



STRATEGIC PLAN TO PREVENT AND END YOUTH HOMELESSNESS IN TUCSON/PIMA COUNTY

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TUCSON PIMA COLLABORATION TO END HOMELESSNESS



Tucson Pima Collaboration to End Homelessness: Strategic Plan to Prevent and End Youth Homelessness in Tucson/Pima County, Arizona April 2019

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- * Amphitheater School District
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- * El Rio Health Clinic
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- * Old Pueblo Community Services
- * Our Family Services
- * Pima County Homeless Management Information System
- * Pima County One-Stop Youth Employment Center
- * Pima County Public Library
- * Pima County Sullivan Jackson Employment Center
- * Primavera Foundation
- * Southern Arizona AIDS Foundation
- * StandUp For Kids - Tucson
- * Teen Outreach Pregnancy Services
- * University of Arizona - SIROW
- * TPCH Youth Action Committee
- * Tucson Preparatory School
- * Youth On Their Own

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Introduction

Tucson Pima Collaboration to End Homelessness (TPCH) is a coalition of community and faith-based organizations, government entities, businesses, and individuals working to end homelessness and address issues related to homelessness in Pima County, Arizona. TPCH is the U.S. Department of Housing and Urban Development (HUD) Continuum of Care (CoC) for the geographic area of Tucson/Pima County, Arizona (AZ-501). LeCroy & Milligan Associates, Inc. was contracted by Our Family Services on behalf of TPCH to develop this Strategic Plan. The project began in December 2018 and was completed in March 2019, with this final report submitted in April 2019. This Strategic Plan provides goals, objectives, and suggested benchmarks that TPCH can utilize to further develop a 3-5-year action plan to prevent and end youth homelessness in Tucson/Pima County, Arizona. This Strategic Plan reviews:

- The extent of youth homeless in Tucson/Pima County, AZ based on recently collected community and Homeless Management Information Systems (HMIS) data;
- Key findings from the *TPCH Needs Assessment of Homeless Youth and Young Adults in Tucson/Pima County, AZ (2019)*;
- Key findings from the *Youth Gaps Analysis of the Pima County Continuum of Care (2019)*; and
- The nine goals, objectives, and suggested benchmarks identified for this Strategic Plan to prevent and end youth homelessness in Tucson/Pima County, Arizona.

Throughout this report, the term “youth” refers to people ages 12 to 24 who are experiencing homelessness or housing instability. Appendix A provides federal definitions and key terms that define youth and young adults who are experiencing homelessness or unstable housing.

Goals of the TPCH Strategic Plan to Prevent and End Youth Homelessness in Tucson/Pima County, Arizona

1. To engage youth more directly in leading and implementing strategies.
2. To improve housing permanency and decrease repeat homelessness among youth.
3. To increase youth income earning opportunities.
4. To more effectively engage youth in education.
5. To improve access to and use of transportation.
6. To increase access to and use of medical, behavioral, and dental care services.
7. To better identify and immediately assist youth at risk of experiencing homelessness.
8. To increase awareness and promote public policy that positively impacts youth experiencing homelessness or housing instability.
9. To accurately report on the number and characteristics of youth that are experiencing homelessness and housing instability.

Guiding Principles

The Strategic Plan Working Group members have identified the following guiding principles that are inherent throughout this Strategic Plan and should be incorporated by TPCH into the action plan to prevent and end youth homelessness:

- Youth should be involved in all aspects of the planning and implementation process.
- A *Collective Impact* approach should be considered to engage community partners across sectors in developing and implementing this action plan. See Appendix B for an overview of the *Collective Impact* approach.
- This plan and related action plan should align with the U.S. Interagency Council on Homelessness (2013) core outcome areas of stable housing, permanent connections, education and employment, and well-being.
 - *Stable housing* includes a safe and reliable place to call home. Stable housing fulfills a critical and basic need for homeless youth. It is essential to enabling functioning across a range of life activities. Lack of stable housing, on the other hand, exposes young people to a multitude of risks on the streets.
 - *Permanent connections* include ongoing attachments to families, communities, schools, and other positive social networks. Connections support young people's ability to access new ideas and opportunities that support thriving and they provide a social safety net when young people are at-risk of re-entering homelessness.
 - *Education/employment* includes high performance in and completion of educational and training activities, especially for younger youth, and starting and maintaining adequate and stable employment, particularly for older youth. Achievements in education and employment increase a youth's capacity to support himself or herself and avoid future homelessness.
 - *Well-being* refers to the social and emotional functioning of homeless youth. It includes the development of key competencies, attitudes, and behaviors that equip a young person experiencing homelessness to avoid unhealthy risks and to succeed across multiple domains of daily life, including school, work, relationships, and community.
- Services for youth experiencing homelessness or housing instability should be provided across sectors in a manner that:
 - Utilizes a trauma-informed lens;
 - Utilizes a positive youth development and harm reduction approach;
 - Is youth-centered and affirming; and
 - Is LGBTQ-affirming and creates a Safe Space that is a welcoming, supportive, and safe environment for youth who identify as LGBTQ - lesbian, gay, bisexual, transgender, and queer (questioning), or someone who identifies as a member of that community.

- TPCH should utilize a Functional Zero approach to serving youth who are experiencing homelessness and housing instability (Turner, Pakeman, & Albanese, 2016). Functional Zero will be achieved when TPCH has effectively structured its local homeless youth-serving system to meet incoming demand with effectiveness and efficiency and has an adequate supply of housing to meet the demands of youth.
 - The Functional Zero approach describes the situation in a community where homelessness becomes a manageable problem. That is, the availability of services and resources match or exceed the demand for them from the target population. Further, such resources are optimized, performing as intended with maximum efficacy.
 - The Functional Zero approach recognizes that homelessness and risk cannot be completely eradicated, nor can efforts undermine personal choice in some instances. Someone may refuse the resources and supports offered for a variety of reasons, signaling independent and autonomous decision-making about what is best in their situation.
 - Functional Zero is achieved when there are enough services, housing and shelter beds for everyone who needs it. In this approach, emergency shelters are meant to be temporary and the goal is permanent housing. While the focus on supports is to prevent homelessness to begin with, this may not always be possible. In such cases a system that is responsive and acts quickly is essential. A key aim of homeless-serving systems is to provide immediate access to shelter and crisis services, without barriers to entry, while permanent stable housing and appropriate supports are being secured.

Strategic Planning Approach and Methods

The approach to the strategic planning process included the following steps implemented by the Strategic Planning Working Group (Bryson, 2018):

1. Agreement on Scope and Purpose of the Planning Process
2. Identification of any External Environmental Requirements / Mandates
3. Conduct of Internal Environment / External Environment Scans – analyze results of needs assessments, stakeholder analyses, literature reviews, etc.
4. Identify Strategic Issues
5. Strategy Formulation – goal setting, with the establishment of key objectives, and benchmarks for each goal area.
6. Strategy and Plan Review and Approval by Our Family Services and Working Committee members.

This strategic plan was developed through the following methods:

- Interviews with multiple local stakeholders to assist in identifying key strategies and review the final report's goals and objectives.
- Direct engagement of youth and youth leadership groups for review and comment on strategic issue areas.
- Participation by working group members in “lessons learned” webinars with other metropolitan/regional efforts across the country.
- Utilization of results from the 2019 Tucson/Pima County youth Needs Assessment and the 2019 Youth Gaps Analysis.
- Review of relevant literature and research-based reports on the causes of and effective strategies to prevent youth homelessness.
- Multiple working group sessions held through webinars and in-person with key stakeholders to identify key strategy areas and to identify and validate the relevance of goal areas to current efforts in Tucson / Pima County.

Our Family Services leadership staff were involved in each step of the development of the strategic plan, as were members of the TPCH Homeless Youth Sub-Committee and the TPCH Youth Action Committee.

Extent of Youth Homelessness in Tucson/Pima County, Arizona

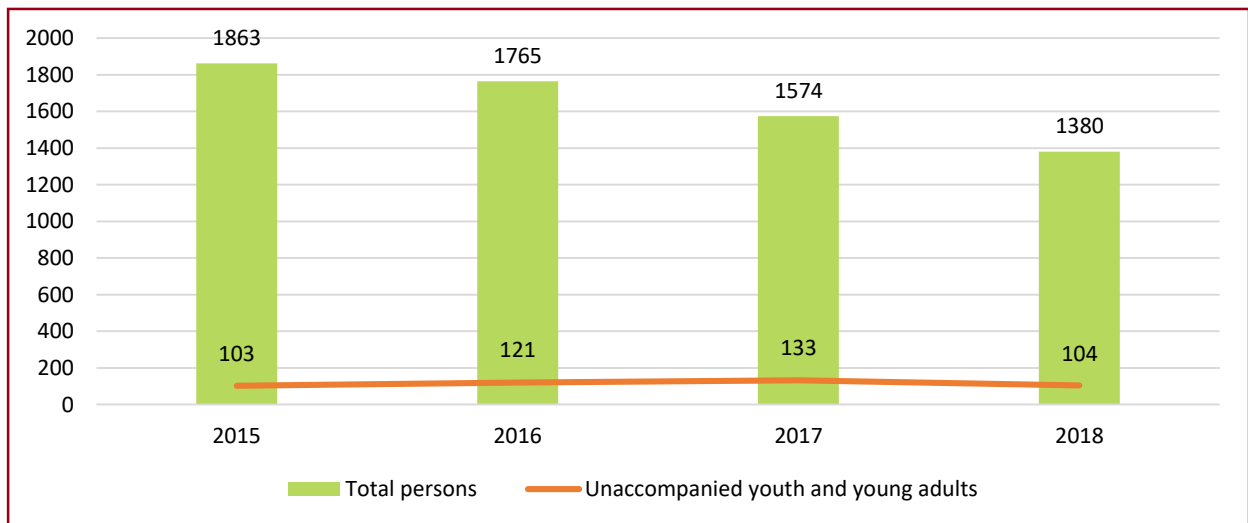
Four sources of secondary data on youth homelessness are presented to assess the prevalence and characteristics of youth homelessness in Tucson/Pima County. This information is excerpted from the *Needs Assessment of Homeless Youth and Young Adults in Tucson/Pima County* recently completed by TPCH (LeCroy & Milligan Associates, 2019).

Youth Data and Demographics

Point-in-Time Count

Since 2005, HUD has required all CoCs to complete a Point-in-Time (PIT) count of sheltered and unsheltered homeless persons on a single night in January. This count is completed annually in Pima County in the last week of January and includes a street count of unsheltered homeless persons in addition to a count of all clients in emergency and transitional beds. The 2018 PIT count identified a total of 1,380 homeless individuals in Pima County, of whom 104 (8%) were unaccompanied youth and young adults up to age 24. Exhibit 1 shows PIT count data for total homeless persons and unaccompanied youth and young adults in Tucson/Pima County CoC from 2015 to 2018.

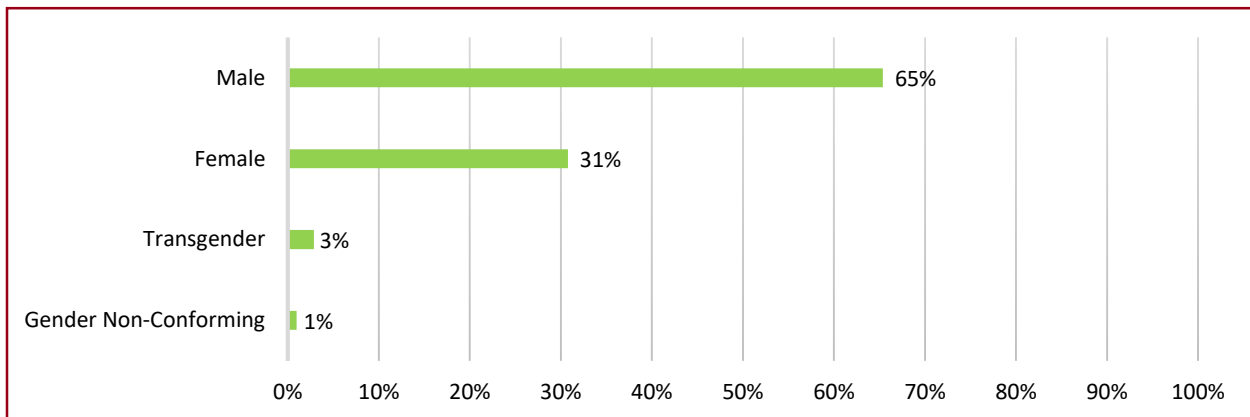
Exhibit 1. Count of Total Persons and Unaccompanied Youth and Young Adults in Tucson/Pima County CoC, 2015-2018 PIT Counts



A general trend is that the number of total persons counted has decreased steadily over time. However, the number of unaccompanied youth has not decreased comparing 2015 to 2018. Unaccompanied homeless youth remain a need to be addressed by the Tucson/Pima County CoC. Of the 13 service providers interviewed for the *Youth Homelessness Needs Assessment* (LeCroy & Milligan Associates, 2019), most felt that youth homelessness is a bigger issue than currently captured in official data and that PIT count numbers may be misleadingly low because of the point-in-time methodology. An informant from a youth-serving non-profit stated, “The issue has always been there, and we don’t know the true extent. The number of youth couch

hopping is unknown. Homeless youth counts are low. It's a hidden concern, which makes it challenging, and why people may not be aware." Exhibit 2 shows the gender identity of unaccompanied youth and young adults in the 2018 PIT count. Two thirds identified as cisgender male and about a third identified as cisgender female. A small proportion of young people counted in 2018 identified as transgender or gender non-conforming.

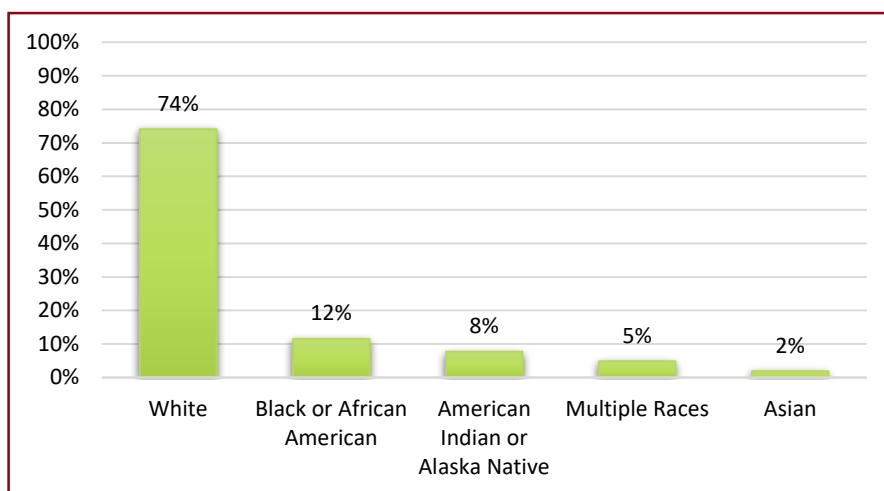
Exhibit 2. Gender Identity of Unaccompanied Youth and Young Adults, 2018 PIT Count



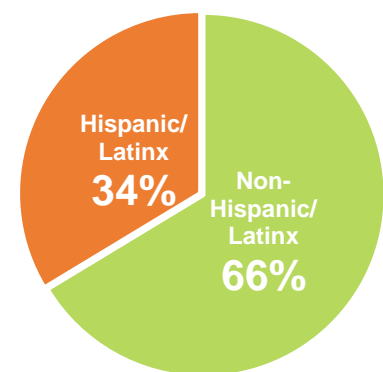
(N=104)

Exhibit 3 shows that during the 2018 PIT count, 74% of unaccompanied youth and young adults identified as White, followed by 12% who identified as Black or African American, 8% who identified as Native American, and 5% as mixed race. Additionally, 34% identified as being from a Hispanic/Latinx ethnicity. In comparison, 2018 U.S. Census Bureau population estimates for Pima County shows that 85.1% are White, 4.3% are Native American, 4.1% are Black or African American, 3.3% are Asian, 2.9% are two or more races, and 37.3% identify as Hispanic or Latino ethnicity.

Exhibit 3. Race and Ethnicity of Unaccompanied Youth/Young Adults, 2018 PIT Count



(N=104)



Vulnerability Index-Service Prioritization Decision Assistance Tool Data

Exhibit 4 shows the number of youth and young adults ages 17 to 24 who completed the TPCH's common assessment tool in 2017, 2018, and combined. The tool used by the TPCH is the Vulnerability Index – Service

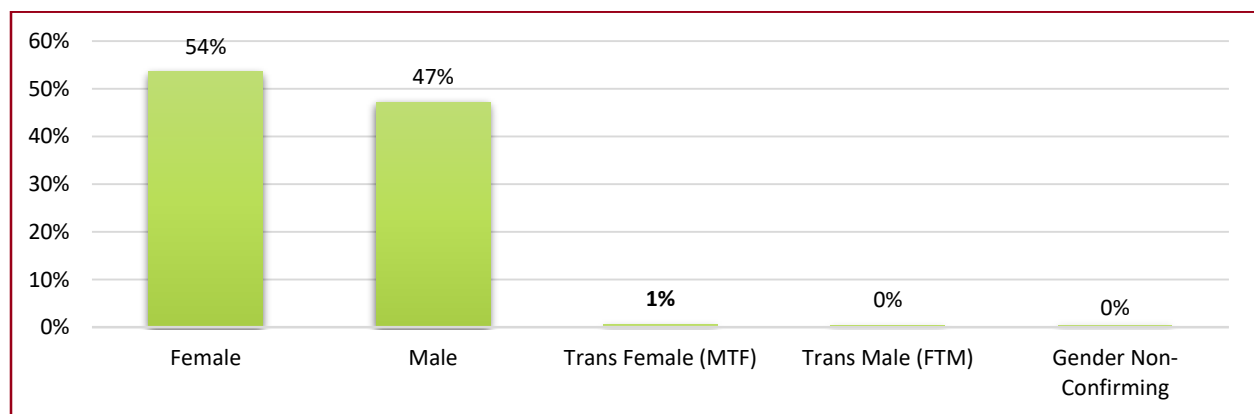
Prioritization Decision Assistance Tool (VI-SPDAT), which is used for adults experiencing homelessness. Additional versions of the tool include the Family (F-VI-SPDAT), which is a family-specific assessment completed when a family of two or more adults and/or children seeks services, and the Transition Age Youth (TAY-VI SPDAT), which is the assessment specific for youth ages 18 to 24. As there are many agencies providing services to people who are experiencing homelessness, some agencies may by practice use the VI-SPDAT on youth when the TAY-VI-SPDAT may be more appropriate. In 2017, 747 unduplicated youth completed a VI-SPDAT and in 2018, 546 unduplicated youth completed this tool.

Exhibit 4. VI-SPDAT Breakdown by Age and Type - 2017, 2018, and Combined

SPDAT	CALENDAR YEAR 2017					CALENDAR YEAR 2018					CY 2017 & 2018 COMBINED				
	F	TAY	VI	COMBINED	%	F	TAY	VI	COMBINED	%	F	TAY	VI	COMBINED	%
Total	144	334	269	747	0%	108	254	184	546	0%	252	588	453	1,293	0%
17	0	0	0	0	0%	0	1	0	1	0%	0	1	0	1	0%
18	14	2	18	34	5%		56	6	68	12%	20	58	24	102	8%
19	16	77	27	120	16%	11	34	13	58	11%	27	111	40	178	14%
20	18	58	40	116	16%	11	43	25	79	14%	29	101	65	195	15%
21	34	53	47	134	18%	25	27	18	70	13%	59	80	65	204	16%
22	37	43	49	129	17%	17	23	29	69	13%	54	66	78	198	15%
23	35	30	59	124	17%	17	37	38	92	17%	52	67	97	216	17%
24	17	41	29	87	12%	21	33	55	109	20%	38	74	84	196	15%

Exhibit 5 shows the gender identity of youth (ages 17 – 24) who completed any of the three VI-SPDAT assessment types in 2017 and 2018 combined. While most of the youth identified as either cisgender male or female, 1% (n=16) of respondents identified as either transgender or gender non-conforming. Cisgender females (54%, n=692) accounted for over half of young people who completed an assessment in these two years.

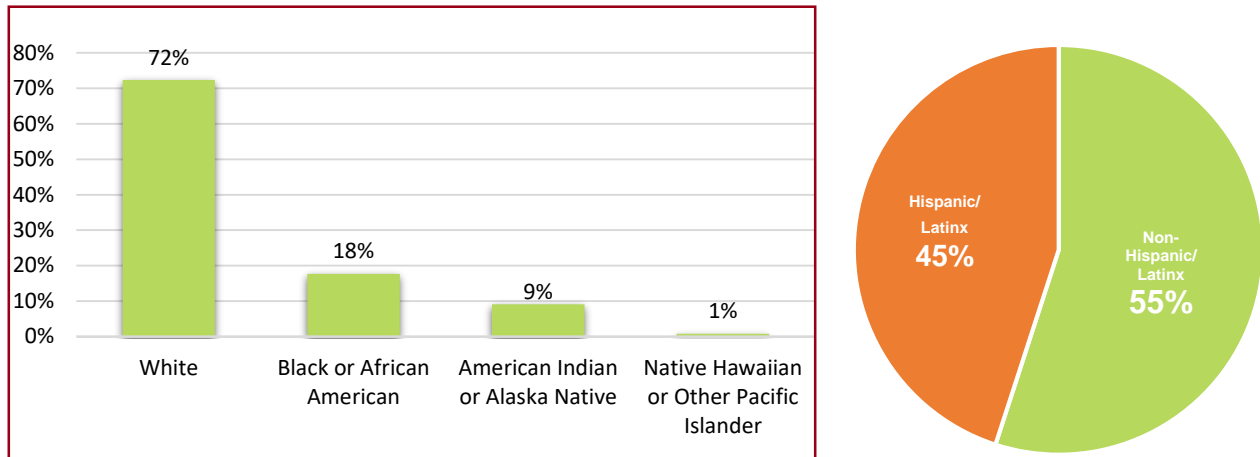
Exhibit 5. Gender Identity of Youth who Completed a SPDAT in 2017 and 2018, Combined



(N=1,318; Percentages exceed 100% as potential duplication existed for youth who completed separate assessments in each calendar year.)

Exhibit 6 shows that 72% (n=936) youth who completed the VI-SPDAT in 2017 and 2018 identified as White, followed by 18% who identified as Black or African American, and 9% who identified as Native American. Moreover, 45% (n=588) identified their ethnicity as Hispanic/Latinx.

Exhibit 6. Race and Ethnicity of Youth who Completed a SPDAT in 2017 and 2018, Combined



(N=1,293, Percentages do not total to 100% because youth could select more than one option that applied to them.)

The VI-SPDAT assessments capture where youth are primarily sleeping before housing interventions are offered. Exhibit 7 shows that in 2017 and 2018, most young people experiencing homelessness either slept outside (30%, n=389), stayed with friends and family (22%, n=281), couch surfed (12%, n=161), stayed in a shelter (10%, n=134), or another place not meant for human habitation (9%, n=111). The objective of all VI-SPDAT assessment tools is to assess and rank the level of vulnerability of a person experiencing homelessness. A youth with a score of 0-3 does not qualify for housing assistance through coordinated entry. A score of 4-7 allows a youth to get into Rapid Re-housing (RRH) or Transitional Housing (TH). If a youth scores an 8 or above, they are considered the most vulnerable and qualify for Permanent Supportive Housing (PSH). The data shows that over half, 55% (n=732), of the assessed youth are considered most at risk and qualified for PSH. Thirty-nine percent (n=515) fell into the RRH/TH range and 6% did not qualify for assistance.

Statistics from 2017-2018 VI-SPDAT Data on Youth and Young Adults

73% of youth reported some form of emotional, physical, psychological, sexual abuse, and/or trauma to be the cause of their homelessness.

49% of homeless youth have been to the ER in the last 6 months. 33% of youth took an ambulance to the hospital.

37% of youth are currently involved with the legal system.

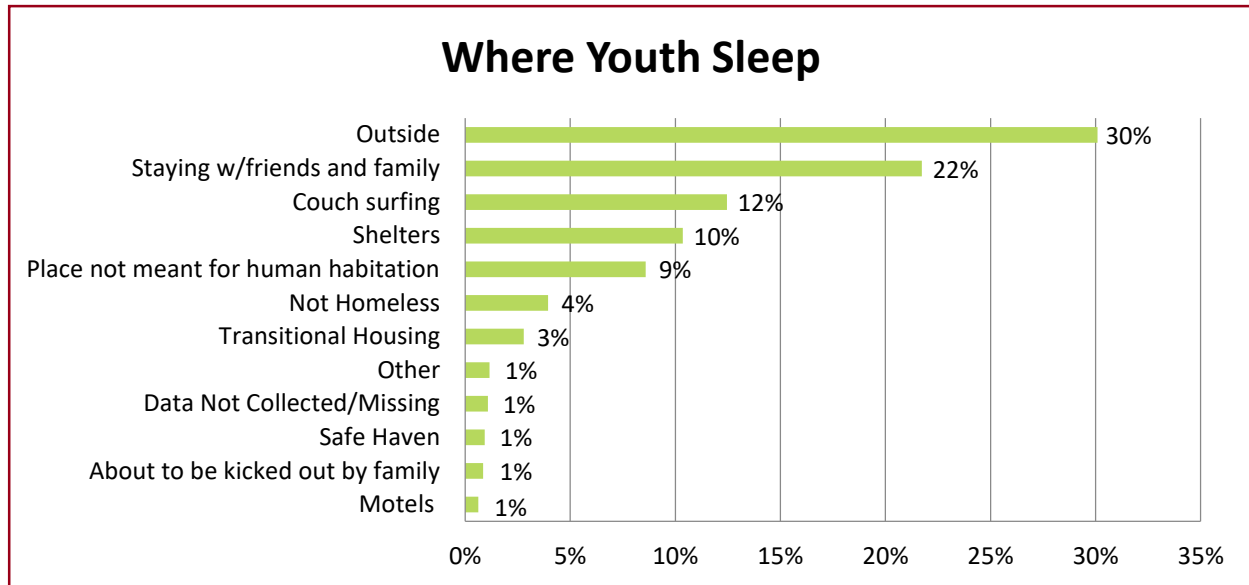
34% of youth have been attacked or beaten up since becoming homeless.

29% of youth have tried to harm themselves or others since being homeless.

24% of youth are not able to meet their basic needs – bathing, clean clothes, food/water.

23% of youth report difficulty maintaining housing due to mental health.

Exhibit 7. Location Where Youth Sleeps Most Frequently, 2017 and 2018 Combined (N=1,236)



Youth Dedicated Housing

Definitions of Housing and Supportive Services

Emergency Shelter – Any facility whose primary purpose is to provide temporary shelter for the homeless in general or for specific populations of the homeless.

Permanent Supportive Housing – Long term, community-based housing that has supportive services for homeless persons with disabilities. This type of supportive housing enables special needs populations to live as independently as possible in a permanent setting. Permanent housing can be provided in one structure or in several structures at one site or in multiple structures at scattered sites.

Rapid Re-housing – An intervention designed to help individuals and families that don't need intensive and ongoing supports to quickly exit homelessness and return to permanent housing. Assistance is offered without preconditions and resources and services are tailored to the unique needs of the individuals.

Transitional Housing - A project that has as its purpose facilitating the movement of homeless individuals and families to permanent housing within a reasonable amount of time (usually 24 months).

Street Outreach Program – Agency staff engage with visibly homeless youth living on the streets. These youth are likely disconnected or alienated from mainstream services and supports. Outreach strategies require the development of an understanding of the individual circumstances and needs, as well as cultural barriers that may prevent people from accessing either mainstream services or those that target people who experience homelessness.

Housing Inventory Count of Youth Dedicated Housing Programs

The Housing Inventory Count (HIC) is a calculation of the numbers of beds and housing units in the Tucson/Pima County CoC on one night. Exhibit 8 shows the number of beds available in youth-dedicated housing programs. A total of 132 beds are dedicated for youth in these programs.

Exhibit 8. Number of Beds Available in Youth Dedicated Housing Programs, HIC 2018

Housing Program	Transitional Housing	Permanent Supportive Housing	Emergency Shelter*	Total
Number of beds dedicated to youth and young adults with children	51	23	0	74
Number of beds dedicated to youth and young adults alone (without children)	19	35	4	58
Total Youth Dedicated Beds	70	58	4	132

*(*The youth dedicated Emergency Shelter is a crisis shelter for homeless and runaway teens, ages 12 – 17.)*

Utilization of Youth Dedicated Housing Programs

Data on housing program service utilization of unaccompanied youth (ages 12-17 years) and young adults (ages 18-24 years) during the time frame of 7/1/2017-6/30/2018 was provided by the Tucson/Pima County CoC Homelessness Management Information System (HMIS). As required by HUD, HMIS is an electronic database utilized by members of the CoC to track service provision and needs of homeless people within the geographic boundary of Pima County. HMIS data was reported to the research team in aggregate by youth-dedicated program type to protect confidentiality. While program level data represents unduplicated individuals, total numbers across programs likely represent duplicate counts of individuals who have utilized more than one service during this time frame. Therefore, aggregated data across all programs is not reported.

Exhibit 9 shows the total number of unaccompanied young adults, youth, and children (of parenting young adults) who received services from youth-dedicated housing programs during this time frame. Youth street outreach encountered the highest number of people served by program type, which is to be expected as these young people are re-connected with family or referred to housing programs with the goal of establishing permanent housing stability. It should be noted that while there were no youth-dedicated RRH projects reported in HMIS during the period, RRH projects have since been implemented locally.

Exhibit 9. Unaccompanied Young Adults, Youth, and Children Served by Youth Dedicated Programs, HMIS Data 7/1/2017-6/30/2018

Age Range	Youth Street Outreach	Youth Transitional Housing	Youth Permanent Supportive Housing	Youth Emergency Shelter
18-24 Years*	229	68	53	17
12-17 Years	4	1	3	36
< 5 Years (children of parenting youth and young adults)	55	38	13	4
Total Individuals Served	282	107	69	57

*18-24-year-old counts include a few individuals who turned 25 while in the program.

Exhibit 10 shows the gender identity of youth and young adults who were served by the four program types. The majority of young people served identified as male or female, with a small percentage identifying as trans female (male to female), trans male (female to male), or gender non-conforming. Over half of young people

served by youth dedicated street outreach and transitional housing programs were female, while over half of those served by PSH and emergency shelters were male.

Exhibit 10. Gender Identity of Youth and Young Adults by Youth Dedicated Programs

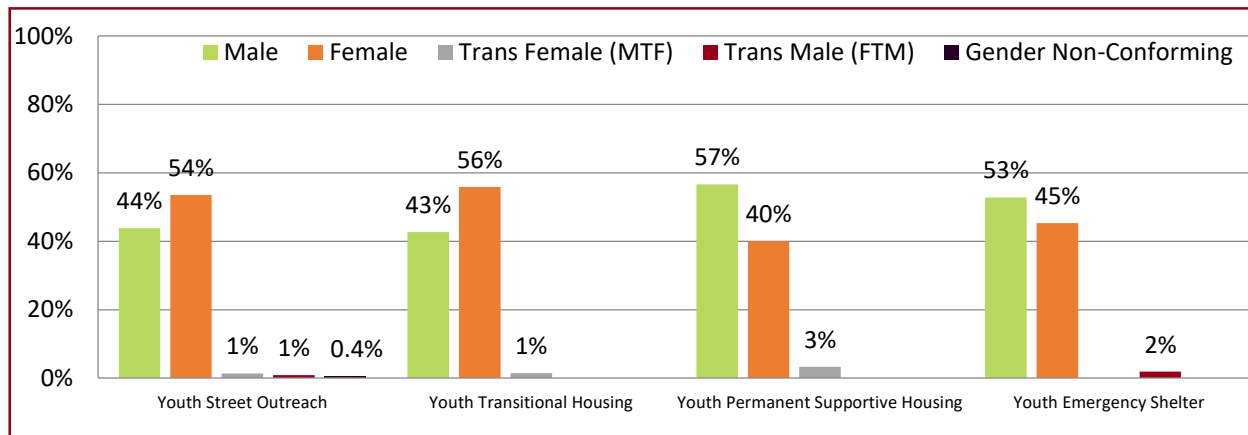
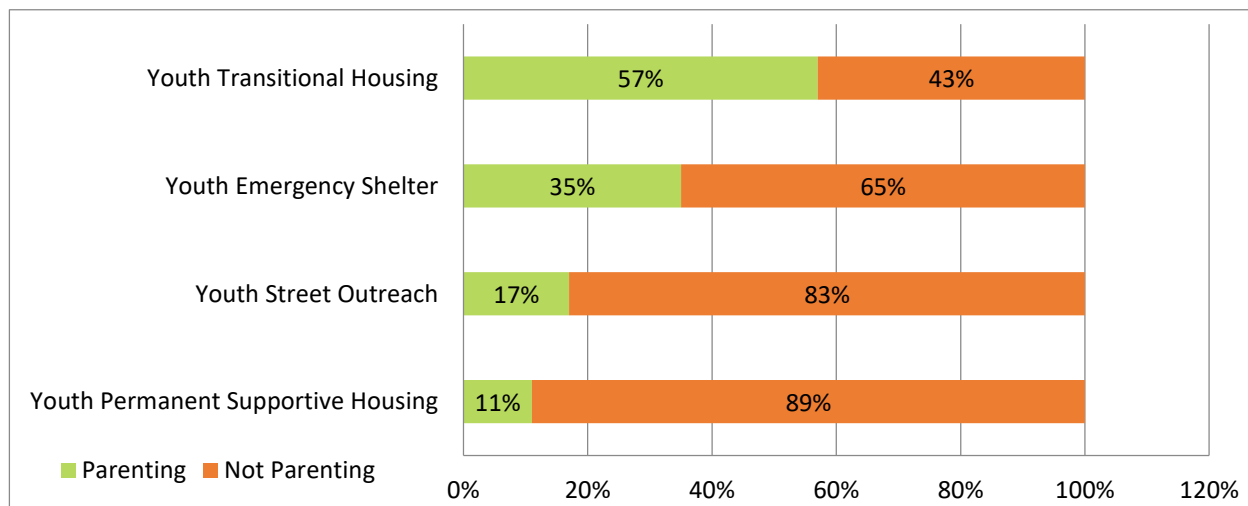


Exhibit 11 show the percentage of young adults ages 18-24 who are parenting and not parenting by youth dedicated services (none of the young people ages 12-17 were reported in HMIS to be parenting). Youth dedicated transitional housing programs served the highest proportion of young adults (57%) who were parenting children under the age of five years, which reflects that these programs specifically focus resources on parenting youth. A general trend across program types is that most parenting young adults are female.

Exhibit 11. Percentage of Parenting Youth Ages 18-24 by Youth Dedicated Programs



Critical Need to Effectively Identify and Support Youth At-Risk of Homelessness

There is acknowledgement that many factors contribute to youth homelessness. The top reasons given by more than half of youth surveyed as part of the 2019 *Needs Assessment of Homeless Youth and Young Adults in Tucson/Pima County* (LeCroy & Milligan Associates, 2019) include: they experienced **financial hardship**, including intergenerational poverty, family eviction, job loss, and lack of skills/education to obtain employment;

they experienced **abuse, neglect, abandonment, and/or family conflict and violence**; and/or they were **kicked out of their family's home** for various reasons, including rejection due to gender identity and/or sexual orientation. These reasons for youth homelessness are consistent with those identified nationally by the USICH (2018). This strategic plan includes a goal area focused on strategies to better identify and intervene with youth who may be at risk of homelessness. Key factors to consider in preventing youth living in unstable situations or homelessness include:

- Dysfunctional family / support networks;
- Financial insecurity – family and youth;
- Risk factors present in the community / environment; and
- Inadequate and poorly coordinated supportive services.

Youth Homelessness Needs, Services, and Gaps

Key Findings and Recommendations from the 2019 Youth Homelessness Needs Assessment Report

TPCH recently completed the 2019 *Needs Assessment of Homeless Youth and Young Adults in Tucson/Pima County* (LeCroy & Milligan Associates, 2019), focusing on Pima County youth ages 12-24 experiencing homelessness or housing instability. Data was collected for this assessment through surveys completed with 154 youths; four youth focus groups; interviews with 13 key service providers; and a review of secondary data for the CoC. Exhibit 12 summarizes the key findings from this Needs Assessment in the areas of:

- Prevalence and Characteristics of Youth Homelessness in Tucson/Pima County
- Service and Benefits Participation of Homeless and Unstably Housed Youth
- Unmet Service Needs and Barriers to Accessing Services
- Developmental Assets and Positive Influences

Exhibit 12. Key Findings from the TPCH 2019 Homeless Youth Needs Assessment

Area	Prevalence and Characteristics of Youth Homelessness
Youth Survey Demographics	<ul style="list-style-type: none"> • Respondents to the youth survey ranged from 13 to 24 years of age, with an average and median age of 20 years. 88% of youth surveyed are 18-24. • 52% of respondents identified as White, 15% identified as Black or African American, 12% as mixed race, and 10% as Native American. Additionally, 47% identified their ethnicity as Hispanic/Latinx. • 46% identified as cisgender female, 41% as cisgender male. • 21% identified as LGBTQ.
Homeless or Unstable Housing Situations	<ul style="list-style-type: none"> • The most common situation experienced by 80% of youth in the <u>last 30 days</u> or within the <u>last year</u> was doubling up or staying overnight with friends, relatives, or someone they did not know well because they did not have a regular, adequate, and safe place to stay at night. • 69% of youth reported having stayed overnight in a car, park, public place, abandoned building, bus or train station, airport, or a similar place because they did not have a regular, adequate, and safe place to stay at night. • 30% of youth surveyed are pregnant and/or parenting. • The average age when youth first became homeless was 16.7 years old, with a wide range from 4 to 24 years old. Respondents have experienced homelessness an average of 4 times in their lives.
Reasons for Youth Homelessness	<ul style="list-style-type: none"> • The predominant reasons for youth homelessness or unstable housing reported by more than half of youth surveyed include: (1) they experienced financial hardship, including intergenerational poverty, family eviction, job loss, and lack of skills/education to obtain employment; (2) they experienced abuse, neglect, abandonment, and/or family conflict and violence; and/or (3) they were kicked out of their family's home for various reasons, including rejection due to gender identity and/or sexual orientation. • Having experienced abuse and neglect as a reason for youth homelessness was significantly correlated to other reasons for youth homelessness including: family

and youth substance abuse and mental health issues; death of their caregiver; youth leaving other housing with no place to stay; youth being kicked out of their family's home; and youth being released from incarceration with nowhere to go.

- Youth who identified as **LGBTQ** were significantly more likely to be homeless because they were **kicked out of their family home** or due to their **own substance abuse or mental/physical health issue**, compared to youth surveyed who identified as heterosexual/cisgender.
- The main barrier that has prevented 86% of survey respondents from having stable or permanent housing is a **lack of sufficient income**, either from not having employment or not earning enough money from current employment to cover housing costs. Other common barriers are related to accessing housing because respondents have **no or poor rental history** (including bad credit history) or they **cannot find a place to affordably rent**.

Concerns with Current Living Situation

- A main concern with their current living situation, shared by 37% of respondents, was the **lack of permanency**, fearing that they could be kicked out at any time. 32% were concerned about **poor housing conditions**. 31% expressed concerns for their **personal safety**.
- Youth who identified as **LGBTQ** were significantly more likely than youth who identified as heterosexual/cisgender to express **concerns for their personal safety** in their current living situation (55% vs 46%), specifically **fear of being sexually assaulted** (24% vs 7%). This finding is consistent with **national data** on the unique concerns facing LGBTQ homeless youth (see Morton, et al, 2018; USHIC, 2018).
- Service providers interviewed expressed **similar concerns** about the unstable living situations of youth they serve. Their young age and developing brains make them especially vulnerable to others who will take advantage of their situations.

Service and Benefits Participation of Homeless and Unstably Housed Youth

Area

Key Findings: Service and Benefits Participation

Services Used to Meet Basic Needs

- Services used in the past 90 days to meet basic needs included: **transportation** (67%) (e.g., access to a bus pass); access to **food items** (57%) (e.g., food boxes, snack packs, groceries); access to **toiletries** (53%) (e.g., body care products); receipt of **clothing items** (36%); and **meals** at community places (31%).
- **Focus group youth** generally reported that they are able to meet their food needs through **snack packs, community food pantries, and food boxes**.
- Regarding housing services used in the past 90 days, 29% have utilized **longer-term housing services** to stay for 6+ months; 28% stayed in **short-term shelter** or **emergency housing**; and 23% received **financial assistance** to get into housing.

Services Used to Meet Health Care Needs

- 74% of respondents receive **Medicaid** through **AHCCCS**.
- Of health care services used in the past 90 days, 40% utilized **medical** services; 28% utilized **behavioral health** care services; and 12% utilized **dental care** services.
- 33% reporting getting medical care from **Urgent Care** and 29% from the **Emergency Room**.
- Respondents who have **Medicaid/AHCCCS** were significantly more likely than those who do not have this insurance to report using an **Urgent Care** (39% vs 18%) or the **ER** (34% vs 13%) for health care.

Engagement in Education and Employment

- 45% of youth surveyed are currently enrolled in an **education program** (such as classes to complete a GED or high school) and 11% are enrolled in a **formal job training** program for a profession.
- 24% of respondents are **currently employed**.

Income and Benefits

- The majority of youth - 40% - receive money from **family or friends** as a source of income, 26% earn money from **odd or non-traditional jobs**, and 23% earn money from **selling personal belongings**.
- The **monthly income** of young people surveyed ranges from **\$0 to \$1,900**, with an **average monthly income of \$413**, and **median monthly income of \$230**.
- 65% receive **Food Stamps/SNAP**. Other common benefits received by youth who meet program eligibility criteria include **WIC** (16%), **money or stipend** from an agency (15%), and **free or reduced-price lunch** (10%).

Unmet Service Needs and Barriers to Accessing Services

Area

Key Findings: Gaps and Barriers to Accessing Services

Unmet Basic Needs

- **Housing** - Most informants interviewed said that a lack of housing available for youth and young adults was a primary unmet need in Tucson/Pima County. Interviewees reported the need to have multiple housing options for youth, youth friendly shelters, and LGBTQ youth-friendly shelters.
- **Food** - 29% of youth surveyed don't get enough to eat. Barriers to accessing food include 85% didn't have enough money to buy food; 47% use up SNAP benefits before the end of the month; 43% don't have transportation to access places to buy food; and 30% don't know where free food is available.
- **Child Care** - 30% of youth surveyed are pregnant (6%) and/or parenting (27%) and need access to child care. 24% of pregnant and parenting youth said they needed child care in the past 90 days but could not get it. 45% of pregnant and parenting youth said lack of childcare keeps them from achieving their employment and education goals.
- **Other gaps** observed in needed services were access to **laundry facilities** (19%), **transportation** (13%), **clothing** items (12%), and **toiletry** products (10%).
- **Focus group youth** and **service providers** reported consistent unmet needs of homeless and unstably housed youth.

Unmet Health Care Needs

- 52% of respondents reported having have unmet **dental care** needs; 33% have unmet **medical care** needs; and 26% have their **behavioral health care** needs.
- Unmet health care needs in the last 90 days include: **dental** (18%), **medical** (11%), **vision/eye care** (10%), **sexual health** (8%), and **behavioral health** (7%).

Unmet Education and Employment Needs

- Over half (56%) of survey respondents **ages 18-24 have less than a high school education**. Only 38% of young adults **ages 18-24 are currently enrolled in an education program**, such as classes to complete a GED or high school.
- 69% of respondents are **looking for work**.
- The highest percentage of respondents who needed a service related to education and employment but could not get it at least one time in the past 90 days was for assistance in **obtaining identifying documents** (16%).
- Other gaps noted in needed services in the past 90 days include **help finding a job** (10%), access to **job training programs** (10%), and classes to complete a **GED or high school education** (8%).

Gaps in Income and Benefits

- 20% of youth surveyed reported that they had **no sources of income**.
- Possible **gaps identified in benefits utilization** include: **Hispanic/Latinx youth** were significantly less likely than non-Hispanic/Latinx youth to report receiving **Medicaid/AHCCCS** (67% vs 82%). Only 39% of **pregnant and parenting youth** surveyed reported receiving **WIC**, a program for which they are eligible.

Barriers to Meeting Needs

- **Lack of Income** - 86% reported no steady income as primary reason for not having permanent/stable housing; 85% don't have enough money to buy food; and 40% don't get needed medical care because it is too expensive.
- **Lack of Transportation** - 46% did not have transportation to get to a health care provider's office; 43% said lack of transportation was a barrier to getting adequate food.
- **Lack of Awareness** - 30% of youth surveyed reported that they don't know where free food is available; 29% don't know where to get free or low-cost health care; 18% don't know how to set up a health care appointment; 9% don't know how to apply for government programs that provide medical care.

Youth Supportive Networks

Area **Key Findings: Developmental Assets and Positive Influences**

Supportive Networks

- 71% of youth surveyed reported that they have one or more **professional service providers** with whom they could talk to about important matters or turn to for help.
- Respondents who are **18-24** were significantly more likely than those under 18 years (75% vs 47%) to have one or more **professional support persons**.
- **LGBTQ** were significantly more likely to report have one or more **professional support persons** (85% vs 68%) than heterosexual and cisgender youth.
- A combined 69% have one or more **family members** as support persons, 68% have one or more **friends their age** to turn to, and 62% have one or more **older friends** to turn to as supportive networks.
- Young respondents ages **13-17 years** were significantly more likely than those over age 18 (90% vs 64%) to have one or more **friends their age** that they can talk to about important matters or turn to for help.

Exhibit 13 summarizes the recommendations and innovative ideas put forth by youth and service providers as strategies that TPCH should consider to prevent and end youth homelessness. These areas are consistent with

those recommended by the U.S. Interagency Council on Homelessness (USICH, 2013) in their *Federal Framework to End Youth Homelessness*.

Exhibit 13. Summary of Recommendations and Innovative Ideas to Prevent and End Youth Homelessness

Area	Recommendations and Innovative Ideas to Improve Local Strategies to Prevent and End Youth Homelessness
Identify Strategies to Reduce Gaps and Barriers to Youth Meeting Their Needs	<ul style="list-style-type: none"> • Identify strategies to increase youth knowledge of how to access and utilize community services to meet basic and health care needs. • Identify strategies to improve youth access to and use of transportation. • Identify strategies to more effectively engage youth in education opportunities. • Identify strategies to increase youth income earning opportunities. • Identify strategies to ensure youth access all benefits to which they are eligible.
Enhance Service Provision and Engagement	<ul style="list-style-type: none"> • Co-locate services to better engage and help youth navigate resources that meet their needs. • Utilize youth peer mentors to support programming and outreach of homeless youth serving agencies. • Consider offering an incentive for youth to stay in touch to update their contact information, which could help pay for phone service. • Determine strategies other than the PIT count to understand the extent of youth homelessness.
Create youth and LGBTQ-affirming services and Safe Spaces	<ul style="list-style-type: none"> • Provide direct housing to LGBTQ homeless youth. Ensure housing is youth-centered and LGBTQ-affirming, offering a Safe Space. • Get the word out about available resources through social media. • Provide youth services in a non-clinical, comfortable setting.
Provide Community Staff with Training on Youth Specific Skills	<ul style="list-style-type: none"> • Provide staff of youth serving agencies with more formalized training or information on how to identify and assist homeless youth. • Integrate assessment/referral for reproductive health needs into the intake process for youth. • Ensure staff are compassionate, appropriately trained, and experienced in working with youth; staff should be transparent with youth about what services look like and their availability.
Improve the Response of Schools to Homeless Youth	<ul style="list-style-type: none"> • Train school registration staff in possible indicators of homelessness. • Identify homeless youth as quickly as possible. Youth are then referred to a designated staff member for a private conversation to determine their needs.
Provide Skill Development Opportunities for Youth	<ul style="list-style-type: none"> • Engage youth more directly in leading and implementing strategies, such as elevating the work of the TPCH Youth Action Committee. • Offer youth training in life skills and employment training. • Provide youth with skills to navigate the system and work with different agencies to get what they need – being persistent, self-advocating, etc.
Suggestions from Focus Group Youth	<ul style="list-style-type: none"> • Promote longer term results through strategies such as case management. • Provide resources to help youth who are aging out of program/service to make smooth transition to other assistance. • Don't make program requirements too strict; encourage students who show improvement in academic achievement with additional monetary assistance. • Ensure that agencies that provide monetary assistance to youth do so in a timely

- manner.
- Be patient with youth and try to understand the situation that they are going through.
- Refer youth to resources or provide them with a resource list. If youth are on street, take them to get needed resources, such as clothes.

Recommendations from 2019 Gaps Analysis Report

This strategic planning effort has been informed by many experts and information from recent reports focused on preventing youth homelessness. Local leaders involved in this work participated in “lessons learned” webinars with other community leaders from Austin, TX, Seattle, WA, Chicago, IL and San Francisco, CA. Of particular note is the work of OrgCode Consulting, Inc. (2019), a firm contracted by Our Family Services in 2018 to conduct a youth-specific, gaps analysis within the Pima County/Tucson CoC. This gaps analysis occurred within two distinct, but interconnected domains - services and housing. Exhibit 14 shows the housing estimates put forth in the Gaps Analysis report (OrgCode Consulting, 2019) for permanent supportive housing and rapid re-housing interventions related to youth homelessness.

Exhibit 14. Housing Estimates from the 2019 Gaps Analysis Report

	2020	2021	2022	2023	2024	TOTAL
PERMANENT SUPPORTIVE HOUSING ESTIMATES						
Maintaining the Status Quo	6	7	6	7	9	35
Marginal Improvement	9	11	11	11	13	55
Resolving Homelessness	13	14	15	16	19	77
RAPID RE-HOUSING ESTIMATES						
Maintaining the Status Quo	14	11	12	15	16	68
Marginal Improvement	13	15	17	19	16	80
Resolving Homelessness	22	31	29	21	18	121

The following are the recommendations from the 2019 Gaps Analysis that were influential in this strategic planning effort:

- **Ensuring Service Delivery is Grounded in Best and Promising Practices.** Among these practices are Housing First, Trauma Informed Care, and Positive Youth Development, which includes having young people with lived experience be part of the development, design, and leadership of the programs from which they receive services.
- **Increase Prevention and Diversion.** These should be resourced interventions targeted to reduce the inflow of youth coming into the homelessness response system. It’s important to look intersectionally to identify young people in the child welfare and juvenile justice systems who are at risk

of becoming homelessness, as well as identify opportunities for family mediation and reunification, if it is safe and appropriate, for youth who do become homeless.

- **Increasing Emergency Shelter and Rapid Re-Housing for Youth and Young Families.**

At the time of analysis there were zero Rapid Re-Housing resources for youth reported in the data that was made available, although there are now 17 RRH for youth which came on line in July of 2018.

- **Decreasing Recidivism.**

At the time of analysis, it was found that 29% of all households housed return to homelessness. At the back end of services, all youth moving into housing should be provided with robust, evidence-based, developmentally and culturally appropriate housing stability support services which include case management and other wrap-around services to reduce the chance of youth returning to homelessness in the future.

Youth Needs Assessment Results/Recommendations:

Engage youth more directly in leading and implementing strategies, such as elevating the work of the TPCH Youth Action Committee.

71% of youth surveyed have one or more professional service providers with whom they could turn to for support.

Provide youth with skills to navigate the system and work with different agencies to get what they need – being persistent, self-advocating, etc.

Provide staff of youth serving agencies with more formalized training or information on how to identify and assist homeless youth.

Utilize youth peer mentors to support programming and outreach of youth serving agencies.

TPCH Youth Homelessness Strategic Plan

Goals, Objectives, and Suggested Benchmarks

Goal 1: Youth Voice and Action – To engage youth more directly in leading and implementing strategies.

Objectives

- 1.1 Elevate the *Youth Action Committee* to establish the *Young Adult Housing Commission* charged with working with local government to advise on issues related to youth experiencing homelessness or housing instability¹.
- 1.2 Co-develop and implement opportunities for youth leadership utilizing the Youth Participatory Action Research (YPAR) model.
- 1.3 Identify and implement with youth service/learning projects to gain skills and decrease isolation.
- 1.4 Design and implement strategies to engage youth in civic, social, and educational activities that foster community connectedness.

Suggested Benchmarks

Establish a common assessment of the lived experience of young adults involved in homeless-serving systems, measuring indicators such as:

- Satisfaction with housing/shelter quality, security of tenure, affordability and safety;
- Satisfaction with case management; supportive services received; access to supports to address diverse needs within homeless system and mainstream public systems (addiction, trauma, mental and physical health issues, employment, education, etc.);
- Satisfaction with the housing placement, stabilization and aftercare supports; and
- Perception of quality of life, including sense of belonging, participation in community activities, connection with friends and family.

¹A leadership group comprised solely of persons 25 years or under and led by representatives who are self-nominated or identified by service agencies who work with vulnerable sub-populations including youth and young adults who are homeless or parenting, LGBTQ, minority, and other young adults at risk of homelessness or living in unstable housing situations. Per diem, transportation, childcare and meals provided to allow them to lead / participate.

Goal 2: Housing – To improve housing permanency and decrease repeat homelessness among youth.

Objectives

- 2.1 Develop adaptable housing approaches that can be tailored to the individual needs of youth.
- 2.2 Establish dedicated, low-barrier shelter and resources for people ages 18-24.
- 2.3 Collaborate with existing shelter providers to address barriers to safety and ensure a youth-affirming environment.
- 2.4 Identify the key factors that lead to returns to youth homelessness and implement solutions.
- 2.5 Identify and implement strategies to increase youth access to and use of mainstream housing subsidies (public housing, Section 8 voucher programs, etc.)
- 2.6 Prioritize for new funding projects that provide permanent housing (PSH, RRH) for youth.
- 2.7 Develop a system-wide approach to support family reunification as alternative to and/or prioritized outcome of housing supports.
- 2.8 Assess current data on effectiveness of coordinated entry strategies and identify areas for improvement.

Youth Needs Assessment Results/ Recommendations:

Create youth- and LGBTQ-affirming services and Safe Spaces.

Provide direct housing to LGBTQ homeless youth.

Ensure housing providers are appropriately trained in working with youth.

Provide youth services in a non-clinical, comfortable setting.

Promote longer term results through strategies such as case management.

Suggested Benchmarks

- Number of youth who gain access to and use mainstream housing subsidies;
- Number of youth who maintain stable housing to prevent homelessness;
- Number of youth who obtain permanent unsubsidized housing;
- Number of shelters that make changes to reduce barriers to safety and ensure a youth-affirming environment;
- Number of youth who report improvements in shelter and housing options and availability; and
- Number of additional housing units and beds in place annually that are available for and utilized by youth.

Goal 3: Youth Income Generation – To increase youth income earning opportunities.

Objectives

- 3.1 Develop and implement a community-wide strategy to increase youth access to and use of mainstream benefits.
- 3.2 Forge partnerships with local workforce development programs, business owners, nonprofits, and elected officials to increase youth access to and use of mainstream employment and workforce development resources (i.e., AZ@Work Pima County One-Stop Centers, WIOA services, Arizona Department of Economic Security employment programs, local job development services).
- 3.3 Collaborate with existing and/or develop new opportunities for short-term, immediate employment for youth.

Suggested Benchmarks

- Number of youth who gain access to benefits for which they are eligible (SSI, SSDI, SNAP, AHCCCS);
- Number of youth who access and use mainstream employment and workforce development resources;
- Number of youth who obtain short-term, immediate employment; and
- Number of youth who obtain longer-term employment.

Youth Needs Assessment Results/Recommendations:

Identify strategies to increase youth income earning opportunities and ensure youth access all benefits for which they are eligible.

Offer youth training in life skills and employment training.

Provide youth with skills to navigate the system and work with different agencies to get what they need – being persistent, self-advocating, etc.

86% reported no steady income as primary reason for not having permanent/stable housing; 85% don't have enough money to buy food; and 40% don't get needed medical care because it is too expensive.

A gap identified in health insurance access is that 26% of youth surveyed are not enrolled in Medicaid/AHCCCS, when they are likely eligible for this program. Hispanic/Latinx youth were significantly less likely than non-Hispanic/Latinx youth (67% vs 82%) to report receiving Medicaid/AHCCCS.

Only 39% of pregnant and parenting youth surveyed reported receiving WIC, a program for which they are eligible.

Goal 4: Youth Education – To more effectively engage youth in education.

Objectives

- 4.1 Assess effectiveness of current referral procedures to the education sector serving youth.
- 4.2 Partner with post-secondary educators to better address the unique needs of students experiencing homelessness or housing instability.
- 4.3 Increase cross-system collaboration with the education sector to better identify and support youth experiencing homelessness or housing instability.
- 4.4 Partner with GED and high school alternative programs to increase youth access to and use of these programs.
- 4.5 Assess and implement opportunities to expand or replicate current incentive programs for youth educational attainment (student stipends, graduation incentives, etc.).

Suggested Benchmarks

- Number of youth who enroll in and complete high school, GED classes, or higher education;
- Number of youth who complete vocational training programs;
- Extent that current incentive programs for youth educational attainment are expanded or replicated;
- Number of youth who obtain employment; and
- Changes implemented by school systems to identify and better meet the needs of homeless or unstably housed youth.

Youth Needs Assessment Results/ Recommendations:

More effectively engage youth in education opportunities.

56% of youth survey respondents ages 18-24 have less than a high school education. And only 38% of young adults ages 18-24 are currently enrolled in an education program, such as classes to complete a GED or high school.

School registration staff should be trained in possible indicators of homelessness.

School systems should better identify homeless youth as quickly as possible. Youth are then referred to a designated staff member for a private conversation to determine their needs.

Goal 5: Transportation – To improve access to and use of transportation.

Objectives

- 5.1 Explore and promote alternative modes of transportation for youth experiencing homelessness or housing instability.
- 5.2 Partner with local transit providers and transportation planners to address transportation challenges of youth experiencing homelessness or housing instability.

Suggested Benchmarks

- Number of youth who obtain bus passes; and
- Number of youth who have access to public transportation or reliable modes of transportation;
- Number and types of partnerships formed with local transit providers and transportation planners; and
- Changes implemented by transportation service providers to reduce barriers to youth accessing transportation services.

Youth Needs Assessment Results/Recommendations:

Identify strategies to improve youth access to and use of transportation.

67% of youth surveyed reported using transportation services (e.g., access to a bus pass) in the past 90 days to meet their needs.

However, lack of transportation was cited as a reason for youth not meeting their basic needs: 46% did not have transportation to get to a health care provider's office; 43% said lack of transportation was a barrier to getting adequate food.

Goal 6: Health Care – To increase access to and use of medical, behavioral, and dental care services.

Objectives

- 6.1 Develop and implement an awareness and education initiative to increase youth knowledge of how to access and utilize community health care services.
- 6.2 Implement strategies to ensure that all youth have health coverage.
- 6.3 Partner with the behavioral health sector to reduce barriers to accessing and utilizing services.
- 6.4 Partner with the medical community to increase access to free or low-cost dental care.

Suggested Benchmarks

- Number of youth who gain access to health coverage;
- Number of youth who receive medical, behavioral health, and dental care services;
- Number of youth who report improved knowledge in how to access and utilize community health care services; and
- Changes implemented by health care providers to reduce barriers to youth accessing needed services.

Youth Needs Assessment Results/Recommendations:

Identify strategies to increase youth knowledge of how to access and utilize community services to meet health care needs.

Provide youth with skills to navigate the system and work with different agencies to get what they need – being persistent, self-advocating, etc.

52% of youth survey respondents reported having have unmet dental care needs; 33% have unmet medical care needs; and 26% have their behavioral health care needs.

Barriers to receiving needed health care services include: 40% feel it is too expensive; 29% don't know where to get free or low-cost health care; and 18% don't know how to set up a health care appointment.

Integrate assessment/referral for reproductive health needs into the coordinated entry intake process for youth.

Ensure service providers are compassionate, appropriately trained, and experienced in working with youth.

Goal 7: Homelessness Prevention – To better identify and immediately assist youth at risk of experiencing homelessness.

Objectives

- 7.1 Establish a flexible resource pool designated for diversion and prevention of youth homelessness or housing instability.
- 7.2 Partner with public prevention resources, such as community action agencies and Emergency Solutions grantees, to improve accessibility and reduce barriers for youth.
- 7.3 Develop and implement an initiative to support youth-serving agencies (e.g., juvenile justice, child welfare, schools) to better identify and immediately assist youth at risk of experiencing homelessness or housing instability.
- 7.4 Partner with youth serving institutions (e.g., juvenile and adult justice, child welfare, hospitals, and crisis services) to create and implement formal discharge plans.

Suggested Benchmarks

- Number and type of resources designated for diversion and prevention of youth homelessness or housing instability;
- Number of youth who exit to permanent housing that receive follow-up/aftercare services to prevent recurring homelessness;
- Number of youth who return to homelessness;
- Number of youth who are prevented from becoming homeless or unstably housed; and
- Changes implemented by youth serving agencies to prevent homelessness.

Youth Needs Assessment Results/Recommendations:

Provide staff of youth-serving agencies with more formalized training or information on how to identify and assist homeless youth.

Ensure staff are compassionate, appropriately trained, and experienced working with youth; staff should be transparent with youth about what services look like and their availability.

Train school registration staff in possible indicators of homelessness.

Identify homeless youth as quickly as possible. Youth are then referred to a designated staff member for a private conversation to determine their needs.

Provide resources to help youth who are aging out of program/service to make smooth transition to other assistance.

Provide youth with skills to navigate the system and work with different agencies to get what they need – being persistent, self-advocating, etc.

Goal 8: Advocacy – To increase awareness and promote public policy that positively impacts youth experiencing homelessness or housing instability.

Objectives

- 8.1 Implement fundraising and policy-making strategies to expand youth-dedicated prevention, shelter, and permanent housing resources.
- 8.2 Design and implement an initiative to increase awareness and understanding of youth experiencing homelessness or housing instability in Pima County.
- 8.3 Develop a coordinated approach to inform and influence public policy.
- 8.4 Strengthen TPCH partnerships with statewide and national youth advocacy efforts.
- 8.5 Provide advocacy training for youth and adult stakeholders.

Youth Needs Assessment Results/ Recommendations:

Provide staff of youth serving agencies with more formalized training or information on how to identify and assist homeless youth.

Provide youth with skills to navigate the system and work with different agencies to get what they need – being persistent, self-advocating, etc.

Suggested Benchmarks

- Number of new partners involved with TPCH focused on youth homelessness;
- Number and types of fundraising and policy-making strategies to expand youth-dedicated prevention, shelter, and permanent housing resources;
- Number of policy-makers that report increased awareness and knowledge of issues related to youth homelessness;
- Number of successful policy initiatives;
- Number of advocacy trainings provided for youth and adult stakeholders; and
- Number of participants who report change in knowledge after participating in awareness raising activities.

Goal 9: Data Systems – To accurately report on the number and characteristics of youth that are experiencing homelessness and housing instability.

Objectives

- 9.1 Finalize and implement a maintenance plan for the youth “by-name” list.
- 9.2 Expand HMIS coverage to include additional non-mandated programs for youth.
- 9.3 Improve consistency of appropriate VI-SPDAT tool usage for youth (i.e., TAY-VI-SPDAT, F-VI-SPDAT, PR-VI-SPDAT.)
- 9.4 Obtain technical assistance to improve the accuracy of annual homeless youth count (PIT) count².

Suggested Benchmarks

- Increase in system capacity to effectively manage a “by name” list;
- Number of new partners involved with HMIS;
- Establish baseline and monitor improvements to VI-SPDAT report accuracy; and
- Establish baseline and monitor improvements to annual homeless youth count (PIT) count.

Youth Needs Assessment Results/Recommendations:

Determine strategies other than the PIT count to understand the extent of youth homelessness.

Of the 13 service providers interviewed, most felt that youth homelessness is a bigger issue than currently captured in the PIT count data.

Most informants also had limited information about the extent of youth homelessness in rural areas.

Example Performance Monitoring Matrix

Exhibit 15 provides an example performance monitoring matrix that TPCH could utilize to measure the performance of efforts to prevent and end youth homeless and unstable housing. This matrix includes performance monitoring at the population level, program/systems level, and youth level. TPCH can adapt this matrix in accordance with their action plan, incorporating applicable benchmarks that are presented throughout this Strategic Plan.

² Such as <https://www.urban.org/sites/default/files/publication/23851/412872-Youth-Count-Process-Study.PDF> for recommendations to improve PIT efforts.

Exhibit 15. Example Performance Monitoring Matrix at the Population, Program, and Youth Level

Population Level Outcome – Thriving Youth and Young Adults	
<ul style="list-style-type: none"> • Decrease rates of homeless and unstably housed youth to functional zero by 2024. • Decrease rates of families, school-aged youth, and young adults at risk of homelessness. • Decrease rates of youth and young adults not working and not in school (Opportunity Youth). • Decrease number of sheltered families, youth, and young adults returning to homelessness. 	
Program/Systems Level Performance Measures – Adherence to Quality Standards	
<ul style="list-style-type: none"> • Number and type of high-quality prevention / intervention programs. • Number and types of housing programs available for youth. • Number and type of resources designated for diversion and prevention of youth homelessness or housing instability. 	
Youth Level Performance Measures	
Engagement	Number of youth involved in leadership roles for system change.
Housing	Number of youth who gain access to safe, stable housing.
Income	Number of youth who gain employment; number of youth who earn adequate income to meet basic needs.
Education	Number of youth who complete education programs.
Transportation	Number of youth with access to dependable transportation.
Health Care	Number of youth with immediate access to needed health care services; number of youth who report improved well-being.
Prevention	Number of youth who exit to permanent housing that receive follow-up/aftercare services to prevent recurring homelessness;
Advocacy	Number of youth who participate in advocacy training and activities.
Data Systems	Number of youth accurately assessed and tracked through HMIS and the Coordinated Entry system.

References

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Appendices

Appendix A. Key Federal Terms and definitions of homelessness among youth

Homelessness is defined in several different ways. Below are federal definitions and key terms that are used when talking about youth and young adults who are experiencing homelessness or unstable housing ([USICH, 2018](#)). For the purposes of TPCH's Coordinated Entry, a youth who is unstably housed is defined as a young adult, between the ages of 18-24, who is unaccompanied by a parent, prior guardian, or other individual who has responsibility for their well-being. While they do not meet the HUD Category 1 (literally homeless) or 4 (fleeing domestic violence) definition of homelessness, they are unstably housed as evidenced by couch hopping/surfing, episodic homelessness, inability to maintain their current housing (imminent risk of homelessness), or by unsafe living situations (i.e. overcrowded living situations, trafficking situations).

U.S. Department of Education

Subtitle VII-B of the **McKinney-Vento Homeless Assistance Act** defines *homeless children and youths* as follows (42 U.S.C. § 11434a(2)). The term "*homeless children and youths*"—

- A. means individuals who lack a fixed, regular, and adequate nighttime residence (within the meaning of section 11302(a)(1) of this title); and
- B. includes—
 - i. children and youths who are sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason; are living in motels, hotels, trailer parks, or camping grounds due to the lack of alternative adequate accommodations; are living in emergency or transitional shelters; are abandoned in hospitals; or are awaiting foster care placement;
 - ii. children and youths who have a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings (within the meaning of section 11302(a)(2)(C) of this title);
 - iii. children and youths who are living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings; and
 - iv. migratory children (as such term is defined in section 6399 of title 20) who qualify as homeless for the purposes of this subtitle because the children are living in circumstances described in clauses (i) through (iii).

The term "*unaccompanied youth*" includes a youth not in the physical custody of a parent or guardian (42 U.S.C. § 11434a(6)).

U.S. Department of Housing and Urban Development (HUD)

HUD defines homelessness for their program into four categories. The categories are:

- **Category 1 - Literal Homelessness:** Individuals and families who live in a place not meant for human habitation (including the streets or in their car), emergency shelter, transitional housing, and hotels paid for by a government or charitable organization.
- **Category 2 - Imminent Risk of Homelessness:** Individuals or families who will lose their primary nighttime residence within 14 days and has no other resources or support networks to obtain other permanent housing.
- **Category 3 - Homeless Under Other Statutes:** Unaccompanied youth under 25 years of age, or families with children and youth, who do not meet any of the other categories but are homeless under other federal statutes, have not had a lease and have moved 2 or more times in the past 60 days, and are likely to remain unstable because of special needs or barriers.
- **Category 4 - Fleeing Domestic Violence:** Individuals or families who are fleeing or attempting to flee domestic violence, dating violence, sexual assault, or stalking and who lack resources and support networks to obtain other permanent housing.

Runaway and Homeless Youth Act, U.S. Department of Health and Human Services

- The Runaway and Homeless Youth (RHY) Act (42 USC 5701 § 387) defines “homeless youth” as individuals who are not more than 18 years of age if seeking shelter in a Basic Center Program, or not more than 21 years of age or less than 16 years of age if seeking services in a Transitional Living Program, and for whom it is not possible to live in a safe environment with a relative, and who have no other safe alternative living arrangement.

Appendix B. Overview of the Collective Impact Approach

As first presented in the Stanford Social Innovation Review (2011), collective impact is an approach to community level change that has proven effectiveness across the country on issues of homelessness in communities³. It includes five key elements shown in the table below: (1) A common agenda for change, including a shared understanding of the problem and a joint approach to solving it through agreed upon actions; (2) Consistency in collecting data and measuring results across all the participants to ensure alignment and accountability; (3) A plan of action that outlines and coordinates mutually reinforcing activities for each participant; (4) Open and continuous communication across the many players to build trust, assure mutual objectives, and create common motivation; and (5) A backbone organization(s) with staff and a specific set of skills to serve the entire initiative and coordinate participating organizations and agencies. The use by TPCH of this approach can enhance community partnerships and better integrate systems so that services are aligned, measured for effectiveness, and continuously improved. Immediate next steps that the TPCH should take to utilize a Collective Impact approach include:

- Assessing the readiness of TPCH and partners to commit to a Collective Impact approach.
- Establishing a backbone organization to serve as a neutral convener and provide staff support.
- Establishing a Steering Committee with selection of common agenda⁴ and Work Groups.

COLLECTIVE IMPACT ELEMENT	WHY?	HOW?
Common Agenda	All participants have a common agenda for change including a shared understanding of the problem and a joint approach to solving it through agreed upon actions.	Partners use data to define the problem and create a common agenda (high-level) that can be translated into agreed upon goals, strategies, and measures carried out by the Work Groups.
Mutually Reinforcing Activities	A plan of action that outlines and coordinates mutually reinforcing activities for each participant.	Work Groups develop an Action Plan to indicate how community resources, programs, and systems will be aligned with each objective and goal.
Shared Measurement	Collecting data and measuring results consistently across all the participants ensures shared measurement for alignment and accountability.	Partners and Work Groups agree upon community level data that will be used to monitor performance, track progress towards outcomes, and help Work Groups make course corrections.
Continuous Communication	Open and continuous communication is needed across the many players to build trust, assure mutual objectives, and create common motivation.	Partners, Work Group members, and Backbone staff communicate internally through online platforms, in-person and virtual meetings, and email communications. Partners also

³ For more information about Collective Impact, visit https://ssir.org/articles/entry/collective_impact.

⁴ Common agenda includes agreement by TPCH on an operationalized definition of “Functional Zero” for this community.

communicate with general members (those not affiliated with a Work Group but interested in the work) and external stakeholders (community members, policy makers, etc.), to keep them apprised of priorities, goals, objectives, and progress.

Backbone Organizations

A [backbone organization](#) serves the entire initiative and coordinates participating organizations and agencies.

An independent backbone staff provides facilitation support to the Steering Committee and Work Groups.