Coordinated Community Plan To End Youth Homelessness

Oahu, Hawaii
2020
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- CCP Partner Chart
- CCP Action Plan with Objectives, Timeline, Partners
- YHDP Request for Proposals
- Signatures of Endorsement

*Cover Art created by the O’ahu Youth Action Board, logo by Kehaulani Repolio.*
Call to Action

On behalf of youth who are involved in this project:

“If you are reading this plan you are likely to be someone who cares about preventing youth homelessness, and helping youth who are dealing with life on the streets or who are in shelters but worried about what the future holds. OYAB members are proud of this plan and of our part in creating it, but the work doesn’t end here. This plan will only work if everyone does their part”.

Oʻahu Youth Action Board (OYAB)

On behalf of the Oʻahu Continuum of Care:

“We must do better. As a community we cannot tolerate having large numbers of youth and young adults experiencing homelessness. We know that homelessness is a complicated problem, that the faces and stories are all different, and that the solutions won’t be quick or easy. It has been extremely encouraging to see people from different sectors and systems, working alongside OYAB members, to understand the forces that drive youth homelessness on Oʻahu. Together we have come up with a plan that can guide us in the coming years. Partners in Care (PIC), as the Continuum of Care (CoC), is ready for the challenges and opportunities presented by this plan, and by YHDP funding. We have brought together an amazing group of people and we will continue to draw on those with expertise and experience from Hawaiʻi and beyond”.

Laura Thielen, Executive Director, Partners in Care
Acknowledgements

Thank you to the U.S. Department of Housing & Urban Development (HUD) for providing the Youth Homeless Demonstration Program (YHDP) grant, and for their invaluable technical assistance and guidance as we work towards our vision and goals.

The Coordinated Community Plan (CCP) for O‘ahu is the result of sustained community engagement across multiple sectors and systems, led by the O‘ahu Youth Action Board and the CCP Steering Committee.

O‘ahu Youth Action Board Members – Past and Present (Present Members *)

- Shai-Ann Barcarse
- Brian Esquivel*
- Victoria Faumuina*
- Brandy Gouveia*
- Kaizy Kahalaionmi*
- Bryson Kahaleu
- Tehani Hemakana Keohuloa*
- Mekena Lemapu
- Anela Lum*
- Pualani Moses-Puapuaga
- Sarah Nakea
- Nati Pefua*
- Roderick “Cosmo” Pising
- Kehaulani Repolio*
- Tiare Talo*
- Asty Tison
- Victoriano Tumbaga*
- Joshua Vares*

YHDP Steering Committee

- Laura Thielen – Partners In Care
- Sharon Baillie – Partners In Care
- Charmaine McCladdie – Partners In Care
- Carla Houser – Residential Youth Services and Empowerment (RYSE)
- Kathryn Boyer – State Department of Human Services – Child Welfare Services Branch
- Kintaro Yonekura – State Department of Human Services – Child Welfare Services Branch
- Deborah Smith – Hale Kipa
- Alika Campbell – Hale Kipa
- Rebecca Chavez – Waikiki Health
- Judith Clark – Hawai‘i Youth Services Network
- Toby Portner – Hawai‘i Department of Education
- Bri Levy – Hawai‘i Department of Education

And to our consultants and technical assistance providers – we couldn’t have done it without you!

Piper Ehlen, Alicia Lehmer, Nora Lally, George Martin and Matt Olsson from Home Base
Valerie Nash from Nash & Associates
Community Partners

Local and State Government
- City and County of Honolulu - Department of Community Services, Mayor’s Office of Housing
- Hawai‘i Governor’s Office on Homelessness
- Hawai‘i Department of Education - Office of Student Support Services
- Hawai‘i Department of Human Services - Benefit, Employment & Support Services Division, Office of Youth Service, Child Welfare Services Branch
- Hawai‘i Department of Health - Child & Adolescent Mental Health Division, Alcohol and Drug Abuse Division, Harm Reduction Services Branch, and Sexual and Gender Minority Workgroup
- Hawai‘i Department of Defense - Hawai‘i National Guard
- Hawai‘i Department of Public Safety
- Hawai‘i Interagency Council on Homelessness

Other Public Agencies and Departments
- U.S. Department of Defense Educational Authority
- Office of Hawaiian Affairs
- Honolulu Police Department - Law Enforcement Assisted Diversion Project
- Hawai‘i Youth Correctional Facility
- State Public Charter School Commission
- State Judiciary - Adult Branch

Community Stakeholders
- Boys and Girls Club of Hawai‘i
- Child & Family Service
- EPIC ‘Ohana
- Family Promise of Hawai‘i
- Gregory House Programs
- Hale Kipa
- Hawai‘i Appleseed Center for Law and Economic Justice
- Hawai‘i Health & Harm Reduction Center
- Hawai‘i Homeless Healthcare Hui
- Hawai‘i Lodging and Tourism Association
- Hawai‘i Youth Services Network
- Kamehameha Schools
- Liliuokalani Trust
- Parents and Children Together
- Partners in Development Foundation
- PATCH
- Queens Medical Center Emergency Department
- Residential Youth Services and Empowerment
- River of Life Mission
- Safe Haven, Mental Health Kokua
- Steadfast Housing Development Corporation
- Susannah Wesley Community Center
- The Harry and Jeanette Weinberg Foundation
- The Institute for Human Services
- University of Hawai‘i
- Waikiki Health
- We Are Oceania
- Catholic Charities Hawai‘i
Vision

This vision was initially developed by O‘ahu Youth Action Board (OYAB) and has been adopted by the larger CoC as the shared vision for the Coordinated Community Plan (CCP).

There are no youth\(^1\) sleeping in tents on sidewalks or sleeping in parks on O‘ahu. Youth are safe, have a roof over their head, and are not exposed to violence or exploitation. If youth become homeless, it is a temporary situation because there is a well-run system in place to help them – as soon as they are ready and want help.

Vision elements – how we see this vision being achieved:

- Youth do not “age out” of housing, and there aren’t strict and unreasonable time limits on housing supports.
- There are welcoming drop-in centers and housing programs for youth across the island operated by well-trained, well-paid people who know how to work with youth and who care.
- Resources are available for childcare, transportation, and help with basic needs like food and hygiene supplies.
- Youth have access to opportunities and services that support them to get clean and sober and build themselves up – if they want to and when they are ready.
- Youth wellness is seen as a priority and all youth have access to high quality healthcare to support physical, mental and oral health.
- An economic ecosystem that creates pathways to living wage careers in which youth find purpose and meaning, not minimum wage jobs in retail and food service.
- Programs and services tailored to the specific needs, ages and life experiences with particular focus on youth who are pregnant or parenting, under age 18, who have had history with foster care, or have had interactions with the justice system.

\(^1\)Throughout this document the term “youth” is used to include individuals between the ages of 12 and 24.
**Talk Story**

Every youth experiencing homelessness on O‘ahu has a story about who they are, where they have been, what they have experienced, and what they want for themselves and their families. These stories are as important, maybe more important, than numbers and percentages shared later in this plan. The following are some of the many stories shared by youth over the past months.

“People need to know that everything about being homeless and getting back on your feet is harder than it looks. There’s always distractions and drama. It takes time to build the right connections and a solid support system. It’s taken months for me to get where I am right now. In just a few weeks me and my son are going to be moving into permanent housing. I have a job lined up. I’m proof that things can get better, that things are not completely hopeless for those who reach out and ask for help”.  **April**

“No one wants to go to an adult homeless shelter, I don’t like the word homeless, that word scares me”.  **Anonymous**

“Taken is real. Making me sleep on a hotel balcony night after night looking out at the lights. I was his property, he kept me isolated, ostracized, afraid. Trapped and exploited. People thinking I’m just a crack-head whore, doing a job, looking the other way. The Alphabet Boys\(^2\) picked me up, interrogated me, then dropped me off in a parking lot. It was 2am and I was 18. I did escape, I ran with a price on my head into the mountains. One person saw me and helped. Now I’m not alone, and not being alone makes self-worth possible. I’m an artist, a survivor, a leader. I have friends, a fiancé, a home, a future”.  **Kehau**

“Being homeless is a rough time, but no matter what happens remember to keep pushing forward. When I was homeless, I did what it took to be safe, I used to ride the buses for as long as I could. Sometimes I would only get two to three hours sleep. The whole time I was homeless I had a job, I was working in a restaurant washing dishes. I just couldn’t afford my own place. Now I’m going to be moving to a new place with a lot more opportunity. My advice would be, even after you lose everything always keep going, keep thinking positive”.  **Rajive**

“Even though there are services and resources for Native Hawaiian youth you can’t always get them. You either have too much of something or not enough of something. My homelessness began when I was young. My Mom and Stepdad both used drugs and couldn’t take good care of me and my sisters. At one time we were living in the park. I was 17 and they were 11 and 6, I had to look after us. The school knew we were homeless, they gave us bus passes, but I didn’t go to school I worked. Now I have a baby, she’s two and my second daughter will be born in June. Right now I’m in the shelter, just temporarily until I can move into a house with my partner”.  **Tati**

\(^2\) Slang term for federal government law enforcement agencies
Coordinated Community Plan Goals

The following goals were developed by community stakeholders, approved by OYAB and the YHDP Steering Committee and will be used to guide the Coordinated Community Plan.

SYSTEM CHANGE
Goal 1: The O‘ahu CoC has effectively mobilized and prepared cross sector stakeholders, including youth with lived experience, to address youth homelessness as a priority concern.

Objectives:
1.1. Engage usual and unusual stakeholders to support and sustain the CCP vision, goals and strategies.
1.2. Pursue an understanding of racial inequities in the experience of youth homelessness and use this information to inform systems-level change.
1.3. Improve data quality and system capacity to identify and assist youth experiencing homelessness, including youth from special at-risk populations.
1.4. Provide access to professional development and TA opportunities that support and build capacity of staff to serve youth experiencing homelessness, and reduce disparities based on race/ethnicity, LGBTQ, Pregnant or Parenting status, and system engagement.
1.5. Ensure that OYAB is sufficiently developed, resourced, and supported to provide ongoing, meaningful, and direct input on system planning and implementation.
1.6. Engage youth in efforts to change policies and actions - relating to justice, housing, education, workforce, and healthcare systems - that make it difficult for youth to establish stability.
PERMANENT CONNECTIONS
Goal 2: All youth are connected to stable, caring, positive individuals who can guide and support them as they transition to adulthood.
Objectives:
2.1. Connect or reconnect youth to family including chosen family whenever possible and safe.
2.2. Build skills that support youth ability to sustain healthy relationships.
2.3. Strengthen youth connection to Native Hawaiian, Micronesian, or other Pacific Islander cultural values and community.
2.4. Create access to positive recreation and community-based youth development opportunities for youth who are experiencing homelessness.

PREVENTION & DIVERSION
Goal 3: The numbers of youth who experience first time homelessness, or returns to homelessness, has been drastically reduced.
Objectives:
3.1. Provide services and supports that strengthen families and address root causes of housing instability.
3.2. Identify youth who are at-risk for homelessness, or experiencing homelessness as early as possible and connect them to resources.
3.3. Advocate for legislative and system change (see also System Capacity).

STABLE HOUSING & SUPPORTS
Goal 4: All youth who experience homelessness have access to safe and supportive housing and any needed wraparound services.
Objectives:
4.1. Ensure low barrier entry into the Youth Coordinated Entry System.
4.2. Expand inventory of RRH/TH and PSH beds for youth.
4.3. Explore alternative and innovative housing options.
4.4. Connect youth to coordinated care and individualized supports before and after they are placed into a housing program.
EDUCATION & EMPLOYMENT

Goal 5: All youth who experience homelessness have access to a diverse array of educational or vocational training options that meet their needs and lead to meaningful, self-determined, and sustainable employment.

Objectives:

5.1. Leverage existing education, post-secondary education and workforce development opportunities.
5.2. Develop new employment readiness and job placement programs for youth who are experiencing homelessness.
5.3. Integrate supports that reduce barriers to access to education or employment opportunities.
5.4. Increase access to educational and vocational training scholarships and other financial resources.

SOCIAL EMOTIONAL WELLBEING & HEALTH

Goal 6: All youth who experience homelessness have access to client-centered, culturally appropriate, and affordable or free services that support health and wellbeing.

Objectives:

6.1. Facilitate access to a range of substance abuse treatment options, including residential care.
6.2. Provide trauma informed, evidence based mental health services.
6.3. Provide training and education to youth that builds their knowledge of healthy practices and which uses evidence-based curricula and approaches.
6.4. Facilitate access to services that support optimal physical health.
# Guiding Principles for Development and Operations of the Coordinated Community Plan

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<th>Principle</th>
<th>How it will be Operationalized</th>
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Guiding Principles for Effective Practice

The United States Interagency Council on Homelessness (USICH) core principles of effective practices will guide planning and delivering of YHDP funded projects and the CCP.

Positive Youth Development (PYD) – Youth experiencing or at risk of homelessness need to be able to experiment and try new things. They need to be able to fail and try again in a supportive environment without life-altering consequences. A PYD approach recognizes and serves this need. PYD practices that are included within the CCP and YHDP are:

- Youth/adult partnerships integrated within the YHDP development, governance and decision-making processes.
- Opportunities for youth leadership and training and supports to build youth leadership skills and capacity through OYAB.
- Affirmation of youth identity, including gender, sexual orientation and cultural identity.
- Services and supports that incorporate an understanding of the physical, cognitive, emotional and social needs of developing adolescents.

YHDP projects will be required to incorporate a PYD approach that is strengths-based, and which identifies and develops individual youth’s assets while simultaneously building protective factors and resiliency. Examples of PYD activities that are part of the CCP are:

- Youth Focused Housing First.
- Supportive services to work with youth to develop a plan and set personal goals.
- Connection to education, employment or entrepreneurial opportunities.
- Healthy recreational and social activities based on youth’s interests.
- Education to support development of life skills.
- Mentoring, coaching to support development of personal connections.
**Trauma Informed Care**\(^3\) – Trauma refers to an experience that creates a sense of fear, helplessness, or horror, and overwhelms a person’s resources for coping. Homelessness is a traumatic experience. Youth experiencing homelessness are under constant stress, unsure of whether they will be able to sleep in a safe environment or obtain a decent meal. In addition to the experience of being homeless, an overwhelming percentage of homeless youth have been exposed to additional forms of trauma, including neglect, loss of a parent or caregiver, family violence, physical abuse and sexual assault. The experience of trauma can result in physical and mental health problems, and can impact cognitive development, decision-making, and self-regulation of aggression and anger.

Trauma Informed Care (TIC) involves understanding, anticipating, and responding to the issues, expectations, and special needs that a person who has been victimized may have. Ways in which a TIC approach will be incorporated into the CCP and YHDP projects include:

- Training and technical assistance will be provided to ensure that CoC partners who interact with youth experiencing, or at risk of homelessness, include an understanding of trauma into their work.
- Implementation of universal screening for trauma history and youth strengths as part of coordinated entry and program intake.
- YHDP projects will be required to demonstrate how they will integrate TIC into their services, specifically how they will:
  - Screen and assess for trauma and develop individualized youth-centered service plans that are strengths-based.
  - Emphasize physical and emotional safety through privacy, confidentiality, mutual respect, and welcoming and inclusive environments.

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o Support youth choice, personal control over decisions that impact them and opportunities for self-advocacy.

o Address diversity (e.g., gender, ethnicity, sexual orientation).

o Help youth build skills and coping responses that help them navigate any future adverse experiences that could re-traumatize or trigger them, such as racial discrimination, homophobia, stigma relating to mental health, and child welfare and justice involvement.

o Incorporate access to evidence-based trauma-specific services, including treatments for mental disorders resulting from trauma exposure, that are designed to directly address the impact of trauma, with goals of decreasing symptoms and facilitating recovery.

o Support identify protection, especially for youth who identify as LGBTQ or who are Native Hawaiian or Micronesian.

Individualized and Youth-Driven Supports – While we can recognize shared experiences and common characteristics among youth experiencing or at risk of homelessness on Oʻahu, we also see that every youth has their own unique personality, set of circumstances and preferences. The Oʻahu CCP will provide youth a range of services that are voluntary, individualized, culturally appropriate, and accessible, and that address an array of needs to support housing stability, mental and physical health needs, education, employment, and life skills.

● CES screening tools, referral processes and policies will serve to ensure that individual needs are identified and addressed.

● YHDP will meet an identified need to connect youth to a person (i.e. case manager or housing navigator) who can work with them to establish individualized transition or service plans based upon youth determined goals, as opposed to pre-set program requirements. Some youth will need less services than others, while some will need intensive and ongoing support and connections to multiple programs.

● CCP includes projects that meet youth where they are at – both figuratively and literally (i.e. in new locations or mobile-services) and which operate with a “no wrong door, no door closed” philosophy to reduce barriers to access

Youth Choice – Incorporating a youth choice approach means that youth can choose to engage in services, or not. This philosophy is also central to Housing First – to provide access to supports based upon choice, and not require participation in programming as a condition for receiving housing. What service providers think a youth may want or need, may not be accurate or may not reflect a good understanding of where the youth is at. The experience of trauma
often involves abuse of power, and youth who have been abused and exploited can feel helpless and without control. Forcing a youth to do something he or she is not ready for and doesn’t want to do, no matter how well intended, could retraumatize them and hinder their progress. Creating safe spaces where youth choice and voices are respected are critical elements of the CCP. Other elements are:  
- YHDP projects will be required to incorporate Youth Choice as a service policy that will allow youth to exercise choice in all the following –
  - Goals and priorities
  - Housing location and type
  - Supportive services and programs they access
- Projects will be encouraged to incorporate training in evidence-based practices that have a focus on youth choice such as Motivational Interviewing and Stages of Change.

**Family Engagement** – The principle of family engagement needs to be considered within a cultural context and with an understanding of what family or “Ohana” means in Hawai‘i. Hawaiians place a high value on Ohana, defined as both biological family and chosen family, and see sharing of resources and helping one another as important to preserving both Ohana and the larger community. There is a sense of duty and responsibility for Ohana that influences decisions and behavior.

Families play a critical role in supporting the transition of children to adults. Although family conflict may lead youth to leave home, familial and social connections remain key protective factors for youth experiencing homelessness. Strengthening those connections is often beneficial even when youth are

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not living with their families, or in cases where reunification is not safe or appropriate. Early intervention, when youth have left home for the first time (or even sooner), provides the most hope of reunification. When youth are older and families are more strained by years of conflict, reunification is less likely, although it remains important to engage families and help youth establish relationships with healthy boundaries. It is also important to recognize that family engagement can come with risks, and to work with youth and their family when possible to discuss these risks and establish boundaries. Example – Having reconnected with her mother after several years of being estranged, one youth who put herself and her new baby at risk of eviction by allowing her Mom (and her Mom’s boyfriend) to come live in her new apartment.

Strategies that strengthen family and which establish healthy boundaries between youth and other family members are critical to preventing homelessness. Family engagement strategies have potential to support outcomes relating to housing stability as well as permanent connections. Family engagement will be included within the CCP and YHDP projects through the following approaches:

- Use a broad definition and understanding of family, guided by youth choice, and include Ohana, foster families, or other supportive individuals.
- Ongoing collaboration with HIDOE and Child Welfare Services, and other CoC partners, to identify means of supporting families, preventing homelessness, and reunifying minor youth with their family when it is safe to do so.
- Require that YHDP projects serving youth experiencing homelessness, include activities that support reconnection or reconciliation with family. During community meetings, youth provided examples such as providing prepaid phone cards so that youth can make long distance calls to family who live off island, mediation or counseling services, and help with locating family members.
- Invite youth to establish a family engagement goal as part of their individual plans when possible (i.e. when youth feels that this is a safe and desirable option) and to consider how family engagement can support long term housing stability as well as social and emotional wellbeing.
- Incorporate training on how to establish boundaries with family members (and friends) as part of preparing youth who are housed within TH/RRH or PSH programs.
- Provide information on family engagement strategies that are research based, and/or grounded in culturally relevant practices.5
- Development of short-term crisis housing models such as “host homes”, “cool-beds” or respite housing (safe place for a short time) that can provide the opportunity for youth

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and parents to have a break from each other.

- Locating shelters and housing programs and host home sites in locations across O’ahu to allow youth to maintain ties to existing social supports and avoid school disruption, and it provides greater opportunity to engage in family intervention.

**Social and Community Inclusion**

– Social inclusion means having the opportunities and resources needed to fully participate in economic, social and cultural life, and to enjoy a standard of living and well-being that is considered normal in the community in which you live. Most homeless youth experience considerable social exclusion – often as a result of policies and laws, discrimination and negatives stereotypes, and lack of resources such as money, transportation, and connections to people who have influence (social capital).

An important function of the CoC is to help youth establish permanent connections and build supportive social networks. It is anticipated that these connections and networks will result in improved outcomes in areas such as education, employment and housing stability. Social inclusion will be promoted through helping youth build strengths, skills and relationships that will enable them to participate in their community, in education and employment. CCP and YHDP strategies will include:

- Providing housing opportunities that are located within community and within close physical proximity to services and resources.
- Assessment of social and community inclusion strengths and needs, and incorporation of goals relating to community resources, social networks, and permanent connections as part of individualized plans.
- Conducting community education to address issues of stigma and discrimination
- Working with public and private stakeholders to advance policy that help increase social inclusion of youth experiencing homelessness (i.e. public transit).
Provide opportunities for social and cultural engagement in order to develop positive social relationships and enhance social inclusion, particularly for Native Hawaiian, Micronesian, LGBTQ, pregnant and parenting youth.

- Services and activities that support access to natural supports such as family, friends, partners, neighbors and peers.
- Opportunities for engagement in meaningful activities through connection to education and employment.
- Advocacy, system change and programming to address inequality in access due to race, ethnicity, and language.
- Incorporation of mentoring and peer-based interventions within YHDP projects as well as connection to social, recreational, leadership and civic engagement activities that open avenues for positive connections to peers and adults.
- Use of technology and social media to help youth connect to supports and networks, combined with harm-reduction training or coaching in responsible use of technology.

**Youth Focused Housing First** – Youth Focused Housing First (YFHF) is an adaptation of Housing First that addresses the needs of developing adolescents and young adults. YFHF does this by providing youth with access to housing that is safe, affordable and appropriate, and the necessary and age-appropriate supports that focus on health, well-being, life skills, engagement in education and employment, and social inclusion. Housing First and YFHF rejects the idea that housing should only be available to people who are sober or drug free, or conditional upon taking part in specific services (i.e. counseling).

The O'ahu CCP establishes a continuum of housing services and supports to youth that provide the safety, stability and connections needed to facilitate a healthy transition to adulthood. We will do this through the following YFHF approaches:

- Require that all CoC and YHDP housing interventions adhere to Housing First Principles, such as -
  - No preconditions for housing, such as a requirement for clean and sober living

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or minimum income requirements.
  o Use of intake processes that are person-centered and flexible.
  o Provide youth choice on the type and extent of services they want to participate in and the location and type of housing they receive.

* Sustaining the Landlord Engagement Program through which partnerships are being created with O‘ahu landlords and property managers to expand access to housing based upon youth geographic preferences.
* Expand and enhance housing navigation and case management services to allow youth to access housing quickly by eliminating barriers to housing (e.g., facilitating getting IDs, and processing eligibility paperwork).
* Provide access to ongoing support and linkages to services for as long as needed to help youth recover from trauma, build life skills, connect to education or employment, establish healthy connections with peers, ‘ohana and mentors, and create strong linkages with any needed community resources.
* Housing programs that are “low barrier” and offer “least restrictive” environments that offer youth maximum amount of autonomy possible while still providing structure and boundaries that contribute to a safe environment.
* Addition of non-time limited housing options to fill gaps in the CoC for youth using YHDP and other funding sources.
Availability of YHDP resources has helped strengthen the O’ahu Youth Action Board (OYAB) and mobilized a wide array of community stakeholders to work alongside youth with lived experience to develop this Coordinated Community Plan to End Youth Homelessness. Our accomplishments in the area of planning and governance include:

- Establishing a governance (decision making) structure for YHDP that is integrated as a part of the larger Continuum of Care CoC for O’ahu. See Organization Chart on page 20.
  - CoC Board
  - CoC Committees and subcommittees
  - PIC staff
  - OYAB
  - YHDP Steering Committee
  - Community Stakeholders

- Coordinating an extensive community engagement process to bring in perspectives across multiple sectors and systems.

Over the planning period, a total of more than 40 unique partner organizations participated in CCP Community Meetings (see CCP Partner Chart in Appendix) during which time activities that furthered the development of the CCP took place. These activities included:
  - Discussion of community and specific population needs using profiles of youth created by OYAB
  - Determination of community priorities and suggestions for needed strategies

- Building in policies and procedures to ensure accountability and prevent conflicts of interest.
O‘ahu Coordinated Community Plan to End Youth Homelessness

Partners in Care - Oahu Continuum of Care
Members and community stakeholders representing different systems and sectors

Partners in Care - Board of Directors
Comprised of CoC members, including at least one youth

Executive Director
Also oversees CoC Operations

Board Working Committees

Advocacy Committee
Awareness Committee
Communications Committee
Data Committee
CES Oversight Committee
Organizational Development
Oahu Youth Action Board (OYAB)
Planning Committee

CoC Operations and Programs*
Landlord Engagement Program
General Operations
HMR$ CES
Youth Homelessness Demonstration Program

Planning Committee

*Staff from these programs report to respective committee
Design and Decision-Making Processes

Multiple processes and activities have informed the creation of the CCP and its various components (Vision, Goals, Guiding Principles, Action Plan, YHDP Projects):

- OYAB and Steering Committee meetings held at least monthly
- Five community planning meetings held between October 2019 and March 2020
- Collective Impact training aimed at CoC partners sponsored by Aloha United Way
- Interviews with representatives of special populations and systems
- Review of community data and research
- Creation of pathways out of homelessness and racial equity technical assistance sessions

Note – In March, and in response to the COVID-19 crisis, the CoC switched to holding meetings via zoom, using google docs and OYAB Facebook Messenger chats so that OYAB and other stakeholders could provide sustained input into the development of the CCP.

Decision Making

A consensus based decision-making structure is used by OYAB and the Steering Committee to reach recommendations for action. These recommendations are subsequently reviewed and formally adopted by the CoC Board of Directors (as the legal entity responsible for CoC funding).

Consensus decision making steps are as follows:

1. The question or decision is made clear;
2. Options are discussed and participants share any thoughts they have on pros and cons; everyone is encouraged to share and the message is that “everyone’s voice is valued”;
3. Consensus is achieved – which means that all members can accept the decision and can support it even if it isn’t what they personally wanted.
YHDP Decision Making Flow Chart

YHDP Steering Committee guided by technical assistance partners developed draft community engagement, input processes and plans (agendas), that include engagement in OYAB in development of materials and as leaders and facilitators.

OYAB reviewed the draft agendas, made revisions, created materials (i.e. the Youth Profiles), prepared for community engagement.

YHDP Steering committee simultaneously reached out to partners to invite them to planning events and get information on partner activities that could be leveraged and integrated into the CPP.

Community planning meetings and activities were delivered using a youth/adult partnership model, provided generation of ideas on goals, priorities, discussion of subpopulation and opportunities for impact.

CPP draft sections were developed in partnership with the OYAB and Steering Committee, and reviewed and approved by both.
Three entities have decision making authority within the CCP: CoC board, OYAB and the YHDP Steering Committee

**Partners in Care – the O’ahu Continuum of Care (CoC)**

Established in 2000, Partners in Care (PIC) is the O’ahu Continuum of Care (CoC). PIC’s mission is to eliminate homelessness through open and inclusive participation and the coordination of integrated responses.

The CoC currently includes:

- A 15-member board of directors who have final approval on CoC and YHDP grants. Since March 2020, the CoC board includes a designated OYAB representative and alternate.

- The Coordinated Entry System (CES) and Homeless Management Information System (HMIS).

- 67 members and partners who are representative of various stakeholders and systems including OYAB and other groups representing individuals with lived experience. All CoC members and partners are invited to attend monthly general meetings of the CoC. Meeting locations vary to support attendance from different regions. The general public is welcome to attend and provide comment.

- Eight committees, each with responsibility for specific CoC strategies and activities:
  1. **Advocacy Committee** - recommends broad strategy, positions of support or opposition, and priorities for legislative advocacy. OYAB representatives will be solicited to provide input on specific advocacy issues such as youth emancipation rights, and to meet with elected officials and their staff to present youth voice and perspective.
  2. **Awareness Committee** - works to increase community awareness of PIC, coordinates the annual Statewide Homeless Awareness Week events, including PIC’s Annual Homeless Conference.
3. **Communications Committee** - develops and implements PIC’s Communications Plan, strategies for community partnerships and outreach, media and online communication channels.

4. **Data Committee** - oversees the CES, the Point in Time Count and provides oversight and recommendations to PIC regarding the HMIS.

5. **CES Oversight Committee** - discusses improvements and refinements to the CES; its policies and procedures, special cases, system changes, etc.

6. **Organizational Development Committee** - develops initiatives to solicit and orient new members.

7. **O’ahu Youth Action Board (OYAB)** - ensures and coordinates youth input into CoC activities and decision making.

8. **Planning Committee** - coordinates funding applications, planning activities and continuous quality improvement processes.

PIC will provide financial and administrative oversight of YHDP funding. A full time YHDP Coordinator has been hired to manage YHDP activities, including providing support to OYAB and ensuring ongoing communication and engagement of CCP partners.
Oʻahu Youth Action Board (OYAB)

**OYAB Mission**

*OYAB makes sure that youth who are homeless, or who have experienced homelessness, are part of making decisions on things that impact us, including what services and supports should look like. The youth who serve on OYAB will respect that they have a responsibility to participate and make sure youth voices are loud and clear - with us, not for us!*

OYAB was formed in March 2017 and consists of up to 15 members all of whom are age 29 or below and have lived experience of homelessness. OYAB is a voting member of the CoC. OYAB representatives are invited to CoC meetings and are consulted in decisions that relate to preventing and ending youth homelessness. OYAB is integrated into the overall work of the CoC through representation on the Board (OYAB Chair serves on the CoC Board and attends meetings) as well as on committees which are working on issues not specific or exclusive to youth homelessness.

OYAB meets at least monthly, usually at the PIC offices. OYAB members receive compensation for their time in meetings and working on official OYAB business such as facilitation of community meetings and input into the CCP, including creation of creative content and review of all sections. While rules of order are followed, the atmosphere of meetings is informal and friendly. Food is always provided and the children of parenting OYAB members are welcomed.

OYAB worked with PIC to select the YHDP Coordinator, reviewing resumes and taking part in the interview process. Two United States Interagency Council on Homelessness (USICH) principles of effective practice are operationalized through OYAB:

- **Positive Youth Development** through youth/adult partnerships and opportunities for training and mentoring,
- **Youth Choice** including authority to establish priorities for YHDP and engagement in system-wide decision making.
O‘ahu Coordinated Community Plan to End Youth Homelessness

OYAB will maintain its structure and function for the duration of the YHDP. As of March 2020, OYAB has been formally recognized as a standing committee of the CoC, the OYAB Chair will serve as a CoC Board Member, with an alternative OYAB member identified to attend if the Chair is unable to. OYAB supported by PIC and youth-focused service providers, will recruit new members to replace those who “age out” or move on, or to ensure that OYAB is representative of special populations. The CoC will continue to provide hourly stipends to OYAB members, using monies raised as part of the local YHDP match or general CoC planning funds. The Youth Coordinator will play a key role in supporting OYAB. It is requested that this position be supported through YHDP planning funds. OYAB members will serve on the YHDP Project Review and Ranking committee and approve the selection of funded projects. OYAB participated in the development of the CCP, provided photographs, stories and artwork. See attached signatures.

**YHDP Steering Committee**

The YHDP Steering Committee includes representatives from the CoC such as the State of Hawai‘i Department of Human Services, Social Services Division, Child Welfare Services Branch, and Hawai‘i Department of Education, and PIC, as well as key stakeholders from other sectors and systems: Residential Youth Services and Empowerment (RYSE), Hale Kipa, Waikiki Health, and Hawai‘i’s Youth Services Network.

The Steering Committee has provided leadership and resources to support the development of the CPP, including provision of data. The Steering Committee has been responsible for managing the YHDP timeline and implementation of planning activities. The Steering Committee reviewed and approved the CCP.

A subcommittee of the Steering Committee will oversee continuous quality improvement and evaluation processes. The Steering Committee will maintain its structure and function for the duration of YHDP.
Overview of O‘ahu’s Coordinated Entry System

O‘ahu’s Coordinated Entry System (CES) began with a soft launch in August of 2017 and an official start in January of 2018. At that time, the CES was split among sub-populations: families, singles, and youth systems, administered by various organizations. Social advocacy organization, PHOCUSED, led the start of the family CES, Aloha United Way did the same for singles CES, and a hui of youth providers met to create the youth CES. These sub-populations have since been united under Partners In Care.

Participation in a CES is a requirement for all CoC and Emergency Solutions Grant (ESG) funded programs under the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act of 2009. By the terms of the CoC Interim Rule, coordinated entry is “...a centralized or coordinated process designed to coordinate program participant intake, assessment, and provision of referrals... [that] covers the geographic area, is easily accessed by individuals and families seeking housing or services, is well advertised, and includes a comprehensive and standardized assessment tool.”

More importantly, the development and implementation of coordinated entry on O‘ahu is an opportunity to think critically about our homeless response system.

Through this process, we aim to increase the speed at which people seeking assistance are able to access the system, match those people to appropriate housing and services by prioritizing those with the most acute needs for placement, improve efficiency by maximizing document readiness and minimizing vacancies throughout the response system, and ensure that we have a comprehensive array of housing and services to meet the needs of our community.

The current structure for youth CES is that clients presenting for homeless services receive a TAY VI-SPDAT and are added to a youth by name list to be considered for youth CES resources they may be eligible for. CES does a proportional allocation of singles and family resources for youth in the event youth need a higher level of care than the youth CES resources have available, or if there are no such youth resources. CES has also created a youth sub-committee to focus on the systemic challenges that our youth CES faces, such as our designated assessment tool, the process of administering this tool, the prioritization matrix, and limited resources available to youth and young people.
Our overarching goal for data quality improvement within the youth CES is to better standardize the youth assessment process and synthesize youth data across systems. Currently, youth may access CES assessment through the singles, family or youth system. We hope to establish a system for capturing all youth data uniformly in a manner that allows us to compare their needs against households in other systems in order to better utilize all available resources that youth may qualify for and make the most successful matches possible. We also hope to fine-tune our assessment tool, with an eye toward incorporating a strengths-based assessment, in order to better capture holistic data that accurately reflects vulnerability as well as housing appropriateness for the sake of matching youth to housing resources that will produce sustainable, long-term results.

The youth CES sub-committee is committed to taking the following actions to meet the objective of improving data quality and system capacity to identify and assist youth experiencing homelessness, as outlined in the CCP Action Plan – see Appendix and summary of the relevant section below.

<table>
<thead>
<tr>
<th>Objective: Improve data quality and system capacity to identify and assist youth experiencing homelessness, including youth from special at-risk populations</th>
</tr>
</thead>
<tbody>
<tr>
<td>YHDP funded CES Project to add youth focused staffing</td>
</tr>
<tr>
<td>CES youth assessment tool reviewed and refined (i.e. incorporate strengths-based indicators)</td>
</tr>
<tr>
<td>Process that ensures all youth are assessed the same way and a standardized system that better integrates youth data across sub-population is established</td>
</tr>
<tr>
<td>Prioritization matrix for youth CES resources is built out</td>
</tr>
<tr>
<td>HMIS data fields updated and youth-specific HMIS staff paid through YHDP-funded HMIS grant</td>
</tr>
<tr>
<td>Integrate HMIS with CES platform</td>
</tr>
</tbody>
</table>
Community Context

- The island of Oʻahu is one of seven inhabited islands that make up the State of Hawaiʻi.
- Roughly 70% of Hawaiʻi’s total population lives on Oʻahu.
- Oʻahu has a population of just under one million people - 980,080 according to 2018 Census estimates.
- Oʻahu includes the state capitol and largest city-county, Honolulu.
- Hawaiʻi is racially and ethnically diverse. Since contact with Westerners in 1778, Hawaiʻi’s population has been dominated by non-Whites with the non-Hispanic White population growing steadily over recent decades.
- Honolulu has one of the highest cost of living in the country.
- The three largest job sectors on Oʻahu are: Leisure and Hospitality; Trade, Transportation and Utilities; and Government.
Oʻahu Coordinated Community Plan to End Youth Homelessness

Oʻahu CCP Definition of Youth Homelessness

Oʻahu community stakeholders are committed to ending homelessness for youth regardless of who they are, where they are from, and what their experiences have been. We are building our CCP to be as flexible and responsive as possible, incorporating private resources that come with fewer regulations and restrictions when needed. We see a need to serve youth who meet the following HUD categories of homelessness:

**Category I - Literally Homeless** - Youth who are in shelter, transitional housing, hotels or motels paid for by the government or charity (sheltered), or sleeping on the streets, in parks, or other places not meant for human habitation (unsheltered). Or youth who are exiting from an institution (ex., jail, hospital, juvenile detention) where they were a resident for 90 days or less, and the youth resided in emergency shelter or place not meant for human habitation immediately prior to entering that institution.

**Category II - Imminently at risk of homelessness** - Youth who will lose housing (including doubled-up situations) within the next 14 days with no other safe place to stay and no money or other resources for housing. Youth who are moving from one home to another “couch surfing” and cannot stay at their current home. Youth must have no safe alternative housing, resources or support networks to maintain or obtain permanent housing.

**Category IV - Fleeing dangerous or life-threatening situations** - Youth fleeing or attempting to flee their housing or the place they are staying because of domestic violence, dating violence, sexual assault, stalking, or other dangerous or life threatening conditions related to violence that has taken place in the house or has made them afraid to return to the house, including:
- Trading sex for housing;
- Trafficking;
- Physical abuse;
- Emotional abuse, such as threats, intimidation, and exposure to trauma;
Family conflict that has caused a youth to feel physically or emotionally unsafe and unable to stay in their current living situation;
- Financial abuse;
- Violence (or perceived threat of violence) because youth's sexual orientation or gender identity;
- Active drug/illegal substance use in the youth's current housing; • Gang or neighborhood violence that is being directed to a youth in their home;
- Other illegal activity in the household that is putting a youth or a youth's child at risk.

**Equity Lens**

Partners in the development of the CCP have been diligent in applying an equity lens when considering prevalence, need, and response to youth homelessness. The following Special Populations section provides information on racial inequities and other disparities in the risks for, and experiences of homelessness based upon the most recent data.

The CCP Action Plan includes the following objectives that focus on addressing inequities:
1.2. Pursue an understanding of racial inequities in the experience of youth homelessness and use this information to inform systems-level change.
1.3. Improve data quality and system capacity to identify and assist youth experiencing homelessness, including youth from special at-risk populations.
1.4. Provide access to professional development and TA opportunities that support and build capacity of staff to serve youth experiencing homelessness, and reduce disparities based on race/ethnicity, LGBTQ status, system engagement etc.
Special Populations

Within the total population of youth experiencing homelessness on O‘ahu are youth who have characteristics or risk factors (often combinations as indicated by the case studies provided in the appendices) that warrant special attention and response. This section explores the prevalence, needs and strategies (including identification methods, infrastructure changes, or housing and service delivery systems).

Unaccompanied School-Age Youth (Minors)

Prevalence: The 2019 Point-in-Time Count identified 37 youth, age 17 or under, who were experiencing homeless without family. In this same year, HIDOE counted a total of 30 unaccompanied homeless students as a subgroup of 3,604 students in unstable housing statewide.

It is believed by O‘ahu stakeholders that these numbers do not represent the true prevalence of homelessness among youth 17 years old or younger (school-age minors). Indicators of a larger and growing number of unaccompanied school age-minors among O‘ahu’s homeless include 1,526 juveniles were identified as runaways and apprehended by Honolulu Police Department into protective custody in 2017, up from 1,417 in 2016.

Unique Needs: Unaccompanied school-age youth (minors) have needs that differ from their peers who are stably housed, and from older unaccompanied youth. Minors are subject to different laws and protections than adults. Living independently is not an option for minors - they are meant to be under the care of a parent, legal guardian or the State. Minors can be arrested for status offenses such as breaking curfew, truancy, or for being a runaway. Once on the streets, options for shelter, housing and healthcare are more limited for unaccompanied school-age youth than their older peers – with many services requiring parent or guardian consent. Younger youth are at greater risk for labor and sex trafficking, sexual assault and other types of victimization. Establishing safety and providing shelter for this most vulnerable population is a priority need for the CCP.

Our sources of information about this population include HIDOE Community Liaisons, street
outreach, drop-in center and emergency shelter staff, and OYAB members. From these sources we are starting to gain a deeper understanding of what life is like for younger homeless youth, why they are less likely to engage in services, and the system barriers and gaps that the CCP must address if the goal of ending youth homelessness on O‘ahu is to be met.

Minors who are homeless without their families have typically run away from or been kicked out of home. According to OYAB, it is also common for youth who were homeless with their family (i.e. living in a camp or shelter) to go out on their own as soon as they can, often with an older sibling, friend or boy/girlfriend. Youth provided two explanations for the low count of unaccompanied homeless youth in school: 1. Youth who are homeless without their family most likely dropped out of school already, or 2. If they are still managing to go to school, they are most likely living with an adult who is not a legal guardian, but do not want to share this because they are afraid of being reported to Child Welfare Services, and put into foster care.

All stakeholders, including youth, agreed that one of the most pressing needs for school-age unaccompanied youth is for them to complete their education. Yet there are numerous barriers that make school attendance challenging. Unaccompanied school-age youth have challenges such as: disrupted education due to truancy, dropping out or multiple moves; learning disabilities that may or may not have been diagnosed or attended to; negative school experiences such as being bullied or being far enough behind to not feel adequately prepared to learn alongside peers. OYAB members who had experienced homelessness as minors talked about being embarrassed about their living situation. They recalled having concerns about clothing and personal hygiene, and not being able to concentrate in school because of lack of sleep. Exploration of alternative options that help youth who are homeless complete their education, as well as advocacy and coordination with HIDOE is needed.

Dropping out of school, or being chronically absent, also means that unaccompanied youth miss out on valuable services and programs such as health education (including sexual health
education), college and career exploration and readiness. The impact of missing out on these types of supports and services is worsened by lack of access to supportive adults or role models. Youth who are homeless most often don’t have family and social connections that can help them get a critical first job, and they can lack the soft skills that employers are looking for (communication, time management, problem solving etc.). There is a need to connect youth to role models who can inspire interest in careers or post-secondary education, and to provide practical resources (assistance with fees, books, transportation).

One of the gaps in services that the CCP aims to address is the need to provide longer term shelter and housing options for unaccompanied minors. When youth enter shelter, they need help in developing a plan that identifies where they can go after their time in the shelter runs out. On O‘ahu these options are limited to returning home to family or extended family when this is safe and viable, referral to law enforcement or child welfare services. In both cases these systems have limited options on how to respond based upon factors such as presence of abuse or neglect from caregivers. As much as possible, unaccompanied youth need to be connected to family members, including extended or chosen family, who can provide critical social support and be a resource as they transition to adulthood and independence.

**Suggested strategies to meet the needs of unaccompanied minors based upon research and community engagement:**

- Identification of school-age youth who are experiencing or at risk for unaccompanied homelessness through enhanced outreach, collaboration and coordination between HIDOE, service providers and CWS.
- Prevention and early intervention services that strengthen and support families and protect children from abuse, sexual assault, exposure to violence and other adverse early childhood experiences.
- Development of new options for housing that accommodate the needs of unaccompanied minor youth such as host homes that would allow them to maintain connections to community and school.
- Supportive services that meet needs relating to education (prevent drop-out, connect to academic support resources) and preparation for transition to adulthood (work-readiness, life skills, psycho-social education).
- Programs and activities that help younger youth build positive healthy connections with caring peers, family, mentors, community resources and align with their developmental needs for autonomy.
Pregnant and Parenting Youth

Prevalence: There were 41 pregnant or parenting youth experiencing homelessness counted in the 2019 Point-in-Time Count, 14 of whom were unsheltered.

Of the youth (n=151) interviewed in the 2018 Street Youth Study nearly three in 10 (29.1%) had ever had a child, with a higher percentage reported by females than males (44.6% vs. 20.2%, respectively). Of the respondents who had one or more children, 79.5% reported being their child's/children's caregiver, 68.2% reported having legal custody and 40.9% reported living with their child/children.

Unique Needs: One of the strengths of OYAB is the engagement of youth who are pregnant and parenting as members. These youth shared firsthand how expecting or having a child has impacted them and created unique needs and opportunities. Pregnant and parenting youth need services that promote health and safety, and which prevent a return to homelessness. Pregnant women who are homeless need access to services and supports that help to reduce risk for poor birth outcomes (premature and or low birthweight) or child development problems, and to support the emotional and physical health of the mother.

There is an awareness of the need to break generational cycles of homelessness and abuse and an understanding among the young mothers interviewed of what this will take. Youth identified a need for services that help young mothers heal physically and emotionally from experience of trauma, and to prevent ongoing relationship violence, or future sexual assault or exploitation. Also, for education and mentoring to build their skills in parenting (including co-parenting), and to help them establish a pathway to independence. Lastly, there is a need for

RACIAL and ETHNIC EQUITY LENS
Of the 23 pregnant and parenting unsheltered youth who have been housed in the RYSE shelter from June 4th, 2018 to February 15th, 2020, 87% were Native Hawaiian or Pacific Islander: 52% (n=12) were Native Hawaiian 13% (n=3) Micronesian, 21% (n=5) Other Pacific Islander (Filipino, Tongan, Samoan), 13% (3) White.

RYSE Participant Records
the CoC to increase the number of beds/units designed for pregnant and parenting youth (including two-parent families) and to continue to ensure that the CES provides priority access to housing for pregnant and parenting youth. Youth and providers agree that this is a population that is most likely to proactively seek services, however once new YHDP funded services are developed there will be a need to make sure that their availability is well documented at places such as health centers, benefits offices, and through youth outreach activities.

**Suggested strategies to meet the needs of pregnant and parenting youth based upon research and community engagement:**

- Designated maternity shelter program, rapid rehousing or transitional housing resources specifically designated for pregnant and parenting youth.
- Access to specialized health and wellness services focused on the needs of young parents and children.
- Linkages to educational and employment training opportunities that include resources for childcare.
- Services that help parenting youth face the dual challenge of meeting their own developmental needs and the needs of their infants and children. These needs, as identified by the Center for the Study of Social Policy\(^7\), include: Physical, Sexual, and Reproductive Health and Development; Cognitive and Emotional Development; Identity and Social Development; and Preparation for Parenthood and Self-Sufficiency.

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Youth involved with Juvenile Justice and Foster Care Systems

Prevalence: Of the street youth surveyed in 2018 (N=151)$^8$  
- 4 out of 10 had been in foster care  
- 5 out of 10 had experienced the juvenile justice system  
- 14.7% of youth 12-17 and 17.9% of youth 18-24 listed “discharged from an institutional setting” as a reason for their homelessness.

The National Youth in Transition Database which tracks outcomes for former foster youth. Former foster youth over 18 were interviewed and asked if they had experienced homelessness in the past two years – 3 out of 10 youth from Hawai‘i said they had (compared to 2 out of 10 nationally).$^9$

Unique Needs: The correlation between system engagement and homelessness, is well documented. High cost of rentals on O‘ahu makes it difficult for young people aging out of foster care to find safe and affordable places to live. Young adults with criminal records face barriers when seeking housing and employment and are precluded from accessing some public benefits (i.e. section 8 housing).

Data from CWS on foster care rates and trends and from Honolulu Police Department on arrest rates of juveniles and young adults 18-24, combined with stories shared by youth and service providers help us understand the needs of youth engaged in these systems.

Members of OYAB have lived experience of both engagement with foster and juvenile justice systems. One of their concerns is that individuals who are homeless are being arrested for acts, such as setting up camp or even sitting on the sidewalk, which criminalizes homelessness and creates a revolving door of homelessness and involvement with law enforcement.

When developing profiles for community engagement sessions and during interviews, youth shared personal experiences of physical and sexual abuse which led to them to bring placed in

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foster care or kinship care. Reasons provided for entry into foster care for transition age youth in Hawai’i paint a similar picture and point to a need for supports that help youth understand and heal from trauma, grief and loss: Neglect (61%), physical abuse (26%), caretaker inability to cope (25%), sexual abuse (12%), and parental substance use. The results of the National Youth in Transition Survey, provided in the table below, indicate a need for services and supports that prevent homelessness, build capacity for self-sufficiency (employment and education), and which link former foster youth to needed health care resources and benefits.

<table>
<thead>
<tr>
<th>How are transition-age youth in HI faring at age 19 and 21? Of youth who spent time in foster care...^16</th>
<th>at age 19</th>
<th>at age 21</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total number of youth who were eligible to complete the NYTD survey</td>
<td>31</td>
<td>31</td>
</tr>
<tr>
<td>Total number of youth who responded to the NYTD survey</td>
<td>26</td>
<td>25</td>
</tr>
<tr>
<td>Finished high school/GED</td>
<td>69%</td>
<td>92%</td>
</tr>
<tr>
<td>Employed full- or part-time</td>
<td>35%</td>
<td>44%</td>
</tr>
<tr>
<td>Medicaid or other health insurance coverage</td>
<td>85%</td>
<td>84%</td>
</tr>
<tr>
<td>Experienced homelessness in past two years</td>
<td>31%</td>
<td>32%</td>
</tr>
<tr>
<td>Attending school</td>
<td>42%</td>
<td>28%</td>
</tr>
<tr>
<td>Connected to an adult</td>
<td>77%</td>
<td>96%</td>
</tr>
<tr>
<td>Had children in the past two years</td>
<td>31%</td>
<td>32%</td>
</tr>
<tr>
<td>Was incarcerated in the past two years</td>
<td>12%</td>
<td>20%</td>
</tr>
<tr>
<td>Referred for substance abuse treatment in the past two years</td>
<td>8%</td>
<td>16%</td>
</tr>
<tr>
<td>Receiving public assistance</td>
<td>42%</td>
<td>28%</td>
</tr>
</tbody>
</table>

The following data from the 2017 Review of Uniform Crime Reports from the State of Hawai’i ^10 provides information on the demographic characteristics of youth arrested by Honolulu Police Department during this year, and on the types of offenses conducted. While we don’t know how many of the youth or young adults arrested were homeless, we do know that individuals who are homeless are more likely to be arrested, and individuals who have been confined or incarcerated have increased risk for homelessness. The data also points to a need for strategies to

address the disproportionate representation of Hawaiian and Other Pacific Islander juveniles and young adults among those arrested.

The table below shows the total number of arrests, not an unduplicated count of youth who were arrested. However, we do know that in 2016 that 1,646 individual/unduplicated juveniles were arrested which gives us a sense of the number of youth who are engaged with the juvenile justice system and who have risk for homelessness. For the most part it can be noted that arrest rates for both juveniles and adults for most types of offense are on the decline.

### Number of Arrests 2017

<table>
<thead>
<tr>
<th>Type of Crime/Offense</th>
<th>Adults Age 18-24</th>
<th>Juveniles 17 or under</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assault</td>
<td>466</td>
<td>312</td>
</tr>
<tr>
<td>Sex Offense</td>
<td>14</td>
<td>29</td>
</tr>
<tr>
<td>Stolen Property</td>
<td>119</td>
<td>45</td>
</tr>
<tr>
<td>Disorderly Conduct</td>
<td>96</td>
<td>43</td>
</tr>
<tr>
<td>Liquor Laws</td>
<td>69</td>
<td>17</td>
</tr>
<tr>
<td>Drug Possession</td>
<td>119</td>
<td>10</td>
</tr>
<tr>
<td>All Other Offenses</td>
<td>846</td>
<td></td>
</tr>
<tr>
<td>Status Offenses</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Curfew</td>
<td>N/A</td>
<td>37</td>
</tr>
<tr>
<td>Runaway</td>
<td>N/A</td>
<td>1,526 (up from 1,417 in 2016)</td>
</tr>
</tbody>
</table>

Youth who are engaged with child welfare and justice systems need opportunities to build the

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13 Includes offenses associated with homelessness such as public nuisance, trespass, possession of drug paraphernalia as well as non-criminal juvenile offenses such as truancy and ungovernability.

14 Apprehension for protective custody as defined by local statute.
skills necessary to live independently, establish healthy positive relationships, and to acquire and keep a job. They also need support to help them understand and heal from trauma, grief and loss. Youth stories of experiences with child welfare included positive examples of caring foster parents (who they remain in contact with but who are not in a position to house them) and receiving assistance. However, in general an overarching theme among youth with system engagement is lack of connection, difficulties establishing trust and a sense of self-reliance.

In late 2016, the State of Hawaiʻi applied to receive assistance from Vera’s Status Offense Reform Center with the goals of improving system responses to and reducing the arrests of youth who run away from home or child welfare placements. The project involved: 1) developing an effective multidisciplinary body; 2) assessing the strengths and gaps in current status offense processing, and 3) setting priorities and developing a comprehensive set of strategies to achieve reforms. In January 2017, Vera selected Hawaiʻi to participate in the initiative, with Honolulu County designated as the local jurisdiction to receive assistance.

Suggested strategies to meet the needs of system engaged youth based upon research and community engagement:

- Employment training or work-readiness programs designed specifically for youth who are experiencing homelessness and who have a history of justice engagement.
- Juvenile delinquency prevention and programming that diverts youth from further engagement with the justice system and addresses underlying problems such as substance addiction, disconnection from education and workforce, family and community violence.
- Coordination of care and communication to prevent system engaged youth experiencing homelessness during periods of transition or exits.
- Access to a range of substance abuse treatment options, including residential care specifically for youth experiencing homelessness.
- Changes to policies and actions that criminalize homelessness and make it difficult for youth to establish stability such as youth status offenses, bail requirements for low-level offenses and use of compassionate disruptions (sweeps).
- Integration of data systems on homelessness to enable local analysis of costs and benefits. Consistent identification of homeless individuals as homeless when they utilize
hospitals, the criminal justice system (courts, public defenders, jails, prisons), and are former foster youth, would allow for local cost estimates.

- Create a common intake tool and database for homeless youth to be used by all agencies including the police, child welfare, judiciary, DOE, outreach services providers and drop-in centers.

**Additional System-Level Recommendations from the VERA Report**

- Request that the Honolulu Status Offense System Reform Workgroup (SOSR) present their work and findings to the CoC.
- Conduct a cost benefit analysis of arresting and charging youth with status offenses, using a tool such as Vera’s Guide to Calculating Justice System Marginal Costs.
- Work with the legislature to remove running away and other status offenses from the court’s purview.
- Examine restrictions under state law regarding young people’s ability to check themselves into a shelter/non-secure facility and whether the requirement to notify parents or guardians interferes with their willingness or ability to use homeless shelters.
Lesbian, Gay, Bisexual, Transgender or Questioning (LGBTQ)

Prevalence: According to the results of the 2018 Street Youth Study, of the 151 O‘ahu youth who participated
- 1 in 10 of younger youth, 12-17, identified as LGBTQ
- 2 in 10 of older youth, 18-24, identified as LGBTQ

The survey results of younger youth experiencing homelessness correspond with those from the 2017 Hawai‘i Youth Risk Behavior Survey (YRBS) in which 9.1% (approximately 4,700) of high school students statewide indicated a sexual identity of Lesbian, Gay or Bisexual. 1,270 high school youth in Hawai‘i identified as Transgender.

We acknowledge that there are distinct groups and sub-populations within the special population of LGBTQ youth. Each of these groups has unique needs, risks and protective factors. The experiences of each LGBTQ person is different and influenced by other things such as their race and ethnicity, where they live, their exposure to trauma during childhood or as young adults.

Unique Needs: Conflict over sexual orientation or gender identity is one of the reasons why youth become homeless. The additional trauma and stigma experienced by LGBTQ youth puts them at increased risk for behavioral health problems such as depression and anxiety, use of drugs and alcohol to self-medicate, and suicide. These findings are borne out by the Department of Health’s 2018 Sexual and Gender Minority Report, which found that transgender students in Hawai‘i are 8 times more likely than their cisgender counterparts to have unstable housing; and that LGB students in Hawai‘i are 2 times more likely than their heterosexual counterparts. The same report

Cultural Terminology
“Māhū” is a cultural term meaning to be privileged with the the mana of both kāne and wahine (male and female). Māhū were part of the fabric of Hawaiian society - Valued, respected, caretakers, healers, teachers of ancient traditions, passed on sacred knowledge from one generation to the next. Hawaiian culture recognizes māhū as a respected identity for being transgender. “Māhū” used to be used negatively, now the transgender community has reclaimed the word. Individuals who identify as Māhū do not always identify as Transgender and those whose who identify as Transgender do not always identify as Māhū. Māhū should only be used if the individual self identifies as such.

finds that only 51% of transgender students in Hawaiʻi sleep at a parent/guardian’s house, compared to over 90% for cisgender students. In addition to these needs, OYAB suggests that pressure to look good and concern about body image can lead to eating disorders.

The concept of minority stress, as shared in Hawaiʻi Sexual and Gender Minority Health Report⁴, provides insight into factors and needs experienced by individuals due to a stigmatized minority status, these include:

- experiences of negative events, expectations of future experiences of negative events, internalized homophobia, and concealment of sexual minority identity.
- Disproportionately high rates of suicidality, substance use, depression, and social anxiety.
- Risk of HIV and Hepatitis among gay or bisexual males.
- Discrimination, rejection and victimization.
- expectations of future experiences of discrimination based on gender minority identity; internalized transphobia; and concealment of one’s transgender identity among youth who are gender non-conforming (GNC).

Figure 1: From 2017 Hawaiʻi YRBS

Transgender Youth. Honolulu: Hawaii State Department of Health, Chronic Disease Prevention and Health Promotion Division.

The following summary from the Hawai‘i 2017 Sexual and Gender Minority Health Report provides insight into health disparities and risks among LGBTQ youth. The study differentiated between LGB, LGBQ (Questioning was not always included as an option) as defining sexual orientation and T as gender identity. Although the communities are typically conflated as LGBTQ due to many cultural commonalities, they are quite distinct constructs.

**Acronyms used in the following summary align with how they are presented in the report (i.e. use of LGB or LGBQ versus LGBTQ is not an error).**

**Access to healthcare** - LGBQ youth in Hawai‘i are less likely to have access to health care than heterosexual youth. Reasons suggested for this by CCP partners include experiences of being treated harshly or judged, subject to excessive and embarrassing questions, as well as barriers based upon the location of services (i.e. not close to where youth are living) as well as cost of treatment or prescriptions.

**General health practices such as healthy eating, physical activity** – Overall, a greater proportion of LGB and questioning youth are overweight or obese in Hawai‘i than heterosexual youth, but the groups are not statistically different. Most youth, regardless of sexual orientation, do not adhere to recommendations for fruit and vegetable consumption or physical activity and have too much screen time. Youth also talked about not having enough food, only having access to fast food (nowhere to cook), being hungry,

**Engaging in risky behaviors** – A significantly greater proportion of Hawai‘i LGB youth and adult currently consuming alcohol and using drugs compared to heterosexual youth. LGB youth are also more likely to binge drink, smoke cigarettes, and use electronic smoking devices.

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5 Ibid.
Injury and violence – Hawai‘i LGBQ youth are significantly more likely to experience physical, sexual, and emotional abuse by someone they were dating compared to heterosexual youth. Additionally, LGBQ youth are significantly more likely to report being forced into having sexual intercourse. Beyond intimate partner violence, LGBQ youth experience bullying at school or on social media at higher rates than heterosexual youth.

Mental health – Hawai‘i’s LGBQ youth are significantly more likely to have engaged in self-injurious acts such as cutting or burning, considered suicide, made a suicide plan, and attempted suicide in the past year than heterosexual youth. OYAB and other community stakeholders see rejection from family, social stigma, discrimination, victimization at school and on the streets being main contributors to poor mental health among LGBTQ youth. LGB youth are four times more likely to attempt suicide than heterosexual youth.

Housing stability – The topic of housing stability and homelessness among LGBTQ youth is not addressed in the Hawai‘i Sexual and Gender Minority Health Report. However, we know that many of O‘ahu’s youth experiencing homelessness or at risk of homelessness are LGBTQ. There are currently no dedicated housing programs or beds targeted at LGBTQ youth. Youth housing providers focus upon creating safe and inclusive environments for all youth while providing tailored supportive services, and linkages to community partners that serve LGBTQ youth.

Suggested strategies to meet the needs of LGBTQ youth based upon research and community engagement:

- Continue to advocate and support laws and policies that increase protections for LGBTQ individuals in areas such as marriage equality, employment, public accommodations, housing, and state-funded services, and against experiencing hate crimes. The State of Hawai‘i has made tremendous progress in passing policies to protect SM and TG/GNC people in Hawai‘i. Many recent policies, including marriage rights, parity in health insurance coverage, and protections from discrimination, are critical successes to be preserved and built upon.
- Continue to understand, address and monitor for disparities in risk factors and outcomes among LGBTQ populations. Conduct additional research to advance understanding of the health and social disparities and needs of LGBTQ youth who are at risk of or experiencing homelessness.
- Collect data on sexual orientation and gender identity as part of intake within programs that serve homeless youth and provide training on how to collect this data in a consistent manner and with sensitivity.
Establish a hub or activity center that is specifically for LGBTQ youth, and their families, and offers a safe space for them to learn about resources, connect with caring adults, establish plans that support needs.

Ensure that shelters and housing programs are safe, accessible and inclusive to LGBTQ youth by providing technical assistance and resources (policies and procedures) to CoC partners. Develop housing options that are tailored to LGBTQ youth.

Provide access to health and sexual education curricula that are inclusive of sexual and gender minority youth and promote acceptance and safe supportive school and community environments.

Promote family acceptance and understanding and help LGBTQ youth identify an adult in their family (including extended or chosen family) who they can connect with and who supports them.

Build capacity of CoC partners to meet the needs of LGBTQ youth including having board members, staff and volunteers who have lived experience, providing ongoing training on cultural competency.

Ensure that all environments, including shelters, clinics, schools are safe, inclusive and welcoming of LGBTQ youth.

Incorporate peer support, leadership development and other PYD approaches that help LGBTQ accept and celebrate their identities.

Plan and deliver mental health and suicide prevention activities such as trauma-informed therapies, as well as services that build coping and resilience skills and increase connection and belonging among LGBTQ youth and other youth at risk.

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6 According to the 2016 State Equality Index, eight states prohibit the inclusion of sexual and gender minority content in sexual education, whereas four states and the District of Columbia expressly require sexual education to be inclusive of sexual and gender minorities. Hawaiʻi neither requires nor prohibits such inclusion by law.
Youth Victims of Sexual Trafficking or Exploitation

Prevalence: According to the results of the 2018 Street Youth Study\textsuperscript{7}, of the 151 youth who participated - 1 in 10 reported engaging in survival sex (i.e., in exchange for money, food, drugs, shelter, etc.). Of these about two-thirds (65%) said they were forced. During community meetings and interviews youth talked freely and openly about their different risk factors and experiences of trauma – including their perception that sexual exploitation is common, with younger youth, LGBTQ youth or those who are new to homelessness being especially vulnerable.

Unique Need: Two reports on Sex Trafficking in Hawai‘i\textsuperscript{8} \textsuperscript{9} provides insight into the prevalence of sex trafficking and needs of sex trafficking victims. Key findings include:

- Homelessness and sex trafficking were found to be connected, with more than two thirds (69.1%) of the sex trafficking victims reporting that they had experienced homelessness in their lifetimes.
- Sex trafficking victims who reported being homeless were more likely to report also having been in foster care or a group home as a child.
- Prevalence of childhood sexual abuse (73%) and rape (60%).
- Native Hawaiians made up 64% the sex trafficking victims.
- Engagement with child welfare services (68%) and placement in foster care (64%).
- Experience of being sex trafficked began when they were under age 18 (78%).
- All reported drug use and average age of introduction to drugs was 12.7 years old
- Average age of first trafficking experience was 14.7 (range was 11 to 20 years old).
- Most were sex trafficked by a male who they considered a boyfriend (72%), others by drug dealers (17%).
- Four participants were taken to the mainland by their sex trafficker for the purpose of prostitution, all were under the age of 18 at the time.
- Numerous systems interacted with victims including child protective services, criminal justice systems, school systems, and health care systems.

Youth victims of sexual trafficking or exploitation often have health needs that may need immediate

\textsuperscript{7} Ibid.
attention include injuries, pain, sexually transmitted infections and HIV, post-exposure prophylaxis, viral hepatitis, pelvic inflammatory disease, malnourishment, drug and alcohol dependency, acute dental needs, and pregnancy.

Behavioral health needs may include immediate care for Post-Traumatic Stress Disorder (PTSD), psychosis, depression, anxiety, acute mania, delusions, agitation, violent outbursts, suicidal ideation, or other behaviors presenting risk of harm to self or others that may require hospitalization. Ongoing medical needs include those relating to poor nutrition or untreated injuries sustained during exploitation. Many victims have substance abuse problems due to coerced drug use or attempts at self-medication.

Victims often need assistance navigating complex legal situations with the justice system either as a witness or defendant, or to gain access to resources and benefits that are available to victims of crime. They need support and services that address needs in areas relating to healthy development and life skills, education, employment and future self-sufficiency.

**Suggested strategies to meet the needs of victims of sexual trafficking or exploitation based upon research and community engagement:**

- Educate “gatekeepers” within places and spaces where victims can be found (schools, CWS, justice system, health system) to understand the pervasive nature of sex trafficking, recognize signs that a young person is being exploited and provide options for support.
- Incorporate use of Commercial Sexual Exploitation Identification Tools as part of intake and assessment process by providers working with populations known to be high-risk for sexual exploitation including youth experiencing homelessness.
- Provide training to service providers, including behavioral health practitioners and case managers on the dynamics of sex trafficking, the impact of sexual exploitation, and challenges associated with exiting sex trafficking situations.
- Incorporate peer support groups that recognize the resiliency and strength of survivors and help them establish pathways to recovery and a positive future.
- Incorporate family engagement and draw upon Hawaiian values to reduce stigma, support healing, and prevent repeat victimization.
- Support early intervention services that address risk factors such as child abuse, substance abuse and relationship violence.
- Enhance laws that offer protection to victims and which encourage prosecution of sex buyers and traffickers.
Native Hawaiian Youth Experiencing Homelessness

Understanding youth homelessness as a challenge facing Native Hawaiians requires a base understanding of the colonialism and historical trauma experienced by Hawaiians since European contact in 1778. Supporting Native Hawaiian youth and families to thrive means addressing the political and social context that perpetuates the racism that keeps Native Hawaiians disenfranchised. The tension between Native Hawaiians’ spiritual relationship with the aina and ongoing legal and political challenges to their land claims is reflected at the individual level in the daily struggles of homeless Native Hawaiians.

Prevalence: At the writing of this plan, we are only able to provide data that disaggregates Native Hawaiians and Other Pacific Islanders for the island of O‘ahu. Due to federal reporting requirements, Native Hawaiians and Other Pacific Islanders (NHOPI) are often grouped together. This NHOPI category should be taken with caution as the diversity among Pacific Islanders is distinct and requires different and culturally relevant program interventions in order to be successful. Additionally, in the total state population many individuals in the 2-or-more races category also indicated Hawaiian or Pacific Islander descent. Nearly three in four Native Hawaiians (72.3%) identify with at least one other racial or ethnic group compared to the statewide rate of 23.6 percent. This is particularly impactful when reporting aggregates people who identify with more than one race or ethnic group under the heading “two or more races” because up to 75 percent of Native Hawaiians are then obscured by aggregation.

The 2019 PiTC provides the following information on the race [CH1] of individuals experiencing homelessness and can be compared to the total population of O‘ahu per U.S. Census 2018 American Community Survey:

<table>
<thead>
<tr>
<th>O‘ahu Population</th>
<th>Total number</th>
<th>Native Hawaiian Number</th>
<th>Percent Native Hawaiian</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total individuals experiencing homelessness</td>
<td>4,439</td>
<td>1,712</td>
<td>39%</td>
</tr>
<tr>
<td>Children (under 18) experiencing homelessness</td>
<td>786</td>
<td>387</td>
<td>49%</td>
</tr>
<tr>
<td>Youth (18-24) experiencing homelessness</td>
<td>230</td>
<td>123</td>
<td>53%</td>
</tr>
<tr>
<td>Unaccompanied Children (under 18) experiencing homelessness</td>
<td>30</td>
<td>10</td>
<td>33%</td>
</tr>
<tr>
<td>Unaccompanied Youth (18-24) experiencing homelessness</td>
<td>129</td>
<td>82</td>
<td>61%</td>
</tr>
<tr>
<td>Parenting Youth (under 25) experiencing homelessness</td>
<td>40</td>
<td>29</td>
<td>73%</td>
</tr>
<tr>
<td>Total Population</td>
<td>980,080</td>
<td>197,601</td>
<td>20%</td>
</tr>
</tbody>
</table>
Note. The Oʻahu PIT report of May 2019 reported 4,453 homeless. The comparable figure reported here is 4,439, which was confirmed by Partners-In-Care after additional data duplicates were removed from the data set. The number of Native Hawaiians may be under counted as 463 individuals experiencing homelessness did not report their race. If individuals are both unaccompanied youth and parenting youth, they are counted in the parenting youth category. Source. Partners in Care; Oʻahu Continuum of Care. (2019). Oʻahu 2019 Point in Time Count: Unsheltered [Data file] and Sheltered [data file]. Unpublished raw data.

Native Hawaiians are the most over-represented group in the homeless population. Thirty-nine percent of all individuals experiencing homelessness on Oʻahu were Native Hawaiian, compared to 20 percent of the general population. This over-representation is even more dramatic in children and youth experiencing homelessness, with 49 percent of children being Native Hawaiian and 53 percent of youth being Native Hawaiian.

**Unique Needs:** When we look at risk factors for homelessness through a racial and ethnic equity lens we see that Native Hawaiian and other Pacific Islander youth are always over-represented. Native Hawaiian and Pacific Islander youth are more likely to be in the foster care systems, they are more likely to run away, be arrested, and sexually exploited. The disproportionate numbers of Native Hawaiian youth who are homeless clearly suggests a need for services that are targeted and designed to meet the needs of this subpopulation.

In general, colonization has had a devastating impact on indigenous populations. In the Spring of 2019, Liliuokalani Trust heard stories across the paeaina (islands) through 10 systems mapping workshops. Much of what was learned through this process has relevance for the CCP. The stories that emerged from this process highlight the deep connections that Native Hawaiians have to their land and family, and the struggles they have maintaining these connections while trying to thrive in the modern world. People talked of carrying deep pain that shows up in the form of harms committed to self or others and of a need for support to address old and new harms and to prevent trauma from transmitting across generations. Because Native Hawaiians are consumed by the effects of colonization and modernization the ohana (extended family) is often unable to care for itself. As one individual explained “family problems cause stress which cause negative behaviors which cause us to run out of money. People fight about money which then causes physical, emotional and mental abuse and leads to depression. This makes it hard to focus and bills pile up. The possibility of eviction becomes real. People turn to cheating and stealing. Ohana ends up in jail and you lose hope.” Another talked about the transfer of loss and trauma, the breakdown of ohana, and the challenge of maintaining traditions when kupuna (grandparents) are preoccupied with everyday caregiving of keiki (children) when makua (parents) are unable to. “Without a society with empathy for the hurts we show and the hurts that are hidden away we create structures, schools, healthcare, laws that ignore...
what is really going on. We attribute poverty to laziness, underachievement and personality flaws. But the root cause isn’t any of these. When there are no guardians of tradition exploitive forces can take root making it even harder for individuals to find success”. The loss of social and cultural guardians as well as the devastating effects of colonization and modernization has strained the Native Hawaiian ohana, which in turn, continues to fuel negative outcomes for Native Hawaiian youth and individuals.

Native Hawaiians have many strengths. Native Hawaiian youth are more likely than their non-Hawaiian peers to have an adult with whom they can talk about their challenges. Native Hawaiian adults are more likely than non-Hawaiians to belong to a religious organization and to rely on family for support in times of need. Native Hawaiians also are more likely to live in family households than are non-Hawaiians and to have grandparents in the household who take an active role in their grandchildren’s upbringing. As suggested by OYAB members, these strengths can be overpowered by intergenerational, cultural, and historical trauma that often show up as alcohol and substance abuse, domestic violence, incarceration of one or more parents, and intergenerational homelessness. When an ohana is consumed by one or more of these challenges, it can be difficult for any individual within a family to receive the support, resources, opportunities, or encouragement needed to exit intergenerational poverty.

A valuable source of information is Ka Huakai (2014.), published by Kamehameha Schools, Ka Huakai’s purpose is to identify the unique educational needs of Native Hawaiians and to identify or foster the development of programs that address these needs. Ka Huakai takes a holistic approach to wellbeing, explores the connections between material and economic, social and emotional, physical, spiritual, and cognitive well-being. The following is a summary of identified challenges and needs:

**Financial and Material Resources** –Ka Huakai provides insight into conditions that might be related to stress within the ohana and potential connections to family or youth homelessness:

- In 2018, Native Hawaiian adults constituted 18 percent of the total adult population in Hawai’i but 37 percent of the state’s incarcerated population. This highlights the overrepresentation of Native Hawaiians in the criminal justice system, suggests institutional racism parallel to that of the African-American community on the continent, and the strain that incarceration puts on families of color.
- Native Hawaiians had the largest proportion of single-mother family households among the major ethnic groups in the state. 21 percent of Native Hawaiian families are single mothers, compared to 13 percent of the state’s total families. suggesting Native Hawaiian families

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have fewer financial and material resources than other families to support their childrens’ success.\textsuperscript{11}

- Native Hawaiians had the highest unemployment rate among the major ethnic groups in Hawai’i. Of the Native Hawaiians in the civilian labor force in 2018, 3.5 percent were unemployed, compared with 2.4 percent of the total state population. This suggests that overall, Native Hawaiians have lower access to financial and material resources, poor lifetime earning potential, and decreased opportunity to exit poverty.

- Native Hawaiian households with children have the lowest mean income, are least likely to earn a livable income, are overrepresented in typically lower paying sectors of agriculture, labor, and production, and access public assistance more than other major ethnic groups in the state. Like the points above, this suggests Native Hawaiians face considerable challenges exiting intergenerational poverty.

**Juvenile Justice Engagement** – Disparities in the prevalence of antisocial behaviors like fighting among Native Hawaiians and their non-Hawaiian peers carry over into more serious and criminal behavior.\textsuperscript{12} Rates of crime and drug use are disproportionately high within the Native Hawaiian population. This problem is exacerbated by a criminal justice system in which race and ethnicity unduly influence outcomes at multiple points in the process, including arrests and incarceration. In fact, research has found that arrests of Native Hawaiian youth “far outdistance the frequency of arrest for all other ethnic groups, comprising 65,251 or 41.6 percent of all juvenile arrests” over an eleven-year period. The number of arrests of Native Hawaiian youth was higher than the volume of the next three ethnic groups combined.\textsuperscript{13}

**Sex Trafficking** - Peer reviewed empirical research shows disproportionate representation of Native Hawaiians among sex trafficking victims in Hawaii, with Native Hawaiians making up 64% of sex trafficking victims. The overutilization of Native Hawaiians to meet sex buyer demand can be directly linked to structural economic coercion and vulnerabilities connected to land dispossession, family violence and dysfunction, exposure to sexual violence, incarceration, cultural dislocation, intergenerational trauma, mental and emotional distress, racism, poverty, and ongoing inequities.

**Health** - Despite progress in outcomes such as teen birth rates, access to healthcare and levels of physical activity, Native Hawaiians are the most likely of all the major ethnic groups to miss a medical


\textsuperscript{12} Youth Risk Behavior Survey

\textsuperscript{13} Disproportionate Minority Contact in the Hawai’i Juvenile Justice System 2000-2010, Final Report, June 2012.
treatment because of cost, the most likely to have late or no prenatal care, and the least likely to have medical insurance. Native Hawaiian youth are also more likely to be overweight, to engage in risky sexual behaviors, and to abuse alcohol. Native Hawaiians are more likely to suffer from asthma and diabetes than are non-Hawaiians, and are more likely to die from coronary heart disease, diabetes, and cancer. Native Hawaiians have the highest mortality rates and lowest life expectancy among the major ethnic groups in Hawai‘i.

**Education** - After more than a decade of improvement, Native Hawaiian enrollment in postsecondary education and postsecondary degree completion has plateaued. About one in four young Native Hawaiian adults is enrolled in college, compared to one in three young adults statewide. The proportion of Native Hawaiian adults with a bachelor’s degree or higher is 19 percent compared to 34 percent. Educational outcomes among school-age Native Hawaiians continues to lag their non-Hawaiian peers in almost all areas including school attendance, behavior, and academic proficiency\(^\text{14}\).

**Housing and Homeownership** - Homeownership rates among Native Hawaiians have persistently lagged statewide averages. Given the high cost of living, high cost of housing, and relatively poor earnings among Native Hawaiians, housing security remains an important issue that presents many challenges.

**Social and Spiritual Strengths** – A closer look at some of the more probing measures highlights the spiritual strength of Native Hawaiians and the value of cultural strongholds such as the ohana.

- Hawaiian culture emphasizes that ohana consists of social relationships far beyond the conventional Western nuclear family. Explains Mary Kawena Pukui, “**Everybody was related to everybody else [and]...There was great attachment between the adults and the children of the entire community**”\(^\text{15}\). This suggests that through the traditions of ohana, Native Hawaiians have considerable access to mentors, role models, and social networks because one’s closeness to another person is independent of biological connection.

- Many Native Hawaiians rely on social and spiritual capital (e.g., grandparent caretakers, hanai families, and spiritual connections with Ke Akua) to support them through difficult circumstances. In other cultures, these assets may be considered unconventional and markers of dysfunction or distress. If done for the right reasons with the right support, social and

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spiritual connection represent cultural strengths that can support wellbeing among Native Hawaiians.

- Native Hawaiians live in multigenerational households more than households of other ethnicities. Such living arrangements support success of the entire ohana and have been shown to act as protective factors for children.

- Another cultural tradition that mitigates the impact of family challenges is the concept of hanai parenting, or child fosterage, in which children who do not live with their parents are cared for by other adults. The adults are often relatives from the child’s extended family or close friends of the ohana. Understanding the role of these cultural assets in addressing other challenges is critical to describing, understanding, and portraying the strengths and well-being of the Native Hawaiian community.

**Suggested strategies to meet the needs of Native Hawaiian youth experiencing homelessness based upon research and community engagement:**

- Culturally grounded strategies built on the resilience and strength of Native Hawaiian values, traditions, and institutions, that leverage Native Hawaiian social networks and institutions and that address and heal the ongoing historical, cultural, and intergenerational trauma for Native Hawaiian youth and young adults. This implies a need for trained professionals and CoC stakeholders well versed in the impact of cultural and historical trauma, intergenerational trauma, racism, and white privilege.
- Invest in programs that build earning potential for homeless Native Hawaiian youth (e.g. educational and vocational programs) and help them to stay in permanent housing over the duration of their lives (e.g. financial literacy programs).
- Create innovative housing options (i.e. host homes) in which Native Hawaiian youth can live with their chosen family. Stimulate community to participate in culturally-grounded traditions like hanai so that viable ohana becomes available to support Native Hawaiian youth.
- Create opportunities for Native Hawaiian youth and ohana to heal and build positive relationships, if not with each other, with their chosen ohana. Programs can even employ simple strategies such as providing phone cards so youth can call their chosen ohana.
- Support data collection that can accurately disaggregate Native Hawaiians and other Pacific Islanders so that CoC stakeholders can better understand the distinct needs of different groups and advocate better for change.
Micronesian or COFA Youth Experiencing Homelessness

Definition and Background: Hawai‘i is home to a unique population of individuals and families originating from the Federated States of Micronesia, the Republic of the Marshall Islands, and the Republic of Palau. Under the Compact of Free Association (COFA), citizens of these nations—whose territories were used by the United States for nuclear weapons testing and remain a U.S. strategic asset—were granted visa-free migration to the United States. The compact enables COFA islanders to freely live, work, or study in the United States. On their home islands, their health is threatened by the legacy of U.S. nuclear weapons testing, with contaminated soil and water altering their traditional diets and lifestyles. Many come to Hawai‘i seeking economic opportunities and health care. Citizens from these island nations have diverse ethnic identities: Marshallese, Chuukese, Yapese. In Hawai‘i, most members of this population identify as ethnically Chuukese, from the Federated States of Micronesia, and Marshallese, from The Republic of the Marshall Islands.

An estimated eighteen to twenty thousand COFA citizens legally reside in Hawai‘i, with some being U.S. citizens who were born in the United States, and collectively comprise 13.37 percent of the State’s population. Compared to the general U.S. population, COFA citizens who come to the U.S. are on average younger, have lower educational attainment, and higher rates of poverty.

Prevalence: While we cannot accurately estimate the number of COFA youth who are experiencing homelessness, we can say with 100% confidence that this population is disproportionately represented.

- Total homeless O‘ahu in 2019 based upon PiTC, 4,453 out of a population of 980,080. Rate of less than 1 per thousand (.45)
- COFA homeless Hawai‘i in 2015, 1,150 out of a population of 18,000 based upon estimates provided by government sources. Rate of 63 people per 1,000.

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Homeless providers confirm that COFA citizens make up a high percentage of those served when compared to the overall population size.

- Representatives for three shelters visited by HuffPost in November 2019 said COFA migrants can make up between 20 and 50 percent of their clients at any given time.\(^{18}\)
- RYSE served 131 unique youth at their Emergency Shelter between June 2018 and November 2019, of these 48% (54) were Native Hawaiian and 37% (48) were other Pacific Islander. The category of other Pacific Islander includes individuals from COFA countries as well as from countries such as Samoa, Tonga and Fiji.
- Among youth interviewed for the Street Youth Study, 25% of those aged 12-17 and 4.3% of those 18-24 identified a COFA country as their place of birth. 42% of youth 12-17 and 7% of youth 18-24 identified their race/ethnicity as other Pacific Islander.

**Unique Needs:** The immigration status of families and individuals from COFA countries, combined with cultural values around money (subsistence versus cash economy) place them at high risk for housing instability and homelessness. Many incoming COFA citizens don’t have significant savings, let alone credit scores, making it even more difficult for them to get home loans or secure rental apartments. Some COFA citizens, whose culture revolves around large, extended families, respond by doubling- or tripling-up in single apartments. Practices that place them at risk for eviction. The concept of being homeless does not exist in Micronesian culture, and the term “homeless” does not exist in Micronesian languages.

Root causes of youth homelessness among youth from COFA islands include experiences of trauma and violence, generational homelessness, disconnection from school. Exacerbating these causes are experiences of discrimination, often based upon negative stereotypes, more extreme poverty, and legal, administrative, linguistic and cultural barriers to service.

While unaccompanied homeless youth from COFA islands can be found throughout all O’ahu

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\(^{18}\) [https://www.huffingtonpost.ca/entry/hawaii-housing-homeless-cofa-migrants](https://www.huffingtonpost.ca/entry/hawaii-housing-homeless-cofa-migrants)
Root causes of youth homelessness among youth from COFA islands include experiences of trauma and violence, generational homelessness, disconnection from school. Exacerbating these causes are experiences of discrimination, often based upon negative stereotypes, more extreme poverty, and legal, administrative, linguistic and cultural barriers to service.

While unaccompanied homeless youth from COFA islands can be found throughout all O‘ahu regions, many are concentrated in downtown Honlulu’s Kaka‘ako area as well as in Waianae, including the Harbor encampment located adjacent to the Waianae Boat Harbor.

Sources for this section include research articles a report commission by the Office of the Governor and conducted by Princeton University’s Woodrow Wilson School of Public and International Affairs, interviews with youth with lived experience of homelessness and with representatives from organizations working with COFA citizens. The following is a summary of findings that are relevant to the CCP:

**Traditional family structures and cultural values** can conflict with expectations of mainstream US. For example, Chuukese deeply value large families with communal upbringing of children, which comes at odds with the push for family planning in our current healthcare system. They also come from a matriarchal society, where decision-making is often communal, and led by the elder women. Respected “aunties” can act as bridges or guides to those trying to navigate unfamiliar American systems. Understanding these dynamics is instrumental in disseminating information about housing and other services.

**Navigating complex US systems and laws,** can be difficult for COFA migrants who are used to a more laid back, less structured, less layered and bureaucratic approach to life. The number of steps to accomplish even simple tasks such as getting medication or enrolling in school, can be overwhelming and cause frustrations and misunderstandings between community and providers. An example of a culture clash can be found in attitudes towards appointments: a Chuukese youth being likely to not see a scheduled appointment as a serious commitment, more of something that they might do if nothing more urgent comes up (i.e. an obligation for a friend or family member), as opposed to seeing it as an obligation that may have consequences if not met. Because of limited English proficiency, pronounced cultural differences in communication styles, limited skills in navigating a complex system, and differing expectations, serious compliance issues arise such that providers too often regard COFA islanders as ‘difficult’.

**Housing practices and living arrangements** on COFA home islands are largely communal, with extended families living together in what in the United State would be considered overcrowded conditions. The quality of home construction and access to infrastructure and amenities also differs.
This creates a complex situation whereby COFA islanders who are living in communal settlements such as The Harbor, do not consider themselves to be homeless. US rental policies and housing eligibility requirements are out of sync with values that are deeply rooted among populations from COFA islands. Housing solutions that align with these values and which include accommodations for extended families and communal living are needed.

**Transitioning from a communal subsistence living environment** in which everyone contributes to the greater wellbeing, to a cash/earning based economy also creates stress on families. Wage earners are expected to support extended family, an expectation that can result in youth going out on their own or with siblings.

**Strong oral communication culture** where the strength of verbal agreements overrides the need for paper forms, photo identification, contracts, documents, and email. This can pose a barrier to accessing supports and services that require documentation.

**Limited English language proficiency**, among COFA immigrants, combined with lack of capacity among providers to provide translation or interpretation in the various languages spoken, present a significant problem. More than 12 distinct languages are currently spoken across Micronesia. Homeless service providers are struggling to serve youth who don’t speak English, or don’t speak English well. They are more than willing to hire and train staff who can speak Chuukese or Marshallese as the most common languages (Gilbertese, Pohnpeian, Kosraean, Carolinean, and Ulithian are less likely), but such staff are hard to find.

**Disproportionate engagement with the justice system** also puts this population at risk for homelessness and creates barriers to employment. More than a quarter (26.3%) of juveniles arrested by Honolulu Police in 2017 were other Pacific Islander. The majority of these are likely to be Chuukese, Samoan youth were counted separately and comprised 4.4% of those arrested.

**The quality of education in COFA countries is less than that available in the US.** This combined with family obligations often results in low attendance, early drop out and lower academic achievement. All three of the youth from COFA islands interviewed as part of the CCP, did not attend school beyond their 12th birthday (they are completing their GED at RYSE). Youth from Micronesian cultures often have lower levels of education than their peers. There are many reasons for this: family obligations being more important than attending school (caring for parents or younger siblings) attending funerals (1-10-day events); cultural belief that it is not good for parents to get involved with their child’s education – should be left up to the teachers. With regards to spending money on educational resources or on post-secondary education, very few COFA
islanders could afford to do this. In addition to high rates of poverty, any, many families are sending money to their home islands to support family members – doing this would be more important than paying for college tuition.

**Accessing adequate, affordable health care** is an urgent challenge for COFA islanders. Micronesians have a high burden of infectious and chronic disease. A study analyzing Hawai‘i hospitalizations found that Micronesians are hospitalized younger and with a higher severity of illness than other ethnic groups. Their unique immigration status makes COFA islander adults ineligible for Medicaid, and the state of Hawaii only finances care for children, pregnant women, and the aged, blind, or disabled. COFA adults can purchase health insurance through the Affordable Care Act (ACA) exchange. However, as non-native English speakers and immigrants they face financial, linguistic, cultural, and administrative barriers beyond those of average consumers. Changes in laws relating to COFA access to health insurance and care have created confusion. The 2017 Governor’s Health Access and Outcomes report, provided a comprehensive analysis of the problem and included several recommendations some of which are repeated as part of CCP suggested strategies.

**Suggested strategies to meet the needs of youth from COFA islands experiencing homelessness based upon research and community engagement:**

- Provide cultural competency training that includes historical context, impact of migration and challenge of acculturation.
- Develop culturally grounded strategies that incorporate Micronesian values and traditions.
- Invest in programs that build capacity for self-sufficiency, including services to acquire GED, vocational training, and access to post-secondary education.
- Create opportunities for youth from COFA islands to remain connected to or reconnect with family including family in their home islands.
- Support data collection that can accurately disaggregate Native Hawaiians and other Pacific Islanders so that CoC stakeholders can better understand the distinct needs of different groups and advocate better for change - Including modifications to the 2021 PiTC to extend questions on racial identity to the sheltered population and disaggregate racial identity data for unaccompanied youth.
- Advocate for improved collection and analysis of federal data by expanding the census data points to include questions about country of origin, languages spoken other than English, and disaggregating the Asian American Pacific islander designation.
• Develop a plan as to how to build CCP stakeholder linguistic and cultural capacity to serve youth from COFA islands, including staff recruitment and training activities as well as access to interpreters.

• Establish outreach kōkua or navigators to assist in identifying youth from COFA islands who are experiencing homelessness and connect them to shelter and services.

• Encourage CCP stakeholders to conduct advocacy in support of state policies such as –
  o Update Hawaii’s state identification card requirements to make it easier for COFA citizens and other residents with incomplete documentation to establish their official identities as Hawaii state residents.
  o Implement a Basic Health Plan (BHP) to provide a simple Medicaid-like system to low-income individuals who are ineligible for the formal Medicaid program including COFA islanders.

And in support of efforts of State legislators to advocate at the Federal level on behalf of the COFA population
  o Advance reinstatement of Medicaid benefits for COFA citizens as part of a larger legislative package.
Population of Interest – Youth attending college or university

An additional subpopulation of homeless youth for which very little information exists are students attending college or university. To date no institutions from within the State of Hawaii have participated in the annual survey of housing and food insecurity among students that has been conducted by the Wisconsin HOPE Lab since 2015\textsuperscript{19}. In 2019, 90 two-year colleges and 33 four-year colleges from 24 states participated and nearly 86,000 college students participated in the study.

- 5\% of respondents at two-year institutions self-identify as homeless; 13\% experience homelessness but do not self-identify as homeless.
- 2\% of respondents at four-year institutions self-identify as homeless; 12\% experience homelessness but do not self-identify as homeless.

The majority of students who experience homelessness temporarily stayed with a relative or friend, or couch surfed. \textbf{If the above percentages were to be applied to the approximately 18,000 students enrolled annually at the University of Hawaii, we could estimate more than 2,500 students as homeless or at-risk of homelessness.}

Population of Interest – Youth from Military Families

A little over a fifth (22.5\%) of respondents in the 2018 Street Youth Study\textsuperscript{20} reported having a parent who had served in active-duty, with 27.8\% of the older respondents reporting parental military service compared to 5.6\% of younger respondents. Homelessness is prevalent among veterans in general, but there has been an increase in homelessness among female veterans and veterans of child-bearing age that puts more children of veterans at risk for homelessness. There are higher rates of mental health conditions, such as Post-Traumatic Stress Disorder (PTSD) and depression among military personnel and veterans. Their subsequent symptoms may cause them to come across as distant or irritable to their children, causing family discord (one of the top reasons for youth becoming homeless). This can have harmful effects on veterans’ children by making them more susceptible to behavioral, academic and interpersonal issues.\textsuperscript{21}

\textsuperscript{20} Ibid
Homelessness on O‘ahu

- O‘ahu accounts for 80% of the state's homeless population.
- Hawai‘i’s per capita rate of homelessness is 2.7 times the national average and the highest in the country.
- Homelessness has decreased by 1% on O‘ahu since 2018.

Main findings from the O‘ahu Pit Count:

- The number of total sheltered individuals has decreased by 13% since 2018 (2,052).
- The number of total unsheltered individuals has increased by 12% on O‘ahu since 2018 (2,401).
- 4,453 total individuals experience homelessness on O‘ahu.
- Children under the age of 18 were mostly unsheltered (44%) or in emergency shelters (36%).
- Hawai‘i had the third highest rate of unsheltered unaccompanied youth.
SIGNIFICANT FINDINGS OF THE OʻAHU PIT COUNT

- **Oʻahu Shelters**
  - Oʻahu shelters are housing an increasing number of individuals who are IMHI 2018: 42% to 2019: 45% or indicate a substance abuse issue 2018: 34% to 2019: 38%.

- **IMHI Individuals**
  - IMHI individuals and the chronically homeless are more likely to live downtown than the overall homeless population.

- **An Increasing Number**
  - An increasing number of individuals who indicate experience of a mental health issues (IMHI) are becoming homeless in Oʻahu. Close to 25% of homeless individuals have an indication of a mental health issue and almost half are unsheltered.

- **Of the 7 Regions on Oʻahu**
  - Of the 7 regions on Oʻahu, two account for 50% of the homeless populations: downtown and the Waiʻanae Coast.

- **The Unsheltered Homeless Population**
  - The unsheltered homeless population is growing at a faster rate than sheltered - 2010: 33% unsheltered; 2019: 54% unsheltered.

- **17% of Unsheltered Adults**
  - 17% of unsheltered adults reported that homelessness began for them as children.

- **Majority of Younger Homeless Individuals**
  - The majority of younger homeless individuals are Native Hawaiian or Pacific Islander.

- **Oʻahu Has a Large Number**
  - Oʻahu has a large number of homeless children – at least 31% of homeless individuals are accompanied by at least one child. The number of unaccompanied minors has risen over 9 years.
Estimates of Youth Experiencing Homelessness on O‘ahu

a. **At-risk Unaccompanied Youth = 12,000**

**How was this estimate calculated?** We know based upon our conversations with OYAB, and review of other data sources, that early childhood experiences of violence and trauma are common among youth experiencing homelessness, along with engagement with child welfare and justice systems and dropping out of school. Of the total number of youths on O‘ahu between the ages of 15 and 24 (n=122,156)\(^{22}\) we can conservatively estimate that approximately 10% have at least one of the following risk factors for experiencing homelessness as an unaccompanied youth:

- **Youth experiencing family homelessness including youth who are sharing the housing of others due to loss of housing or economic hardship (doubling up)** – In 2018, 3,604 students were identified as homeless or in unstable housing (i.e. doubled up) by the HIDOE, with O‘ahu accounting for 77% (2,310) of these students. More than one in five homeless students are unsheltered. A total of 793 children under the age of 18 were counted in the 2019 Point in Time Count.

- **Youth involved or formerly involved in the child welfare system** – Statewide a total of 710 children ages 12 to 18 years old were in foster care in 2019, most of whom live on O‘ahu, of these 84 exited to emancipation.

- **Youth involved or formerly involved in the juvenile justice system** - 1,646 individual juveniles were arrested in 2016 in city and county of Honolulu, and there were 109 new probation sentences and 28 confinements to Hawai‘i Youth Correctional Facilities (HYCF).\(^{23}\)

- **Youth who have not completed high school** - In 2017/18 school year, HIDOE reported a drop out rate of 12.6% and a four-year graduation rate of 84.4%\(^{24}\). Out of a high school population of 50,818, we can estimate that approximately 6,400 will not complete high school with their graduating class. The graduation rate for homeless students in the same year was 66%.

- **Youth who identify as lesbian, gay, bisexual, transgender, or questioning (LGBTQ)** – 9.1% (n=7,589) of Honolulu high school students surveyed through the Youth Risk

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\(^{24}\) http://www.hawaiipublicschools.org/Reports/2018HIDOEDatabook.pdf
Behavior Survey in 2017 indicated a sexual identify or Lesbian, Gay or Bisexual, and additional 4.3% (3,586) said they were “unsure” as to their sexual identity (questioning)\textsuperscript{25}.

b. **Unaccompanied youth experiencing homelessness = 181**

**How was this number calculated?** A total of 99 unsheltered and 45 sheltered unaccompanied youth ages 18 to 24 were counted in the 2019 Point in Time Count, plus an additional 37 unaccompanied minors.

c. **At-risk Pregnant or Parenting Youth = 4,000 estimated**

**How was this estimate calculated?** Hawai‘i State Department of Health, Office of Health Status Monitoring reports that in 2015 (most recent year for which data is available), there were 474 live births to females ages 10 to 19 in the city and county of Honolulu. All these young mothers, plus the fathers of their babies, can be considered at-risk for homelessness. During the same year there were approximately 2,154 live births to females ages 20-24, a subset of whom would also be at-risk.\textsuperscript{26} The estimated population was created by estimating 800 new teenage parents annually (some of the births would be a second child to the same parent) and multiplying by this one-year count by five. Additionally,

- 21% of high school youth in Honolulu County reported being currently sexually active in 2015 (n=10,631)\textsuperscript{27}
- 36% of these youth did not use any form of birth control last time they had sexual intercourse (n = 3,827)

d. **Pregnant or Parenting Youth Experiencing Homelessness = 41**

There were 14 unsheltered and 27 sheltered pregnant or parenting youth counted in the 2019 Point in Time Count.

\textsuperscript{25} Hawaii Health Data Warehouse, State of Hawaii, Hawaii School Health Survey: Youth Risk Behavior Survey Module 2017. Note - the denominator for 2017 Honolulu YRBS is 83,400 students.
\textsuperscript{26} Data not available by County, estimate was established based on total number of births to mothers 20-24 of 3,591 of which approximately 60% can be estimated for Honolulu based upon trend data.
\textsuperscript{27} State of Hawaii, Hawaii School Health Survey: Youth Risk Behavior Survey Module 2015 Report
Youth Homelessness – Needs

The following sources were used to establish an understanding of the needs of youth experiencing homelessness on O‘ahu:

- A Street Youth Study - The Experience of Homeless, Runaway and Other Street Youth on O‘ahu\(^28\)
- Youth Housing Stability Survey\(^29\)
- Touchstones of Homelessness Report\(^30\)
- 2019 Point in Time Count
- CCP Community Meetings and Provider Interviews
- OYAB Meetings and Interviews

It has been said many times that we are all a few bad decisions, or unanticipated events, away from homelessness. For youth experiencing homelessness or at-risk for homelessness on O‘ahu, the decisions or events that set them on a path to homelessness were often beyond their control. In every one of the stories shared by OYAB, the pathway to homelessness began when they were a child. Themes of physical and sexual abuse, parental substance use and family homelessness – all adverse childhood experiences that are known to have significant and lasting impacts – were common, with youth listing multiple experiences. In some situations, a single event triggered coping mechanisms that resulted in homelessness: being raped by a family member and not protected by their parents caused two young sisters to run away; death of the family member “tutu” who provided stability led to a spiral of hopelessness and self-destructive behaviors. While most youth didn’t experience unaccompanied homeless until they were in their early or late teens, the majority experienced housing instability or homelessness with their families.

The following findings from the Street Youth Study, in which 151 youth were surveyed\(^31\), provides additional insights into challenges faced by youth experiencing homelessness:

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\(^{29}\) Commissioned by PIC and was prepared by Central O‘ahu Youth Services Association, Inc. supported by RYSE, Hale Kipa and Waikiki Health – Youth Outreach Project (YO).


\(^{31}\) 59.6% were living unaccompanied on their own, 7.3% were unaccompanied as head of household with their own child/ren, remaining 33.1% were in a family household.
O’ahu Coordinated Community Plan to End Youth Homelessness

- **Family Problems:** Family problems (arguments at home, being kicked out, disagreeing with rules at home, parental substance use) ranked high among youth regardless of age – with most listing multiple family challenges as reasons for being homeless. Over half (50.3%) of youth had been exposed to parental substance use, 60.9% to parental incarceration.

- **History of homeless:** At some point in their lives, all of the youth surveyed had experienced homelessness and sought temporary places to sleep at night (such as the streets, cars, abandoned buildings, emergency or transitional shelters, and transitional housing). Almost half (48.0%) had their first homeless experience with their families. The average age of the first homeless episode was 14.1 years. 59.4% reported being homeless for one year or more.

- **Trauma:** One in five youth indicated an unsafe home environment and one in four listed experiences of physical abuse as reasons for their homelessness, 77.5% had experienced abuse.

- **System Engagement:** 12.1% of youth (14.7% of youth 12-17 and 17.9% of youth 18-24) listed “discharged from an institutional setting” as a reason for their homelessness. 39.7% had interactions with the foster care system and 48.3% with juvenile detention.

- **Disconnected:** About a quarter (24.5%) had dropped out of school, and approximately half were considered idle (neither in school nor employed).

OYAB and community stakeholders were able to identify resources that exist (see service map developed by OYAB in the Appendix) to support O’ahu’s homeless and unaccompanied youth. However, there is agreement that current programs are inadequately resourced to meet the various needs among this diverse population.

As the Street Youth Survey concludes: “A fully resourced service delivery system requires a range of supportive and housing service components specific to the unique and varied needs of homeless youth. Since street youth commonly utilize different types of services, come in-and-out of homelessness, and have changing needs, prevention and intervention programs that embrace collaboration among organizations and move towards a coordinated system of care will help tackle youth homelessness. Families, schools, caring adults and communities are all important for supporting youth and preventing youth homelessness. To end youth homelessness, what are needed are interventions that provide stable housing as well as supportive connections to caring adults and services that guide towards long-term success”.

Need Area 1 – Youth Focused Housing First

Unsurprisingly, priority solutions to ending youth homelessness on O‘ahu, as provided by community stakeholders, included addressing housing instability as a means of reducing risk for homelessness and providing a continuum of housing options that are tailored to meet the needs and preferences of youth who are experiencing homelessness.

- System engaged youth (child welfare, juvenile justice, behavioral health) and other youth who are at-risk for homelessness (see special population section) need services and supports that ensure housing stability, especially during periods of transition – such as when they are released from an institution, or their time in care comes to an end.
- Unsheltered youth living in parks or on the beaches, who are couch surfing, or living in unsafe exploitive situations (including those who may not be ready for change) need access to safe places, caring adults and shelter that is youth-friendly and low barrier.
- Sheltered youth, including those who are pregnant and parenting, need housing options that provide long-term stability, and which ensure that they are not at risk for a return to homelessness.

One of the main drivers of youth homelessness on O‘ahu, and a challenge that CoC partners at the local and state levels are working to address, is lack of affordable rental housing. According to the National Low-Income Housing Coalition, fair market rent (FMR) for a studio or efficiency in urban Honolulu in 2019 is $1,390 per month, $2,067 for a two-bedroom apartment and $3,631 per month to rent a house or an apartment with 4 bedrooms. This means that if a household spends no more than 30% of gross income on utilities, the household must earn $6,890 a month, or $82,680 a year to rent a two-bedroom apartment at FMR in Urban Honolulu. There are multiple factors causing and influencing the housing crisis: high cost of land; not enough inventory or new development of affordable, below market rate housing; and the impact of tourism on the housing market.

While adding to the inventory of beds available to youth experiencing homelessness is clearly needed, careful consideration must go into the location, design and operation of housing programs. O‘ahu can be divided into five basic regions, downtown (urban Honolulu), Leeward Side, the North Shore, Central, and the Windward Side. The current location of emergency shelters, transitional living programs, and Rapid Rehousing scattered sites, means that youth must leave their community to access resources, and transitioning in place is not possible. Additionally, there is a need to consider barriers that prevent youth from accessing available housing resources, such as not wanting to leave their community or restrictive policies regarding length of stay. Given wait lists for available housing programs (92 youth on the by-name list as of December 2019, 99 unsheltered youth in PiTC) we know that there is insufficient inventory of beds that are available to youth.
Priority service needs relating to housing and supportive services have been identified as:

- **Coordinated care and supports for youth before and after they are placed into a housing program.** Youth and providers agree that one of the shortcomings of the current continuum of care is that the support provided to youth before and after placement in housing is often insufficient in terms of the amount and type of support. For example, youth experiencing homelessness want a connection with a caring adult who can link them to resources and services that aren’t housing related, but which help them make progress toward goals of housing stability and permanency, such as employment, education, health, childcare, benefits advocacy. They want someone who has knowledge of how the system works, as well as the types of challenges that youth can face in establishing stability, to help them succeed in their placements.

- **Emergency shelters that are low barrier and which incorporate practices that create a safe, welcoming and age appropriate environment with youth and which are not time limited.** Two organizations, RYSE and Hale Kipa currently operate emergency shelters that are open to and tailored for youth. These organizations have a combined capacity to serve 50 youth (20 minors at Hale Kipa and 30 older youth at RYSE). Youth have requested that shelters, transitional living programs and service hubs be set up in other regions across O‘ahu, and that these facilities have policies that allow 24/7 access, and to provide shelter until a more permanent solution can be found. Youth pointed out that a tent in a park or on the beach offers more stability, privacy and comfort than a shelter where they are asked to leave early morning, don’t have anywhere to store their possessions, can’t bring their dog (a major barrier for many youth who have strong emotional attachments to their dog) and have to leave back to the streets after 30 days.

- **Transitional housing and rapid rehousing programs with extensive supportive and wraparound services.** There are currently 32 youth focused RRH beds within the CES operated by The Institute for Human Services (IHS) and Alternative Structures International. ASI partners with RYSE and Youth Outreach (Waikiki Health and Hale Kipa) to conduct outreach and provide supportive services after housing placement. There are several challenges in operating TH/RRH models on O‘ahu that need to be overcome: 1) there is an inherent difficulty within a housing
market as impacted at Honolulu in finding landlords willing to rent to individuals with a history of homelessness, and; 2) providing the level of support and services needed to set youth up for success. In many cases there is a contradiction between what youth want and what they are ready for – the goal for most young adults is to have their own place, where they can be independent and self-sufficient. However, youth who have been homeless need support with independent living skills, adhering to housing policies such as letting friends or family move in or couch surf, and meeting education and employment goals.

- **Designated maternity shelter program, rapid rehousing or transitional housing resources specifically designated for pregnant and parenting youth.** The CES prioritizes pregnant and parenting youth and providers work to ensure that this especially vulnerable population is not living on the street or in unsafe conditions. However, despite these efforts, 14 pregnant or parenting youth were among the unsheltered count in 2019. Given that pregnant and parenting youth represent such a high percentage of the overall population of youth experiencing homelessness, there is a need for housing combined with supportive services that aim to strengthen these young families and eliminates risk for a return to homelessness.

- **Permanent supportive housing beds for youth experiencing homelessness or at imminent risk for homelessness with high needs related to physical or mental health, developmental disabilities or substance use.** There are currently no PSH beds designated for youth, the only PSH beds available to youth come through a proportional allocation of adult PSH units that are managed within the CES. Given the high prevalence of youth with behavioral health needs, as well as with physical or developmental disabilities there is a need to address this gap.

- **A housing solution for unsheltered unaccompanied minor youth.** The number of school-age unsheltered and unaccompanied homeless youth on O‘ahu is unknown. Based upon community provider reports we know that the number is significantly higher than reported by HDOE (30 in 2018). Current options to meet the needs of this population include reengagement with family (an option for youth of all ages, but not always possible or safe), placement into foster care, or group home, or the Federal Basic Center Program (BCP) emergency shelter operated by Hale Kipa. The development of alternative housing options that meet youth where they are at and which allow them to stay close to friends and school, such as host homes, are needed to better serve the needs of this special population.
Need Area 2 – Education and Employment

Addressing the education and employment needs of youth who are at-risk for homelessness, or experiencing homelessness, have been identified as priority prevention and diversion strategies within the CCP. Education and employment are both protective factors that can prevent youth from experiencing homelessness, as well as essential parts of exit or transition plans out of homelessness.

Even with current low unemployment rates, youth who are homeless on O‘ahu face a lot of barriers to finding and keeping employment. While specific barriers differ from youth to youth, many of them can be put into a social exclusion category – impacted by social, political and economic conditions such as poverty, unemployment, inadequate housing, sexism, racism and homophobia. Not having a home means that youth experiencing homelessness may not have an address to put on a résumé, a phone number for job call backs, and a safe place to prepare for job interviews. It also means not having the opportunity to recover from a day’s work in a safe environment where they can shower, get a good night of sleep, prepare their own food (including food to take to work), recover from illness or injury, rest, and maintain their health.

- Youth who are at-risk for homelessness, especially minors, need to be identified and provided with services and support that promote family engagement and stability as early as possible. Community stakeholders identified multiple missed opportunities for intervention when looking at the stories of youth created by OYAB, especially in preventing youth from disconnecting from or dropping out of school.

- Youth who are at-risk for homelessness and who are homeless, including youth who are pregnant and parenting, need education and employment resources that are in alignment with their individual needs and preferences and which address barriers such as childcare, transportation, and tuition or training fees.
Youth experiencing homelessness, both sheltered and unsheltered, need to have their basic needs relating to health and safety met prior to being connected to education or employment.

Youth experiencing homelessness need support in identifying and accessing resources that can help with getting and keeping a job, and completion of high school or post-secondary education. They need help in navigating eligibility requirements for employment programs, completing application processes and forms for post-secondary education or occupation training courses, and handling the stresses and pressure of learning and workplace environments.

Youth experiencing homelessness, including pregnant and parenting youth, need curated work-readiness training, skills training and internship opportunities that are strengths-based and provide opportunities for them to build confidence and prepare them for future employment.

The most recent research conducted by Chapin Hall indicates that “Not completing high school is the greatest single risk factor associated with experiencing unaccompanied homelessness as a young person. This holds true even when accounting for other characteristics, such as race, sexual orientation, and household income\(^{32}\).”

Hawai‘i Dept. of Education (HIDOE) has made progress in reducing the dropout rate from 14.2% in 2016/17 to 12.6% in 2017/18 and increasing the four-year graduation rate from 82.6% in 2016/17 to 84.4% in 2017/18. Hopefully this trend will continue given that the relationship between disrupted education and homelessness is well documented. O‘ahu students experiencing homelessness have challenges in areas such as attendance, drug and alcohol use and emotional health, that if not addressed will limit their future opportunity and place them at increased risk for outcomes such as homelessness.\(^{33} 34\)

<table>
<thead>
<tr>
<th>How did students identified as homeless compare to their housed peers in 2017/18?</th>
<th>Homeless</th>
<th>Housed</th>
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<tbody>
<tr>
<td>How many were taking Advanced Placement (AP) courses</td>
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<td>5%</td>
</tr>
<tr>
<td>Chronically absent</td>
<td>25%</td>
<td>8%</td>
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<tr>
<td>Graduate High School</td>
<td>66%</td>
<td>84%</td>
</tr>
</tbody>
</table>

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Among the youth who completed the Street Youth Study survey, about a quarter (24.5%) dropped out of school. Nearly two-thirds of older youth (64.3%) had completed at least a 12th grade education, while about three-quarters of younger respondents were still enrolled in school (58.3%) or in alternative programs (13.9%). This somewhat contradicts the stories (n=9) provided by OYAB, in which all of the youth had dropped out of school.

Youth who are homeless want to work and many diligently pursue employment opportunities or work in some capacity. However, being homeless makes it next to impossible to obtain and maintain formal employment. On O‘ahu, having a job isn’t always enough to prevent homelessness or housing instability. Unemployment rates are low (2.5% as of September 2019), so finding a job isn’t so much of a problem, as is finding a job with pay rates that match up with housing, food, transportation, childcare and other costs.

Most jobs on O‘ahu are in sectors that don’t offer high wages: Accommodation and Food Service (12.1%); Healthcare and Social Assistance (11.8%); Retail Trade (11.6%); Public Administration (10.3%) and Educational Services (9.7%). To make ends meet, many people work multiple jobs and long hours. Barriers to employment among youth experiencing homelessness include:

- Low educational attainment
- Mental health and substance use
- Physical disability
- Criminal record
- Limited access to transportation
- Lack of vocational training
- Lack of computer access
- Lack of prior work experience, i.e. to provide reference
- Hunger, lack of sleep, difficulty maintaining hygiene standards
- Age discrimination
- Lack of encouragement to plan and pursue career opportunities
- Weak social and human capital (education, friends, families, networks)
- Lack of life skills (budgeting, time management, conflict resolution)
- Lack of recognition and value in hiring youth with barriers
- Lack of support with transition to adulthood
- Employers are ill-prepared to address the needs of youth who are homeless
Priority service needs relating to education and employment are:

- **Enhanced educational support services targeted at youth who are at-risk of homelessness or experiencing homelessness** – O‘ahu’s four public school districts (Honolulu, Windward, Central and Leeward) are represented on the CoC through Community Homeless Concerns Liaisons (State funded) who are focused in prevention and diversion services. Community Homeless Concerns Liaisons make referrals to the CES, attend Youth CES case conference meetings and work with individual schools and service providers to facilitate access to needed services and supports for school-age youth who are experiencing homelessness either as part of a family or as unaccompanied youth. Priority needs are for interventions that can:
  a. Prevent students who are at-risk of homelessness or experiencing homelessness (either unaccompanied or as part of a family) from dropping out.
  b. Provide youth who have dropped out of school with educational supports or resources that are needed to support reengagement.

These services could include counseling or mediation that supports family engagement and stability, flex funds to cover needs that cannot be covered by existing resources (i.e. childcare costs for school-age parents), peer outreach or navigation specialists focused on education, access to online or alternative educational programs that don’t require in-person classroom attendance, scholarships to summer camps.

- **Employment programs designed specifically for youth who are experiencing homelessness** – There are initiatives aimed at connecting adults who are homeless to employment, such as Hele2Work operated by IHS (mobile employment center hosts job fairs at 11 locations across O‘ahu and conduct outreach at homeless camps), or to at-risk youth populations such as Job Corps and Summer Youth Employment Program. However, there are very few programs designed to meet the needs of youth who are unsheltered or who are sheltered but need to be connected to an employment pathway as a means for future economic independence. Such programs could combine work-readiness and “soft-skills” training, career exploration and counseling. Programs need to be tailored to serve special populations (pregnant and parenting youth, justice engaged, Native Hawaiian, Micronesian youth) or have capacity to serve diverse populations. These programs need to align with the USICH principles described on pages 11 to 18, and have the following design features or characteristics:

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35 Funded by State Department of Vocational Rehabilitation and City and County of Honolulu provides paid summer employment opportunities to youth 16-24 with disabilities. SYEP coordinator, Kirsten Thornton, at (w) 808-768-5789
Partnerships between the CoC and workforce and economic development sectors –

To date there have been limited efforts to align the work of the CoC in addressing youth homelessness, with the work of organizations who are focused on meeting O‘ahu’s workforce and economic development needs. YHDP presents an opportunity to address this gap, and to develop mutually reinforcing activities such as workforce development initiatives targeted at youth at-risk of or experiencing homelessness. Individuals who are homeless are identified as a priority population within the Workforce Investment Opportunity Act (WIOA) State Plan for the State of Hawai‘i FY-2018. The 2018 WIOA Title I (youth programs) budget in 2018 was more than $8.4 million to serve 4,877 eligible youth ages 14 to 21.\(^{36}\) There are existing efforts such as the City and County of Honolulu’s Youth program, American Job Centers, Job Corps and the Going Home Program which aim to serve at-risk populations (youth and young adults who have been incarcerated or confined within a justice facility, youth and adults with a disability) that could be integrated into the CCP. The WIOA State Plan noted a need for improved outreach “very few young people take advantage of short—term vocational training in high—demand occupations, and the general consensus of those interviewed for this assessment is that this is because they are not aware of the possibilities available to them”. The Goals of the Workforce Development System in Hawai‘i are

1. To provide coordinated, aligned services.
2. To prioritize services to vulnerable populations with barriers to employment as described under WIOA, including veterans, unemployed workers, youth with disabilities, homeless individuals and Native Hawaiians, which are currently of critical concern in the State.

Needs Area 3 - Social-Emotional Wellbeing and Health

Experiences of trauma, violence and loss are common, if not universal, among youth experiencing homelessness and in most cases are among the causes of their homelessness. Community stakeholders, including OYAB, described a complex interplay between health and homelessness. Needed services include activities aimed at addressing root causes of family instability and violence, preventing child abuse and exploitation, building capacity of schools and youth service organizations in trauma-informed care, improving access to behavioral health services and supports.

- All youth, regardless of housing status, need access to healthcare that is free or low cost, and not subject to barriers that would prevent them obtaining or complying with needed treatments (i.e. cost of prescription, concerns around confidentiality, complicated instructions). Services should include general health care, sexual and reproductive health, substance use assessment and mental health evaluation and referral.

- Youth need connection to people and programs that understand how trauma can affect someone’s behavior and ways of thinking about themselves (i.e. low self-esteem) and others (difficulty trusting). Youth who have mental health and/or substance abuse problems, often connected to these experiences, need access to proven effective services and supports that promote recovery.

- Unsheltered youth need to have their immediate basic needs relating to physical health met. This would include access to nutritious food, hot water, access to hygiene products. This population may avoid seeking health care services because of previous bad experiences of being treated badly, or in the case of unaccompanied minors of being reported to child welfare services. Youth need connection to caring supportive adults or peers who can help connect them to youth-friendly clinics and programs.

- Youth experiencing homelessness, sheltered or unsheltered, need assistance in overcoming barriers such as lack of documents, the need to present a health card or supply a permanent address; the perceived need for an adult’s consent or involvement. There is an ongoing, urgent need for street-accessible or mobile medical clinics, along with regular medical follow-up and testing for STIs and pregnancy.
Pregnant and parenting youth who are homeless, or at risk of homelessness need supports and resources to facilitate healthy birth outcomes for both baby and mother, successful and engaged parenting skills, fostering attachment between parent(s) and child(ren).

Local data on health indicators and inequalities among youth who are homeless or at risk of homelessness confirm a need for services focusing on health and wellbeing outcomes.

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Committed self-harming acts such as cutting or burning themselves</td>
<td>31.8%</td>
</tr>
<tr>
<td>Had suicidal thoughts</td>
<td>39.7%</td>
</tr>
<tr>
<td>Had attempted suicide</td>
<td>58.3%</td>
</tr>
<tr>
<td>Used substances in the past 30 days</td>
<td>88.1%</td>
</tr>
<tr>
<td>Been admitted to a drug treatment program</td>
<td>32.5%</td>
</tr>
<tr>
<td>Described their health as “fair” or “poor”.</td>
<td>26.2%</td>
</tr>
<tr>
<td>Reported having a physical or developmental disability or been diagnosed with HIV/AIDS.</td>
<td>13.9%</td>
</tr>
</tbody>
</table>

**Priority service needs relating to social-emotional wellbeing and health are:**

- **Access to a range of substance abuse treatment options, including residential care specifically for youth experiencing homelessness** – It is very unlikely that youth who are homeless and who are addicted to drugs or alcohol will be able to establish housing stability unless they have effective treatment. Unfortunately, the demand for drug treatment is greater than the supply. CES partners indicate that they are only able to link youth in their care to residential treatment options on rare occasions. Treatment services available to youth experiencing homelessness on O‘ahu are:
  - Bobby Benson Center a licensed 30-bed facility that offers a range of services to youth age 13 and 17. The Center participates with major health insurance plans and has a fee for service contract with the Department of Health (Child and Adolescent Mental Health Division).
  - Outpatient services are available in a variety of settings including Queen’s Medical Center, Care Hawaii Inc., The Salvation Army (includes specialized treatment for pregnant and parenting women), Waikiki Health Center, Women in Need (includes specialized treatment for victims of domestic violence), Child and Family Services (includes treatment for juvenile offenders) and YMCA (school-based treatment).

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In addition to expanded treatment options designated for youth experiencing homelessness, there is also a need to build capacity among youth homelessness service providers to provide assessment, case management and treatment and wellness services.

- **Education and support on a range of health-related topics** – School and parents are sources of health education and support that are not accessed by most youth who are homeless. Hawaii schools include curricula on core concepts related to health promotion and disease prevention:
  - Mental and Emotional Health
  - Healthy Eating and Physical Activity
  - Personal Health and Wellness
  - Safety and Prevent Unintentional Injury and Violence
  - Tobacco-Free Lifestyle
  - Alcohol and Other Drug Free Lifestyle
  - Sexual Health and Responsibility

Youth who drop out of school, miss out on these lessons. Organizations who are on the front line working with youth experiencing homelessness need to step up and provide training and education to youth that builds their knowledge of healthy practices and which use evidence-based curricula and approaches.

- **Resources that promote positive connections and healthy lifestyles** – During community meetings, youth and providers discussed the importance of connecting youth and their families to positive recreational and social activities of their choosing that are healthy and fun. Also supports and resources to cultivate a sense of self-worth and right to healthy relationships with partners, peers, family, and the community, as well as the skills to resolve conflict and solve problems. Programs that build these connections and which address barriers relating to coordination, cost (fees, purchase of equipment) and transportation as part of a holistic approach to youth wellness are needed.

- **Health and wellness services for pregnant and parenting families who are experiencing homelessness** – Coping with pregnancy and parenthood is difficult for any young person. For pregnant and parenting youth who are homeless, those challenges are compounded by the ongoing stress of not having a safe or stable place to live with their children. Housing targeted at this population, including the suggested maternity shelter program, need to include staff and programs with expertise in: Early childhood development; Maternal health including reproductive and emotional health; Parent education; Family engagement; Domestic violence; Alcohol, smoking or drug use; and Nutrition.
Needs Area 4 – System Change

In addition to direct services to address specific youth needs, there are system-level strategies that are needed to support CCP goals\(^\text{38}\).

- Community education to end the stigmatization of youth who are homeless as an “otherized” population seen as being homeless by choice, patronized or looked down upon, and to build the understanding and political will needed to invest in proven, preventive solutions that have the potential to reduce or eliminate homelessness in Hawai‘i.

- Use feedback and ideas from youth who have experience of homelessness to inform solutions. In addition to OYAB, there needs to be greater efforts made to engage youth in decision-making.

- Work collaboratively to change policies and actions that criminalize homelessness and make it difficult for youth to establish stability such as: youth status offenses; bail requirements for low-level offenses; and use of compassionate disruptions by law enforcement to ensure access to public spaces by the public. A specific issue raised by youth is the need to ensure that they do not lose essential documents or personal possessions during transition from the street to a shelter.

- Communicate City and County zoning and permitting rules and conventions that allow for development of homes that have a smaller footprint\(^\text{39, 40}\). Explore building tiny homes on underused land and consider legalizing alternative “shelter” structures made with materials like bamboo, wood pallets, and recycled materials. Re-examine requirements, i.e. for minimum number of parking spots that drive up the cost of homes.

- Integration of data systems on homelessness to enable local analysis of costs and benefits. Consistent identification of homeless individuals as homeless when they utilize hospitals, the criminal justice system, and are former foster youth, would allow for local cost estimates. Such cost estimates could then be compared to the cost of preventive interventions.

- Provide support to organizations working on the frontline of homelessness. Provide wages and benefits that allow organizations to attract and retain qualified and experienced staff. Develop strategies that promote self-care and professional development, and which aim to reduce risk for vicarious trauma and burnout. Build opportunities to hire individuals who have lived experience and provide the level of training and supervision needed to make sure that everyone working within the CoC is equipped for success.


\(^{39}\) [http://www.honoluludpp.org/Portals/0/pdfs/construction/ADU_FAQ.pdf](http://www.honoluludpp.org/Portals/0/pdfs/construction/ADU_FAQ.pdf)

\(^{40}\) [https://www.honolulu.gov/rep/site/ocs/roh/ROH_Chapter_27_.pdf](https://www.honolulu.gov/rep/site/ocs/roh/ROH_Chapter_27_.pdf)
YHDP PROJECTS

Funding Amount and Project Type Allocations

$3,686,000 million total in HUD YHDP funding is available. Grants will be for two years with the possibility thereafter of renewal annually through the HUD Continuum of Care (CoC) funding competition. The funds available will be allocated/awarded to eligible project types as follows (Amounts may be adjusted to maximize project budgets and projects).

<table>
<thead>
<tr>
<th>Project Types</th>
<th>2-Year YHDP Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Host Homes</td>
<td>$25,000 - $200,000</td>
</tr>
<tr>
<td>Joint Transitional Housing/Rapid Rehousing</td>
<td>$93,000 - $336,000</td>
</tr>
<tr>
<td>Mobile Crisis Response</td>
<td>$200,000 - $550,000</td>
</tr>
<tr>
<td>Diversion</td>
<td>$250,000 - $650,000</td>
</tr>
<tr>
<td>Permanent Supportive Housing</td>
<td>$350,000 - $850,000</td>
</tr>
<tr>
<td>Guide On The Side</td>
<td>$450,000 - $1,050,000</td>
</tr>
<tr>
<td>Coordinated Entry System</td>
<td>$75,000 - $150,000</td>
</tr>
<tr>
<td>Homeless Management Information System</td>
<td>$100,000 - $200,000</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>$3,686,000</strong></td>
</tr>
</tbody>
</table>

*All HUD Funds require a 25% match on all budget items, except leasing.*

The YHDP RFP and supporting documents are provided as an attachment.

Eligible Project Types

**Host Homes** are flexible (short or medium term), crisis response community-based settings that offer youth 24/7 immediate access to a safe alternative to shelter. Financial and support services to sustain host homes. *Key Components*

a) Robust training for hosts including TIC, PYD,

b) Individualized training and support from program; comprehensive education; 24-hour question line for hosts.

c) Program serves as an intermediary to provide support to hosts, help meet youth needs, conflict mediation, case management, family reunification/strengthening with family of choice when safe and appropriate etc.

**Joint Transitional Housing & Rapid Rehousing** (TH-RRH) combines Transitional Housing (TH), a service-intensive, frequently congregate-care component, with Rapid Re-Housing (RRH), a scattered site independent living component. Youth can skip right to RRH if they choose, but have the option of starting in TH (if they are younger, coming out of foster care, or want more structure). *Key Components*
O’ahu Coordinated Community Plan to End Youth Homelessness

a) Flexible, long-term subsidies to support transition into independent housing.
b) Landlord recruitment, education, and incentives.
c) Opportunities for shared housing/roommates.

**Mobile Crisis Response** can have or be supportive service elements connected to case management, drop-in centers, legal services, outpatient health services, substance abuse treatment, life skills training, and case management. *Key Components*

a) Provides 24-hour mobile access to basic needs and case management.
b) Potential staffing to include peers and mental health clinicians.
c) Engages with police to defer calls to mental health crisis team.

**Diversion** provides services to unaccompanied youth under the age of 25 with short-term supportive services to divert from homelessness. Helps youth find alternative housing solutions to crisis housing. *Key Components*

a) Connection to mainstream benefits and services.
b) Support establishing and implementing a long-term housing stabilization plan.
c) Assistance building or rebuilding family and community support networks.

**Permanent Supportive Housing** (PSH) provides long-term, flexible rental subsidies for YYA experiencing homelessness and have disabilities/disabling conditions that affect their long-term ability to gain income/live independently without ongoing services. *Types of Programs*

a) Scattered-Site Independent housing units.
b) Group living sites for youth with higher level of needs/support.
c) Affordable dorm-style housing for students.
d) Wraparound supportive services.

**Guide On The Side** (Navigation and Long-Term Case Management) provides a consistent point of contact to help youth navigate different resources, systems of care, and needs (i.e. education, employment, health/mental health, etc.). *Key Components*

a) Careful matching of youth with their guide (Peer employment opportunities).
b) Serve as an advocate for the youth.
c) Will be trained in trauma-informed care (TIC), positive youth development (PYD, cultural competency, meeting sexual orientation and gender identity needs, and other guiding principles of effectiveness.

Projects for 1) planning and implementation of Coordinated Entry and 2) HMIS for unaccompanied youth under the age of 25 are also being funded through YHDP funds, and will be applied for by PIC in their role as the Collaborative Applicant, Coordinated Entry and HMIS Lead Agency, as described in the HMIS and Coordinated Entry Policies and Procedures.
Moving Forward – Continuous Quality Improvement Process

The O‘ahu CoC is committed to ongoing evaluation to ensure continuous quality improvement and to measure our success in delivering a coordinated community plan to end youth homelessness.

Output measures include:
1. Number of youth served by YHDP projects and demographic characteristics
2. Number and type of housing and/or supportive services provided
3. Number and type of engagements between CoC partners, including OYAB
4. Number and type of CoC partners engaged in supporting the CCP vision and goals

Outcome measures include:
1. Reduction in number of youth who experience homelessness
2. Shortened length of time youth are unsheltered
3. Reduced returns to homelessness
4. Increased retention in a permanent housing destination
5. Increased income
6. Increased connection to services and supportive persons

Led by the PIC Planning Committee, our continuous quality improvement processes for the CCP are:
Monitoring of YHDP funded projects to include tracking of progress towards stated outcomes;
Completion of a Racial Disparities Among Unaccompanied Homeless Youth Assessment conducted to include disparities in access to services and outcomes; Biannual review and update to the CCP Action Plan.
## Attachment A - Oahu Coordinated Community Plan to End Youth Homelessness – Partner Chart

<table>
<thead>
<tr>
<th>Partners</th>
<th>Partner’s name</th>
<th>Participation in CCP</th>
</tr>
</thead>
</table>
| **a. CoC Program Recipients** | Partners in Care (PIC) | Leadership:  
- Coordinate CCP Steering Committee  
- Hire full time YHDP Program Coordinator  
- Lead for development of Oah‘u Coordinated Community Plan (CCP)  
- Board of Directors approves YHDP grants  
Planning:  
- Liaison with HUD and HUD Technical Assistance providers  
- Coordinate CCP meetings and development activities  
- Provide resources to support CCP  
- Provide Point in Time and HMIS data  
Program Support:  
- Coordinate YHDP  
- Support greater engagement of OYAB within PIC’s Governance Board (GB) and committee structure |
| Aloha United Way | President/CEO | Leadership:  
- As of April 2020, AUW serves as fiscal agent to PIC. Moving forward PIC will not require AUW to serve in this role.  
Planning:  
- Participate in CCP meetings and development activities  
- Provide resources to support CCP  
- Facilitate access to philanthropic community and other stakeholders outside of homeless service system as needed |
| **b. Youth Advisory Boards** | Oahu Youth Action Board | Leadership:  
- Serve on CCP Steering Committee  
- Approves CCP plan and YHDP project selection  
Planning:  
- Participate in CCP meetings and development activities  
- Participate in additional planning and development activities relating to youth ages 14-18 years who are homeless or at-risk of homelessness  
- Participate on PIC GB and committees  
- Assist in identifying and engaging additional youth with lived experience to serve on OYAB and/or participate in CCP development |
| **c. Local Government** | City and County of Honolulu, Department of Community Services | Planning:  
- Participate in CCP meetings and development activities  
- Provide resources to support CCP  
Direct Service:  
- Provide ESG and other funding for housing and supportive services |
### c. State Government

**Office of the Governors Coordinator on Homelessness**

**Planning:**
- Participate in CCP meetings
- Provides solutions to end homelessness and strengthen the continuity of efforts to end homelessness across future administrations

**Direct Services:**
- Coordinates with Law Enforcement Assisted Diversion (LEAD)
- Identifies state land that can be used for affordable housing to reduce the number of unsheltered people
- Recruits landlord participation in affordable housing initiatives

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**State Department of Human Services - Benefit, Employment & Support Services Division (BESSD) - Office of Youth Services (OYS)**

**Planning:**
- Participate in CCP meetings and development activities
- Provide resources to support CCP

**Direct Services:**
- Homeless Programs Office (HPO) administers all state funded homeless services and programs and serves as Collaborative Applicant to HI Balance of State CoC
- OYS provides funding for housing and supportive services, positive youth development, trauma informed care, youth choice, family engagement, social and community inclusion, youth-focused Housing First, individualized youth-driven supports
- DHS-BESSD provides up to date information on mainstream benefits including information on eligibility and application process to CoC members

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**State Department of Health**

- **Child & Adolescent Mental Health Division (CAMHD)**
- **Alcohol and Drug Abuse Division (ADAD)**

**Planning:**
- Participate in CCP meetings
- Provide resources to support CCP

**Direct Service:**
- CAMHD provides mental health services free of charge for eligible children and youth who have severe emotional and/or behavioral challenges, including culturally sensitive assessment, case management, and therapeutic supports
- ADAD funds substance abuse treatment efforts which are designed to promote a statewide culturally appropriate, comprehensive system of services to meet treatment and recovery needs of individuals and families

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**State of Hawai‘i Department of Defense – Hawaii National Guard (HING),**

**Planning:**
- Participate in CCP meetings and development activities

**Direct Services:**
HING operates Kokua Ohana Aloha a community program is designed to give young people who have committed status offenses ranging from truancy, to running away from home, or injurious behavior, a second chance. Members of the Community Programs team run monthly meetings for juvenile status offenders and their parents/guardians.
<table>
<thead>
<tr>
<th>d. Public Child Welfare Agencies</th>
<th>State of Hawai‘i Department of Human Services Social Services Division Child Welfare Services Branch (CWSB)</th>
<th>Leadership:  • Serve on CCP Steering Committee  Planning:  • Participate in CCP meetings and development activities  • Participate in additional planning and development activities relating to youth ages 14-18 years who are homeless or at-risk of homelessness  • Provide resources to support CCP  • Provide data on system engaged youth and community risk factors  Direct services:  • Housing and supportive services to foster youth via contract with EPIC Ohana  • Access point for youth CES</th>
</tr>
</thead>
<tbody>
<tr>
<td>EPIC Ohana – grantee of public child welfare agency</td>
<td>Planning:  • Participate in CCP meetings and development activities  Direct Service:  • Contracted by CWS to conduct outreach to youth who are in foster care or extended foster care to facilitate engagement in CCP.</td>
<td></td>
</tr>
<tr>
<td>e. ESG Program Recipients</td>
<td>The Institute for Human Services (IHS)</td>
<td>Leadership:  • Chair of PIC GB  Planning:  • Participate in CCP meetings and development activities  • Provide resources to support CCP  • Participate in additional planning and development activities relating to youth ages 14-18 years who are homeless or at-risk of homelessness  Direct Services:  • Provide youth RRH  • Access point for youth CES</td>
</tr>
<tr>
<td>Alternative Structures International</td>
<td>Planning:  • Participate in CCP meetings and development activities  Direct Services:  • Provide youth RRH  • Access point for youth CES</td>
<td></td>
</tr>
<tr>
<td>Parents and Children Together (PACT)</td>
<td>Planning:  • Participate in CCP meetings and development activities  Direct Services:  • Early Childhood Education, domestic violence prevention and intervention, child abuse and neglect prevention and treatment, behavioral health support, community building and economic development</td>
<td></td>
</tr>
<tr>
<td>Attachment A - Oahu Coordinated Community Plan to End Youth Homelessness – Partner Chart</td>
<td></td>
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</tr>
</tbody>
</table>
| **Family Promise of Hawai‘i** | Planning:  
- Participate in CCP meetings  
Direct Services:  
- Provides shelter to up to 28 people/8 families a week  
- Supportive services for families with children at risk of becoming homeless through rental assistance, mediation with landlords, and other services  
- Honolulu Day Center allows families to meet with a case manager, search for housing and employment, shower, do laundry, and use kitchen facilities including food pantry  
- Supportive services to families for six months up to a year after graduation from Diversion or Shelter programs |
| **Honolulu Police Department – Law Enforcement Assisted Diversion (LEAD) Project** | Planning:  
- Participate in CCP meetings  
Direct service:  
- LEAD is a community-based diversion program for people whose criminal activity is due to behavioral health issues. LEAD is a pre-booking or pre-arrest diversion program. In LEAD, low-level offenders for whom probably cause for arrest exists are diverted from arrest or booking by immediately referring them to harm-reduction, non-abstinence based, individualized case management. |
| **State Department of Public Safety (PSD)** | Planning:  
- Participate in CCP meetings and development activities  
Direct service:  
- PSD oversees the Corrections Division, which includes jails and prisons, and the Law Enforcement Division, which includes the Narcotics Enforcement and Sheriff Divisions. |
| **PATCH** | Planning:  
- Participate in CCP meetings  
Direct Service:  
- Patch is Hawai‘i’s Statewide Child Care Resource and Referral Agency (CCR&R), helping parenting youth find child care, and building well-developed systems that support parents, providers, and local communities in finding, planning for, and providing quality child care |
| **Hawai‘i Department of Education (HIDOE)** | Leadership:  
- Serve on CCP Steering Committee  
Planning:  
- Participate in CCP meetings and development activities  
- Liaison with National Center for Homeless Education  
- Participate in additional planning and development activities relating to youth ages 14-18 years who are homeless or at-risk of homelessness |
<table>
<thead>
<tr>
<th>Provider</th>
<th>Leadership</th>
<th>Planning</th>
<th>Direct Services</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>State Public Charter School Commission (SPCSC)</strong></td>
<td>• Serve on CCP Steering Committee</td>
<td>• Participate in CCP meetings and development activities</td>
<td>• Provide data on unaccompanied youth under 18 experiencing homelessness • Provide supportive services to youth via Community Liaisons • CES access point for youth</td>
</tr>
<tr>
<td><strong>DoDEA Educational Authority, School Liaison Officer</strong></td>
<td>• Serve on CCP Steering Committee</td>
<td>• Participate in CCP meetings and development activities</td>
<td>• Military Liaison – Aiea Elementary School participated in CCP meetings • School Liaison officers serve as the primary point of contact for school-related matters. Assist military families with school issues. Coordinate with local school systems.</td>
</tr>
<tr>
<td><strong>i. Runaway and Homeless Youth Program Providers</strong></td>
<td>• Serve on CCP Steering Committee</td>
<td>• Participate in CCP meetings and development activities</td>
<td>• Participate in additional planning and development activities relating to youth ages 14-18 years who are homeless or at-risk of homelessness • HYSN has extensive experience with local, state and federal initiatives designed to prevent and end youth homelessness. Since 1981, HYSN has coordinated a statewide Runaway and Homeless Youth Collaborative that provides outreach, shelter, and transitional living services to youth ages 12-21</td>
</tr>
<tr>
<td><strong>Hale Kipa and Waikiki Health – Youth Outreach (YO!) Project</strong></td>
<td>• Serve on CCP Steering Committee</td>
<td>• Participate in CCP meetings and development activities</td>
<td>• Provide resources to support CCP • Provide additional planning and development activities relating to youth ages 14-18 years who are homeless or at-risk of homelessness • Provide youth outreach, supportive services, drop-in center and clinic • Operates Basic Center Program (emergency shelter for 12-17) and Transitional Living Programs • Coordinates Wahine Talk teen pregnancy prevention • Access point for youth CES</td>
</tr>
</tbody>
</table>
| j. Non-Profit Youth Organizations | Boys and Girls Club of Hawai‘i | Planning:  
| | | • Participate in CCP meetings and development activities |
| k. Juvenile and Adult Corrections and Probation | Hawai‘i Youth Correctional Facility | Direct Service:  
| | | • Collaborates with PIC partners in discharge planning for youth exiting the correctional facility. Also, transforming and repurposing the youth corrections facility into Kawaiola Youth and Family Wellness Center in Kailua in partnership with a private non-profit, RYSE. |
| | State Judiciary – Adult Branch | Planning:  
| | | • Participate in CCP meetings and development activities |
| l. Health, Mental Health, and Substance Abuse Agencies | Queens Medical Center Emergency Department | Planning:  
| | | • Participate in CCP meetings and development activities  
| | | Direct Services  
| | | • Queen’s Medical Center is the largest hospital in the State of Hawai‘i and coordinates care for people of all ages |
| | Gregory House Programs | Leadership:  
| | | • Chair Emeritus of PIC GB  
| | | Planning:  
| | | • Participate in CCP meetings and development activities  
| | | • Provide resources to support CCP  
| | | Direct Services  
| | | • Affordable housing, assistance, and case management for persons and families living with HIV/AIDS  
| | | • Food and nutritional services for isolated, rural, and limited mobility individuals and families |
| | Safe Haven, Mental Health Kokua | Leadership:  
| | | • Chair of PIC Planning Committee  
| | | Planning:  
| | | • Participate in CCP meetings and development activities  
| | | • Provide resources to support CCP  
| | | Direct Services  
| | | • Provide behavioral health services to homeless youth and adults  
| | | • Access point for youth CES |
| | Hawai‘i Health & Harm Reduction Center | Leadership:  
| | | • Vice Chair of PIC GB  
| | | Planning:  
<p>| | | • Participate in CCP meetings and development activities |</p>
<table>
<thead>
<tr>
<th><strong>Attachment A - Oahu Coordinated Community Plan to End Youth Homelessness – Partner Chart</strong></th>
</tr>
</thead>
</table>
| **Hawai‘i Homeless Healthcare Hui (H4)** | Planning:  
- Participate in CCP meetings and development activities  
Direct Services  
- Provide outreach and healthcare services to homeless population, including youth  
- Access point for youth CES |
| **m. WIOA Boards and Employment Agencies**  
- Oahu Workforce Development Board | Direct Services  
- coordinate activities with education and training providers in the local area, including providers of workforce investment activities, providers of adult education and literacy activities. |
| **n. Landlords**  
- PIC Landlord Engagement Program | Planning:  
- Participate in CCP meetings and development activities  
Direct Services  
- provide a much-needed linkage between landlords and property managers with vacant units, and households currently experiencing or at-risk of becoming homeless, creating housing supply where demand generally far exceeds supply. |
| **o. Public Housing Authorities**  
- City and County of Honolulu, Department of Community Services | Please see above in Section c. for support with planning and leadership  
Direct Services  
- Section 8 Housing Assistance Payments Program (Housing Choice Voucher Program) |
| **p. Institutions of Higher Education**  
- University of Hawai‘i (UH) | Planning:  
- Participate in CCP meetings and development activities (Department of Psychiatry)  
Direct Services  
- Provides post-secondary education (4 year college) opportunities to youth |
### Attachment A - Oahu Coordinated Community Plan to End Youth Homelessness – Partner Chart

| q. Community Development Corporations | • Richardson School of Law coordinates an annual training update for provider staff on mainstream benefits that are available to participants in CoC-funded projects  
• Provides research services to CoC, i.e. Equity Report |
| r. Affordable Housing Developers | None | There are no community development corporations who are active CoC partners at this time. |
| s. Local Advocacy, Research, and Philanthropic | Steadfast Housing Development Corporation | Leadership:  
• Member of PIC GB  
• Chair of PIC Awareness Subcommittee  
Planning:  
• Participate in CCP meetings and development activities  
Direct Services  
• Housing, Case Management, Wrap Around Services |
| | Aloha United Way | Please see above in Section a. for support with planning and leadership  
Direct Services  
• Providing funding to a cohort of non-profit providers aiming to support Asset Limited Income Constrained Employed (ALICE) population |
| | The Harry and Jeanette Weinberg Foundation | Planning  
• Participate in CCP meetings and development activities  
Direct Services  
• The Foundation has a portfolio of $12M in Hawaii, and provides operating, program, and capital grants to 501(c)3 organizations that primarily serve low-income individuals and families in the areas of Housing, Health, Education, and Jobs. |
| | Hawai‘i Appleseed Center for Law and Economic Justice | Leadership:  
• Serve as Chair of PIC Awareness subcommittee  
Planning:  
• Participate in CCP meetings and development activities  
• Assist in engaging the business community in support of YHDP when appropriate  
Direct Services:  
• Provide legal and advocacy services  
• Conducts research on issues of social justice and produces reports |
| t. Privately Funded Non-Profit Homeless Organizations | Residential Youth Services and Empowerment (RYSE). | Leadership:  
• Serve on CCP Steering Committee  
• Chair of PIC Data Committee  
Planning:  
• Participate in CCP meetings and development activities |
<table>
<thead>
<tr>
<th>Organization</th>
<th>Role Description</th>
</tr>
</thead>
</table>
| River of Life Mission                                  | **Leadership:**  
  - Member of PIC Awareness Committee  
  
  **Planning:**  
  - Participate in CCP meetings and development activities  
  - Provide Culinary Arts Training, Job Placement with youth who are homeless or at-risk ages 18-24  
  - Provides housing to youth 18-24 who are participants in training program.  
  - Social enterprise “Chocolate on a Mission.”                                                                                                                                                                                   |
| Other:                                                 | **Liliuokalani Trust**  
  **Planning:**  
  - Participate in CCP meetings and development activities  
  - Has provided resources to support planning  
  - Provided data and information relating to the special population of Native Hawaiian youth  
  **Direct Services:**  
  - Provide multiple direct services to youth including housing, job development, counseling  
  - Assist in facilitating engagement of Native Hawaiian youth in CPP and YHDP activities                                                                                                                                                        |
| We Are Oceania                                         | **Planning:**  
  - Participate in CCP meetings and development activities  
  - Provided data and information relating to the special population of Micronesian/COFA youth  
  **Direct Services:**  
  - Advocate for the health of Micronesian individuals and families. Provides language access, acculturation training, pre-employment training, and service referrals.                                                                                                                                 |
| Partners In Development Foundation (PIDF)              | **Planning:**  
  - Participate in CCP meetings and development activities  
  **Direct Services:**  
  - The Foundation focuses on rural development, special needs education, and the health of minority groups.                                                                                                                                                                                                                           |
| Susannah Wesley Community Center (SWCC)               | **Planning:**  
  - Participate in CCP meetings and development activities  
  **Direct Services:**  
  - SWCC is a comprehensive social services organization dedicated to helping and empowering youths, adults and families (many of whom are newcomers to Hawaii) who have great social and economic challenges, move towards self-sufficiency and independence.                                         |
## System Capacity

**Goal 1: The Oahu CoC has effectively mobilized and prepared cross sector stakeholders, including youth with lived experience, to address youth homelessness as a priority concern.**

<table>
<thead>
<tr>
<th>Objectives</th>
<th>Action or Service</th>
<th>Timeline</th>
<th>Partner/s</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.1. Engage usual and unusual stakeholders to support and sustain the CCP vision, goals and strategies.</td>
<td>Funders Coalition to direct additional resources to support attainment of CCP goals and help with YHDP match requirements. This work will include discussion of how COVID-19 has impacted CoC members and partners who are working with youth, as well as the impact on philanthropic resources.</td>
<td>Summer 2020, ongoing</td>
<td>Partners in Care (PIC) with The Harry and Jeanette Weinberg Foundation (HJWF), Aloha United Way (AUW), Hawaii Youth Services Network (HYSN), Oahu Youth Action Board (OYAB)</td>
</tr>
<tr>
<td></td>
<td>Targeted outreach to workforce and public safety sectors to align strategies and resources.</td>
<td>Started February 2020, ongoing</td>
<td>PIC and OYAB</td>
</tr>
<tr>
<td>1.2. Pursue an understanding of racial inequities in the experience of youth homelessness and use this information to inform systems-level change.</td>
<td>PiTC process enhanced to collect and report data on unaccompanied youth by specific race/ethnicity (i.e. separate NH/OPI include more distinct populations).</td>
<td>By Jan 2021</td>
<td>PIC</td>
</tr>
<tr>
<td></td>
<td>Racial Disparities Among Unaccompanied Homeless Youth Assessment conducted to include disparities in access to services and outcomes.</td>
<td>By July 2021</td>
<td>PIC via contract with University of Hawaii (UH)</td>
</tr>
<tr>
<td></td>
<td>CoC meeting to update CCP to address identified disparities.</td>
<td>By December 2021</td>
<td>PIC with CoC members</td>
</tr>
<tr>
<td></td>
<td>Create annual advocacy and legislative plan that takes information and moves it into the policy arena to address racial inequity and systemic racism - presented at Annual Children &amp; Youth Summit.</td>
<td>By October 2021</td>
<td>PIC Advocacy Committee</td>
</tr>
<tr>
<td>1.3. Improve data quality and system capacity to</td>
<td>YHDP funded CES Project to add youth focused staffing.</td>
<td>Start by October 2020</td>
<td>PIC and Youth CES Committee</td>
</tr>
</tbody>
</table>
| Identify and assist youth experiencing homelessness, including youth from special at-risk populations:  
| - Unaccompanied minors  
| - Pregnant and parenting  
| - LGBTQ  
| - Foster or justice system involved  
| - Native Hawaiian  
| - Micronesian/COFA. | CES youth assessment tool reviewed and refined (i.e. incorporate strengths-based indicators). | Started October 2019, Ongoing | Youth CES Committee |
| Process that ensures all youth are assessed the same way and a standardized system that better integrates youth data across sub-population is established. | Started October 2019, Ongoing | Youth CES Committee |
| Prioritization matrix for youth CES resources is built out. | Started January 2020, Ongoing | Youth CES Committee |
| HMIS data fields updated and youth-specific HMIS staff paid through YHDP-funded HMIS grant. | Start by January 2021 | HMIS Team, Youth CES Committee |
| Integrate HMIS with CES platform. | Ongoing | HMIS Team and Youth CES Committee |
| Protocol established for consistent use of terminology and approach to define sexual orientation and gender identity (SOGI). | By October 2020 | PIC with Hawaii Department of Health's Sexual and Gender Minority Workgroup |
| 1.4. Provide access to professional development and TA opportunities that support and build capacity of staff to serve youth experiencing homelessness, and reduce disparities based on race/ethnicity, LGBTQ | Mechanism to collect and disseminate information on training and TA opportunities using existing list serves. | Ongoing | PIC and HYSN |
| Trainings provided on USICH principles of effective practices:  
| - Positive Youth Development  
| - Trauma Informed Care  
| - Individualized and Youth Driven supports  
| - Youth Choice  
| - Family Engagement  
| - Social and Community Inclusion  
<p>| Youth Focused Housing First | Ongoing | PIC via annual homelessness Conference, HYSN and PACT |
| Status, System Engagement etc. | Training in how to collect sexual orientation and gender identity (SOGI) data with respect and sensitivity and on unique risks, needs and strengths of LGBTQ youth. | Will be offered annually | Hawaii DoH’s Sexual and Gender Minority Workgroup |
| Collective Impact Workshop Series focused on homelessness and including content on racial equity. | Started March 2020 | AUW |
| Training on the impact of cultural and historical trauma, intergenerational trauma, racism, and white privilege on Native Hawaiian youth. | Ongoing (new curricula in progress) | Liliuokalani Trust and other training providers |
| Training on the dynamics of sex trafficking, the impact of sexual exploitation, and challenges associated with exiting sex trafficking situations. | 2021 | Susanna Wesley Community Center, and Ho ‘ola Na Pua |
| Cultural competency training that includes historical context, impact of migration and challenge of acculturation for Micronesian/COFA youth. | 2021 | We are Oceania and HYSN |
| Training in self care, trauma-informed care and how to mitigate risk for vicarious trauma among staff and volunteers working with youth experiencing homelessness. | By December 2020 | Hawai‘i Health &amp; Harm Reduction Center (HHHRC), HYSN and PACT |
| Monthly OYAB meetings. | Started March 2019 | PIC and OYAB |
| OYAB operating budget developed to include stipends and resources for training/TA. | By May 2020 | PIC and OYAB |
| Ensure that OYAB members have access to personal laptops. | February 2020 | HIDOE supported by Youth Service Providers |
| OYAB Facebook Group Launched. | By March 2020 | PIC and OYAB |
| OYAB Training and TA needs met. | Ongoing | PIC, HYSN and other CoC Partners |</p>
<table>
<thead>
<tr>
<th>O’ahu Coordinated Community Plan to End Youth Homelessness – Action Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1.6. Youth engaged in efforts to change policies and actions that make it difficult for youth to establish stability - relating to Justice system, housing, education, workforce, and healthcare.</strong></td>
</tr>
<tr>
<td><strong>Outreach to recruit new OYAB members.</strong></td>
</tr>
<tr>
<td><strong>Leadership opportunities including meetings and presentations to elected officials and other stakeholders.</strong></td>
</tr>
<tr>
<td><strong>Annual Homeless Conference to include OYAB and other youth with lived experience of homelessness.</strong></td>
</tr>
<tr>
<td><strong>Develop and deliver community education on youth homelessness based upon data and stories of lived experience.</strong></td>
</tr>
<tr>
<td><strong>Develop and support opportunities for youth to travel and present at local/national conferences, submit abstracts, co-author articles. e.g. Hawai<code>i Harm Reduction Conference Jan 2021, National Runaway &amp; Homeless Youth Conference, Annual Hawai</code>i International Summit. on Preventing, Assessing &amp; Treating Trauma Across the Lifespan.</strong></td>
</tr>
<tr>
<td><strong>Build capacity for youth to engage in advocacy and policy development via training, site visits, meetings with local policy makers etc.</strong></td>
</tr>
<tr>
<td><strong>Develop youth-informed advocacy and policy change focus for the 2021 Annual Homelessness Conference.</strong></td>
</tr>
<tr>
<td><strong>Coordinate OYAB Participation in the Hawaii Housing Affordability Coalition which coordinates advocacy and keeps stakeholders informed on existing and new efforts relating to housing.</strong></td>
</tr>
<tr>
<td><strong>Coordinate OYAB participation in Hi-SYNC (Hawaii Interagency State Youth Network of Care) to participate in round table discussions and planning to improve the efficiency of mental health services for children and families in the State of Hawaii and to address policy, legal and data barriers to coordinated transition services.</strong></td>
</tr>
</tbody>
</table>
### Permanent Connections

**Goal 2: All youth are connected to stable, caring, positive individuals who can guide and support them as they transition to adulthood.**

<table>
<thead>
<tr>
<th>Objective</th>
<th>Action or Service</th>
<th>Timeline</th>
<th>Partner/s</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.1. Connect or reconnect youth to family, including chosen family, whenever possible and safe.</td>
<td>Information on research-based or evidence-based family engagement strategies shared with CoC.</td>
<td>November 2020</td>
<td>PIC via Homelessness Awareness Conference</td>
</tr>
<tr>
<td></td>
<td>All YHDP funded projects required to support family engagement when safe and part of individualized youth driven plan.</td>
<td>By October 2020</td>
<td>TBD</td>
</tr>
</tbody>
</table>
| | Family strengthening supports for families engaged with child welfare service:  
  - Youth Circles to help young people connect their circle of support to help with their goals and permanent connections  
  - Family Finding and Family Connections to locate and help to reweave family connections  
  - Ohana Conferencing is a family group decision making model  
  - Wraparound is a process that builds support and collaboration around a young person or a family  
  - Youth Partners are peer supporters with lived experience who work with youth to be that “guide on the side” | Ongoing | EPIC Ohana CWS |
<p>| | Training on Youth Adult Partnership and authentic youth engagement. | Fall 2020 | EPIC Ohana, HI HOPES (Annie E. Casey Foundation) |
| | Family outreach and mediation. | Ongoing | Youth Service Providers |
| | Holistic case management and planning that incorporates family engagement when safe and appropriate and youth choice. | Ongoing | Youth Service Providers |
| 2.2. Build skills that support youth ability to | All YHDP funded projects are required to incorporate positive youth development strategies. | By October 2020 | TBD |</p>
<table>
<thead>
<tr>
<th><strong>sustain healthy relationships.</strong></th>
<th>Trauma Informed Care based case management.</th>
<th>Ongoing</th>
<th>Youth Service Providers</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coordinate training in use of evidence-based psycho-educational curricula such as Seeking Safety for CoC members.</td>
<td>2021</td>
<td>PIC</td>
<td></td>
</tr>
<tr>
<td>Seek funding to sustain Wahine Talk 2.0 - holistic sexual health and pregnancy prevention program for youth experiencing homelessness.</td>
<td>Ongoing</td>
<td>YO! Waikiki Health</td>
<td></td>
</tr>
<tr>
<td>Family strengthening and cultural identity programs located at Youth Services Center in downtown Honolulu.</td>
<td>Jan 2021</td>
<td>Liliuokalani Trust</td>
<td></td>
</tr>
<tr>
<td>Provide group intervention to address and provide enhanced understanding of experienced domestic violence in families and relationships, and the effects of DV on their lives moving forward.</td>
<td>Ongoing</td>
<td>PACT</td>
<td></td>
</tr>
</tbody>
</table>

2.3. **Strengthen youth connection to Native Hawaiian, Micronesian or other Pacific Islander cultural values and community.**

| Na Kama a Haloa - a collaborative project to develop a curriculum to build cultural integration, historical trauma, and trauma effectiveness into work with youth, families and children. | By October 2020 | EPIC Ohana, Liliuokalani Trust, Kamehameha Schools |
| Environmentally focused programs that emphasize cultural values and community connection: Kupu’s Hawai‘i Youth Conservation Corps (HYCC) for youth 16-24 combines mentorship, academic support and vocational training. Kupu Culinary Program. Leadership training. | Ongoing | Kupu Program |
| Positive youth development programs - Ōpio After School Leadership Program, Board and Stone Classes for families. | Ongoing | Hui Mālama o ke Kai Foundation |
| Family strengthening programs (Ho’opono, Kamalama, etc.). | Ongoing | Liliuokalani Trust |
| Family strengthening programs (Board and stone, lomilomi, Healthy Start, Parents and Children Together, P.A.R.E.N.T.S, etc.). | Ongoing | Keiki o Ka Aina |
Aina-based programming to support youth building strong identities and workforce skills. | Ongoing | MAO Farms, Ka‘ala Farms, PALs and PLACES, Ho‘okuaaina |
---|---|---|
2.4. Create access to positive recreation and community-based youth development opportunities for youth who are experiencing homelessness. |  
Jujitsu class provided by Cauliflower Collective and then connect to dojos. | Started 2019 | RYSE |
Deliver Meditation and Therapeutic Yoga. | 2019 | RYSE with certified instructor |
Reach out to YOGA ED to explore potential to work with CoC partners. | 2020 | HIDOE |
New U program - memberships to rec facilities via scholarship. | Ongoing | Hale Kipa with YMCA and Kroc Center |
Waimanalo Canoe Club-mentoring, cultural connectedness and canoe paddling. | 2020 | RYSE |
Surfrider Spirit Sessions - offering youth mentoring/surfing program for youth and open to accepting youth from YO! | Available as of March 2020 | YO! |
Liliuokalani Center (art, dance, makery, physical fitness, sport, and entrepreneurship programs) located in downtown Honolulu. | Scheduled to open 2025 | Liliuokalani Trust |
## Prevention & Diversion

### Goal 3: The numbers of youth who experience first time homelessness, or returns to homelessness, has been drastically reduced.

<table>
<thead>
<tr>
<th>Objectives</th>
<th>Action or Service</th>
<th>Timeline</th>
<th>Partner/s</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.1. Provide services and supports that strengthen families and address root causes of housing instability.</td>
<td>ALICE (asset limited income constrained, employed) and Safety Net Initiatives to reduce poverty and establish housing stability, including COVID-19 resources.</td>
<td>Started 2019</td>
<td>AUW plus community stakeholders and grantees</td>
</tr>
<tr>
<td>Family strengthening supports for families engaged with child welfare service (see goal 2 Objective 2.1 for details).</td>
<td>Ongoing</td>
<td>CWS and EPIC Ohana</td>
<td></td>
</tr>
<tr>
<td>Substance abuse treatment services for adults and youth (Bobby Benson Center residential treatment).</td>
<td>Ongoing</td>
<td>HDoH Alcohol and Drug Abuse Division (ADAD)</td>
<td></td>
</tr>
<tr>
<td>'Ohana &amp; Kiaāulu - Family &amp; Community Strengthening Program. Workshops and classes that nurture and promote family balance, unity, and harmony. Kalo Night - monthly event for families to have a “family night” together.</td>
<td>Ongoing</td>
<td>Hui Mālama O Ke Kai Foundation</td>
<td></td>
</tr>
<tr>
<td>Emergency shelter, case management and other supportive services for families experiencing homelessness and at-risk of becoming homeless including parenting youth.</td>
<td>Ongoing</td>
<td>Family Promise</td>
<td></td>
</tr>
<tr>
<td>Outreach to ADAD and CAMD to align their work with CCP goals and needs (align youth homelessness and substance abuse needs).</td>
<td>Ongoing</td>
<td>CoC</td>
<td></td>
</tr>
<tr>
<td>3.2. Identify youth who are at-risk for homelessness, or experiencing homelessness as early as</td>
<td>YHDP-funded diversion project</td>
<td>Start by October 2020</td>
<td>TBD</td>
</tr>
<tr>
<td>Homeless diversion workgroup focusing on unaccompanied minors established.</td>
<td>By October 2020</td>
<td>PIC, HIDOE, OYAB, HYSN, CWS, and Public Safety</td>
<td></td>
</tr>
<tr>
<td>Possible, and connect them to resources.</td>
<td>Community Homeless Concerns Liaisons facilitate access to needed services and supports for school-age youth.</td>
<td>Ongoing</td>
<td>HIDOE</td>
</tr>
<tr>
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<td>---</td>
</tr>
<tr>
<td></td>
<td>Transition planning and services for system-engaged youth (justice, child welfare and behavioral health).</td>
<td>Ongoing</td>
<td>CWS, AMHD, CAMD, DOH, Office of Youth Services, HYCS PSD</td>
</tr>
<tr>
<td></td>
<td>Emergency shelter (6 beds) at Youth Services Center in downtown Honolulu. Intended for youth who need a place to stay or have had contact with HPD.</td>
<td>Open April 2021</td>
<td>Liliuokalani Trust &amp; Identified Primary Partner</td>
</tr>
<tr>
<td></td>
<td>Develop plan and seek resources to develop shelter services and supports for youth who are victims of violence but who are not eligible for DV services.</td>
<td>2021</td>
<td>RYSE, CWS and other youth providers</td>
</tr>
<tr>
<td></td>
<td>Seek funding to develop a “cool” bed program to provide voluntary short-term placements in emergency shelter for youth 12-17/families who are in crisis. Youth and families work with a clinician and a case manager.</td>
<td>2021</td>
<td>RYSE and CWS</td>
</tr>
</tbody>
</table>
| | Two youth emergency shelters for minor youth (8 beds each) Independent Living Program for youth in and transitioning out of foster care  
  • After Care Mentoring for youth released from HYCF, Wraparound Program  
  • Community-Based Outreach and Advocacy. | Ongoing | Hale Kipa |
<p>| | Connect youth to transportation via bus passes and disability bus passes. | Ongoing | City and County, HYSN, CWS, HIDOE |
| | Link youth severe mental health or developmental disabilities for community care services (CCS). | Ongoing | AMHD, CAMHD, DoH Developmental Disabilities, Special Parent Information Network, RYSE, YO!, Clubhouses |</p>
<table>
<thead>
<tr>
<th>Drop off opportunity for youth in contact with law enforcement, CWS, Probation, and others at Youth Services Center in downtown Honolulu.</th>
<th>April 2021</th>
<th>Liliuokalani Trust, HPD and other supporting partners</th>
</tr>
</thead>
<tbody>
<tr>
<td>Outreach and support for Micronesian youth and families.</td>
<td>Ongoing</td>
<td>We Are Oceania (WAO)</td>
</tr>
<tr>
<td>Aina-based programming to support youth building strong identities and workforce skills.</td>
<td>Ongoing</td>
<td>MAO Farms, Kaʻala Farms, PALs and PLACES, Hoʻokuaaina</td>
</tr>
<tr>
<td>Ke Kama Pono safe house for adjudicated minors.</td>
<td>Ongoing</td>
<td>Partners in Development Foundation</td>
</tr>
<tr>
<td>Provide access to supportive housing to youth with special needs.</td>
<td>Ongoing</td>
<td>City &amp; County of Honolulu, DCS</td>
</tr>
<tr>
<td>Kahauiki Village will provide long term, permanent, affordable housing for approximately 153 currently homeless families with children on Oahu. Multiple organizations are involved in this project.</td>
<td>In progress</td>
<td>State of Hawaii, the City &amp; County of Honolulu and the aio Foundation, Institute for Human Services (IHS)</td>
</tr>
</tbody>
</table>

3.3. Advocate for legislative and system change to address (see also System Capacity).

| Collaborate with Honolulu Status Offence System Reform Workgroup to advocate for decriminalization of status offences including running away. Invite to present a summary of Rethinking Arrest for Honolulu’s Runaway Youth: Final Report (Vera Institute) to CoC members. | By December 2020 | PIC and HYSN, Suzanna Wesley Community Center, Epic Ohana, HHRC |
| Minor consent work group to revise/amend existing statutes that prevent youth from accessing services effectively. | Ongoing | Judiciary, DHS (CWS & OYS), DOH, and service providers (RYSE, Catholic Charities, Hale Kipa, DVAC, etc.), HHRC, HYSN, Epic Ohana, Liliuokalani Trust |
## Stable Housing & Supports

**Goal 4: All youth who experience homelessness have access to safe and supportive housing and any needed wraparound services.**

<table>
<thead>
<tr>
<th>Objectives</th>
<th>Action or Service</th>
<th>Timeline</th>
<th>Partner/s</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.1. Ensure low barrier entry into the Youth Coordinated Entry System (CES).</td>
<td>Street outreach throughout Oahu.</td>
<td>Ongoing</td>
<td>RYSE, Hale Kipa, ALEA Bridge, ASI</td>
</tr>
<tr>
<td></td>
<td>Youth Drop-in Center.</td>
<td>By January 2021</td>
<td>Liliuokalani Trust</td>
</tr>
<tr>
<td></td>
<td>Youth Drop-in Centers.</td>
<td>Ongoing</td>
<td>YO! Hale Kipa and Waikiki Health, RYSE</td>
</tr>
<tr>
<td></td>
<td>YHDP funded CES staff to reduce barriers for youth.</td>
<td>By October, 2020</td>
<td>PIC</td>
</tr>
<tr>
<td>4.2. Expand inventory of RRH/TH and PSH beds for youth.</td>
<td>Haleiwa Transitional Housing Project.</td>
<td>Open by April 2020</td>
<td>RYSE, Alea Bridge, ASI, City and County of Honolulu</td>
</tr>
<tr>
<td></td>
<td>YHDP funded RRH/Transitional Housing Projects.</td>
<td>By October 2020</td>
<td>TBD</td>
</tr>
<tr>
<td></td>
<td>YHDP funded Permanent Supportive Housing Projects.</td>
<td>By October 2020</td>
<td>TBD</td>
</tr>
<tr>
<td></td>
<td>Youth Services Center - 18 unit facility in downtown Honolulu. Includes wrap around services.</td>
<td>Jan 2021</td>
<td>Liliuokalani Trust + Partner TBD</td>
</tr>
<tr>
<td></td>
<td>Hale Kipa Transitional Living Program - 8 beds total.</td>
<td>Ongoing</td>
<td>Hale Kipa</td>
</tr>
<tr>
<td><strong>O’ahu Coordinated Community Plan to End Youth Homelessness – Action Plan</strong></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>---</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Hale Kipa Housing First voucher program with vouchers from the City.</strong></td>
<td>By June 2020</td>
<td>Hale Kipa</td>
<td></td>
</tr>
<tr>
<td><strong>Section 8 vouchers for youth who are foster care eligible - 25 vouchers total.</strong></td>
<td>Started January 2020</td>
<td>DHS and Hale Kipa</td>
<td></td>
</tr>
<tr>
<td><strong>18 units in downtown Honolulu at the Youth Services Center to include wrap around services.</strong></td>
<td>April 2021</td>
<td>Liliuokalani Trust &amp; Primary Partner</td>
<td></td>
</tr>
<tr>
<td><strong>Horizons TH Program for 18-24 youth - 7 beds total.</strong></td>
<td>Ongoing</td>
<td>Catholic Charities</td>
<td></td>
</tr>
<tr>
<td><strong>Landlord Engagement Program, funded by City and County of Honolulu.</strong></td>
<td>Started Nov 2019</td>
<td>PIC</td>
<td></td>
</tr>
<tr>
<td><strong>Seek funding to expand existing or establish new housing programs including for special populations from sources such as OVC, FYSB, VOCA, State Legislative Grants in Aid, and private foundations or funders.</strong></td>
<td>Ongoing</td>
<td>Youth Service Providers and partners</td>
<td></td>
</tr>
</tbody>
</table>

4.3. Explore alternative and innovative housing options.

| **Research housing strategies used in other communities and explore feasibility for replication.** | 2021 | PIC |
| **YHDP funded Host Home project.** | By October 2020 | TBD |
| **Technical assistance on Host Home model provided to YHDP partners.** | Start June 2020 | HJWF contractor Point Source Youth and PIC |

4.4. Connect youth to coordinated care and individualized supports before and after they are placed into a housing program.

| **YHDP funded Guide on the Side Program.** | By October 2020 | TBD |
| **Participate in Youth Focused CES.** | Ongoing | All youth housing providers |
### Education & Employment

**Goal 5:** All youth who experience homelessness have access to a diverse array of educational or vocational training options that meet their needs and leads to sustainable employment that is meaningful and self-determined.

<table>
<thead>
<tr>
<th>Objectives</th>
<th>Action or Service</th>
<th>Timeline</th>
<th>Partner/s</th>
</tr>
</thead>
<tbody>
<tr>
<td>5.1. Leverage existing education, post-secondary education and workforce development opportunities.</td>
<td>All YHDP funded housing projects will include linkages to education and employment as part of supportive services as well as Guide on the Side and Diversion.</td>
<td>By October 2020</td>
<td>TBD</td>
</tr>
<tr>
<td></td>
<td>Education and vocational case management support.</td>
<td>Ongoing</td>
<td>Youth Service Providers</td>
</tr>
<tr>
<td></td>
<td>Conduct assessment of available education, employment and entrepreneurial opportunities available to youth experiencing homelessness including Job Corps, Kupu, Youth Build, Hele2Work, WorkHI (including Youth Services Center), American Job Center Program, Youth Build Honolulu, Alu Like, HIDOE, including Adult Ed, and partners, to share with CoC.</td>
<td>By Dec 2020</td>
<td>PIC with HIDOE, Department of Labor and City &amp; County of Honolulu Department of Community Services (DCS)</td>
</tr>
<tr>
<td></td>
<td>Access GED/HiSET services including test prep.</td>
<td>Ongoing</td>
<td>YO! Hale Kipa and Waikiki Health, RYSE, Adult Friends for Youth</td>
</tr>
<tr>
<td></td>
<td>YO! Works (pre-employment training program).</td>
<td>Ongoing</td>
<td>YO! Hale Kipa and Waikiki Health</td>
</tr>
<tr>
<td></td>
<td>Invite Kinai ‘Eha (connecting Native Hawaiian youth to workforce training in construction and the trades, community service and leadership), Marimed Foundation (Maritime Careers Exploration &amp; Placement Program and Ho’oma’a after-school Program for justice engaged youth), Windward Opportunity Youth Group, Kupu’s Hawai’i Youth Conservation Corps (HYCC) and Culinary Program and other providers who have innovative training opportunities to meet with CoC to identify opportunities for collaboration.</td>
<td>By June 2020</td>
<td>PIC and OYAB</td>
</tr>
<tr>
<td></td>
<td>YHDP funded Diversion Project.</td>
<td>By October 2020</td>
<td>TBD</td>
</tr>
<tr>
<td>5.2. Develop new employment readiness and job placement programs for youth who are experiencing homelessness.</td>
<td>Kawailoa Agriculture and Ranch Vocational Training Program, pending approval to sell produce.</td>
<td>2022</td>
<td>Kawailoa Youth &amp; Family Wellness Center</td>
</tr>
<tr>
<td>$40 for 4 employment program.</td>
<td>Started 2020</td>
<td>RYSE</td>
<td></td>
</tr>
<tr>
<td>Disseminate overview of research on best practices in employment programming for youth experiencing homelessness.</td>
<td>April 2020</td>
<td>PIC</td>
<td></td>
</tr>
</tbody>
</table>

| 5.3. Integrate supports that reduce barriers to access to education or employment opportunities. | All YHDP Projects as part of supportive services (RRH/TH, PSH or Host Homes) as well as Guide on the Side and Diversion Projects. | By October 2020 | TBD |
| Prioritize access to childcare resources and early learning for parenting youth experiencing homelessness, coordinate with Early Learning strategy. | Ongoing | PATCH, DHS, Head Start, HIDOE |
| The Whole Child Project-legal advocacy for youth. | Ongoing | Legal Aid Society of HI |
| Coordinate access to bus passes and other resources for unaccompanied minors who are homeless and enrolled in HIDOE school. | Ongoing | HIDOE |
| Monthly bus passes for youth employed or in school. | Ongoing | RYSE |

| 5.4. Increase access to educational and vocational training scholarships and other financial resources. | Connect youth experiencing or at risk of homelessness to scholarship programs including those aimed at Native Hawaiian youth such as Lunalilo Scholarship. | Ongoing | UoH - Kapiolani Community College, Kamehameha Schools, Liliuokalani Trust |
| Work with Funders Collaborative to establish post-secondary or vocational training scholarships for youth experiencing homelessness. | Start Oct 2020 | PIC |
| Higher ED payments to former foster youth. | Ongoing | Hale Kipa, DHS Child Welfare Services |
| Access vocational training opportunities. | Ongoing | PACT |

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### Social-Emotional Wellbeing and Health

**Goal 6:** All youth who experience homelessness have access to client-centered, culturally appropriate, and affordable or free services that support health and wellbeing.

<table>
<thead>
<tr>
<th>Objectives</th>
<th>Action or Service</th>
<th>Timeline</th>
<th>Partner/s</th>
</tr>
</thead>
<tbody>
<tr>
<td>6.1. Facilitate access to a range of substance abuse treatment options, including residential care.</td>
<td>YHDP funded Crisis Response Team.</td>
<td>Start October 2020</td>
<td>TBD</td>
</tr>
<tr>
<td></td>
<td>Advocate for expanded and specialized treatment options for youth at risk of or experiencing homelessness - with Hawaii Substance Abuse Coalition and Coalition for a Drug Free Hawaii.</td>
<td>Ongoing</td>
<td>CoC, HHRC</td>
</tr>
<tr>
<td>6.2. Provide trauma informed, evidence based mental health services.</td>
<td>YHDP funded Crisis Response Team.</td>
<td>Start October 2020</td>
<td>TBD</td>
</tr>
<tr>
<td></td>
<td>Weekly walk-in behavioral health appointments with Psychologist to youth ages 14 - 22.</td>
<td>Started February 2020</td>
<td>YO! Waikiki Health</td>
</tr>
<tr>
<td></td>
<td>CAMHD and CWS mental health services - individual, group and family.</td>
<td>Ongoing</td>
<td>Catholic Charities, PACT, Child &amp; Family Services</td>
</tr>
<tr>
<td></td>
<td>Weekly behavioral health care by volunteer Psychiatrist and Advanced Practice Registered Nurse with Psych and SA certification twice weekly.</td>
<td>Started Dec 2019</td>
<td>RYSE</td>
</tr>
<tr>
<td></td>
<td>Mental health services for DV and Sexual Assault and CSEC survivors.</td>
<td>Ongoing</td>
<td>PACT, Suzanna Wesley</td>
</tr>
<tr>
<td>6.3. Provide training and education to youth that builds their knowledge of healthy practices and</td>
<td>Training for curriculum facilitators using an adaptation of Making Proud Choices an evidence-based curriculum designed for youth in out-of-home care.</td>
<td>Ongoing</td>
<td>HYSN</td>
</tr>
<tr>
<td></td>
<td>Interactive education groups about sexual and reproductive health as well as healthy relationships in the community – incorporates material from Making Proud Choices.</td>
<td>Ongoing</td>
<td>YO! Hale Kipa and Waikiki Health</td>
</tr>
<tr>
<td>Which uses evidence-based curricula and approaches.</td>
<td>Coordinate training in use of evidence-based psycho-educational curricula such as Seeking Safety for CoC members.</td>
<td>2021</td>
<td>PIC</td>
</tr>
<tr>
<td>---</td>
<td>---</td>
<td>---</td>
<td>---</td>
</tr>
<tr>
<td>Addition of CSAC, Family Connections.</td>
<td>2020</td>
<td>ADAD with RYSE</td>
<td></td>
</tr>
<tr>
<td>“Safe Talk” suicide prevention training.</td>
<td>Ongoing</td>
<td>Liliuokalani Trust in partnership with other providers, Suicide Prevention Task Force, UH Dept of Psychiatry</td>
<td></td>
</tr>
<tr>
<td>6.4. Facilitate access to services that support optimal physical health.</td>
<td>Advocate in support of a Basic Health Plan for youth who are ineligible for the formal Medicaid program including COFA citizens.</td>
<td>Ongoing</td>
<td>We are Oceania</td>
</tr>
<tr>
<td></td>
<td>Free walk-in medical services with a Physician’s Assistant to youth ages 14 and older, including referrals to other hospitals and clinics for which transportation will be provided either via bus pass or physical transportation by staff.</td>
<td>Ongoing</td>
<td>YO! - Hale Kipa and Waikiki Health</td>
</tr>
<tr>
<td></td>
<td>Free insurance navigation for youth, including applications and submission of additional supporting documentation.</td>
<td>Ongoing</td>
<td>YO! - Hale Kipa and Waikiki Health</td>
</tr>
<tr>
<td></td>
<td>Medquest to 26 for former foster youth - Powered to 26 campaign.</td>
<td>Ongoing</td>
<td>HI HOPES</td>
</tr>
<tr>
<td></td>
<td>Scholarships for dental care.</td>
<td>Started</td>
<td>RYSE and WHC</td>
</tr>
<tr>
<td></td>
<td>Access to preventative care and family planning at the Youth Services Center in downtown Honolulu.</td>
<td>April 2021</td>
<td>Liliuokalani Trust and Queen’s Health Systems</td>
</tr>
<tr>
<td></td>
<td>All healthcare providers on Oahu take part in the CES process by assisting in the total wrap around care of clients.</td>
<td>Ongoing</td>
<td>Youth CES Committee</td>
</tr>
<tr>
<td></td>
<td>Linkage to well-baby care and maternal health services offered by partners such as FGHC, Community Health Centers, Kapulana Schools, Healthy Mothers &amp; Health Babies Coalition, WIC.</td>
<td>Ongoing</td>
<td>Youth Service Providers</td>
</tr>
</tbody>
</table>
REQUEST FOR PROPOSALS (RFP)
2020 HUD Youth Homelessness Demonstration Program (YHDP) Competition
HI-501 Honolulu City and County

PARTNERS IN CARE
OAHU CONTINUUM OF CARE

REQUEST FOR PROPOSALS (RFP)
RFP Training, Questions, and Communications
To support all applicants in preparing their proposals the CoC will host a mandatory RFP information and Q&A session at the date and time indicated in the schedule. Outside of this session, all questions must be submitted by email only to points of contact by the RFP Questions Deadline.

Point of Contact
Charmaine McCladdie, Youth Homelessness Systems Coordinator
Phone: 808-543-2290
Email: cmccladdie@auw.org

Sharon Baillie, Operations and Planning Manager
Phone: 808-543-2246
Email: sbaillie@auw.org

Piper Ehlen, Director, Federal Programs
Phone: 415-788-7961
Email: piper@homebaseccc.org

Schedule

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<th>Date</th>
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<tr>
<td>RFP Released</td>
<td>March 27, 2020</td>
</tr>
<tr>
<td>RFP Informational Meeting</td>
<td>March 30, 2020</td>
</tr>
<tr>
<td>RFP Questions Answered on a Rolling Basis and Posted to the PIC Website</td>
<td>No additional questions after May 13, 2020</td>
</tr>
<tr>
<td>Proposals Due</td>
<td>May 14, 2020</td>
</tr>
<tr>
<td>- Need to email <a href="mailto:cmccladdie@auw.org">cmccladdie@auw.org</a> and <a href="mailto:sbaillie@auw.org">sbaillie@auw.org</a> to inform them when agency will be dropping off application.</td>
<td></td>
</tr>
<tr>
<td>Project Review and Ranking</td>
<td>May 27, 2020</td>
</tr>
<tr>
<td>Project Ranking Notification</td>
<td>May 28, 2020</td>
</tr>
<tr>
<td>Appeals Deadline</td>
<td>June 1, 2020</td>
</tr>
<tr>
<td>Appeals Review and Notification</td>
<td>June 2, 2020</td>
</tr>
<tr>
<td>Projects begin entering into e-snaps</td>
<td>June 3, 2020</td>
</tr>
<tr>
<td>E-Snaps Application Deadline</td>
<td>June 30, 2020</td>
</tr>
<tr>
<td>Contract signed with HUD</td>
<td>September 30, 2020</td>
</tr>
<tr>
<td>Projects begin operations</td>
<td>October – November 2020</td>
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<td>TERMS, ACRONYMS, AND DEFINITIONS USED IN THIS RFP</td>
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<td>APPENDIX A: List of Prioritized Project Elements</td>
<td>16</td>
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</table>

RFP – PIC FY 2020 YHDP Competition – HI-501 – Honolulu City and County

Last Revised: 4/29/2020
BACKGROUND

Partners in Care (PIC): PIC is the CoC for Oahu, Hawaii, which serves the City and County of Honolulu. PIC is a membership organization of homeless service providers, other professionals, units of local and state government, program participants, and other community representatives. PIC is also a planning, coordinating, and advocacy body that develops recommendations for programs and services to fill gaps in Honolulu's CoC. Membership of PIC is not required for submission of interest in response to this RFP. PIC works to:

- Promote community-wide commitment to the goal of ending homelessness;
- Provide funding for efforts by nonprofit providers, state and local governments to rehouse homeless individuals and families rapidly while minimizing the trauma and dislocation caused to homeless individuals, families, and communities as a consequence of homelessness;
- Promote access to and effective use of mainstream programs by homeless individuals and families; and
- Optimize self-sufficiency among individuals and families experiencing homelessness.

PIC develops policies and procedures conforming to the HUD requirements detailed in 24 CFR part 578.1 to designate an agency to serve as the Collaborative Applicant (CA) to support year-round CoC planning of homeless and homeless prevention housing and services.

Youth Homeless Demonstration Program (YHDP): The U.S. Department of Housing and Urban Development (HUD) awarded $75 million to end youth homelessness in 23 local communities across the country. Honolulu was awarded $3.8 million to plan and implement a youth homeless system on O'ahu.

The goal of the YHDP is to support communities in the development and implementation of a coordinated community approach to preventing and ending youth homelessness, and sharing that experience with and mobilizing communities around the country toward the same end. The population to be served by this demonstration program is youth experiencing homelessness, including unaccompanied and pregnant or parenting youth, where no member of the household is older than 24.
**Eligible Project Types**

Please see project type descriptions in the Summary section herein. During the YHDP Competition, PIC will accept the following type of project proposals.

1. **Diversion** provides services to unaccompanied youth under the age of 25 with short-term supportive services to divert from homelessness. Helps youth find alternative housing solutions to crisis housing.  
   **Key Components**  
   a. Connection to mainstream benefits and services.  
   b. Support establishing and implementing a long-term housing stabilization plan.  
   c. Assistance building or rebuilding family and community support networks.

2. **Guide On The Side** (Navigation and Long-Term Case Management) provides a consistent point of contact to help youth navigate different resources, systems of care, and needs (i.e. education, employment, health/mental health, etc.)  
   **Key Components**  
   a. Careful matching of youth with their guide (Peer employment opportunities).  
   b. Serve as an advocate for the youth.  
   c. Will be trained in trauma-informed care (TIC), positive youth development (PYD, cultural competency, meeting sexual orientation and gender identity needs, and other guiding principles of effectiveness.

3. **Host Homes** are flexible (short or medium term), crisis response community-based settings that offer youth 24/7 immediate access to a safe alternative to shelter. Financial and support services to sustain host homes.  
   **Key Components**  
   a. Robust training for hosts including TIC, PYD,  
   b. Individualized training and support from program; comprehensive education; 24-hour question line for hosts.  
   c. Program serves as intermediary to provide support to hosts, help meet youth needs, conflict mediation, case management, family reunification/strengthening with family of choice when safe and appropriate etc.

4. **Joint Transitional Housing & Rapid Rehousing (TH-RRH)** combines Transitional Housing (TH), a service-intensive, frequently congregate-care component, with Rapid Re-Housing (RRH), a scattered site independent living component. YYA can skip right to RRH if they choose, but have the option of starting in TH (if they are younger, coming out of foster care, or want more structure).  
   **Key Components**  
   a. Flexible, long-term subsidies to support transition into independent housing.  
   b. Landlord recruitment, education, and incentives.  
   c. Opportunities for shared housing/roommates.

5. **Permanent Supportive Housing (PSH)** provides long-term, flexible rental subsidies for YYA experiencing homelessness and have disabilities/disabling conditions that affect their long-term ability to gain income/live independently without ongoing services.  
   **Key Components**  
   a. Types of Programs  
      i. Scattered-Site Independent housing units.  
      ii. Group living sites for youth with higher level of needs/support.
iii. Affordable dorm-style housing for students.
iv. Wraparound supportive services.

6. **Mobile Crisis Response** can have or be supportive service elements connected to case management, drop-in centers, legal services, outpatient health services, substance abuse treatment, life skills training, and case management.
   
   - **Key Components**
     a. Provides 24-hour mobile access to basic needs and case management.
     b. Potential staffing to include peers and mental health clinicians.
     c. Engages with police to defer calls to mental health crisis team.

Projects for 1) planning and implementation of Coordinated Entry and 2) HMIS for unaccompanied youth under the age of 25 are also being funded through YHDP funds, and will be applied for by PIC in their role as the Collaborative Applicant, Coordinated Entry and HMIS Lead Agency, as described in the HMIS and Coordinated Entry Policies and Procedures.

**Funding Amount and Project Type Allocations**

$3,686,000 million total in HUD YHDP funding is available. Grants will be for two years with the possibility thereafter of renewal annually through the HUD Continuum of Care (CoC) funding competition. The funds available will be allocated/awarded to eligible project types as follows (Amounts may be adjusted to maximize project budgets and projects).

<table>
<thead>
<tr>
<th>Project Types</th>
<th>2-Year YHDP Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Host Homes</td>
<td>$25,000 - $200,000</td>
</tr>
<tr>
<td>Joint Transitional Housing/Rapid Rehousing</td>
<td>$93,000 - $336,000</td>
</tr>
<tr>
<td>Mobile Crisis Response</td>
<td>$200,000 - $550,000</td>
</tr>
<tr>
<td>Diversion</td>
<td>$250,000 - $650,000</td>
</tr>
<tr>
<td>Permanent Supportive Housing</td>
<td>$350,000 - $850,000</td>
</tr>
<tr>
<td>Guide On The Side</td>
<td>$450,000 - $1,050,000</td>
</tr>
<tr>
<td>Coordinated Entry System</td>
<td>$75,000 - $150,000</td>
</tr>
<tr>
<td>Homeless Management Information System</td>
<td>$100,000 - $200,000</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$3,686,000</strong></td>
</tr>
</tbody>
</table>

*All HUD Funds require a 25% match on all budget items, except leasing.*

**Eligible Applicants**

At the time of release of the YHDP RFP, it was stipulated that any agency who was interested in applying for HI-501 Youth Homelessness Demonstration Program (YHDP) funds in any capacity, whether as a lead agency or a subrecipient, needed to attend a mandatory RFP Information Session. This list of eligible agencies is on the Partners In Care website and has
It has come to our attention, that there are agencies who have come up with collaboration and partnership ideas with other agencies who did not attend the Mandatory RFP Information Session. We want to encourage partnerships and collaboration amongst providers, therefore we are now allowing agencies who did not attend the original RFP Information Session to be a part of/included in the YHDP proposal process.

Any agencies who did not attend the initial mandatory session, are allowed to be part of grant proposal submissions as subrecipients only. Agencies who attended the mandatory RFP Information Session are the only agencies eligible to apply as the lead agency if submitting a collaborative proposal. If an agency (not yet a 501c3) has a fiscal sponsor (eligible 501c3), the fiscal sponsor is the agency who will be the lead and/or subrecipient on proposals.

As a reminder, providers eligible to apply for funding are nonprofit organizations, state, local governments, and instrumentalities of state and local governments. For-profit entities are not eligible to apply for grants or to be sub-recipients of grant funds.

**Youth Target Population & Prioritized Subpopulations**
Unaccompanied homeless youth under the age of 25, unaccompanied minor youth, Pregnant and Parenting Youth, Youth involved with Juvenile Justice and Foster Care Systems, LGBTQ, Youth Victims of Sexual Trafficking or Exploitation, Native Hawaiian/Micronesian Youth.

**Additional Requirements**
If selected, each project would be awarded for a minimum of two (2) years with the potential for future annual renewal through the HUD Continuum of Care Program competition.

Selected project applicants will be required to fulfill the following:
- Work collaboratively with the OYAB and YHDP community.
- Participate in initial and ongoing training on YHDP learning collaborative meetings with fellow YHDP projects.
- Submit an innovative project application to HUD via e-snaps that achieves the goals and objectives defined by the Coordinated Community Plan.
- Meet HUD eligibility and quality threshold requirements.
- Maintain consistent quarterly drawdowns of funds.
- Comply with program requirements in the HUD CoC Program Interim Rule, County CoC policies, FY2018 YHDP NOFA, and any HUD-approved waivers.
- Agree to participate in HMIS.
- Agree to participate in the Coordinated Entry System.
- Incorporate Positive Youth Development, Trauma Informed Care, and Cultural Humility.
- Comply with all HUD and local YHDP program reporting and evaluation requirements.
- Comply with HUD certification requirements (fair housing, environmental, etc.).

**Questions, RFP Answers & Clarifications**

Questions will be answered during the RFP Information Session. Additional questions or requests for interpretation must be submitted by email to cmccladdie@auw.org and piper@homebaseccc.org throughout the proposal drafting period until April 29, 2020.

A summary of questions and answers pertaining to this RFP, submitted through email and
provided during the RFP Information will be published on the PIC website on a rolling basis.

**SUBMISSION REQUIREMENTS**

**Proposals must be received no later than Thursday, April 30, 2020 at 4:30 p.m.** Completed proposals must include one (1) original hard copy, eight (8) copies of project proposal packets, and one (1) electronic PDF copy via flash drive to be considered. Each packet should have the type of project submission, required documents in order, with sections properly marked and proper binding (no binder clips). File names should be descriptive in the electronic copy. Applications that do not include both hard copies and electronic copies will not be considered.

**Mail or hand deliver proposal submissions to:**

Partners In Care – Oahu Continuum of Care  200 North Vineyard Boulevard, Suite 210
Honolulu, HI 96817

All applications must be received in the PIC office by the deadline. Proposals submitted by email or fax will not be accepted. Late submissions will not be considered, including those submitted late due to mail or delivery service failure. Supplemental documents or revisions after the Proposal Deadline will not be accepted. Will need to email cmcladdie@auw.org and sbaillie@auw.org to inform them when agency will be dropping off application.

If your organization is applying for more than one project type, each project requires a separate application.

**Proposal Requirements**

The proposal must address the following in no more than 15 pages (single-spaced, ragged right margin, times new roman 12 pt font, 1" margins):

A. **Cover Page.** Including organization name, date of submission, type of project and point of contact. (Not included in 15-page limit)

B. **Table of Contents.** (not included in 15-page limit)

C. **Proposal Narrative (15-pages)**

1. **Interest.** (1 page or less)
   a. Summarize your understanding of the needs and challenges faced by youth experiencing homelessness as they relate to the type of project proposed.

   b. Explain how this project aligns with your organization’s mission.

2. **Organizational Experience.** (approximately 2-3 pages)
   a. **History of Performance and Compliance.** Describe your organization’s experience and past performance in providing housing, supportive services, referral or other services to unaccompanied youth experiencing homelessness. Include in your organizational infrastructure and administrative/ financial capacity to effectively utilize federal funds and deliver the services as proposed.
b. **Collaboration and Knowledge of Community Resources.** Demonstrate organizational collaboration with other providers or agencies, as well as knowledge of community partners and resources serving unaccompanied youth experiencing homelessness.

c. **Staff Qualifications and Experience.** Describe the experience of the person on staff who will provide staff supervision and management of project activities. Describe how skills and experience of existing or proposed staff will ensure success of the YHDP project, with a particular focus on how they will support youth choice and authentic youth engagement. Identify if existing staff will be assigned to this project or if staff will be recruited specifically for this project. Give a timeline for when staff will be available to implement project activities.

d. **Compliance with Fair Housing and Equal Access Requirements.** Indicate that the proposed project will be in compliance with applicable fair housing and civil rights requirements and provides equal access for program participants regardless of sexual orientation or gender identify, in compliance with federal law.

3. **Program Description.** (approximately 8-10 pages)

   a. **Program Design Overview.** Provide an overview of the proposed project including –

      - **Project goals.** – select from the following goals which are part of the Coordinated Community Plan

         i. Drastically reduce the number of youth who experience first time homelessness or returns to homelessness.

         ii. All youth who experience homelessness have access to safe and supportive housing and any needed wraparound services.

         iii. All youth who experience homelessness have access to a diverse array of education and vocational training options that meet their needs and leads to sustainable employment that is meaningful and self-determined.

         iv. All youth who experience homelessness have access to client-centered, culturally appropriate, and affordable or free services that support health and wellbeing.

         v. All youth are connected to stable, caring, positive individuals who can guide and support them as they transition to adulthood.

      - **Project performance outcomes** – Identify at least 1 and no more than 3 measurable performance outcomes that will be supported by your project. Examples of outcomes include:

         ✓ Successful housing placement to or retention in a permanent housing destination.

         ✓ Jobs and income growth for homeless individuals and families
- **Increased connection to mainstream services**

- **Who will be served** – provide the number of youth that could be served on any given day, total unduplicated number of youth that you expect to serve over the grant period. Describe any eligibility criteria (i.e. age, gender, characteristics) and process for determining eligibility based upon HUD homelessness criteria.

- **Activities** - Describe the scope and nature of service/s to be provided, include information such as location, how youth would be identified, service components or flow including services to address barriers to access. Include details of start-up activities if needed.

- **Linkages** - Describe any linkages to other services or agencies that will support program implementation and service delivery. If any of these partners will receive YHDP funding via subcontract provide additional details on their scope of work.

- **Supportive Services** – The purpose of supportive services is to assist program participants obtain and maintain housing. Describe any supportive services that you propose to provide, including services that would be provided via linkage or in-kind. Supportive services can include: case management; childcare; transportation; educational or employment services; access to health including mental health and substance abuse services; independent living skills; recreation; family engagement.

- **Innovation** – Describe any innovative or unique characteristics of your project.

b. **Mainstream Resources.** Describe the project’s plan to connect youth to mainstream resources, such as health, social, and employment programs for which they are eligible. This should include a description of how the project will screen for eligibility for mainstream resources, plans to coordinate with mainstream systems and resources to make referrals, and staff training on mainstream resources for youth.

c. **Youth Involvement and Leadership.** Describe youth involvement in planning and designing the proposed project, as well as the organization’s plan for active involvement and leadership among youth in the project’s implementation, including employment opportunities and youth voice in the staff hiring process.

d. **Populations of Focus.** Describe how the project will serve vulnerable and often overrepresented youth experiencing homelessness in O‘ahu, including youth of color, lesbian, gay, bisexual, transgender, and queer (LGBTQ) youth; pregnant and parenting youth; youth who have had involvement with juvenile justice and foster care systems; and victims of sexual trafficking and exploitation. This should include how considerations for populations of focus will be incorporated into the project’s identification methods, infrastructure considerations, housing and/or service-delivery.

e. **Cultural Competency.** Describe your organization’s methods of ensuring cultural competence at all levels of the organization. Address experience serving with cultural sensitivity people who are racially, ethnically and religiously diverse; who speak languages other than English; who have a range of physical and mental disabilities; who are lesbian, gay, bisexual or transgender; and who are extremely low-income. Describe the diversity of your board and staff, your organization’s non-discrimination policies, and
how you ensure that your staff meets the needs of clients with sensitivity toward clients’ varied cultural and life experiences.

f. **Alignment with United States Interagency Council on Homelessness (USICH) Youth Framework to End Youth Homelessness’s Core Outcomes** – Describe how your project supports one or more of the following outcomes

I. **Stable housing** includes a safe and reliable place to call home;

II. **Permanent connections** includes ongoing attachments to families, communities, schools, and other positive social networks;

III. **Education/employment** includes high performance in and completion of educational and training activities, especially for younger youth, and starting and maintaining adequate and stable employment, particularly for older youth;

IV. **Social-emotional well-being** includes the development of key competencies, attitudes, and behaviors that equip a young person to succeed across multiple domains of daily life, including school, work, relationships, and community.

g. **Alignment with USICH Youth Guiding Principles** – Describe how your project supports or operationalizes each of the following USICH Guiding Principles (as further defined in Attachment B):

- ✓ Positive Youth Development
- ✓ Trauma Informed Care
- ✓ Youth Focused Housing First
- ✓ Youth Choice
- ✓ Individualized and Youth Driven Supports
- ✓ Family Engagement
- ✓ Social and Community Integration

4. **Implementation Plan.** (approximately 2-3 pages)

a. Provide a project implementation plan or Gantt chart that demonstrates how you will deliver activities and achieve your proposed outcome measures (i.e. results) and output measures (i.e. number of beds established, number of youth served). Include:

- Outcome or output measure
- Activity or task required to achieve the outcome or output
- Start and end date for the activity or task

*Note: HUD expects to make award decisions by September 30, 2020, and projects will likely start a few months after that.*

b. **HUD Timeliness Standards:** If this project is dependent on securing a facility, or is dependent on a construction timeline, please explain how the project will secure proof of
site control, match, environmental review, and the documentation of financial feasibility within 12 months of the announcement of the award.

c. **Access.** The plan should ensure that the project is incorporated into Oahu’s Coordinated Entry System. All applicants should ensure that the project or system is well advertised so that its availability is known to unaccompanied youth experiencing homelessness.

d. **Staff Training.** Describe any training or staff development activities that would be conducted as part of this project, and how this training will ensure that staff are ready to meet the needs of unaccompanied youth experiencing homelessness.

**D. Budget.** (not included as part of 15 pages)

Costs should be reasonable, justified, and competitive. The budget must demonstrate the project is cost effective, with costs not deviating substantially from the norm in that locale for the type of structure or kind of activity.

a. Provide an overview of the two-year project budget using an excel spreadsheet. Include all costs including those that will be provided using in-kind or leveraged resources (which should be at least 25% of the total cost).

b. Provide a separate 1-2-page budget narrative that shows how budget costs were calculated and briefly explains how each item is needed to support project implementation. Describe the sources for the required 25% match. If sources are not secured describe plan for securing funding.

**E-snaps Project Application**

HUD requires that all applicants for YHDP funds submit an application through the web-based e-snaps system. Selected projects will be required to enter their applications into e-snaps after the competitive proposal and selection process is complete.

**Project Budget Match Requirements**

*All eligible funding costs, except leasing, must be matched with no less than a 25% cash or in-kind contribution.* No match is required for leasing. The match requirements apply to project administration funds, along with the traditional expenses – operations, rental assistance, supportive services, and HMIS. Match must be met on an annual basis.

For an in-kind match, the applicant may use the value of property, equipment, goods, or services contributed to the project, provided that, if the applicant had to pay for such items with grants funds, the costs would have been eligible. If third party services are to be used as a match, the applicant and the third-party services provider that will deliver the services must enter into a memorandum of understanding (MOU) *before the grant is executed* documenting that the third party will provide such services and value towards the project. To be eligible for match, the cash or in-kind must be used for services that are eligible under the activities listed in 24 CFR 578 Subpart D.

HUD considers any matching funds above and beyond the minimum required amount to be leverage. Leveraging includes all funds, resources, and/or services that the applicant can secure on behalf of the client being served. While leveraging includes all cash matching funds, it is broader in scope, including any other services, supplies, equipment, space, etc. that are
provided by sources other than HUD.

Project applicants that intend to use program income as match must provide an estimate of how much program income will be used for match.

**PROJECT REVIEW & RANKING**

**Evaluation Process**
The YHDP Rank and Review Committee and Youth Policy and Advisory Committee will evaluate proposals utilizing the YHDP Project Scoring Tool.

All applicants will be informed via email and in writing if their project was accepted or rejected as part of the YHDP. Funded projects will receive signed approval letters from the OYAB. All project applications are pending approval from HUD and may be amended per feedback from HUD. If you have any questions, please contact cmccladdie@auw.org.

**Appeals Process**
Applicants with projects not selected for funding may appeal the decision by the appeals deadline in the timeline. A description of the appeals process and criteria will be provided with the Full Proposal format and scoring matrix.

Appeals must be submitted in writing to Partners In Care – Oahu Continuum of Care and received by Tuesday, May 19, 2020, mailed or delivered to 200 North Vineyard Boulevard, Suite 210, Honolulu, HI 96817. Appeals will be heard by two members of the original scoring committee and two new non-conflicted persons. The decision of the appeal panel is final.

**TERMS AND CONDITIONS**

**HMIS or Equivalent Participation Requirement**

Project applicants, must agree to participate in the local CES and HMIS system.

**Reporting Requirements**

HUD requires recipients to submit performance and financial reports under OMB guidance and program instructions.

- **Reporting Requirements and Frequency of Reporting.** See the NOFA and award agreement for the reporting requirements, including content, method of data collection, and reporting frequency. Applicants should be aware that the share of their Federal award may be subject to post award reporting requirements as reflected in Appendix XII to Part 200-Award Term and Condition for Recipient Integrity and Performance Matters.

- **Performance Reporting.** All HUD funded programs, including this program, require recipients to submit, not less than annually, a report documenting achievement of outcomes under the purpose of the program and the work plan in the award agreement.

**Resources**

The following resources may be useful for the preparation of your application:

- **HUD Ask A Question** - https://www.hudexchange.info/program-support/my-question/


- **PIC Homeless Reports** - [https://www.partnersincareoahu.org/homeless-reports](https://www.partnersincareoahu.org/homeless-reports)
### Terms, Acronyms, and Definitions Used in this RFP

<table>
<thead>
<tr>
<th>Term</th>
<th>Definition</th>
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<tbody>
<tr>
<td>CA</td>
<td>Collaborative Applicant – the eligible applicant that has been designated by the CoC to apply for a grant for CoC planning funds on behalf of the Continuum. The Honolulu CoC (PIC) CA is AUW.</td>
</tr>
<tr>
<td>CES</td>
<td>Coordinated Entry System – PIC chosen process designed to coordinate program participant intake assessment and provision of referrals. A centralized or coordinated assessment system covers the geographic area, is easily accessed by individuals and families seeking housing or services, is well advertised, and includes a comprehensive and standardized assessment tool. All projects must participate in coordinated entry, and selection of program participants must be consistent with the CoC's Coordinated Entry process.</td>
</tr>
<tr>
<td>CoC</td>
<td>Continuum of Care  1. Federal Continuum of Care contract program stressing permanent solutions to homelessness.  2. 24 CFR Part 578 HEARTH definition - The group organized to carry out the responsibilities required under the CoC competition and that is composed of representatives of a cross-sector or entities and organizations. PIC is the CoC for Oahu, Hawaii, which serves the City and County of Honolulu.</td>
</tr>
<tr>
<td>e-snaps</td>
<td>The electronic grants management system used by HUD's Office of Special Needs Assistance Programs (SNAPS) is known as e-snaps.</td>
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<tr>
<td>HMIS</td>
<td>Homeless Management Information System</td>
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<td>HUD</td>
<td>U.S. Department of Housing and Urban Development</td>
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<td>NOFA</td>
<td>Notice of Funding Availability from the U.S. Department of Housing and Urban Development</td>
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<td>OYAB</td>
<td>Oahu Youth Action Board</td>
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<tr>
<td>PIC</td>
<td>Partners in Care - a membership organization of homeless service providers, other professionals, units of local and state government, program participants, and other community representatives. PIC is also a planning, coordinating, and advocacy body that develops recommendations for programs and services to fill gaps in Honolulu's CoC.</td>
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<tr>
<td>PH</td>
<td>Permanent Housing</td>
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<td>PSH</td>
<td>Permanent Supportive Housing</td>
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<td>RFP</td>
<td>Request for Proposal</td>
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<td>RRH</td>
<td>Rapid Re-housing</td>
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<td>TH</td>
<td>Transitional Housing</td>
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<td>YHDP</td>
<td>Youth Homeless Demonstration Program</td>
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<td>YYA</td>
<td>Youth and Young Adults</td>
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Appendix A
Youth Homelessness Demonstration Program (YHDP) Request for Proposal (RFP)
List of Prioritized Project Elements

These priority project elements were identified by key stakeholders, including members of the O’ahu Youth Action Board (OYAB), during the January 7th YHDP Stakeholder Meeting.

The following project can be incorporated across all program types:

- One-on-one, individualized case management/supports
- Team-based approach/service model (case conferencing that includes health, education, employment, and other individualized supports for client)
- Wraparound supports for food, mental health, employment, education, etc.
- Offer quick interventions with long-term follow-up
- Peer supports
- Insurance navigation
- Improved coordination between youth and adult systems of care
- Transportation services
- Low-threshold, low-and-no barrier child care
- Excursions and fun activities
  - Aina-based curriculums
  - Social opportunities (ex: dinners) with former participants to maintain connection, provide positive role models and examples of success for current participants
- Access to parenting support classes
- Low- or no-barrier access to housing and services
- Options for youth with active substance use disorders
- Inclusive of partners and pets
- Skills development/life skills classes
- Education and employment supports
- Provide homelike housing options and environments (ex: home-cooked meals

In addition, YHDPs are expected to incorporate core principles of effective practices as defined by United States Interagency Council on Homelessness (USICH). These principles are:

**Positive Youth Development (PYD)** – Youth experiencing or at risk of homelessness need to be able to experiment and try new things. They need to be able to fail and try again in a supportive environment without life-altering consequences. A PYD approach recognizes and serves this need. PYD practices to be included within YHDPs include:

- Youth/adult partnerships integrated within development, governance and decision-making processes.
- Opportunities for youth leadership and training and supports to build youth leadership skills and capacity.
- Affirmation of youth identity, including gender, sexual orientation and cultural identity.
- Services and supports that incorporate an understanding of the physical, cognitive, emotional and social needs of developing adolescents.

YHDP projects will be required to incorporate a PYD approach that is strengths-based, and which identifies and develops individual youth’s assets while simultaneously building protective factors and resiliency. Examples of PYD activities are:

- Youth Focused Housing First.
- Supportive services to work with youth to develop a plan and set personal goals.
- Connection to education, employment or entrepreneurial opportunities.
- Healthy recreational and social activities based on youth’s interests.
- Education to support development of life skills.
- Mentoring, coaching to support development of personal connections.

**Trauma Informed Care** – Trauma refers to an experience that creates a sense of fear, helplessness, or horror, and overwhelms a person’s resources for coping. Homelessness is a traumatic experience. Youth experiencing homelessness are under constant stress, unsure of whether they will be able to sleep in a safe environment or obtain a decent meal. In addition to the experience of being homeless, an overwhelming percentage of homeless youth have been exposed to additional forms of trauma, including family violence, physical abuse, neglect, loss of a parent or caregiver, and sexual assault.

Trauma Informed Care (TIC) involves understanding, anticipating, and responding to the issues, expectations, and special needs that a person who has been victimized may have. Ways in which a TIC approach can be incorporated into YHDP projects include:

- Screen and assess for trauma and develop individualized youth-centered service plans that are strengths-based.
- Emphasize physical and emotional safety through privacy, confidentiality, and mutual respect, welcoming and inclusive environments.
- Support youth choice, personal control over decisions that impact them and opportunities for self-advocacy.
- Address diversity (e.g., gender, ethnicity, sexual orientation).
- Help youth build skills and coping responses that help them navigate any future adverse experiences that could re-traumatize or trigger them, such as racial discrimination, homophobia, stigma relating to mental health, and child welfare and justice involvement.
- Incorporate access to evidence-based trauma-specific services, including treatments for mental disorders resulting from trauma exposure, that are designed to directly address the impact of trauma, with the goals of decreasing symptoms and facilitating recovery.
- Support identify protection, especially for youth who identify as LGBTQ or who are Native Hawaiian or Micronesian.

**Youth Focused Housing First** – Youth Focused Housing First (YFHF) is an adaptation of Housing First that addresses the needs of developing adolescents and young adults. YFHF does this by providing youth with access to housing that is safe, affordable and appropriate, and the necessary and age-appropriate supports that focus on health, well-being, life skills, engagement in education and employment, and social inclusion. Housing First and YFHF rejects the idea that housing should only be available to people who are sober or drug free, or conditional upon taking part in specific services (i.e. counseling).

All YHDP housing interventions must adhere to Housing First Principles, such as:

- No preconditions for housing, such as a requirement for clean and sober living or minimum income requirements.
- Use of intake processes that are person-centered and flexible
- Provide youth choice on the type and extent of services they want to participate in and the location and type of housing they receive.
- Provide access to support and linkages to services to help youth recover from trauma, build life skills, connect to education or employment, establish healthy connections with peers, family and mentors (including Ohana and chosen family), and create strong linkages with any needed community resources.
Individualized and Youth-Driven Supports – While we can recognize shared experiences and common characteristics among youth experiencing or at risk of homelessness on Oahu, we can also see that every youth has their own unique personality, set of circumstances and preferences. The YHDPs will provide youth a range of services that are voluntary, individualized, culturally appropriate, and accessible, and that address an array of needs to support housing stability, mental and physical health needs, education, employment, and life skills.

Youth Choice – Incorporating a youth choice approach means that youth can choose to engage in services, or not. This philosophy is also central to Housing First – to provide access to the supports individuals and families based upon choice, and not require participation as a condition for receiving housing. What service providers think a youth may want or need, may not be accurate or may not reflect a good understanding of where the youth is at. The experience of trauma often involves abuse of power, and youth who have been abused and exploited can feel helpless and without control. Forcing a youth to do something he or she is not ready for and doesn’t want to do, no matter how well intended, could retraumatize them and hinder their progress. Other elements are:

- YHDP projects will be required to incorporate Youth Choice as a service policy that will allow youth to exercise choice in all the following –
  - Goals and priorities
  - Housing location and type
  - Supportive services and programs they access
- Projects are encouraged to incorporate training in evidence-based practices such as Motivational Interviewing and Stages of Change.

Family Engagement – Strategies that strengthen family and which establish healthy boundaries between youth and other family members are critical to preventing homelessness. Family engagement strategies have potential to support outcomes relating to housing stability as well as permanent connections. Family engagement can be YHDP projects through the following approaches:

- Use a broad definition and understanding of family, guided by youth choice, that includes extended Ohana, foster families or chosen family.
- Activities that support reconnection, reconciliation or reconciliation with family. During community meetings, youth provided examples such as providing pre-paid phone cards so that youth can make long distance calls to family who live off island, mediation or counseling services, and help with locating family members.
- Invite youth to establish a family engagement goal as part of their individual plans when possible (i.e. when youth feels that this is a safe and desirable option) and to consider how family engagement can support long term housing stability as well as social and emotional wellbeing.
- Incorporate training on how to establish boundaries with family members (and friends) as part of preparing youth who are housed within TH/RRH or PSH programs.
- Development of short-term crisis housing models that can provide the opportunity for youth and parents to have a break from each other.
- Locating shelters and housing programs and host home sites in locations across Oahu to allow youth to maintain ties to existing social supports and avoid school disruption, and it provides greater opportunity to engage in family intervention.

Social and Community Inclusion – An important function of the YHDPs is to help youth establish permanent connections and build supportive social networks. It is anticipated that these connections and networks will result in improved outcomes in areas such as education, employment and housing stability. Social inclusion will be promoted through helping youth build strengths, skills and relationships that will enable them to participate in their community, in education and employment. YHDP strategies will include:

- Providing housing opportunities that are located within community and within close physical
proximity to services and resources.

- Assessment of social and community inclusion strengths and needs, and incorporation of goals relating to community resources, social networks, and permanent connections as part of individualized plans.
- Provide opportunities for social and cultural engagement in order to develop positive social relationships and enhance social inclusion, particularly for Native Hawaiian, Micronesian, LGBTQ, pregnant and parenting youth.
- Services and activities that support access to natural supports such as family, friends, partners, neighbors and peers.
- Opportunities for engagement in meaningful activities through connection to education and employment.
- Incorporation of mentoring and peer-based interventions as well as connection to social, recreational, leadership and civic engagement activities that open avenues for positive connections to peers and adults.
- Use of technology and social media to help youth connect to supports and networks, combined with harm-reduction training or coaching in responsible use of technology.
Our mission is to eliminate homelessness through open and inclusive participation and the coordination of integrated responses.

Youth Homelessness Demonstration Program
HI-501
Oahu Coordinated Community Plan

The below signees of the Oahu Youth Action Board (OYAB) approve the Oahu Coordinated Community Plan to Prevent and End Youth Homelessness.

04/2020
Our mission is to eliminate homelessness through open and inclusive participation and the coordination of integrated responses.

Youth Homelessness Demonstration Program
HI-501
Oahu Coordinated Community Plan

The below signees of various government agencies approve the Oahu Coordinated Community Plan to Prevent and End Youth Homelessness.

Alexandre, Marc R
Digitally signed by Alexander, Marc R
Date: 2020.04.29 07:56:08 -10'00'
Marc Alexander
Executive Director
Honolulu Mayor’s Office of Housing
City and County of Honolulu

Scott Morishige
Digitally signed by Scott Morishige
Date: 2020.04.29 08:40:54 -10'00'
Scott Morishige
Governor’s Coordinator on Homelessness
Office of the Governor’s Coordinator on Homelessness
State of Hawaii

Kintaro Yonekura
Digitally signed by Kintaro Yonekura
Date: 2020.04.29 09:59:40 -10'00'
Kintaro Yonekura, MSW
Assistant Program Administrator
Department of Human Services
Social Services Division/Child Welfare Services/Program Development

04/2020
Our mission is to eliminate homelessness through open and inclusive participation and the coordination of integrated responses.

Youth Homelessness Demonstration Program
HI-501
Oahu Coordinated Community Plan

The below representatives of Partners In Care, HI-501’s Continuum of Care approve the Oahu Coordinated Community Plan to Prevent and End Youth Homelessness.

Connie Mitchell
Executive Director
IHS, The Institute for Human Services
Board Chair
Partners In Care – Oahu Continuum of Care

Laura E. Thielen
Digitally signed by Laura E. Thielen
Date: 2020.04.29
13:13:31 -10'00'

Laura E. Thielen
Executive Director
Partners In Care – Oahu Continuum of Care

04/2020