The Homeless Adolescent Population: Complexity, Protective Factors, and Prevention

Anastasia Jones

Claremont McKenna College

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Abstract

The growing number of people living below the poverty line has made homelessness a topic of interest, once again. This paper focuses on the homeless adolescent population that is often overlooked, and explores the complexity of the homeless situation, and how there is no definite solution to overcome homelessness. At-risk and homeless adolescents are affected by many negative factors that cause them to seek early independence, such as parenting style, finical instability, lack of an education, drugs and alcohol, physical and sexual abuse, all of which are discussed in this paper. Along with the negative factors, there are protective barriers that can potentially help an at-risk adolescent but are ineffective once the adolescent is homeless. This paper also addresses how we as a society can be more proactive in helping this population, and be aware of the warning signs that can lead a youth to decide to run away and eventually end up homeless.
Introduction

Homelessness and the issues that homeless people face have been reintroduced to American Society in recent years as a result of the overwhelming amount of people living below the poverty line. In 2010 America’s poverty rate increased to 15.1%, compared to 14.3% in 2009 (Censky, 2011). Now, there are around 46.2 million people who are living below the poverty line due to the current state of the economy and financial instability (Censky, 2011, National law center on homelessness and poverty [NCH], 2009). In recent years, due to America’s financial instability and many families losing their homes, becoming homeless has become more prevalent which has made homelessness an important topic of discussion (NCH, 2009).

To understand the complexity of the problem of being homeless, not until 1987 did the federal Stewart B. McKinney Homeless Assistance Act was written into law. The law addressed the ambiguities of what is considered homeless, and created a consistent definition so that designated programs can receive government aid (Jackaon-Jobe & Solomon, 1992). Even though the government has established a definition of homelessness, the definition still seems to be unclear. Most researchers are still specifically explaining what their definition of homelessness is in each article. If each researcher and person involved with helping homeless people has their own definition, no consistency is available which can lead to a host of problems. The definition of homelessness being used for this paper is the McKinney Homeless Assistance act, which is:

an individual who lacks a fixed, regular, and adequate nighttime residence; or an individual who has a primary nighttime residence that is supervised such as a shelter, or temporary living accommodation; an institution that provides a temporary residence for individuals intended to be institutionalized; or a public or private place not designed for,
or ordinarily used as, a regular sleeping accommodation for human beings (Jackaon-Jobe & Solomon, 1992).

**Homeless Adolescents**

The subpopulation of homeless adolescents is a minority group that receives little attention among researchers and policy makers (Whitbeck, 2009). No exact number for how many adolescents are homeless is available, but in 2002 the Office of Juvenile Justice and Delinquency Prevention in the US Department of Justice conducted a study estimating that 1,682,900 adolescents and youth are homeless (NCH, 2008). The number, though, is most likely even higher considering the amount of time passed since the survey was conducted, as well the economic down turn that has occurred since then. During any given year, five to seven percent of adolescents will become homeless (NCH, 2008).

Being homeless is a stressful and severely unpleasant experience for adults. Being an adolescent and homeless is an even direr situation because the adolescents are at a time in their lives when they are going through drastic changes (Whitbeck, 2009). Adolescence is a time of growth in emotional, motivational and cognitive abilities (Larson, 2011). Adolescences is considered the time when young adults learn to interact in a social environment that is consistently growing, and when they begin to regulate their emotions. The adolescent period is when their surrounding environment becomes very important in young peoples’ development (Oberle, Schonert-Reichl & Zumbo, 2010). Research also suggests that adolescence is the period when crucial developments in executive functions take place in the brain, which become important later when trying to navigate through an adult world (Larson, 2009). Researchers also believe that experiences can influence how the brain develops, which is why being homeless as
an adolescent can have significant negative effects on the developmental processes of the brain (Larson, 2011).

Once an adolescent is homeless, it becomes very difficult for them to overcome the barriers that keep them homeless. First, homeless adolescents do not have a permanent residence. Without a safe place to keep their belongings, sleep, eat, and live, getting a job or going to school become quite difficult to accomplish (Kiesler, 1999). A majority of homeless adolescents drop out of school, which usually in part because of their constant running away, suffering from developmental problems, or having a learning disability (Whitbeck, 2009). Since education is very important for the future, a lack of education becomes a barrier for homeless adolescents when they want to get a job or even go back to school. Homeless adolescents may not be living with their parents, so they may not have access to the important documents like birth certificates, proof of residence, social security card, or a passport which will hinder their eligibility to enroll in school, and if the adolescents receive no help with the enrolling process the situation can become discouraging (Rafferty & Shinn, 1991).

Being jobless is stressful, and many homeless adolescents see employment as the only way of getting off the streets. The problem, though, is if they lack a high school diploma or an education in a trade, it becomes that much harder to get a job compared to those who have an education (Pappas, 2010). Homeless adolescents tend to have more health problems and more mental health problems than their housed peers (Whitbeck, 2009). Homeless adolescents also tend not to receive substantial meals or food in general; the lack of nutrition is another factor explaining why they may have more health problems (Wright, 1991). One last barrier for the homeless adolescent population is that a majority have no family or contact with a family
member. With no help or support from one’s family, being homeless can be hard to overcome (Knickman, Shinn, & Weitzman, 1991).

One last barrier that effects help homeless adolescents receive is the negative image people in society hold of the homeless. Many people believe that if homeless adolescents and adults get a job they would no longer be homeless (Kylyssa, 2011). As if getting a job was the solution to the problem. Unfortunately as mentioned before, if homeless people do not have a home, getting or keeping a job becomes quite difficult. A majority of people think homeless people are lazy, or crazy, or criminals, or spend all their money on alcohol (Kylyssa, 2011; Wedding, 2010). Due to negative views like these it becomes hard for people to want to help the homeless population. The views and stereotypes further impact the homeless population and make their lives harder but also hinder the homeless adolescents from being able to receive the help adolescents desperately need.

All of the barriers mentioned are important aspects to consider when trying to help homeless adolescents. Another important aspect is to look at the prevalence of mental health issues found in the homeless adolescent population. Mental Health is something that as a society we should address to help the homeless adolescent population cope, and get the adolescents the help they need. Along with mental health issues, this paper will focus on where homeless adolescents come from and their life before deciding to run away. Before an adolescent runs away or is thrown out of their house, there tends to be problems with the family dynamics. This is not true for every homeless youth; some choose to leave even when no turmoil exists. It is important, though, to look at the parent-child relationship and how the relationship plays a role in adolescents’ decision to run away. Knowing what preventative steps could have helped the adolescent or stopped them from running away is important to understanding how to prevent
homelessness. Some at-risk adolescents grow up in the same situation as those who become homeless, but are resilient and end up not being homeless. Why are some adolescents able to overcome their obstacles while others are not?

Researchers have found several factors to be attributed with running away: family, living situation, abuse, and financial stress (Whitbeck, 2009). Even though many factors contribute to the homeless problem research has shown that certain types of experiences and parenting styles can lead to a positive outcome for an at-risk adolescent. Positive and successful experiences, parenting styles, and positive influences help produce an ideal situation for an at-risk adolescent. These factors will be discussed in detail in the sections below.

Positive influences

Not every at-risk adolescent becomes homeless or a delinquent; some are able to overcome their difficult situations due to positive influences in their lives (Smith & Werner, 1992). Positive influences may be a role model, a proficient school, a supportive neighborhood, youth programs like the YMCA, or sports teams. Researchers have also found that homeless adolescents who have ties to family members or friends are more likely to overcome being homeless than those who do not (Knickman et al., 1991). The mentioned positive influences are ample buffers for at-risk youth, helping them to learn how to cope and navigate in the world and help discourage a path way toward homelessness (Larson, 2011; Smith & Werner, 1992).

Optimal Parenting Environment

An optimal environment to foster a positive up bringing in adolescents would begin with parents who have a stable relationship with one another. When parents are constantly fighting or unhappy with one another the relationship can drastically affect the adolescent (Chassin, & Haller, 2011). Being raised in a very stressful environment with a lot of conflict, fighting, and
abuse can lead to behavioral and a host of emotional problems for the adolescent (Chassin & Haller, 2011). In an ideal situation, the parents would not have any mental health disease, such as depression, or any drug abuse problems. If parents are depressed, their mental state can be disruptive to the developmental process of the adolescents (Chassin & Haller, 2011). Parents that drink or have a mental health problem put their children in harm’s way but can also cause the adolescents to be unable to control their emotions (Chassin & Haller, 2011). Parents with a higher education, such as college or even technical school are less likely to have adolescents with mental health problems, delinquency problems and may also have better coping skill and emotional stability (Smith & Werner, 1992). An unsuitable environment can lead to higher depression in the adolescents but also can lead to a more stressful life (Chassin & Haller, 2011). The consequences from the unsuitable environment can lead to an increased chance in the adolescent becoming homeless.

The mother tends to be the caregiver and more affectionate than the father, which may be why mothers are seen as having more of an impact in helping at-risk adolescents have a positive development (Chassin & Haller, 2011). Depressed mothers however who are easily irritated, worry, or criticize while interacting with their children can have an adverse effect on the adolescents (Chassin & Haller, 2011). A neglectful mother or one who suffers from a psychological problem or is sick, can lead the adolescent to feel as if the family is unstable, which may cause stress, and affect the adolescents coping skills and their ability to regulate emotions (Chassin & Haller, 2011). A stable parental relationship and an emotionally sound caring mother are ideal for a developing adolescent well-being.
Parenting Style

Parenting style and the environment in which adolescents live in need to be taken into account when looking at the ideal situation for raising children (McKinney & Renk, 2011). Research suggests that an authoritative parenting style is the most effective on positive adolescent development (McKinney & Renk, 2011). The other types of parenting styles which are less effective, depending on the study are controlling, neglect, typical, optimal, authoritarian, and permissive (Lennie, Minnis & Young, 2011).

The authoritative parenting style is described as the parent being highly responsive, supportive, and reasonably vigilant (McKinney & Renk, 2011). Adolescents of authoritative parents more often believe they are loved, have more freedom to do things they enjoy, receive more help, feel that they are understood, and can make their own decisions (Lennie et al., 2011). Adolescents who develop in an authoritative atmosphere, as opposed to those who do not, have higher self-esteem, have better outcomes in school, have less psychological problems, are able to control their emotions more efficiently, and are less likely to become delinquents (Giordano, Johnson, Longmore, & Manning, 2011).

The less effective parenting styles are the typical parenting style which is when the adolescent is often cared for and only sometimes controlled. Authoritarian, optimal, and permissive are also ineffective and can be categorized by rejection and a lack of support from the parent. These three parenting styles consist of extreme degrees of control: a lot or none at all. Neglect or controlling parenting styles are when the adolescent is not cared for but controlled. Adolescents who perceive their parents to be neglectful or controlling experience more depression, and have higher odds of developing a psychiatric disorder (Lennie et al., 2011). Neglected adolescents feel unloved, and feel as if they receive less help, have less freedom, and
are babied more compared to their peers. In a few studies on the perception of parenting style, adolescents who perceive the style as neglectful or controlling have been found to have a hard time distinguishing or judging between different emotional expressions (Lennie et al., 2011). The results of the study could stem from the fact that neglected adolescents tend to have social shortcomings and attention problems which could have implications for adolescents in social situations later (Lennie et al., 2011). To add to the complexity of being homeless, if a homeless adolescent does suffer from attention problems or social short-comings and they do not receive help for the problem they may not be able to over-come being homeless. Giving a homeless adolescent a shelter will not necessarily improve their attention problems, and if the adolescent does not receive help for the problem they may wind up back on the streets.

Since parental styles play a fundamental role in how their offspring develop, it is important that the parents are aware of how their adolescents perceive their parenting style. Even if the parent believes they are not neglectful or controlling, if their children believe they are, the belief can have a profound impact on the adolescent’s life (Lennie et al., 2011). Neglectful parenting style can also increase the chances of the adolescent becoming homeless, because adolescents who are more depressed, suffer academically, have less emotion regulation, or suffer from psychological disorders have higher rates of being homeless (Bach, Bryant & Oberg, 1995; Berdahl, Hoyt, & Whitbeck, 2005; Rafferty & Shinn, 1991).

The next big component of an optimal parenting environment for a youth is an adaptable parent-child relationship. Adolescence is the time young adults begin seeking independence and are trying to discover who they are, while going through many developmental and physical changes (McKinney & Renk, 2011). The parents need to be flexible in their caregiving, but also in how they punish their children and their expectations for their children. Since adolescence is a
time of change they are more likely to break rules and fall short of expectations. If the parents are reasonable and aware of the drastic changes taking place, they can create discussions, and have an open mutual relationship, where the parent is not just controlling the adolescent (McKinney & Renk, 2011). The parents need to give more privileges and responsibilities to the children during the adolescent years to show that they are adjusting their expectations and giving the adolescent some freedom (McKinney & Renk, 2011). The family environment needs to be thought of as a unit whose components work well with one another, where one is safe to express freely how one feels, where negotiations take place, and where the adolescent can build self-esteem (McKinney & Renk, 2011).

The relationship with one’s parents, and parenting style, whether perceived or actual, tend to have a major impact on the adolescent’s development. An array of problems can develop due to poor parent-child relationships, but also from shortcomings in parenting style. Parenting style and parent-child relationships go hand in hand: if the parenting style is authoritarian, permissive, neglectful or controlling, any one style can lead to an unfavorable parent-child relationship.

**Role Model**

Having a role model has been found to be very influential in an adolescent’s life (Hurd, Xue & Zimmerman, 2009). Research shows that adolescents learn to navigate their world from the adults in their lives by watching and copying the adults (Hurd et al., 2009). Adults can have significant influence on adolescents even if they do not intend for certain behaviors to be learned (Hurd et al., 2009). The study by Hurd and associates (2009), explored the effects of role models on adolescents who received negative adult influences. Parents are known to have the most impact on the outcomes and behavior of their children. Parents can influence career path, success
in school, and future adulthood. During adolescence having the same sex parent be a positive role model becomes very important (Hurd et al., 2009). What has also been found is that nonparent adults who the adolescent believes to be important can also influence their lives (Hurd et al., 2009). Important adults that are not the adolescent’s parent but who provide a negative influence can lead the adolescent to misbehave or make unfavorable life choices (Hurd et al., 2009).

On the other hand, adolescents who have positive adult influences either a parent or a role model earn higher grades, have higher levels of self-esteem, and have more ethnic identity pride than those who have no positive parent influence or role model (Hurd et al., 2009). Other studies have shown that having a nonparent role model helps deter adolescents from having early sexual relations, being involved in violence, and using drugs and alcohol (Hurd et al., 2009). Studies have also shown that when the gender of the role model and adolescent matches, this can have a bigger impact as a protective factor (Hurd et al., 2009). Gender matching has shown to be most helpful for girls who have a positive female influence in their lives, because positive female influence gives the girls a live example of what their life can be like and who they should aspire to be (Hurd et al., 2009).

In general terms, adolescents with role models usually have a more positive development and transition to adulthood. Adolescents with role models do better in school and exhibit less aggressive behavior, anxiety and depression (Hurd et al., 2009). Hurd and associates (2009) study does suggest that having a parent as a role model has the most influence due to the fact that they spend the most time with their children. Also, since parents do have a tremendous amount of influence on one’s life and children tend to look up to their parents, they are the perfect people to be positive role models.
For homeless adolescents, they are no longer determined to find a role model or someone to help them navigate through the world. They are in survival mode, looking for shelter and food. Homeless adolescents lack a role model to help them; first one has to consider where they would find one once they are on the street. If they did have a positive role model before they became homeless, chances are that would have been a protective factor in stopping the adolescent from becoming homeless. The one place a homeless adolescent has a chance of finding a role model is at a shelter. If the adolescents are not using shelters or the shelter workers have limited resources to devote to each adolescent, it may limit the ability of an adolescent to acquire a positive role model.

**Connected to one’s neighborhood**

An ideal situation would consist of living in a house in a safe friendly neighborhood where a sense of community is present. Living in a good neighborhood with low crime rates and caring, compassionate neighbors has been shown to help adolescents have positive development, which in turn can help prevent homelessness (Knickman, et al., 199; Oberle et al., 2011). Studies have found that having a supportive neighborhood can help with positive development in adolescents (Oberle et al., 2011). When adolescents feel connected to their neighborhood, researcher has shown adolescents to have less behavioral problems, higher expectations, higher self-esteem, and a better sense of who they are (Oberle et al., 2011).

**Connected to school**

Studies also found that feeling or being connected to school as an adolescent is ideal for later positive development (Herrera, Loukas, & Roalson, 2010). After spending time at home, adolescents spend the next greatest amount of their time at school (Herrera et al., 2010). Adolescents that feel connected report higher self-esteem, lower psychological problems, and
have higher life satisfaction. The overall effect of feeling part of one’s school community tends to have greater positive impacts (Oberle et al., 2011). Studies have also shown that even if the adolescent’s home life is not a conducive one to grow up in, non-family members and the chance to socialize become great buffers against future problems (Herrera et al., 2010). Students who feel disconnected from their family can be protected from negative factors if the adolescents feel connected in another domain. The other domain can then act as a buffer to developing behavioral problems (Herrera et al., 2010). Adolescents, who report unpleasant family relationships and feel on the outside, may often develop conduct problems, aggression problems, higher delinquency rates, and maladjustment (Herrera et al., 2010; Oberle et al., 2011).

All of the problems mentioned are found in a higher concentration among the homeless population than their housed peers (Hoyt & Whitbeck, 1999; Whitbeck, 2009). When the adolescent feels a high level of connectedness to their school, the connectedness can protect the adolescent from a negative family relationship (Herrera et al., 2009). Feeling as if they are a part of society may cause the adolescents to want to live up to society’s expectations, which will lead to fewer problems (Herrera et al., 2009). Feeling connected at school results in lowered conduct problems, externalizing coping problems, and less violence, alcohol, drug, cigarette, and marijuana use (Herrera et al., 2009).

**Understanding Self Worth**

Not only is feeling connected at school a crucial protective factor, but so is one’s perception of their own well-being (Oberle et al., 2011). Believing one’s well-being is satisfactory can protect adolescents from psychological problems, health problems and can lead to positive development (Oberle et al., 2011). Having social ties or relationships has been shown to improve health, well-being, and lead to lower depression and mental health problems
Social ties help prevent homelessness because one will have more people to turn to in a time of crisis (Knickman et al., 1991). Self-Worth and social ties contribute to positive development and adolescents that believe in themselves have less behavioral problems and think better of themselves (Oberle et al., 2011).

**Youth activities**

Participation in extracurricular activities, sports teams, and institutions like YMCA and 4-H are known to be protective factors for the adolescents who are resilient to their at-risk situation (Smith & Werner, 1992; Larson, 2000). Adolescents spend a large amount of time at home and school; the rest of the time is mostly spent as leisure time (Larson, 2000). Of the leisure time, the youth activities or voluntary activities that are structured such as clubs, sports teams or bands are of more importance to protecting at-risk youth (Larson, 2000). Adolescents’ leisure time is spent mostly with other adolescents and adults; which becomes a time that can provide good character building and allow the adolescents to feel connected or a part of something else (Larson, 2000). Youth activities allow an adolescent to discover role models, to have outside adult influences, and to build social ties within the community and with other adolescents. The positive outcomes were found true in Smith and Werner’s (1992) study on children from families at high-risk, the most resilient adolescents were very active, participated in extracurricular activities, had more hobbies and interests and got along with their classmates. The resilient adolescent in Smith and Werner’s study, developed with less behavioral problems, tended to have higher-paying jobs, received a higher education, married, and tended to think that their life had turned out better than they expected.

Youth activities require motivation and concentration, or at least challenge the adolescent, which is important because the activities give the adolescent responsibility and
require them to put effort into a task. Learning motivation, concentration, and responsibility is important because when one becomes an adult these will be valuable and necessary skills that will help them to care for themselves and to become independent. For the most part, though, adolescents in America are dependent and have hardly any responsibility or opportunities that require motivation and concentration (Larson, 2000).

Longitudinal studies have revealed the importance of activities and participation in high school affect participation in different organizations as an adult (Larson, 2000). A study mentioned by Larson (2000) showed that high school participation in extracurricular activities leads to a satisfying occupation 24 years later. Studies have shown that participation in youth activities leads to higher grade point averages. Also, participation in youth activities can change one’s idea of who they are, and can improve one’s occupational or educational goals.

Research on the positive outcome from structured youth activities has shown that programs like Outward Bound, an adventure program, help with positive adolescent development. Adventure programs also have lasting effects, with participants showing increased self-esteem, having greater life goals and being less likely to become delinquents (Larson, 2000). Structured youth activities also help adolescents in developing and regulating their emotions (Larson, 2011). Adventure Programs teach adolescents how to make proper decisions, to plan ahead, and how to live in a complex and disorderly world (Larson, 2011). Just being in a club or on a sports team lowers the chance of the adolescents succumbing to their at-risk situations.

Another study about the perspective of homeless adolescents on youth programs found that the adults or staff members need to be caring, supportive, and build relationships with the adolescents to encourage positive development (Heinze, Hernandez Jozefiwick & Toro, 2010). The adolescents also wanted the environment to be safe, organized and provide opportunities for
personal growth (Heinze et al., 2010). In addition to youth activities, positive well-being, feeling connected to school, living in a tight community or a supportive neighborhood, and participating in peer groups are all protective factors for at-risk adolescents (Oberle et al., 2011).

The previously discussed protective barriers were extracurricular activities, being a part of sports, and being in clubs. Homeless adolescents are most likely not going to school, so they do not have the chance to participate in activities. For the adolescents who are homeless, they would need to be in school in order to participate, since that is where clubs and sports mostly take place. If the activities are not associated with school the adolescents would need money to pay for the activities. If the adolescent is homeless the first priority is not using what money they have on youth activities. Especially now that many extracurricular activities and sports teams are being cut from high schools and middle schools, or families have to pay for their child to participate; making participation that much harder for homeless adolescents or those in at-risk families. If the families or adolescent is unable to pay to participate they miss out on the chance to have youth activities as a positive influence and protective barrier. The adolescent also misses out on being able to build more social ties, and having a positive adult influence in their life.

On top of that, the studies that do look at structured youth activities have shown that the adolescents participating come from higher socioeconomic statuses, and have more parental support than other adolescents (Larson, 2000). Homeless adolescents are more likely to be low in socioeconomic status and have no parental support since they are now living on the streets. Yet again, a homeless adolescent is at a disadvantage and is unable to have access to important protective barriers.

Financial Stability
Financial stability is an important component of an optimal living situation. Having financial strains can be a big stressor for adolescents (Hoyt & Whitbeck, 1999). On top of the stress, if they are faced with multiple negative events like death, drugs, divorce, or incarcerated parents, the different events can have negative effects on the adolescent, and can also lead to more mental health problems later (Whitbeck, 2009). A household that has food and provides a safe place for the adolescents is important for the ideal living situation. The ideal living situation must provide a place which allows the adolescent’s brain to fully develop with as minimal interference. Adolescents need to be able to grow cognitively and need to be able to soak in as much positive stimuli from their environment (Larson, 2011; Oberle et al., 2011).

**Homeless Specific Catalysts**

So far, this paper has discussed the environments that foster resilience for at-risk adolescents, but what is just as important are the environments and factors that cause adolescents to seek early independence. The living environments or situations that homeless adolescent, tend to leave are sexual, emotional, or physical abuse, mental health problems, drug and alcohol problems, poor performance in school, and family stress, such as financial burdens (Whitbeck, 2009). Almost all of the negative circumstances mentioned above cause adolescents to seek independence sooner which tends to lead adolescents to becoming homeless (Whitbeck, 2009). Due to the early independence, the development process is disrupted and leads to higher delinquency. The premature independence can make it difficult as well for the youth to rebuild their relationship with their parents (Hoyt & Whitbeck, 1999; Whitbeck, 2009).

**Sexual Abuse**

High levels of sexual abuse are reported in the adolescent homeless population. The percentages of abuse vary by study and population: in one study 24% of girls and 9% of boys
reported they were sexually abused (Hoyt & Whitbeck, 1999). In one study, Whitbeck (2009), broke down the population into homosexual and heterosexual females and males, and found differences between the groups. The most likely sexually assaulted groups were homosexual females at 46.5% and then heterosexual females at 30%. Of the homosexual men, 17.6% reported sexual abuse, whereas heterosexual men reported 8.9%. Whitbeck (2009), also found that homosexual men are more likely to report sexual abuse. In the same study, the adolescent’s average first time of being abused was at six and a half years old (Whitbeck, 2009). The high level of sexual abuse among the homeless adolescent population is a major cause of their running away and ultimately ending up homeless. Being sexually abused pushes adolescents to seek independence early on to get away from the parents or the people sexually abusing them (Whitbeck, 2009).

**Physical Abuse**

Physical abuse also takes place in many of the homes that adolescents end up prematurely leaving. The early departure due to the physical abuse can also lead to homelessness (Whitbeck, 2009). The adolescents are not only abused but may also witness their parents or other family members being abused as well (Kennedy, 2007). Violence in the homeless population seems to be very prevalent, with 20% to 22% in one study being exposed to just parental violence (Kennedy, 2007). In other studies the range is 38% to 73%, which is not conducive to positive development (Kennedy, 2007). Adolescents who are exposed to more violence tend to have higher rates of attention problems, lower grades in school, and behavioral and emotional problems (Kennedy, 2007).

Whitbeck (2009) found that, 70% of the adolescents reported physical abuse, whether it was having an item thrown at them, being punched, slapped, grabbed, being hit with something,
or some other form of abuse. In the study by Whitbeck and Hoyt (1999), 21% of the adolescents reported that a parent or caretaker threatened them with a weapon, and six percent of this population said they were assaulted with the weapon. In another study, 17% to 42% of homeless adolescents reported being physically abused by a parent or caretaker (Kennedy, 2007). Homeless adolescents who report being abused tend to perform poorly in school, such as having low grade point averages, and lower test scores, have more truancy problems, and have a higher chance of revictimization once on the street (Kennedy, 2007). Physical abuse has been linked to mental health problems, which is a vast concern for the adolescent homeless population (Berdahl et al., 2005). Being subjected to or witnessing physical abuse tends to force adolescents to leave home because they believe leaving is the only way to escape. Physical abuse also causes adolescents to seek independence sooner than they may have wanted to (Whitbeck, 2009).

**Drug and Alcohol Abuse**

Drug and alcohol abuse either by the parent or the adolescent is not an ideal environment to live in, but also can cause adolescents to become homeless. Sometimes they are thrown out because they do drugs, or they leave because they or their parents do drugs (Hoyt & Whitbeck, 1999). Of the adolescents who run away 4% to 52% stated that their parents or caretakers drug problems lead them to eventually leave (Hoyt & Whitbeck, 1999). In Hoyt and Whitbeck’s (1999) study, 65% of the adolescents reported living with a parent or caretaker with an alcohol problem and 44% reported their parent or caretaker had a drug problem. Drug and alcohol abuse by the parents or a caretaker leads to increased violence in the house (Hoyt & Whitbeck, 1999). The abuse of drugs and alcohol also tends to deteriorate the parent-child relationship (Hoyt & Whitbeck, 1999).
Adolescents living in an environment with drugs and alcohol describe their parents as less caring, unsupportive, abusive, and neglectful (Hoyt & Whitbeck, 1999). Hoyt and Whitbeck (1999) also found that drug and alcohol abuse leads to higher sexual and physical abuse rates in the home. Living in a household with parents or caretakers who abuse drugs and alcohol, can lead to negative outcomes in adolescents (Chassin & Haller, 2011). Adolescents are more likely to have poor emotional control and are also likely to have an increase in internalizing and externalizing problems (Chassin & Haller, 2011). Parental drug and alcohol abuse can lead to mediocre coping problems and maladjustment later in life (Chassin & Haller, 2011). Researchers have also found that homeless adolescents whose parents or caretaker abused drugs and alcohol, and whose grandparents did as well, were more likely to abuse drugs and alcohol themselves (Hoyt & Whitbeck, 1999). Drugs and drinking are nearly unanimous within the homeless adolescent population (Berdahl et al., 2005; Robertson, 1991; Whitbeck, 2009).

Adolescents of parents who abuse drugs and alcohol are more likely to become homeless (Hoyt & Whitbeck, 1999). Adolescents who are sexually and physically abused are also more likely to run away and become homeless (Hoyt & Whitbeck, 1999). Adolescents who are abused sexually or physical or neglected by a parent lose important social tie. As stated earlier social ties are buffers to help prevent adolescents from becoming homeless (Knickman et al., 1991). If homeless adolescents can no longer trust their own parents the severed relationship may add to the problem when the adolescent is trying to overcome being homeless.

Among the homeless population, alcohol and drugs is an immense problem. Depending on the study and the methods used, studies report that homeless adolescents are seven to twelve times more likely to use drugs compared to their housed peers. Other studies find that 69.2% to 72% drink alcohol, 62% to 67.5% use marijuana and 32% to 34.8% use hard drugs (Whitbeck,
In a few other studies, results show that homeless adolescents have higher rates of having an illicit drug use disorder, with a rate of 71 percent. Researchers also found 41% of the population abuse alcohol and drugs. In a study mentioned by Whitbeck (2009), he states that 39% of the adolescents meet the guidelines for having drug and dependency problems, and 48% meet the guidelines for alcohol abuse and dependency (Whitbeck, 2009). It is quite clear that drug and alcohol abuse in the home during adolescence has a negative effect on the development of the adolescent, but also leads them to perpetuate the cycle.

The high rate of drugs and alcohol abuse adds to the complexity of helping adolescents overcome being homeless. In cases were the adolescent is abusing drugs or alcohol, the adolescent should receive help with the addiction first. The chances are if the adolescent does not receive help for the drug or alcohol problem they may end up back on the street. On top of that homeless adolescents are most likely not going to have money to pay for a treatment center. For the homeless adolescents who are trying to overcome their situation, it may be more helpful to treat the drug and alcohol addiction first, and then find the adolescent a permanent shelter.

Some of the other situations that lead to adolescents leaving home are failing or dropping out of school, financial burdens and general family stress. Homeless adolescents tend to lack academic achievement, whether being due to physical abuse, developmental problems, mental illness, parental mental illness, or drug and alcohol abuse (Chassin & Haller, 2011; Hoyt & Whitbeck, 1999; Kennedy, 2007; Whitbeck, 2009). Homeless adolescents tend to have a disruptive education process due to the frequent running away, moving, or issues at home (Whitbeck, 2009). Homeless adolescents tend to be suspended or expelled more often than those who do not end up homeless. In Whitbeck’s study (2009), 76.9% of the males had been suspended, and 52.5% of the females had been suspended, and 46.8% of the males had been
expelled and 21% of the females had been expelled. In the same study, 21.1% of the males and 29.7% of females had dropped out of school more than once. Homeless adolescents are more likely to repeat grades compared to their housed peers (Rafferty & Shinn, 1991). According to self-reports, adolescents with learning disabilities are 37.7% of the population; the same adolescents stated they had been placed in special educational classes as well (Whitbeck, 2009). Most likely the higher chance of abuse, drugs problems, neglect from parents, and other problems, leads homeless adolescents to preforming poorly at school. Family stress, like financial burdens or living in poverty leads adolescents to leave home earlier. The adolescents feel that they are either a burden, or the family would be better off without them.

**Ineffectiveness of Protective Factors**

What has been illustrated thus far is that multiple factors affect the outcomes of adolescents in at-risk situations. One must first determine what the ideal situation is to live in that fosters a positive development. Which means that the environment and the life style of the adults and influences in the adolescent’s life become very important. Also social influences and factors that can either hinder or help protect the adolescent from becoming a victim to their at-risk situation. Homeless adolescents are more likely to have come from a home that does not provide an environment for a positive outcome. Homeless adolescences tend to come from families that financial struggle that depend on welfare or public benefits, or families that are already poor or living in poverty (Hoyt & Whitbeck, 1999; Jackson-Jobe & Solomon, 1992; Whitbeck, 2009). Those who are most likely to become homeless are surrounded by negative factors and influences. Homeless adolescents tend to lead lives void of positive influences such as a role model, feeling connected to school, youth activities and social ties.
A majority of homeless adolescents leave home due to emotional neglect but also the disorganization of the family and home (Whitbeck, 2009). Most homeless adolescents grew up in a home where they were deprived of basic needs, attention, and support (Whitbeck, 2009). As research has shown, being deprived of attention, support and monitoring by one’s parent can lead to a higher risk of depression, higher chance of becoming a delinquent, and maladjustment later in life (Giordano et al., 2011; Lennie et al., 2011). What is more, one must consider parenting styles, as adolescents who become homeless tend to come from families of neglect (Heinze et al., 2010; Kennedy, 2007; Whitbeck, 2009). Housed adolescents have less conflict, less abuse, and feel more love and care than their homeless counterparts (Heinze et al., 2010; Lennie et al., 2011). Homeless adolescents also report less monitoring and warmth from parents compared to their housed peers (Heinze et al., 2010). Adolescents that have run away report high levels of parent neglect, but also mistreatment by their parents (Hoyt & Whitbeck, 1999). Depending on the study and sample size, homeless adolescents ranging from 28% to 71.5%, or two thirds of girls and one half of the boys report they felt or were neglected by their parents (Hoyt & Whitbeck, 1999; Whitbeck, 2009). Adolescent’s report they were made to go a day without food, or abandoned for a day, were violently assaulted, or had an object thrown at them (Hoyt & Whitbeck, 1999; Whitbeck, 2009).

Once an adolescent is homeless the chances of the adolescent going to school regularly decrease drastically (Heinze et al., 2010; Hoyt & Whitbeck 1999; Whitbeck, 2009). A protective factor meant to help homeless adolescents stay in school is an amendment made in 2001, to the Stewart B. McKinney Homeless Assistance Act, which requires the school districts to provide transportation for homeless students to their last school they were enrolled in before they became homeless (Palmer, 2011). Unfortunately due to the tumultuous state of America’s economy states
are not receiving as much money so providing the free transportation becomes harder to do and the districts have to rely more on private donations (Palmer, 2011). Not only is getting to school a problem, staying at school seems to a problem for those who end up homeless. Homeless adolescents are more likely to have had truancy issues before they became homeless, and are more likely to have learning problems (Whitbeck, 2010). Homeless adolescents tend to do worse in school and get expelled or suspended more than their housed peers (Heinze et al., 2010; Hoyt & Whitbeck, 1999; Whitbeck, 2009). If homeless adolescents are not attending school then they are missing out on the opportunity to feel connected to school. Feeling connected to school has been shown to be a protective factor for at-risk youth and increase the chances of positive development (Herrera et al, 2010., Smith & Werner, 1992).

Another factor that increases resilience is having social ties. Overall homeless adolescents seem to lack social ties (Knickman et al., 1991). Many studies have shown that a lack of social ties and relationships is a factor and contributor to homelessness (Knickman et al., 1991). Housed peers and those who avoid becoming homeless report having more friends and family members, which means that they have more people to turn to, to ask for help (Knickman et al., 1991). What is more, the more friends, family members, or social ties the adolescent has, the higher the chance that someone may pick up on the distress of the adolescent or at least that they need help. Yet again, a significant protective factor is not available or lacking in the homeless population.

The studies that look at the effects of role models and supportive neighborhoods, the influence of parents, or structured youth activities are all geared towards adolescents and youth who have homes, and who have access to the resources. Researchers just assume that the homeless youth have all of the same basic needs, and advantages as their housed peers. The
researchers assume that adolescents have shelter which would both help protect them and allow the adolescents better access to the resources (Kiesler, 1991; Knickman et al., 1991). Once an adolescent is homeless, though, they forfeit having parental support, or social ties, or participation in sports teams and clubs. If the homeless adolescent is living on the streets and traveling from place to place, they have no connection to a neighborhood, or even feel connected to anyone in particular. Living on the streets is stressful; one is required to mature quickly and fend for themselves, which consumes the adolescents time, so they do not have leisure time to participate in clubs or on sport teams (Whitbeck, 2009). Homeless youth are greatly disadvantage because by the time they become homeless, the protective barriers are no longer as effective as when they were sheltered.

**Mental Health**

Not only does the homeless adolescent population already have many negative factors working against them, this population suffers from a devastatingly high rate of mental health problems (Whitbeck, 2009). Mental health problems are not only a reason why adolescents become homeless but also hinders their ability to overcoming being homeless (Hoyt & Whitbeck 1999; Whitbeck, 2009). There is a greater prevalence of mental health issues among homeless adolescents between ages 15-24 (Whitbeck, 2009). Many of the negative influences that impact adolescents, especially those who are homeless are on the verge of homelessness tend to lead to mental health issues. Some of the negative situations are a neglectful parenting style, parents that drink or suffer from mental illness, and adolescents who are deprived of basic needs and attention. (Bach et al., 1995; Berdahl et al., 2005; Chassin & Haller, 2011; Rafferty & Shinn, 1991; Whitbeck, 2009). The mentioned factors above have all been found to contribute to mental health issues in adolescents.
Research on mental health for the homeless youth population focuses on conduct disorder (CD), antisocial personality disorder (APD), depression, and post-traumatic stress disorder (PTSD). Conduct disorder is simply when someone has or displays numerous types of behavioral problems. APD is when a person has a long consistent record of violating the rights of others, manipulating or exploiting other people. Depression is described as not just sadness, but a lack of motivation or sleep, lack of interest, or feelings of hopelessness or worthlessness. PTSD is an anxiety problem that can develop after a traumatic event of some kind. Though the exact percent of those who suffer from a mental health disorder is not known, most accept that anywhere from one third of the homeless adolescent population to one half have a disorder (Kiesler, 1991). On top of that, most youth who suffer from one mental health issue are more likely to suffer from another of the listed disorders (Whitbeck, 2009). By the time they run away from home, homeless adolescents are already distressed or dealing with an issue they cannot control. Being on the streets just adds more stress and enhances their psychological symptoms, and may create new ones (Whitbeck, 2009).

An etiological study of mental health disorders showed that by age 14, fifty percent of all life time mental disorders occur and three fourths by age 24 (Whitbeck, 2009). Since the ages of 14-24 tend to be a time of developmental growth and a time when mental health and psychological issues tend to develop, one can see that homeless adolescents are dealing with multiple issues and factors all at the same time. If the youth do not get help for their mental health problems, they may never be able to cope with or learn ways to treat their mental health disorders.

One of the most highly researched mental health problems is conduct disorder. The reason being that disruptive behavior is one of the most common mental health problems for
youth (Whitbeck, 2009). The disruptive behaviors that could be a factor in why some homeless adolescents run away are staying out late past curfew, running away for a day, previous run-ins with the police, truancy issues, and existing drug problems (Whitbeck, 2009).

Depending on the study, researchers have found that anywhere from 53%-75% of homeless youth have conduct disorder (Whitbeck, 2009). Conduct disorder is more prevalent among males than females, who are likely to be more aggressive or act with aggression if they suffer from CD. Of the homeless male population, 58.8% report having CD at age 10, while only 47% of all homeless youth report meeting the criteria for CD that young (Whitbeck, 2009). In a study by Whitbeck (2009), he found that males are more likely than females to take part in many different disruptive behaviors in addition to running away.

If a homeless adolescent does meet criteria for conduct disorder, regardless of gender, they have a higher chance of abusing drugs and alcohol. The homeless adolescent is also more likely to meet criteria for major depressive disorder (MDE), and PTSD (Whitbeck, 2009). MDE is a mood disorder in which one feels depressed for a long period of time (Whitbeck, 2009). Of the general population of adolescents who meet criteria for CD, 30-50% of them will also meet the criteria for antisocial personality disorder, which is a very high rate considering only 4-6% of the general population only has APD (Whitbeck, 2009). In the homeless population, in Whitbeck’s (2009) study, 87.9% of the youth who had CD also had APD. If a homeless youth does have APD they are also more likely to abuse alcohol and drugs and suffer from PTSD and MDE. In Whitbeck’s (2009) study, 40.5% of the women with APD also suffered from PTSD whereas only 22.8% of the men suffered from PTSD.

Many homeless youth suffer from PTSD, because of abuse or continuously being a victim of traumatic events. If a youth does not suffer from PTSD, their chance of meeting criteria
for PTSD once they become homeless increases drastically. Once adolescents become homeless they are more likely to be victimized, exposed to more violence, become prey to sexual predators, or live in constant fear of becoming a victim of violence. Being homeless can be the greatest factor towards an adolescent developing PTSD. For adolescents who are vulnerable and are used to adult protection living on the streets can be exceptionally difficult (Whitbeck, 2009). In a study of 300 homeless girls, 53% of them were found to have PTSD (Goodman, Harvey & Saxe, 1991). In another study, researchers found that 35.5% of all homeless youth had PTSD (Whitbeck, 2009). In the study by Whitbeck (2009), he found that 92.1% of the youth who suffered from PTSD also suffered from at least one other mental health problem. PTSD in the general population of women ages 15-24 is 10.3% and men 2.8%, for ages 12-17 girls are at 6.3% and boys are 3.7% (Whitbeck, 2009). Adolescents are more likely to be vulnerable to PTSD because they have not yet experienced a traumatic event. For those who have, such as a death or sexual or physical abuse, they can become more vulnerable to developing PTSD later in life. Women tend to suffer from PTSD more than men, because they often experience more abuse more traumatic events; homeless women report higher rates of physical and sexual abuse compared to housed women (D’Ercole & Milburn, 1991). If a homeless youth suffers from PTSD they are also more likely to abuse drugs and alcohol along with having CD or APD. Homeless youth who do suffer from any one of discussed mental health disorders are more likely to be depressed.

Depression is another common issue, with homeless or runaway adolescents having a much higher rate of depression (Berdahl et al., 2005). Studies show that depression among homeless youth is often paired with drug and alcohol problems. Depressed adolescents have a higher likelihood of having another mental health concern: anywhere from 22% to 83% of the
adolescents who are depressed has another mental health problem (Whitbeck, 2009). Studies show that anywhere from 10% to 49% of homeless adolescents are depressed. When compared to the general population, only 10%-20% of adolescents are severely depressed (Whitbeck, 2009). A study performed by the American Psychiatric Association found that 62% of the homeless youth reported thinking about suicide (Whitbeck, 2009). Depression is more common in the homeless population because they are also more likely to have another family member who is depressed, which will affect them. They tend to have experienced terrible situations and have suffered from one or more traumatic events (Hoyt & Whitbeck, 1999). Homeless adolescents are more likely to have higher rates of street victimization, accidents and injuries (Berdahl et al., 2005). Homeless adolescents tend to believe that they have had more negative experiences and view their life negatively, are under more stress, and find that they do not know how to cope or find help. Not having a regular schedule, like going to school every day then coming home is very disruptive for at-risk youth. Not knowing where you are sleeping, not eating regularly, or just deciding to run away are major stressors. Having multiple stressors to deal with at a young age can lead to depression, especially when the youth feels alone (Kiesler, 1991).

Mental health problems run rampant in the homeless population, and that tends to be due to the negative factors in their life. Not only is mental health such a drastic problem but the combination of drugs and alcohol and the high comorbidity rate can make it difficult to help homeless adolescents. Mental health and drugs adds to the complexity of trying to help homeless adolescents because one would have to decide which issue is more important to address first. For instance if the homeless adolescent has CD as well as APD, and is addicted to a drug, do we send the adolescent to a rehabilitation center and then treat their mental health? What if the adolescent
drinks to cope with their mental health, do we treat the mental health disorder first and then try a rehabilitation center for the drugs? There is no rule or perfect way to tackle the issue on how to decide what is the best way in treating the homeless adolescent’s issues. Having such high rates of mental health and having an increased chance of being diagnosed with multiple mental health problems is a complex issue already, but then to add in all of the negative influences and protective barriers that failed, it becomes clear helping homeless people may be a complicated process.

**Conclusion**

Homeless adolescents suffer from an array of problems, or have multiple difficulties in their life that have led them to their current state. Each individual problem that a homeless adolescent suffers from can on their own most likely be dealt with and a solution can be found. The problem is found when all the issues are combined, because what may fix one issue may not fix or could possibly hinder another issue. The compounding of issues is what makes homelessness a complex and multi-faceted problem. The complexity of homelessness disallows for a general solution to be created that will fit every homeless person and situation.

A misconception though, is that an easy solution exists to solve homelessness. People assume giving homeless people a house, or money, or a job, or a ride to the shelter will provide the cure for being homeless (Kylyssa, 2011). For most people the solution is to find a permanent residence for the homeless adolescents, which is ideal since many issues that affect the homeless population can drastically decline if they have a permanent residence (Kiesler, 1991). However permanent residence is not always going to be the best solution. First cost of the residence is an issue, next one has to take into account the homeless adolescents mental health state, any drug or alcohol dependency issues, whether or not the homeless adolescent has any social ties, or a role
model to help them through this transition back into society. If the adolescent lacks social ties, or a role model, or does not further their education or is unable to get a job they are still lacking protective factors that could potentially help keep them from returning to the streets (Knickman et al., 1991; Koivisto, Vinokur & Vuori, 2010; Pappas, 2010; Whitbeck, 2009).

If one gives a homeless adolescent a shelter but does not treat their drug or alcohol problems then they may just use all of their money to feed their addiction and not pay rent. If they do that, they are most likely going to end up back on the streets. If the adolescent does not receive help with their mental health problems, they may not be able transition into the mainstream society, if they feel rejected from society they could just end up being homeless once again. Also if they do not receive help with their mental health issues, this could hinder their ability to acquire or keep a job or even go back to school. To help homeless adolescents, we need to examine all of the factors that affect the individual and then work on helping the adolescent.

Another misconception that is important to recognize regarding homelessness is the belief that one’s problems start when they become homeless. Most likely the problems started long before the person either became or chose to be homeless (NCH, 2009). Homelessness is not always a sudden event; there tends to be a build up to becoming homeless. It is important to recognize that being homeless does not just mean living on the streets; multiple factors tend to be found that lead the adolescent to end up on the street along with protective factors that failed to save the adolescent. On top of that, homelessness is a process that can be avoided and even fixed (Whitbeck, 2009).

Those who do help or work with adolescents need to be aware of the early signs or stressors that could lead to an adolescent becoming homeless. Now more than ever, due to the instability in the economy and the high poverty rates, and a high unemployment rate, there may
be a higher rate of homeless adolescents. Since the start of the 2008 recession, an increase of 18 percent of schoolchildren lack a real home, which means more than 900,000 children are homeless (Pitts, 2011). Every day one hears of another family losing their house or being laid off from their job which may lead the family to be homeless. If teachers, coaches, priests and other people who work with adolescents are able to act as protective factors by being a role model, helping the adolescent feel connected to school, or provide them with more social ties, they may be able to help prevent the adolescent from running away and becoming homeless. Even if a whole family becomes homeless, these same people may be able to provide assistance and help the adolescents during this time of their lives. If people who do work with adolescents are able to identify that an adolescent feels neglected at home, their parent’s relationship is unstable, a parent has died, or the adolescent is depressed, these community figures could lend a hand and help navigate the adolescent through this uneasy time in their life. In the case of the adolescent feeling neglected, the teacher or coach could possibly talk to the parents or give the parents information for someone who could help. In any case, now and until America’s economy stabilizes, those who work with adolescent need to be vigilant, in looking for early signs of stressor that can lead to the adolescent making drastic decisions such as running away and eventually becoming homeless. With that being said, homelessness does not discriminate due the economic state of a country; homeless people will always be found. As a society we need to be concerned all the time with homelessness and not when the poverty rate is extremely high.

An example of what teachers and those who help adolescent should be doing is what the principal at Whitney elementary, a public school, in Las Vegas is doing. Eight-five percent of her students are homeless whereas when she first started working at the school 75 % were homeless (Conder, 2009; Pitts, 2011). Due to the consistent increase in homeless students at her school she
has implemented many ways to help the students. The principal pleaded with parents to keep sending their children to school and she would take care of the rest (Pitts, 2011). The children receive free clothes, groceries to take home for their families, haircuts, eye checkups, dental exams, and many other services (Conder, 2009; Pitts, 2011). Even though these children are homeless, their scores on standardized reading test have doubled (Conder, 2009). If it was not for the principal, teachers, and other volunteers helping these homeless children and their families, the children would not be doing as well as they are now. Even though the adolescents are homeless, some of their basic needs are being met and they have social ties, feel connected to school and are receiving an education. Since some of their basic needs are being met and they have a number of protective factors in place, these adolescents may be able to become resilient to their at-risk situation.

In America the rising rate of homeless adolescents is quite alarming, and as a society we need to find a way to help the adolescents. We need to find a way to protect the at-risk adolescents before they feel like their only option is to leave home and become homeless. Though we need to be aware that being homeless is a complicated situation and for those who have never been homeless we are not going to fully understand the hardship and suffering that one feels from being homeless. Also as a society we must not judge so quickly and assume the worst of those who are begging and asking for handouts. Our society’s perspective on homeless people must change because until we can do that, we only detriment the process of trying to escape homelessness.

It is important to remember that many factors influence the choice of the adolescent to seek early independence and it is those influences that can have lasting impacts on the outcome of the adolescent. People do not normally choose one day to become homeless but find becoming
homeless as their only solution. For the adolescent who are in an unsuitable environment they are
desperate to get away, and that is when they can use a helping hand. Most of the time
homelessness starts at home with the parents, and their parenting style, and the protective factors
that failed to help the adolescent. That should be taken into account when examining the
adolescent homeless situation. The homeless adolescent population is in desperate need of help
because of the fragile developmental time they are going through in their life; this
impressionable time can have significant impacts on their future that may be irreversible (Larson,
2009). As a society, our job is to help the homeless adolescents before their situation or the
homeless situation becomes too complex to handle.


