

## **Guideline for CAN YETI Discussion on Needs of Region to End Youth Homelessness**

As a state, we're all working together to prevent and end unaccompanied youth homelessness by the end of 2020, making youth homelessness rare, brief and nonrecurring. YETIs, CAN leadership, local providers, area youth, and other regional partners are crucial to achieving this goal. You know your communities best – what resources currently exist, local barriers to achieving our shared goal, the needs of your youth, and how to integrate best practices into your region. We are seeking to facilitate a discussion to understand the unique needs of your CAN. In addition, to identify localized strategies, new partnerships, and priorities for potential new resources. It's time to be innovative!

### **1. Engagement and Outreach**

- a. How confident are you that you are reaching all youth and young adults?

Providers in Fairfield County recognize that there are serious challenges in reaching homeless youth and young adults. Our Youth Count data shows that only 35% of youth who are literally homeless actively seek shelter. So, we know that many of them are not seeking assistance from our homeless service system for a variety of reasons. Additionally, our current outreach staff have focused primarily on adults and we know that youth homelessness looks very different. They do not tend to be as visible, congregate in the same places, or utilize the same resources as homeless adults. So, the existing homeless outreach teams that serve the adult population has not successfully reached all youth and young adults.

- b. What programs exist dedicated to outreach for youth?

Council of Churches has outreach staff for the under 18 population. They just hired someone for the per diem position last week.

Kids in Crisis will perform outreach to minors and family members in crisis if they call their Crisis Helpline or if they are referred by 211. However, they are not actively doing street outreach to identify homeless youth.

The Street Safe program from RYASAP conducts street outreach for youth at-risk of gang involvement in who are between the ages of 14-24 in the Bridgeport community.

- c. What engagement/outreach programs exist that include youth and have specific attention paid to youth?
  - i. Path?

The Homeless Outreach Team in Bridgeport and PATH providers provide outreach to the adult population which included young adults between the ages of 18-24, but as previously mentioned they are not coming into contact with large populations of homeless young adults.

- d. Drop-in centers for youth /young adults? Formal or informal?

Triangle Community Center has partnered with DMHAS and recently opened up the Young Adult Space (YAS), a drop-in center located in Norwalk for any and all disconnected young adults under the age of 25.

Family and Children's Agency in Norwalk has a drop-in center for homeless adults called the Community Connections Center. Although they would be willing to serve young adults, this is not a resource that many young adults use. This was evidenced during the Youth Count when over the course of a week only 2 young adults were surveyed there.

There are also many community centers that function to serve high need youth and their families even though they are not specifically meant to serve homeless youth.

Alpha Community Services runs the Ralphola Taylor Center that serves many high-risk youth in Bridgeport. In Danbury, there is Harambee Community Center that has actually had youth who were experiencing homelessness sleeping outside of the facility.

- e. If you could have drop-in places, where would be the best place to locate? How would youth get there?

Although we are excited about the new drop-in space in Norwalk, the highest need (according to the Youth Count) is in Bridgeport. Since many homeless youth cannot afford transportation to Norwalk, it would be extremely beneficial to have another drop-in center located in the Bridgeport area. It is important to note that there is also a lot of gang involvement in Bridgeport and many youth would not feel safe accessing resources in certain neighborhoods. The downtown Bridgeport area seems to be neutral territory and would probably be the best location for a youth drop-in center. It is also where the central bus terminal and train station is located, making it easily accessible.

- f. Do mobile services exist in this region that serve youth (such as mobile food, mobile healthcare, etc.)?

Norwalk's FQHC has a mobile bus that provides healthcare including psyc appointments with an APRN. This service is for adults. The Bridgeport Rescue Mission emergency shelter has a mobile truck that provides food throughout the community on various days. It serves adults and families. Neither of these resources are specifically for young adults or youth.

- g. Where do unstably housed youth and young adults go for help in your region?

Some of them call 211; some seek help at their schools; we have had referrals from Child and Family Guidance because youth have returned to their old therapists looking for resources; sometimes they look to employment programs or Job Corps to try to self-resolve; but one of the biggest issues is that many of them do not self-disclose or ask for help.

## 2. Triage

- a. Do you have coordinated access sites dedicated to young adults?

The FC CAN is establishing YA access sites in Bridgeport (at the Connection Inc.), Norwalk (at Triangle Community Center), and we are working on establishing sites in Stamford and Danbury.

b. Diversion

i. Do you have funding specific to youth/young adults for diversion?

We were able to use some of the money that was made available statewide for diversion for YAs. However, this was a limited resource that will not be available on an ongoing basis. We also have Be Homeful funds through CCEH that can be made available to families with a young adult head of household. FC CAN also has a limited amount of diversion assistance for individuals, including individual young adults.

ii. Do you have funding for young families – be homeful funds?

See above.

c. Mediation services in the region – RHY? DCF? Other?

DCF does mediation with families. Kids in Crisis and Council of Churches also do mediation with families of RHY.

d. Do you have navigators specific to youth?

Currently there is nobody in the positions for YA CAN navigators. However, Homes with Hope and Triangle Community Center have committed to hiring a .5 FTE staff to be integrated in the CAN. We are also pursuing additional funding.

e. Emergency Housing/Shelter

i. Youth Specific (under 18)

Kids in Crisis has an emergency shelter program for youth under the age of 18. Council of Churches has 2 host homes for youth under the age of 18.

ii. Young families

Inspirica in Stamford has a transitional housing program that prioritizes parenting young adults. Malta House in Norwalk also functions as a maternity home for pregnant and parenting young females.

iii. Young adult specific

Homes with Hope has an emergency shelter for young adult females called Project Return.

iv. Serves young adults/youth but does not have special services dedicated to them

All of our local shelters are willing to serve homeless young adults, but very often youth do not want to go to adult shelters.

- v. Serves adults but has specific accommodations such as private bathrooms, designated areas, etc. for young adults

Pacific House in Stamford has beds for young adult males that are located in a separate space from the other adult beds.

- vi. Other emergency housing options used? (host homes, churches, relative search, DCF, DMHAS, CSSD, DOC)

DMHAS Young Adult Services has some very limited housing for young adults but it seems almost impossible to access. DCF has some beds in Danbury.

- f. If there are no shelter or emergency beds available, what do you do for the above populations?

N/A Attempt diversion, with or without financial assistance.

- g. What are some of the barriers to using these emergency housing options such a prioritization, specific demographic capacity, young adult choice - refusals?

Young adults typically do not want to go to adult shelters for many reasons (stigma of homelessness, trauma history and fear of being unsafe, extensive rules and requirements, the perception of what the environment will be like – drug use, bed bugs, etc.

Transportation is another issue. The available resources are not always easily accessible to youth with no money or they want to stay within the community that is familiar to them.

Sometimes the issue is related to the fact that the resource is not immediately available. If we cannot provide a resolution to a young person's crisis right away, we can lose them.

Other times, it is lack of reliable contact information. Sometimes, youth cannot be reached when a shelter bed becomes available.

Another issue is eligibility criteria for some of the programs. Some programs do not want to admit a youth if they could create a destabilizing situation for other residents or pose a potential threat.

Additionally, for all of the adult shelters, people are prioritized based on current living situation, need, and length of homelessness. So, a young person who is bouncing from place to place with nowhere to sleep tonight is not going to take precedence over the adult who has been sleeping on the street for 2 weeks.

- h. Transitional Housing Usage

- i. What are your TH resources in your region?

Malta House and Greater Bridgeport Adolescent Prevention Program have transitional housing programs. Inspirica's program targeting DV and parenting young mothers program is TH.

1. Criminal justice?

There are some halfway houses for the adult re-entry population. Isaiah house in Bridgeport is an example.

2. HHS funded?

There are no HHS funded transitional programs in Fairfield County.

3. DCF?

DCF does fund some beds with Greater Bridgeport Adolescent Prevention Program and some beds in Danbury that are more focused on behavioral health treatment.

ii. Do you utilize TH for emergency housing?

No

iii. How do you prioritize for TH?

Inspirica's TH program prioritizes entries via the FC CAN process. The other TH programs that exist do not fill their beds solely through our CAN, although we can make referrals. Therefore, they do not follow our prioritization protocol.

iv. How do you prioritize for single young adults?

Young adults are seen as a priority population as are those who are pregnant or elderly, but the first level of prioritization has to do with where the individual/family is currently sleeping and how long they have been there.

v. How do you prioritize for young families?

Please see above.

**3. Permanent housing options: What does your region have?**

a. Youth under 18 (DCF, family reconnection, other?)

Kids in Crisis, Council of Churches, and DCF all provide emergency placement and work to reunite youth with their families or some other caregiver who can provide long-term housing.

However, it is important to note that after KIC lost funding from DCF they currently have no sustainable funding for their shelter and services.

b. Young adults (RRH, PSH, other (such as security deposit assistance, PHA preference?))

i. RRH anything dedicated specifically to youth/young adults/young families?

The Connection Inc. has some RRH slots available specifically to young adults in the Fairfield County region. The CT RRH program will also serve young adults and young families. The Bridgeport Housing

First Collaborative Program has some PBV PSH units with onsite case management dedicated to young adult individuals.

- c. What are the barriers to accessing these resources? Possible issues include: prioritization, length of time homeless v. youth status, involvement with CAN, systems v. provider driven

The Connection's RRH slots are available to those young adults who score between a 4 and 7 on the Next Step Tool. Therefore, those who score high and are likely the most vulnerable are not eligible for this resource. Additionally, for the CT RRH program, the 18-24 year old population are rarely prioritized over other adults who have been homeless long-term, are utilizing the shelters (verifiably homeless), and have reliable contact information.

- d. Affordable housing – what is your supply? What are your barriers to access? (such as need security deposit assistance)

Affordable housing through the local housing authorities have long waitlists and those who would like to be added to the waitlist have to wait until they begin accepting new applications. None of our local housing authorities have open waitlists that youth would be eligible to apply for right now.

#### 4. **Community needs questions:**

- a. How do you think the community could serve homeless youth better, without additional funding? Do you have a specific suggestion, strategy, or idea for improving services?

It would be beneficial to convene all of the outreach teams to determine if they could dedicate some time to doing outreach in areas where youth congregate. I also think when the CAN YA Navigator positions are filled we will be better able to keep youth engaged in order to connect them to any potential resources.

Creating “drop-in space” for youth in existing rec centers and adult drop-in centers would also be beneficial.

It is also important to reach out to youth via social media and make stronger outreach and engagement efforts that may not require a large amount of additional staffing.

- b. What exists already and do you need more in any of the above categories?

See above responses for what exists already.

In this region the greatest needs are:

**Outreach:** YA CAN Navigators and mobile street Outreach Workers who specifically focus on youth and young adults and are capable of doing diversion, CAN intakes, mediation, and can stay connected to youth until they return to stable housing.

**Triage:** The FC CAN also needs discretionary funds that can be used to keep youth safe during their homeless episodes and return them to housing stability as soon as possible. Secondary to these funds are more youth-centric shelter spaces that would draw youth in who are literally homeless, have minimal barriers to entry, and minimize the negative perception youth have related to the existing shelter system.

**Housing:** Additional housing resources are needed as well. Specifically, the Fairfield County YETI prioritized units that are appropriate for youth who have severe mental illness and additional RRH resources.

\*It should also be noted that although there are existing shelter beds for the under 18 population, and this was not identified as a need at this time, these beds are not currently supported by any sustainable funding source which is a concern.

c. How would you alter existing models to better suit needs of youth/young adults?

Making shelters better equipped to serve the 18-24 year old population- low barriers to entry, more affirming for LGBTQ youth, youth designated space, developmentally appropriate services that are based on best practice models, etc.

Ensuring that PSH and RRH programs can adequately address the needs of young adults, using a harm reduction approach and Positive Youth Development model.

Utilize RRH for those who are most vulnerable but have other longer-term housing opportunities available to implement a progressive engagement model if young adults are unsuccessful with RRH.

Strengthening the relationship with DCF to ensure youth who are signing themselves out of DCF with no identified stable housing can be referred to our system for light touch services in which we provide some education and resources should they ever find themselves in crisis.

d. Thinking creatively, if you had flexible funding, what assistance would help youth/young adults stay safe during housing crisis and/or help them get permanently housed in your region?

Funds would be used for diversion, basic needs, child care, transportation, security deposits, food, etc.

e. If you had \$200,000 to spend on ending youth homelessness, what would be your housing priorities (outreach/engagement – permanent housing) broken down by percentages?

Outreach/Engagement – 40%

Discretionary funds for diversion, gateway services/basic needs, etc. – 10%

Emergency Shelter –

Rapid Rehousing – 60%

Permanent Housing-

f. What training do you think would be most helpful? For whom?

Housing First for RRH providers

Positive Youth Development and Harm Reduction for PSH providers

Recognizing and supporting victims of Human Trafficking and Harm Reduction for Outreach Workers and CAN staff

Mediation for shelter case managers and navigators