YOUTH QUESTIONNAIRE

PURPOSE: To better understand the needs of homeless and unstably housed youth in our community, in order to inform programs and services. Your answers will be shared with researchers from the University of Southern California, but no information which links your identity to your responses will be shared. Your privacy will be completely protected from these researchers. Your participation in this survey is completely voluntary and will not affect your eligibility and participation in services.

Youth ID:	Date of birth *(xx/xx/xxxx)*: _____ /_____/_____

Gender:	❑ Male	❑ Female	❑ Transgender Woman	❑ Transgender Man		
Race:	❑ American Indian or Alaskan Native ❑ Asian		❑ Black or African American ❑ White	❑ Native Hawaiian or Other Pacific Islander ❑ Latino/Hispanic	❑ Mixed Race ❑ Other: _____	
Sexual Orientation:	❑ Gay, Lesbian	❑ Bisexual	❑ Straight	❑ Queer	❑ Questioning/ Unsure	❑ Other: _____

PLACES OF STAY

Where did you sleep last night? *(Can select multiple choices)*

❑ Family home	❑ Home of a person I'm having sex with	❑ Juvenile detention center, jail	❑ Abandoned building or squat
❑ Foster family home	❑ Group home	❑ Own apartment	❑ Car or bus
❑ Relative's home	❑ Shelter (emergency, temporary)	❑ Street, park, woods, outside	❑ I didn't sleep last night
❑ Friend's home	❑ Transitional living program	❑ Hotel/motel	❑ Other: _____
❑ Home of my boyfriend/ girlfriend		❑ Sober living facility ❑ PSH	

How long have you been staying there? _____	❑ Days	❑ Weeks	❑ Months	❑ Years

Have you spent the night in any of the following places?	**Past 12 months**	**Past 30 days**	**How old were you the first time you ever spent the night in one of these places?**
In a youth or adult shelter	❑	❑	_____
In a public place, such as a train or bus station, restaurant, or office building	❑	❑	
In an abandoned building or squat	❑	❑	
Outside in a park, on the street, in the woods, under a bridge or overhang, or on a rooftop	❑	❑	
In a subway or other public place underground	❑	❑	
On the couch or other extra space at the home of a friend or extended family member, because you needed a place to stay	❑	❑	
With someone you did not know because you needed a place to stay	❑	❑	
None of these	❑	❑	

In thinking about your whole life, how long in total have you been without a home, or a regular place to stay/sleep, or been homeless?
_____ ❑ Days ❑ Weeks ❑ Months ❑ Years

Since you have been without a home, or a regular place to stay/sleep, or been homeless, how many different times have you been stably housed? *(How many times did you feel your housing situation was safe and lasting?)* _____

REASONS FOR LEAVING

Did you ever become homeless because:

You ran away from your family home?	❑ Yes	❑ No
You ran away from a group home or foster home?	❑ Yes	❑ No
Because of violence at home between family members?	❑ Yes	❑ No
Because of differences with your parents about religious beliefs?	❑ Yes	❑ No

SCHOOL AND WORK

When you think about your school experience, did you: *(Please select only one option)*

❑ Complete High School ❑ Attain a GED ❑ Attain a College degree ❑ None of these

Which of the following best describes your job right now? (*Please select only one option)*

❑ I have a paid job/internship.
❑ I have a job where I am paid "under the table."
❑ I have an unpaid job/internship.
❑ I do not have a job/internship, but I'm actively looking for one.
❑ I do not have a job/internship, and I'm not actively looking for one.

Are you in any kind of educational program now? *(Please select all that apply)*

❑ High School ❑ Trade/technical/vocational program ❑ Community College ❑ No. Not in a program now.
❑ Four-year college or university ❑ GED Prep ❑ Other. *Please specify:* _____

PAST EXPERIENCES

Where did you grow up? *(City, State, Country)* _____

Have you ever been a part of the foster care system? For example, being taken out of your home and placed with other family, foster family, in a group home, etc.	❑ Yes	❑ No
Were you ever involved with the justice system before you were 18 (as a minor)? This includes jail, juvenile hall, camp programs, probation, etc.	❑ Yes	❑ No
In the last 12 months, have you been in jail, juvenile detention, prison, or otherwise incarcerated?	❑ Yes	❑ No
Are you a veteran of the U.S. military?	❑ Yes	❑ No

If you've ever used marijuana, how old were you the first time you tried it? _____

How many times in your life have you ever been pregnant or got someone pregnant? *(Include a current pregnancy)* _____
[IF 0, SKIP to MOOD]

How many biological children have you had? _____

MOOD

For the following items, please select the choice that best describes how you have felt OVER THE PAST WEEK:

I felt depressed	❑ LESS THAN 1 DAY OR NEVER	❑ 1-2 DAYS	❑ 3-4 DAYS	❑ 5-7 DAYS
I felt everything I did was an effort	❑ LESS THAN 1 DAY OR NEVER	❑ 1-2 DAYS	❑ 3-4 DAYS	❑ 5-7 DAYS
My sleep was restless	❑ LESS THAN 1 DAY OR NEVER	❑ 1-2 DAYS	❑ 3-4 DAYS	❑ 5-7 DAYS
I was happy	❑ LESS THAN 1 DAY OR NEVER	❑ 1-2 DAYS	❑ 3-4 DAYS	❑ 5-7 DAYS
I felt lonely	❑ LESS THAN 1 DAY OR NEVER	❑ 1-2 DAYS	❑ 3-4 DAYS	❑ 5-7 DAYS
People were unfriendly	❑ LESS THAN 1 DAY OR NEVER	❑ 1-2 DAYS	❑ 3-4 DAYS	❑ 5-7 DAYS
I enjoyed life	❑ LESS THAN 1 DAY OR NEVER	❑ 1-2 DAYS	❑ 3-4 DAYS	❑ 5-7 DAYS
I felt sad	❑ LESS THAN 1 DAY OR NEVER	❑ 1-2 DAYS	❑ 3-4 DAYS	❑ 5-7 DAYS
I felt that people disliked me	❑ LESS THAN 1 DAY OR NEVER	❑ 1-2 DAYS	❑ 3-4 DAYS	❑ 5-7 DAYS
I could not get going	❑ LESS THAN 1 DAY OR NEVER	❑ 1-2 DAYS	❑ 3-4 DAYS	❑ 5-7 DAYS

IN YOUR LIFE, have you ever had any experience that was so frightening, horrible, or upsetting that in the PAST MONTH you:

Have had nightmares about it or thought about it when you did not want to?	❑ Yes	❑ No
Tried hard not to think about it or went out of your way to avoid situations that reminded you of it?	❑ Yes	❑ No
Were constantly on guard, watchful, or easily startled?	❑ Yes	❑ No
Felt numb or detached from others, activities, or your surroundings?	❑ Yes	❑ No

For Provider to fill out:

What program is this young person a part of? _____