Delaware State Epidemiological Outcomes Work Group (SEOW)





Gap Report 8 Homelessness and Substance Use Risk among Delaware Youth

The Delaware State Epidemiological Outcomes Workgroup (SEOW), formerly known as the Drug and Alcohol Tracking Alliance (or DDATA), is charged with providing assessments on gaps in services and programs for Delaware residents across the lifespan, as well as gaps in research and data to inform these services. This Gap Report discusses the challenges associated with collecting data on homeless youth, as well as the risks associated with youth homelessness, and relevant data pertaining to Delaware youth.

Definition and Prevalence

The phenomenon of youth homelessness can be difficult to adequately quantify in part because of the various federal definitions of what constitutes homelessness (Youth.gov, 2017). The population of those considered to be homeless is far from homogenous. The U.S. Department of Education and the McKinney-Vento Act define homeless youth as "individuals who lack a fixed, regular, and adequate nighttime residence" (2016). This includes youth who are sharing housing with other family and friends; living in motels, hotels, or other temporary housing; living in emergency or transitional shelters; sleeping in a public or private place that is not designated to be used as a sleeping residence. This definition is inclusive both of youth who are homeless with their families or unaccompanied by any family or guardians. Alternatively, the definition of homelessness per the Runaway and Homeless Youth Act (2015) applies to individuals under the age of 21 who are unable to live in a safe environment with a relative and have no alternative living arrangements. This definition is only inclusive of youth who are not accompanied by families or caregivers.

The National Network for Youth estimates that 1.3 to 1.7 million youth experience at least one night of homeless a year, with approximately 550,000 of those experiencing homelessness for one week or more. This estimate is based in part on data from the last National Incidence Studies of Missing, Abducted, Runaway, and Thrownaway Children (NISMART-2, 2002). But there is no current, systematic national or federal research focused on youth homelessness. The most regular national data come from surveys of school-aged children who are still attending public school and experiencing homelessness, though this is an imperfect measure considering that many youth experiencing homelessness no longer attend school regularly, if at all. Additionally problematic is the fact that the majority of data on the subject is from self-reported surveys or other similar sources. Youth may be reluctant to report that they are experiencing homelessness or housing insecurity for fear of getting involved with the foster system or social services, increasing the likelihood that the true rate of youth homelessness is underrepresented in the extant data.

Why should this population receive special consideration?

Substance Youth and Mental Health

Young people experiencing homelessness tend to exhibit higher rates of substance use than their stably-housed peers, as well as have exposure to other potential risk factors for substance use and negative outcomes. Higher rates of substance use among homeless youth populations compared to their stably-housed peers have been well-documented for decades. In 1997, NIDA reported findings from three large studies that specifically investigated youth homelessness and substance use. It was found primarily that homeless youth living on the streets and in shelters had substantially higher rates of substance use than those living at home (Greene, Ennett, & Ringwalt, 1997; Kipke, Montgomery, Simon, & Iverson, 1997); that the likelihood of developing a substance use disorder increased the longer a young person remained homeless (Kipke et al., 1997); and that runaway and homeless youth were at a greater risk for suicide, especially those who also used substances (Greene & Ringwalt, 1996).

More recent research suggests that these trends have not substantially changed. A study of homeless youth in Detroit found that youth experiencing homelessness reported more friends who used substances regularly than youth who lived at home, and that recent homelessness was a significant predictor of both alcohol and drug use among these youth (Tompsett, Domoff, Toro, 2013). This finding suggests that experiencing homelessness also exposes youth to more negative peer influences that present additional risks for substance use. Youth experiencing homelessness may be particularly vulnerable to experiencing homelessness as adults, as well as

more severe mental illness and substance use disorders (Childress, Reitzel, Santa Maria, Kendzor, Moisiuc, & Businelle, 2015).

LGBTQ Youth Homelessness

The vulnerability of LGBTQ youth to substance use and other risk behaviors has been previously addressed. In August 2015, the State Epidemiological Working Group published a gap report entitled, "Sexual and Gender Identity and Conflict: The Challenges of Data Collection and the Relative Impact on Prevention Services." It can be challenging to gather data on young adult populations identifying as sexual minorities, both due to the difficulty in creating survey questions to adequately capture this data as well as the reluctance of some to report this information on a survey. Using data from the 2013 YRBS, the authors of this gap report found that Delaware youth identifying as LGBTQ are at greater risk for substance use, poor mental health, and experiencing violence.

The intersection of LGBTQ status and homelessness among youth is substantial. The Palette Fund, True Colors Fund, and the Williams Institute published a report based on data from the Lesbian, Gay, Bisexual, and Transgender Homeless Youth Provider Survey. According to findings from this large, national web-based survey, conducted in 2011 and 2012, up to 40% of youth served by homeless agencies identify as LGBTQ. In the last decade these providers have seen particular increases in the number of transgender youth that they serve. In this survey, the most frequently cited reasons for LGBTQ homelessness were the following: ran away from home because of family rejection of their sexual orientation or gender identity (46%); kicked out of the home by family because of their sexual orientation or gender identity (43%); physical, emotional, or sexual abuse at home (32%); aged out of the foster system (17%); and emotional or financial neglect from family (14%). Overall, the providers surveyed indicated that 68% of the LGBT youth they serve had experienced rejection from their families and 54% had experienced some form of abuse (Durso & Gates, 2012).

ACEs and Youth Homelessness

Adverse childhood experiences, or ACEs, are stressful or traumatic events including abuse, neglect, and other household dysfunctions (SAMHSA). The original ACEs study (Felitti et al., 1998) identified a series of traumatic adverse childhood experiences: physical, emotional, or sexual abuse; physical or emotional neglect; parental separation or divorce; incarcerated household member; substance abuse or mental illness within the household; and witnessing domestic violence. Researchers found that adults with childhood exposure to ACEs were more likely to have social, emotional, and cognitive impairments which led to the adoption of health risk behaviors. Since this landmark study, a myriad of research has emerged linking ACEs to

substance use (Ford et al., 2011; Anda et al., 2008; Dube et al., 2006). Research also indicates that ACEs are often interrelated, and that the presence of one adverse childhood experience significantly increases the likelihood of having multiple ACEs (Donga et al., 2004).

Researchers of youth homelessness have categorized experiencing homelessness as a stressor that can amplify other risk factors for substance use and other negative life course outcomes (Tompsett et al., 2013). Adverse childhood experiences also have the potential to increase the risks of experiencing homelessness. For example, research has found in particular a relationship between parental incarceration and youth homelessness. One analysis found that changes in female imprisonment rates over the last few decades can explain up to 30% of the increase in foster care caseloads between 1985 and 2000 (Swann & Sylvester 2006). Another, using data from the Fragile Families and Wellbeing Study, found that recent parental incarceration increases the risk of child homelessness and that this risk is more concentrated among African American children (Wildeman, 2013).

Data Specific to Delaware Youth

The Delaware Secondary School Survey (DSS) is administered annually to a population of roughly 10,000 8th and 11th grade students attending public schools in Delaware. This survey gathers information regarding student health and well-being as well as substance use and risk behaviors. The following section describes the prevalence of youth homelessness among 11th graders¹ participating in the DSS in 2016, as well as correlates between youth homelessness and substance use, ACEs, and other risk factors and behaviors. Only relationships that were found to be statistically significant (p<.05) are reported here.

The 2016 DSS survey asks the following question pertaining to youth homelessness:

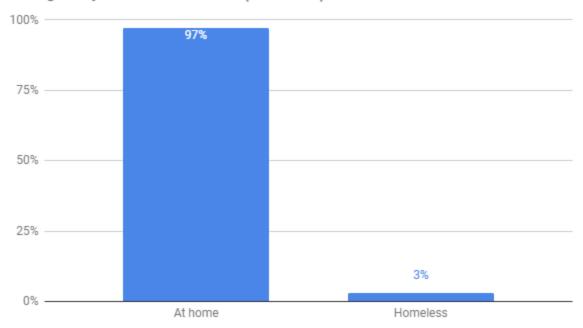
18) Where do you typically sleep at night?

- At home with your parent(s) or guardian(s)
- At a friend's or relative's home with your parent(s) or guardian(s)
- At a friend's or relative's home without your parent(s) or guardian(s)
- Somewhere else (shelter, transitional housing, public space, hotel, car)
 with your parent(s) or guardian(s)
- Somewhere else (shelter, group home, foster care home, public place, car, hotel) without your parent(s) or guardian(s)

¹ 8th grade students were excluded from the following analysis due to the small sample of those students reporting homelessness (<2%)

² In this sample population, correlations between youth experiencing homelessness and reported mental Funding for this project (SP020704) has been provided by the Department of Health and Social Services, Division of Substance Abuse and Mental Health - State of Delaware through a grant from the Substance Abuse and Mental Health Services Administration (SAMHSA) - CFDA 93.243.

11th grade youth homelessness (DSS 2016)



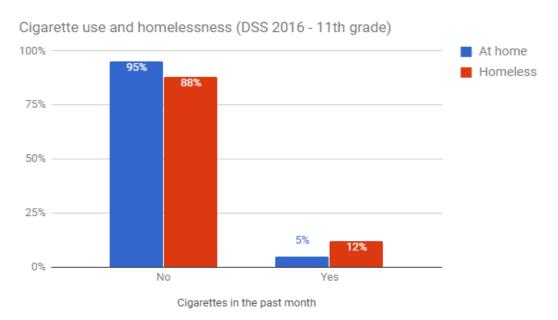
For the purposes of this analysis, and in accordance with the standard for youth homelessness established by the McKinney-Vento Act and the U.S. Department of Education, those students who responded that they typically sleep anywhere except for at home with their parents/guardians will be considered homeless. Approximately 3% of 11th graders (142 students) in 2016 responded on the DSS that they did not sleep at home with a parent or guardian. Although this is a relatively small number, it is important to consider that this is likely to be an underestimate, given that stability in living arrangement is associated with school attendance. The existing literature clearly indicates that homeless youth are at disproporationate risk for mulitple negative outcomes; therefore, this group is an important population to study.

Youth Homelessness and Substance Use

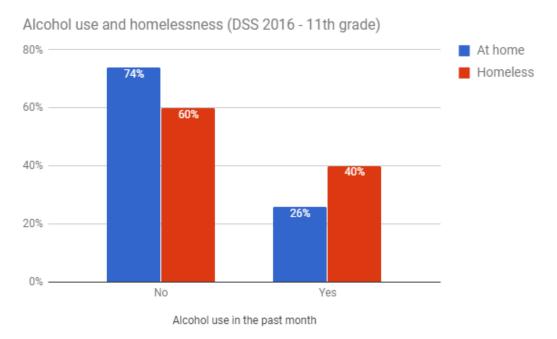
Youth experiencing homelessness consistently report higher rates of substance use than their peers who are not experiencing homelessness. The following graphics illustrate the relationship between homelessness and cigarette use, alcohol use, prescription painkiller use, and marijuana use among 11th graders in Delaware.

Twelve percent of homeless students report smoking a cigarette in the last month, compared with 5% of non-homeless students who report smoking a cigarette in the last month. This is

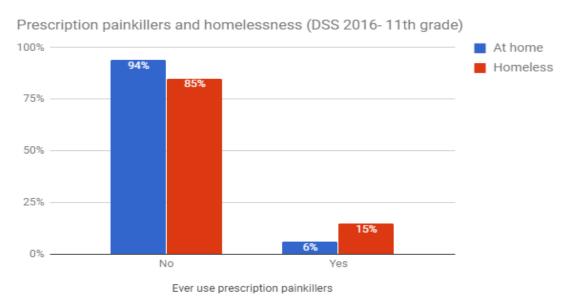
nearly twice the rate of cigarette smoking found among students who report typically sleeping at home with their parents or guardians. Eighty-eight percent of homeless students report not smoking cigarettes in the last month, compared with 95% of non-homeless students who did not smoke in the last month.



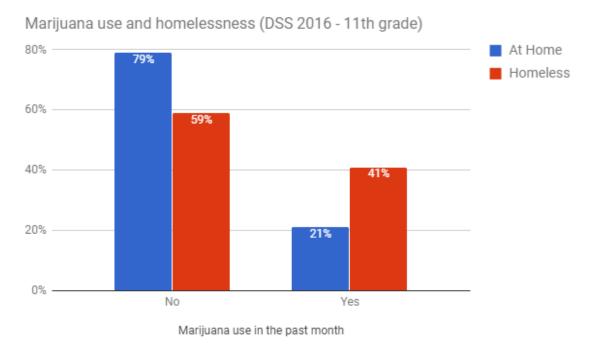
Among 11^{th} graders experiencing homelessness, nearly 40% report alcohol use in the past month, compared with only 26% of 11^{th} graders who are not homeless that report using alcohol in the past month.



Approximately 15% experiencing homelessness report ever having used prescription painkillers, which is nearly three times the rate of prescription painkiller usage by 11th graders who are not experiencing homelessness.



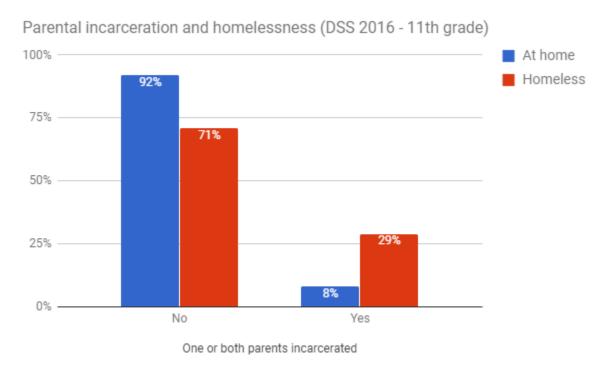
Among Delaware 11th graders experiencing homelessness, approximately 41% reported using marijuana in the past month. Among those who are not experiencing homelessness, only about 21% reported marijuana usage in the past month.



Youth Homelessness and ACEs

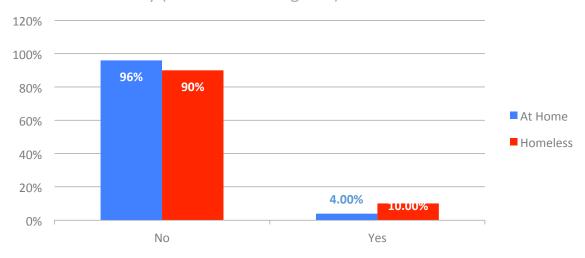
Homelessness presents many of the same characteristics and outcomes as other adverse childhood experiences (ACEs). Individuals who experience one ACE are likely to experience multiples, and data from the 2016 DSS supports this assertion by showing that across several different indicators of childhood stress and adverse experiences, students who experience homelessness tend to have the greatest rates of representation. The following graphics illustrate the relationship between homelessness and parental incarceration, parents leaving the home, and violence in the home among 11th graders in Delaware.

Data indicates that homeless youth experience parental incarceration at more than three times the rate of non-homeless youth. Among Delaware 11th graders experiencing homelessness, approximately 29% report that at least one of their parents was incarcerated in the past year, compared with nearly 8% of youth not experiencing homelessness who report parental incarceration.



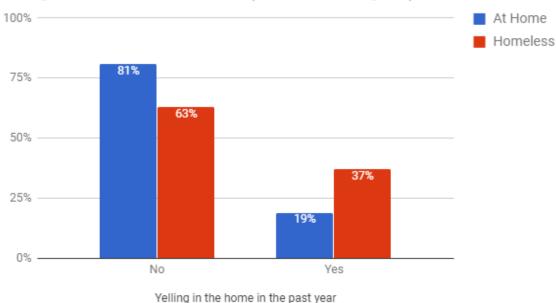
Homeless youth in Delaware experience a parent leaving the family at more than twice the rate of non-homeless youth. In 2016, 10% of 11th graders experiencing homelessness reported that one of their parents had left the family in the past year for some reason, compared with only 4% of those not experiencing homelessness.

Parent Left Family (DSS 2016 - 11th grade)



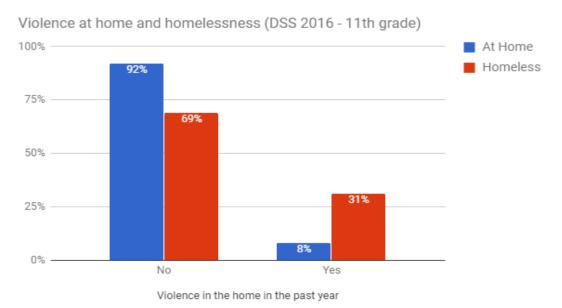
Approximately 37% of students experiencing homelessness also report hearing name-calling, threats, or yelling among adults in their home in the last year, compared with 19% of students not experiencing homelessness.



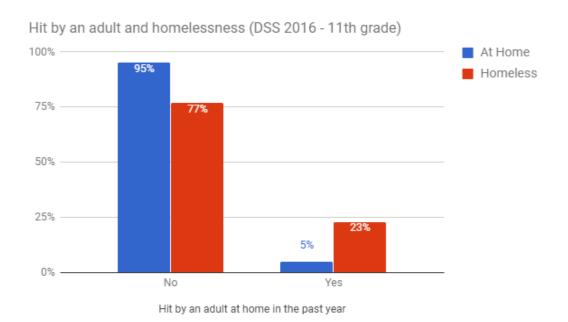


Nearly a third of youth experiencing homelessness report witnessing violence in their home between adults in the past year. Among homeless 11th graders, 31% report violence in the

home in the past year, compared with their non-homeless peers, of whom only 8% report witnessing violence in their home.

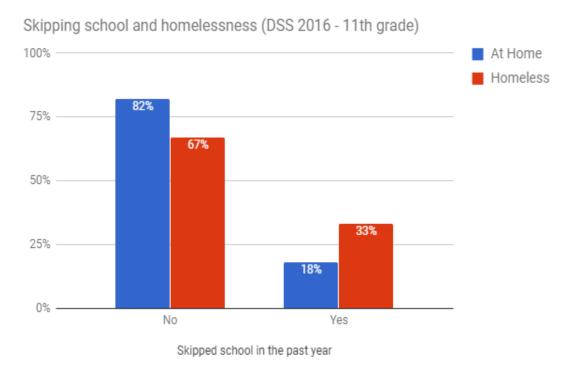


Homeless youth in Delaware experience physical abuse at more than four times the rate of their non-homeless peers. In 2016, roughly 23% of 11th graders experiencing homelessness reported that they had been hit by an adult in their home who intended to hurt them, compared to only 5% of students who were not experiencing homelessness.



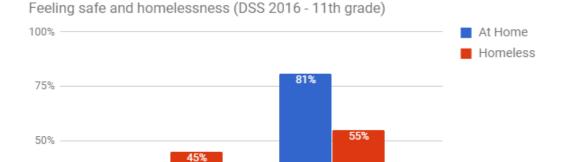
Youth Homelessness and Other Risks²

Data also indicates that homeless youth in Delaware skip school at higher rates than youth who typically sleep at home with their parents or guardians. Approximately one third (33%) of the 11th graders experiencing homelessness also reported skipping school in the past year, compared with the 18% of youth who did not experience homelessness. Prior research has found a strong relationship between truancy and substance use among adolescents, a finding that underscores the importance of the correlation between homelessness and truancy in this data (Henry & Thornberry, 2010; Henry, 2007).



Youth experiencing homelessness in Delaware also feel unsafe at school at higher rates than Delaware youth who are not experiencing homelessness. Just under half (45%) of the 11th graders experiencing homelessness reported that they do not feel safe at school. In contrast, roughly 29% of their peers who were not experiencing homelessness reported that they did not feel safe at school.

² In this sample population, correlations between youth experiencing homelessness and reported mental health conditions, such as depression and anxiety, were not statistically significant, and thus excluded.



Feeling safe at school

Filling the Gaps: LGBTQ Youth Homelessness

No

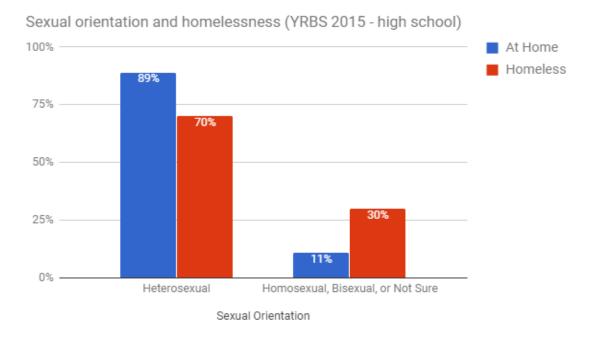
25%

No data was collected pertaining to LGBTQ youth by the 2016 Delaware Secondary School Survey. The Youth Risk Behavior Survey (YRBS) from the CDC is administered in odd-numbered years to a random, representative sample of Delaware public high school students. The YRBS does collect data related to sexual minorities, and in 2015, the most recently available year of data, the survey asked students if they would identify their sexual orientation as heterosexual, gay or lesbian, bisexual, or not sure.

When asked where they typically sleep at night, nearly 4% of Delaware high schoolers (or 100 of the sampled students) responded to the 2015 YRBS that they sleep somewhere other than at home with their parent or guardian. This question was constructed the same on both the YRBS and the DSS. When asked about sexual orientation, approximately 12% (321 sampled students) responded that they identified as either gay or lesbian, bisexual, or not sure (LGBTQ), while the remaining 88% of Delaware high schoolers identified as heterosexual.

However, the percentage of homeless youth identifying as gay or lesbian, bisexual, or not sure was much greater among homeless youth than the general sample of Delaware high schoolers. The graph below uses data from the 2015 YRBS to illustrate the association between Delaware youth homelessness and sexual orientation. Among Delaware high school students experiencing homelessness, approximately 30% also identify as gay or lesbian, bisexual, or not

sure. By comparison, only about 11% of high school students living at home identified as LGBTQ.



Discussion and Implications

As an often-invisible population, youth experiencing homelessness or housing insecurity can be difficult to access with survey research. Youth may under-report on school surveys for fear of getting involved with social services, and many homeless youth may not even be attending school at all. Thus it is important to remember when interpreting this data that many of these statistics may not be entirely accurate, as the true prevalence of homeless youth is likely to be undercounted, both within and beyond the school system.

From what is known, the factors contributing to youth homelessness as well as the condition of homelessness itself, can present risks for substance use and poor health behaviors. Homelessness can be both a cause and a result of other adverse conditions in a young adult's life, with the capacity to interact with multiple areas of one's life and produce a negative impact. It cannot necessarily be inferred from this data that homelessness itself is a cause of some of the negative outcomes reported, although it is certainly a statistically significant correlate in each of the examples provided.

This speaks to the need for more research focused not only on youth homelessness, but also into those areas where homelessness is known to intersect with other vulnerable subgroups of

youth, such as sexual minorities and those exposed to ACEs. Being mindful of these intersections of vulnerable populations and the prevalence of such exposure can help to inform more effective prevention programming that addresses the trauma of housing instability among young people.

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