



2007-09 Runaway and Homeless Youth Act: An Evaluation

Report to the Minnesota Legislature

Prepared for:
Minnesota Department of Human Services
Office of Economic Opportunity

June 30, 2009



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INTRODUCTION

The Minnesota state Legislature passed the Runaway and Homeless Youth Act in 2006 (RHYA) (MN Statute 256K.45). In 2007, one million dollars in one-time funding for the 2007 biennium was allocated for runaway and homeless youth programs offered under the following five program areas: street outreach, drop-in center, emergency shelter, transitional living programs and supportive youth housing programs. The Department of Human Services, Office of Economic Opportunity (OEO) awarded funding to 19 programs, eight of which are assisting runaway and homeless youth in Greater Minnesota and 11of which are assisting them in the Twin Cities metro area. Some of the RHYA funded programs leveraged additional funding from various federal, state, county, faith based, private foundations and/or individual donors to be able to provide the RHYA programs included in this Evaluation.

In addition to defining a continuum of services for runaway and homeless youth (described below) the legislation also mandated an evaluation of the funded RHYA programs from the Department of Human Services (DHS) through the Runaway and Homeless Youth Act (RHYA). To fulfill this mandate, DHS engaged Minneapolis-based Rainbow Research, Inc. to conduct its first RHYA evaluation.

Program Evaluation: Have RHYA Programs Made A Difference?

There are two primary evaluation questions which Rainbow Research has addressed in this evaluation. The evaluation questions are as follows:

- How effective are the RHYA programs?
- What kind of impact have they had on the runaway or homeless youth that they have served?

Questions about impact have focused on the following issues:

Knowledge gained - What have youth learned in the program that contributes to their safety and well-being, reunification with their family or preparation for them to live on their own when reunification is not an option?

Attitude and value changes - Have youth experienced improvements in their self-esteem? Have they established academic and or career goals?

Changes in relationships - Have there been improvements in youths' relationships with family, guardians, community members or peers?

Changes in status or condition - Have youth experienced improvements in their, physical/mental health, academic achievement, financial status, personal safety, housing situation, involvement with corrections, employment, connections to a positive adult/support network?

The Runaway and Homeless Youth Act Programs and Services they Provide:

Street and Community Outreach and Drop-in Programs

Drop-in centers provide youth with walk-in access to crisis intervention and ongoing supportive services including one-to-one case management on a self-referral basis. Street and community

outreach programs locate, contact, and provide information, referrals, and services to homeless youth, youth at risk of homelessness, and runaways. Information, referrals, and services that they provide may include, but are not limited to the following:

- Family reunification services
- Conflict resolution or mediation counseling
- Assistance in obtaining temporary emergency shelter
- Assistance in obtaining food, clothing, medical care, or mental health counseling
- Counseling regarding violence, prostitution, substance abuse, sexually transmitted diseases, and pregnancy
- Referrals to other agencies that provide support services to homeless youth, youth at risk of homelessness, and runaways
- Assistance with education, employment, and independent living skills
- Aftercare services;
- Specialized services for highly vulnerable runaways and homeless youth, including teen parents, emotionally disturbed and mentally ill youth, and sexually exploited youth
- Homelessness prevention

Emergency Shelter Programs

Emergency shelter programs provide homeless youth and runaways with referral and walk-in access to emergency, short-term residential care. The programs also provide homeless youth and runaways with safe, dignified shelter, including private shower facilities, beds, and at least one meal each day, and assist runaways with reunification with their families or legal guardians when required or appropriate. The services provided at emergency shelters may include, but are not limited to the following:

- Family reunification services
- Individual, family, and group counseling
- Assistance obtaining clothing
- Access to medical and dental care and mental health counseling
- Education and employment services
- Recreational activities
- Advocacy and referral services
- Independent living skills training
- Aftercare and follow-up services
- Transportation
- Homelessness prevention

Supportive Housing and Transitional Living Programs

Transitional living programs assist homeless youth and youth at risk of homelessness to find and maintain safe, dignified housing. The programs also provide rental assistance and related supportive services, or refer youth to other organizations or agencies that provide such services. Services provided may include, but are not limited to the following:

- Educational assessment and referrals to educational programs
- Career planning, employment, work skill training, and independent living skills training

- Job placement
- Budgeting and money management
- Assistance in securing housing appropriate to needs and income
- Counseling regarding violence, prostitution, substance abuse, sexually transmitted diseases, and pregnancy
- Referral for medical services or chemical dependency treatment
- Parenting skills
- Self-sufficiency support services or life skill training
- Aftercare and follow-up services
- Homelessness prevention

ACKNOWLEDGEMENTS

Rainbow Research wishes to acknowledge the assistance of the many individuals who conducted this evaluation.

We thank Connie Greer and Beth Holger-Ambrose of DHS-OEO for their suggestions and insights in planning and designing the evaluation, reviewing the data collection methods and tools, scheduling the focus groups, and recruiting DHS staff as focus group facilitators and notetakers.

We acknowledge the following DHS-OEO staff members who facilitated and took notes during the focus groups:

- Tikki Brown
- Dan DuHamel
- Connie Greer
- Beth Holger-Ambrose
- Pat Leary
- Francie Mathes
- Isaac Wengerd

We also wish to thank program staff of the various RHYA agencies that coordinated the focus groups, including the recruitment of focus group participants.

- Rich Garland, Associate Director, Ain Dah Yung
- Shauna McBride, Residential Coordinator, Ain Dah Yung
- Brandie Webb, AEOA Homeless Youth Counselor, Arrowhead Economic Opportunity Agency
- Rocki Simoes, Program Manager, Avenues
- Anne Gaasch, Program Director, The Bridge
- Nikki Beasley, Emergency Shelter Program Supervisor, The Bridge
- Stacy Pederson, SAIL/SHY Program Supervisor, Catholic Charities-SHY Program
- Andrea Simonett, Homeless Youth Services Director, Catholic Charities-Hope Street Shelter & TLP Program
- Laura Groeneneg, Independent Living Skills Coordinator and Case Manager, Catholic Charities-Hope Street Shelter & TLP Program
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- Mark McNamer, Program Director, Freeport West-Project Solo
- Sarah Johnston, Family Programs Case Manager, Freeport West-Project Solo

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- Patrice O'Leary, Operations Director, Lutheran Social Services of Brainerd-Lakes Area Youth Program
- Kathy Sauve, LSS Youth Services Program Manager, Lutheran Social Services of Brainerd-Lakes Area Youth Program
- Abbey Goetz, Program Coordinator, Lutheran Social Services of Brainerd-Lakes Area Youth Program
- Cathy Bergh, Operations Director, Lutheran Social Services of Duluth
- Kevin Mullen, Supervisor/Case Manager, Lutheran Social Services of Duluth
- Matt Tennant, Program Director, Pillsbury United Communities-Street Survival Program
- Lydia Kihm, Executive Director, Teens Alone
- Rob Ward, Clinical Program Director, Teens Alone
- Colleen Hansen, Family Development Director, Three Rivers Community Action Agency
- Sara McClellan, Program Director, Women of Nations
- Marney Thomas, Drop-in Coordinator/Program Services Associate, Youthlink-Project Offstreets
- Tammy Johnson, TLP Case Manager/Supervisor, YWCA of Duluth-Spirit of the Valley Young Mother's Program

Rainbow Research staff who participated in the evaluation includes the following:

- Mia Robillos, Research Associate: trained DHS staff, helped develop and pilot the tools, analyzed the staff data and did the first draft of this report
- Chhun Singha, volunteer intern and University of Minnesota Humphrey Institute of Public Affairs International Fellow: entered all youth focus group and exit survey data
- Marijo Wunderlich, Consultant: conducted analysis of youth focus group data
- Arisara Roengsumran, Research Associate: took focus group notes
- Vidhya Shankar, Rainbow Research consultant: took focus group notes
- Barry B. Cohen, Executive Director: with Ms. Robillos, trained DHS staff, helped develop and pilot the tools, wrote and edited several sections of this report

EXECUTIVE SUMMARY

Rainbow Research Inc., on behalf of the Minnesota Department of Human Services and the Office of Economic Opportunity, has conducted a legislatively mandated evaluation of the 19 programs funded under the State's Runaway and Homeless Youth Act. Data for this evaluation was drawn from the Homeless Management Information System, an OEO service provider survey, a set of 18 focus groups with youth from each of the sites and exit surveys youth completed at the end of the focus groups.

RHYA Evaluation Findings:

Based on this evaluation Rainbow Research finds strong indication that the programs funded through the Runaway and Homeless Youth Act (RHYA) are making a difference in the lives of homeless and runaway youth and their families.

Eighteen focus groups were conducted with 144 youth from 19 Runaway and Homeless Youth Act (RHYA) funded programs. In the exit surveys large majorities of these youth reported that the RHYA programs were either excellent or very good (73%) and that they were extremely or very helpful (75%).

Other important outcomes reported by a majority of the youth are as follows:

Youth learned to care for themselves: The youth learned where to go for a safe place to stay and go in case of a medical emergency

Youth made connections with caring adults: Through the program, almost all made a connection with an adult who cared about them (86%) and a majority said they found a trusted mentor (67%) who was most frequently a staff member. In over half the focus groups youth talked about the care, support, guidance and friendly ear of a staff member as one of the most helpful things the program provided.

Relationships between youth and their families improved: Most youth improved relationship with family members, legal guardians, or caregivers (70%), which for a third of them, led to a family reunification. Nearly a third of the youth described how through the RHYA program they developed improved insight and self-awareness, better communications skills, and improved self image that improved their relationships with family and friends.

Youth accessed needed health and mental health services: Most youth reported receiving a health care screening, almost two thirds, referrals to a physician and/or mental health professional and over 10% admission to a drug or rehabilitation program. Mental health issues are also a significant issue for the youth participating in the RHYA programs.

Youth identified and acted on education and career goals: Education is a significant component of the youth's case plans and educational assistance is ongoing. A large majority (72%) report better school attendance. Many volunteered (17%) that they had completed High School or a GED while in the program.

Youth enrolled in state and federal financial assistance programs: A majority (68%) are enrolled in one or more state or county benefit programs, e.g. MFIP, Economic Assistance or General Assistance. Almost half signed up for one or more federal benefit program such as SSI or food stamps.

Youth learned job finding skills and found employment: Over a quarter described skills they learned to find employment (e.g. create resumes, search internet) and assistance finding it (e.g. clothing for interviews, personal references). A majority (75%) had legal sources of income.

Youth resolved outstanding legal issues and stayed out of trouble: Between 20-25% cited prior histories of gang involvement, drug dealing and prostitution offenses and arrests. Most credit their program (74%) with helping them stay out of trouble with law enforcement. Many described assistance they received resolving legal issues with police, probation and the court, meeting community service obligations and how the programs, through structure and rules, was a positive influence in their lives.

Youth met their needs for housing and shelter: In 7 of 16 focus groups emergency shelter or transitional housing/transitional living program or housing assistance were identified as the most beneficial service received through their programs. This included both housing provided through the programs as well as assistance finding and keeping housing including assistance in renting their own apartments, completing housing applications and help with deposits and first month's rent.

These outcomes are significant because they are of a nature that helps youth transition into adulthood. RHYA programs would benefit from a longitudinal evaluation to determine if youth who experience these outcomes have in their young adulthood a higher likelihood of achieving stable housing, maintaining healthy relationships, achieving their educational and career goals and avoiding episodes homelessness compared to runaway and homeless youth who never received such program support.

A subsequent cost benefit analysis of RHYA programs would also be of value. Such a study could weigh the value of these longer term outcomes as well and the value of reduced expense to the State and communities for dealing with issues that the programs have addressed relative to the investment the State of Minnesota has made in RHYA funding.

METHODOLOGY

There are four sources of data for this evaluation. They are as follows:

- Homeless Management Information System (HMIS) data as reported to DHS by Emergency Shelter and Transitional Living Programs
- Service provider surveys
- Youth focus groups
- Youth exit surveys

By employing multiple sources of evaluation data, Rainbow Research has been able to cross-validate the findings for key program outcomes.

Provider Survey

All 19 RHYA agencies took part in the evaluation and filled out the provider survey. Listed below are the names of the agencies, their location, and their geographic classification.

Agency	Program Area *	Location	Rural/Urban	Metro/Greater MN
Arrowhead Economic Opportunity Agency	TLP	Virginia	Rural	Greater MN
Ain Dah Yung	ES	St. Paul	Urban	Metro
Avenues	ES	Minneapolis	Urban	Metro
Catholic Charities-Hope Street	ES, TLP	Minneapolis	Urban	Metro
Catholic Charities-SHY Program	TLP	St. Cloud	Urban	Greater MN
District 202	DIC	Minneapolis	Urban	Metro
Evergreen	ES	Bemidji	Rural	Greater MN
Face to Face	TLP	St. Paul	Urban	Metro
Freeport West	DIC	Minneapolis	Urban	Metro
Life House	DIC, TLP	Duluth	Urban	Greater MN
Lutheran Social Services- Brainerd	TLP	Brainerd	Rural	Greater MN
Lutheran Social Services- Duluth	SO, ES, TLP	Duluth	Urban	Greater MN
Pillsbury United Communities-Street Survival Program	SO	Minneapolis	Urban	Metro
The Bridge	ES, TLP	Minneapolis	Urban	Metro
Teens Alone	SO	Hopkins	Urban	Metro
Three Rivers Community Action	TLP	Zumbrota	Rural	Greater MN
Women of Nations	SO	St. Paul	Urban	Metro
Youthlink	DIC	Minneapolis	Urban	Metro
YWCA of Duluth	TLP	Duluth	Urban	Greater MN

^{*} SO=street outreach, DIC=drop in center, ES=emergency shelter, TLP=transitional living program

DHS-OEO designed the provider survey with input from Rainbow Research. It was administered between March and April 2009. Agencies offering services in more than one RHYA program area completed a survey for each program area. DHS-OEO compiled the responses and analyzed the quantitative data (including HMIS data), while Rainbow Research analyzed all of the qualitative data. The provider survey included information about the following:

- Program participants
- Program operations and staffing
- Program services
- Other program information such as its relationship with community and funding sources

Focus Groups and Exit Surveys

Eighteen focus groups were conducted throughout Minnesota from January through April 2009 of which one was a combined focus group with participants from two smaller programs. Participation was voluntary and youth who participated received a \$15 dollar incentive for their effort. Each focus group, ranging from 3 to 12 participants, was approximately 90 minutes long. The exit survey, which took 5 to 10 minutes to complete, asked participants for basic demographic information and included questions more appropriately and reliably answered in a private setting.

Rainbow Research took the lead in designing, planning, and implementing the evaluation and independently analyzed the findings for this report. This included developing the focus group interview guide, in consultation with DHS-OEO, and then piloting and revising it. Data collection was largely participatory. DHS-OEO staff, trained by Rainbow Research, served as facilitators and notetakers. They found this experience informative and rewarding, personally and professionally. Agency staff recruited focus group participants and took charge of focus group logistics including scheduling, reserving space, and serving refreshments. All focus group notes were turned over to Rainbow Research for coding and analysis.

The Sample

Sampling was constrained by the focus group schedule. Those youth who participated were available at the date and time the groups were held. Others who had work, school or other obligations at the scheduled time could not participate. So as to not introduce selection bias on the part of staff, they were instructed to have <u>all</u> youth who were available to participate. While selection bias may have been introduced by work and school-related obligations the consistency of findings across the 18 sites where groups were held at different times of the day and on different days of the week suggests that the findings are likely to be typical of the youth participants generally. Taking a more conservative posture, if the data were considered only as a qualitative indication of the types of benefits these programs provide the nature and array of benefits described by participants are consistent with what was intended.

Findings from the present study, if considered exploratory, can be validated in subsequent evaluations by the following: 1) surveying a random sample of all youth enrolled using a prepost design that gathers information related to possible outcomes at intake and again at exit to see what has changed as a result of participation and/or 2) conducting a longitudinal follow-up at six months or one year after the youth leave the program might indicate additional or longer term benefits.

YOUTH ASSISTED BY RUNAWAY AND HOMELESS YOUTH ACT PROGRAMS

Data from FY08 in the Homeless Management Information System provides descriptive information on the youth served by the Emergency Shelter and the Transitional Housing Programs.

ATTRIBUTES OF RHYA EMERGENCY SHELTER USERS FY 2008

The tables which follow describe the attributes of individuals served in 3 of 5 of Minnesota's RHYA emergency shelters for which data was available for FY2008—Ain Dah Yung, the Bridge and Avenues for the Homeless.

Age and Gender

Of the 216 youth served by the 3 emergency shelters in FY08 a majority were youth under the age of 18 (68%). Adults 18 and older comprised 32% of those served. By gender 55% of those served were female vs. 44 % who were male and the 1% who were transgender.

By age and gender the largest proportion of those served by emergency shelter were females (39%) and males (29%) under 18 years of age followed by youth over 18 almost equal proportions of whom were male (16%) and female (15%). Only 2 of those served by emergency shelter were transgender, one of whom was over and the other under 18.

Size and % of Emergency Shelter Population by Gender and Age FY08					
Age/Gender Male Female Transgender Total by Age					
Youth (<18)	61 (29%)	84 (39%)	1 (.50%)	146 (68%)	
Adults (18+)	34 (16%)	33 (15%)	1 (.50%)	68 (32%)	
Total by Gender	95(45%)	117 (55%)	2 (1%)	214 (100%)	

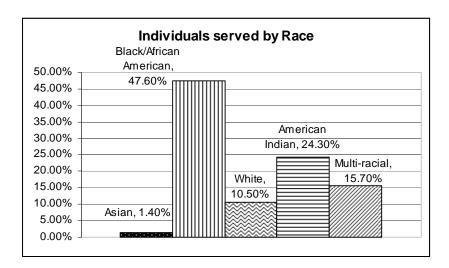
N = 216 Missing = 2

Race/Ethnicity

Of those assisted by the three emergency shelters for which data was available, 48% were African Americans (N=100), 24% were American Indians (N=51) and 16% were bi or multiracial (33). Whites (N=22, 11%) and Asian Americans (N=3, 1%) comprised the smallest proportions of the population assisted.

Size and % of Emergency Shelter Population by Race FY08					
Race N (%)					
Asian American	3	1			
Black/African American	100	48			
White	22	11			
American Indian or Alaskan Native	51	24			
Bi and Multi-racial	33	16			
	209	100%			

N = 216 Missing=7



Only 8% of those assisted by the three named emergency shelters were of Hispanic heritage.

Size and % of Emergency Shelter Population by Hispanic Origin FY08					
Hispanic Origin N %					
Hispanic	18	8			
Non-Hispanic	196	92			
Total	214	100%			

N = 216 Missing=2

ATTRIBUTES OF RHYA TRANSITIONAL LIVING PROGRAM RESIDENTS FY 2008

The tables which follow describe the attributes of individuals served in 9 of Minnesota's RHYA Transitional Living Programs (TLP) for which data was available for FY2008. The TLP programs on which data was collected include the following:

- Arrowhead Economic Opportunity Agency
- The Bridge
- Catholic Charities-SHY Program
- Catholic Charities-Hope Street
- Face to Face
- Life House
- Lutheran Social Services-Brainerd
- Three Rivers Community Action
- YMCA of Duluth

Age

The majority of individuals housed in the transitional living programs (65%) were between the ages of 18 and 21. Another 18% were between the ages of 6 and 17 and 16% were under age of 5. At least 15 of these children assisted by these programs were living with their parents or guardians being assisted by the program. Just a couple of the individuals served were age 22 or older (1.3%, N=2), most likely at the point of leaving the program.

Size and % of Transitional Living Program Population by Age FY08*					
Age N (%)					
0-5	24	16			
6-17	27	18			
18-21	97	65			
≥ 22 2 1					
	150	100%			

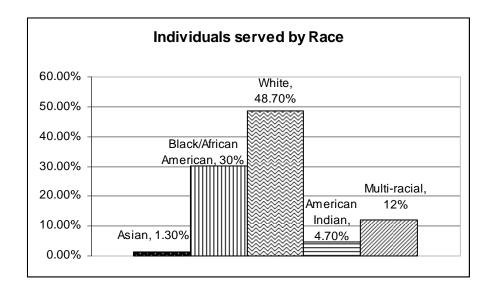
^{*} N = 150

Persons Assisted by Transitional Living Programs- by Race and Ethnicity

In the Transitional Living Programs, 48.7% of the total population were white (N = 73), followed by black or African Americans (N = 45), who constitute 30% of the total population. The third largest group was comprised of those who were multi-racial, accounting for 12% of the total population. A graph further indicates this difference.

Size and % of Transitional Living Program Population by Race FY08*				
Race N (%)				
Asian	2	1		
Black/African American	45	30		
White	73	50		
American Indian/Alaskan	7	5		
Multi-racial	18	13		
Other	1	1		
	146	100		

*N = 150 Unknown/missing = 4



Nineteen percent (N=26) of those assisted by the nine named transitional housing programs were of Hispanic heritage,

Size and % of Transitional Housing Program Population by Hispanic Origin FY08*					
Hispanic Origin N %					
Hispanic	26	19			
Non-Hispanic	111	81			
Total	137	100%			

* N = 150 Unknown/Missing=13

Location of Prior Residence

Ninety-one percent (106) of individuals assisted by Transitional Living Programs in FY08 were from Minnesota (N = 116). The remaining 10 were from Georgia, Maryland, South Dakota, Tennessee, or Utah.

Homeless Status at Entry

Fifty-two percent of individuals (N = 50) assisted by Transitional Living Programs were single, first time homeless and were without a home for less than a year (See chart p.15). Another 21% had either been long term homeless or had been homeless multiple times without meeting the definition of long term homelessness (The long term homeless include "individuals, unaccompanied youth, and families with children lacking a permanent place to live continuously for a year or more or at least four times in the past three years.)

Size and % of Transitional Housing Program Population by Homeless Status at Entry FY08		(%)
1st time homeless & less than 1yr w/out home - Multi-person	4	4
1st time homeless & less than 1yr w/out home - Single	50	52
Long Term Homeless (LTH)- Single	9	9
Multiple times but not meeting LTH definition - Multi person	2	2
Multiple times but not meeting LTH definition - Single	9	9
Not currently homeless Multi person	10	10
Not currently homeless Single	13	14
Totals	97	100%

N = 150 Unknown/Missing = 53

EVALUATION FINDINGS

Following is a summary of major findings from the service provider survey, the youth exit survey, and the youth focus groups. The frequency tables based on exit survey data appear in the Appendix.

Attributes of Program Participants

There are a total 144 exit survey respondents/ focus group participants.

Number and Percent of Respondents by Agency

Agency	N	(%)
AEOA	10	7%
Ain Dah Yung	7	5%
Avenues	8	6%
Catholic Charities-Hope Street	10	7%
Catholic Charities-SHY	4	3%
District 202	6	4%
Evergreen	8	5%
Face to Face*	5	3%
Freeport West	12	8%
Life House	8	6%
Lutheran Social Service-Brainerd	4	3%
Lutheran Social Service-Duluth	11	8%
Pillsbury United Communities-Street Survival Program	10	7%
The Bridge	11	8%
Teens Alone	2	1%
Three Rivers Community Action*	1	1%
Women of Nations	6	4%
Youthlink	12	8%
YWCA of Duluth	9	6%
Total	144	100%

^{*}The focus groups for Face to Face and Three Rivers Community Action were combined.

Most of the groups had six to 12 participants. The majority of participants were in urban-based programs (81%) of which most were Twin Cities metro area programs (76%).

Metro vs. Greater MN Participants

Location	N	(%)
Metro	109	76%
Greater MN	35	24%

Rural vs. Urban Participants

Rural/Urban	N	(%)
Rural	27	19%
Urban	117	81%

The analysis was conducted on two levels. The first level separated respondents by program areas, which include Street Outreach/Drop in Center (SO/DIC), Emergency Shelter (ES), and Transition Living Program (TLP). The second level analyzed all program participants as a whole.

Since there are agencies that run two or three program areas under RHYA, the responses of youth from these dual and triple classification agencies were counted under each program. For example, the responses of youth from LSS-Duluth were counted under SO/DIC, ES, and TLP. Thus, the total number of cases across the three program areas (176) is greater than the actual number of survey respondents (144).

Number of Exit Survey Respondents by Agency and by Type of RHYA Program

Agency	Street Outreach/ Drop in Center*	Emergency Shelter	Transitional Living Program
AEOA			10
Ain Dah Yung		7	
Avenues		8	
Catholic Charities-Hope Street		10	10
Catholic Charities-SHY Program			4
District 202	6		
Evergreen		8	
Face to Face			5
Freeport West	12		
Life House	8		
LSS-Brainerd			4
LSS-Duluth	11	11	11
Pillsbury United Community-Street Survival Program	10		
The Bridge		5	6
Teens Alone	2		
Three Rivers Community Action			1
Women of Nations	6		
Youthlink	12		
YWCA of Duluth			9
Total	67	49	60

^{*}For data analysis purposes, street outreach (SO) and drop in center data (DIC) agencies were combined into one category labeled SO/DIC.

The age of youth participants ranged from 9 to 22 years of age. The mean was 18 years of age and the median was 19 years of age. The majority, 86%, were 16 to 21 years old. Half, 50% were males, and 48% were females. Participants were also racially diverse. Thirty-two percent (32%) identified themselves as Black or African American and 30% identified themselves as

White or European American. The majority, 72%, either had some high school education (41%) or had completed high school or their GED (31%). Fifty-nine percent are currently enrolled in school. Roughly 17% of respondents (25 individuals) reported that they have children, with the number of children ranging from one to three.

As expected, the majority of the respondents, 51%, live in a shelter, transitional living program, or youth housing program. Only 22% said that they were either paying rent in full or shared with roommates. Another 11% reported that they had no permanent place to stay and were "couch hopping."

Current Living Situation of RHYA Program Youth Surveyed

Living Situation	N	(%)
Place not meant to be lived in	2	1%
Couch hopping	16	11%
Shelter	39	27%
TLP or youth housing program	34	24%
Own Apt paying full rent	20	14%
Apt or house with roommates sharing rent	11	8%
Apt or house with parents or family	15	10%
Foster home	3	2%
Other	4	3%
Total	144	100%

Other living situation: board and lodging house (1), Section 8 housing (1), unspecified (2)

LENGTH OF TIME YOUTH HAVE BEEN PARTICIPANTS IN THEIR PROGRAM

Street Outreach/Drop In Centers (SO/DIC)

Focus group youth (N=40) from six SO/DIC programs had a range from 1 day to 12 years. Without the 12 year outlier, the overall range was 1 day to 6 years.

Program Name	# of Youth (N=40)	Range of Time
Freeport	12	2 weeks to 1 year
Life House	8	1 year to 6 years
LSS Duluth	5	3 days to 1 year
Teens Alone	2	3 months to 1 year
Women of Nations	5	1 day to 4 days
Youthlink	9	1 day to 2.5 years

Emergency Shelters

Emergency shelters are used when a youth is in crisis and has no where to go; some youth come into crisis once during their childhood and others multiple times throughout their childhood. The number of times or length of stay for a youth in an emergency shelter depends on a number of factors including issues of child abuse and neglect, issues of poverty, the mental health of the youth and/or the family members and the chemical dependency issues of the youth and/or the family members.

Program Name	# of Youth (N=28)	Range of time youth in focus group have been involved with the program.
Evergreen	6	1 to 8 years
Avenues	5	1 to 8 months
Catholic Charities-Hope Street	9	1 to 60 days
LSS Duluth	8	1 month to 7 years

Transitional Living Programs

Upper limits on the length of time participants are able to remain residents of a Transitional Living Program are set by federal (18 months) and state laws (24 months). Participants in the focus groups range from brand new residents to long-time residents.

Program Name	# of Youth (N=31)	Range of time youth in focus group have been involved with the program.
Catholic Charities-SHY	6	1 to 4 months
Program		
Face to Face	6	4 months to 24 months
LSS Brainerd	4	2 to 14 months
LSS Duluth	6	3 to 12 months
YWCA Duluth	9	3 to 18 months

Why Youth Come to RHYA Programs

As might be expected, most youth say they came to program because their living situation was unstable. The unstable housing was due to the prevalence of drug use/abuse by the youth's family members, depression, suicidal ideation, physical health problems, rejection by their family and/or chaotic/abusive living conditions at home. Reasons for entering the program included one or some combination of the following:

- Homelessness
- Couch hopping
- Unstable family/relative living situations
- Abusive relationships/Childhood Abuse and/or Neglect
- Release from jail or a therapeutic program for drugs or depression

Use of Services

Services youth say they have used and/or activities they have been involved in since coming to the RHYA programs include the following:

- Physical and mental health services, especially aimed at drug abuse and depression
- One on one counseling with family
- Obtaining prescription medications
- Securing housing
- Completing a GED or graduating from high school
- Learning Independent Living Skills
- Improving their understanding about personal behavior and relationships

Many youth commented on the help received with staying out of trouble. The RHYA programs are a safe place to go and helped with goal setting, accountability, and positive social behaviors such as respect for self and anger management.

What Youth Like About the Program

Listed below in rank order are those program features most frequently mentioned in focus groups that program participants said they liked. Only those features mentioned in 3 or more groups are included. As shown below, RHYA program staff is mentioned most frequently across groups and is a theme that prevails throughout the discussion.

What Youth Like About the Program: Themes That Surfaced in 3 or More Groups

Rank	Program Feature including Activities and Services	# of groups	Youth comments (Examples)
1	Staff	7	They care, always there to talk to and listen to you, supportive, helpful, don't care where you're from, a friend yet also a boss
2	Transportation	6	Rides to medical appointments or school, bus card or tokens
3	Educational Assistance	5	Help with education, school, classes, paperwork, GED
4	Employment Assistance	5	Help getting a job, learning new skills from program internship
4	Getting own place (housing)	5	Have a place to call home, have own spot, lease is in own name
4	Social, Sports and Recreational Activities	5	Youth Council, Kulture Klub, going to new places, new experiences, basketball, cookout, socials
4	Case management & Counseling	5	One-on-one counseling, therapy helps with planning life, taming chaotic life, help with depression
4	Classes, training and groups	5	Personal improvement, how bikes work, 4-day training on HIV and HIV testing, job interviewing/SOAR, women's group, guest speakers, Speakers Bureau
5	Personal liberty & choice	4	Allows you to do new things, allows you to change lifestyle, can do as I please, allows you to be you
6	Physical environment (in the case of emergency shelter or TLP programs)	3	Nice comfortable rooms, fun place, laid back, low key, nice smell
6	Food	3	Food shelf, grocery gift card

YOUTH OUTCOMES

Youth in the focus group exit surveys identified ways in which they benefited from the program. The analysis of their responses appears below. For each item, Not Applicable responses and missing responses were excluded from the calculation of percentages. More detail can be found in the Appendix beginning on page 33.

1. Learning the rudiments of caring for themselves

Service providers had a set of basic information they imparted to the youth. At a minimum, they wanted youth to learn where to go in cases of a medical emergency, where to go for health care, where to go if they needed a safe place to stay, how to use public transportation, how to access food, and about forming healthy relationships.

Within each of the three program areas (street outreach/drop-in centers, emergency shelter programs and transitional living programs/supportive youth housing) and across all of them, the majority of survey respondents either agreed or strongly agreed that they had learned the minimum essentials for taking care of themselves and meeting their health, shelter, food and transportation needs.

A large majority (85%) of youth across all programs had learned where to go for a safe place to stay with 43% agreeing with the statement and 42% strongly agreeing. The smallest proportion of youth, 65%, agreed that they had learned where to go in a medical emergency with 45% agreeing and 20% strongly agreeing with the statement.

2. Changes in relationships

Service providers address family and other relationship issues during the intake process. If a youth indicates a desire to improve or develop one or more relationships, it is included in their case or goal plan, and a counselor or case manager works with the youth to make these connections. Oftentimes a support system is identified and written into the plan. Youth identify family members or other adults they can turn to for support.

Specific services offered by the providers regarding relationships include the following:

- Frequent conversations with youth about their personal relationships
- Open discussion during group meetings with their peers of "big picture" issues including relationships
- One-on-one or group counseling with the youth and their family or friends
- Family therapy
- Family reunification or mediation
- Classes on building healthy relationships including topics such as implementing good
 personal boundaries, triggers for unhealthy interactions, mutual respect, communication, selfcare, and social skills training
- Interactive journaling with youth
- Encouraging visits from family and friends in the daytime and evening hours in safe environments and within program rules
- Supervised off-site visits with family members

When providers do not have the capacity to address relationship needs, youth are referred to outside programs such as the Domestic Abuse Project, the Fatherhood Project, and the Neighborhood Involvement Program.

Irrespective of relationship conflicts, RHYA program staff encourages youth to develop a long-term relationship with at least one trusted adult in their lives and provide the support to make this happen. Oftentimes, the outreach worker or the RHYA program staff is the adult with whom the youth connects but they are also encouraged to broaden their relationships. To do this providers create opportunities for adult-youth partnerships including the following:

- Connecting youth with other staff in their agencies or partner agencies
- Inviting youth to attend conferences
- Hosting community events in which youth participate
- Foster grandparent or other volunteer programming where adults come regularly to spend time with youth and to provide a consistent presence in their lives
- Referrals to Mentorship programs

Among all youth exit survey respondents, 39% agreed and 47% strongly agreed with the statement that the RHYA programs helped them make a connection with an adult who cared about them. The percentages were highest for the SO/DIC programs, 38% percent agreed and 52 percent strongly agreed, respectively for a 90% overall agreement with the statement.

Based on focus group findings, the adult with whom they have a caring connection is likely to be a RHYA program staff. In 9 of 18 focus groups in which youth were asked to identify the "one or two things in this program that were most helpful to you", almost 30 youth talked about the care, support, guidance, and friendly ear that the staff provided. One youth said the importance of this connection is "…having someone care. Knowing they won't give up on you, won't dump you off…"

Responding to the exit survey, a majority of the youth responded affirmatively to an item concerning an improvement in their relationship with family members, legal guardians, and caregivers. Overall, 70% agreed or strongly agreed. Within the RHYA program areas, positive responses ranged from 66% to 71%. The majority of participants had also found a mentor whose advice they could trust; 67% overall, and from 61% (SO/DIC) to 70% (TLP) within program areas.

It is noteworthy that from a fifth to a quarter of respondents to whom the question applied said there was no change in the relationships. Similarly, only about a third of respondents said they have been reunited with parents, legal guardians, or caregivers. Reunification is not always a desirable outcome. If the youth had runaway or were homeless because they had been physically or sexually abused at home, because they had parents' with mental health or chemical dependency issues or because they had parents' whose housing situation was unstable, then reconciling or reuniting with their parents would not be a plausible option.

A question asked in the youth focus groups was, "How, if at all, has the program helped you improve your relationships with members of your family and friends?" Some responses

addressed with whom their relationships had improved (mom N=10, friends N=7, family and dad N=7), but more pointed to how their relationships had improved.

Over 40 youth focus group participants talked about how changes in themselves had improved relationships with others. The most frequent theme was much improved insight and self-awareness (N=14), particularly of personal thought processes and behavior patterns. This helped them have better communication skills and confidence (N=10), "open up" and trust more (N=12), and gain improved self image by respecting themselves and others (N=4).

3. Changes in health status

Case managers conduct a health and wellness screening when they meet youth for the first time to determine their health needs. They screen for physical, dental, mental, and chemical health referrals to free or low cost clinics and assist youth in accessing services. Mental health needs are addressed by offering counseling and medical treatment. Other services and support offered in the area of health include the following:

- Providing health education (e.g., nutrition, healthy lifestyle, self-care, sex education, healthy relationships, domestic abuse prevention, pregnancy prevention, sexually transmitted infections)
- Helping youth obtain health insurance or Medical Assistance if eligible
- Helping youth navigate the health care system
- Providing health education materials
- Helping set up and get to medical appointments
- Tracking down prescribed medications and helping with compliance
- Providing recreational opportunities (e.g., outings or health club membership)

Since coming to the program, the majority of participants reported in the exit survey that they have had a health care screening (61%), have been referred to a medical doctor (54%), and have been connected to a counselor, therapist, or psychologist (61%). The percentage that has had a health care screening and has been referred to a medical doctor was highest among youth served by the TLP programs (75% and 56%, respectively). The percentage that had been connected to a counselor, therapist or psychologist was highest for ES programs (70%).

The percentage of youth respondents who entered a drug or rehabilitation program since entering the program was small. Overall, 13% of youth had entered a drug or rehabilitation program. Among SO/DIC youth that number was 13%, among TLP youth it was 16%, and among ES youth it was 18%. A longer term association with the program may result in higher numbers.

In the focus groups youth were asked about their mental health with the question: "In what ways, if at all, has the program helped to improve your physical or mental health?" Improved mental health was the predominant theme (N=57). Youth cited help with drug abuse (N=21), stress and depression, securing and taking medications for mental health issues, self destructive behaviors such as cutting, as well as suicidal ideation and attempts. Therapy, counseling, and "being able to talk with someone" were frequently mentioned as most helpful in improving mental health.

Improved physical health was associated with access to food (N=11), help with drug abuse (N=21), and access to medical and dental services (N=18). Medical insurance (N=6), "testing" services (N=4), weight loss (N=6), and smoking cessation (N=6) were also mentioned as contributing to improved physical health.

4. Changes in academic status and academic or career goals

Education is a component of every youth's case plan. Case managers work with youth to determine what steps they will take to continue or advance their education. In some cases the agencies have staff working specifically on youth education related issues. For example, Ain Dah Yung has an Education Support Specialist on staff, Life House has an Education and Employment Case Manager, and LSS-Duluth has a licensed homebound teacher to provide education on site. If youth are in the public school system, the agencies work with the schools' homeless youth liaison.

The RHYA programs collaborate with community-based and school-based programs to attend to the youths' education needs, whether it involves going to school or securing an internship for enriching their educational experience. If the youth are already in school, the programs help keep them engaged by offering tutoring and other Title I services, which are designed to improve the educational achievement of the disadvantaged. If they are not in school, the programs help get them enrolled, readmitted, or transferred to a mainstream or alternative high school. Programs may also help participants to get their GED. Some agencies offer GED preparation on-site.

For youth interested in pursuing a post-secondary education, the RHYA programs provide informational fairs, workshops, and counseling to prepare them for this step. They include topics such as deciding if college is right for them, SAT/ACT preparation, financial aid (including scholarships and grants), finding the right school, and the application process. They also conduct school tours with youth, and invite speakers who can provide additional resources.

Once youth have decided to or are already enrolled in school, RHYA programs help them go through the enrollment process and provide transportation and school supplies. A few programs pay for application, testing and test preparation fees (SAT, ACT, GED). They also advocate for children and youth with special needs.

Educational assistance is ongoing even when youth are already in school. For example, case managers have regular discussions with youth about their schooling, including attendance issues. Once financial aid begins arriving, counselors help them develop a budget to better manage their finances.

Seventy-two percent (72%) of youth reported an increase in school attendance. Participation in extracurricular activities and/or sports also improved, as reported by 65% of respondents.

Youth also reported that they are now better able to set long-term educational and career goals after participating in a RHYA program. Overall, 88% of respondents reported that this is the case (85% of ES youth, 88% of TLP youth, and 91% of SO/DIC youth).

Help with education was a major area of program impact discussed by youth in the focus groups. High school or GED completion was mentioned by 26 youth as one result of their RHYA program participation. Others mentioned gaining motivation to attend school (N=16), help with transportation (N=9), and other supportive services that enable them to go or get back into school (N=12). Job training (N=8) and tutoring/homework support (N=5) were cited as helping them continue or advance their education. Some programs helped youth (N=9) go to college or take college classes.

5. Changes in financial status or condition

Services and support to help youth find jobs or other legal sources of income are geared towards finding and maintaining employment. They do this in four ways—case management, education, providing job leads and making job connections, and offering employment or internships. However, they are not always offered immediately. At the Arrowhead Economic Opportunity Agency (AEOA) for example, when youth are found to have a mental illness or physical disability during the assessment interview and employment is not at the time a feasible option, the program assists the youth in identifying and qualifying for other means of income such as MFIP, GA, SSI, and SSDI.

Case management services include conducting interest surveys, assistance with creating a resume or document portfolio, mock job interviews, assistance with filling out job applications, going to job fairs, accompanying youth to job interviews or providing the means of transportation, advocacy, shopping for interview attire, providing a clothing allowance, and setting up e-mail and voice mail accounts. If some of these services cannot be provided by the RHYA program, youth are connected to other employment programs such as WorkForce centers.

Some programs hold classes related to job seeking and job retention. These include resume writing, interviewing, workplace communication, and conflict resolution. RHYA programs offer job leads through job board postings, job fairs, making connections with other employment programs, and area employers. The staff at LSS-Brainerd builds relationships with local businesses, professionals and employers to get leads on any openings in their workplaces. The St. Louis County Workforce Development Center has accepted the YWCA-Duluth RHYA program as a placement site for their young mothers to gain job skills and earn income.

Some RHYA programs offer employment or internships to their youth. District 202's Youth Leadership Development Program arranges youth-adult partnerships that provide youth with internship and employment opportunities. Youth work with an adult and are employed as staff to create and build programs and plan events. Pillsbury United Community's Street Survival program offers paid internships to their youth as well through their bike mechanic program at Full Cycle and the Groveland Food Shelf for Youth.

A large percentage of the youth exit survey respondents possess personal identifying documents that they need to find and hold employment. Eighty-one percent (81%) have a social security card, 74% have a copy of their birth certificate and 64% have either a driver's license or state ID.

Sixty-eight percent (68%) have been enrolled in one or more state or county benefit program for which they are eligible (Minnesota Family Investment Program, Emergency Assistance, General Assistance, etc.). Almost half the youth have also been signed up for one or more federal benefit programs like SSI (44%) and food stamps (43%).

Three-quarters of the youth (75%) reported having a legal source of income now that they are in the program. The percentage was highest among TLP youth (78%) and lowest among ES youth (63%).

When asked in focus groups how the program has helped them connect with a job or earn some money, many youth (N=40) talked about supportive services aimed at getting and keeping a job. Youth cited help in job searching skills including creating resumes and applications, using the internet, using personal references, getting transportation, finding childcare services, and acquiring appropriate interview clothes. Sixteen youth remarked that they found jobs. Other youth (N=4) discussed improved financial stability due to assistance in registering for the state EBT card or unemployment insurance.

6. Changes in delinquent activity and criminal justice system involvement

During the intake process, youth can volunteer to provide information about their criminal history, any outstanding warrants, or if they are on probation. Once this is known, the case manager works closely with the youth and law enforcement to resolve the issues. Educating youth about responsibility and accountability are a key element of the programs. They offer assistance in clearing outstanding warrants. If youth are on probation or parole staff makes sure the youth comply with the stipulated conditions and supervision requirements.

RHYA programs invite probation and parole officers to meetings with the youth and case manager. They maintain regular contact with the officers to obtain feedback in the process. If youth are in need of legal services, RHYA programs connect them to pro bono lawyers who work with the program or to free legal aid and resources available elsewhere. Case managers make sure the youth honor court dates and accompany them to court. They also write letters of support and advocate on their behalf.

Prevention is perhaps the best insurance against further involvement with law enforcement or the criminal justice system. The RHYA programs provide a safe environment that discourages criminal activity. They host events for youth, expose youth to healthy sober activities such as sports, get them free gym memberships, enroll them in community service programs, and provide them with supplies for hobbies (e.g., art supplies). The programs offer coaching or classes (or refer youth to classes) on problem solving, self-advocacy, empowerment, building positive relationships with law enforcement, renting issues, credit issues, and good parenting practices.

In the exit survey, close to three-quarters of the youth (74%) reported that they were more successful in staying out of trouble with the law than they were before entering the program. The percentage was 71% among ES and TLP youth and 81% among SO/DIC youth.

Many youth (N=20) talked in the focus groups about how the program they attended helped them get out of and/or stay out of trouble with police, probation and the courts, as well as to do their obligatory community service. Youth spoke about how the programs "kept them off the streets", were positive influences in their lives, and helped them with structure and rules.

7. Meeting housing and other basic needs

Providers help youth take care of their basic needs by providing safe shelter or housing and supportive services. Case managers play a pivotal role in assessing and addressing basic needs in a timely manner. At intake some providers also assess youths' independent living skills and goals. The case manager and youth develop a plan for individualized care, skills development, or goal achievement.

Support services provided to youth include, but are not limited to, the following:

- Scheduling appointments
- Driving to appointments
- Accompanying to and advocating for them at appointments
- Filling out applications and other forms
- Obtaining access to county benefits
- Obtaining identification and other documents (e.g., driver's license, ID card, library card)
- Grocery shopping
- Individual and group counseling
- Family mediation and family therapy
- Support groups
- Medical care
- HIV testing and other tests
- Classes on independent living skills (e.g., housing, renter's rights, employment, transportation, medical and insurance coverage, parenting, money management)
- Locker storage
- Referrals
- Emergency Shelter
- Housing through Transitional Living Programs (on-site or scattered site)

Street Outreach programs are unique in that they are a mobile and not on-site that go to where homeless youth are and provide them with:

- Food, water
- Clothes (including hats, gloves, and coats in the winter)
- Bus cards or tokens
- Gift cards
- Personal hygiene products and other toiletries
- Sleeping bags
- Phones
- Resource list or resource card with information on contact persons and agencies

Since some programs assisted youth with short-term and long-term shelter, many focus group participants indicated that they were able to get their own apartments (N=27), that they received

help with housing applications (N=15), or were given temporary shelter (N=13) through the particular program. Others highlighted the support received in learning how to find and keep housing (N=12) or how the help with the deposit and first month's rent enabled them to secure housing (N=7).

When asked which program features were the most helpful to them, 7 of 16 groups mentioned housing. Youth (N=32) made explicit references to housing, shelter, a safe place to stay, apartments, and foster homes. One youth commented that the importance of the program's housing was simply "to have a place to stay and get the right help". This statement resonated with the peers in his group.

PARTICIPANTS' PROGRAM RATINGS

Survey respondents gave the RHYA programs high ratings. When asked to rate the program services overall, 51% rated them as "excellent" while another 22 percent rated them as "very good." The mean rating was 4.05 out of a highest possible 5. TLP services were rated the highest at 4.28, and ES services were rated the lowest at 3.82.

When asked to rate the overall helpfulness of the programs, out of a highest possible 5, the mean rating was 4.10. Twenty-nine percent (29%) said the programs were "very helpful" while 46% said they were "extremely helpful." Again, TLP programs were rated the highest at 4.26 and ES programs the lowest at 3.87.

ACTIVITIES AND SERVICES YOUTH DIDN'T LIKE AND WHY

Many youth (N=19) across groups (N=8) commented that there was nothing they disliked about the program. A typical response was "None, everything is good." Not unexpectedly, however, there were some issues and complaints. Listed below are categories of complaints that surfaced in three or more groups.

Policies and Rules

The greatest number of complaints concerned policies and rules. Youth (N=10) in nine of the groups said that program rules were either unfair, too restrictive, or "kept changing." One youth said the program felt like jail. Another complained about collective punishment even if only one participant breaks the rules. Curfew was an issue for youth (N=4) in four of the groups who felt it was too early. Three youth felt the allowed stay for visitors was too short.

Staff

Overall, youth felt positively about staff, but there were negative comments from a few youth. The most commonly cited complaint related to staff accessibility. Youth (N=3) in three groups commented on feeling overlooked by and not getting enough attention from staff. One youth attributed lack of attention to the staff's heavy workload. Other scattered complaints included favoritism, lack of staff follow through, and missed appointments.

Privacy

Youth (N=6) across four groups expressed concerns about privacy, complaining that staff members were "In my business" (N=1), that they can't shut their door when they have company (N=2), or that they were interrupted when working (N=3).

Transportation

Youth (N=4) across three groups said they need more help with transportation including bus tokens and two wanted more consistency in who the program would pick up.

HOW THE PROGRAMS MIGHT BETTER SERVE YOUTH

Youth (N=12) across six programs said they couldn't think of anything their program could do to serve them better. Furthermore, they encouraged their program to keep performing as well as they do on behalf of homeless and runaway youth. Typical comments included, "keep up good work", "keep doing what they are doing to help the youth sitting around the table today", and "done me good, so just keep doing the same thing."

Funding

Across 13 programs, youth either said their program needs more funding or indicated specifically more funding was needed for staff, resources, activities and programs.

Housing

Youth (N=14) called for expanding the variety, amount, and duration of emergency shelter and transitional living programs (TLP) including more beds, longer stays, more locations, more houses/apartments, and houses where they could stay all day instead of just overnight emergency shelters, especially during the difficult winter months.

Promotion and Outreach

Youth (N=8) across four programs thought that more promotion and outreach was needed to reach youth who are eligible for the program but hadn't heard about it. One youth also thought that the programs needed to project a positive image to counter the existing image that this is "a place where bad kids go".

GOALS OF YOUTH IN RHYA PROGRAMS

Youth were asked in the focus groups to list one or two important goals they had set for themselves to achieve in the next two years.

The most salient theme among the goals mentioned was **education**. Other common goals revolve around stable finances and housing. The youth's goals break down as follows:

- Attend college (N=23)
- Complete high school or get their GED (N=18)
- Complete two-year degree (N=7)
- Get a job and/or have a career (N=19)
- Become financially stable (N=8)
- Buy a place to live (N=9)

- Have their own apartment (N=6).
- Get a driver's license or car (N=6)
- Own a business (N=3)
- Deliver a healthy baby (N=3)
- Be a better parent (N=3)
- Control anger or not hurt themselves (N=2)
- Other (N=5)

Individual responses in the other category included emancipation, return home to Texas, be successful, better relationship with mother, and "still be alive".

Challenges Facing the Programs

Some of the challenges facing their program identified by the 18 providers who responded to this item include the following:

- Consistent levels and sources of program funding (N=9)
- Providing sufficient mental health services to meet growing demand (N=6)
- Finding safe, affordable, and available housing (N=5)

Staff turn-over is a problem in any organization if the annual rate is high and unplanned. It interferes with routine programming and demands a high level of investment in training and supervision. This, however, seems not to be a problem for most of the programs with the exception of two of the Drop-In Centers. Of the different program types, Drop-In Centers reported the highest level of turnover, with two programs losing four to six employees in one year. TLP/Supportive Housing programs and Emergency Shelter programs had relatively low turnover rates of between zero and three employees a year. Street Outreach programs reported experiencing no turnover.

CONCLUSIONS AND RECOMMENDATIONS

Based on this evaluation Rainbow Research finds strong indication that the programs funded through the Runaway and Homeless Youth Act (RHYA) are making a difference in the lives of homeless and runaway youth and their families. These outcomes are significant because they are of a nature that will help youth transition into adulthood. In addition, they are most likely benefiting the community but to an extent unmeasured and beyond the scope of this study.

RHYA programs would benefit from a longitudinal evaluation to determine if youth who experience the outcomes identified in this evaluation, have in their young adulthood a higher likelihood of achieving stable housing, maintaining healthy relationships, achieving their educational and career goals and avoiding episodes homelessness compared to runaway and homeless youth who never received such program support.

A subsequent cost benefit analysis of RHYA programs would also be of value. Such a study could weigh the value of these longer term outcomes as well and the value of reduced expense to the State and communities for dealing with issues that the programs have addressed, relative to the investment the State of Minnesota has made in RHYA funding.

APPENDIX: RHYA YOUTH EXIT SURVEY TABLES

Description of RHYA-Funded Agencies

RHYA Agencies by Program Area and Geographic Location

Agency	Program Area*	Location	Rural/Urban	Metro/Greater MN
AEOA	TLP	Virginia	Rural	Greater MN
Ain Dah Yung	ES	St. Paul	Urban	Metro
Avenues	ES	Minneapolis	Urban	Metro
Catholic Charities-Hope Street	ES, TLP	Minneapolis	Urban	Metro
Catholic Charities-SHY Program	TLP	St. Cloud	Rural	Greater MN
District 202	DIC	Minneapolis	Urban	Metro
Evergreen	ES	Bemidji	Rural	Greater MN
Face to Face	TLP	St. Paul	Urban	Metro
Freeport West	DIC	Minneapolis	Urban	Metro
Life House	DIC, TLP	Duluth	Urban	Greater MN
Lutheran Social Service- Brainerd	TLP	Brainerd	Rural	Greater MN
Lutheran Social Service-Duluth	SO, ES, TLP	Duluth	Urban	Greater MN
Pillsbury United Communities- Street Survival Program	SO	Minneapolis	Urban	Metro
The Bridge	ES, TLP	Minneapolis	Urban	Metro
Teens Alone	SO	Hopkins	Urban	Metro
Three Rivers Community Action	TLP	Zumbrota	Rural	Greater MN
Women of Nations	SO	Minneapolis	Urban	Metro
Youthlink	DIC	Minneapolis	Urban	Metro
YWCA of Duluth	TLP	Duluth	Urban	Greater MN

^{*}SO=street outreach, DIC=drop in center, ES=emergency shelter, TLP=transitional living program

Number of agencies by program area

- Street outreach = 4
- Drop-in center = 4
- Emergency shelter = 6
- Transitional living program = 10

Note: Agencies that have dual and triple program classifications are re-counted in each category. Thus the total number of agencies under each program area (24) is greater than the actual number of agencies funded under RHYA (19)

Number of Survey Respondents/Focus Group Participants

Number of respondents by agency and program area (Note: For data analysis purposes, SO and DIC agencies were combined into one category labeled SO/DIC)

Number and Percent of Respondents by Agency

Agency	N (%)
AEOA	10 (7%)
Ain Dah Yung	7 (5%)
Avenues	8 (6%)
Catholic Charities-Hope Street	10 (7%)
Catholic Charities-SHY	4 (3%)
District 202	6 (4%)
Evergreen	8 (6%)
Face to Face	5 (4%)
Freeport West	12 (8%)
Life House	8 (6%)
LSS-Brainerd	4 (2%)
LSS-Duluth	11 (8%)
PUC	10 (7%)
The Bridge	11 (8%)
Teens Alone	2 (1%)
Three Rivers Community Action	1 (<1%)
Women of Nations	6 (4%)
Youthlink	12 (8%)
YWCA of Duluth	9 (6%)
Total	144 (100%)

Number and Percent of Respondents by Geographic Location

Area	N (%)
Metro/Greater MN	
Metro	109 (76%)
Greater MN	35 (24%)
Rural/Urban	
Rural	27 (19%)
Urban	117 (81%)

Number of Respondents by Agency and by Type of RHYA Program*

*Note: Since there are agencies that run two or three program areas under RHYA, the responses of youth from these dual and triple classification agencies were counted under each program. For example, the responses of youth from LSS-Duluth were counted under SO/DIC, ES, and TLP. Thus, the total number of cases from all three program areas (176) is greater than the actual number of survey respondents (144).

Agency	Street Outreach/ Drop in Center	Emergency Shelter	Transitional Living Program
AEOA			10
Ain Dah Yung		7	
Avenues		8	
Catholic Charities-Hope Street		10	10
Catholic Charities-SHY Program			4
District 202	6		
Evergreen		8	
Face to Face			5
Freeport West	12		
Life House	8		
Lutheran Social Service-Brainerd			4
Lutheran Social Service-Duluth	11	11	11
Pillsbury United Community-Street Survival Program	10		
The Bridge		5	6
Teens Alone	2		
Three Rivers Comm. Action			1
Women of Nations	6		
Youthlink	12		
YWCA of Duluth			9
Total	67	49	60

Demographic Profile of Survey Respondents/Focus Group Participants In All RHYA Programs Combined

Age of Participants

- Range of 9 to 22 years of age
- Mean age = 18 years
- Median age = 19 years

Age Group	N (%)
< 13	2 (1%)
13 to 15	12 (9%)
16 to 18	53 (38%)
19 to 21	67 (48%)
≥22	6 (4%)
Total	140 100%

N=144, Missing data=4

Gender of Participants

Gender	N (%)
Male	71 (50%)
Female	69 (48%)
Transgender	2 (1%)
Choose not to identify	1 (1%)
Total	143 (100%)

N=144, Missing data=1

Race of Participants

Race	N (%)
American Indian or Alaskan Native	23 (16%)
Asian American	5 (4%)
Black or African American	46 (32%)
African	2 (1%)
Native Hawaiian or other Pacific Islander	1 (<1%)
White or European American	43 (30%)
Other or mixed race	24 (17%)
Total	144 (100%)

Other races specified as follows:

• American Indian & European American (3)

- American Indian & African American (2)
- American Indian, European American & Black (2)
- European American & Black (2)
- American Indian & Asian American (1)
- American Indian & Black (1)
- American Indian & White (1)
- American Indian/Alaskan Native & Black (1)
- Asian American & African American (1)
- Did not specify other race (10)

Highest Level of Schooling Completed

Educational level	N (%)
Grade school	12 (8%)
Some high school	59 (41%)
High school diploma/GED	45 (31%)
Some college	21 (15%)
Vocational/technical college	5 (4%)
Community college	2 (1%)
Total	144 (100%)

Number/Percent Currently Enrolled in School/Training = 85 (59% of all respondents)

Grade or program currently enrolled in (number of respondents in parentheses)

- Grade school (2)
- Middle school (6)
- High school (44)
- GED (8)
- Area Learning Center (2)
- Certificate, unspecified program (1)
- College (AA degree=3, Nursing=2, Veterinary technology=1, unspecified=3)
- Certificate/Vocational/technical/trade school (cosmetology=1, massage therapy program=1, unspecified=3)

Parental Status

- Number of participants with children = 25 (17% of all respondents)
- Number of children per participant
 - o Individual range of one to three children
 - o Mean number of children = 1

Current Living Situation of Participants

Living Situation	N (%)
Place not meant to be lived in	2 (1%)
Couch hopping	16 (11%)
Shelter	39 (27%)
TLP or youth housing program	34 (24%)
Own apt paying full rent	20 (14%)
Apt or house with roommates sharing rent	11 (8%)
Apt or house with parents or family	15 (10%)
Foster home	3 (2%)
Other	4 (3%)
Total	144 (100%)

Other living situations specified:

- board and lodging house (1)
- Section 8 housing (1)
- unspecified (2

RHYA YOUTH OUTCOMES*

*Note:

- Survey respondents were given the option of selecting the "not applicable" (NA) option. Thus, the question about whether they have been reunited with family members does not apply to youth who have never been estranged from family members. Similarly, the question about changes in school attendance does not apply to youth who have not been in school.
- All NA and missing responses were excluded from the calculation of percentages.
- For purposes of analysis the SO/DIC column includes self reported data from youth who are involved in combined Street Outreach and or Drop-In Center programs as well as those involved in either a Street Outreach or a Drop-In Center program only. While all youth responded, in the case of those who are not involved in a combined program some outcomes may not apply.

Knowledge Gains

"At (Non-profit Agency Name), I learned about where to go in a medical emergency."

	SO/DIC	ES	TLP	All Programs
Strongly disagree	5 (9%)	4 (8%)	7 (14%)	11 (9%)
Disagree	4 (7%)	3 (6%)	5 (10%)	11 (9%)
Neither agree nor disagree	15 (26%)	5 (11%)	5 (10%)	21 (17%)
Agree	27 (47%)	24 (51%)	21 (43%)	55 (45%)
Strongly agree	6 (11%)	11 (23%)	11 (22%)	25 (20%)
Total	57 (100%)	47 (100%)	49 (100%)	123 (100%)

"At (Non-Profit Agency Name), I learned about where to go for health care."

	SO/DIC	ES	TLP	All Programs
Strongly disagree	6 (10%)	4 (8%)	7 (14%)	13 (10%)
Disagree	1 (2%)	2 (4%)	2 (4%)	4 (3%)
Neither agree nor disagree	6 (10%)	5 (10%)	2 (4%)	11 (9%)
Agree	33 (57%)	28 (57%)	23 (46%)	65 (51%)
Strongly agree	12 (21%)	10 (20%)	16 (32%)	34 (27%)
Total	58 (100%)	49 (100%)	50 (100%)	127 (100%)

"At (Non-Profit Agency Name), I learned about where to go for a safe place to stay (e.g., shelter, TLP, etc.)."

	SO/DIC	ES	TLP	All Programs
Strongly disagree	3 (5%)	1 (2%)	3 (6%)	6 (4%)
Disagree	1 (2%)	3 (6%)	4 (8%)	6 (4%)
Neither agree nor disagree	5 (8%)	3 (6%)	2 (4%)	8 (6%)
Agree	27 (44%)	28 (54%)	22 (43%)	58 (43%)
Strongly agree	25 (41%)	17 (38%)	20 (39%)	56 (42%)
Total	61 (100%)	52 (100%)	51 (100%)	134 (100%)

"At (Non-Profit Agency Name), I learned about how to use public transportation."

	SO/DIC	ES	TLP	All Programs
Strongly disagree	2 (3%)	1 (2%)	5 (10%)	7 (5%)
Disagree	4 (7%)	2 (4%)	4 (8%)	9 (7%)
Neither agree nor disagree	8 (13%)	8 (16%)	6 (12%)	18 (14%)
Agree	28 (47%)	26 (53%)	19 (38%)	56 (43%)
Strongly agree	18 (30%)	12 (25%)	16 (32%)	39 (30%)
Total	60 (100%)	49 (100%)	50 (100%)	129 (100%)

"At (Non-Profit Agency Name), I learned about how to access food shelves or get a free meal."

	SO/DIC	ES	TLP	All Programs
Strongly disagree	2 (3%)	2 (4%)	4 (8%)	7 (6%)
Disagree		4 (9%)	2 (4%)	5 (4%)
Neither agree nor disagree	6 (10%)	3 (6%)	7 (15%)	14 (11%)
Agree	29 (48%)	24 (52%)	18 (38%)	55 (44%)
Strongly agree	23 (38%)	13 (28%)	17 (35%)	45 (36%)
Total	60 (100%)	46 (100%)	48 (100%)	126 (100%)

"At (Non-Profit Agency Name), I learned about what makes for a healthy relationship."

	SO/DIC	ES	TLP	All Programs
Strongly disagree	2 (3%)	1 (2%)	1 (2%)	4 (3%)
Disagree	3 (5%)	5 (10%)	4 (8%)	8 (6%)
Neither agree nor disagree	5 (8%)	6 (12%)	4 (8%)	13 (10%)
Agree	24 (38%)	23 (46%)	24 (47%)	55 (41%)
Strongly agree	29 (46%)	15 (30%)	18 (35%)	54 (40%)
Total	63 (100%)	50 (100%)	51 (100%)	134 (100%)

CHANGES IN RELATIONSHIPS, STATUS, OR CONDITION

Relationships

"Through (Non-Profit Agency Name), I made a connection with an adult who cares about me"

	SO/DIC	ES	TLP	All Programs
Strongly disagree	2 (3%)		2 (4%)	4 (3%)
Disagree	2 (3%)	3 (6%)	4 (8%)	6 (4%)
Neither agree nor disagree	3 (5%)	6 (12%)	2 (4%)	8 (6%)
Agree	24 (38%)	26 (51%)	22 (42%)	54 (39%)
Strongly agree	33 (52%)	16 (31%)	23 (43%)	65 (47%)
Total	64 (100%)	51 (100%)	53 (100%)	137 (100%)

Current relationship with parents, legal guardians or caregivers compared to relationship prior to entering (*Non-Profit Agency Name*):

	SO/DIC	ES	TLP	All Programs
No change	12 (27%)	10 (21%)	11 (23%)	26 (23%)
A lot worse		1 (2%)		1 (1%)
Worse		3 (6%)	5 (11%)	6 (6%)
Better	19 (43%)	19 (40%)	17 (36%)	45 (41%)
A lot better	13 (30%)	14 (30%)	14 (30%)	32 (29%)
Total	44 (100%)	47 (100%)	47 (100%)	110 (100%)

Current relationship with brothers and/or sisters compared to relationship prior to entering (*Non-Profit Agency Name*):

	SO/DIC	ES	TLP	All Programs
No change	10 (24%)	10 (23%)	12 (27%)	25 (24%)
A lot worse	2 (5%)			2 (2%)
Worse		3 (7%)	2 (4%)	4 (4%)
Better	16 (38%)	17 (39%)	15 (33%)	41 (39%)
A lot better	14 (33%)	14 (32%)	16 (36%)	33 (31%)
Total	42 (100%)	44 (100%)	45 (100%)	105 (100%)

Since coming to (Non-Profit Agency Name):

	SO/DIC	ES	TLP	All Programs
I have been reunited with parents, legal guardians, or caregivers	17 (32%)	14 (33%)	13 (33%)	34 (31%)
I have found a mentor whose advice I can trust	35 (61%)	31 (66%)	33 (70%)	83 (67%)

Percentages are based on number of respondents within each program area (column).

HealthSince coming to (Non-Profit Agency Name):

	SO/DIC	ES	TLP	All Programs
I have had a health care screening	33 (60%)	24 (54%)	30 (75%)	68 (61%)
I have been referred to a medical doctor	27 (48%)	25 (54%)	27 (56%)	65 (54%)
I have been connected to a counselor, therapist, or psychologist	34 (62%)	32 (70%)	25 (56%)	73 (61%)
I have entered a drug or rehabilitation program	7 (13%)	7 (18%)	6 (16%)	14 (13%)

Percentages are based on number of respondents within each program area (column).

Education

School attendance now compared to how it was before coming to (Non-Profit Agency Name):

	SO/DIC	ES	TLP	All Programs
No change	10 (26%)	7 (17%)	7 (19%)	19 (20%)
A lot worse			1 (3%)	1 (1%)
Worse	1 (3%)	3 (7%)	3 (8%)	7 (7%)
Better	14 (37%)	16 (38%)	11 (30%)	33 (34%)
A lot better	13 (34%)	16 (38%)	15 (41%)	37 (38%)
Total	38 (100%)	42 (100%)	37 (100%)	97 (100%)

Participation in extracurricular activities and/or sports in school now compared to how it was before coming to (*Non-Profit Agency*):

	SO/DIC	ES	TLP	All Programs
No change	10 (27%)	12 (31%)	11 (32%)	24 (27%)
A lot worse			2 (6%)	2 (2%)
Worse	1 (3%)	3 (8%)	1 (3%)	5 (6%)
Better	17 (46%)	16 (41%)	12 (35%)	38 (43%)
A lot better	9 (24%)	8 (21%)	8 (24%)	20 (22%)
Total	37 (100%)	39 (100%)	34 (100%)	89 (100%)

Setting long-term educational and career goals now compared to how it was before coming to (Non-Profit Agency Name):

	SO/DIC	ES	TLP	All Programs
No change	4 (9%)	5 (11%)	2 (4%)	9 (8%)
A lot worse			2 (4%)	2 (2%)
Worse		2 (4%)	2 (4%)	2 (2%)
Better	18 (42%)	17 (37%)	21 (44%)	42 (37%)
A lot better	21 (49%)	22 (48%)	21 (44%)	58 (51%)
Total	43 (100%)	46 (100%)	48 (100%)	113 (100%)

Economic Stability

Number and percent that possess the following identifying documents:

	SO/DIC	ES	TLP	All Programs
Social security card	52 (78%)	44 (82%)	48 (89%)	117 (81%)
Birth certificate	46 (69%)	43 (80%)	41 (76%)	106 (74%)
Drivers license or state ID	41 (63%)	30 (58%)	39 (74%)	92 (64%)

Number and percent that have been signed up for one or more of the following county benefits they are eligible to receive:

	SO/DIC	ES	TLP	All Programs
MFIP	10 (21%)	6 (16%)	17 (39%)	30 (29%)
EA	6 (14%)	7 (20%)	7 (17%)	14 (15%)
GA	19 (40%)	13 (34%)	14 (33%)	36 (35%)
SSI	20 (44%)	15 (41%)	27 (59%)	45 (44%)
Food stamps	17 (45%)	14 (42%)	15 (48%)	36 (43%)
Other*	3 (5%)	1 (2%)	1 (2%)	3 (2%)

^{*}Other benefits for which youth have been signed up: Medical Assistance

Having a legal source of income now compared to how it was before coming to (*Non-Profit Agency Name*):

	SO/DIC	ES	TLP	All Programs
No change	9 (21%)	12 (26%)	8 (16%)	21 (19%)
A lot worse	2 (5%)	2 (4%)	1 (2%)	3 (3%)
Worse		3 (6%)	2 (4%)	3 (3%)
Better	14 (33%)	19 (41%)	24 (49%)	44 (41%)
A lot better	18 (42%)	10 (22%)	14 (29%)	37 (34%)
Total	43 (100%)	46 (100%)	49 (100%)	108 (100%)

Personal Safety

Staying out of trouble with the law now compared to how it was before coming to (*Non-Profit Agency Name*):

	SO/DIC	ES	TLP	All Programs
No change	6 (14%)	8 (20%)	7 (18%)	18 (18%)
A lot worse	1 (2%)	2 (5%)	1 (3%)	2 (2%)
Worse	1 (2%)	2 (5%)	3 (8%)	5 (5%)
Better	13 (30%)	13 (32%)	11 (29%)	32 (32%)
A lot better	22 (51%)	16 (39%)	16 (42%)	42 (42%)
Total	43 (100%)	41 (100%)	38 (100%)	99 (100%)

RATING THE RHYA PROGRAMS

Overall rating of program services

	SO/DIC	ES	TLP	All Programs
1=Poor	4 (6%)	1 (2%)	1 (2%)	4 (3%)
2=Fair	9 (13%)	9 (16%)	3 (6%)	17 (12%)
3=Good	9 (13%)	10 (18%)	7 (13%)	18 (12%)
4=Very good	13 (19%)	14 (26%)	12 (22%)	31 (22%)
5=Excellent	32 (48%)	21 (38%)	31 (57%)	74 (51%)
Total	67 (100%)	55 (100%)	54 (100%)	144 (100%)
Range	1 to 5	1 to 5	1 to 5	1 to 5
Mean	3.90	3.82	4.28	4.07

Overall helpfulness of the RHYA programs

	SO/DIC	ES	TLP	All Programs
1=Not at all helpful	4 (6%)	2 (4%)	2 (4%)	4 (3%)
2=Slightly helpful	4 (6%)	5 (9%)	2 (4%)	9 (6%)
3=Somewhat helpful	10 (15%)	11 (20%)	7 (13%)	23 (16%)
4=Very helpful	21 (31%)	17 (31%)	12 (22%)	41 (29%)
5=Extremely helpful	28 (42%)	20 (36%)	31 (57%)	67 (46%)
Total	67 (100%)	55 (100%)	54 (100%)	144 (100%)
Range	1 to 5	1 to 5	1 to 5	1 to 5
Mean	3.97	3.87	4.26	4.10



Web site: http://www.dhs.state.mn.us