

Homeless Youth

Sonoma County in Dubious First Place

SUMMARY

“*More youths on streets*” was the headline of an article in the June 28, 2019 edition of The Press Democrat. Citing a “substantial surge in young people counted during this year’s annual survey of homeless individuals in Sonoma County,” the article stated that the numbers raised troubling questions about how to serve vulnerable youth living on the street. This prompted the Sonoma County Civil Grand Jury (Grand Jury) to review the programs that the County currently has to serve the needs of its homeless youth population. The goal of the investigation was to identify any gaps in services, as well as measures that Sonoma County could take to prevent young people from becoming homeless in the first place.

While the number of homeless young people declined nationally from 2018 to 2019, Sonoma County experienced a double-digit percentage increase as illustrated in *Figure 1*. In fact, Sonoma County ranked first in the nation in the size of its homeless youth population when compared to all other similar communities in 2019. In the view of the Grand Jury, this dubious distinction offers the County an ideal opportunity to improve its performance in serving this unique and vulnerable subpopulation of homeless people.

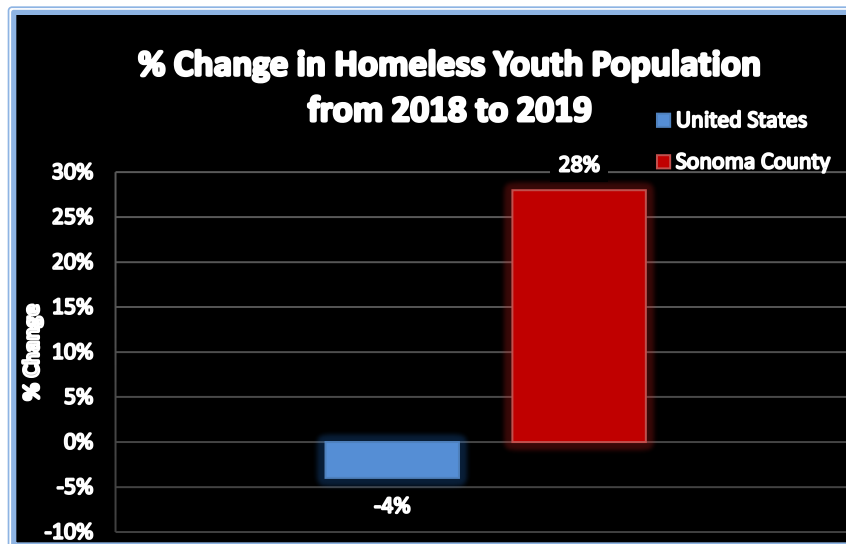


Figure 1.

Sonoma County is fortunate to have some exemplary programs for homeless youth, but the Grand Jury found that the scale of current programs and services is simply inadequate to address our sizeable homeless youth population. For example, there is a critical shortage of emergency shelter beds and there are gaps in mental health services and substance abuse treatment programs for young people.

The County’s distribution of state and federal homeless services funds has been disproportionate to the relative size of the youth subpopulation, which has contributed to the mismatch between

need and available services. Moreover, current federal and state funding for such programs and services is unpredictable, making it difficult to provide adequate services for the current population and impossible to build sustainable programs for the future.

It is widely accepted among those who work in the field that the money spent to prevent homelessness has greater impact and efficacy than money spent to address a person's needs after they have already become homeless. Preventive programs and services in other communities have been effective in reducing chronic homelessness¹ and achieving or approaching functional zero homelessness (rehoused within 30 days after becoming homeless) in certain subpopulations, for example, families, veterans and young people.

With this in mind, the Grand Jury has recommended that Sonoma County modify its programs and services, with the goal of achieving functional zero homelessness among young people. The Grand Jury has made cost-effective recommendations that, if implemented, will help meet that goal. The Grand Jury recognizes that homeless services are expensive, and we are not suggesting that the County simply spend more money on them — rather that if the County spends that money in some different ways it will achieve better outcomes than it has up to now. Clearly it will take creative solutions to prevent future youth homelessness, and this effort will require not just the combined work of the County and its service providers, but the resolve of the entire community.

SUBSEQUENT EVENTS

This Homeless Youth report became public in early May. Subsequently, the numbers for the 2020 Point-in-Time Census conducted in February were finalized, however they are not yet publicly available. The Grand Jury is pleased to learn that there was a significant reduction in the size of the homeless youth population when compared to the 2019 Census.

While the Grand Jury commends the County for making progress, the findings and recommendations in its report remain relevant, even more so now that economic fallout from the pandemic is expected to result in sharp increases in the size of the homeless population nationwide.

BACKGROUND

“On a single night in January 2019...” so begins the U.S. Department of Housing and Urban Development's (HUD) report on the results of the 2019 Point-in-Time homeless count. On that January night, 35,038 unaccompanied youth under the age of 25 were experiencing homelessness in the United States, representing six percent of the nation's total homeless population. On that same night, the Sonoma County Point-in-Time count found 657 homeless youth, or 22% of its total homeless population — three and one-half times the national percentage. The term “homeless youth” as used in this report combines two categories: individuals aged 12-17 (also sometimes referred to as “unaccompanied children”) who are homeless and not in the company of their parent(s) or other family, and Transition-Age Youth (TAY), homeless people aged 18-24.

¹ Homeless for one year or longer or four episodes of homelessness totaling 12 months in the past three years.

The survey referred to in The Press Democrat article is the Point-in-Time Homeless Census & Survey prescribed by HUD²; it is conducted in Sonoma County every winter under the direction of the Community Development Commission (CDC). The CDC posts the results online at sonomacounty.ca.gov/CDC/Homeless-Services/Homeless-Count/. The Point-in-Time census utilizes HUD's approved methodology, with the addition in Sonoma County of dedicated youth outreach workers to improve the accuracy of the count for unaccompanied homeless children and youth under the age of 25. It is widely recognized that homeless young people do not congregate with the general adult homeless population and can be located and identified more easily by trained and experienced peers.

The County conducts the count in a non-intrusive manner; therefore it is not precise. However, these reports provide the best numbers, year-to-year comparisons and insights that we have into the magnitude of homelessness in Sonoma County. The 2019 report tells us that despite the relatively stable size of the overall homeless population in recent years, the subpopulation of homeless youth increased significantly in 2019 from the prior year. In 2019, over 22% of Sonoma County's estimated 2,951 homeless individuals were young people and 94% of them were "unsheltered." HUD defines unsheltered as sleeping in a place not designed for or ordinarily used as a regular sleeping accommodation, such as cars, parks and abandoned buildings.

In addition to the census described above, the CDC conducts a survey in the weeks following the street count to obtain additional data about people experiencing homelessness. This survey is a sampling of the people counted in the census; it does not aim to cover every person counted. The County uses the survey results for funding applications and in planning programs to meet the needs of the County's homeless population. In 2019, the County used peer survey workers to conduct 520 valid surveys, establishing a 95% confidence level for generalizing results to the overall homeless population.

According to the *Homeless Youth Fact Sheet*, published by the National Coalition for the Homeless, young people experiencing homelessness have a harder time accessing services — including shelter, medical care and employment. This is partly due to the realities of living unsheltered (for example, inadequate personal hygiene, laundry facilities and reliable transportation), lack of knowledge of available resources and a dearth of services targeted to young people.

METHODOLOGY

The Grand Jury conducted extensive research in open-source documents, including the 2019 Homelessness Census & Survey, The Press Democrat's comprehensive reporting on homelessness, and other materials specific to homeless youth. In addition, the Grand Jury

² The U.S. Department of Education (DOE) also collects statistics on the population of homeless schoolchildren, which generally are higher than the HUD Point-in-Time count. This is because the DOE definitions differ from HUD's, for example, including homeless students who are in the company of their families and reporting every occasion of homelessness throughout the year, rather than a single point in time. The Grand Jury chose to rely on the HUD data, which are used to apply for federal and state funding for housing and homelessness programs. Sonoma County does not make DOE homelessness statistics public due to privacy concerns.

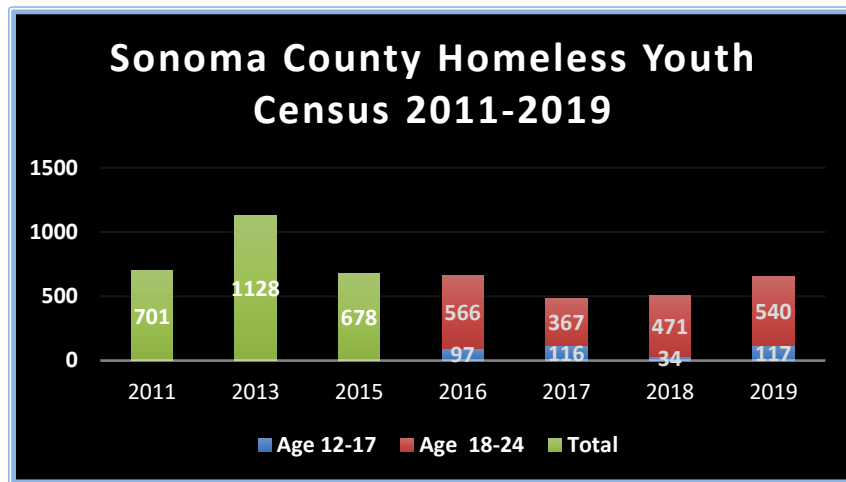
reviewed HUD resources on current best practices and the Youth Homelessness Demonstration Program (YHDP). The Grand Jury also:

- Researched a wide variety of Sonoma County materials relating to homelessness, including minutes of Board of Supervisors (BOS) meetings, Leadership Council of Home Sonoma County (established October 2018) meeting minutes and documentation and the County’s various plans to end homelessness issued over the past several years.
- Attended (either in person or by live streaming) BOS meetings related to homelessness.
- Interviewed County employees from BOS, Department of Health Services (DHS), the County Administrator’s Office (CAO), the Family Justice Center (FJC), Sonoma County Office of Education (SCOE), CDC and representatives of the Leadership Council of Home Sonoma County.
- Interviewed non-governmental organization (NGO) staff members and toured facilities that provide services to homeless youth.
- Toured County facilities at the FJC and the Juvenile Justice Center at Los Guilicos.
- Interviewed individuals who experienced homelessness as young people.

DISCUSSION

Sonoma County’s Homeless Youth

Although the County’s homeless youth population is down from its high point in 2013, the last two Point-in-Time counts show increases; the 2019 count was 36% higher than the low point in 2017.



Note: The available data is not broken down by age group for 2011-2015

Figure 2.

The 2019 Sonoma County Homeless Census & Survey report reveals the following significant statistics particular to this subpopulation:

- 67% are male, 33% are female and less than 1% are transgender

- 49% reported drug or alcohol abuse (compared to 35% of the overall homeless population)
- 32% spent a night in jail or prison in the last 12 months
- 28% identified as LGBTQ+
- 25% reported psychiatric or emotional conditions
- 23% reported trading sex for money or a place to stay
- 21% reported a history of foster care
- 13% reported being victims of sex trafficking

In the 2019 survey one statistic stands out that dispels the common belief that the homeless in Sonoma County came from somewhere else. In fact, 87% of those surveyed (all ages) were residents of Sonoma County at the time of housing loss. For the most part, homeless people are our neighbors and homeless young people are the County's children.

Overview of Sonoma County Programs and Services that Serve Homeless Youth

Sonoma County Departments and Commissions are responsible for providing services to residents of the County, including the homeless, although most programs are not specifically designed to serve the homeless. The agencies that provide the bulk of services to the homeless youth population are:

- Community Development Commission — the County's lead agency for housing, including development of affordable housing, rental assistance and homelessness programs. The CDC is also the designated lead agency for Home Sonoma County, a collaborative effort between the County and its cities. Among other responsibilities, Home Sonoma County reviews and makes recommendations for funding awards to non-government service providers that create affordable housing or provide shelter or services to the homeless.
- Department of Health Services — the County's provider of public health services, including the Behavioral Health Division (BHD), which includes mental health services, behavioral health services delivered through Youth & Family Services (YFS) and substance use disorders programs.

In a January 2020 restructuring, the BOS appointed the director of DHS to also lead the CDC on an interim basis, recognizing that housing is a healthcare issue.

The County also contracts with NGOs to provide services to the homeless youth population. For example:

- Social Advocates for Youth (SAY) provides emergency shelter for unaccompanied youth, emergency shelter and transitional housing for TAY, as well as a navigation center that offers counseling services, job training, career guidance and assistance in locating permanent housing. SAY also provides mental health services to youth as described in Appendix A of this report.
- VOICES provides community centers for youth who have aged out of, or are transitioning out of, the foster care system and losing their access to housing, education, employment and wellness services. VOICES utilizes a unique peer-based approach to

providing support services and encourages youth leadership and advocacy for youth in the community.

- Positive Images provides a community center for the LGBTQ+ population that offers support, advocacy and education programs. Support programs focus on mental health and wellness, self-care, confidence building and community. Positive Images also provides education about the LGBTQ+ community and its needs to BHD and to other NGO service providers.
- The Seneca Family of Agencies (Seneca) provides outpatient mental health services to youth needing therapy or help with behavioral health issues.
- LifeWorks Therapy Clinic provides outpatient mental health services to young people under a contract with YFS.
- Buckelew Programs provides mental health supportive services to people over 18 under a contract with BHD.
- Community Support Network (CSN) operates Permanent Supportive Housing (PSH) for homeless young people and former foster youth. They also operate several other residential programs in the County that offer a variety of mental health and addiction recovery programs to individuals aged 18 to 59.
- Verity provides counseling services to victims of sexual violence and trafficking through the FJC, regardless of housing status.
- TLC Child & Family Services provides housing and other services to young people aging out of the foster care system.

Emergency Shelter & Housing for Homeless Youth

Not all of the County's shelter options are available to or suitable for homeless young people. An individual must be at least 18 to use shelter beds provided by Catholic Charities, the largest provider of emergency shelter beds in the County. Unaccompanied children (12-17) are housed on an emergency basis at SAY's Dr. James E. Coffee House Teen Shelter (Coffee House), because other shelters do not take unaccompanied children. The Coffee House has five beds. SAY's case managers work with these children to try to reunite them with their families, other relatives or guardians within 72 hours. Should this fail they are referred to County authorities, whose priority is to reunite families.

Older youth (or TAY, 18-24) tend not to congregate with the adult homeless population and, as a result, do not often use the services provided by Catholic Charities even though they are technically eligible to do so. SAY offers emergency shelter for up to twelve young people at its Dream Center in Santa Rosa for stays averaging three to four months, during which time SAY staff prioritize getting them jobs, helping them find stable housing and connecting them with the services they need. The Dream Center also provides subsidized transitional housing, with 51 beds in private single or double-occupancy rooms. Youth may remain at the Dream Center while they stabilize their lives with counseling services, job training programs and education. Once stabilized, they may move to permanent housing, including renting an apartment where SAY holds the master lease and subsidizes rent. There is affordable housing at Tamayo Village, also operated by SAY, with room for 25 youth who are former foster children and formerly homeless young adults.

The County's 2019 housing inventory showed only 42 of 772 total Permanent Supportive Housing (PSH) beds available to youth; PSH beds require the occupant to have a disability.

Another category of housing, Open Permanent Housing, does not require a disability; 23 of 318 such beds were open to young people in 2019. In addition to these inventory numbers, CSN recently opened Sanctuary Villas, which accommodates eight formerly homeless youth, four of whom come from the foster care system.

All told, the County has accommodations for 161 young people, roughly enough for 30% of the currently homeless TAY population. These numbers do not reflect “unofficial” temporary placements in volunteer host homes; individual volunteers are sometimes called upon to shelter homeless youth when a safe emergency shelter bed is not available. All the beds for unaccompanied children, and the vast majority of beds dedicated for TAY, are located in Santa Rosa, even though there are members of this subpopulation throughout the County.

Services Available to Homeless Youth

Substance Abuse Treatment Programs

Drug abuse and addiction are common in the homeless youth population. Alcohol is the most common drug, followed by marijuana and other street drugs. Opioid abuse is also growing among this age group. While it provides extensive counseling services to address childhood trauma and mental health issues, SAY does not provide treatment for drug or alcohol addiction, which often co-occur with mental health issues. In fact, there are no Medi-Cal services for drug or alcohol addiction treatment in the County. Residential drug and alcohol treatment programs are only available to those with private-pay insurance, which effectively excludes most homeless people.

The County’s Substance Use Disorder & Community Recovery Services does not offer any programs tailored to the particular needs of young people. Research indicates that addiction treatment for young people, whose brains are not yet fully developed, requires different treatment protocols and is more effective when it is individualized to address underlying trauma. Nevertheless, young people are often placed in programs that are less than ideal for them, such as Alcoholics Anonymous or Narcotics Anonymous, because that is all that is available.

Mental Health Services

To say that the mental health services landscape is vast and complicated is an understatement. Many homeless youth have significant mental health issues that require treatment, including depression, anxiety disorders, post-traumatic stress disorder (PTSD), schizophrenia and suicidal thoughts. Young people who live in the County and need mental health services are eligible to participate in County mental health programs regardless of housing status. However, the County does not currently track housing status in a way that would allow the determination of how many homeless people utilize mental health or other health services or the cost of those services broken down by this metric.

Some of the mental health services available for young people in Sonoma County are County operated. The County DHS has the equivalent of 148 full-time employees in the mental health field, including case managers, support specialists, technicians, nurses and physicians. They provide face-to-face client services or clinical support to those services in institutions, clinics and the community for citizens of all ages.

Medi-Cal is an important piece of the mental health puzzle. It allows eligible young people to establish a “medical home” and access behavioral health services. Within the Medi-Cal system, the County is responsible for providing services to adults with Severe Mental Illness and children with Serious Emotional Disturbance (SED). Medi-Cal beneficiaries with mental health conditions that do not meet those criteria are eligible for “mild to moderate” mental health services benefits, provided by a Managed Care Plan (in Sonoma County it is Partnership Health Plan of California, which contracts with Beacon Health Options).

There are no Medi-Cal-covered, in-patient mental health services for youth under 18 who require hospitalization in Sonoma County. Those who require hospitalization are referred to services outside the County. The new in-patient mental health facility in Sebastopol is only available to individuals 18 years of age and older.

For those needing mental health treatment, but not hospitalization, BHD contracts with vendors to provide additional mental health services, which are described in Appendix A. The services provided by the County and through its contractors are critical to addressing the needs of the homeless youth population. However, multiple Grand Jury interviewees expressed concern that there are simply not enough Medi-Cal provider hours to meet the current needs for mental health services for homeless young people. As a result, many homeless young people with mental health issues remain underserved or unserved.

Additional Considerations

LGBTQ+ Youth

LGBTQ+ homeless youth face many special challenges. They are often homeless because their family has rejected them due to their sexual identity. Agencies such as Positive Images provide support services, advocacy and education to the LGBTQ+ population of all ages regardless of housing status. In the meantime, these young people are uniquely vulnerable, particularly the transgender population, and need to be housed in a safe environment as discrimination and hate crimes against LGBTQ+ individuals are still a fact of life in Sonoma County.

Sex for Shelter

Sex in exchange for housing reflects the economics of housing. Young people cannot afford housing; sex is a commodity that is exchanged for housing, according to survey results. This further emphasizes the need for more safe shelters for young people.

Outreach teams who make contact with unsheltered youth generally have supplies and informational referrals, which include support for safe sex, birth control and STD treatment. Unfortunately, future outreach services will likely be reduced due to budget constraints; for example, SAY is expecting a projected \$103,000 reduction in street outreach funding from CDC for next year.

Sex Trafficking

Sex trafficking involves the use of force, fraud or coercion to exploit someone for commercial sex purposes. Victims are often young and may have substance use issues, which traffickers cultivate in order to coerce victims to continue to engage in sex trade. Homeless or impoverished

individuals, minors from unstable homes, those who suffered abuse at a young age and those in foster care are particularly vulnerable to traffickers.

The Family Justice Center (FJC) is a model for conducting outreach to locate victims of sex trafficking, regardless of housing status, and navigating them through a broad portfolio of services, including counseling, medical, emergency safe housing, legal and other services. Victims of sex trafficking are typically the costliest homeless youth to treat because of the wide range and duration of services required to address the significant, deep trauma suffered.

Former Foster Care Homeless Youth

A sizeable portion of the homeless youth population has been in the foster care system. When children turn 18, they age out of the foster care system and no longer have access to housing and other benefits. Some former foster children leave the system before age 18, either as runaways or by becoming legally emancipated. Due to their young age and lack of access to resources, they are at particularly high risk for homelessness.

VOICES works with foster care and former foster care youth to help them find direction through goal setting, counseling and coaching. VOICES can assist these youths in locating housing, but it does not have any beds. SAY also provides services to former foster care youth, including emergency shelter, transitional housing, counseling and career services.

In 2001, the California State Legislature established a supportive housing program to address the needs of young adults who age out of or otherwise leave foster care. It assists them in making a safe and supported transition from foster care to adulthood. This program is the subject of a Request for Proposal (RFP) issued in January 2020 by the County's Family, Youth and Children's Services Department. The purpose of the RFP is to identify a service provider to supply housing, case management and supportive services to former foster youth ages 18-24 for up to 24 months while they complete their education and obtain employment. This program is a preventive measure aimed at reducing the incidence of former foster children becoming homeless. The County has allocated up to \$512,000 per year to this program. These services are currently being provided by TLC Child & Family Services.

Program Costs and Funding

Mental Health Services

For fiscal year 2019-2020 there are \$4.4 million in contracts for mental health services for youth, regardless of housing status. These contracts are for core, mandated Medi-Cal services and are funded by a combination of state and federal programs, with required County general fund participation. While there are no plans to reduce contracts or programming at this time, decisions for the 2020-2021 budget are not yet final.

Homeless Youth Programs Funding

The Leadership Council of Home Sonoma County awarded \$14.1 million to various homeless projects and services in 2019. Of this, \$1.9 million was awarded to youth-serving projects. While this amount far exceeded the minimum requirement for youth programs by the state funding

source, it still represented only 14% of the funds, while young people accounted for 17% and 22% of the homeless population in 2018 and 2019, respectively.

Funds totaling \$6.7 million will come from the state in 2020 requiring an allocation of at least 8% for youth programs; the County's applications have earmarked approximately 13% of the funds (\$867,000) for such programs. Again, while well over the minimum requirement, this allocation is disproportionately small compared to the size of the youth subpopulation.

One of the major concerns with funding from federal and state programs is that amounts are dependent on several variables, with no guarantee of funding continuity. The \$12.1 million received from the state in 2019 was a one-time event. State funding for 2020 is also a one-time grant, meant to cover homeless needs for the next five years. Because of the significant reduction in state funding from 2019 to 2020, the Leadership Council has announced an across-the-board reduction of 34% in funding for homeless programs for the 2020-2021 fiscal year.

Future funding from the state is unpredictable and contingent on the condition of the state's budget. Both state and federal funding are likely in jeopardy due to the economic impact of the COVID-19 pandemic. Moreover, the distribution of federal funds may be subject to political constraints.

Appendix B provides additional detail and analysis of the costs and funding of programs that serve homeless youth.

Best Practices

The Grand Jury identified several best practices that could be taken to reduce or prevent youth homelessness.

HUD Youth Homelessness Demonstration Program (YHDP)

This HUD program awards grants to communities each year to fund programs to end youth homelessness. HUD has awarded a total of \$151 million to 44 communities in three funding rounds. Projects have two-year grant terms and are renewable if they meet statutory requirements. Applicants submit detailed plans that include, among other things, a needs statement, goals and objectives, a timeline for planning and implementation, governance and projects. These plans are evaluated using strict criteria, resulting in a numeric score.

Seattle, which received \$5.4 million in Round 1 YHDP funding, reduced its homeless youth population by 28% from 2018 to 2019. The results from the 2020 count are not yet available. Sonoma County's CDC has applied for YHDP in all three years but was turned down each time, missing the cut-off score by just a few points. The CDC continues to apply for this funding each year.

One of the hallmarks of a successful YHDP application is community involvement, particularly the inclusion of a Youth Advisory Board that engages homeless youth to provide input and a reality check on the planning process. A lack of funding support from the County has so far stymied CDC's attempts to create such a board.

Early Intervention

One of the most effective deterrents to youth homelessness is recognizing when children are at risk and intervening to provide needed services and programs. The state of California has recently endorsed the use of the Pediatric Adverse Childhood Experiences (ACEs) and Related Life-Events Screener (PEARLS). This tool identifies exposure to childhood adversity and events that may increase a child's risk for toxic stress and negative health outcomes, including poor physical, developmental and behavioral health outcomes. The tool is free of charge and recommended for use in all child-serving medical-practice settings. The ACEs screened for include abuse, neglect, dysfunction in the household, hardship and other significant life events.

Physicians who use this tool can advise patients and their caregivers of resources available to address the identified risks. The Grand Jury observed that many of the adverse experiences screened for by PEARLS are also risk factors for future mental health issues, substance abuse and homelessness.

The Geelong Project

Geelong (a suburb of Melbourne, Australia) has been successful in reducing youth homelessness by preventing it from happening in the first place. Since 2013, three schools in Geelong have screened all students for their risk of becoming homeless or leaving school before 12th grade. Students who are identified as being at greater risk are connected with services such as rental assistance, mentorship and counseling. Operating on a \$1.2 million seed grant, the Geelong Project has reduced the number of youth entering homelessness by 40% and reduced the dropout rate at the pilot schools by 20%. This program's results illustrate the value of spending preventive dollars rather than trying to respond to homelessness after it occurs.

The "Upstream Project," modeled on the Geelong Project, was implemented in Hopkins, Minnesota public schools in 2019 in collaboration with the University of Chicago's Chapin Hall. The Geelong Project is also under consideration for a pilot in Tukwila, Washington schools (a suburb of Seattle) later this year.

Life Skills

Sonoma County is, no doubt, an expensive place to live. It takes, on average, 2½ minimum wage jobs to be able to afford rent here. Young people often lack the basic financial literacy and life skills that would help them navigate and thrive in this economy. Several high schools and universities across the country are now offering short (3-5 day) "Adulting 101" classes to teach basic financial literacy topics, including loans, credit history, budgeting, insurance and taxes. The California Department of Education has a library of financial literacy program resources available for grades K-12. Additionally, the California Bankers Association has financial literacy curricula available, and its member banks are encouraged to partner with schools and communities to lead these programs.

The U.S. Department of Commerce's Economic Development Administration recently announced a \$7.1 million grant of disaster relief funds to Santa Rosa Junior College (SRJC) to establish a construction trades training center at SRJC's Petaluma Campus. The center will offer short-term certification programs as well as credit programs from one to four semesters. The center will be able to produce 500 skilled construction trade workers per year when operating at

full capacity. According to the Sonoma County Economic Development Board, the County does not have enough skilled construction workers to meet current and future housing demands. This program presents an opportunity to provide marketable skills and job training to youth who are, or who are at risk for becoming, homeless.

COMMENDATION

To understand the needs of homeless youth and the programs that serve them, the Grand Jury met with representatives of NGO service providers and County employees from departments that provide direct services or engage third-party service providers. The passion and compassion shown by these people was remarkable. Without exception, they are extremely dedicated to their jobs and work tirelessly and creatively to provide appropriate services to this vulnerable population. This is so even though they face the challenges of inadequate resources, unstable funding sources and the considerable administrative demands associated with state and federally funded programs.

FINDINGS

The Sonoma County Civil Grand Jury determined that:

- F1. The critical shortage of emergency shelter beds for the homeless youth population limits the County's ability to serve this population adequately.
- F2. Shelter beds for homeless youth are currently concentrated in Santa Rosa, leaving inadequate services in other parts of the County.
- F3. Because the County lacks a Medi-Cal residential rehabilitation facility for young people with substance abuse disorders, homeless young people who need such treatment are at particular disadvantage.
- F4. The same substance abuse treatment protocols are being used for youth and adults even though research shows that young people need treatments designed for their particular age and needs.
- F5. The availability of outpatient mental health service provider appointments that accept Medi-Cal payments is inadequate to serve the number of youths requiring such services; more options are needed for therapeutic resources for children and young adults.
- F6. The County needs a short-term mental health facility that accepts Medi-Cal payments and serves young people.
- F7. Additional programs in schools are needed to provide marketable skills and financial literacy to young people.
- F8. The share of funding for youth homeless programs is disproportionately smaller than the relative size of the homeless youth subpopulation.
- F9. The majority of the County's efforts related to the homeless youth population focus on providing programs and services to young people already living on the streets, rather than programs to prevent homelessness in the first place.

- F10. The County's failure to fund a Youth Action Board has likely contributed to its lack of success in obtaining HUD's Youth Homelessness Demonstration Program funding.
- F11. The County does not currently track housing status in a way that permits a determination of how many homeless people it serves and the cost of those services.
- F12. Due to state and federal funding cuts, the Leadership Council has announced a 34% reduction for 2020-2021 that will severely affect the County's homeless programs and services across the board.
- F13. The lack of a stable funding source prevents the County from developing and implementing sustainable programs and services for homeless young people.

RECOMMENDATIONS

The Sonoma County Civil Grand Jury recommends that:

- R1. The Board of Supervisors commit to reducing the number of homeless young people in Sonoma County to functional zero within three years. (F9)
- R2. Sonoma County Community Development Commission increase the number of shelter beds for homeless youth, keeping in mind the needs for safe space for young people, by February 28, 2021. (F1)
- R3. Sonoma County Community Development Commission ensure that shelter beds for young people are available in all areas of the County with a homeless youth population, by February 28, 2021. (F2)
- R4. Sonoma County Department of Health Services contract with an existing in-County residential addiction treatment facility to set aside a small number of beds for youth, by February 28, 2021. (F3)
- R5. Sonoma County Department of Health Services establish a drug and alcohol program specifically designed to treat youth with substance abuse disorders, by February 28, 2021. (F4)
- R6. Sonoma County Department of Health Services staff a department with a sufficient number of Behavioral Therapists to meet the demand for Medi-Cal mental health services in the homeless youth population, by February 28, 2021. (F5)
- R7. If it is safe to do so, Sonoma County Department of Health Services set aside a small number of beds for unaccompanied youth in the new short-term mental health facility in Sebastopol, by December 31, 2020. (F6)
- R8. Sonoma County Office of Education form a partnership with a local financial institution to implement a financial literacy program for middle and high school students, by February 28, 2021. (F7)
- R9. Sonoma County Community Development Commission allocate funds to homeless youth programs and services proportionate to the size of the subpopulation in the most recent census data, when not otherwise constrained by restrictions on state and federal funds, for the FY 2021-22 budget cycle. (F8)

- R10. Sonoma County Department of Health Services conduct outreach to the local medical community to encourage the use of the PEARLS assessment tool and provide them information about County programs available to assist children who have experienced serious trauma, by February 28, 2021. (F9)
- R11. Sonoma County Office of Education, by February 28, 2021, begin monitoring the implementation and progress of the Upstream Project, in Hopkins, MN, and the Geelong model pilot project in Tukwila, WA, and consider implementing a pilot program on this model in Sonoma County. (F9)
- R12. Sonoma County Community Development Commission establish and budget for a Youth Action Board to improve the chances of federal funding through HUD's Youth Homelessness Demonstration Program, by February 28, 2021. (F10)
- R13. The Sonoma County Board of Supervisors and Sonoma County Administrator's Office identify, by December 31, 2020, a stable funding source to support sustainable programs that will reduce youth homelessness to functional zero. (F11, F12)
- R14. The Sonoma County Board of Supervisors and Sonoma County Administrator's Office develop and implement, by June 30, 2021, a procedure for County departments to consistently identify and track the cost of services provided to the homeless population. (F11)

REQUIRED RESPONSES

Pursuant to Penal Code §§ 933 and 933.05, the grand jury requires responses as follows:

- Sonoma County Community Development Commission (R2, R3, R9, R12)
- Sonoma County Office of Education (R8, R11)
- Sonoma County Department of Health Services (R4, R5, R6, R7, R10)
- Sonoma County Board of Supervisors (R1, R13, R14)
- Sonoma County Administrator's Office (R13, R14)

The governing bodies indicated above should be aware that their comments and responses must be conducted subject to the notice, agenda and open meeting requirements of the Brown Act.

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GLOSSARY

- ACEs Adverse Childhood Experiences
- BHD Behavioral Health Division
- BOS Board of Supervisors
- CAO County Administrator’s Office
- CDC Community Development Commission
- Coffee House Dr. James E. Coffee House Teen Shelter
- CSN Community Support Network
- DOE U.S. Department of Education
- DHS Department of Health Services
- FJC Family Justice Center
- FSP Full Service Partnership
- HEAP Homeless Emergency Aid Program
- HHAP Homeless Housing Assistance and Prevention
- HUD Department of Housing and Urban Development
- LGBTQ+ Lesbian, Gay, Bisexual, Trans, Queer and other gender identities
- NGO Non-governmental organization
- PEARLS Pediatric and Related Life-Events Screener
- PSH Permanent Supportive Housing
- PTSD Post-traumatic stress disorder
- RFP Request for Proposal
- Seneca The Seneca Family of Agencies
- SRJC Santa Rosa Junior College
- SAY Social Advocates for Youth
- SCOE Sonoma County Office of Education
- SED Serious Emotional Disturbance
- TAY Transition-Age Youth (homeless people between the ages of 18-24)
- YFS Youth & Family Services
- YHDP Youth Homelessness Demonstration Program

APPENDIX A

BHD - Contracted Mental Health Service Providers

- SAY is under contract to provide Specialty Mental Health Services on an outpatient basis to clients aged 0-25 referred by BHD. Using evidence-based protocols, SAY provides a variety of specialized therapies. The goal of these services is increased access to mental health, safe and stable housing and employment and to build skills for long-term, sustainable self-sufficiency.
- SAY also provides Therapeutic Behavioral Services, which are supplemental specialty mental health services for youth experiencing SED and behavioral problems that put them at risk for residential placement or psychiatric hospitalization.
- SAY's Full-Service Partnership (FSP) provides services to youth who have been hospitalized for psychiatric crisis or suicide attempts or who are at risk for hurting themselves or others. SAY also provides eight beds at its Tamayo Village facility for youth ages 18-25 who are participants in this FSP.
- Seneca's Outpatient Mental Health Services program provides specialty mental health services for any referred youth in need of therapy or other behavioral health services. The outpatient program offers a wide range of interventions based on each person's unique needs.
- BHD has a separate contract with Seneca to provide specialty mental health services through the Intensive Services Foster Care Program for foster youth (ages 4-21) identified as emotionally disturbed or who have a serious behavioral problem.
- LifeWorks Therapy Clinic offers six months of therapy services to children and families served by BHD. Services focus on building skills for self-sufficiency and sustainability. LifeWorks encourages parent involvement in child treatment and seeks to build openness and connection in families whenever possible.
- Buckelew Programs assists people ages 18 and up with serious and persistent mental illness to develop new skills, or enhance current skills, needed to self-direct their own lives and live independently. Buckelew provides mental health rehabilitation services, targeted case management and 24-hour urgent response.
- Additional mental health service providers include VOICES, Wellness and Advocacy Center, Interlink Self-Help Center and Petaluma Peer Recovery Center.

APPENDIX B

Program Costs & Funding

2019-2020 Mental Health Services for Youth Program Costs

PROGRAM	2019-2020 BHD CONTRACT
SAY	\$ 1.5M
Seneca	1.5M
LifeWorks	0.9M
Reserve for additional youth mental health services	0.5M
TOTAL	\$ 4.4M

The \$4.4 million in contracts for mental health services for youth, regardless of housing status, for fiscal year 2019-2020 represents 24% of the YFS total budget and 5% of the overall BHD budget. These contracts are for core, mandated Medi-Cal services and are funded by a combination of state and federal programs; County general funds are required to supplement the Federal Financial Participation (roughly a 50/50 split). While there are no plans to reduce contracts or programming at this time, decisions for the 2020-2021 budget are not yet final.

2019-2020 CDC Homeless Programs Costs

The County was the recipient of new, one-time state Homeless Emergency Aid Program (HEAP) funding of \$12 million in 2019, which tripled the CDC’s usual funding. Together with additional federal funding, a total of \$14.1 million was awarded by the Leadership Council of Home Sonoma County to various homeless projects and services in 2019. HEAP required a minimum allocation of 5% (or \$605,000) go to youth-serving projects. While the \$1.9 million awarded to such projects far exceeded the minimum requirement, it still represented only 14% of the funds, while young people accounted for 17% and 22% of the homeless population in 2018 and 2019, respectively. The Leadership Council made awards to the following youth programs:

PROGRAM	2019-2020 AWARDS
HEAP AWARDS	
SAY (Outreach)	\$ 308K
SAY (TAY Homeless Prevention)	105K
SAY (Dream Center Emergency Shelter)	150K
SAY (TAY Winter Shelter)	50K
SAY (Rapid Re-Housing)	157K
TLC Child & Youth Services (THP+ Expansion)	306K
CSN (Sanctuary House PSH Operations)	74K
CSN (Sanctuary Villa Capital Development)	750K
TOTAL HEAP AWARDS TO YOUTH PROGRAMS	\$ 1.9M
CONTINUUM OF CARE AWARDS	
SAY (Sponsor Based Rental Assistance)	\$ 237K
CSN (Sanctuary Villas)	62K
TOTAL CONTINUUM OF CARE AWARDS TO YOUTH PROGRAMS	\$ 298K
TOTAL AWARDS TO YOUTH PROGRAMS	\$2.2M

Funds totaling \$6.7 million will come from the state in 2020 from Homeless Housing Assistance and Prevention (HHAP). HHAP requires an allocation of at least 8% for youth programs; the County’s applications have earmarked approximately 13% of the funds (\$867,000) for such programs. Again, while well over the minimum requirement, this allocation is disproportionately small compared to the size of the youth subpopulation.

One of the major concerns with funding from federal and state programs is that amounts are dependent on several variables, and there is no guarantee of future availability. The HEAP funding received from the state of California in 2019 was a one-time event. HHAP is also a one-time grant to meet homeless needs over a five-year period. Because of the significant reduction

in state funding from 2019 to 2020, the Leadership Council has announced an across-the-board reduction of 34% in funding for homeless programs for the 2020-2021 fiscal year. Future funding from the state is unpredictable and contingent on the condition of the state's budget. Moreover, the distribution of federal funds may be subject to political constraints.

Reports issued by the Civil Grand Jury do not identify individuals interviewed. Penal Code Section 929 requires that reports of the Grand Jury not contain the name of any person or facts leading to the identity of any person who provides information to the Civil Grand Jury.