characteristics. Future research is needed in order to further develop services that will be connective and engaging.</p>
<p>Van der Kolk, B. A., (2005).</p> <p>Developmental trauma disorder: Towards a rational diagnosis for children with complex trauma histories. <i>Psychiatric Annals</i>, (35)5, Psychology Module p. 401-407.</p>	<p>Children with experiences that include abuse and neglect</p>	<p>Comparing the data in respect to the percentages that reports show level of exposure to neglect or abuse, triggered patterns of repeated dysregulation in response to traumas cues, persistent altered attributions and expectancies and functional impairment.</p>	<p>Results of the data compiled showed that adverse childhood experiences are vastly common than they are recognized or acknowledged and it had a powerful relationship to life trajectories in adulthood health, decision making and functioning</p>	<p>A past history of trauma, physical and sexual in nature, are associated with a host of problems that will show up later in life in the form of substance abuse, mental health illnesses, physical health disorders, sexual dysfunction, social issues and becomes lodged within the child socially, emotionally, psychologically and physically.</p>
<p>Van Wormer, R. (2003).</p> <p>Homeless Youth Seeking Assistance: A Research-Based Study from Duluth, Minnesota. <i>Child & Youth Care Forum</i>, 32(2), 89-103.</p>	<p>A sample of 25 was randomly selected and examined in great detail for inclusion in the study.</p>	<p>Secondary analysis of material collected from outreach staff.</p>	<p>Analysis of the data confirm the findings of the National Coalition for the Homeless (1998) that the three most prevalent reasons for homelessness among youth are family issues, economic problems, and residential instability. The need for additional supportive services where long term and emergency housing is available is needed.</p>	<p>The study helps to confirm the need of more services and interventions alike to fulfill the needs of youth homelessness through supportive services that will stabilize housing needs and help encourage prosocial and resources behaviors for positive life trajectories.</p>

The Impact of Homelessness on Youth

<p>Washington, P. (2011). Homeless Youth: A Concept Analysis. <i>Journal of Community Health Nursing</i>, 28(3), 168-178. doi:10.1080/07370016.2011.589244</p>	<p>Youth under the age of 21 with no permanent address that had a history of using drugs and alcohol, sexual activity or sexual abuse and had criminal or delinquent behavior</p>	<p>Once the literature was reviewed, findings were grouped and coded based upon consequences, references, terminology, related concepts and antecedents</p>	<p>Categories that emerged from the Rodgers evolutionary concept analysis were physical location that removed the youth from a permanent address, age, access to preventative and routine healthcare services, follow up care and current health status, behavior of their parent or caregiver, the youth and their peers, choice and decision making and survival or the youth's ability to adapt to their environment either in a negative or positive manner</p>	<p>This analysis provided insight, clarification, and a baseline for future development for future research in qualitative research for interventions and outcomes. The analysis clarifies the ways of better addressing the characteristics of homelessness and the barriers that exist for youth to reduce and eliminate the graduation of homelessness to adulthood.</p>
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