



# STUDENT HOMELESSNESS: LESSONS FROM THE YOUTH RISK BEHAVIOR SURVEY

## PART VI: SUICIDE

The Youth Risk Behavior Survey (YRBS) was first developed by the Centers for Disease Control and Prevention (CDC) in 1990 to assess the health risk behaviors of youth and adults in the United States. For the first time since the survey has been widely administered, the 2017 YRBS optional question list included two questions pertaining to homelessness. SchoolHouse Connection analyzed demographic and risk factor data from the YRBS in 17 states<sup>i</sup>, comparing high school students experiencing homelessness and those not experiencing homelessness. This series shares the striking and heartbreaking results of that analysis, with tangible action steps schools can take to promote safety and health for students experiencing homelessness.

Homelessness at any age is traumatic. In infancy, homelessness harms babies’ health and development, which continues into early childhood.<sup>ii</sup> For adolescents, homelessness means hunger, instability, and extreme emotional stress. It often means victimization, trafficking, and separation from family and other

MORE THAN ONE IN THREE HIGH SCHOOL STUDENTS EXPERIENCING HOMELESSNESS ATTEMPTED SUICIDE IN THE YEAR PRIOR TO COMPLETING THE YRBS.

support networks, whether due to family rejection or the family’s inability to find shelter together.<sup>iii</sup> YRBS data show that tragically, many high school students experiencing homelessness resort to self-harm as a response to the trauma of homelessness.



## LIKELIHOOD TO ATTEMPT SUICIDE

High school students not experiencing homelessness



**7.19 TIMES**

High school students experiencing homelessness



**36.9%**  
of homeless high school students reported a suicide attempt.

Data: Risk and Resilience: Differences in Risk Factors and Health Outcomes Between Homeless and Non-Homeless Students in 2017 YRBS Data  
Read the full paper: <http://bit.ly/SHC-YRBS2018>

**Students experiencing homelessness were 7.19 times more likely to attempt suicide compared to stably housed youth.** High school students experiencing homelessness are 3.21 times more likely to have a suicide plan compared to stably housed youth.

59.18% OF OUR YOUNG LEADERS REPORTED MAKING A SUICIDE PLAN WHILE IN HIGH SCHOOL, AND ONE IN FOUR REPORTED A SUICIDE ATTEMPT WHILE IN HIGH SCHOOL.

To explore these findings further, SchoolHouse Connection (SHC) asked 49 young people with homeless experiences who participate in the mentorship and leadership programs of SchoolHouse Connection and the National Network for Youth about

whether they had considered suicide. 59.18% of our young leaders reported making a suicide plan while in high school, and one in four reported a suicide attempt while in high school.

These devastating findings are not inevitable. Schools can provide students experiencing homelessness with access to mental health support, mentorship, basic needs, and hope.

## Action Steps for Schools

The following action steps were suggested by young people who experienced homelessness and trauma in high school.

1. Talk about mental health openly and often. Youth noted that “destigmatizing depression, anxiety, and mental illness, in general, would be a big step in the right direction. Nurses and counselors could visit classrooms and discuss the commonality of things like this.”
2. Schools need to “have enough staff that students are able to make personal connections, and to help foster informal check-ins.” It takes time for McKinney-Vento homeless liaisons, school counselors, social workers, teachers, nurses, and others to build trust with students. Such investments in students’ emotional health must be valued and prioritized.
3. Collaborate with community mental health providers to locate services on school campuses and ensure that youth experiencing homelessness can access them, discreetly. Youth suggested locating services within schools and at a range of times during, before, and after the school day, to help eliminate transportation barriers.
4. Offer school phones in private locations for students to call suicide hotlines whenever needed. Youth experiencing homelessness often struggle to maintain functioning cell phones and cell phone plans, yet suicide hotlines provide support and a listening ear that literally save lives.
5. Create school-based peer educational training programs to inform young people about depression and suicidality and to support students experiencing these risk behaviors.
6. Respect youth autonomy. A consensus among youth surveyed was to “let students know what resources are available to them. Be clear about the procedure followed when students disclose [suicidal thoughts] so they can make an informed choice about disclosure—don't force interventions that students don't want, [and] let them know what they need to do to avoid them. [Not] allowing students to safely disclose suicidal feelings is more dangerous than allowing someone to leave after disclosing.”
7. Review all school policies to ensure they are trauma-informed and specifically consider the trauma and needs of students experiencing homelessness.

## Resources

3 Bold Steps, [Promoting Student Mental Health](#)

eSchool News, [3 No-Cost Ways to Support Mental Health in Schools](#)

Mental Health America, [Back to School Toolkit](#)

National Alliance on Mental Health, [Navigating a Mental Health Crisis](#)

Society for the Prevention of Teen Suicide, [Understanding Suicide: Outlining Basic Characteristics](#)

Suicide Prevention Resource Center, [Preventing Suicide: The Role of High School Teachers](#)

US Department of Health and Human Services, [Adolescent Mental Health Basics](#)

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<sup>i</sup> AK, AR, CA, CO, DE, HI, ID, IL, KS, KY, ME, MT, NH, NC, PA, VA, WI.

<sup>ii</sup> Richards, R., Merrill, R. M., Baksh, L., & McGarry, J. (2011). "Maternal health behaviors and infant health outcomes among homeless mothers: US Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) 2000–2007". *Preventive Medicine*, 52(1), 87-94. Stein, J. A., Lu, M. C., & Gelberg, L. (2000). "Severity of homelessness and adverse birth outcomes". *Health Psychology*, 19(6), 524.

<sup>iii</sup> National Network for Youth. "[Human Trafficking and the Runaway and Homeless Youth Population.](#)" Administration for Children and Families, Family and Youth Services Bureau (2016). "[Street Outreach Program Data Collection Study Final Report.](#)"