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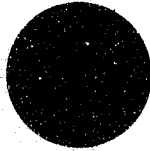
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juvenile justice and delinquency prevention

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PROJECT PROFILES

Treating Street Youth
Some observations



Treating Street Youth

Ever since the term "status offender" began appearing in legislative codes and juvenile delinquency research, there has been some disagreement over what the phrase "chronic status offender" refers to. Status offenses—offenses that would not be crimes if committed by adults—have been fairly well defined in most state juvenile codes, and research in juvenile delinquency has operated with somewhat standard working definitions of the term for several decades. A typical list of status offenses would include truancy, running away, curfew violations, and incorrigibility. But at what point does a status offender's behavior become chronic? And given the fact that chronic status offenders are often involved in a variety of survival crimes such as shoplifting, prostitution, and panhandling, isn't this definition somewhat arbitrary, or perhaps misleading?

The following article is an attempt, in part, to provide juvenile justice practitioners with a better working definition of the term "chronic status offender." It describes the needs, values, attitudes, and experiences of a group of street youth who sought assistance at Ogden House in Denver, Colorado. Not all chronic status offenders, of course, are street youth. But street youth are a highly visible subgroup within the chronic status offender population and thus possess the characteristics that many chronic status offenders have in common.

Street youth, as the term suggests, are youth who live on the streets—literally. For a variety of reasons, they either refuse to live at home any longer or have no home to return to. While many street youth can be reunited with their families successfully, many of these youths have families which are so destructive or disorganized that returning home is not realistic. Because the court sees them primarily as runaways, they are often categorized as chronic status offenders, though they generally have committed survival crimes as well as status offenses. They are "chronic" offenders because they have run away either from home, from a foster home, or from some form of court-ordered placement several times. Sometimes court officials are tempted to give up on these youth and let them continue to live on the streets. Other communities, ones with runaway programs like Ogden House, are struggling to find ways to reach these youth before the dangers of street life make it too late.

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I don't want your help—it hurts too much.

Barbara—Age 17

Treating Street Youth

Some Observations

On any given day in any major city in America there are hundreds of youth who have taken up permanent residency on our streets. They eat out of dumpsters, sleep in abandoned buildings, and sell their bodies to stay alive, and they do it every day. They have long histories with social service and judicial agencies, which consider them unamenable to treatment and resistant to any type of intervention. On the surface they seem angry, hostile, manipulative, and unpleasant. Underneath they are frightened, lonely, and vulnerable.

Street youth are a lost population. Having grown hard in a cruel environment, they no longer ask for help, and no one offers any. They do not expect to lead satisfying or successful lives. They hope only to survive.

In 1984, Ogden House, a project of Griffith Youth Services in Denver, Colorado, was created to develop more effective services for street youth. Its primary focus was to locate and reach out to this resistive and forgotten population. Since their most immediate and critical need is usually for some kind of shelter, a primary service in the project was a foster friends "bed and breakfast" program. In a nine-month period Ogden House had provided over 700 nights of shelter to street youth without a single serious problem and only a rare "no show."

To simplify the design of their programming, the staff at Ogden House chose to divide street youth into two categories: the chronic runners and the homeless. The first type, the chronic runner, had run away from a variety of living arrangements, including placements with families, relatives, foster and group homes, shelters, and residential treatment centers. The number of runs ranged from several to over a hundred. Most of these youth had been placed in at least three different living arrangements, and generally they had a residence to return to if they so chose.

The other type of street youth, the homeless, had no identifiable place of residence. There was no place to go where they were wanted. Some homeless youth began their street life as chronic runners. Some, however, had been pushed out and abandoned by their families. They had lived on the streets anywhere from two weeks to five years.

To understand more clearly the problems they were trying to solve, Ogden House staff conducted a series of in-depth interviews and discussions with sixty-two street youth who had gained sufficient trust in the staff to share their experiences candidly. Youth who were irrational, confused, or appeared less than candid were not included. The staff felt the information gathered from these interviews was sufficiently accurate to yield several important observations.

A History of Victimization

The similarities in their case histories were quite alarming. Most street youth (85%) were victims of sexual and physical abuse while residing in their own homes. Their first involvement with the youth service system came as a result of this victimization, either through running away or abuse referrals to appropriate agencies.

Even more alarming was how others—the courts, social service agencies, foster and shelter homes—responded to their needs. Most of the youth interviewed (75%) perceived the help they received as punitive or harmful. In many instances when the physically abused youth was removed from home, the perpetrator of the abuse stayed. Often the youngster was moved two to three times during the court's investigation, but when the investigation was finished, the youth was returned to the same abusive situation, with the abuser remaining in the home or having unrestricted access to it. In the end, nothing was done to stop the abuser. More than half of the youth who reported being abused in their homes were confined to detention centers or jails for either running away or misbehaving while in temporary shelter.

Very few of the youth interviewed could remember any therapeutic intervention or counseling that was directed toward resolving the hurt, fear, guilt, and anger resulting from their victimization. Consequently they often harbored unresolved trauma—destructive emotions causing destructive behaviors. Furthermore, many of them (40%) reported being victimized again while under the protection of the system. These episodes, most of which occurred while the youth was in confinement, involved assault, theft, and forced sexual behavior. Very rarely did they bother to report their



victimization. Some felt this sort of abuse was to be expected.

Almost all of the youth interviewed at Ogden House (90%) had long histories with helping agencies, yet these agencies for various reasons had been unable to intervene successfully in their problems. A typical case history would show: residence in two group homes, one foster home, four episodes of detention, several referrals to mental health agencies, temporary stays in all the runaway shelters, and numerous court appearances. Having exhausted all alternatives, these agencies may have simply given up, deciding in the end to reallocate their limited resources and energies to more responsive youth. In other situations they had no choice but to tell the youth to return home, fully knowing that home was not an option. Predictably, the youth regarded the experience as another episode of rejection, and in most cases simply returned to the streets.

It don't matter where you go, you always get hurt.

Kevin—Age 15

Yet life on the streets did not appear to be any better. Many (70%) reported being involved in survival crimes (shoplifting, prostitution, panhandling) while living on the streets, and victimization was just as frequent. All youth reported that crimes were committed against them, theft and rape being the most common.

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Traditional Services Don't Work

In addition to sharing their histories, they were asked to assess the quality of services they had received in the past. This information was invaluable to the staff, in that it helped them design a more creative program using nontraditional approaches.

Almost all of the youth reported that they did not want to stay on the streets. They dreamed of leading a normal life, but most of them no longer sought help from traditional services because they felt too alienated and did not want to risk further disappointment. Consequently, they would not seek assistance on their own.

Those places expect you to act normal. If I was normal, I wouldn't need to be there.

Robert—Age 15

Most of the youth were critical of the larger group homes and residential treatment programs. They complained that the programs had too much structure and that the staff were "preoccupied with control." Several mentioned that they felt the rules were designed to kick them out when they were no longer wanted. On the other hand, many street youth spoke of friendships they had developed with individual staff and volunteers, which they valued.

Some residential programs have rigid time limits on length of stay. Most of the youth could not understand the reasoning behind this, and as a result they would resist getting involved or become deliberately disruptive.

Reactions to foster homes were very intense and mostly negative. Forty-two youths had spent time in foster care, mostly as younger children or in their initial experience with "the system." Some enjoyed their stays, but the end result was always the same—a negative termination.

They were interested and wanted to help, but only for two weeks.

Donna—Age 15

They were either taken out of the home without explanation or kicked out because of behavior problems or "incompatibility." Seven of the youths reported being abused while in the care of foster families.

In every circumstance, these youth reported that the best placements they had experienced were with friends of the family, peers, or people they met on the streets who were particularly caring and helpful. Unlike their stays in group homes or with foster families, life with friends of the family or friends they'd made on the street was relaxed and casual. They received more attention and felt safe and accepted. Most of these arrangements, however, lasted only a few days to a few months.

Street youth appear to relate better to individuals than they do to families. Staying with people they regarded as friends usually proved more successful because the friend would be more likely to understand and tolerate the youth's problems, share the youth's interests, and be more accepting. Families were more difficult to adjust to because most street youth harbor unresolved and untreated anger over past abuse, neglect, and abandonment by their parents and other family members. Placing such youth in a family opens old wounds and generates angry feelings and negative behavior, and thus they respond to foster families as they did their own—usually with destructive results. In addition, to adjust to the set routines and expectations of family life may be too difficult a process for street youth.

Since street youth do not adapt very well to placement with families, outreach programs for this population should arrange temporary shelter with young single adults or couples. As volunteers, they can serve as role models in a street youth outreach program and may be able to offer the youth a genuine and honest friendship. Volunteer homes should be used as temporary housing only, however, and contact should be limited to mutually agreed upon recreation or other social activities. The most effective arrangements for these youth are in smaller settings, where there are limited expectations and few set routines, and each youth can receive a greater amount of personal attention.

The staff at Ogden House also avoided setting time limits on length of care, as they believed that putting

strict limits on how long a youth could be in a program was self-defeating. Programs that provide more than emergency shelter should consider serving fewer youth for longer periods of time. It is not fair—and in some cases, it is incredibly destructive—to expect a youth to invest in getting help and making a commitment to a program that automatically defaults when the time period is up.

In most situations, since street youth will no longer seek help from social agencies, programs wanting to reach this population must make an effort to locate them and provide them with services where they live. Outreach takes time; repeated contacts must be made and some initial trust has to be developed. At Ogden House, the most effective method of outreach was to maintain a constant, visible presence in the areas where youth and other street people congregate. Street workers should provide only what the youth wants (usually food, shelter, a bath, or a telephone call). Later, when some trust is established, other types of assistance can be offered.

Attitudes Toward Counseling Were Mixed

Most youth had mixed feelings regarding the counseling they had received. Many had more counselors than they could remember, and complained

that their counselors were often too busy or that they “really didn’t care” about their problems. One youth complained that his counselor “couldn’t remember my name”; another felt that his counselors were afraid of him. A third commented, “They never did what they promised.” But others found strength, compassion, support, and help in their counseling relationships.

Ogden House staff feel that three distinct but interdependent counseling services need to be available to street youth. First, the counselors need to provide the youth with some support (including advice on how to solve problems) and foster some initial trust building until the youth has made a commitment to the program and feels some ownership in it. Second, there should be some sort of clinical intervention available for the severe emotional trauma that is so common with many of these youth. This type of service, however, should be postponed whenever possible until sufficient support for the youth has been established. Third, any permanency planning activities should occur only after survival problems have been resolved. These services can be provided sequentially, but in many cases they may overlap.

More important than devising the right treatment methodology, however, is understanding the sequence of events that must occur when treating most street youth. These events include:

1. **Trust Building.** Initially, street youth are resistive and suspicious. They will test your tolerance and try to



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force you into rejecting them. They act out, they are angry, and they won't cooperate. But if they begin to feel that they have been accepted, that they aren't being judged, and that they will genuinely benefit from the program, they will make a commitment to it to the best of their ability. They then proceed to the second phase.



2. **Healing.** This stage begins when youth start to feel safe and secure. They are relaxed and comfortable. Survival and crisis no longer control their lives, drug and alcohol abuse has been minimized, and they begin to reconnect with their healthy side. One youth in the program, for example, read twelve books in three days; another cooked everything in the kitchen. They are usually on what is for them good behavior, and they feel as good as they can about themselves. Once the healing process has reached a certain level they advance into the next phase.

3. **Dependency.** Feeling good, for many of these youngsters, produces a desire to change the past. To recreate their childhood, they want staff and volunteers to become their parents, brothers, and sisters. Their behavior may become infantile and childish. They demand more and more attention and compete with others for favored status. They are confused, but not as hostile and suspicious. If the staff continue to accept

them and offer consistent positive responses, youth will begin to allow old emotions and unresolved issues to surface. Their pasts can now be explored and treated. To feel angry at their parents instead of themselves is, in some cases, a new experience. But with increased awareness of their feelings also comes the realization that they cannot recreate the past. Life will never be what it should have been. Their life history belongs to them and it can't be changed. Gradually they see that they can only go forward. This realization begins the final phase.

4. **Action.** Fear, anxiety, and anger are the dominant feelings street youth experience when they decide to help themselves. Some procrastinate and struggle with ambivalence and confusion. Others move forward with vigor and determination. Many of them want to live as normal adults. They have given up on childhood and adolescence, and now they want jobs, friends, healthy marriages, children, and comfort. This is a very difficult time for them because their failures are so frequent, their skills so limited, and their courage so fragile.

This phase of the transition from street life to normal adulthood takes the most effort. These youth often lack the basic social and personal skills one needs to survive as an adult, and thus it becomes critical to structure their experiences in a way that enables them to face up to the deficits they must overcome. They are understandably frustrated and frightened by their shortcomings. Their preoccupation with survival has stunted their emotional and psychological growth and deprived them of the opportunities they needed as children to identify and develop their talents and interests. Because of years of irregular school attendance, they have severe educational deficits and are alienated from most educational systems. Investing the necessary time, energy, and faith to overcome these obstacles involves an enormous personal risk; street youth often require a great deal of guidance before they can begin to set some realistic and achievable developmental goals. And most of all, they need continual support to avoid relapsing into their street life behavior patterns of opting for the false security of immediate results.

There is no way to predict how long it will take to complete this process of recovery. For some it takes several months, for others it may take years. But in either case, street youth have to be given the needed time and help.

The Importance of Volunteers

Volunteers play a critical role in programs for street youth. Most of the youth at Ogden House indicated that they missed having or were envious of others who had

normal relationships with non-street youth and adults, and were disappointed that they did not have access to such relationships. Developing friendships with healthy, well-adjusted adults is particularly important, because quite often the only adults they know well—their parents, pimps, drug pushers, and the like—are abusive and exploitative. At some point during their transition from street life to a more normal existence, they must learn that some adults *can* be trusted.

By serving as role models and friends to street youth in the program, volunteers at Ogden House provided the staff with a variety of highly personalized and valuable assistance. Properly trained volunteers may even be able to function as an extended family or support system that replaces the street network. On occasion, they may also provide emergency short term shelter and other survival needs. The staff at Ogden House encouraged the friendships they saw emerging between volunteers and street youth, especially when they were based on mutual interests and personality compatibility. Street youth respond to the genuineness and spontaneity of friendships offered by interested and accepting adults, and such relationships should be encouraged to continue beyond the youth's participation in the program.

Independent Living Services

No matter what their age, the street youth interviewed at Ogden House were almost unanimous in their unwillingness to reinvolve themselves in traditional youth services. They saw emancipation or semi-independent living as the only viable alternative to life on the streets.

Unfortunately, many of these youth are poorly

equipped to function independently in conventional environments. They are burdened with deficient social and vocational skills, they have no self confidence, their problem-solving abilities are poor, and they suffer from unrealistic expectations of what they *can* do. Furthermore, they do not respond well to authority, they have poor impulse control, and they are chronically distrustful.

Emancipation services need to be designed to address such needs, while at the same time giving the youth a

It don't work if you don't care.

Rikki—Age 14

significant degree of autonomy. Street youth in independent living programs must be allowed to learn how to make their own decisions, to explore their limits, and, on occasion, to fail. In fact, failure must be expected and understood, but staff members also need to encourage them to persevere.

Because street youth have had to face an enormous amount of disappointment and rejection and are filled with distrust and anger, they will not respond to any program unless it is offered in a genuinely warm, accepting, supportive, and nonjudgmental manner. Support services must be provided in realistic time frames that are designed to meet each youth's individual needs. Staff members should foster a sense of ownership in the program by allowing the youth to take part in decision making and problem solving. The staff must also anticipate, understand, and tolerate unconventional behavior. Most importantly, they must create a safe place for these youth to be as angry and afraid as they truly are.

It does work if you care.

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