Successful Transitions of Runaway/Homeless Youth from Shelter Care

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Successful Transitions of Runaway/Homeless Youth from Shelter Care

Von E. Nebbitt, Laura E. House, Sanna J. Thompson, David E. Pollio

Abstract  Previous research indicates that runaway and homeless youth often achieve positive outcomes after shelter stays however few studies have examined how these outcomes are achieved. This study employs qualitative methods to explicate this phenomenon. Twenty-five providers and 21 youth from four shelters participated in this study. Youth were recruited who had completed shelter care and returned home for minimally six months. Multiple raters identified themes and created a conceptual model. While in shelter, youths experienced structure and freedom, and the family experienced respite. Once youth became involved in treatment, the family re-connected and the youth returned home. After returning home, youth and family become involved in follow-up services. Results from our study provide insight into the process through which runaway/homeless youth return home after a shelter stay. Our findings emphasize the need for continued change by all members of the family system, highlighting the need for continued intervention to maintain positive changes.

Keywords  Runaway youth, Homelessness, Resiliency, Shelter care, Family reunification

Estimates indicate that approximately 5% of the adolescent population identify themselves as “homeless”; others suggest that one child in eight will run away prior to age 18 (Ringwalt, Green, Robertson, & McPeeters, 1998; Whitbeck, Hoyt, & Ackley, 1997). These troubled adolescents generally come from diverse, multiple-problem living situations, often have poor relationships with parents, and are at high risk for continual transience (Kurtz, Jarvis, & Kurtz, 1991; Rotheram-Borus, 1993). These youth experience challenges,
such as school failure, substance abuse, and unprotected sexual activity (Greene, Ringwalt, & Iachan, 1997) and have disproportionate rates of mental health problems, such as depression and suicidal thoughts or attempts (Whitbeck, Hoyt, & Wa-Ning, 2000). Many are involved with the juvenile justice system, typically for theft, burglary, and status offenses (Bass, 1992).

Research concerning runaway/homeless youth has frequently addressed the varied reasons adolescents give for running away, often focusing on family problems, conflicts, maltreatment, and neglect (e.g., Tyler, Hoyt, Whitbeck, & Cauce, 2000). When compared with parents of non-runaway adolescent’s, runaway youth’s parents score lower on parental warmth, supportiveness and monitoring, and higher on parental rejection (Whitbeck et al., 1997). Many of these families have histories of unstable housing situations and are often characterized as emotionally unavailable and lacking effective parenting skills (Bass, 1992). Some youth are forced out of their homes, while others flee due to abuse or neglect (Whitbeck et al., 1997). To meet the basic needs of these youth, community-based youth emergency shelters were developed as a primary method of intervention. These facilities are designed to provide a variety of short-term crisis and custodial services with a focus on family reunification (Greene et al., 1997). As federally-funded youth shelters are mandated to attempt reunification, this outcome is viewed as a critical measure of success (Thompson, Safyer, & Pollio, 2001). Systematic evaluations have demonstrated successful reunification with family or other appropriate living situations (Teare, Furst, Autheir, Baker, & Daly, 1994; Thompson, Pollio, & Bitner, 2000).

Although reunification outcomes have been evaluated, few empirical studies have examined the processes that result in positive outcomes. No research has evaluated the processes through which youth successfully transition back to homes or other stable living situation following a shelter stay. Thus, a logical next step is to elucidate the process of reentry to stable housing by employing qualitative research methods. As most studies have predominately employed quantitative methods to identify factors associated with outcomes, utilizing qualitative methods provides several advantages, such as encouraging participants to convey important and not artificially constructed issues from their perspective, various influences of individuals and context can be studied together. Using
these methods, we aimed to identify and describe the processes that empowered homeless/runaway youth to successfully transition from the shelter to stable living arrangements. Interviews and focus groups were conducted with youth, family members, and providers. The queries sought information concerning: (1) the youth’s reason for running away, (2) their experiences in shelter care, and (3) the process and decisions concerning reuniting with their families.

Method
Recruitment and participants

Staff at two runaway/homeless youth shelters in St. Louis, Missouri, one shelter in Kansas City, Kansas, and one shelter in Kansas City, Missouri participated in the study. The staff members were asked to contact adolescents who had successfully completed shelter services and had remained with their families at least 6-months following shelter discharge. Shelter staff contacted potential participants, provided them with a short description of the study, requested their participation, and set a date for participants to meet with the research team. All interviews took place at the youth shelters where the research team provided youth and parents with a detailed description of the project, described the voluntary nature of participation, and gained both parental consent and youth assent; staff participants also signed consent forms. Where multiple youth could be assembled at one location and time, focus groups were conducted; where only a single youth was available, individual interviews were conducted. The Institutional Review Board at Washington University approved all methods for this study.

Forty-six individuals participated in the study: 13 providers and 12 youth from St. Louis, 5 providers and 7 youth from Kansas City, Missouri, and 7 providers and 2 youth from Kansas City, Kansas. This convenience sample included both female and male, and African American and Caucasian youth participants. African Americans composed 23% of the youth and 24% of the providers. Seventy six percent of the youth participants were females and 64% of the providers were female.

As part of the initial design for this study, two focus groups were conducted with parents of youth in shelter services. Unfortunately, the audiotapes for these groups were not of sufficient
quality to allow transcription and analysis in a manner parallel to the youth and staff; thus, these are not included. One category was added, however, as families engaged in extensive discussion of their reactions to the youth and, memories of these events influenced the decision to include one category, in spite of its lack of emphasis from youth and staff.

Data collection

Four open-ended questions were used to guide data collection for each interview. Questions were developed specifically for youth and providers. For youth, the first question focused on the youth's pre-shelter experience. The purpose of this question was to understand what events lead to them to their admission to shelter services. The second question focused on the youth's experiences while in the shelter. This question sought to extrapolate youths' perceptions of the shelter, whether it was helpful, and what aspects of the shelter they thought helped them to return home. The third question sought to determine the critical components or timing associated with entrance into shelter services that made the youth desire family reunification. The fourth question asked youth to identify critically important people in the shelter that lead to their successful reunification, such as who would be the key players if they were to write a movie about their success in the shelter.

The four questions developed specifically for the service providers were based on previous quantitative research findings. First, providers were asked what aspects of the shelter had the greatest impact on a youth's decision to return home; second, providers were asked to help interpret our previous finding that youth who completed shelter care were more likely to return home than youth who did not complete shelter care (Thompson et al., 2002); third, providers were asked why they thought that after a few months many youth returned to their old behavior patterns—running away, having school problems, using substances (Thompson et al., 2002; Thompson et al., 2000). The final question focused on the racial disparity previously found among shelter-using youth (Thompson et al., 2003). This question sought to understand why African American youth were less likely than White youth to return home. The data collection team underwent intensive training used by the team in previous studies that focused on nondirective
Data analysis

The analysis was developed through an iterative process involving all members of the research team. First, members of the research team examined separately the data to identify categories. Next, the team met to compare categories, define consensus categories, and code these categories. Inter-rater reliability was established by examining proportion of agreement out of total non-negative items coded for each category (\(\#\) agreement/\(\#\) of statements coded into each category) for youth groups only. Differences in coding were resolved by a consensus process among the coders. Ten categories were identified through this process, with inter-rater reliabilities ranging from 69% to 100%. Table 1 presents the categories established through this process, their definitions and inter-rater reliability for each category.

Once the categories were identified, team members reviewed the results to examine the structure of the information. A preliminary model was developed based on examination of the categories and individual items within categories. Members of the team returned to the data to examine the specific structure of the categories to further develop the model.

Results

Table 2 presents the 10 categories in the conceptual model by frequency of statements. A total of 322 statements were included in the analysis, 41% from the youth and 59% from the staff. Conceptually, the 10 categories described events occurring across 3 phases–pre-shelter (14% of statements), during shelter stay (56% of statements), and post-shelter (30%). Youth focused more comments on pre-shelter phase categories (26% of youth responses related to this phase versus 5% for the staff); staff focused predominately on the post-shelter phase (8% of youth responses versus 44% for staff). The category “family receives respite” was only coded in two statements, however, because of the authors’ experiences in performing parent groups, the decision was
made to include this category because the uncoded parent groups consistently focused on this issue and it added additional information in developing a conceptual model.

Analysis of the relationship among the categories led to development of a conceptual model of phases of shelter experience. In the pre-shelter phase the various behaviors that contributed to youths’ placement in shelter care, included extreme acting out behaviors and family disruptions. When either behavior occurred, parents usually felt out of control or “at wits end” and sought out shelter care as a resource. In a few instances, the youth themselves sought out this resource. The shelter care phase included the experiences of youth and families after the youth entered shelter services. The experiences of youth during their shelter stay generally

<table>
<thead>
<tr>
<th>Table 1 Categories, Definitions, and inter-rater reliability</th>
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<tbody>
<tr>
<td><strong>Category (Inter-rater reliability)</strong></td>
</tr>
<tr>
<td><strong>Pre-Shelter</strong></td>
</tr>
<tr>
<td>1. Youth acting out (82%)</td>
</tr>
<tr>
<td>2. Family disrupted (75%)</td>
</tr>
<tr>
<td>3. Parents at wits end (78%)</td>
</tr>
<tr>
<td><strong>Shelter</strong></td>
</tr>
<tr>
<td>4. Youth experiences freedom (67%)</td>
</tr>
<tr>
<td>5. Youth experiences structure (77%)</td>
</tr>
<tr>
<td>6. Family experiences respite (100%)</td>
</tr>
<tr>
<td>7. Youth involved in treatment (89%)</td>
</tr>
<tr>
<td>8. Family reconnected and re-involved (67%)</td>
</tr>
<tr>
<td><strong>Post shelter care</strong></td>
</tr>
<tr>
<td>9. Youth returns home (83%)</td>
</tr>
<tr>
<td>10. Follow-up services (75%)</td>
</tr>
</tbody>
</table>
Table 2  Categories by frequency of statements for youth and staff

<table>
<thead>
<tr>
<th></th>
<th>All frequency statements</th>
<th>Youth frequency statements</th>
<th>Staff frequency statements</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pre-Shelter</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Youth Acting Out</td>
<td>21</td>
<td>17 (81%)</td>
<td>4 (19%)</td>
</tr>
<tr>
<td>Family Disrupted</td>
<td>13</td>
<td>8 (62%)</td>
<td>5 (38%)</td>
</tr>
<tr>
<td>Parents at Wits End</td>
<td>10</td>
<td>9 (90%)</td>
<td>1 (10%)</td>
</tr>
<tr>
<td>Shelter</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Youth Experiences Freedom</td>
<td>12</td>
<td>12 (100%)</td>
<td>0</td>
</tr>
<tr>
<td>Youth Experiences Structure</td>
<td>43</td>
<td>30 (70%)</td>
<td>13 (30%)</td>
</tr>
<tr>
<td>Family Receives Respite</td>
<td>2</td>
<td>1 (50%)</td>
<td>1 (50%)</td>
</tr>
<tr>
<td>Youth Involved in Treatment</td>
<td>85</td>
<td>41 (52%)</td>
<td>44 (48%)</td>
</tr>
<tr>
<td>Family Re-involved</td>
<td>38</td>
<td>3 (8%)</td>
<td>35 (92%)</td>
</tr>
<tr>
<td>Post-Shelter</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Youth Returns Home</td>
<td>42</td>
<td>6 (14%)</td>
<td>36 (86%)</td>
</tr>
<tr>
<td>Follow-up Services</td>
<td>56</td>
<td>4 (7%)</td>
<td>52 (93%)</td>
</tr>
</tbody>
</table>

revealed divergent, but generally positive, experiences with the structure and freedom of the shelter and receiving assistance by caring and skilled staff. Parents and families typically had opportunities for respite while youth were in shelter care and also participated in treatment with youth, becoming reconnected and re-involved. The post-shelter phase highlighted experiences when youth returned home. The involvement of families with the youth in the treatment process significantly impacted successful reunification, often due to participation in follow-up services.

Pre-shelter experience

The first phase of the conceptual model, the pre-shelter shelter experience, indicated factors that influenced initial admission of youth in shelter services, accounting for fourteen percent (n=44) of statements. Youth reported that they were initially placed in shelter care because of serious problems and acting out behaviors at home, with parents usually initiating placement of their child in shelters. They reported placement in shelter care because of disruptions in the family system, often due to issues such as abuse, homelessness, and economic problems that exacerbated need for professional intervention.

Youth acting out

The responses in this category focused on the negative behaviors of youth at home that led to their placement in shelter
care. While seven percent (n = 21) of statements focused on the acting out behaviors of youth, most were made by youth (80%, n = 17), indicating youth had a keen awareness of the nature and extent of their behaviors. These “acting out” behaviors included serious relationship problems with parents and negative peer behaviors. Specifically, the youth reported that they had been dishonest, disrespectful, and disobedient to parents.

“I was not being honest with my mom, got off into boys... Not so much being a leader, but a follower, with things my friends did.” – Youth

“I was having trouble with her [my mother]. I was disrespecting her. I was smoking pot and having sex.” – Youth

Equally important, youth reported that they engaged in a variety of negative and risky behaviors with their peers, such as fighting, substance abuse, and high risk sexual behaviors.

“Well, I got drunk, really drunk... so I got into a fight with my parents and they didn’t want me to stay with them anymore, not for a while.” – Youth

**Family system disrupted**

The statements in this category referred to the problems in the families of the youth contributing to shelter placement. Four percent (n = 13) of the youth and staff made statements related to disruptions in the family. Some families reported that they struggled with internal issues of physical abuse between parents, neglect, parental substance abuse, homelessness, parental unemployment, and family economic problems. For example, one youth stated that his stepparent physically abused him, was placed in foster care, and later placed in shelter care.

“...was because my mom’s ex-husband abused us both really bad, so they said I ran away when I was just running from him because he had hit me...” – Youth

Another youth discussed how his father had alcohol problems and his mother decided to leave. The youth initially stayed at a shelter where he was able to stay for a short while. However, because of program restrictions the youth was not allowed to continue living at the shelter with his mother and had to find other living arrangements.
Parents at wits end

This category included statements about parents' feelings of helplessness, hopelessness, and being out of control due to the youths' behaviors and other family problems. Three percent \( (n = 10) \) of the statements, the overwhelming majority by youth \( (n = 9) \), focused on parents being at wits end. The youth indicated that their parents were repeatedly frustrated and annoyed by their negative behaviors and parents' feelings of frustration and aggravation led to youths' placement in shelter care. Often youth reported that parents viewed shelter care as viable and beneficial resources to help them regain control, order, and stability. One youth recounted his surprise when his parents, without warning, told him to pack his bags, took him to the shelter, dropped him off, and told him he would be staying there. Another youth described fights with his stepfather and he was kicked out of the house.

“My mom’s husband kicked me out, and the next day I called my mom and she hung up on me. My Mom and I didn’t get along very well. We fought all the time, she’s always believed her husband over me . . .” – Youth

Shelter phase

This second phase of the conceptual model focused on pivotal aspects of the youths' experiences in shelter care. The majority of statements \( (56\%, n = 180) \) were about the shelter phase. Youth discussed how they had diverse experiences that significantly helped in their decisions to return home, such as experiences with freedom, structure, treatment, the re-involvement of their families, and respite away from their families.

Youth experiences structure

The responses in this category focused on youth experiences with structure, order, rules, and boundaries in shelters. Thirteen percent \( (n = 43) \) of youth and staff statements related to the youths' experience of structure in shelter care. The youth described that they were required to follow many rules and regulations, such as set times for waking up and going to bed.

“.. .getting up at the same time, cleaning everything all over again, doing the same thing every day. It gets really boring and worn out. Not being able to have your freedom... when
“...you want, or have friends come and hang out with you.”—Youth

The youth also reported that they were assigned chores and responsibilities in the shelter. While some youth complained about the rules and structure in the shelter; others considered the structure beneficial as they received rewards and incentives for completing tasks and chores.

“When you first get there, you can’t go on walks by yourself, and you’re restricted to two phone calls a day. The farther up you go, the more phone calls you get, the more you can go on walks by yourself... realized you don’t have to be in trouble to be noticed.” – Youth

Youth experiences freedom
While some youth complained about the high levels of structure within shelter environments, others stated they felt more freedom in the shelters than they did at home. Four percent (n = 12) of statements were about youth experiences with freedom, all by youth. One of the reasons for feeling freedom was positive was because they learned new skills, had opportunities to visit new places, and meet interesting people while in shelter care.

“No one brings up your problems really. The staff is really nice they make sure you’re doing what you’re supposed to be doing, ... it’s really nice to get away from the situation and the problems you were having at home...” – Youth

Family experiences respite
This category highlighted experiences of families while youth were in shelter care. One percent (n = 2) of statements focused on families receiving respite. Parent focus groups and comments by individual parents suggested they appreciated the respite while their youth was placed in shelter care. Staff also indicated that families seemed to benefit from the opportunity to regroup, restructure, and rest when their child was in shelter care.

“It may vary with each kid, but I know that I’ve had some kids in the recent two weeks who have a very supportive family that just brought them for time out, and they said they had no idea there were kids who didn’t have families that visited
them.” –Shelter Staff
The youth confirmed that their families needed this respite and found the time away helpful.
“My Dad and I weren’t getting along, so he told me to go there for a while. Give everybody a break from each other.” – Youth

Youth involved in treatment
Statements in this category referred to treatment experiences of youth in shelter care and included twenty-six percent ($n = 85$) of statements. Youth generally reported that they received effective and quality treatment when they were in shelter care. Qualified and professional staff provided the treatment and helped them deal with a variety of problems. Even when youth had needed help at odd hours, they reported that staff were available. The youth indicated staff possessed many qualities that enhanced their impact, such as caring attitudes, good skills, and accessibility. Youth appreciated the positive feedback, praise, and encouragement they received from staff as they made them feel valued, worthwhile, and “good when you accomplished something.”
“If something’s bothering you and you can’t sleep... they’re there 24 hours a day. There’s never a time when you can’t go talk to somebody unless you choose to.”— Youth

Family reconnection and re-involvement
The responses in this category focused on re-involvement of families with youth while they were in shelters. Twelve percent ($n = 38$) of statements related to re-involvement of families with the youth. Shelter staff indicated that when youth knew that their families wanted them to return home, they experienced more success in treatment.
“I think it’s the parent, the parent calling or visiting saying, “We want you to come home, we want this to work.”” –Shelter Staff
As the youth and their families met with treatment staff, they discussed problems, worked on strategies to improve their relationships, improved communication, and problem-solving.
“Sometimes it’s the first chance they have to talk with their families ... a lot of it is around communication, not being able
to understand where the other person is coming from … So, when they get here, they have to start analyzing what is going wrong … that’s one step towards making a positive change at home.”– Shelter Staff

Post-shelter phase
The final phase of the conceptual model was the post-shelter phase, which occurred after the youth returned home. Nearly one third ($n = 98$) of statements focused on reunification experiences. Statements typically focused on changes and improvements in youth’s behavior due to their shelter experiences and focused on the importance of follow-up services for youth and their families after shelter care, which were seen as critical for continued success.

Youth returns home
The statements in this category focused on the behaviors and experiences of youth after returning home ($36\%, n = 42$). Youth indicated that they made positive changes in their lives and behaviors as a result of shelter care and that they avoided negative peer influences upon return. They noted replacing old problem behaviors with new, positive ones they had learned during their shelter stay. Some of these behaviors included being more mature, responsible, obedient, exercising better listening skills, and using positive coping strategies.

“Since I’ve been home, I’ve changed a lot… Some of the people I was hanging out with, I don’t talk to them any more… when I left here, I changed a little bit. You start to know who your real friends are. It taught me to be responsible, to grow up.”– Youth

Follow-up services
This final category included statements ($17\%, n = 56$) regarding the types of follow-up services that youth and families received at shelters after they returned home. Youth reported that they often continued to participate in different shelter care activities such as individual, group, and family therapy, and crisis intervention. The youth and their families often continued contact with shelter care staff to obtain referrals for services and resources; some joined support groups at the shelter to continue
receiving support. Staff suggested that follow-up services are available when youth leave shelters and are an important part of youths’ success.

“Therapy is a big part of it. We always try to make sure that once a child leaves the shelter there is ongoing therapy, or other activities in place. Things they start here in the shelter, but just aren’t enough to really substantiate long-term change.” – Shelter Staff

“Aftercare... lets parents come back to have family sessions. And we also hold parent groups... where the parents can come here and talk about the problems they’re having. We have a therapist in sexual abuse that might take some of the children after they leave the shelter and work with them.” – Shelter Staff

**Discussion**

Results from our study provide insight into the process through which runaway/homeless youth return home following a shelter stay. The changes necessary for the youth to return home appear to be somewhat the inverse of factors related to the youth’s running away. Perhaps most importantly, it is clear that for youth returning home changes occur both within the youth and the family. The findings emphasize the need for continued growth and change by all members of the family, as well as highlight the need for continued intervention to maintain positive changes.

Factors related to reasons youth ran away confirm conventional wisdom and previous research as youth consistently reported engaging in risky behaviors, conflict in the home, and disrupted relationships with parents (Whitbeck et al., 1997). Youth did not, however, attribute their problems leading to running away only to themselves or their families; they saw their problems in terms of themselves, their parents, and the poor relationships between them.

During the shelter phase, the youth experienced both freedom and structure; they experienced the structure, choose to comply, and became engaged in treatment. The process of engagement in treatment is perhaps the key component to success among youth returning home. In particular, developing a positive relationship with a shelter staff member was viewed by
both youth and staff respondents as key to success in treatment in the shelter.

For youth, the return home appeared to include behavior changes. Although the relative lack of youths' response in this category makes this argument somewhat less compelling, staff suggested that youth returning home made positive changes and emphasized the importance of youth engaging in follow-up services. As previous research suggests that outcomes tend to attenuate over time, provider consensus suggested that aftercare was critical to maintain gains.

Results suggest that families have their own risky behaviors, independent of the behaviors of their child. When the relationship between family and youth were strained, the youth reported the family system was unable to cope with their behaviors. In particular, youth reported parents were generally the instigator of shelter admission. Although this may represent an artifact of shelter services, it suggests that these families must remain substantially involved. Family re-engagement with the youth upon shelter discharge appears a critical factor for reunification. While this may or may not include family members changing their own problem behaviors, it is clear that reaching out to the youth is a consistent factor reported by staff. Thus, the family’s engagement in treatment and with their child is needed for successful reunification.

As an exploratory study, this research is not without significant limitations. Perhaps most importantly, limiting the sample and discussion to factors of treatment success did not allow insight into what happens when these factors did not occur. While examining “successes” is needed, it does not allow development of a complete model. Further, examination of differences between those who return to stable home environments and those who do not is not possible.

A limitation previously mentioned was the lack of data provided directly by families. Although the model included a focus on the families by both youth and staff, how families might report their own experiences remains unclear. As previous research suggests differences in family and youth perceptions during shelter stays (Safyer et al., 2004), this potential confound is emphasized by consistent differences between youth and staff
reports. Finally, the generalizability of this sample clearly is indeterminate. However, from the descriptions of their own behaviors, these youth appear to conform to national shelter samples in that they report substance use, behavioral issues, and family problems (Thompson et al., 2001).

Although this study has limitations, the results are sufficiently clear to provide implications for service delivery. The results strongly argue for working with these youth and their families jointly. It is clear that family relationships and dynamics must be included in the treatment and follow-up process. Intervening with both the youth and their families is needed to achieve change during the shelter stay and to maintain it after reunifying. The benefit of a positive relationship between youth and staff is also notable. The heavy emphasis from both the youth and staff reporters makes a compelling case for development of a positive attachment for the youth to an individual within the treatment setting. This would suggest the potential for creating a formal mechanism for developing these relationships.

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References


Whitbeck, L. B., Hoyt, D. R., & Wa-Ning, B. (2000). Depressive