

# Current Statistics on the Prevalence and Characteristics of People Experiencing Homelessness in the United States

(Last Updated July 2011)

Research data describing the national prevalence of homelessness and related issues are limited. In this fact sheet, you will find data from multiple sources, including the U.S. Department of Housing and Urban Development's (HUD) June 2010 Annual Homeless Assessment Report to Congress (AHAR). This fact sheet also includes data from the 1996 National Survey of Homeless Assistance Providers and Clients (NSHAPC). Although these data are older, they represent the most comprehensive study of homelessness to date and are cited to provide historical context. Notes about differing definitions of homelessness are included as needed. **To provide updated resources or ask questions, contact Kristen Paquette at kpaquette@center4si.com**.

# Individuals who are Homeless

According to the US Department of Housing and Urban Development's June 2010 Annual Homeless Assessment Report to Congress (2010 AHAR)<sup>1</sup>, on a given night in January 2010:

- **407,966** individuals were homeless in shelters, transitional housing programs, or on the streets (this number does not include persons in family households)<sup>i</sup>
- **109,812** individuals were chronically homeless, a 1% decrease from the previous year

Over the course of a year (October 2009-September 2010)<sup>ii</sup>, the 2010 AHAR found that<sup>2</sup>:

• 1,593,150 individuals experienced homelessness

According to 1996 National Survey of Homeless Assistance Providers and Clients (1996 NSHAPC) data<sup>3</sup>, **85%** of homeless clients were single.

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- 1. Data in the AHAR are comprised of annual point-in-time counts and HMIS data reported throughout the year (October 2009-September 2010). Data are reported based on HUD's definition of homelessness, which includes people in shelters and on the streets, but not those who are "doubled up" with families or friends.
- <sup>2.</sup> This number represents people who accessed emergency shelter or transitional housing programs.
- <sup>3.</sup> NSHAPC data only includes people who accessed homeless assistance programs.



## Gender, Age, Race/Ethnicity

Among all sheltered individuals over the course of a year (October 2009-September 2010)<sup>iii</sup>:

- 62% were male
- 38% were female
- 21.8% are under age 18
- 23.5% are 18-30
- 37% are 31 to 50
- 14.9% are 51 to 61
- 2.8% are 62 or older
- 41.6% are White, Non-Hispanic
- 9.7% are White, Hispanic
- 37% are Black/African-American
- **4.5%** are other single races;
- 7.2% are multiple races

## Mental Illness & Substance Use

On a given night in January 2010<sup>iv</sup>:

- 26.2% of all sheltered persons who were homeless had a severe mental illness
- 34.7% of all sheltered adults who were homeless had chronic substance use issues



# Individuals Experiencing Chronic/Long-Term Homelessness

On a given night in January 2010<sup>v</sup>:

• 109,812 individuals were chronically homeless

Of people utilizing emergency shelters between October 2009 and September 2010, 6.2% stayed for 6 months or longer.

## Gender, Age, Race/Ethnicity

Among long-term stayers (persons staying six months or more) in emergency shelters in 2008<sup>vi</sup>:

- 56.6% were Black/African-American
- 28.7% were Hispanic/Latino<sup>4</sup>

A study conducted in New York City and Philadelphia indicated that people experiencing chronic homelessness were predominately Black and male<sup>vii</sup>:

- In New York City, 92.9% were Black and 82.3% were male
- In Philadelphia, 92.9% were Black and 71.1% were male

Among people enrolled in programs addressing chronic homelessness, about 50% are African American<sup>viii</sup>.

Data from the 1996 NSHAPC study showed that:

- 67-80% were male<sup>ix</sup>
- 60% were middle-aged (35-44 years old)<sup>×</sup>

<sup>4.</sup> There is no equivalent statistic in the 2010 AHAR.



#### Mental Illness & Substance Use

Data from research conducted in the past five years indicates that<sup>xi xii xiii</sup>:

- About 30% of people who are chronically homeless have mental health conditions.
- **About 50%** have co-occurring substance use problems.

According to analyses of data from the 1996 NSHAPC<sup>xiv</sup>:

- **Over 60%** of people who are chronically homelessness have experienced lifetime mental health problems
- Over 80% have experienced lifetime alcohol and/or drug problems



# Individuals Experiencing Short-Term Homelessness

Research on shelter use in New York City and Philadelphia concluded that<sup>XV</sup>:

- People experiencing transitional homelessness<sup>5</sup> constitute **80%** of shelter users
- People experiencing episodic homelessness<sup>6</sup> comprise **10%** of shelter users.
- In New York City<sup>xvi</sup>:
  - » Transitionally homeless individuals experience an average of **1.4 stays** over a 3-year period, for a total of **58 days** on average over the 3 years.
  - » Episodically homeless individuals, on average, experience **4.9 shelter episodes** over a 3-year period totaling **264 days** with an average length of stay of **54.4 days**.

Data from the 1996 NSHAPC show that about 50% of people who were homeless were experiencing their first or second episode of homelessness, which typically lasted a few weeks or months to one year<sup>XVII</sup>.

# Gender, Age, Race/Ethnicity

In New York City and Philadelphia, people experiencing transitional and episodic homelessness were<sup>xviii</sup>:

- Predominately **Black** (83.6% and 90.5% respectively) and male (81.5% and 81.8%)
- Largely under the age of 30 (36.1% and 37.7%)

## Serious Mental Illness & Substance Use

In New York City and Philadelphia, research showed that people experiencing transitional and episodic homelessness generally have lower rates of disabilities in comparison to people experiencing chronic homelessnes<sup>xix</sup>.

- <sup>5.</sup> Transitional homelessness defined as typically entering the shelter system for one short-term stay.
- 6. Episodic homelessness defined "those who frequently shuttle in and out of homelessness, or the mediating institutions that house them" (Kuhn & Culhane 1998)

<sup>.....</sup> 



- Mental illness:
  - » 6.5% of transitional and 11.8% of episodic in New York City
  - » **3.4%** of transitional and 6.4% of episodic in Philadelphia
- Substance use:
  - » 28.2% of transitional and 40% of episodic in New York City
  - » 31.2% of transitional and 50.5% of episodic in Philadelphia



# Families who are Homeless

According to the 2010 AHAR, "A typical homeless family consists of a mother and two children," and people in families experiencing homelessness are more likely to be headed by a woman, to identify as minorities, and are significantly less likely to have a disability."<sup>XX</sup>

On a given night in January  $2010^{XXI}$ :

• **241,951** persons in families were homeless in shelters, transitional housing programs, or on the streets (37.2% of all homeless persons)

Over the course of a year (October 2009-September 2010)<sup>XXII</sup>:

- **567,334** persons in families were homeless in shelters or transitional housing programs (**35.2%** of the total sheltered homeless population)
- Of the total number of sheltered households (rather than separate people), **168,000** households were families (**14.0%**)
- Among homeless families in shelters, women comprise 77.9% of adults<sup>XXIII</sup>

In 2009, the National Center on Family Homelessness analyzed state-level data and found that nationwide, **1.5 million** children experience homelessness in a year<sup>XXIV</sup>.

According to 1996 data from the NSHAPC<sup>XXV</sup>:

- 32% of people who were homeless were women
- Among these women, **84%** were members of homeless families
- About 200,000 children were members of homeless families XXVI
- Among these children, 42% were under six years old XXVII

#### Gender, Age, Race/Ethnicity

Among all sheltered persons in families over the course of a year (October 2009-September 2010)

- 77.9% were female
- 22.1% were male
- **59.3%** were under age 18
- **23.2%** were ages 18-30
- **16.2%** were ages 31-50
- 1.2% were ages 51-61
- Less than 1% were 62 and older



Among all families residing in shelters or transitional housing programs over the course of a year (October 2009-September 2010):

- **42%** were African-American
- **31%** were White, Non-Hispanic
- 12% were White, Hispanic
- 8.5% were Multiple Races; 6.4% were Other Single Race

According to 1996 NSHAPC data<sup>xxix</sup>:

- **43%** are African-American
- 38% are White, Non-Hispanic
- 15% are Hispanic
- 3% are Native American

#### Serious Mental Illness, Traumatic Stress & Substance Use

- Over 92% of mothers who are homeless have experienced severe physical and/or sexual abuse during their lifetime<sup>XXX XXXi</sup>.
- About two-thirds of homeless mothers have histories of domestic violence.
- Compared to low-income housed women, mothers who are homeless have xxxii:
  - » Three times the rate of posttraumatic stress disorder (36%)
  - » Twice the rate of drug and alcohol dependence (41%)
- About 50% of homeless mothers have experienced a major depression since becoming homeless<sup>xxxiii</sup>.
- Among homeless children, within a single year:
  - » 97% move, many up to three times<sup>XXXIV</sup>.
  - » 22% are separated from families XXXV.
  - » **25%** witness violence<sup>XXXVi XXXVii XXXVii XXXVii</sup>
- Children who are homeless experience higher rates of emotional and behavioral problems<sup>xl xli</sup> than low-income housed children<sup>xlii</sup>.



# **Unaccompanied Youth who are Homeless**

On a given night in January 2010<sup>×liii</sup>:

• Unaccompanied youth represented 1.1% of the sheltered adult population

Other estimates of the prevalence of youth homelessness:

- A 1998 national study of the prevalence of homelessness among youths living in households was 7.6%<sup>×liv</sup>.
- In 2007, researchers estimated that this translates to a national prevalence of 1.6 million youth experiencing homelessness each year<sup>x|v</sup>.
- 1996 NSHAPC data found that **12%** of all homeless clients were youth ages 17-24.

## Age, Gender & Race/Ethnicity

- The **majority** of homeless youth are ages 13 or older<sup>xlvi</sup>.
- Multiple studies show that homelessness among youth is more common among males, particularly among street-involved youth. Some samples of youth in shelters show more females than males<sup>xlvii</sup>. However, depending on the sample, gender distribution varies.
- Studies show differing compositions of race/ethnicity among homeless youth. Some show no difference among homeless youth and other youth in their surrounding areas; other found disproportionate representation among racial/ethnic minority youth who become homeless xlviii.

# Serious Mental Illness, Traumatic Stress, & Substance Use

Among homeless youth, when compared to housed peers or the general adolescent population<sup>xlix</sup>:

- Rates of mood disorders, suicide attempts, conduct disorders, and post-traumatic stress disorder are **higher**.
- Risk for mental health problems is **higher** among street-involved homeless youth than youth who are homeless but not living on the streets.
- Risk of alcohol or drug abuse or dependence is higher.

Youth who are homeless:

- Are more likely to have histories of physical or sexual abuse<sup>| li lii</sup>.
- Often experience trauma prior to becoming homeless and are at increased risk of trauma after they become homeless<sup>liii</sup>.



Research on rates of post-traumatic stress among homeless youth is minimal, but a 1989 study in Hollywood, CA found that rates were **up to three times higher** than their housed peers<sup>liv</sup>.

## Sexual Identity/Orientation

Youth who are LGBTQI2-S<sup>7</sup> and Homeless

In 2007, the National Alliance to End Homelessness analyzed 17 research studies to estimate that **20% of youth** who are homeless identify as LGBTQ<sup>8 IV</sup>. Other prevalence estimates range from **6% to 35%** of youth who are homeless<sup>IVI</sup>.

- These youth often leave home because of family rejection or conflict<sup>|vii |viii</sup>
- Youth who are LGBTQI2-S and homeless are at **high risk** for substance use, mental health issues, self-harming behavior, and sexually transmitted diseases<sup>lix</sup>
- Youth who are LGBTQ experience sexual victimization before becoming homeless at twice the rate of their heterosexual peers<sup>1x</sup>
- LGBTQ youth who are homeless are more likely to attempt suicide than heterosexual peers who are homeless<sup>1xi</sup>
- Compared to heterosexual homeless youth, LGB homeless youth experience post-traumatic stress disorder (PTSD) more often (47% compared to 33%)
  - » Lesbian youth who are homeless have particularly high rates of PTSD (59%) [XII
- LGBT homeless youth are more likely than heterosexual homeless youth to report experiencing neglect, physical victimization, sexual victimization by a caretaker, and sexual victimization on the street<sup>Ixii</sup>
- Research indicates that LGBT youth who are homeless will experience 7.4 more acts of violence than their heterosexual peers<sup>lxiv</sup>

<sup>8.</sup> Lesbian, gay, bisexual, transgender, or questioning

<sup>7.</sup> Lesbian, gay, bisexual, transgender, questioning, intersex, or two-spirit



## Foster Care Involvement

Estimates of youth involvement in foster care range from 13.8%-53%<sup>Ixv Ixvi</sup>.

- Research on a sample of 1087 interviews with alumni of foster care found that 22% experienced homelessness at some point in the year following discharge from the system. 42% experienced homelessness for one or more nights at some point in their lives following foster care<sup>lxviii</sup>.
- Research on a sample of 603 foster youth showed that 13.8% experienced homelessness at some point after leaving foster care<sup>lxviii</sup>.

According to data from the 1996 NSHAPC study, **27%** of all homeless clients reported living in foster care, a group home, or other institutional setting<sup>lxix</sup>.



# **Elders/Older Adults who are Homeless**

HUD's 2010 AHAR points to an estimate of the number of elderly people among sheltered individuals:

• **4.2%** of sheltered individuals and **2.8%** of the total sheltered homeless population are ages 62 or older in 2010, as compared with **10.3%** of individuals living in poverty in 2009.

Data from the 1996 NSHAPC showed that 8% of all homeless clients were age 55 years or older<sup>IXX</sup>.

According to the Homeless Older Adults Strategic Plan for Los Angeles<sup>Ixxi</sup>:

• On any given night, there are **3,000 to 4,000** homeless older adults, 62 years or older, in Los Angeles County

## Age, Gender, Race/Ethnicity

A study of 378 older homeless adults in Minnesota showed that:

- 81% were male
- 19% were female
- **51%** were persons of color

The Homeless Older Adults Strategic Plan for Los Angeles reports that of the homeless older adults in Los Angeles County<sup>Ixxii</sup>:

- 57% are Black
- 14-15% are Latino

#### Serious Mental Illness, Substance Use, & Health

A study of older homeless adults in Los Angeles County found that Ixxiii:

- 62% of older adults reported a disability of some sort
- **89%** of reported disabilities were physical



A study of reported health conditions amongst homeless older adults in Los Angeles County showed that these adults had a variety of health problems<sup>lxxiv</sup>:

- **60%** dental problems
- 50% eye problems
- **50%** hypertension
- 50% arthritis
- 40% back problems and/or pain
- 30% diabetes
- 30% heart problems
- 20% depression
- 20% stroke

Among older adults in the Minnesota study<sup>IXXV</sup>:

- 49% reported a serious mental illness
- 31% reported a substance use problem
- 6% reported having a co-occurring mental illness and substance use condition



# Veterans who are Homeless

According to *Veteran Homelessness: A Supplement to the 2009 Annual Homelessness Report*, released in January 2011 by the U.S. Department of Veterans Affairs and the U.S. Department of Housing and Urban Development<sup>IXXVI</sup>:

- An estimated **75,609** veterans (male and female) were homeless on a single night in January 2009.
- Roughly **160,000** veterans experienced homelessness over the course of the year (about **10%** of the total homeless population).
- Roughly **44,000 to 66,000 veterans** are experiencing chronic homelessness.
- Nearly **one-half** of all homeless veterans on a single night were located in just four states: California, Florida, New York, and Texas.
- **Almost all** of sheltered homeless veterans are single adults, however **4%** are part of families. They tend to be younger, African-American, and female.

The FY 2009 VA CHALENG Report estimated that:

- 107,000 veterans are homeless on a given night
- There was an 85% increase in the number of veteran families experiencing homelessness from the previous year<sup>lxxvii</sup>.

In the 1996 NSHAPC, almost 25% of homeless clients were veterans.

# Age, Gender & Race/Ethnicity

Veterans experiencing homelessness in shelters **tend to be** single male adults, **older** than their non-veteran peers, **more likely** to have a disability, and are **equally likely** to be white non-Hispanic as they are to be a minority<sup>lxxviii</sup>. Among the sheltered homeless veteran population:

- 8.4% are between 18 and 30
- **45%** are between 31 and 50
- 38.1% are between 51 and 61
- 8.9% are 62 or older<sup>lxxix</sup>
- About 8% of sheltered homeless veterans are female, a number that has been increasing steadily since 2000<sup>IXXX</sup>
- Among all homeless women in the 1996 NHSAPC, 1% were veterans as compared to 33% veterans among homeless men
- In a study of older homeless adults in Minnesota, 36% had served in the US military; 44% of older homeless men had served<sup>IXXXII</sup>



- **49.2%** are White, non-Hispanic/non-Latino
- **34%** are Black or African-American
- **8.3%** are White Hispanic/Latino
- 3.4% are American Indian or Alaska Native
- **5.1%** are other races<sup>Ixxxii</sup>

#### **Risk Factors for Homelessness Among Veterans**

Less than **1%** of veterans are homeless, but certain groups of veterans are at particular risk for becoming homeless<sup>IXXXIII</sup>.

- Gender/Age/ Race
  - Although their numbers are small, women and people who are between the ages of 18 and 30 are subgroups of veterans who are at particularly **high** risk of becoming homeless.
  - » Rates of homelessness are **higher** for veterans who identify as Hispanic, African-American, and Native American than for non-minority veterans.
- Poverty
  - » **Ten percent** of veterans living in poverty became homeless at some point during the year, compared to only **5%** of non-veterans living in poverty.
  - » Women veterans living in poverty are nearly **3 times more likely** to be homeless than nonveteran women living in poverty
  - » Young veterans (ages 18 30) living in poverty are nearly 3 times more likely to be homeless than non-veteran adults living in poverty
  - » About **1 in 4** Hispanic and African-American veterans living in poverty become homeless-

#### Serious Mental Illness, Traumatic Stress, & Substance Use

- About 45% of homeless veterans experience mental illness
- 70% experience alcohol or other drug abuse problems
- Many experience both<sup>lxxxv</sup>



As the number of female and male veterans<sup>9</sup> returning from active duty grows, those who experience homelessness may suffer from combat-related trauma, military sexual trauma, and Traumatic Brain Injury (TBI) in addition other traumatic stressors.

- Among veterans screened for TBI, over 80% had psychiatric diagnoses<sup>lxxxvi</sup>
- Compared to those who screened negative for TBI, those who screened positive<sup>10</sup> also had PTSD three times more often and depression and substance use two times more often<sup>lxxx-</sup> vii
- Data from 2007 show that **one in five (21%)** women veterans screened positive for Military Sexual Trauma, as compared to 1% of men veterans
- Among veterans who screened positive for Military Sexual Trauma, the likelihood of a mental health diagnosis was 2-3 times greater<sup>IXXXVIII</sup>

<sup>&</sup>lt;sup>9.</sup> These data are not focused on homeless veterans but included to share a perspective on the rates of trauma among men and women veterans.

<sup>&</sup>lt;sup>10.</sup> Positive screen did not necessarily indicate a confirmed diagnosis.



# **Incarcerated People and Homelessness**

**15.3%** of jail inmates have been homeless at some point in the year before incarceration<sup>Ixxxix</sup>.

Data from the 1996 NSHPAC showed<sup>xc</sup>:

- **49%** of currently homeless clients reported an experience of spending five or more days in a city or county jail
- 18% reported experiencing juvenile detention before age 18
- 54% reported experiencing one or more types of incarceration

Research data about people incarcerated in prisons and in jails show that:

- **10%** were homeless immediately before incarceration
- 20% of the incarcerated population with mental illness were homeless
- Arrest rates for a sample of homeless adults over a 12-month period range from 10% for those without substance use disorders to 20% for those abusing alcohol or other drugs<sup>xci</sup>

#### Age, Gender & Race/Ethnicity

In a study of older homeless adults in Minnesota<sup>xcii</sup>:

- 51% had been incarcerated at some point in their lives
- 11% had been incarcerated in the past year

#### Serious Mental Illness, Traumatic Stress, & Substance Use

Of jail inmates who were homeless in the year prior to incarceration, many had high rates of mental health, substance use, and traumatic experiences<sup>xciii</sup>:

- 79% showed symptoms indicating drug or alcohol abuse or dependence
- **75%** showed symptoms indicating the presence of a mental illness
- 31% have been physically or sexually abused
- 46% have been shot at (excludes military combat)
- 49% have been attacked with a knife or other sharp object



<sup>I.</sup>U.S. Department of Housing and Urban Development (HUD). (2011). The 2010 Annual Homeless Assessment Report to Congress. Washington, DC. [2010 AHAR]

II.2010 AHAR

III.2010 AHAR

IV.2010 AHAR

V.2010 AHAR

<sup>VI.</sup>U.S. Department of Housing and Urban Development (HUD). (2009). The 2008 Annual Homeless Assessment Report to Congress. Washington, DC. [2008 AHAR] (There is no equivalent statistic in the 2010 AHAR).

<sup>VII.</sup>Kuhn, R. and Culhane, D. (1998). Applying cluster analysis to test a typology of homelessness by pattern of shelter utilization: results from the analysis of administrative data. *American Journal of Community Psychology.* 26(2): 207-232. [Kuhn and Culhane 1998]

<sup>VIII.</sup>Barrow, S., Soto, G., & Cordova, P. (2004). *Final report on the evaluation of the Closer to Home Initiative*. Corporation for Supportive Housing cited in Caton, C.L., Wilkins, C., & Anderson, J. (2007). People who experience long-term homelessness: Characteristics and interventions. *The 2007 National Symposium on Homelessness Research*. Retrieved March 31, 2010, from http://aspe.hhs. gov/hsp/homelessness/symposium07/caton/index.htm#char

<sup>IX.</sup>Burt, M., Aron, L., Douglas, T., Valente, J., Lee, E., & Iwen, B. (1999). Homelessness: Programs and people they serve. Urban Institute: Washington, DC. Retrieved March 25, 2010, from http://www.urban.org/UploadedPDF/homelessness.pdf [Burt et al 1999]

X.Burt et al 1999

<sup>XI.</sup>Caton, C.L., Dominguez, B., Schanzer, B., et al. (2005). Risk factors for long-term homelessness: findings from a longitudinal review of first-time homeless single adults. *American Journal of Public Health*, 95(10):1753–1759. [Caton 2007]

XII. Kertesz S.G., Larson, M.J., Horton, N.J., et al. (2005). Homeless chronicity and health-related quality of life trajectories among adults with addictions. *Medical Care*, 43(6):574–585.

XIII.Padgett, D.K., Gulcur, L., & Tsemberis, S. (2006). Housing First services for people who are homeless with co-occurring serious mental illness and substance abuse. *Research on Social Work Practice*, 16:74–83.

XIV.Burt, M., Aron, L., Lee, E., & Valente, J. (2001). Helping America's homeless: Emergency shelter or affordable housing?. Washington, DC: Urban Institute, *cited in* [Caton 2007].

XV. Kuhn and Culhane 1998

XVI. Kuhn and Culhane 1998

XVII.Burt, M. (2001). What will it take to end homelessness? Urban Institute: Washington, DC.



XVIII. Kuhn and Culhane 1998

XIX. Kuhn and Culhane 1998

<sup>XX.</sup>2010 AHAR

XXI.2010 AHAR

XXII.2010 AHAR

XXIII.2010 AHAR

XXIV. National Center on Family Homelessness. (2009). Homeless children: America's new outcasts. Newton, MA: Author. [NCFH 1999]

XXV.Burt et al 1999

XXVI.Burt, M., Aron, L., Lee, E., & Valente, J. (2001). Helping America's homeless: Emergency shelter or affordable housing?. Washington, DC: Urban Institute. Retrieved March 23, 2010, from http://www.urban.org/pubs/homeless/chapter1.html

XXVII.Burt et al 1999

XXVIII.2010 AHAR

XXIX.Burt et al 1999

XXX.Bassuk, E.L., Weinreb, L.F., Buckner, J.C., Browne, A., Salomon, A., & Bassuk, S.S. (1996). The characteristics and needs of sheltered homeless and low-income housed mothers. *The Journal of the American Medical Association*, 276 (8), 640-646.

<sup>XXXI</sup>.Browne, A. & Bassuk, SS (1997). Intimate violence in the lives of homeless and poor housed women: prevalence and patterns in an ethnically diverse sample. *American Journal of Orthopsychiatry* 67(2): 261-278.

XXXII.Bassuk et al 1996

<sup>XXXIII.</sup>Weinreb, L. et al. (2006). A comparison of the health and mental health status of homeless mothers in Worcester, Mass: 1993 and 2003. *American Journal of Public Health*. 96(8): 1444-1448. <sup>XXXIV.</sup>NCFH 1999

XXXV. NCFH 1999

XXXVI.Bassuk et al 1996

XXXVII. Bassuk, EL et al. (1997). Homelessness in female-headed families: childhood and adult risk and protective factors. *American Journal of Public Health* 87(2): 241-248.

XXXVIII.NCFH 1999

<sup>XXXIX.</sup>Buckner, J. et al (2004). Exposure to violence and low-income children's mental health: Directed, moderated, and mediated relations. *American Journal of Orthopsychiatry*, 74(4):413-423.

XL.Bassuk et al 1996



XLI.Gewirtz, A. (2007). Promoting children's mental health in family supportive housing: A communityuniversity partnership for formerly homeless children and families. *Journal of Primary Prevention*, 28(3-4), 359-374.

XLII.NCFH 2009

## XLIII.2010 AHAR

XLIV. Ringwalt, C.L., Greene, J.M., Robertson, M., McPheeters, M. (1998). The prevalence of homelessness among adolescents in the United States. American Journal of Public Health, 88(9):1325-1329.

XLV. Toro, P.A., Dwosrky, A., & Fowler, P.J. (2007). Homeless youth in the United States: Research findings and intervention approaches. The 2007 National Symposium on Homelessness Research. Retrieved March 25, 2010, from http://aspe.hhs.gov/hsp/homelessness/symposium07/toro/index. htm#Homeless [Toro et al 2007]

XLVI. Toro et al 2007

XLVII. Heinze, H., Toro, P. A., & Urberg, K. A. (2004). Delinquent behaviors and affiliation with male and female peers. *Journal of Clinical Child and Adolescent Psychology,* 33, 336-346 cited in Toro, P.A., Dwosrky, A., & Fowler, P.J. (2007). Homeless youth in the United States: Research findings and intervention approaches. *The 2007 National Symposium on Homelessness Research*. Retrieved March 25, 2010, from http://aspe.hhs.gov/hsp/homelessness/symposium07/toro/index.htm#Homeless XLVIII. Toro et al 2007

XLIX. Toro et al 2007

<sup>L</sup>.Ray, N. (2006). Lesbian, gay, bisexual and transgender youth: An epidemic of homelessness. New York: National Gay and Lesbian Task Force Policy Institute and the National Coalition for the Homeless.

<sup>LI.</sup>Rew, L., Whittaker, T.A., Taylor-Seehafer, M.A., & Smith, L.R. (2005). Sexual health risks and protective resources in gay, lesbian, bisexual, and heterosexual homeless youth. *Journal for Specialists in Pediatric Nursing*, 10(1):11-19

<sup>LII.</sup>Whitbeck, L.B., Chen, X., Hoyt, D.R., Tyler, K.A., & Johnston, K.D. (2004). Mental disorder, subsistence strategies, and victimization among gay, lesbian, and bisexual homeless and runaway adolescents. *Journal of Sex Research*, 41(4):329-342. [Whitbeck et al 2004]

LIII. Whitbeck, L. & Hoyt, D. (1999). Nowhere to grow: Homeless and runaway adolescents and their families. New York: Aldine de Gruyter.

<sup>LIV.</sup>Robertson, M. (1989). Homeless youth in Hollywood: Patterns of alcohol use. Berkeley, CA: Alcohol Research Group.

<sup>LV.</sup>National Alliance to End Homelessness (NAEH). 2007. Incidence and vulnerability of LGBTQ homeless youth. Youth Homelessness Series Brief No. 2. Washington, DC: Author. Retrieved March 25, 2010, from http://endhomelessness.org/content/article/detail/2141 [NAEH 2007]



#### LVI. Toro et al 2007

<sup>LVII.</sup>Cochran, B., Stewart, B., Ginzler, J. and Cauce, A. (2002). Challenges faced by homeless sexual minorities: Comparison of gay, lesbian, bisexual, and transgender homeless adolescents with their heterosexual counterparts. *American Journal of Public Health*, 92(5):773-777. [Cochran et al 2002] <sup>LVIII.</sup>Whitbeck, L., Hoyt, D., Johnson, K., Berdahl, T., and Whiteford, S. (2002). Midwest longitudinal study of homeless adolescents. Baseline report for all participating agencies. Lincoln, NE: University of Nebraska, Department of Sociology, cited in NAEH 2007.

LIX.Cochran et al 2002

<sup>LX.</sup>Green, J., Ennett, S., & Ringwald, C. (1999). Prevalence and correlates of survival sex among runaway and homeless youth. *American Journal of Public Health*, 89(9):1406-1409.

<sup>LXI.</sup>Van Leeuwen, J., Boyle, S., Salomonsen-Sautel, S., Baker, D., Garcia, J., Hoffman, A. and Hopfer, C. (2006). Lesbian, gay, and bisexual homeless youth: An eight-city public health perspective. Child Welfare, 85(2):151-170.

LXII. Whitbeck et al 2004

LXIII. Whitbeck et al 2004

LXIV. Cochran et al 2002

LXV. Toro et al 2007

LXVI.Courtney, M.E. & Dworsky, A. (2006). Early outcomes for young adults transitioning from out-ofhome care in the USA. *Child and Family Social Work*, 11:209-219. [Courtney & Dworsky 2006]

LXVII.Pecora, P.J., Williams, J., Kessler, R.C., Downs, A.C., O'Brien, K., Hiripi, E., & MOrello, S. (2003). Assessing the effects of foster care. Early results from the Casey National Alumni Study. Seattle, WA: Casey Family Programs. Retrieved March 31, 2010, from http://www.casey.org/resources/publications/AssessingEffectsOfFosterCare.htm

LXVIII.Courtney & Dworsky 2006

LXIX.Burt et al 1999

LXX.Burt et al 1999

LXXI.Shelter Partnership, Inc. (2008). Homeless older adults strategic plan. Los Angeles: Author. [Shelter Partnership, Inc 2008]

LXXII. Shelter Partnership, Inc 2008

LXXIII. Shelter Partnership, Inc 2008

LXXIV.Shelter Partnership, Inc 2008

LXXV. Wilder Research. (2007). Homelessness among older adults in Minnesota. Fact sheet: Minnesota statewide homelessness study, 2006. St. Paul: Author. [Wilder Research 2007]



LXXVI.U.S. Department of Housing and Urban Development (HUD) & U.S. Department of Veterans Affairs (VA). (2011). Veteran homelessness: A supplement to the 2009 annual homelessness report. Washington, DC: U.S. Department of Housing and Urban Development. [2009 VH]

LXXVII.Kuhn, J. H., & Nakashima, J. (2010). Community homelessness assessment, local education and networking group (CHALENG) for veterans. The sixteenth annual progress report on public law 105-114. Services for homeless veterans assessment and coordination. U.S. Department of Veterans Affairs. Retrieved from http://www.va.gov/HOMELESS/docs/chaleng/chaleng\_sixteenth\_annual\_ report.pdf

LXXVIII.2009 VH LXXIX.2009 VH LXXX.2009 VH LXXXI.Wilder Research 2007 LXXXII.2009 VH LXXXIII.2009 VH LXXXIV.2009 VH

LXXXV.VA 2010

LXXXVI. Carlson, K.F., Nelson, D., Orazem, R.J., Nugent, S., Cifu, D.X., & Sayer, N.A. (2010). Psychiatric diagnoses among Iraq and Afghanistan war veterans screened for deployment-related traumatic brain injury. *Journal of Traumatic Stress*, 23(1):17-24. [Carlson et al 2010]

LXXXVII. Carlson et al 2010

LXXXVIII. Kimerling, R., Gima, K., Smith, M.W., Street, A., & Frayne, S. (2007). The Veterans Health Administration and military sexual trauma. *American Journal of Public Health*, 97(12):2160-2166.
LXXXIX. Greenberg, G.A. & Rosenheck, R.(2008). Jail incarceration, homelessness, and mental health: A national study. *Psychiatric Services*. 59(2): 170-177. [Greenberg & Rosenheck 2008]
XC. Burt et al 1999

<sup>XCI.</sup>Malone, D.K., (2009), Assessing criminal history as a predictor of future housing success for homeless adults with behavioral health disorders. *Psychiatric Services*. 60(2): 224-230.

XCII. Wilder Research 2007

XCIII. Greenberg & Rosenheck 2008

