FAMILY INTERVENTION FOR UNACCOMPANIED HOMELESS YOUTH

Family conflict is a major contributor to youth homelessness. The National Alliance to End Homelessness (Alliance) estimates that each year 550,000 unaccompanied youth run away or experience homelessness for a week or longer. Approximately 380,000 of these youth are under the age of 18. A comprehensive response is critically needed to meet the needs of homeless youth who are minors. Such a response can be informed by the knowledge of effective approaches that have been developed by practitioners on the frontline of serving homeless youth under 18.

PRACTICE KNOWLEDGE PROJECT

The Practice Knowledge Project is an initiative of the National Alliance to End Homelessness, and national partners, the U.S. Interagency Council on Homelessness (USICH) and Funders Together to End Homelessness, to capture information from diverse homeless youth practitioners about the strategies they are finding work to prevent and end homelessness among youth.

With generous support from the Raikes Foundation and Melville Charitable Trust, the Alliance and national partners convened practitioners to examine effective responses to youth homelessness. The first in-person meeting was held in October 2014 and explored what providers have learned from their many years of experience addressing the needs of unaccompanied minors. A second in-person meeting was held in April 2015 and explored strategies to help youth over the age of 18 avoid and escape homelessness. Findings from these two convenings have been published.

Following up on these in-person sessions, conference calls were held with urban, rural and suburban practitioners to examine in greater depth some of the strategies identified as holding particular promise to end youth homelessness. On such strategy was family intervention, and

the Alliance and its national partners subsequently convened a discussion with homeless youth providers utilizing a wide variety of family intervention strategies, as well as a prominent family intervention researcher. The findings were documented and reviewed by participants, resulting in this paper.

**WHAT IS FAMILY INTERVENTION?**

Family intervention is an umbrella term that encompasses many different programs and practices in the youth homelessness field (See Text Box 1). Fundamentally, family intervention is focused on maintaining (or rebuilding) a connection between at-risk and homeless youth and their families. Family intervention services engage the youth and his or her family in the following ways:

- **PREVENTION:** Services that are designed to intervene in a family crisis before a young person leaves home.
- **REUNIFICATION:** Services that help a young person return to living with family after leaving home.
- **RECONNECTION:** Services to rebuild relationships but which may or may not result in a young person returning home.

**TEXT BOX 1: Family Intervention Services**

Family intervention services can encompass many different activities with youth and their parents, including but not limited to the following:

- family and individual therapy;
- conflict mediation and resolution services;
- respite care;
- parent education about adolescent development;
- financial assistance;
- assessment of family issues;
- referrals to community-based supports; and
- building interpersonal communication skills.

This paper focuses on lessons providers have learned as they have undertaken family intervention with youth and their families. While it primarily discusses family intervention with regard to a youth’s family of origin, it is important to note that family intervention can also include family finding (connecting youth to extended family) and helping youth develop families of choice. For youth who cannot safely return home or reconnect with families of origin, the development and strengthening of permanent connections to extended family, chosen family, and other caring adults are critical components of ending youth homelessness.
LESSONS LEARNED

Learning what works and what does not in family intervention is vital to ending youth homelessness, and providers shared several important lessons based on their many years of experience.

Family intervention is almost always appropriate

Providers reported that family intervention is almost always an appropriate intervention for homeless youth as long as reconnecting with family is safe. This is true even when the youth is older and when a return home is not possible. Young people often want help to reconnect to their families, and provider experience confirmed research, which has indicated that healthier family functioning and access to family support is associated with better outcomes for youth. As long as parents and youth are willing, practitioners felt that services to help families remain intact or help reunify unaccompanied youth with their families should be offered.

Providers stressed that relationships between families and youth in crisis are usually complicated, and that staff should not automatically see the family as the primary cause of the youth’s homelessness. Rather, while prioritizing safety, the default approach should be to see families as “value added” and a major part of the solution, especially in the long term.

They noted that it is important for staff to be well trained in order to take this approach. Staff need the tools not just to advocate for the youth but to work with the youth as part of a family system. Training may include information about providing trauma-informed care, harm reduction strategies, active listening, and information about adolescent development.

Practitioners also reported that families and youth sometimes seem resistant to services. They felt that this is best addressed by examining the organization’s service approach to ensure that it meets the perceived needs of both family and youth (rather than assuming that the parties do not wish to engage). They also noted that family and youth norms and values might differ from those of the providers and staff, making cultural competence essential.

Early intervention is critical

Providers reported that the earlier a family is engaged – ideally before the young person has left home or very soon in their first runaway episode – the more likely it is that family intervention will succeed. Providers’ experiences have taught them that some youth seem to be particularly vulnerable to leaving home, including:
• young people caught in the middle of contentious divorces who experience significant shuttling between households;
• young people in families with histories of housing instability and homelessness;
• Lesbian, Gay, Bisexual and Transgender (LGBT) youth experiencing high levels of family conflict due to their sexual orientation or gender identity; and
• young people in families with histories of child welfare involvement.

Schools were seen as a key resource in identifying at-risk youth. Teachers, coaches, school social workers, and counselors are often the first to become aware of severe family problems affecting a young person. They can be engaged and trained as “first responders” to connect youth and their families with skilled counseling and service providers at the first sign of crisis.

Providers also identified the child welfare system as an important early referral source. Child welfare investigations, even if unsubstantiated, may reveal youth and families that could use assistance in navigating family conflict. Other referral partners included police officers who respond to domestic violence calls and mental health providers already working with a parent or a youth. The juvenile justice system can help to identify exiting youth who are candidates for preventative family intervention services, as family issues may be at the root of, or exacerbated by, their delinquency.

Finally, providers noted that emergency shelters also help prevent youth homelessness by identifying families that need assistance to stay together. This includes youth shelters, which can offer mediation services or counseling support (or referrals) to families that call inquiring about shelter for a young person. Shelters can also have frank conversations with young people about the realities of leaving home, the difficulties of getting an apartment, and the dangers of the streets – making the alternative of returning home more attractive.

Some providers are now actively advertising their services to these various institutions and systems (school, child welfare, corrections, and youth and family shelters) to facilitate early intervention. And, as local homeless assistance systems are developing coordinated assessment and entry systems, the providers noted that it would make sense to establish screening questions designed to identify at-risk youth, and trigger prevention interventions.
Family intervention models are wide-ranging and flexible

Practitioners employ a wide variety of family intervention models. They range from a ninety-minute preventative phone intervention to a thirteen-month intensive family acceptance model for child welfare-involved LGBT youth and their families.

One common theme identified by the providers was the importance of allowing families and youth to engage in services at a level at which they are comfortable, and allowing them to lead the intervention. Success is largely dependent on parent and youth openness to participating in services and building new skills.

Initiating the engagement of youth and families in services may take time, however. In some cases, families and youth may resist engagement because of cultural barriers, and parents may never agree to certain interventions. For example, some parents may view engaging in therapy as shameful or invasive and be reluctant to participate in family counseling services with youth. Developing the cultural competence of staff can improve their ability to understand the likely source of resistance and how it might be overcome.

Providers found that services should also be collaborative, with all parties interested in a positive outcome, and take place at a pace that is comfortable to family members. They reported the importance of families experiencing some successes early in the process – often achieved by providing an action plan with attainable steps. They also found it effective to provide aftercare services to support the family after the young person has returned

CASE STUDY: Family Reunification Services

Joe had recently become homeless following a short inpatient hospital stay necessitated by mental health concerns. He was unable to return home as his mother did not feel safe having him there. Joe was referred to Eva’s Family Reconnect Program after shelter staff noticed that he was often on the phone with his mother and was meeting with her in the neighborhood.

A Family Reconnect Program counselor met with Joe and they agreed to reach out to Joe’s mother to explore her interest in participating in family intervention services. His mother welcomed the offer and they began family counseling sessions that involved developing coping strategies and strengthening communication, along with psychoeducation to develop a better understanding of Joe’s mental health diagnosis. The staff also referred Joe to a supported employment program that helped him secure part-time work.

After eight counseling sessions, Joe and his mother indicated an interest in living together again. The program arranged for Joe to spend weekends at home, with the assurance that his bed at the shelter would be held for him. After three weekends at home the visits were extended until Joe was at home for five nights in a row. Counseling sessions then moved from the shelter to the family’s apartment.

The program staff remained involved after Joe moved back home, providing weekly counseling sessions in the family’s apartment, along with further referrals to community activities and resources. These helped Joe stay at home, maintain a positive relationship with his mother, and not return to homelessness.
home or the crisis has been prevented. This additional support can help parents and youth resolve issues that may arise, ideally using new skills that they have developed. Providers reported that in situations where there has been a long separation, a great deal of preparation may be needed before a youth returns home. While a return home may not be possible or desirable for all youth, these services can improve family functioning and support the youth’s long-term well-being and success.

The intensity and duration of family intervention work may vary depending on the length and depth of estrangement, the individualized needs of parents and youth, and their willingness to engage in services. For LGBT youth, this may include educating parents about the harmful impact of parental rejection (associated with higher rates of suicidal ideation, risky sexual practices, and drug use, among others) and about how greater levels of accepting behaviors can protect youth.

The qualifications of those providing services can also vary. Services may be offered by therapists or social work practitioners supervised by a marriage and family therapist. It is helpful to have practitioners with knowledge about both family systems and homelessness. One aspect of staff’s work is helping family members improve their communication skills. This can include helping them learn how to constructively interact with one another and to understand one another’s perspectives. Staff may also need to provide space for family members to do a lot of venting. Providers reported being engaged in active listening, being empathetic, and validating each participant’s perspective.

Along with their more intensive family and youth counseling interventions, some shelter programs offer less intensive opportunities for young people to connect with their families, including making phone cards and postcards and postage available or approving overnight visits. This has the added benefit of allowing staff to see when youth are interested in engaging with their families so that a conversation about reunification may begin.

Some programs reported offering respite beds along with their more traditional shelter and transitional living programs for homeless youth. This service can give youth a “time out” from intense family situations. Letting youth and families take a break from one another for a short time can help families pass through the most difficult times and keep a young person from leaving home permanently.

Many programs were committed to providing a broad spectrum of family intervention models such as those described above. This is consistent with their philosophies of meeting youth and families where they are and letting them lead the way in determining what services they need. It also allows them to tailor services based on individualized assessments of the needs of the young person and his or her family.
Practical steps are also necessary

In addition to the various service models above, there are practical steps that providers reported could help facilitate family intervention.

Poverty often contributes to family strife and plays a role in youth homelessness. In fact, providers shared that many of the unaccompanied youth they serve are from families that are themselves homeless. Youth may leave their families to reduce familial burden or because family shelters have excluded them. Other families separate and send children into kinship or other informal care because of their inability to sustain the cost of housing. Providers reported that these practical difficulties, rather than any inherent conflict in the family, may be causing the youth to be homeless. They stressed the importance of being able to address families’ financial issues, either directly or through referral to other organizations and agencies.

Family providers should ensure that counseling and other supportive services they offer are accessible. Families may need travel assistance or day care in order to attend counseling or educational sessions. It is also important to offer flexible hours so that parents do not have to take time off of work to participate in programming. Alternatively, counseling services can be provided over the phone (which can help those in geographically remote areas) or in families’ homes.

Outcome measures vary

Many providers relied on process rather than outcome measures to assess their services. For example, they measure participation in services rather than what is achieved by those services. Others use a wide array of outcome measures and tools to determine whether family intervention is successful. Ultimately, a standardized set of measures may be needed to assess impact across service models and help inform the field about the most effective approaches.

Providers reported using the following measures to assess the effectiveness of prevention and reunification assistance:

- Return to shelter (i.e., recidivism to homelessness);
- Improved family functioning in the areas of physical, emotional, and social health;
- Parents’ improved knowledge of adolescent development;
- Improved communication and increased positive interaction between parents and youth (including increased accepting behaviors and decreased rejecting behaviors by parents of LGBT youth);
- Increased protective factors, such as less drug use, better school attendance, and fewer risky behaviors;
- Youth’s increased perception of safety;
• Decreased involvement in the juvenile or criminal justice system; and
• Family and youth’s improved access to supports through active engagement in aftercare services or use of community-based resources.

Providers also reported exploring how to build cost-effectiveness arguments for family intervention services. They have largely done this by assessing the cost of shelter stays and comparing that to the cost of family intervention work. Since lengthy shelter stays tend to be expensive, providers believe that the savings from eliminating or reducing shelter stays can be used to support family intervention services. They felt that demonstrating a cost-effective strategy to reduce shelter entries and help youth avoid homelessness would greatly strengthen support for expanding family intervention services. It would have the added benefit of freeing up scarce shelter beds for young people in dire situations and for whom family reunification is not a safe or viable option, thus improving the overall efficiency and performance of the homeless youth service system.

CONCLUSION

Youth providers around the country are implementing family intervention services. Such providers, while attendant to the safety of homeless youth, recognize the potential of families to act as a resource and a solution to their homelessness. Through much experimentation and innovation, providers have concluded that family intervention is consistently the best way to meet the needs of youth and improve their long-term outcomes.

The first line of defense is to use family intervention to prevent a child from running away or being expelled from the home. If a child does leave the home, willingly or not, family intervention can also be used to return them as quickly as it is safe to do so.

Finally, even when returning home is not an option, providers believe the youth homelessness system should help young people maintain a healthy and appropriate connection with their families. This can provide them with caring adults who can help them achieve not only housing stability but social and emotional well-being as well.