



Building a Bridge to the Housed Community

Urban Peak Impacts Evaluation
January 2021



1. Executive Summary

- Establishing a positive relationship with Urban Peak for upwards of three months dramatically improves the lives of homeless youth.** For youth who spend at least 90 days working with Urban Peak, their chances for (a) positive, sustainable housing, (b) addressing challenges or needs like substance abuse, (c) securing access to healthcare, and (d) making positive connections with adults and community resources increase significantly. This finding is supported by research finding that living in temporary housing for at least two months (to two years) with supportive programming can reduce the likelihood of chronic homelessness in youth.
- In the short term, Urban Peak's work saves the Denver community over \$8.4 million dollars.** By providing a place to stay, a path away from homelessness, and programming to address the needs of Urban Peak's clients, Urban Peak diverts spending away from reactionary policies and programs to proactive pathways for unhoused youth. These savings include money that would be spent in law enforcement including: incarceration, law enforcement officers, judicial fees, and temporary court holding. Additional savings come in the form of avoiding emergency dental and emergency health costs including hospitals, mental health screenings, substance abuse detox programs, etc.
- Over the coming 10 years, Urban Peak is estimated to save the community more than \$20.7 million** by preventing chronic homelessness among its clients. This estimate includes the costs of law enforcement and healthcare as well as the increased average earnings of the formerly homeless.
- By the time they successfully complete their Urban Peak program, nearly seven percent of youth have progressed to the next level of education, most in a timeframe of three to 12 months.** For many this means graduating from high school (or equivalent) or starting post-secondary schooling.
- Nearly 16.8% of youth who stayed in Urban Peak programming for more than 90 days improved their employment status from no work or only temporary/seasonal jobs to permanent full or part time jobs.**
- Youth participating with Urban Peak programming for at least 90 days leave the program earning nearly \$150.00 more each month** and live in households with almost \$200.00 more each month.
- In 2020, Urban Peak helped its clients move from unsafe and unstable living situations to safe and stable ones. **There was a 455% increase in the number of youth in positive and sustainable living situations** along with a 75% decrease in negative unsustainable living and a 13% decrease in positive but unsustainable living situations.
- Urban Peak consistently provides for the multiple needs – like addressing substance abuse, finding medical care, or dealing with domestic abuse – of the youth they serve.** For youth who spend fewer than 7 days with Urban Peak, 10% of their needs are addressed on average. For those who stay fewer than 90 days, 27% of their needs are addressed. And for those who are involved with Urban Peak 90 days or longer, over 32% of their needs are met.
- Urban Peak works closely with a network of 56 key organizations serving the needs of homeless youth in the Denver Metro Area.** By guiding youth to the appropriate community resources, Urban Peak both helps to address their needs *and* helps youth learn how to seek help by making positive connections with community resource providers.



2. Recommendations

- Moving forward, data collection and storage should be structured to enable measuring the Core Four. This includes developing a qualitative coding system for case management notes and any other long-form notes and a factor analysis or structured equation analysis to confirm validity of items in Core Four questionnaire.
- Create a facility and supportive programming for a communal-living environment that would help youth experiencing homelessness build a support system for their transition to positive sustainable housing. This facility should be able to support residents for terms from at least three months up to several years, depending on the needs of the individual. With an average number of 1,000 homeless youth in Denver at any given time, a large-capacity facility is necessary to break the generational cycle of homelessness. The project should contain:
 - Programming to help youth learn independent living skills,
 - Community-building systems (e.g common cooking areas, community leisure rooms) to enable relationship-building between residents, and
 - Space for meetings with case managers, mental health professionals, or other resource providers.
- Monitor data and roll-out of COVID-19 vaccinations and treatments for marginalized homeless youth. The heightened risk of contracting COVID-19 infection among homeless people and the likelihood that young healthy people will be the last to receive vaccinations means that Urban Peak youth will face risk from COVID-19 for the foreseeable future.

Table of Contents

1. Executive Summary.....	2
2. Recommendations.....	3
3. Demographics.....	4
4. Impacts on Individuals.....	6
5. Impacts on Organizations.....	14
6. Impacts on Community.....	16
Appendix.....	18

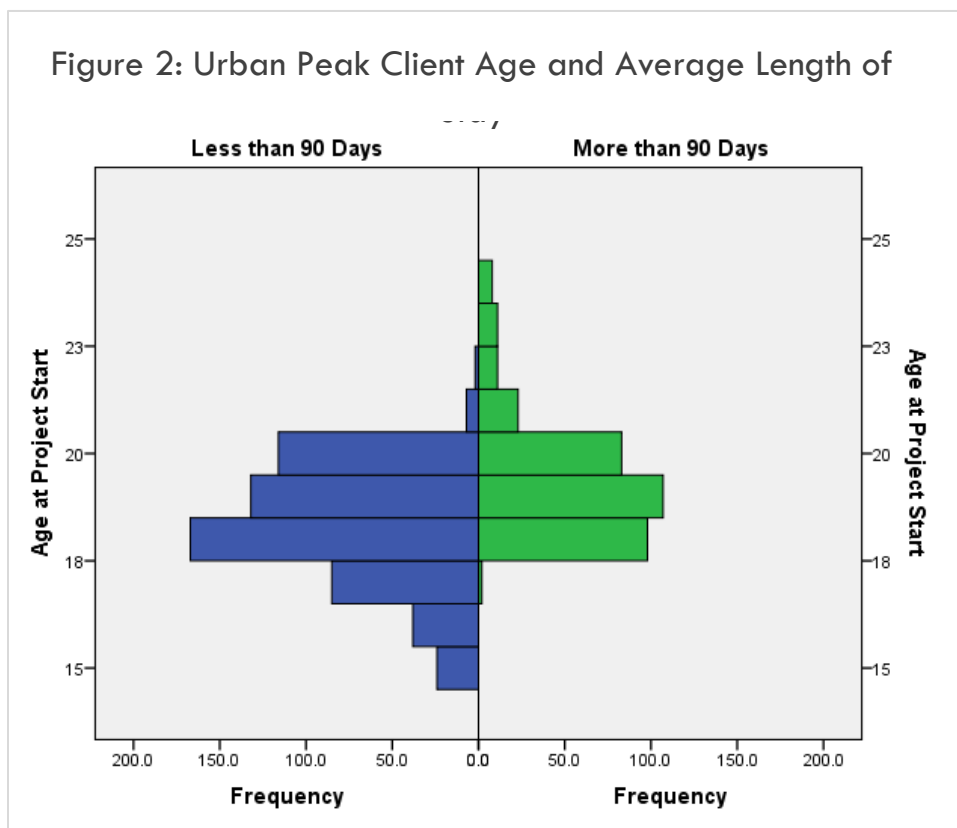
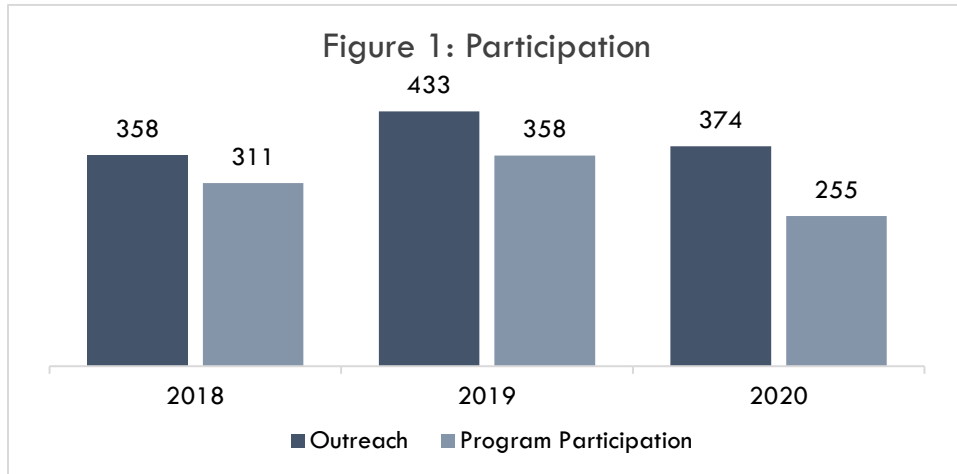


3. Demographics

Urban Peak served over 2,000 homeless youth since 2018.¹ Outreach includes those youth who have been contacted by Urban Peak staff on the street. These numbers exclude Drop-In Center participation. The numbers shown in Figure 1 also represent Urban Peak’s programming impact. Per the Denver Street Outreach Collaborative, these numbers do not include specific services such as getting meals or attending group meetings.

The previous evaluation and research found that the longer clients stay involved with the organization (for over three months or

90 days), the better their chances of living a housed-life as an adult. On average, clients are nearly 19 years old, and spend slightly more than 136 days or about 4.5 months with Urban Peak. However, looking at the data by whether or not youth remain in Urban Peak programming for at least 90 days, the



¹ 2020 includes only until mid-December.



average for the more-transient group drops to under one month (27 days) and the average time for those who remain with the program stretches to almost one year (315 days) see Figures 2 and 3.

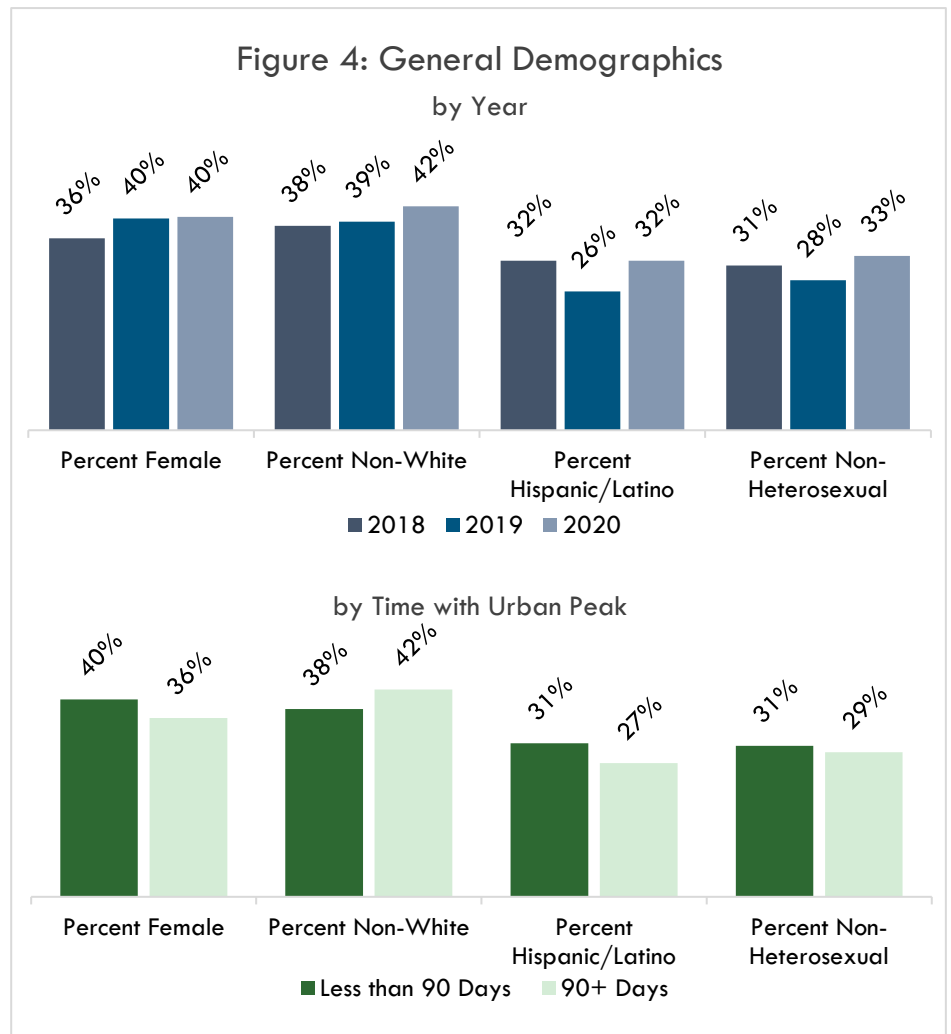
In other words, when the most mobile Urban Peak clients are dropped from the analysis, we see that most youth spend a long time (10 to 11 months) working with Urban Peak on their way to stability and housing.

Furthermore, the youth electing to remain with Urban Peak are approximately 15 months older when they begin programming, compared to those leaving before 90-days (Figure 3). (Age is the only statistically significant variable² explaining differences between more stable and more transient clients. Figure 4 shows that most of the Urban Peak clientele are young men, with a large percentage who are members of ethnic, racial, or cultural minority groups.

This confirms the research emphasizing that many homeless youth are minorities and/or identify with the LGBTQ community (Ivanich and Warner, 2018; Lurie and Schuster, 2015; Fernandes-Alcantara, 2013; Tyler and Beal, 2010; Geber, 1997).

Figure 3: Days working with Urban Peak

Days in Urban Peak Program	Age	Average Days in Project
Less than 90 Days	18.28	27.6
90+ Days	19.42	314.7

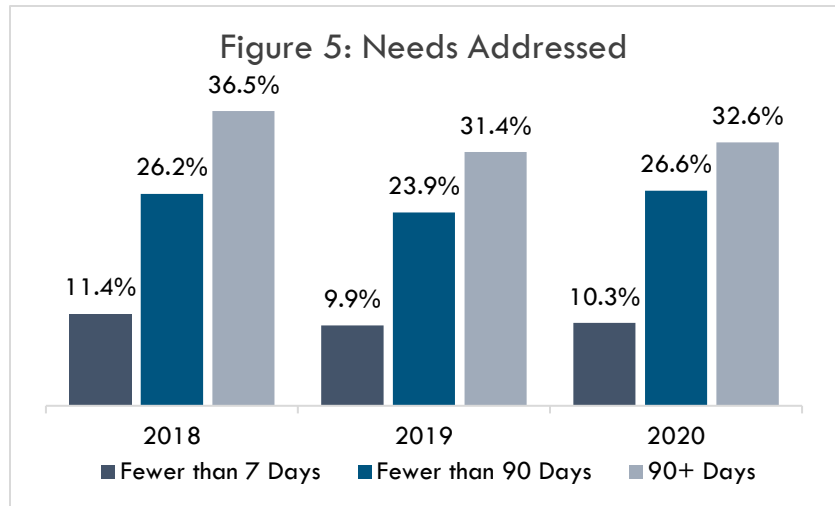


² Other variables *not* tracked by Urban Peak may explain differences.



4. Impacts on Individuals

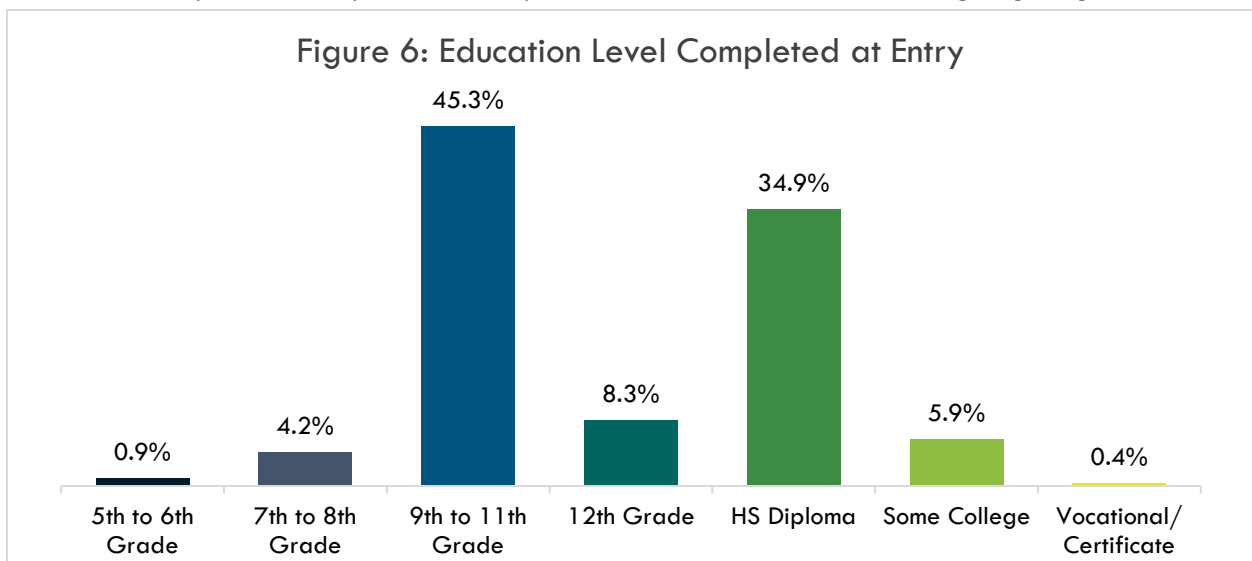
Urban Peak works to address urgent and long-term needs of their young clients. Most clients present with at least one need – like substance abuse, chronic health problems, dental issues, lack of educational attainment, etc. –that are essential to positive outcomes. When clients stay with Urban Peak for a longer period, more of their needs are addressed. However, as Figure 5 also shows, even those who stay with Urban Peak for less than a week have a portion of their needs addressed.



Addressing the needs of the Urban Peak youth requires caseworkers to first identify, then tailor a way to individualize the vast array of services youth require. This section details Urban Peak’s impacts on youth, classified into four categories – *Education and Employment*, *Permanent Connections*, *Safe and Stable Housing*, and *Well Being* – Urban Peak’s *Core Four*. Individual impacts are addressed for each of these areas. However, it must be understood that there are interconnections and intersectionality between these core areas.

4.1 Education and Employment

Educational attainment – especially completing degrees – represents a crucial and large need for the Urban Peak population. Upon entry, most (58.7%) have not yet completed high school and range in last grade completed from 5th grade to high school senior. At the same time, 41% have completed high school, but likely need some post-secondary education to be able to earn a living wage (Figure 6).



Additionally, a large number of youth have yet to earn their high school diplomas and have dropped out of school (55.5%), 40% are still attending school on some basis, and only a small percentage have been expelled (3.5%) (Figure 7).

By the time they successfully complete their Urban Peak program, nearly 7% have progressed to the next level of education, with the bulk of these being youth who have engaged with Urban Peak programming for at least three months (Figure 8).³

Education and employment rates improved in tandem for Urban Peak clients on average. Figure 9 (next page) shows the percent change in employment for each of the years analyzed as well as program tenure. The lowest level of employment change – 2020 with an increase of 13.6%) is likely driven by the effects of COVID-19 on the economy. Many businesses where homeless youth find entry-level jobs are in restaurants or food service and retail. These industries were hardest hit during the initial shutdowns in spring 2020 and still had not recovered by fall 2020.

According to data from Opportunity Insights, the Leisure and Hospitality

industry saw its highest unemployment level in mid-April 2020 with a 51% drop in employment in Colorado and the retail and transportation industries experienced a 22% drop in employment in Colorado. The latest data tracked showed that Leisure and Hospitality industries were at an employment rate of 26% below pre-COVID-19 levels and Retail and Transportation 9% lower than pre-COVID-19 levels (Chetty et al., 2020). It is evident that the longer youth were engaged with Urban Peak programming, the more likely they were to be employed.

Furthermore, nearly 16.8% of youth who stayed in Urban Peak programming for more than 90 days improved their employment status from no work or only temporary/seasonal jobs to permanent full or

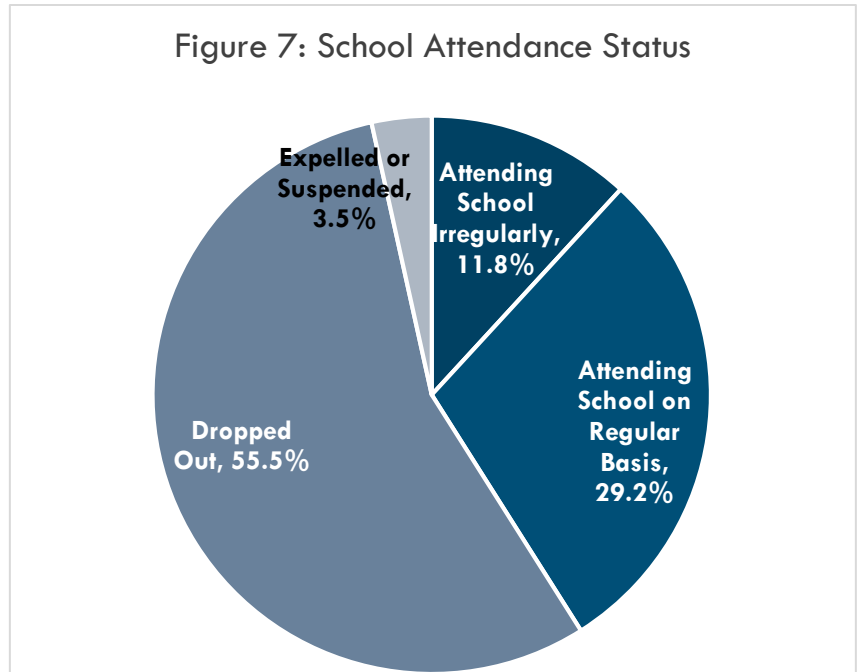


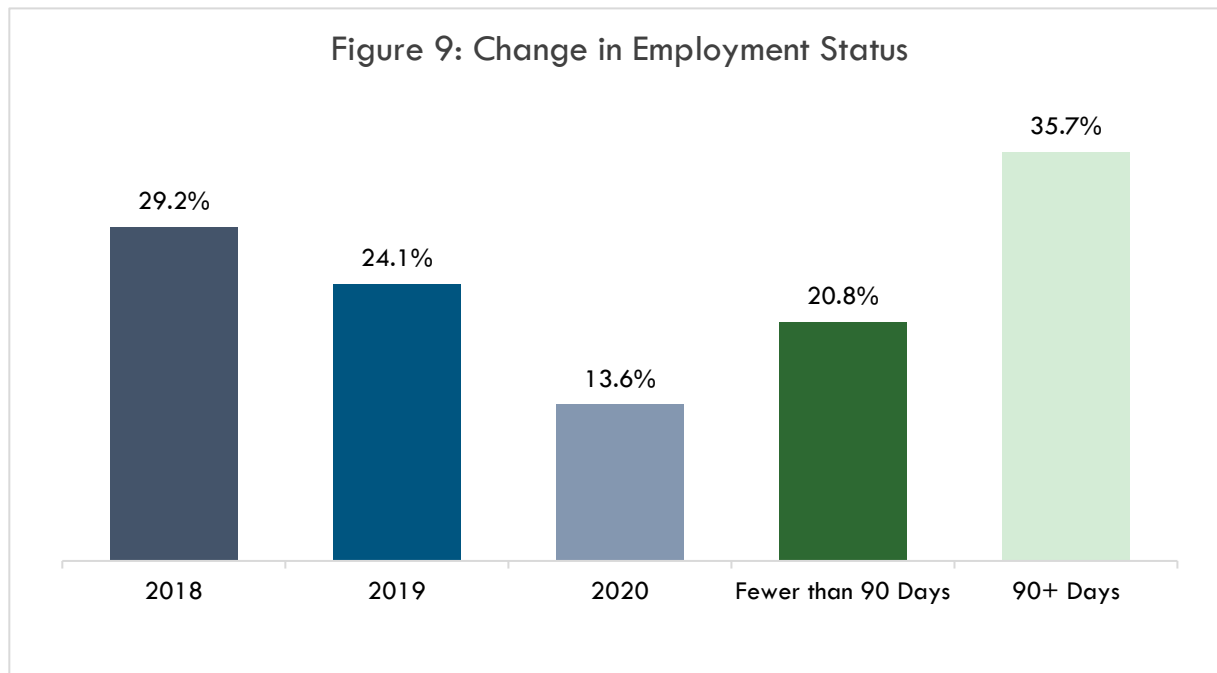
Figure 8: Progress in Education

Number Gain/Loss in Education	Fewer than 90 Days	90+ Days
Gained Next Level of Education	4.1%	18.1%
No Change in Educational Status	96.1%	81.8%

³Urban Peak tracks students by educational level (elementary, middle, high). As high school covers four years, it is likely that youth are making progress toward degree. Specific grade level data would need to become available before running those analyses.



part time jobs. For youth staying with Urban Peak programming for fewer than 90 days, the changes were not significant (2.8% improvement).



With positive changes in employment, came positive changes with monthly income. Again, being able to participate in sustained programming (at least 90 days) is far better for both program participants as well as their households. Figure 10 (below) shows that youth participating with Urban Peak programming for at least 90 days leave the program earning nearly \$150.00 more each month, and live in a household with almost \$200.00 more each month.⁴

Figure 10: Clients' Income Levels

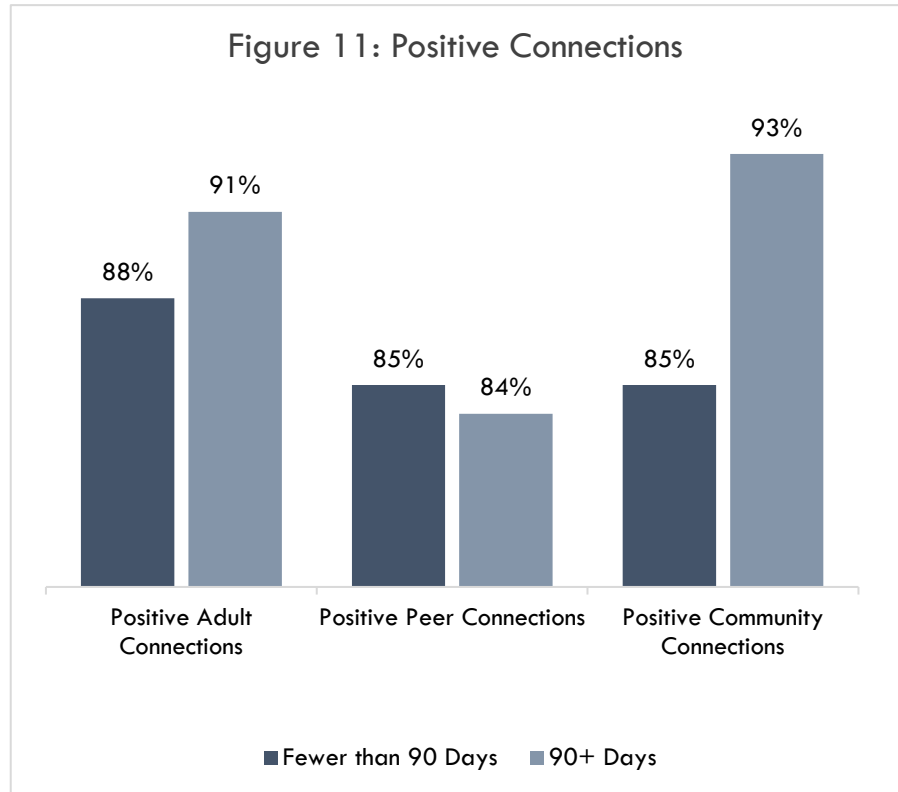
	Income	Entry Income Amount	Exit Income Amount	Average Monthly Increase
Program Participant	Fewer than 90 Days	\$1,173	\$1,265	\$53
	90+ Days	\$1,231	\$1,331	\$145
Household	Fewer than 90 Days	\$606	\$742	\$61
	90+ Days	\$620	\$907	\$195

⁴ Discrepancies between household and individual monthly incomes exist as data were not available for all participants or households.



4.2 Permanent Connections

As youth exit Urban Peak programming, case managers assessed them as to how well they are making personal connections with adults, peers, and community groups/resources which can help them in their transition to housing stability. Figure 11 shows that a large majority of youth leaving Urban Peak programming have established positive relationships. Community connections have the greatest impact on the



clients because they help integrate the youth into networks of housed people – giving them the support they need. Again, the longer the programming, the better the results. Statistically significant (ANOVA $p < .05$) differences exist for Urban Peak youth as they establish positive relationships with other adults and with community agencies such as schools.

Establishing trust is a large part of the work done by Urban Peak. Homeless youth entering Urban Peak are reticent to confide in adults, making it difficult to ascertain the

exact level of need. Slightly less than 13% of youth refused to answer questions from case workers. Regardless of the type of question, some youth refuse to answer. By the time they leave programming, however, these youth are more trustful of Urban Peak staff and are more willing to respond to questions about their health or housing situations. Figure 12 shows that those youth who have remained with Urban Peak programming longer, are more trusting.

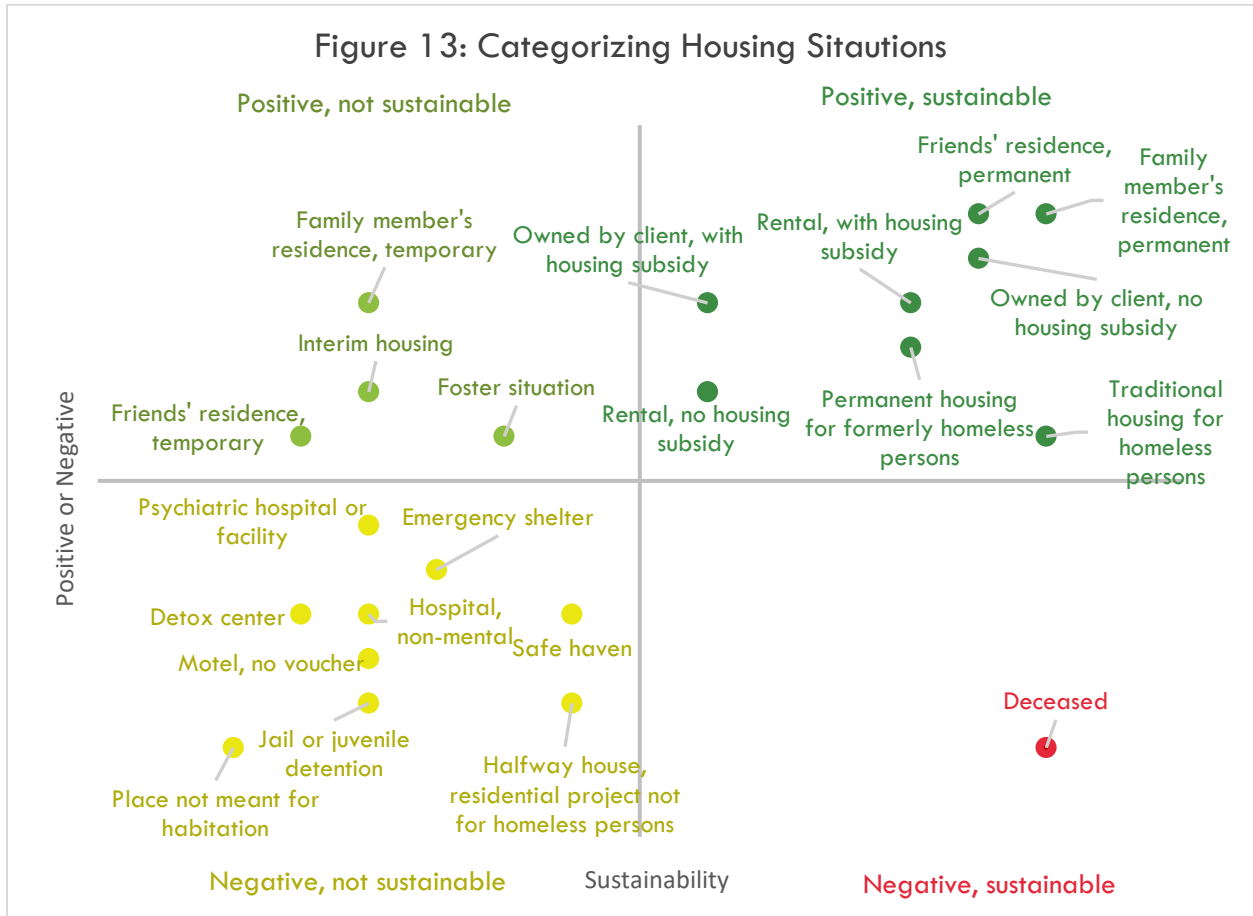
Figure 12: Client Trust in Urban Peak Staff

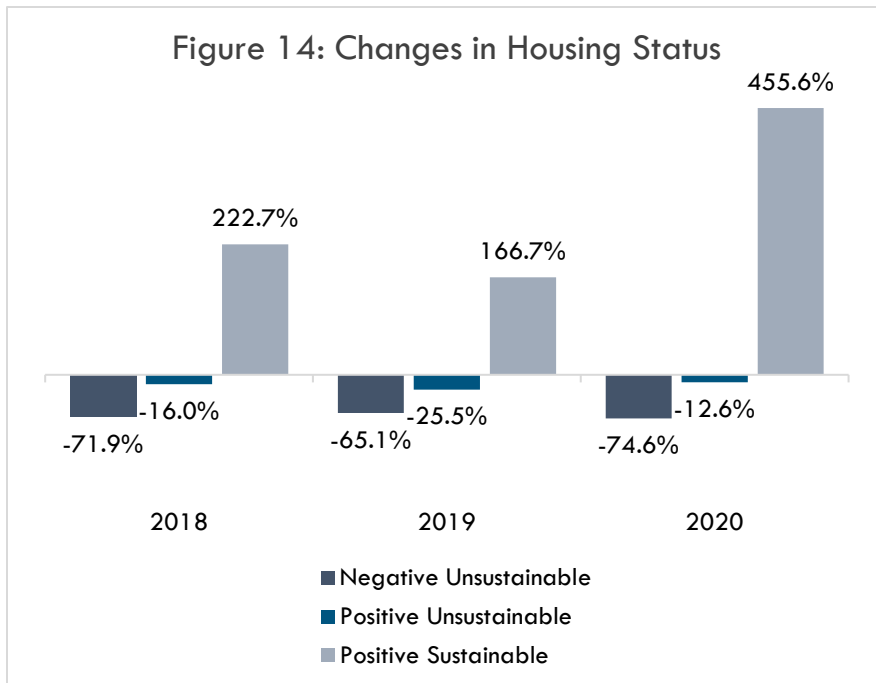
Fewer than 90 Days	3.1%
90+ Days	7.7%



4.3 Safe and Stable Housing

Using the same matrix developed for the 2018 evaluation (Figure 13), clients improve their chances for established positive sustainable housing as they exit Urban Peak.





As seen in Figure 14, sustainable, positive housing among clients increased considerably.⁵ In 2019, for instance, as they begin programming, 36 youth were housed in positive sustainable environments, and 169 in negative unsustainable situations. By the end of their tenure with Urban Peak, only 50 youth were in untenable situations while almost double that number (96) were in positive sustainable environments.⁶

4.4 Wellbeing: Health and Wellness Needs

Youth receiving Urban Peak’s services often face health and wellness challenges, the most common of which are domestic violence and substance abuse (Figure 15, next page). Female youth also face health and wellness issues that may have long-term implications like pregnancy and developmental concerns.

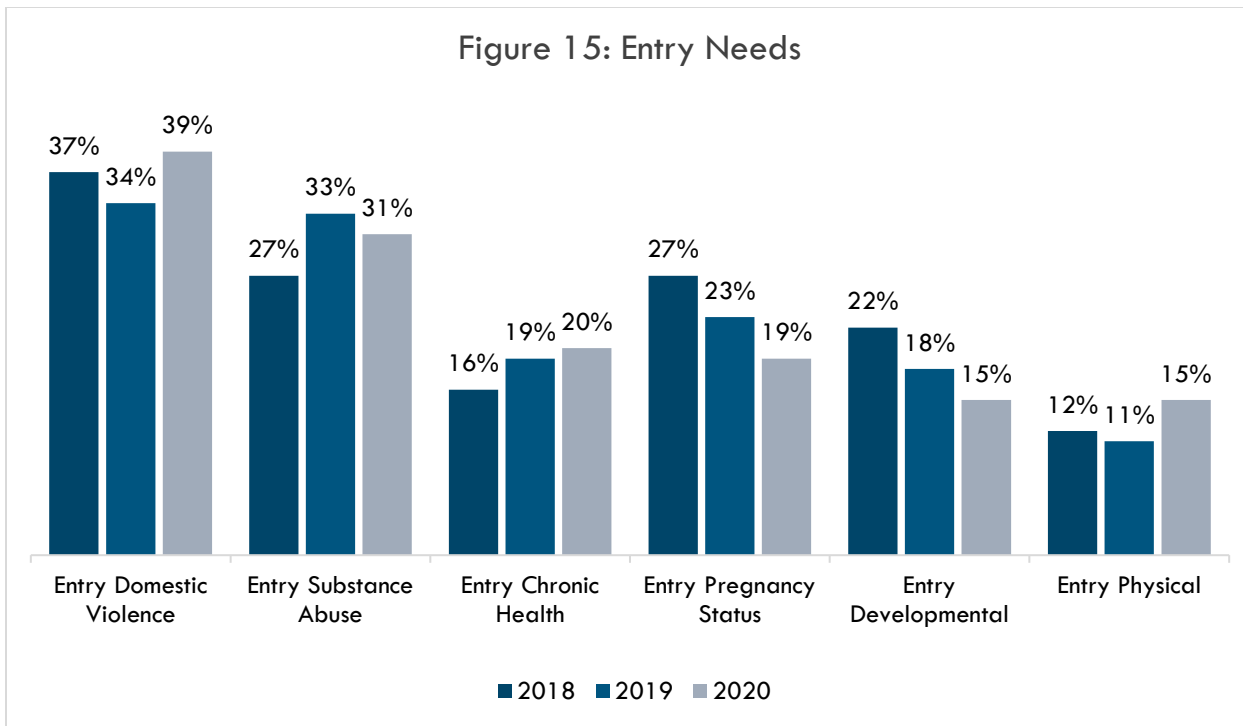
As youth exit their programming, different items are tracked, so direct comparisons on domestic violence, for instance, cannot be made. Those items that are comparable are related directly to wellness and health. Dental, mental, and general health assessments show that health has improved. Figure 16 (next page) shows the percent reduction in Poor and Fair designations. Changes were statistically significant ($p < .005$). Across most indicators, participating youth improved their dental, mental, and general health status. The only drop in general health status occurred for those youth who were with the program for a short amount of time. The gains for wellness – especially for those with the program for at least three months, are considerable.

⁵ Statistically significant changes ANOVA $p < .001$

⁶ The remaining participants (59) did not report their situation or data were unavailable.

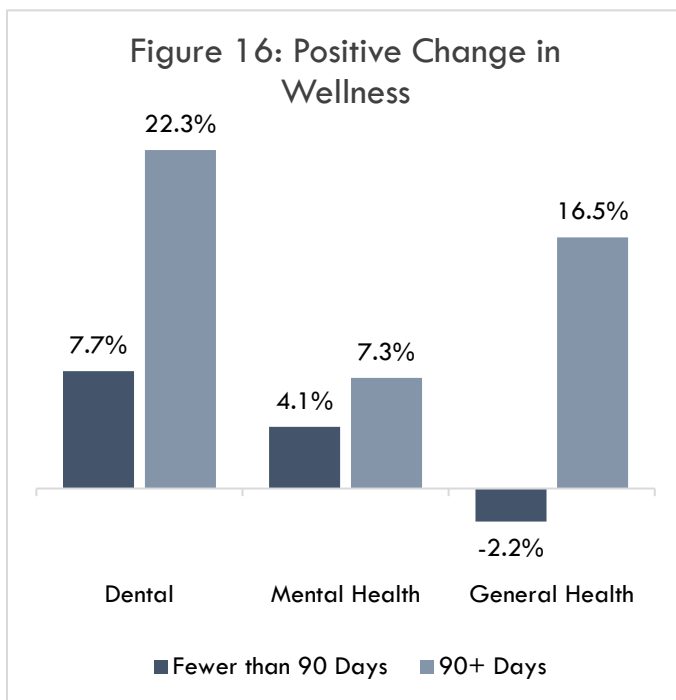


Figure 15: Entry Needs



Research by Culhane et al. (2020) estimated that approximately 4.3% of all homeless people would require hospitalization from contracting COVID-19, 1.4% would need critical care (ICU) from COVID-19, and 0.7% would die. This assumes that 40% of homeless persons would contract the virus. Their analysis pointed to Denver county as an area to likely experience moderate to medium severity of COVID-19 outbreaks with an estimated 910 infections, 98 hospitalizations, 33 critical cases, and 16 fatalities over the course of a year. (This assumes no change in the size of the homeless population.) Applied to Urban Peak’s population, without any assistance from Urban Peak to provide shelter, access to medical care, and most importantly, masks at their facilities, an additional 11 young people would have been hospitalized, 3 to 4 in ICUs, and 1 to 2 died from COVID-19.

Figure 16: Positive Change in Wellness



4.5 Analysis of Case Notes

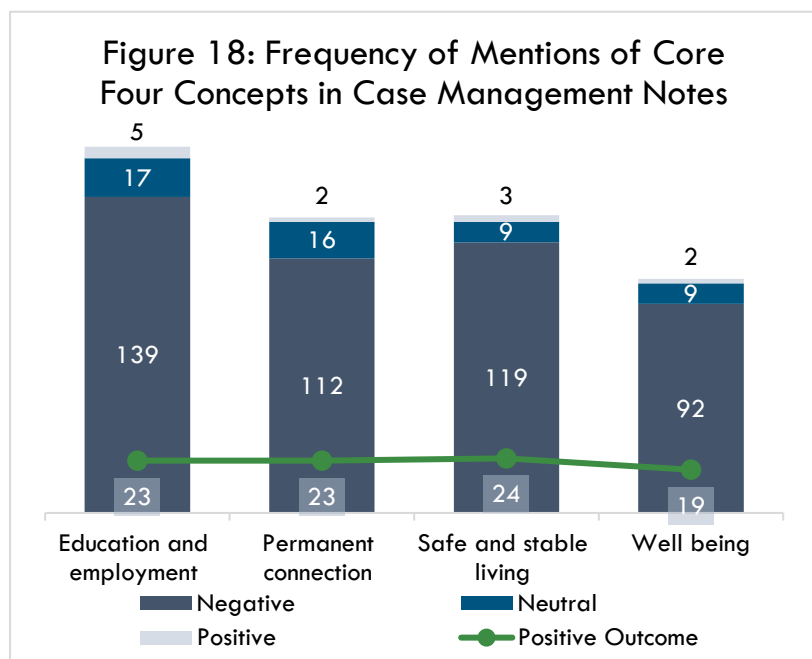
Figure 17 shows how qualitative data (case manager notes) were analyzed to measure the four constructs (for more information on methods, see Appendix A). These data supplement the findings presented above.

Figure 17: Codes for Qualitative Content Analysis of Case Management Notes

Category	Search Terms		
Education and Employment	School	Degree	Hired
	Job	Graduate	Employment
	Class	Application	GED
	Finished degree	Went to school	Completed school
	Went to class	Attend class	
Permanent Connections	Friend	Family	Father
	Mother	Guardian	Brother
	Sister	Sibling	Aunt
	Uncle	Grandparent	Cousin
Safe and Stable Housing	House	Apartment	Own Space
	Stable living	Long term housing	Safe Living
	Move in/Moved in	New house	New apartment
Well Being	Mental health	Hospital	Ambulance
	Doctor	Substance use	Medical
	Physical health		
Positive outcome	Stability	Happiness	Safety

Figure 18 shows the frequency of mentions in the sample of case notes. Frequency was captured per paragraph. With the structure of the notes, one paragraph equates roughly to one entry in the case notes.

Most of the case notes contain a negative sentiment. This is not surprising considering the difficulties Urban Peak clients face as they navigate being unhoused and the transition to housing. The most mentions were in the category of Education and



Employment where case managers remarked on client’s efforts to find non-street income and/or return to school. There were approximately the same number of mentions for Permanent Connections (often framed as broken connections with parents or friends) and Safe and Stable Living arrangements. Well Being had the fewest number of mentions and is also dominated by negative comments.

Analysis of the case management notes for comments on referrals to Urban Peak from current or former Urban Peak clients found zero results. This could be because it is not part of the regular battery of questions posed by case managers when working with youth or because case managers are not specifically looking for this information in their notes.

5. Impacts on Organizations

Urban Peak’s partnerships with organizations that serve the Denver homeless population enable the groups to cover the different demographic groups and types of needs. When organizations recognize differences among them, they can specialize their services (Laurer, Dean, and Nelson, 2005) and provide an improved overall network of services (Schramm, 2007). In the previous evaluation, partnerships were assessed by how often staff relied on this partnership and by partnership type: Supportive, Collaborative, or Competitive (2018).

Staff were asked to assign a number from 1 to 10, denoting the level of importance for delivering services and securing a positive outcome for their clients. As seen in Figure 19, Urban Peak enjoys a high level of engagement with 59% of their partners. The greater the proportion of high-engagement partnerships, the better integrated the organization is with the community and the greater care Urban Peak takes with its partners (Kerka, et al., 2006). Of the remaining partnerships, 30% are considered to have a median engagement with Urban Peak clients and only 11% were classified as low-engagement.

Figure 19: Relative Importance of Partnerships for Urban Peak Clients

	Organization	Critical Factor 1-10
High Engagement Partnership	Colorado Legal Services	10
	Comitis Shelter	10
	Delores Project	10
	Denver Health	10
	Denver Public Library	10
	Department of Human Services	10
	DMV	10
	Educational Opportunity Center	10
	Emerson Street	10
	Emily Griffith	10
	Food Banks in Denver	10
	Harm Reduction Action Center	10
	Medicaid	10
	Mental Health Center of Denver	10



Figure 19: Relative Importance of Partnerships for Urban Peak Clients

	Organization	Critical Factor 1-10
High Engagement Partnership	Mental Health Providers	10
	Metro Caring	10
	Mile High Behavioral Health	10
	Nurse Hotline	10
	One Home	10
	Other Shelters	10
	Pathways	10
	Porter Hospital	10
	Rainbow Alley	10
	Rescue Mission	10
	RTD	10
	Salvation Army	10
	Samaritan House	10
	Sheridan Health	10
	SNAP	10
	St. Francis Center	10
	Stout Street Health Clinic	10
	Volunteers of America	10
	Day Labor Companies	9
	Colorado Coalition for the Homeless	8
Medium Engagement Partnership	Bayoud Enterprises	7
	Crisis Centers (Stabilization Units)	7
	Cross Purpose	7
	Phoenix Multi-Sport	7
	The Gathering Place	7
	Attention Homes	6
	Colorado Youth for Change	6
	Law Enforcement (Police)	6
	Mobile Crisis	6
	Suicide Hot Line	6
	Coffee Houses	5
	Denver Public Schools	5
	Denver University	5
	Family Tree	5
	Gender Identity Crisis Center	5
	GRASP (gang violence)	5
	Gyms	5



Figure 19: Relative Importance of Partnerships for Urban Peak Clients

	Organization	Critical Factor 1-10
Low Engagement Partnership	Probation	4
	Savio House	4
	Art from Ashes	3
	Alcoholics Anonymous	2
	Fidelity Investments	1
	USDA	0

6. Impacts on Community

Using a cost impact analysis, Urban Peak’s impact on the community can be estimated as a savings of **\$8.4 million** in the short term or long-term savings of **\$20.7 million** approximately ten years into the future. While there are countless non-quantifiable metrics such as avoiding youth sleeping in places not meant for habitation (e.g. bus stations or on the light rail), there are a number of metrics that can be quantified.

The short-term estimate captures the costs of incarceration that might otherwise occur if Urban Peak did not exist, loss of wages for older youth who have not graduated high school and could be working, costs to attend individuals with poor dental, mental, and general health care. Savings were not applied to all youth in the program. Rather, they were applied to a percentage of the total representing the probability of youth going to jail, for example, without any interventions. Similarly, long-term savings captures costs realized over approximately ten years from successful exiting of youth who are on the path to completing their educations, holding jobs, and have improved their health (or avoided worse health outcomes). These savings include lack of probable incarceration, repeated stays at detox centers, and improved educational and employment outcomes.

6.1 Immediate Savings

In an estimate developed by the Colorado Department of Public Health and Environment, the cost of incarcerating a young homeless person is approximately \$8,629. Multiplying this by the average number of youth participating in Urban Peak programming from 2018 to 2020, Urban Peak saved the community approximately \$1.9 million dollars in expenses that would have otherwise been spent on law enforcement, judicial fees, and temporary court holding of minors who are homeless. Added to that number, the Denver community realized an additional savings of nearly \$6.1 million dollars in savings of emergency dental and emergency health costs, temporary admittance to hospitals, mental health screenings, substance abuse detox fees, and other wellness-related costs. Additional savings of approximately \$500,000 come from subsidy payments for individuals who have failed to get work, or have not completed their educations.



6.2 Long-Term Savings

According to a study from the City of Denver (Brasch, 2018), chronically homeless individuals cost the city approximately \$29,000⁷ in law enforcement costs (arrests, jailing, etc.) and health costs (emergency room visits, EMT hours, etc.). Approximately 30% of people who experience homelessness during their lives will become chronically homeless. By taking the average number of clients between 2018 and 2020 and multiplying that figure by 30% and then by \$29,000, it is estimated that the community saves \$3 million each year. To that, savings realized for getting students to complete their education and resulting increase in earnings, will save the community approximately \$7.1 million dollars each year, along with an estimated savings of \$10.6 million each year for chronic health conditions arising from not getting treatment and intervention in a timely manner. Long term health and dental care savings include the following:

- Average savings of \$33.00 for every dollar spent on timely dental care (Pew Foundation, 2018),
- Untreated mental health care represents a savings of \$2,322.00 each year in higher Medicaid expenditures (SAMHSA, 2017), and
- Health care savings estimated for interventions preventing chronic conditions from homeless living, substance abuse, and poor general health of \$2,997.63 for every dollar spent on intervention (difference between uninsured and insured treatments; ER visits, etc. from Greendoors, 2016; Roeber, McClellan, and Woodward, 2016).

6.3 Costs Not Estimated

At this point, we cannot estimate the benefits Urban Peak provides to the community in terms of health including factors like: (1) preventing young people from developing chronic illnesses common to homeless persons, (2) increased longevity⁸, (3) prevented suicides, etc.

⁷ Calculated for 2020 dollars this number is \$35,578.00

⁸ The average life expectancy of homeless persons is significantly shorter, according to the Colorado Department of Public Health and Environment. The average Colorado resident lives 80 years and the average life expectancy for a homeless person is between 42 and 52 years. This difference of 28 to 38 years is impossible to capture as a dollar cost.



Appendix

A. Methods Overview

A.1 Quantitative Data

Data were retrieved from Urban Peak for 2018 through December of 2020, and were combined and matched by individual IDs and year. There were two types of data: (1) entry and exit data and (2) program participation with service unit data. These sets were cleaned, coded, and condensed by participant ID. Data presented represent averages of services used or service units dedicated to the participant. Missing data were determined to be missing not at random (MNAR). Imputation of the incomplete portions were drawn from randomly selected “nearest neighbors” of the population. As with the previous evaluation, the Hamming method was used for categorical data. For continuous data, the mean within the nearest 26 neighbors was used. Analyses occurred variable by variable and then the final, pooled data set was developed for the final analyses.

As this is an impacts study, costs associated with average stays, average needs, etc., were calculated based on established community amounts. Whenever ranges were given, the lowest number was used in the calculation. This results in a conservative estimate.

Data were analyzed building both a structured equation model (SEM) and a partial least square (PLS) model to determine what factors might account for a person’s success at Urban Peak (exit from the program into a stable environment). However, the data were not rich enough to create a satisfactory SEM or PLS model for analysis. There were too many pieces of missing data and unaccounted for variables to make meaningful conclusions. Collecting more and better data in future years will allow researchers to determine if specific programs or attributes of clients are related to successful outcomes.

A.2 Qualitative Data

A random selection of case management notes from 2018 to 2020 were analyzed using automatic content analysis software (Atlas.ti). Content analysis coding language searchers determined by QREM researchers after reading a small selection of the case management notes. Atlas.ti allows analysts to enter a search string and the program identifies inflected forms of words and synonyms. For instance, a search for school would yield “schools” “schooling” and “class”. Additionally, Atlas.ti has language analysis programming that examines the word choice and phrasing of paragraphs for sentiment analysis (positive, negative or neutral). QREM researchers developed a fourth category – positive outcome – to capture situations that may be described negatively but had a positive outcome for the client.

All data remain the property of Urban Peak and were analyzed according to the ethics and standards outlined and promoted by the American Evaluation Association (AEA). QREM researchers, as members in good standing with AEA, conduct all data gathering, analyses and reporting in accordance with the ethics and guidelines outlined by the association.



B. Research Update

This research builds on that presented in 2018, adding especially to the areas of describing the transition from unhoused to stable housing and the transition from adolescence to adulthood. Youth experiencing homelessness are facing these dual transitions as well as additional challenges that may have contributed to being unhoused, like substance abuse issues and poor relationships with family. Throughout, we highlight Urban Peak's Core Four: stable housing, education and employment, permanent connections, and wellbeing.

B.1 Young People Transitioning to Living Independently

The transition from adolescence and most importantly living at home to independent living can be difficult. It often requires emotional and psychological development to cope with financial, career, social challenges; developing the ability to manage everyday problems; and expanding horizons to develop an adult identity (Hogan and Astone, 1986; Lieblich, 1990; Hauser and Greene, 1991).

This includes developing a separate identity from their parents (Shulman and Ben-Artzi, 2003). This part of adult identity construction is difficult for many unhoused young people because they may have strained (or no) relationship with their parent(s). Without the opportunity to engage in a dynamic process of growing apart and learning to differentiate from parents or trusted adults, unhoused youth may have a harder job learning to internally regulate self-esteem (Frank, Avery, and Laman, 1988; Rohner et al., 2005; Stuewig and McCloskey, 2005). Frank et al. write:

“The three factors—indices of adult status—are as follows: A. Self-governance, connoting movement toward greater responsibility and confidence in decision making; ‘Taking responsibility for my decisions’ B. Consolidated outlook on life, connoting movement toward greater confidence in life goals and values; ‘Deciding what my values are’ C. Practical independence, such as separate residence; ‘Supporting myself financially’,” (1988, p. 220).

According to Chen and Page (2016) being male, from a low SES family, having siblings, having a single parent, being unemployed and/or attending school after high school were all factors that put an individual at greater risk of experiencing instability and difficulty in the post-high school transition.

B.2 Transition to Housing

While the Housing First approach to homelessness can be applied to unhoused young people, the needs of youth (developmental, social, legal, etc.) need to be incorporated into programming for it to be successful (Gaetz, 2014) including transitional housing, permanent supportive housing, and moving back to live with family members.

Young homeless people face the dual challenges of navigating homelessness and transitioning to adulthood. Gaetz writes:

“And for young people, the need to get them into housing with appropriate supports as soon as possible is paramount. We know from research that the longer a young person is absolutely homeless or comes to rely on emergency services, the greater their entrenchment in the street youth lifestyle, the more estranged they become from mainstream services, the worse their health (mental health and addictions) becomes, the greater likelihood of their experiencing crime and violence as well as sexual and economic exploitation” (2014, p. 6)



Additionally, homeless youth often depend upon the street economy (also called survival behaviors) to meet their day-to-day needs. Transitioning away from this can be difficult because it requires learning new skills and being able to rely on a safety net to cover needs during the transition (Slesnick, Zhang, and Yilmazer, 2018; Ferguson et al., 2011). Often, young people who rely on survival economies also deal with mental health concerns that need to be concurrently addressed (Gaetz, 2004; Slesnick, Zhang, and Yilmazer, 2018). This is in combination with the integration of young unhoused people into the street social network as they become estranged from their prosocial networks they knew when housed (Thompson and Pollio, 2006).

The literature consistently finds that challenges like substance abuse can lead to a rise in homelessness frequency and length (Rosenthal et al., 2007; Slesnick, Kang, et al., 2008; Tevendale et al., 2011; Roy et al., 2014; Kipke et al., 199). Conversely, decreases in frequency and length of homelessness is related to connections to family and friends (Slesnick, Bartle-Haring, et al., 2008; Milburn et al., 2009), less risk-taking (Slesnick, Kang, et al., 2008), being female (Slesnick, Kang, et al., 2008), education, being younger (Milburn et al., 2009; Roy et al., 2014), and shorter past experiences with homelessness (Tevendale et al., 2011).

This includes providing positive support for problems the youth might face (substance abuse, mental health challenges and physical health problems) as well as positive youth development programming. For many homeless young people, this means overcoming histories of abuse (physical, sexual, and emotional), interpersonal violence or exposure to violence, assault, and parental neglect (Gaetz and O’Grady, 2002; Karabanow, 2004; Rew et al., 2001; Tyler and Bersani, 2008; Van den Bree et al., 2009; Giffords, Alonso, and Bell, 2007). This should be done voluntarily, providing individual services to young people in a culturally appropriate way (Goering et al., 2012, p. 12).

Youth who spent time in this type of setting felt that the relationships they built in these programs helped change (if not save) their lives (Holtschnieder, 2016). Furthermore, 94% of those interviewed said they had regular contact with a staff member or peer they met during the program, 41% said their current closest friend was also a resident at the program, and 47% said they were in regular contact with former staff members.

One particular group of homeless youth requiring extra support are pregnant teens. While society often frames teenage pregnancy as a problem for a young person, for some it can be a boost in self-esteem and a source of purpose. When pregnant homeless young people receive a wide range of supports – especially social supports – they can develop the necessary skills, confidence, and relationships to be successful as young parents (Cooke and Owen, 2007).

Programs that allow youth to live and spend leisure time in a group environment (mimicking relationships made in those like a college dorm or high school sports teams) allow them to develop supportive relationships as they move towards independence. Rapid transitions to independence and “adulthood” can leave youth disconnected from supports, leading to confusion, guilt, abandonment, loneliness, or resentment (Karabanow and Naylor, 2013, p. 39). As many homeless youth form networks with peers with antisocial tendencies (and these bonds can be strong), the need to cut those social ties to end the problematic behaviors – like substance use – makes the transition inevitably isolating (see Rice et al., 2005). The most difficult period in this transition for young people who had experienced



homelessness was the period right after achieving stable housing when they felt socially isolated (Kidd et al., 2016). Even a year after securing housing, many had not become more integrated in their community, improved overall in mental and physical health, or quality of life (Karabanow, 2008; Kidd and Davidson, 2007). When asking participants about their experiences in transitional living programs, many said they were essential to providing them with connections, a sense of family, community, and preparation for housing (Holtschenider, 2016).

B.3 Time to Housing

Follow-up studies with young people leaving transitional living programs found that the skills learned or developed during their stay contributed significantly to adult independence. These include independent living skills (93%), attending school, were in vocational training, or employed (91%), or had moved into an appropriate independent living situation (87%) (Holtschnieder, 2016).

In one of the rare studies that followed homeless young adults over a long period, Braciszewski, Toro, and Stout (2016) conducted a 7-year long study to understand how 243 homeless adolescents fared. Confirming findings from earlier work (see Milburn et al., 2007), they found that the period of homelessness was short for most youth and over half remained housed after one year post-intervention. The authors conclude that disruptive events these young people faced were enough to cause an episode of homelessness, but not enough to prevent them from achieving stable housing later.

Holtschnieder's interviews with young people leaving a transitional living program after a stay of at least two months (up to two years) found that while a majority of formerly homeless youth were in stable housing, they also experienced financial stress (due to low incomes). This led to many dealing with the threat of eviction or experiencing homelessness (including couch surfing or living in places unintended for habitation) (Holtschneider, 2016).

B.4 Area Need for Programming and Innovative Youth Housing

Transitional housing is especially important for youth. As teens, youth are likely to drop out of school or engage in behaviors that will cause severe health problems when they are older. As a large number of youth run away from home, negative contact with law enforcement hurts their futures. While researchers and case managers understand the importance of getting homeless youth into programming, there is no clear indication of how many youth find themselves in a homeless situation. In 2019, the number of homeless youth in the Denver area is approximately 1,200 to 1,300. HMIS place homeless youth (until the age of 24) at just under 1,250 (1,247),⁹ while the *Everyone Counts* report has that number at slightly more than 1,200 (1,209).¹⁰ The previous year (2017-18), public schools in the Denver area list over 22,000 youth who are either unsheltered or live in highly transient situations such as doubling-up with another family or staying in a motel. Most of these youth however, live with their parents (CDE, 2020). The Colorado Bureau of Investigation reports that nearly 8000 youth were

⁹ https://www.mdhi.org/2020_pit_reports

¹⁰ https://d3n8a8pro7vhmx.cloudfront.net/mdhi/pages/231/attachments/original/1565116221/mdhi2019PIT_Report_final.pdf?1565116221



reported missing during 2019 throughout the state. Most (7984) were classified as missing under non-suspicious circumstances, which “typically signifies children who either run away or have been taken by a family member but are not considered to be a victim of non-custodial abduction.”¹¹

While COVID may explain some increase in 2020 numbers, the high number of youth requiring housing indicates that temporary shelters without programming does not have the desired impact of long term independent stability (See previous Impacts evaluation, 2018). Having a location that combines programming and housing tailored to the specific needs of homeless youth is desperately needed in the community.

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¹¹ <https://www.colorado.gov/pacific/sites/default/files/2019%20Annual%20Report.pdf>



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