



2020 Youth REACH MD Survey

This survey is being administered by the Youth REACH MD Steering Committee & this local Continuum of Care to help state and local providers better understand the housing and service needs of youth and young adults who are on their own and under the age of 25. Your answers will remain completely confidential.

Thank you for participating and letting your voice be heard!

Basic Information

1. What county are you in right now? *Select the best answer.*

- | | | |
|--|--|---|
| 1. <input type="radio"/> Allegany County | 10. <input type="radio"/> Dorchester County | 19. <input type="radio"/> Saint Mary's County |
| 2. <input type="radio"/> Anne Arundel County | 11. <input type="radio"/> Frederick County | 20. <input type="radio"/> Somerset County |
| 3. <input type="radio"/> Baltimore County | 12. <input type="radio"/> Garrett County | 21. <input type="radio"/> Talbot County |
| 4. <input type="radio"/> Baltimore City | 13. <input type="radio"/> Harford County | 22. <input type="radio"/> Washington County |
| 5. <input type="radio"/> Calvert County | 14. <input type="radio"/> Howard County | 23. <input type="radio"/> Wicomico County |
| 6. <input type="radio"/> Caroline County | 15. <input type="radio"/> Kent County | 24. <input type="radio"/> Worcester County |
| 7. <input type="radio"/> Carroll County | 16. <input type="radio"/> Montgomery County | 25. <input type="radio"/> I don't know |
| 8. <input type="radio"/> Cecil County | 17. <input type="radio"/> Prince George's County | |
| 9. <input type="radio"/> Charles County | 18. <input type="radio"/> Queen Anne's County | |

2. What city, town, or neighborhood do you normally spend the night in? _____

3. What are your initials? First _____ Last _____

4. What is your date of birth? (mm/dd/yy) ____ / ____ / ____

5. How old are you? _____ (If 25 or older, stop and return the survey)

Living Situation

6. Where did you stay last night? *Select the best answer.*

- In a house or apartment with my immediate family (parent or guardian) that we rent or own.
- At the house or apartment of my foster parent
- At my own apartment or a room I rent
- At the house or apartment of another family member
- At the house or apartment of a friend
- At a shelter/motel
- In a jail or juvenile detention facility
- Outside in the park, on the street, in a tent, transit station, car, etc.
- In a transitional housing program
- Inside an abandoned building, squat, porch, basement, hallway, etc.
- At the house or apartment of a stranger
- In a group home
- In a treatment or medical facility (such as a hospital or detox facility)
- In a college dorm
- Other (please specify) _____

7. How long do you think you could stay there without being asked to leave? *Select the best answer.*

- As long as I want/Indefinitely
- For the next week or two
- For the next month
- More than a month, but not indefinitely. (e.g., dorm, detention, transitional housing).
- I have already left
- I don't know

Continue

8. How long have you been staying at the place where you stayed last night? *Select the best answer.*

- 1. Less than 1 week
- 2. At least 1 week, but less than 2 weeks
- 3. At least 2 weeks, but less than 1 month
- 4. 1-6 months
- 5. More than 6 months

9. Do you live with your parent, guardian, or foster parent almost every night? Do not count friends or relatives who are not your legal guardian. *Select all that apply.*

- a. Yes, I am living with my parent/guardian/foster parent or can return to living with them when I leave college or detention
- b. No, I chose to leave
- c. No, I was asked to leave
- d. No, my parent/guardian/foster parent is unavailable or unable to care for me

9b. If no, why are you not currently living with and/or why are you unable to return to your parent/guardian/foster parent? *Select all that apply.*

- a. Arguing or fighting between my parent/guardian/foster parent and me
- b. I wanted to leave
- c. My use of drugs or alcohol
- d. My parent/guardian/foster parent told me to leave after I turned 18
- e. My parent/guardian/foster parent told me to leave before I turned 18
- f. My house was too small for everyone to live there
- g. My parent/guardian/foster parent or another household member was abusive (sexually, physically, or emotionally) or neglected me
- h. I did not feel safe because of violence or unsafe activities in my house
- i. My parent/guardian/foster parent was experiencing homelessness and/or my family lost its housing
- j. My parent/guardian/foster parent abused drugs or alcohol
- k. My sexual orientation and/or gender identity
- l. My parent/guardian/foster parent is very sick or died
- m. I was released from jail or a detention facility and could not return home
- n. I was/am pregnant or got someone pregnant
- o. My parent/guardian/foster parent was unable to care for me
- p. I am currently in jail/detention
- q. I left foster care and could not return home
- r. Money problems/being unable to pay the rent or mortgage
- s. My parent/guardian/foster parent was deported or lost their immigration status
- t. Other (please specify) _____
- u. None of the above, I am living with my parent/guardian/foster parent

10. There can be a lot of complicated reasons why you might or might not be with your parent, guardian or foster parent right now. If you would like to explain more, please write it below:



Education

11. Are you currently enrolled in school? *Select the best answer.*

1. No, not currently enrolled in school
2. Yes, in middle school
3. Yes, in high school
4. Yes, in a GED program
5. Yes, in a vocational training program
6. Yes, in college
7. Yes, other (please specify) _____

12. What is the highest grade or year of school you have completed? *Select the best answer.*

1. No education
2. 8th grade or less
3. 9-11th grade
4. High school diploma
5. GED certificate
6. Some college credits
7. College degree
8. Post-secondary vocational training
9. Other (please specify) _____

Demographics

13. How would you describe your race/ethnicity? *Select all that apply.*

- a. Black/African American
- b. White
- c. Hispanic or Latino/a
- d. Asian/Pacific Islander
- e. Native American
- f. Other (please specify) _____

14. How would you describe your gender identity? *Select all that apply.*

- a. Male
- b. Female
- c. Transgender
- d. Non-binary
- e. Questioning
- f. Other (please specify) _____
- g. Prefer not to answer

15. Which of the following best describes how you currently think about your sexual orientation? *Select all that apply.*

- a. Straight
- b. Gay or Lesbian
- c. Bisexual or Pansexual
- d. Questioning
- e. Other (please specify) _____
- f. Prefer not to answer

Continue 

Life Experiences

For the following questions, please select the best answer.

16. Are you pregnant? 1. Yes 2. No
17. Do you have children? 1. Yes 2. No
- 17a. If yes, how many children? _____
- 17b. Do any of your children live with you? 1. Yes 2. No
18. Have you ever been in foster care? 1. Yes 2. No
- 18a. If yes, what age did you leave foster care? _____
19. Have you ever lived in a residential treatment program, group home, or other live-in healthcare facility? 1. Yes 2. No
20. Have you ever stayed overnight or longer in juvenile detention? 1. Yes 2. No
21. Have you ever stayed overnight or longer in an adult jail or prison? 1. Yes 2. No

Housing History

22. How many different places have you spent the night in the past 2 months? *Select the best answer.*
1. 2-3 places
 2. 4-6 places
 3. 7 or more places
 4. I have spent the night in the same place for the past 2 months
23. Where have you spent the night in the past 2 months? *Select all that apply.*
- a. At the house or apartment of a friend
 - b. At a shelter/motel
 - c. At the house or apartment of another family member
 - d. Outside in a park, on the street, in a tent, transit station, car, etc.
 - e. In a jail or juvenile detention facility
 - f. In a house or apartment with my immediate family (parent or guardian) that we rent or own.
 - g. At the house or apartment of a stranger
 - h. Inside an abandoned building, squat, porch, basement, hallway, etc.
 - i. At my own apartment or a room I rent
 - j. In a transitional housing program
 - k. In a treatment or medical facility (such as a hospital or detox facility)
 - l. In a college dorm
 - m. In a group home
 - n. At the house or apartment of my foster parent
 - o. Other (please specify) _____
24. Is this the first time you have not had a safe and stable place to sleep at night? *Select the best answer.*
1. Yes
 2. No
25. How old were you the first time you did not have a safe and stable place to sleep at night? _____

Continue 

Services & Supports

26. Which of the following services or programs have you tried to get help from in the past year? *Select all that apply.*

- a. Food Stamps/SNAP
- b. Food banks or free meals
- c. Shelters
- d. Short-term housing (such as a halfway house or transitional housing program)
- e. Long-term housing (such as Section 8, public housing, or Permanent Supportive Housing)
- f. Counseling or other mental health care services
- g. Job training, life/finance skills training, and/or career placement
- h. Health care services (including emergency room services and care to help with health conditions or disabilities)
- i. Dental care
- j. Educational support (such as enrolling in school, a GED program, or an ESL program)
- k. Welfare benefits or Social Security Disability benefits
- l. Help getting social security card, birth certificate, ID card, driver's license, etc.
- m. Transportation assistance (including bus passes, Uber/Lyft/Cab fare, etc.)
- n. Legal help
- o. Substance use or alcohol treatment programs
- p. Child care, WIC, or other pregnancy or parenting supports
- q. Family support (such as conflict mediation or family reunification)
- r. Drop-in or Teen Center
- s. LGBTQ support services
- t. Local police officers
- u. Veterans services
- v. Other (please specify) _____
- w. I have not tried to get help from any programs or services

27. What would be the most helpful for you right now? *Select all that apply.*

- a. Long-term housing (such as Section 8, public housing, or Permanent Supportive Housing)
- b. Short-term housing (such as a halfway house or transitional housing program)
- c. Shelters
- d. Food Stamps/SNAP
- e. Food banks or free meals
- f. Job training, life/finance skills training, and/or career placement
- g. Transportation assistance (including bus passes, Uber/Lyft/Cab fare, etc.)
- h. Educational support (such as enrolling in school, a GED program, or an ESL program)
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- t. Veterans Services
- u. Other (please specify) _____

Continue 

28. What prevented you from getting all the help you needed? *Select all that apply.*

- a. No transportation
- b. Put on waiting list
- c. I didn't have necessary documents
- d. I didn't know where to go
- e. I didn't qualify
- f. I didn't hear back
- g. They said they could not help me
- h. I didn't follow through
- i. They sent me somewhere else
- j. I didn't feel comfortable/safe
- k. I didn't like how I was treated
- l. I didn't want to fill out paperwork
- m. Language barrier
- n. Other (please specify) _____
- o. I received all the help I needed

29. In the last two months, where did you get money/income? *Select all that apply.*

- a. Full-time job
- b. Part-time job and/or temporary job
- c. Money from 'under the table' work
- d. Self-employment
- e. Cash assistance from a government-funded program (federal/state/local)
- f. Social Security/disability payments
- g. Unemployment benefits
- h. Food stamps
- i. Selling drugs
- j. Exchanging sex for money/rent/etc.
- k. Panhandling
- l. Child support
- m. Money from family members or friends
- n. Other (please specify) _____
- o. I do not have a personal source of income right now

Recommendations

30. What strengths, talents, or skills should be supported to help youth move forward?

31. What laws or rules would you change to make life easier for you or others with similar experiences?

32. Is there anything else you would like to share to help us better support you and other young people like you?

Thank you for taking the time to participate in this survey and helping end and prevent youth homelessness!

