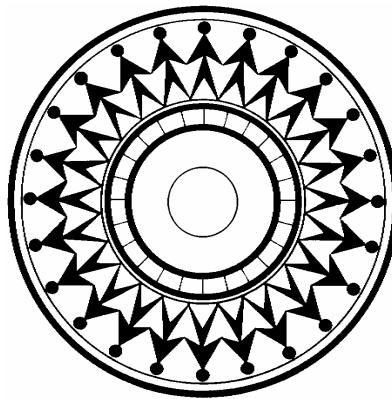


# **RUNAWAY AND HOMELESS YOUTH MANAGEMENT INFORMATION SYSTEM, FISCAL YEAR 1992-1995**

## **NDACAN Dataset Number 76 User's Guide**



**National Data Archive on Child Abuse and Neglect**

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# **RUNAWAY AND HOMELESS YOUTH MANAGEMENT INFORMATION SYSTEM, FISCAL YEAR 1992-1995**

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## **PREFACE**

**The data for the *Runaway and Homeless Youth Management Information System, Fiscal Year 1992-1995*, have been given to the National Data Archive on Child Abuse and Neglect for public distribution by Information Technology International. Funding for the project was provided by the Family and Youth Services Bureau in the Administration for Children and Families within the Department of Health and Human Services.**

## ABSTRACT

It is estimated that over a million young people run away or become homeless each year. These youth face increasingly complex issues, including substance abuse, physical and sexual abuse, and AIDS. The serious issues faced by these youths are coupled with funding constraints among almost all agencies providing services to this population.

In 1974 the Family and Youth Services Bureau (FYSB) authorized funding to assist community based programs to serve youth who were not otherwise being served by traditional human service agencies. The funding was used for the operation of basic center programs which would provide support for runaway and homeless youth (RHY). The programs offered emergency shelter, crisis intervention services, and family reunification services. In 1988 the Transitional Living Program was introduced in order to provide services to older youth requiring assistance in becoming self-sufficient.

While helping to support at-risk youth, the FYSB laws also mandate that certain data be regularly collected and reported. For example, FYSB supported agencies must report on the profile of the youth and families they serve, and provide an overview of the services which they deliver under their grant programs. In order to assist these grantees in their reporting responsibilities, FYSB funded the development of a Runaway and Homeless Youth Management Information System (RHY MIS). The RHY MIS was designed to provide comprehensive information on youth served, services provided, and programs which provide the services.

The RHY MIS was designed, developed, and implemented by Information Technology International (ITI). Gradual implementation of the MIS began in 1992 with approximately 400 RHY grantee sites across the country. By 1995, virtually all existing grant programs had at least one staff member who had been trained and grantees were expected to use the MIS and submit data to FYSB on a quarterly basis.

The fiscal year 1992-1995 RHY MIS dataset contains data submitted from participating agencies in 53 U.S. States and Territories. The dataset consists of one file which contains 93389 observations and 490 variables. Information is included on youth demographics, youth problems and services provided.

## ACKNOWLEDGMENT OF ASSISTANCE

All manuscripts which use data made available through the National Data Archive on Child Abuse and Neglect should acknowledge that fact as well as identify the original collector of the data. Users of these data are urged to follow some adaptation of the following statement:

The data utilized in this publication were made available by the National Data Archive on Child Abuse and Neglect, Cornell University, Ithaca NY; and have been used by permission. The *Runaway and Homeless Youth Management Information System, Fiscal Year 1992 - 1995* was implemented by Information Technology International. Funding for RHY MIS was provided by the Family and Youth Services Bureau, Administration for Children and Families, U.S. Department of Health and Human Services. Neither the collector of the original data, the funder, the Archive, Cornell University, or its agents or employees bear any responsibility for the analyses or interpretations presented here.

## INFORMATION ABOUT THE USE OF ARCHIVAL RESOURCES

In order to provide funding agencies with essential information about the use of NDACAN resources and to facilitate the exchange of information about research activities among data users and contributors, each user of these data is expected to send two copies of any completed manuscript, thesis abstract, or reprint to the National Data Archive on Child Abuse and Neglect, Family Life Development Center, MVR Hall, Cornell University, Ithaca, New York 14853-4401.

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## I. OVERVIEW

### Background

In 1974, the enactment of Public Law 93-415 authorized funding for programs to support runaway and homeless youth (RHY). The specific intent of the legislation was to assist community based programs to serve youth who were not otherwise being served by the traditional public agencies, notably, social services/foster care and juvenile justice. The funding was used to operate “basic center programs” which offered emergency shelter, crisis intervention services, and family reunification services for runaway, and other high-risk youth.

Public Law 93-415 has been administered over the years by the Family and Youth Services Bureau (FYSB) in the Administration for Children and Families (ACF) within the U.S. Department of Health and Human Services (USDHHS). The law has been amended and re-authorized several times since its initial approval in 1974. A 1977 amendment authorized the inclusion of homeless youth with the original runaway designation. A 1988 amendment authorized funding for Transitional Living Programs to provide services to older youth requiring assistance in becoming self-sufficient. Transitional Living Programs offer long-term shelter, educational support, basic life skills training, and preparation for productive employment. Related legislation was passed in 1988; The Anti-Drug Abuse Act authorized funding for alcohol and drug abuse prevention services to be provided to the runaway and homeless youth population.

Both the Anti-Drug Abuse Act of 1988 and Public Law 93-415 mandated that certain data be collected and regularly reported to FYSB. The 1992 re-authorization of Public Law 93-415 required grantees to report on the profile of the youth and families served, and to provide an overview of the services delivered under their grant programs. The Anti-Drug Abuse Act, mandated that grantees report regularly on the types of services provided and on the characteristics of the youth served. These requirements were coupled with Congressional mandates for the DHHS to report regularly on the status of all



**federally funded programs serving runaway and homeless youth in the United States and U.S. territories.**

The Runaway and Homeless Youth Management Information System (RHY MIS) was developed by FYSB to assist in carrying out the reporting responsibilities discussed above. The RHY MIS was also designed to assist in policy decision making and budgetary planning.

The RHY MIS was designed, developed, and implemented by Information Technology International (ITI). Funding for RHY MIS consisted of two sequential contracts. The first (contract # 105-90-1700) provided for the original requirements analysis, system design, and initial development activities. The second (contract #105-92-1708) provided for the implementation, training, data management, and system maintenance and upgrades. The original funding to support the development of the RHY MIS was made available through the Anti-Drug Abuse Act budget, but shifted to the core RHY budget within FYSB as the Drug Abuse Prevention Programs were phased out.

Gradual implementation of the RHY MIS began in 1992 at the approximately 400 RHY grantee sites across the country. All sites were required to receive training prior to implementation of the system. By FY 1995, virtually all grant programs had at least one staff member who had been trained in the use of the RHY MIS. The program grantees were expected to use the MIS and submit data to FYSB on a quarterly basis. The RHY MIS version currently in use, Version 3.0, is the third version of the system that has been widely distributed.

### Programs in the RHY MIS

Three FYSB grant programs provided the basis for the development of the RHY MIS: the Basic Center (BC), the Transitional Living Program (TLP), and the Drug Abuse Prevention Program (DAPP). The DAPP grant was phased out by FYSB in 1996. The RHY grant programs are described below.

#### **Basic Center (BC)**

The goal of the BC program is to support agencies that provide crisis intervention services to runaway and homeless youth outside the traditional juvenile justice and social service systems. The overall goal of the program is

to reunite youth with their families whenever possible, or to arrange for other safe placements. The BC agencies are required to provide a range of services,

including short term emergency shelter (up to 14 days); individual, group, and family counseling; recreation programs; and aftercare services for all youth. The BC agencies are also required to provide linkages with individuals and community agencies in order to provide needed services that are not available from the funded agency.

#### **Drug Abuse Prevention (DAPP)**

The goal of the DAPP was to assist communities in expanding or improving drug abuse prevention, education, and intervention services for runaway youth and their families. The DAPP agencies undertook a variety of activities including peer counseling programs for runaway youth; individual, family, and group counseling for runaway youth and their families; coordination of local drug abuse prevention services; development of model approaches; community support groups for at-risk youth in rural areas; community education; and information and training for individuals involved in providing services to runaway youth.

#### **Transitional Living (TLP)**

The goal of the TLP is to help homeless youth, ages 16 to 21, make a successful transition to self-sufficient living and avoid long-term dependency on social services. The TLP agencies provide youth with comprehensive services in a supervised living arrangement for up to 18 months. The TLP agencies are required to provide a range of services, including; basic living skills training; employment preparation and job placement services; educational services; mental and physical health care; safe, supportive living accommodations; and assistance in the development of transition plans for each youth.

### **Inclusion Dates and States**

Data for the FY 1992-1995 RHY MIS were collected from participating agencies in 50 states, the District of Columbia, Puerto Rico, and Guam. The FY 1992-1995 data pertain to youths that began receiving services between October 1, 1992 and September 30, 1995.

### **Instruments and Measures**

The data collection form for the RHY MIS is included in Appendix A. Detailed definitions for many of the fields and potential responses on the RHY MIS data collection form can be found in the Coding Supplements: Appendices C, D, and E. A table that maps variables in the 1992-1995 RHY MIS to variables in the 1996 RHY MIS dataset, is included in Appendix F. A glossary of RHY MIS related terms and definitions is included in Appendix G.

## II. WORKING WITH THE DATA FILES

### File Processing History

The RHY MIS FY 1992 – 1995 data were originally collected by Information Technology Internation (ITI) and were maintained in a relational database. The RHY MIS files in their native form were released to Caliber Associates in order to create the Final Report: *Analysis and Interpretation of New Information Concerning Runaway and Homeless Youth [Delivery Order No. 105-95-1732]*. The file transformations that were required to convert the data files from their relational database format to a flat file structure were accomplished by Caliber Associates. Caliber Associates further cleaned and unduplicated the data files in order to complete the analyses that were required for the Final Report.

In March of 1998 the National Data Archive on Child Abuse and Neglect (NDACAN) obtained the RHY MIS FY 1992 – 1995 data files that were created by Caliber Associates. NDACAN is grateful to Catie Coolbaugh of Caliber Associates for her efforts in preparing the RHY MIS data files that were released to NDACAN. NDACAN would also like to sincerely thank Alice Bettencourt of the Family and Youth Services Bureau for facilitating the release of the RHY MIS data files to the Archive.

### Description of Machine-Readable Files

The Archive distributes the RHY MIS FY 1992-1995 dataset in SAS transport or SPSS portable file format. Other file formats, including data file subsets can be prepared by special request. Please refer to the NDACAN order form or contact the Archive for more information.

The RHY MIS FY 1992-1995 dataset consists of one file. A brief description of the file is provided below. For information regarding the coding of variables, please see Appendix B. For supplementary coding information, please see Appendices C, D, and E. Frequencies and summary statistics are available from the NDACAN web server.

## **RHY92**

The data file contains 93389 observations and 490 variables. The file includes information about the youth's demographic characteristics including sex, ethnicity, and age. Information is included about drug use, marital status, school status, living situations, and employment. Information is included about youth problems, as well as services provided to youths.

In the RHY92 file, the unit of observation is an intake. A unique ID is created by the combination of the following three variables: youth\_id (youth identification number), intake\_d (intake date), and center\_i (center identification number). In each of the above files, observations are sorted in ascending order by the following variables: youth\_id, center\_i, intake\_d.

### **Dropping Variables**

The RHY92 SAS system data file contains 373 MB of data. The SPSS system file contains 107 MB of data. In order to facilitate working with the data files, you may wish create a subset of the RHY92 file which includes only the variables that are relevant to your research. The DROP (or KEEP) command may be used in both SAS and SPSS to accomplish this task.

## Unduplicating the Data Files

The RHY MIS was designed to record every entry to service for every youth in participating RHY MIS agencies. One consequence of this type of data collection is that the data files can include multiple data records for any given youth. Records are uniquely identified by the combination of variables: Youth\_I, Center\_I, and Intake\_D.

Some researchers may be interested in unduplicating the data files so that each youth is represented only once per file. The extent of duplication in the data files is about 4.2%. That is, 4.2% of the records in RHY92 represent multiple youth intakes. Unduplication procedures will vary depending on the information that you wish to retain. For example unduplication may be performed to retain only the first intake date and first agency visited, for each youth. However, be aware that this type of unduplication will not discriminate between records that contain complete demographic information. Furthermore, if one attempts to retain only the first intake date and first agency visited for each youth, then it is possible that some youths will not be represented in the resultant unduplicated subset. This is due to the fact that it is possible for different youths entering different agencies, to be assigned identical ID numbers. When this occurs, only the youth with the first alphabetical center ID will be included in the subset.

The sample programs printed below have been designed to create a data file that retains only the first intake date and agency for each youth.

### **SAS Unduplication Program**

```
/* undup.sas */
libname here 'C:\MYDIR';
data temp;
set here.RHY92;
proc sort data = temp;
by youth_id center_i intake_d;
data temp2;
set temp;
by youth_id center_i intake_d;
if first.youth_id;
data here.RHYUNDUP;
set temp2;
run;
```

### **SPSS Unduplication Program**

```
* undup.sps 1/9/98 This program may be
used to create a data file that retains only
the first intake date and agency for each
youth .
GET FILE='C:\MYDIR\rhy92.sav'.
EXECUTE .
SORT CASES BY
youth_id (A) center_i (A) intake_d (A).
SAVE OUTFILE='C:\MYDIR\rhy92.sav'.
Match files /file='C:\MYDIR\rhy92.sav'
/By youth_id
/FIRST =first.
```



select if (first EQ 1).  
 SAVE OUTFILE  
 ='C:\MYDIR\RHYUNDUP.sav'.

EXECUTE.

**Notes Regarding the Data File**

There are several variables in the RHY92 file that contain out of range values. These out of range values have not been recoded or changed to missing values. Instead, they have been left in their original form so that researchers may interpret them. A list of variables with out of range values is included below.

<b>Variable</b>	<b>Out of Range Value(s)</b>
EIGHT_B	special character
ENGLISH	A, C
MEMP	E, F
NINE_AA – NINE_DD	D
NINE_DA, NINE_DD	special character
REFUGEE	A, B, C, D
SCHL_S	J
SCHOOL_S	J, L
SEMP	E, F
SEVEN_A – SEVEN_J	special characters, A, B, C, D, NO., N N, o
SFM26	8
SIX_C1 – SIX J3	special characters, 0, 8, #, t
SIXFLAG	special character, coded as y/n and Yes/No

**Conducting Analyses with the RHY MIS Data File. Uses of the RHY MIS data**

The RHY data may be used to describe the characteristics of the runaway, homeless, and at-risk youth populations that enter services at RHY grantee agencies in a given year.

The RHY MIS data should not be used to generate estimates of the number of youths that runaway or are homeless each year. The reason for this is that the RHY MIS does not provide a profile of ALL runaway and homeless youth, nor does it provide a representative sample of youth served. It only provides information on those youths that enter services at RHY grantee agencies. The RHY MIS data should not be used to generate estimates of the number of youths that are provided services by a RHY MIS funded program. This is

because some RHY grantee agencies use the RHY MIS as an agency-wide information system and use the software for programs that are not supported with an RHY grant.

### III. SPECIAL CONSIDERATIONS FOR THE DATA FILES

The following sections list some of the complicated analytic issues associated with utilizing the RHY MIS data for research purposes. The list is not meant to be comprehensive, but only to give an idea of the complexity surrounding the data.

#### Intake and Exit Dates

The RHY MIS FY 1992-1995 dataset includes records for youths that entered services between October 1, 1992 and September 30, 1995. The dataset includes entry dates for all youth and exit dates for youth that exited services prior to October 1, 1995. Youths that exited services after September 30, 1995 have missing values for the exit date variable. These missing values are not distinguishable from missing values for youths that exited services during the fiscal year, but did not have their exit dates recorded.

#### Duplicated Data

The RHY MIS was designed to record every entry to service for every youth in participating RHY MIS agencies. One consequence of this type of data collection is that the data files can include multiple data records for any given youth. Researchers must keep in mind the fact that records are NOT uniquely identified by the variable Youth\_I. Records are uniquely identified by the combination of variables: Youth\_I, Center\_I, and Intake\_D. For information on unduplicating the data files, see the section entitled “Unduplicating the Data Files” in Section two of this document.

#### Missing data

There are at least five reasons why a variable may be missing for a given case:

- A Youth may leave the program before complete data can be collected. This problem is mainly relevant to the Basic Center Programs.

- Some of the fields on the RHY MIS forms are optional. Hence, some agencies will not request that information from youths.
- Some of the fields on the RHY MIS forms are not applicable to some youths. When a variable is not filled out, you do not know if the information was not applicable, or whether it was simply not asked.
- Some agencies never fill out some fields even though the fields are not optional. This is often because their program does not provide that type of service, or the field simply doesn't relate to what they do. In these cases you do not know if the field was not applicable or was simply missing information.
- The variables relating to income are often not filled out. When they are filled out, they generally represent the income of the family and not that of the youth.

### **Complicating Issues**

#### **Data Consistency**

There are four interrelated factors that impact data consistency among RHY grantee agencies:

- limited resources
- staff turnover and limited of staff training
- the complex nature of the issues presented by clients being served, including high mobility
- the autonomy given to each agency to develop data recording procedures most appropriate to their needs

Each of these factors, individually and in combination, have contributed to inconsistencies and variance in data quality among the RHY agencies. The RHY MIS was designed to allow individual programs great flexibility. Because the RHY programs may each make use of different information management and assessment, the RHY MIS was developed to collect information from a range of instruments. Also, the RHY MIS was designed to capture not only services

provided by the RHY agencies, but also service information provided by various community providers. Thus, the RHY MIS provides a standardized documentation of varying models of service delivery across agencies. This approach contributes to the quality and quantity of data that has been collected, but it also complicates the interpretation of data across agencies.

### **Youth Identification Numbers**

Ten character alphanumeric youth ID numbers are generated by a RHY MIS encoding algorithm at each agency computer. If two youths have the same last name and birth date, the RHY MIS asks the user if these are two separate youth. If it is the same youth returning to the program, the ID is retained with a new intake date. If they are two different youth, the ID generated for the second youth is different.

It is important to note that runaway youths do not always provide their true names and birth dates. If a different name or birth date is provided by a youth on subsequent entries to an agency shelter, the RHY MIS will provide the youth with a new youth ID, treating the repeat intake as an unduplicated youth record.

### **Babies of Runaway and Homeless Youth**

Some programs provide services to the babies of youth that enter services. Agencies deal with this in different ways. In some of the programs the babies are counted as additional runaways. In other programs they are not.

### **Entry into Multiple RHY Programs**

Some of the agencies operate multiple programs (e.g. a BC and a TLP). These agencies typically want to track the youth served by the different programs and the type of services provided to them by different programs.

The RHY MIS was designed so that one youth may not have an open, active record in more than one program at a time. When a youth exits from one

agency program (i.e., BC), and subsequently enters a different agency program (i.e., TLP), the second admission is treated in the RHY MIS as a new intake with the same youth ID (duplicated youth). This allows grantee agencies to generate reports and analyze data separately for each program being operated.

**The RHY MIS Includes Some Information from Non-RHY Grant Programs.**  
**Uses of the RHY MIS data**

Some RHY grantee agencies have chosen to use the RHY MIS as an agency-wide information system, and utilize the software even for programs that are not supported with an RHY grant. Because of the interest in the social services field to use one system for all of a grantee agency's programs, some of the youth represented in the RHY MIS FY 1992-1995 dataset may not be youth whose support comes specifically from an RHY grant. Thus, it is important that the RHY MIS data not be used to generate yearly estimates of runaway/homeless youth. The RHY data may be used to describe the characteristics of the runaway, homeless, and at-risk youth population.

*Please contact the Archive directly if you have questions or encounter problems in using this dataset. Do not contact the principal investigator. The Archive has made an agreement with the investigator to field all questions related to the study.*

## IV. BIBLIOGRAPHY

The references for this document are divided into two sections: The first section provides the citations for documents produced from the RHY MIS data files. The second section provides the citations for documents pertaining to runaway, homeless and other high risk youth. Please note that this bibliography is not meant to provide an exhaustive or representative list of documents published from, and related to the dataset. It is meant to provide the researcher with a starting point to begin a literature search.

### Documents Published from the RHY MIS

U.S. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families (1995). *Report to the Congress on the Youth Programs of the Family and Youth Services Bureau for Fiscal Year 1995*. Prepared by Johnson, Bassin, and Shaw, Inc. Contract No. 105-92-1709.

U.S. Department of Health and Human Services, Administration for Children and Families, Family and Youth Services Bureau (1997). *Final Report: Analysis and Interpretation of New Information Concerning Runaway and Homeless Youth*. Prepared by Caliber Associates (Subcontractor: Human Service research), Delivery Order No. 105-95-1732.

Note: The Caliber Final Report is only available in electronic version. Refer to the NDACAN web page for downloading information.

### Publications Pertaining to High Risk Youth

Bass, D. (1992). *Helping Vulnerable Youth: Runaway and Homeless Adolescents in the United States*. Washington, D.C.: NASW Press.

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## **APPENDIX A**

### **Data Collection Form**

This form tracks the youth's service history at this agency. Fill in items 3 & 4 each time the youth goes through the intake process for a program at this agency. Items 5-10 should be completed each time the youth exits a program at this agency.

1. Agency ID:				2. Youth ID:			
3. Intake Date	4. Program Category	5. Exit Date	6. Discharge Status	7. Living Situation at Exit	8. Employment Status at Exit	9. School Program at Exit	10. School Status at Exit
INTAKE_D	PROG_CAT	EXIT_DT	DISCHARG	EXIT_SIT	EMPLOY	SCHOOL_P	SCHOOL_S
INTAK_DY		DURATION					
INTAK_MO INTAK_YR							

- (4) PROGRAM CATEGORY**
- a. Short-Term Residential Services
  - b. Long-Term Residential Services (Including TLP)
  - c. Non-Residential Services

- (7) LIVING SITUATION AT EXIT**
- a. Parent/Guardian's Home
  - b. Other Parent's Home
  - c. Relative's Home
  - d. Friend's Home
  - e. Other Adult's Home
  - f. Foster Home
  - g. Group Home
  - h. Transitional Living Program
  - i. Independent Living Program
  - j. Job Corp
  - k. Basic Center
  - l. Homeless Family Center
  - m. Living Independently
  - n. On the Run/Street
  - o. Educational Institute
  - p. Drug Treatment Center
  - q. Residential Treatment
  - r. Mental Hospital
  - s. Correctional Institute /Detention Center
  - t. Other Institution
  - u. Other Temporary Shelter
  - v. Military
  - w. Other
  - x. Do Not Know

- (8) EMPLOYMENT STATUS AT EXIT**
- a. Full Time (Over 35 Hours)
  - b. Part Time
  - c. Not Employed, Looking for Work
  - d. Not Employed
  - e. Never Employed
  - f. Do Not Know / Other

- (9) SCHOOL PROGRAM AT EXIT**
- a. Elem/Middle/High School
  - b. GED
  - c. Vocational
  - d. Special Education
  - e. Alternative/Homebound Program
  - f. Post-Secondary
  - g. College
  - h. Not Applicable
  - i. Do Not Know

- (6) DISCHARGE STATUS**
- a. Residential Services Completed, After Care Planned
  - b. Services Completed, No Referral Made
  - c. Services Completed, Referral Made
  - d. Parent(s) Stopped Services
  - e. Youth Stopped Services
  - f. Family Moved
  - g. Youth Violated Program Rules
  - h. Youth Removed by Protective Agency
  - i. Other

- (10) SCHOOL STATUS AT EXIT**
- a. Attending School Regularly
  - b. Graduated High School
  - c. Completed GED
  - d. Attending School Irregularly/Extended Truancy
  - e. Dropped Out
  - f. Suspended
  - g. Expelled
  - h. School Not in Session
  - i. Do Not Know

PART I: YOUTH DEMOGRAPHICS

For each youth served by the program, complete this form at intake. It records basic information about the youth and his or her household. To complete the form, circle the code in the shaded boxes below that best answers each question. For questions without coded responses, write the appropriate responses in the space provided.

YOUTH CHARACTERISTICS

REGION STATE

1. Agency ID: CENTER\_I

2. Youth ID: YOUTH\_ID

3. Intake Date: / / FY

4. Date of Birth: / / BIRTH\_MO BIRTH\_YR

5. Gender: (Circle one) SEX

AGE  
AGECAT  
UNDER12

- a. Male
b. Female

6. How does the youth describe himself or herself using these census categories? (Circle one)

- a. American Indian or Alaskan Native
b. Asian or Pacific Islander
c. Black, not of Hispanic Origin
d. Hispanic
e. White, not of Hispanic Origin
ETHNIC

7a. Would services be delivered more effectively in a language other than English? (Circle one) Yes No ENGLISH

b. In what language(s) does the youth communicate? (Check all that apply)

- An American Indian or Alaskan Native Language
An Asian or Pacific Island Language
English
Sign
Spanish
Other

REFUGEE

8. Is the youth a refugee? (Circle one) Yes No

9. Marital Status: (Circle one) MARITAL

- a. Single, Never Married
b. Single, Living with Partner
c. Married
d. Other

10. Is the Youth Pregnant? Or, is a female pregnant by youth? (Circle one) PREGNANT

- a. Yes
b. No
c. Do Not Know

11. How many children does the youth have?

NUM\_CHIL CHILDDYN

**PART I: YOUTH DEMOGRAPHICS (continued)**

12. School Program Last Attended: (Circle one) SCHL\_P 13. School Status: (Circle one) SCHL\_S

- a. Elem/Middle/High School
- b. GED
- c. Vocational
- d. Special Education
- e. Alternative/Homebound Program
- f. Post-Secondary
- g. College
- h. Not Applicable
- i. Do Not Know

- a. Attending School Regularly
- b. Graduated High School
- c. Completed GED
- d. Attending School Irregularly/Extended Truancy
- e. Dropped Out
- f. Suspended
- g. Expelled
- h. School Not In Session
- i. Do Not Know

14. Last Grade Completed: (Circle one) GRADE

- |                    |                                  |
|--------------------|----------------------------------|
| a. Grade 5 or less | g. Grade 11                      |
| b. Grade 6         | h. Grade 12                      |
| c. Grade 7         | i. 1-3 Years of College          |
| d. Grade 8         | j. 4 or More Years of College    |
| e. Grade 9         | k. Other Post-Secondary Training |
| f. Grade 10        | l. School Program Not Graded     |

**LIVING SITUATION**

15. Estimate the number of living situations in which youth has resided in the last month:

NUM\_PLAC

16. Last Living Situation of Youth: (Circle one) LST\_LIVE

- |                                |                               |                            |
|--------------------------------|-------------------------------|----------------------------|
| a. Parent/Legal Guardian Home  | i. Independent Living Program | q. Residential Treatment   |
| b. Other Parent's Home         | j. Job Corp                   | r. Mental Hospital         |
| c. Relative's Home             | k. Basic Center               | s. Correctional Institute  |
| d. Friend's Home               | l. Homeless Family Center     | /Detention Center          |
| e. Other Adult's Home          | m. Living Independently       | t. Other Institution       |
| f. Foster Home                 | n. On the Run/Street          | u. Other Temporary Shelter |
| g. Group Home                  | o. Educational Institute      | v.. Military               |
| h. Transitional Living Program | p. Drug Treatment Center      | w. Other                   |
|                                |                               | x. Do Not Know             |

17. Primary Living Situation for Past Year: (Circle one) PRM\_LIVE

- |                                |                               |                            |
|--------------------------------|-------------------------------|----------------------------|
| a. Parent/Legal Guardian Home  | i. Independent Living Program | q. Residential Treatment   |
| b. Other Parent's Home         | j. Job Corp                   | r. Mental Hospital         |
| c. Relative's Home             | k. Basic Center               | s. Correctional Institute  |
| d. Friend's Home               | l. Homeless Family Center     | /Detention Center          |
| e. Other Adult's Home          | m. Living Independently       | t. Other Institution       |
| f. Foster Home                 | n. On the Run/Street          | u. Other Temporary Shelter |
| g. Group Home                  | o. Educational Institute      | v. Military                |
| h. Transitional Living Program | p. Drug Treatment Center      | w. Other                   |
|                                |                               | x. Do Not Know             |

**PART I: YOUTH DEMOGRAPHICS (continued)**

**HOUSEHOLD SITUATION**

18a. Employment Status of the Youth: (Circle one) YEMP

- a. Full Time (Over 35 Hours)
- b. Part Time
- c. Not Employed, Looking for Work
- d. Not Employed
- e. Never Employed
- f. Do Not Know/Other

b. Is the youth's father figure employed? (Circle one) FEMP2

- a. Yes
- b. No
- c. Do Not Know
- d. Not Applicable

c. Is the youth's mother figure employed? (Circle one) MEMP

- a. Yes
- b. No
- c. Do Not Know
- d. Not Applicable

d. Is the youth's spouse/partner employed? (Circle one) SEMP

- a. Yes
- b. No
- c. Do Not Know
- d. Not Applicable

19. Have any of the youth's household members run away or been thrown away? (Circle one) OTHER\_RH

- a. Yes
- b. No
- c. Do Not Know
- d. Not Applicable

20. Youth's Household Members: (Place a number in the box to indicate the quantity of each member type that resides in the youth's household.)

HOUSEHOLD MEMBER TYPE	
FEMALE	MALE
<input type="checkbox"/> Biological Mother	<input type="checkbox"/> Biological Father
<input type="checkbox"/> Adoptive Mother	<input type="checkbox"/> Adoptive Father
<input type="checkbox"/> Step-Mother	<input type="checkbox"/> Step-Father
<input type="checkbox"/> Foster Mother	<input type="checkbox"/> Foster-Father
<input type="checkbox"/> Parent's Partner	<input type="checkbox"/> Parent's Partner
<input type="checkbox"/> Youth's Spouse/Partner	<input type="checkbox"/> Youth's Spouse/Partner
<input type="checkbox"/> Aunt	<input type="checkbox"/> Uncle
<input type="checkbox"/> Grandmother	<input type="checkbox"/> Grandfather
<input type="checkbox"/> Sister	<input type="checkbox"/> Brother
<input type="checkbox"/> Step/Half-Sister	<input type="checkbox"/> Step/Half-Brother
<input type="checkbox"/> Youth's Daughter	<input type="checkbox"/> Youth's Son
<input type="checkbox"/> Other: Relative	<input type="checkbox"/> Other: Relative
<input type="checkbox"/> Other: Non-Relative	<input type="checkbox"/> Other: Non-Relative

**PART I: YOUTH DEMOGRAPHICS (continued)**

21a. Is youth and/or someone in the household receiving unearned income? (Circle One) UN\_INCOM

- |        |       |                |                   |
|--------|-------|----------------|-------------------|
| a. Yes | b. No | c. Do Not Know | d. Not Applicable |
|--------|-------|----------------|-------------------|

b. If yes, what type of unearned income? (Check all that apply)

<p><b>A. Income Maintenance</b></p> <p><input type="checkbox"/> Foster Care</p> <p><input type="checkbox"/> Supplemental Security Income</p> <p><input type="checkbox"/> AFDC</p> <p><input type="checkbox"/> Welfare (not AFDC)</p> <p><input type="checkbox"/> Unemployment Compensation</p> <p><input type="checkbox"/> State Allowances</p> <p><input type="checkbox"/> Other</p>	<p><b>C. Nutritional Assistance</b></p> <p><input type="checkbox"/> Women, Infants, and Children</p> <p><input type="checkbox"/> Food Stamps</p> <p><input type="checkbox"/> Other</p>
<p><b>B. Housing Services</b></p> <p><input type="checkbox"/> Temporary Housing/</p> <p><input type="checkbox"/> Federal Low-Income Housing</p> <p><input type="checkbox"/> Other Low-Income Housing</p> <p><input type="checkbox"/> Other</p>	<p><b>D. Medical Assistance</b></p> <p><input type="checkbox"/> Medicaid</p> <p><input type="checkbox"/> Medicare</p> <p><input type="checkbox"/> State Program for Disease/Disabilities</p> <p><input type="checkbox"/> Other</p>
<p><b>E. COMMUNITY CENTER</b></p> <p><input type="checkbox"/> Religious Affiliation</p> <p><input type="checkbox"/> Other</p>	

22. Who are the youth's legal guardians? (Circle one or two, as applicable)

BIOMOM  
ADOPTMOM  
BIORENTS  
AGENCYGD  
BIOGUARD  
GARD3  
NEWGUARD

FEMALE GUARDIAN	MALE GUARDIAN	OTHER
a. Biological Mother <u>BIODAD</u>	b. Biological Father	u. Public Agency
b. Adoptive Mother <u>ADOPTDAD</u>	c. Adoptive Father	v. Self
c. Step-Mother	m. Step-Father	w. Do Not Know
d. Foster Mother	n. Foster Father	
e. Parent's Partner	o. Parent's Partner	
f. Youth's Spouse/Partner	p. Youth's Spouse/Partner	
g. Aunt	q. Uncle	
h. Grandmother	r. Grandfather	
i. Sister	s. Brother	
j. Other	t. Other	

**REFERRAL**

23. Who referred the youth to the agency? (Circle One) SOURCE

a. Self Referral	j. Juvenile Justice
b. Parents/Legal Guardian	k. School Staff
c. Foster Parent	l. Street Outreach
d. Other Relative	m. Other Agency Program
e. Other Youth	n. Other Youth Services Agency
f. Other Adult	o. Other Organization
g. Child Welfare/CPS	p. National Switchboard
h. Safe Place	q. Other Hotline
i. Law Enforcement/Police	r. Do Not Know

**PART I: YOUTH DEMOGRAPHICS (continued)**

**REFERRAL (continued):**

24. Where did the youth hear about the agency ? (Check all that apply)

<input type="checkbox"/> Referral Source (Item 23)	<input type="checkbox"/> Street Outreach
<input type="checkbox"/> Public Media	<input type="checkbox"/> Public Presentations
<input type="checkbox"/> Other Youth	<input type="checkbox"/> Other Forms of Promotional Materials
<input type="checkbox"/> School	<input type="checkbox"/> Other

**RUNAWAY AND HOMELESS YOUTH STATUS:**

25. Status of Youth at Intake: (Circle one) RHY\_STAT

a. At Home	e. Emancipated
b. Runaway	f. Juvenile Justice Placement
c. Throwaway	g. Child Welfare Placement
d. Homeless	h. Other

**NOTE:** If the youth is not currently runaway, throwaway, or homeless, skip to Question 29.

26. How long has the youth been a runaway, throwaway or homeless? (Circle One) DAY\_AWAY

a. Overnight	f. 15-21 days
b. 1 day	g. 22-28 days
c. 2 - 4 days	h. More than 28 days
d. 5 - 7 days	i. Do Not Know
e. 8 - 14 days	j. Not Applicable

NUM\_AWAY

27. Distance of Household from Program: (Circle one) DISTANCE

a. Less than 1 Mile	e. 51-100 Miles
b. 1 - 10 Miles	f. More than 100 Miles
c. 11- 20 Miles	g. Not Applicable
d. 21-50 Miles	

28. Location of Household Relative to the Program: (Circle one) LOCATION

a. In Same Community	d. In Different State
b. In Same Metropolitan Area	e. In a Different Country
c. Elsewhere in Same State	f. Not Applicable

29. Previous Runaway Information: EVER\_RAN

a. How many times has the youth run away?  NUM\_RUN

b. Of these runaway episodes, how many resulted in receipt of services from this agency?  NUM\_CENT

c. Of these runaway episodes, how many resulted in receipt of services from another agency?  NUM\_OTHE

**PART II: OPTIONAL CONTACT INFORMATION**

This form is provided to allow service providers to record important indentifying information and contacts for the youth being served. This information is optional and will NOT be included with the quarterly data submission.

Agency ID:

Youth ID:

Intake Date:

**YOUTH'S INFORMATION**

1. Youth's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Who's Home is This? \_\_\_\_\_

City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone No. \_\_\_\_\_

**SCHOOL INFORMATION**

2. School Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone No. \_\_\_\_\_ Fax No.: \_\_\_\_\_

**OPTIONAL IDENTIFICATION NUMBERS**

3. Case No. \_\_\_\_\_

4. Social Security No.: \_\_\_\_\_

5. Medicaid No.: \_\_\_\_\_

6. CPS No.: \_\_\_\_\_

7. Other (specify): \_\_\_\_\_

# \_\_\_\_\_ # \_\_\_\_\_

**HEALTH INSURANCE INFORMATION**

8. Insurance Company: \_\_\_\_\_

Insurance No.: \_\_\_\_\_

Group No. \_\_\_\_\_

Telephone No: \_\_\_\_\_



**PART II: OPTIONAL CONTACT INFORMATION (Continued)**

9. Note: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**CONTACT INFORMATION**

RELATIONSHIP OF CONTACT TO YOUTH		
a. Parent	e. Legal Guardian	i. School Counselor
b. Grandparent	f. Probation Officer	j. Employer
c. Sibling	g. Social Worker	k. Other
d. Other Adult Relative	h. Mental Health Therapist	

10. Contacts:

a. Relation : (Enter code)

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

County: \_\_\_\_\_ Telephone No. \_\_\_\_\_

b. Relation: (Enter code)

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

County: \_\_\_\_\_ Telephone No. \_\_\_\_\_

c. Relation: (Enter code)

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

County: \_\_\_\_\_ Telephone No. \_\_\_\_\_

**PART III: YOUTH'S PROBLEMS**

This form is designed to record information about problems facing runaway and homeless youth. The form should be filled out by a staff member at intake after meeting with the youth and possibly the family. The form should be reviewed and updated at exit or at three month intervals beginning with the intake date, whichever comes first. This review and update will assure that any additional insight into the youth's problems gained during his or her services will be recorded.

1. Agency ID:  2. Youth ID:   
 3. Intake Date:  /  /

4. Problems Experienced by Youth: (Check all that apply) NOTE: A response under each category is not necessary. The responses should reflect the youth's and staff members' perceptions. CLUSTER

<p><b>A. HOUSEHOLD DYNAMICS:</b> <u>DYNAMICS</u></p> <p><input type="checkbox"/> Relationship with Father Figure PA01</p> <p><input type="checkbox"/> Relationship with Mother Figure PA02</p> <p><input type="checkbox"/> Relationship with Parent's Partner PA03</p> <p><input type="checkbox"/> Relationship between Parent Figures PA04</p> <p><input type="checkbox"/> Relationship with Spouse/Partner PA05</p> <p><input type="checkbox"/> Relationship with Foster/Group Home Member PA06</p> <p><input type="checkbox"/> Relationship with Other Household Member PA07</p> <p><input type="checkbox"/> No Parental Figure PA08</p> <p><input type="checkbox"/> Youth Unsupervised PA09</p> <p><input type="checkbox"/> Divorced Family PA10</p> <p><input type="checkbox"/> Blended Family PA11</p> <p><input type="checkbox"/> Youth Wants to Live with Other Parent PA12</p> <p><input type="checkbox"/> Other PA13</p>	<p><b>D. PSYCHOLOGICAL ISSUES:</b> <u>PSYCHO</u></p> <p><input type="checkbox"/> Youth Depressed PD01</p> <p><input type="checkbox"/> Youth Suicidal PD02</p> <p><input type="checkbox"/> Poor Self Image PD03</p> <p><input type="checkbox"/> Youth's Sexuality/Behavior PD04</p> <p><input type="checkbox"/> Youth's Sexual Orientation PD05</p> <p><input type="checkbox"/> Parent Figure's Sexuality/Behavior PD06</p> <p><input type="checkbox"/> Parent Figure's Sexual Orientation PD07</p> <p><input type="checkbox"/> Searching for Biological Parent PD08</p> <p><input type="checkbox"/> Racial/Ethnic Identity PD09</p> <p><input type="checkbox"/> Loss and Grief Issues of Youth PD10</p> <p><input type="checkbox"/> Abandonment PD11</p> <p><input type="checkbox"/> Suicidal Friend(s) of Youth PD12</p> <p><input type="checkbox"/> Suicidal Family Member(s) PD13</p> <p><input type="checkbox"/> Witnessed Violent Crime PD14</p> <p><input type="checkbox"/> Crime Victim PD15</p> <p><input type="checkbox"/> Mental Health Problem of Family Member PD16</p> <p><input type="checkbox"/> Other PD17</p>
<p><b>B. HOUSING ISSUES:</b> <u>HOUSING</u></p> <p><input type="checkbox"/> Youth Homeless PB01</p> <p><input type="checkbox"/> Family Homeless PB02</p> <p><input type="checkbox"/> Youth Rejected from Homeless Shelter PB03</p> <p><input type="checkbox"/> Custody Change PB04</p> <p><input type="checkbox"/> Chose to Leave Previous Residence PB05</p> <p><input type="checkbox"/> Forced to Leave Previous Residence PB06</p> <p><input type="checkbox"/> Legally Evicted from Previous Residence PB07</p> <p><input type="checkbox"/> Other PB08</p>	<p><b>E. HEALTH ISSUES:</b> <u>HEALTH</u></p> <p><input type="checkbox"/> Youth Has/Suspects Sexually Transmitted Disease PE01</p> <p><input type="checkbox"/> Youth Has/Suspects HIV/AIDS Infection PE02</p> <p><input type="checkbox"/> Family Planning/Pregnancy PE03</p> <p><input type="checkbox"/> Eating Disorder PE04</p> <p><input type="checkbox"/> Youth Physically Challenged PE05</p> <p><input type="checkbox"/> Youth Not Appropriately Using Medication PE06</p> <p><input type="checkbox"/> Health Problem of Family Member PE07</p> <p><input type="checkbox"/> Other Chronic Health Problem of Youth PE08</p> <p><input type="checkbox"/> Other Current Health Problem of Youth PE09</p>
<p><b>C. SCHOOL/EDUCATION ISSUES:</b> <u>SCHOOL</u></p> <p><input type="checkbox"/> Bad Grades PC01</p> <p><input type="checkbox"/> Illiteracy PC02</p> <p><input type="checkbox"/> Learning Disability PC03</p> <p><input type="checkbox"/> Cannot Get Along with Teachers PC04</p> <p><input type="checkbox"/> Poor School Attendance/Truancy PC05</p> <p><input type="checkbox"/> Dropped Out PC06</p> <p><input type="checkbox"/> Suspended PC07</p> <p><input type="checkbox"/> Expelled PC08</p> <p><input type="checkbox"/> Other PC09</p>	<p><b>F. YOUTH HAVING TROUBLE GETTING SERVICES:</b> <u>SERV/TROB</u></p> <p><input type="checkbox"/> Child Protective Services PF01</p> <p><input type="checkbox"/> Social Services PF02</p> <p><input type="checkbox"/> Alcohol and Other Drug Treatment Program PF03</p> <p><input type="checkbox"/> Day Care PF04</p> <p><input type="checkbox"/> Education Program PF05</p> <p><input type="checkbox"/> Other PF06</p>

**PART III: YOUTH'S PROBLEMS (continued)**

**4. Problems Experienced by Youth (continued): (Check all that apply) ANYABUSE ANYPERP**

<p><b>G. PHYSICAL ABUSE/ASSAULT: PHYSICAL</b></p> <p><input type="checkbox"/> By Father Figure PG01</p> <p><input type="checkbox"/> By Mother Figure PG02</p> <p><input type="checkbox"/> By Parent's Partner PG03</p> <p><input type="checkbox"/> By Spouse/Partner PG04</p> <p><input type="checkbox"/> By Foster/Group Home Member PG05</p> <p><input type="checkbox"/> By Other Household Member PG06</p> <p><input type="checkbox"/> By Other Non-Household Member PG07</p> <p><input type="checkbox"/> Domestic Violence PG08</p> <p><input type="checkbox"/> Youth Assaulting Other PG09 <u>PERPP</u></p>	<p><b>K. SOCIALIZATION ISSUES: SOCIALIZ</b></p> <p><input type="checkbox"/> Lack of Social Skills PK01</p> <p><input type="checkbox"/> Problem with Peers PK02</p> <p><input type="checkbox"/> Violent Youth Behavior PK03</p> <p><input type="checkbox"/> Gang Involvement by Youth PK04</p> <p><input type="checkbox"/> Cult Involvement PK05</p> <p><input type="checkbox"/> Survival Sex PK06</p> <p><input type="checkbox"/> Prostitution PK07</p> <p><input type="checkbox"/> Selling Drugs PK08</p> <p><input type="checkbox"/> Other PK09</p>
<p><b>H. SEXUAL ABUSE/ASSAULT: SEXUAL</b></p> <p><input type="checkbox"/> By Father Figure PH01</p> <p><input type="checkbox"/> By Mother Figure PH02</p> <p><input type="checkbox"/> By Parent's Partner PH03</p> <p><input type="checkbox"/> By Spouse/Partner PH04</p> <p><input type="checkbox"/> By Foster/Group Home Member PH05</p> <p><input type="checkbox"/> By Other Household Member PH06</p> <p><input type="checkbox"/> By Other Non-Household Member PH07</p> <p><input type="checkbox"/> Youth Assaulting Other PH08</p>	<p><b>L. NEGLECT: NEGLECT</b></p> <p><input type="checkbox"/> By Father Figure PL01</p> <p><input type="checkbox"/> By Mother Figure PL02 <u>PERPN</u></p> <p><input type="checkbox"/> By Parent's Partner PL03</p> <p><input type="checkbox"/> By Spouse/Partner PL04</p> <p><input type="checkbox"/> By Foster/Group Home Member PL05</p> <p><input type="checkbox"/> By Other Household Member PL06</p> <p><input type="checkbox"/> Youth Neglecting Child PL07</p> <p><input type="checkbox"/> Youth Neglecting Spouse/Partner PL08</p>
<p><b>I. EMOTIONAL ABUSE: EMOTION</b></p> <p><input type="checkbox"/> By Father Figure PI01</p> <p><input type="checkbox"/> By Mother Figure PI02</p> <p><input type="checkbox"/> By Parent's Partner PI03</p> <p><input type="checkbox"/> By Spouse/Partner PI04</p> <p><input type="checkbox"/> By Foster/Group Home Member PI05</p> <p><input type="checkbox"/> By Other Household Member PI06</p> <p><input type="checkbox"/> By Other Non-Household Member PI07</p> <p><input type="checkbox"/> Youth Abusing Household Member PI08 <u>PERPE</u></p>	<p><b>M. INVOLVEMENT WITH JUSTICE SYSTEM: JUSTICE</b></p> <p><input type="checkbox"/> Youth Charged with Misdemeanor PM01</p> <p><input type="checkbox"/> Youth Charged with Felony PM02</p> <p><input type="checkbox"/> Alcohol or Other Drug Possession/Distribution (Youth) PM03</p> <p><input type="checkbox"/> Drug Possession/Distribution (Parent Figure) PM04</p> <p><input type="checkbox"/> Youth on Probation/Suspended Sentence PM05</p> <p><input type="checkbox"/> Youth on Parole PM06</p> <p><input type="checkbox"/> Youth in Need of Supervision PM07</p> <p><input type="checkbox"/> Household Member PM08</p> <p><input type="checkbox"/> Spouse/Partner PM09</p> <p><input type="checkbox"/> Immigration/Naturalization PM10</p> <p><input type="checkbox"/> Other PM11</p>
<p><b>J. ALCOHOL AND OTHER DRUG ABUSE: AOD</b></p> <p><input type="checkbox"/> Substance Abuse by Household Member PJ01</p> <p><input type="checkbox"/> Substance Abuse by Spouse/Partner PJ02</p> <p><input type="checkbox"/> Substance Abuse by Youth PJ03 <u>FAMABUSE</u></p>	<p><b>N. UNEMPLOYMENT: UNEMPLOY</b></p> <p><input type="checkbox"/> Father Figure PN01</p> <p><input type="checkbox"/> Mother Figure PN02</p> <p><input type="checkbox"/> Parent's Partner PN03</p> <p><input type="checkbox"/> Spouse/Partner PN04</p> <p><input type="checkbox"/> Youth Unemployment PN05</p>

- 5a. Has the youth contemplated suicide? (Circle one) Yes    No    FIVE\_A
- If no, skip to item 6.
- b. Estimate the number of times youth has attempted suicide (Enter zero if none):  FIVE\_B
- c. Number of times the youth has been hospitalized after suicide attempts (Enter zero if none):  FIVE\_C

**PART IV: ATOD INFORMATION**

Complete this form at intake for each youth served that has indicated a problem with alcohol, tobacco, or other drugs.

1. Agency ID:  2. Youth ID:   
 3. Intake Date:  /  /

4. On How Many Occasions (if any) Has The Youth: ANYSUBST

- TOBACTYP
- TOBACC06
- TOBACCO
- SMOKE
- SMOKE6
- CHEW
- CHEW6
- ALCOHOL6
- ALCOHOL
- BEERWINE6
- BEERWINE
- LIQUOR
- LIQUOR6
- BINGE
- BINGE6
- INHALE
- INHALE6
- COUNTER
- COUNTER6

	NUMBER OF OCCASIONS					AGE AT FIRST USE			
	Never Tried	1-2	3-9	10-29	30+	11 or younger	12-14	15-17	18 or older
<b>A) Smoked Cigarettes</b>									
1) In the youth's lifetime: SIX_A1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) During the past 6 months: SIX_A2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
<b>B) Used Smokeless Tobacco (chewing tobacco, snuff)</b>									
1) In the youth's lifetime: SIX_B1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) During the past 6 months: SIX_B2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
<b>C) Had Beer, Wine (other than for religious use) or Wine Coolers</b>									
1) In the youth's lifetime: SIX_C1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) During the past 6 months: SIX_C2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SIX_C3			
<b>D) Had Liquor (such as rum, vodka, or whiskey)</b>									
1) In the youth's lifetime: SIX_D1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) During the past 6 months: SIX_D2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SIX_D3			
<b>E) Had Five or More Servings of any Alcohol on the Same Occasion</b>									
1) In the youth's lifetime: SIX_E1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) During the past 6 months: SIX_E2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SIX_E3			
<b>F) Used Inhalants (glue, paint, rush, cleaning fluids, gasoline)</b>									
1) In the youth's lifetime: SIX_F1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) During the past 6 months: SIX_F2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SIX_F3			
<b>G) Used Over-the-Counter Drugs (diet pills, No-Doz, caffeine) Above the Recommended Dosage</b>									
1) In the youth's lifetime: SIX_G1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) During the past 6 months: SIX_G2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SIX_G3			

**PART IV: ATOD INFORMATION (continued)**

Has the youth ever used illicit drugs? (Circle one) Yes No SIXFLAG  
 If no, skip to question 7.

5. On How Many Occasions (if any) Has The Youth:

POT  
POT6  
COCAINE  
COCAINE6  
CRACK  
CRACK6

	NUMBER OF OCCASIONS					AGE AT FIRST USE			
	Never Tried	1-2	3-9	10-29	30+	11 or younger	12-14	15-17	18 or older
H) Used Marijuana/Hashish									
1) In the youth's lifetime: SIX_H1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) During the past 6 months: SIX_H2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SIX_H3			
I) Used Cocaine (exclude use of Crack)									
1) In the youth's lifetime: SIX_I1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) During the past 6 months: SIX_I2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SIX_I3			
J) Smoked Crack Cocaine (rock)									
1) In the youth's lifetime: SIX_J1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2) During the past 6 months: SIX_J2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	SIX_J3			

6. Has the Youth Ever:

A) Taken Steroids SEVEN_A	Yes <input type="checkbox"/>	No <input type="checkbox"/>	F) Used Two or More Drugs on the Same Occasion (exclude alcohol and tobacco) SEVEN_F	Yes <input type="checkbox"/>	No <input type="checkbox"/>
B) Taken Stimulants (such as prescription diet pills, uppers, speed, ice) SEVEN_B	<input type="checkbox"/>	<input type="checkbox"/>	G) Used Alcohol and Marijuana on the Same Occasion SEVEN_G	<input type="checkbox"/>	<input type="checkbox"/>
C) Taken Depressants (such as valium, quaaludes) SEVEN_C	<input type="checkbox"/>	<input type="checkbox"/>	H) Used a Needle to Inject Cocaine, Heroin, or Other Illicit Drug SEVEN_H	<input type="checkbox"/>	<input type="checkbox"/>
D) Taken Narcotics (such as heroin (smack), codeine, morphine, dilaudids) SEVEN_D	<input type="checkbox"/>	<input type="checkbox"/>			
E) Taken Hallucinogens (such as PCP (angel dust), LSD (acid), mescaline, mushrooms, ecstasy) SEVEN_E	<input type="checkbox"/>	<input type="checkbox"/>			

7. Has the Youth Ever Been Asked to Sell Drugs? (circle one) Yes No SEVEN\_I

8. Has the Youth Ever Sold Drugs? (circle one) Yes No SEVEN\_J

**PART IV: ATOD INFORMATION (continued)**

**9. How Was the Youth First Influenced to Use:**

		Never Tried	Parent Figures	Other Household Member	Friends	Through Selling It	Other
A) Alcohol	EIGHT_A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
B) Drugs	EIGHT_B	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**10. Household Members' Substance Use:**

		Drug Use			Alcohol Abuse			
		Yes	No	N/A	Yes	No	N/A	
A) Mother Figure	NINE_AD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	NINE_AA
B) Father Figure	NINE_BD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	NINE_BA
C) Spouse/Partner	NINE_CD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	NINE_CA
D) Other (Significant Person)	NINE_DD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	NINE_DA

**PART V: SERVICES TO YOUTH**

Part V, Services to Youth, records information on services provided to youth either directly or through referral while the youth is on active caseload. One form will be completed for each program in which the youth has been admitted. A staff member should complete this form at the youth's exit from each program.

1. Agency ID:

2. Youth ID:

3. Intake Date:

4. Other Individuals Participating in Services: Place a number in the box to indicate the quantity of each person participating in services.

<u>FEMALE</u>	<u>MALE</u>
<input type="checkbox"/> Biological Mother SFM01	<input type="checkbox"/> Biological Father SFM14
<input type="checkbox"/> Adoptive Mother SFM02	<input type="checkbox"/> Adoptive Father SFM15
<input type="checkbox"/> Step-Mother SFM03	<input type="checkbox"/> Step-Father SFM16
<input type="checkbox"/> Foster Mother SFM04	<input type="checkbox"/> Foster Father SFM17
<input type="checkbox"/> Parent's Partner SFM05	<input type="checkbox"/> Parent's Partner SFM18
<input type="checkbox"/> Youth's Spouse/Partner SFM06	<input type="checkbox"/> Youth's Spouse/Partner SFM19
<input type="checkbox"/> Aunt SFM07	<input type="checkbox"/> Uncle SFM20
<input type="checkbox"/> Grandmother SFM08	<input type="checkbox"/> Grandfather SFM21
<input type="checkbox"/> Sister SFM09	<input type="checkbox"/> Brother SFM22
<input type="checkbox"/> Step/Half-Sister SFM10	<input type="checkbox"/> Step/Half-Brother SFM23
<input type="checkbox"/> Youth's Daughter SFM11	<input type="checkbox"/> Youth's Son SFM24
<input type="checkbox"/> Other Relative SFM12	<input type="checkbox"/> Other Relative SFM25
<input type="checkbox"/> Non-Relative SFM13	<input type="checkbox"/> Non-Relative SFM26

5. Primary Method of Payment for Services: (Circle one) PAYMENT

- a. No Charge
- b. Youth/Youth's Family
- c. Social Welfare Agency
- d. Juvenile Justice Agency
- e. Other

**PART V: SERVICES TO YOUTH (continued)**

6. Services Received by Youth: Indicate all that apply. Leave blank if service was not received by the youth. It is not necessary to provide a response under each category.

AVERAGE HOURS	
a.	Equal to 1 Hour or Less
b.	More Than 1, Less than 4 Hours
c.	Equal to 4 Hours or More

THERAPY

**A. Counseling/Therapy**

			This Agency	Coordinating Agency	Referral Made, Services Provided	Referral Made, Status Unknown	Other	Enter Estimated Average Hours Per Week
Crisis Intervention	SA01	A01	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Individual (Youth)	SA02	A02	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Individual (Parent)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Family	SA03	A03	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Home-Based	SA04	A04	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Group (Youth)	SA05	A05	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Group (Parent)	SA06	A06	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Outdoor Adventure/Challenge	SA07	A07	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Peer (Youth)			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Expressive/Art	SA08	A08	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Other	SA09	A09	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
	SA10	A10	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
	SA11	A11	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

**B. Youth Education**

YOUTHED

			This Agency	Coordinating Agency	Referral Made, Services Provided	Referral Made, Status Unknown	Other	Enter Estimated Average Hours Per Week
Assessment	SB01	B01	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Tutoring	SB02	B02	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Alternative Education	SB03	B03	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
GED Prep/Test	SB04	B04	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Vocational Training	SB05	B05	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____
Other	SB06	B06	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____

**C. Life Skills Training: Estimated Average Hours Per Week:**

LIFESKIL

LIFE FRQ

			This Agency		Coordinating Agency	Referral Made, Services Provided	Referral Made, Status Unknown	Other
			Formal	Informal				
Communication Skills	SC01	C01	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Assertiveness	SC02	C02	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Conflict Resolution	SC03	C03	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Goal Setting/Life Planning	SC04	C04	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Budgeting	SC05	C05	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employment	SC06	C06	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Consumerism	SC07	C07	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hygiene	SC08	C08	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sex Education	SC09	C09	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parenting Skills	SC10	C10	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Nutrition	SC11	C11	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Leisure Skills	SC12	C12	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Household Management	SC13	C13	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	SC14	C14	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



**PART V: SERVICES TO YOUTH (continued)**

6. Services Received by Youth (Continued): Hours of service will not be recorded for the following services because they are of an ongoing, less measurable nature.

		This Agency	Coordinating Agency	Referral Made, Services Provided	Referral Made, Status Unknown	Other
<b>D. Hotline <u>HOTLINE</u></b>						
Crisis Counseling	SD01 D01	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Information and Referral	SD02 D02	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	SD03 D03	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>E. Basic Support Services <u>BASICSUP</u></b>						
Food	SE01 E01	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Clothing	SE02 E02	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emergency Shelter	SE03 E03	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Transportation	SE04 E04	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	SE05 E05	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>F. Health Care <u>HEALTHSE</u></b>						
General Medical	SF01 F01	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dental	SF02 F02	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Psychological or Psychiatric	SF03 F03	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Substance Abuse Assessment	SF04 F04	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alcohol and Other Drug Treatment	SF05 F05	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Eating Disorder	SF06 F06	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gynecological	SF07 F07	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pre-Natal	SF08 F08	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HIV/AIDS Related	SF09 F09	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	SF10 F10	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>G. Alcohol and Other Drug Prevention <u>AODPREV</u></b>						
Education/Information	SG01 G01	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Positive Peer Leadership	SG02 G02	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alternative Activities/Recreation	SG03 G03	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Refusal Skills	SG04 G04	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Substance Abuse Screening	SG05 G05	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	SG06 G06	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**PART V: SERVICES TO YOUTH (continued)**

6. Services Received by Youth (Continued): Hours of service will not be recorded for the following services because they are of an ongoing, less measurable nature.

			This Agency	Coordinating Agency	Referral Made, Services Provided	Referral Made, Status Unknown	Other
<u>ALTERHOUSING</u>							
<b>H. Alternative Housing</b>							
Other Youth Shelter	SH01	H01	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Foster Home	SH02	H02	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Host Home	SH03	H03	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Group Home	SH04	H04	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Transitional Living Program	SH05	H05	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Independent Living Program	SH06	H06	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Job Corps	SH07	H07	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Residential Treatment	SH08	H08	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	SH09	H09	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>I. Legal Services</b> <u>LEGALSERVICES</u>							
To the Youth	SI01	I01	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
To the Family	SI02	I02	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>RECREATION</u>							
<b>J. Recreational Activities</b>							
Organized Sports Activities	SJ01	J01	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Arts and Crafts	SJ02	J02	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Field Trips	SJ03	J03	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	SJ04	J04	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>SUPPORT GROUPS</u>							
<b>K. Support Groups</b>							
Alcoholics Anonymous	SK01	K01	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Narcotics/Cocaine Anonymous	SK02	K02	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alateen	SK03	K03	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alanon	SK04	K04	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	SK05	K05	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<u>EMPLOYMENT</u>							
<b>L. Employment</b>							
Career Counseling	SL01	L01	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Job Training	SL02	L02	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Employment Referral/Placement	SL03	L03	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Job Corps Non-Residential	SL04	L04	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	SL05	L05	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>M. AREA SERVICES</b>							
Outreach Services	M01		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## **APPENDIX B**

### **Coding Information for RHY92**

## Coding Information for RHY92

This appendix contains coding information for all of the variables in RHY92. The variables are presented in the order in which they appear in the data file. Please note that the information listed for each variable includes a Format statement. If the format begins with the letter “F” then the variable is numeric. If the format begins with the letter “A” then the variable is a string. The numbers in the format refer to the number of digits and decimal places allowed in the variable.

A value of ‘8’ (labeled ‘mismatched’) for the problems and services variables refers to the fact that a general problem (or service) category variable was coded as a ‘no’, however, a corresponding sub-variable was marked as being an existing problem or delivered service. For example, if the variable THERAPY was coded as ‘no’, but the youth was indeed provided group therapy (a sub variable of THERAPY), then the variable SA06 would be coded as ‘8’, for ‘mismatched’.

REGION	Region of the country Format: F2 Value      Label	1
	1      New England	
	2      NY PR VI etc	
	3      PA MD DC etc	
	4      FL GA KY etc	
	5      IL WI MN etc	
	6      TX LA NM etc	
	7      KS MO IA etc	
	8      UT SD MT etc	
	9      CA AZ NV	
	10     AK WA ID	
CENTER_I	Unique Agency ID Number Format: A8	2
YOUTH_ID	Unique Youth ID Number Format: A10	3
INTAKE_D	Date youth enters the program, MMDDYY Format: DATE9	5
SA01	Crisis Intervention SERVICE Format: F10 Missing Values: 8  Value      Label	6
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	

SA02	Individual (Youth) Format: F10 Missing Values: 8 Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	7
SA03	Individual (Parent) Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	8
SA04	Family Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	9
SA05	Home-Based Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	10
SA06	Group (Youth) Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	11
SA07	Group (Parent) Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	12

SA08	Outdoor Adventure/Challenge Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	13
SA09	Peer (Youth) Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	14
SA10	Expressive/Art Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	15
SA11	Other Counseling Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	16
SB01	Assessment Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	17

SB02	Tutoring Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	18
SB03	Alternative Education Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	19
SB04	GED Prep/Test Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	20
SB05	Vocational Training Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	21
SB06	Other Educational Service Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	22

SC01	Communication Skills Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	23
SC02	Assertiveness Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	24
SC03	Conflict Resolution Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	25
SC04	Goal Setting/Life Planning Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	26
SC05	Budgeting Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	27



SC06	Employment Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	28
SC07	Consumerism Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	29
SC08	Hygiene Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	30
SC09	Sex Education Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	31
SC10	Parenting Skills Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	32

SC11	Nutrition Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	33
SC12	Leisure Skills Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	34
SC13	Household Management Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	35
SC14	Other Life Skills Services Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	36
SD01	Crisis Counseling Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	37

SD02	Information and Referral Services Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	38
SD03	Other Hotline Services Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	39
SE01	Food Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	40
SE02	Clothing Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	41
SE03	Emergency Shelter Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	42

SE04	Transportation Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	43
SE05	Other Basic Support Service Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	44
SF01	General Medical Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	45
SF02	Dental Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	46
SF03	Psychological or Psychiatric Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	47

SF04	Substance Abuse Assessment Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	48
SF05	Alcohol/Drug Treatment Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	49
SF06	Eating Disorder Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	50
SF07	Gynecological Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	51
SF08	Pre-Natal Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	52

SF09	HIV/AIDS Related Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	53
SF10	Other Health Care Service Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	54
SG01	Education/Information Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	55
SG02	Positive Peer Leadership Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	56
SG03	Alternative Activities/Recreation Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	57

SG04	Refusal Skills Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	58
SG05	Substance Abuse Screening Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	59
SG06	Other ATOD Service Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	60
SH01	Other Youth Shelter Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	61
SH02	Foster Home Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	62

SH03	Host Home Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	63
SH04	Group Home Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	64
SH05	Transitional Living Program Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	65
SH06	Independant Living Program Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	66
SH07	Job Corps Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	67



SH08	Residential Treatment Format: F10 Missing Values: 8	68
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M   Mismatched	
SH09	Other Alternative Housing Service Format: F10 Missing Values: 8	69
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M   Mismatched	
SI01	Legal Services To the Youth Format: F10 Missing Values: 8	70
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M   Mismatched	
SI02	Legal Services To the Family Format: F10 Missing Values: 8	71
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M   Mismatched	
SJ01	Organized Sports Activities Format: F10 Missing Values: 8	72
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M   Mismatched	

SJ02	Arts and Crafts Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	73
SJ03	Field Trips Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	74
SJ04	Other Recreational Services Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	75
SK01	Alcoholics Anonymous Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	76
SK02	Narcotics/Cocaine Anonymous Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	77

SK03	Alateen Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	78
SK04	Alanon Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	79
SK05	Other Support Groups Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	80
SL01	Career Counseling Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	81
SL02	Job Training Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	82

SL03	Employment Referral/Placement Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	83
SL04	Job Corps Non-Residential Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	84
SL05	Other Employment Service Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	85
SFM01	BIOLOGICAL MOTHER Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	86
SFM02	ADOPTIVE MOTHER Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	87

SFM03	STEP-MOTHER Format: F10 Missing Values: 8  Value      Label 0      Not Checked 1      Checked 8 M    Mismatched	88
SFM04	FOSTER MOTHER Format: F10 Missing Values: 8  Value      Label 0      Not Checked 1      Checked 8 M    Mismatched	89
SFM05	FEMALE PARTNER Format: F10 Missing Values: 8  Value      Label 0      Not Checked 1      Checked 8 M    Mismatched	90
SFM06	YOUTH FEMALE PARTNER Format: F10 Missing Values: 8  Value      Label 0      Not Checked 1      Checked 8 M    Mismatched	91
SFM07	AUNT Format: F10 Missing Values: 8  Value      Label 0      Not Checked 1      Checked 8 M    Mismatched	92

SFM08	GRANDMOTHER Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	93
SFM09	SISTER Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	94
SFM10	STEP/HALF SISTER Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	95
SFM11	YOUTH'S DAUGHTER Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	96
SFM12	OTHER FEMALE RELATIVE Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	97

SFM13	FEMALE NON-RELATIVE Format: F10 Missing Values: 8	98
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	
SFM14	BIOLOGICAL FATHER Format: F10 Missing Values: 8	99
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	
SFM15	ADOPTIVE FATHER Format: F10 Missing Values: 8	100
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	
SFM16	STEP-FATHER Format: F10 Missing Values: 8	101
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	
SFM17	FOSTER FATHER Format: F10 Missing Values: 8	102
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	

SFM18	MALE PARTNER Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	103
SFM19	YOUTH MALE PARTNER Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	104
SFM20	UNCLE Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	105
SFM21	GRANDFATHER Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	106
SFM22	BROTHER Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	107



SFM23	STEP/HALF BROTHER Format: F10 Missing Values: 8	108
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	
SFM24	YOUTH'S SON Format: F10 Missing Values: 8	109
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	
SFM25	OTHER MALE RELATIVE Format: F10 Missing Values: 8	110
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	
SFM26	MALE NON-RELATIVE Format: F10	111
FIVE_A	CONTEMPLATED SUICIDE Format: A3 Missing Values: '0', '8'	112
	Value      Label	
	0    M    BLANK	
	8    M    MISMATCHED	
FIVE_B	NUMBER OF SUICIDE ATTEMPTS Format: F2 Missing Values: -1	113
FIVE_C	NUMBER OF HOSPITALIZATIONS Format: F2	114

SIX_A1	SMOKED IN LIFETIME	115
	Format: A1	
	Missing Values: '0', '8', 'A'	
	Value      Label	
	A M    Never Tried	
	B      1-2	
	C      3-9	
	D     10-29	
	E     30 or More	
SIX_A2	SMOKED IN SIX MONTHS	116
	Format: A1	
	Missing Values: '0', '8', 'A'	
	Value      Label	
	A M    Never Tried	
	B      1-2	
	C      3-9	
	D     10-29	
	E     30 or More	
SIX_A3	AGE FIRST SMOKED	117
	Format: A1	
	Missing Values: '0', '8'	
	Value      Label	
	A     11 or Younger	
	B     12-14	
	C     15-17	
	D     18 Years or Older	
SIX_B1	SMOKELESS TOBACCO IN LIFETIME	118
	Format: A1	
	Missing Values: '0', '8', 'A'	
	Value      Label	
	A M    Never Tried	
	B      1-2	
	C      3-9	
	D     10-29	
	E     30 or More	

SIX_B2	SMOKELESS TOBACCO IN SIX MONTHS	119
	Format: A1	
	Missing Values: '0', '8', 'A'	
	Value      Label	
	A M    Never Tried	
	B      1-2	
	C      3-9	
	D     10-29	
	E     30 or More	
SIX_B3	AGE FOR SMOKELESS TOBACCO	120
	Format: A1	
	Missing Values: '0', '8'	
	Value      Label	
	A     11 or Younger	
	B     12-14	
	C     15-17	
	D     18 Years or Older	
SIX_C1	USED BEER/WINE EVER	121
	Format: A1	
	Value      Label	
	A     Never Tried	
	B     1-2	
	C     3-9	
	D     10-29	
	E     30 or More	
SIX_C2	USED BEER/WINE SIX MONTHS	122
	Format: A1	
	Missing Values: '0', '8', 'A'	
	Value      Label	
	A M    Never Tried	
	B      1-2	
	C      3-9	
	D     10-29	
	E     30 or More	

SIX_C3	AGE FIRST DRANK	123
	Format: A1	
	Missing Values: '0', '8'	
	Value      Label	
	A      11 or Younger	
	B      12-14	
	C      15-17	
	D      18 Years or Older	
SIX_D1	USED LIQUOR IN LIFETIME	124
	Format: A1	
	Value      Label	
	A      Never Tried	
	B      1-2	
	C      3-9	
	D      10-29	
	E      30 or More	
SIX_D2	LIQUOR PAST SIX MONTHS	125
	Format: A1	
	Missing Values: '0', '8', 'A'	
	Value      Label	
	A M    Never Tried	
	B      1-2	
	C      3-9	
	D      10-29	
	E      30 or More	
SIX_D3	AGE FIRST LIQUOR	126
	Format: A1	
	Missing Values: '0', '8'	
	Value      Label	
	A      11 or Younger	
	B      12-14	
	C      15-17	
	D      18 Years or Older	

SIX_E1	FIVE OR MORE SERVINGS-LIFETIME	127
	Format: A1	
	Missing Values: '0', '8', 'A'	
	Value      Label	
	A M    Never Tried	
	B      1-2	
	C      3-9	
	D     10-29	
	E     30 or More	
SIX_E2	FIVE OR MORE SERVINGS-LAST SIX MONTHS	128
	Format: A1	
	Missing Values: '0', '8', 'A'	
	Value      Label	
	A M    Never Tried	
	B      1-2	
	C      3-9	
	D     10-29	
	E     30 or More	
SIX_E3	AGE FOR FIVE OR MORE SERVINGS	129
	Format: A1	
	Missing Values: '0', '8'	
	Value      Label	
	A     11 or Younger	
	B     12-14	
	C     15-17	
	D     18 Years or Older	
SIX_F1	USED INHALANTS IN LIFE	130
	Format: A1	
	Missing Values: '0', '8', 'A'	
	Value      Label	
	A M    Never Tried	
	B      1-2	
	C      3-9	
	D     10-29	
	E     30 or More	

SIX_F2	USED INHALANTS SIX MONTHS	131
	Format: A1	
	Missing Values: '0', '8', 'A'	
	Value      Label	
	A M    Never Tried	
	B      1-2	
	C      3-9	
	D     10-29	
	E     30 or More	
SIX_F3	AGE FIRST INHALANT	132
	Format: A1	
	Missing Values: '0', '8'	
	Value      Label	
	A     11 or Younger	
	B     12-14	
	C     15-17	
	D     18 Years or Older	
SIX_G1	USED COUNTER DRUGS EVER	133
	Format: A1	
	Missing Values: '0', '8', 'A'	
	Value      Label	
	A M    Never Tried	
	B      1-2	
	C      3-9	
	D     10-29	
	E     30 or More	
SIX_G2	USED COUNTER DRUGS SIX MONTHS	134
	Format: A1	
	Missing Values: '0', '8', 'A'	
	Value      Label	
	A M    Never Tried	
	B      1-2	
	C      3-9	
	D     10-29	
	E     30 or More	

SIX_G3	AGE FIRST COUNTER DRUGS	135
	Format: A1	
	Missing Values: '0', '8'	
	Value      Label	
	A      11 or Younger	
	B      12-14	
	C      15-17	
	D      18 Years or Older	
SIXFLAG	EVER USED ILICIT DRUGS	136
	Format: A3	
	Missing Values: '0', '8', 'A'	
SIX_H1	USED MARIJUANA EVER	137
	Format: A1	
	Missing Values: '0', '8', 'A'	
	Value      Label	
	A M    Never Tried	
	B      1-2	
	C      3-9	
	D      10-29	
	E      30 or More	
SIX_H2	USED MARIJUANA SIX MONTHS	138
	Format: A1	
	Missing Values: '0', '8', 'A'	
	Value      Label	
	A M    Never Tried	
	B      1-2	
	C      3-9	
	D      10-29	
	E      30 or More	
SIX_H3	AGE FIRST MARIJUANA	139
	Format: A1	
	Missing Values: '0', '8'	
	Value      Label	
	A      11 or Younger	
	B      12-14	
	C      15-17	
	D      18 Years or Older	

SIX_I1	USED COCAINE EVER	140
	Format: A1	
	Missing Values: '0', '8', 'A'	
	Value      Label	
	A M    Never Tried	
	B      1-2	
	C      3-9	
	D     10-29	
	E     30 or More	
SIX_I2	USED COCAINE SIX MONTHS	141
	Format: A1	
	Missing Values: '0', '8', 'A'	
	Value      Label	
	A M    Never Tried	
	B      1-2	
	C      3-9	
	D     10-29	
	E     30 or More	
SIX_I3	AGE FIRST COCAINE	142
	Format: A1	
	Missing Values: '0', '8'	
	Value      Label	
	A      11 or Younger	
	B      12-14	
	C      15-17	
	D     18 Years or Older	
SIX_J1	USED CRACK EVER	143
	Format: A1	
	Missing Values: '0', '8', 'A'	
	Value      Label	
	A M    Never Tried	
	B      1-2	
	C      3-9	
	D     10-29	
	E     30 or More	



SIX_J2	USED CRACK SIX MONTHS	144
	Format: A1	
	Missing Values: '0', '8', 'A'	
	Value      Label	
	A M    Never Tried	
	B      1-2	
	C      3-9	
	D     10-29	
	E     30 or More	
SIX_J3	AGE FIRST CRACK	145
	Format: A1	
	Missing Values: '0', '8'	
	Value      Label	
	A     11 or Younger	
	B     12-14	
	C     15-17	
	D     18 Years or Older	
SEVEN_A	USED STERIODS EVER	146
	Format: A3	
	Missing Values: '0', '8'	
	Value      Label	
	0    M    BLANK	
	8    M    MISMATCHED	
SEVEN_B	USED STIMULANTS EVER	147
	Format: A3	
	Missing Values: '0', '8'	
	Value      Label	
	0    M    BLANK	
	8    M    MISMATCHED	
SEVEN_C	USED DEPRESSANTS EVER	148
	Format: A3	
	Missing Values: '0', '8'	
	Value      Label	
	0    M    BLANK	
	8    M    MISMATCHED	

SEVEN_D	USED NARCOTICS EVER Format: A3 Missing Values: '0', '8'  Value      Label  0    M    BLANK 8    M    MISMATCHED	149
SEVEN_E	USED HALLUCINOGENS EVER Format: A3 Missing Values: '0', '8'  Value      Label  0    M    BLANK 8    M    MISMATCHED	150
SEVEN_F	USED TWO OR MORE DRUGS Format: A3 Missing Values: '0', '8'  Value      Label  0    M    BLANK 8    M    MISMATCHED	151
SEVEN_G	USED ALCOHOL AND MARIJUANA Format: A3 Missing Values: '0', '8'  Value      Label  0    M    BLANK 8    M    MISMATCHED	152
SEVEN_H	USED NEEDLE Format: A3 Missing Values: '0', '8'  Value      Label  0    M    BLANK 8    M    MISMATCHED	153
SEVEN_I	YOUTH ASKED TO SELL DRUGS Format: A3 Missing Values: '0', '8'  Value      Label  0    M    BLANK 8    M    MISMATCHED	154

SEVEN_J	YOUTH SOLD DRUGS Format: A3 Missing Values: '0', '8'  Value      Label  0    M    BLANK 8    M    MISMATCHED	155
EIGHT_A	INFLUENCED ALCOHOL USE Format: A1 Missing Values: '0', '8', 'A'  Value      Label  A    M    Never Tried B            Parent Figures C            Other Household Members D            Friends E            Through Selling It F            Other	156
EIGHT_B	INFLUENCED DRUG USE Format: A1 Missing Values: '0', '8', 'A'  Value      Label  A    M    Never Tried B            Parent Figures C            Other Household Members D            Friends E            Through Selling It F            Other	157
NINE_AD	MOTHER USED DRUGS Format: A1 Missing Values: '0', '8'  Value      Label  0    M    BLANK 8    M    MISMATCHED A            YES B            NO C            N/A	158

NINE_AA	MOTHER USED ALCHOLHOL Format: A1 Missing Values: '0', '8'	159
	Value      Label	
	0 M    BLANK	
	8 M    MISMATCHED	
	A      YES	
	B      NO	
	C      N/A	
NINE_BD	FATHER USED DRUGS Format: A1 Missing Values: '0', '8'	160
	Value      Label	
	0 M    BLANK	
	8 M    MISMATCHED	
	A      YES	
	B      NO	
	C      N/A	
NINE_BA	FATHER USED ALCHOLHOL Format: A1 Missing Values: '0', '8'	161
	Value      Label	
	0 M    BLANK	
	8 M    MISMATCHED	
	A      YES	
	B      NO	
	C      N/A	
NINE_CD	SPOUSE USED DRUGS Format: A1 Missing Values: '0', '8'	162
	Value      Label	
	0 M    BLANK	
	8 M    MISMATCHED	
	A      YES	
	B      NO	
	C      N/A	

NINE_CA	SPOUSE USED ALCHOLHOL Format: A1 Missing Values: '0', '8'	163
	Value      Label	
	0 M    BLANK	
	8 M    MISMATCHED	
	A      YES	
	B      NO	
	C      N/A	
NINE_DD	OTHER MEMBER USED DRUGS Format: A1 Missing Values: '0', '8'	164
	Value      Label	
	0 M    BLANK	
	8 M    MISMATCHED	
	A      YES	
	B      NO	
	C      N/A	
NINE_DA	OTHER MEMBER USED ALCHOLHOL Format: A1 Missing Values: '0', '8'	165
	Value      Label	
	0 M    BLANK	
	8 M    MISMATCHED	
	A      YES	
	B      NO	
	C      N/A	
PROG_CAT	PROGRAM CATEGORY Format: A1 Missing Values: ''	166
	Value      Label	
	M    MISSING DATA	
	A    SHORT TERM RESIDENT	
	B    LONG TERM RESIDENT	
	C    NONRESIDENTIAL	
EXIT_DT	* No label * Format: DATE9	167

DISCHARG Discharge status at exit  
Format: A1  
Missing Values: ''

168

Value	Label
M	NO DISCHARGE DATA
A	RES COMP, AC PLANNED
B	SERV COMP, NO REFERRAL
C	SERV COMP, REFERRAL MADE
D	PARENT(S) STOPPED SEVICES
E	YOUTH STOPPED SERVICES
F	FAMILY MOVED
G	VIOLATED PROG RULES
H	PS REMOVED
I	OTHER

EXIT\_SIT LIVING SITUATION AT EXIT  
Format: A1  
Missing Values: '', 'X'

169

Value	Label
M	MISSING
A	PARENT/GUARDIAN
B	OTHER PARENT
C	RELATIVE HOME
D	FRIEND
E	OTHER ADULT
F	FOSTER HOME
G	GROUP HOME
H	TRANSITIONAL LIV PROG
I	INDEPEND LIV PROG
J	JOB CORP
K	BASIC CENTER
L	HOMELESS CENTER
M	LIVING INDEPENDENTLY
N	ON THE RUN
O	EDUCATIONAL INSTITUTE
P	DRUG TREATMENT CENTER
Q	RESIDENTIAL TREATMENT
R	MENTAL HOSPITAL
S	CORRECTIONAL INSTITUTE
T	OTHER INSTITUTE
U	OTHER SHELTER
V	MILITARY
W	OTHER
X M	DO NOT KNOW

EMPLOY      EMPLOYMENT AT EXIT      170  
Format: A1  
Missing Values: 'F', 'O', ''

Value      Label

        M      MISSING  
        A      FULL TIME  
        B      PART TIME  
        C      NOT EMPL, LOOKING  
        D      NOT EMPLOYED  
        E      NEVER EMPLOYED  
        F M      DO NOT KNOW

SCHOOL\_P    SCHOOL PROGRAM AT EXIT      171  
Format: A1  
Missing Values: '', 'H', 'I'

Value      Label

        M      MISSING  
        A      PUBLIC SCHOOL  
        B      GED  
        C      VOCATIONAL  
        D      SPECIAL ED  
        E      ALTERNATIVE  
        F      POST SECONDARY  
        G      COLLEGE  
        H M      NOT APPLICABLE  
        I M      DO NOT KNOW

SCHOOL\_S    SCHOOL STATUS AT EXIT      172  
Format: A1  
Missing Values: '', 'H', 'I'

Value      Label

        M      MISSING  
        A      ATTEND REGULARLY  
        B      GRADUATED H.S.  
        C      COMPLETED GED  
        D      ATTEND IRREGULARLY  
        E      DROPPED OUT  
        F      SUSPENDED  
        G      EXPELLED  
        H M      SCHOOL NOT IN SESSION  
        I M      DO NOT KNOW

AGE          Age of youth      173  
Format: F10  
Missing Values: 0

SEX	Sex of youth Format: F1 Missing Values: 0	174
	Value      Label	
	0 M    "MISSING"	
	1      FEMALE	
	2      MALE	
STATE	State Format: A2 Missing Values: ''	175
ETHNIC	ETHNICITY Format: A1 Missing Values: ''	176
	Value      Label	
	M      MISSING	
	A      NATIVE AMERICAN	
	B      ASIAN/PACIFIC	
	C      AFRICAN AMERICAN	
	D      HISPANIC	
	E      CAUCASIAN	
ENGLISH	Services best delivered not in english Format: A3	177
REFUGEE	Is youth a refugee Format: A3	178
MARITAL	MARITAL STATUS Format: A1	179
	Value      Label	
	A      SINGLE, NEVER MARRIED	
	B      SINGLE, LIV WITH PARTNER	
	C      MARRIED	
	D      OTHER	
PREGNANT	PREGNANT Format: A1 Missing Values: '', 'C', 'D'	180
	Value      Label	
	A      YES	
	B      NO	
	C M    DO NOT KNOW	



NUM_CHIL	How many kids does youth have Format: F2	181
SCHL_P	SCHOOL PROGRAM LAST ATTENDED AT INTAKE Format: A1 Missing Values: '', 'H', 'I'	182
	Value      Label	
	A      ELEM/MID\HIGH SCHOOL	
	B      GED	
	C      VOCATIONAL	
	D      SPECIAL ED	
	E      ALTERNATIVE/HOMEBOUND	
	F      POST-SECONDARY	
	G      COLLEGE	
	H M    NOT APPLICABLE	
	I M    DO NOT KNOW	
SCHL_S	SCHOOL STATUS AT INTAKE Format: A1 Missing Values: '', 'H', 'I'	183
	Value      Label	
	A      ATTEND REGULARLY	
	B      GRADUATED H.S.	
	C      COMPLETED GED	
	D      ATTEND IRREGULARLY	
	E      DROPPED OUT	
	F      SUSPENDED	
	G      EXPELLED	
	H M    NOT IN SESSION	
	I M    DO NOT KNOW	
GRADE	LAST GRADE COMPLETED Format: A1 Missing Values: '', 'X'	184
	Value      Label	
	A      GRADE 5 OR LESS	
	B      GRADE 6	
	C      GRADE 7	
	D      GRADE 8	
	E      GRADE 9	
	F      GRADE 10	
	G      GRADE 11	
	H      GRADE 12	
	I      1-3 YEARS COLLEGE	
	J      4 OR MORE YEARS COLLEGE	
	K      OTHER POST-SECONDARY	
	L      SCHOOL PROG NOT GRADED	

NUM\_PLAC Number living situations of youth in last month 185  
Format: F2

LST\_LIVE LAST LIVING SITUATION 186  
Format: A1  
Missing Values: '', 'X'

Value	Label
A	PARENT/LEGAL GUARDIAN
B	OTHER PARENT
C	RELATIVE
D	FRIEND
E	OTHER ADULT
F	FOSTER HOME
G	GROUP HOME
H	TRANSITIONAL LIV PROG
I	INDEPENDENT LIV PROG
J	JOB CORP
K	BASIC CENTER
L	HOMELESS CENTER
M	LIVING INDEPENDENTLY
N	ON THE RUN
O	EDUCATIONAL INST
P	DRUG TREAT CENTER
Q	RESIDENTIAL TREAT
R	MENTAL HOSPITAL
S	CORRECTIONAL INST
T	OTHER INSTITUTION
U	OTHER TEMP SHELTER
V	MILITARY
W	OTHER
X M	DO NOT KNOW

PRM\_LIVE LAST LIVING SITUATION 187  
Format: A1  
Missing Values: '', 'X'

Value	Label
A	PARENT/LEGAL GUARDIAN
B	OTHER PARENT
C	RELATIVE
D	FRIEND
E	OTHER ADULT
F	FOSTER HOME
G	GROUP HOME
H	TRANSITIONAL LIV PROG
I	INDEPENDENT LIV PROG
J	JOB CORP
K	BASIC CENTER
L	HOMELESS CENTER
M	LIVING INDEPENDENTLY

N ON THE RUN  
 O EDUCATIONAL INST  
 P DRUG TREAT CENTER  
 Q RESIDENTIAL TREAT  
 R MENTAL HOSPITAL  
 S CORRECTIONAL INST  
 T OTHER INSTITUTION  
 U OTHER TEMP SHELTER  
 V MILITARY  
 W OTHER  
 X M DO NOT KNOW

YEMP EMPLOYMENT STATUS OF YOUTH 188  
 Format: A1  
 Missing Values: '', 'F'

Value	Label
A	FULL TIME
B	PART TIME
C	NOT EMPLOYED, LOOKING
D	NOT EMPLOYED
E	NEVER EMPLOYED
F M	DO NOT KNOW

MEMP MOTHER FIGURE EMPLOYED? 189  
 Format: A1  
 Missing Values: '', 'C', 'D'

Value	Label
A	YES
B	NO
C M	DO NOT KNOW
D M	NOT APPLICABLE

SEMP SPOUSE/PARTNER EMPLOYED? 190  
 Format: A1  
 Missing Values: ''

Value	Label
A	YES
B	NO
C	DO NOT KNOW
D	NOT APPLICABLE

OTHER\_RH OTHER HOUSEHOLD MEMBERS RUN AWAY OR THROWN OUT? 191  
Format: A1  
Missing Values: '', 'C', 'D'

Value	Label
A	YES
B	NO
C M	DO NOT KNOW
D M	NOT APPLICABLE

UN\_INCOM HOUSEHOLD RECEIVE UNEARNED INCOME? 192  
Format: A1  
Missing Values: '', 'C', 'D'

Value	Label
A	YES
B	NO
C M	DO NOT KNOW
D M	NOT APPLICABLE

GUARDIAN PRIMARY LEGAL GUARDIAN 193  
Format: A1  
Missing Values: '', 'W', '0'

Value	Label
A	BIOLOGICAL MOTHER
B	ADOPTIVE MOTHER
C	STEP-MOTHER
D	FOSTER MOTHER
E	PARENT'S PARTNER (FEMALE)
F	YOUTH'S SPOUSE/PARTNER (FEMALE)
G	AUNT
H	GRANDMOTHER
I	SISTER
J	OTHER FEMALE
K	BIOLOGICAL FATHER
L	ADOPTIVE FATHER
M	STEP-FATHER
N	FOSTER FATHER
O	PARENT'S PARTNER (MALE)
P	YOUTH'S SPOUSE/PARTNER (MALE)
Q	UNCLE
R	GRANDFATHER
S	BROTHER
T	OTHER MALE
U	PUBLIC AGENCY
V	SELF
W M	DO NOT KNOW

GUARDIA1 LEGAL GUARDIAN #2  
Format: A1  
Missing Values: '', 'W', 'X'

194

Value	Label
A	BIOLOGICAL MOTHER
B	ADOPTIVE MOTHER
C	STEP-MOTHER
D	FOSTER MOTHER
E	PARENT'S PARTNER (FEMALE)
F	YOUTH'S SPOUSE/PARTNER (FEMALE)
G	AUNT
H	GRANDMOTHER
I	SISTER
J	OTHER FEMALE
K	BIOLOGICAL FATHER
L	ADOPTIVE FATHER
M	STEP-FATHER
N	FOSTER FATHER
O	PARENT'S PARTNER (MALE)
P	YOUTH'S SPOUSE/PARTNER (MALE)
Q	UNCLE
R	GRANDFATHER
S	BROTHER
T	OTHER MALE
U	PUBLIC AGENCY
V	SELF
W M	DO NOT KNOW

SOURCE SOURCE OF REFERRAL  
Format: A1  
Missing Values: 'R', 'S', 'X'

195

Value	Label
A	SELF REFERRAL
B	PARENT/GUARDIAN
C	FOSTER PARENT
D	OTHER RELATIVE
E	OTHER YOUTH
F	OTHER ADULT
G	CHILD WELFARE/CPS
H	SAFE PLACE
I	LAW ENFORCEMENT/POLICE
J	JUVENILE JUSTICE
K	SCHOOL STAFF
L	STREET OUTREACH
M	OTHER AGENCY/PROG
N	OTHER YOUTH SERV AGENCY
O	OTHER ORGANIZATION
P	NATIONAL SWITCHBOARD
Q	OTHER HOTLINE

R M DO NOT KNOW

RHY\_STAT STATUS AT INTAKE 196  
Format: A1  
Missing Values: ''

Value	Label
A	AT HOME
B	RUNAWAY
C	THROWAWAY
D	HOMELESS
E	EMANCIPATED
F	JUV. JUSTICE PLACEMENT
G	CHILD WELFARE PLACEMENT
H	OTHER

DAY\_AWAY HOW LONG AWAY? 197  
Format: A1  
Missing Values: ''

Value	Label
A	OVERNIGHT
B	1 DAY
C	2 - 4 DAYS
D	5 - 7 DAYS
E	8 - 14 DAYS
F	15 - 21 DAYS
G	22 - 28 DAYS
H	MORE THAN 28 DAYS
I	DO NOT KNOW
J	NOT APPLICABLE

DISTANCE Distance of household from program 198  
Format: A1  
Missing Values: 'G', ''

Value	Label
A	LESS THAN ONE MILE
B	1-10 MILES
C	11-20 MILES
D	21-50 MILES
E	51-100 MILES
F	MORE THAN 100 MILES
G M	NOT APPLICABLE

LOCATION	NEAREST RELATIVE	199
	Format: A1	
	Missing Values: ''	
	Value      Label	
	A      SAME COMMUNITY	
	B      SAME METRO AREA	
	C      SAME STATE	
	D      DIFFERENT STATE	
	E      DIFFERENT COUNTRY	
	F      NOT APPLICACABLE	
NUM_RUN	How many times has youth run away	200
	Format: F2	
NUM_CENT	Number episodes resulted in serv from this agency	201
	Format: F2	
NUM_OTHE	Number episodes resulted in serv from other agency	202
	Format: F2	
PAYMENT	primary method of payment services	203
	Format: A1	
	Value      Label	
	A      NO CHARGE	
	B      YOUTH/YOUTH'S FAMILY	
	C      SOCIAL SERVICE AGENCY	
	D      JUVENILE JUSTICE AGENCY	
	E      OTHER	
LIFE_FRQ	Estimated hours of service	204
	Format: F3	
PA01	Father Figure Conflict	205
	Format: F10	
	Value      Label	
	0      Not Checked	
	1      Checked	
	8      Mismatched	

PA02	Mother Figure Conflict Format: F10 Missing Values: 8	206
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	
PA03	Parent's Partner Conflict Format: F10 Missing Values: 8	207
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	
PA04	Rel between Parents Format: F10 Missing Values: 8	208
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	
PA05	Spouse/Partner Format: F10 Missing Values: 8	209
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	
PA06	Foster/Group Home Member Format: F10 Missing Values: 8	210
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	



PA07	Other Household Member Format: F10 Missing Values: 8	211
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	
PA08	No Parental Figure Format: F10 Missing Values: 8	212
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	
PA09	Youth Unsupervised Format: F10 Missing Values: 8	213
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	
PA10	Divorced Family Format: F10 Missing Values: 8	214
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	
PA11	Blended Family Format: F10 Missing Values: 8	215
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	

PA12	Youth Wants Other Parent Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	216
PA13	Other Conflict Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	217
PB01	Youth Homeless Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	218
PB02	Family Homeless Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	219
PB03	Youth Rejected from Homeless Shelter Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	220

PB04	Custody Change Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	221
PB05	Chose to Leave Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	222
PB06	Forced to Leave Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	223
PB07	Legally Evicted Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	224
PB08	Other Housing Issue Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	225

PC01	Bad Grades Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	226
PC02	Illiteracy Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	227
PC03	Learning Disability Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	228
PC04	Cannot Get Along Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	229
PC05	Truancy Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	230

PC06	Dropped Out Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	231
PC07	Suspended Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	232
PC08	Expelled Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	233
PC09	Other Educational Issue Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	234
PD01	Youth Depressed Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	235

PD02	Youth Suicidal Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	236
PD03	Poor Self Image Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	237
PD04	Youth's Behavior Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	238
PD05	Y's Sexual Orientation Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	239
PD06	Parent's Behavior Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	240

PD07	P's Sexual Orientation Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	241
PD08	Searching for Biological Parent Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	242
PD09	Racial/Ethnic Identity Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	243
PD10	Loss/Grief Issues Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	244
PD11	Abandonment Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	245

PD12	Suicidal Friends Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	246
PD13	Suicidal Family Members Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	247
PD14	Witnessed Violent Crime Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	248
PD15	Crime Victim Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	249
PD16	Family's Mental Health Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	250



PD17	Other Psychological Issues Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	251
PE01	Has/Suspects STD's Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	252
PE02	Has/Suspects HIV\AIDS Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	253
PE03	Pregnancy Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	254
PE04	Eating Disorder Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	255

PE05	Physically Challenged Format: F10 Missing Values: 8	256
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	
PE06	Improper Use of Medication Format: F10 Missing Values: 8	257
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	
PE07	Health of Family Format: F10 Missing Values: 8	258
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	
PE08	Other Chronic Problem Format: F10 Missing Values: 8	259
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	
PE09	Other Current Problem Format: F10 Missing Values: 8	260
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	

PF01	Child Protective Services Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	261
PF02	Social Services Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	262
PF03	Drug/Alcohol Treatment Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	263
PF04	Day Care Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	264
PF05	Education Program Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	265

PF06	Other Trouble Getting Services Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	266
PG01	Physical Abuse - Father Figure Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	267
PG02	Physical Abuse - Mother Figure Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	268
PG03	Physical Abuse - Parent's Partner Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	269
PG04	Physical Abuse - Spouse/Partner Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	270

PG05	Physical Abuse - Foster/Group Home Member Format: F10 Missing Values: 8	271
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	
PG06	Physical Abuse - Other Household Member Format: F10 Missing Values: 8	272
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	
PG07	Physical Abuse - Other Non-Household Member Format: F10 Missing Values: 8	273
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	
PG08	Physical Abuse - Domestic Violence Format: F10 Missing Values: 8	274
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	
PG09	Physical Abuse - Youth Assaulting Other Format: F10 Missing Values: 8	275
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	

PH01	Sexual Abuse - Father Figure Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	276
PH02	Sexual Abuse - Mother Figure Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	277
PH03	Sexual Abuse - Parent's Partner Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	278
PH04	Sexual Abuse - Spouse/Partner Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	279
PH05	Sexual Abuse - Foster/Group Home Member Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	280

PH06	Sexual Abuse - Other Household Member Format: F10 Missing Values: 8	281
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	
PH07	Sexual Abuse - Other Non-Household Member Format: F10 Missing Values: 8	282
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	
PH08	Sexual Abuse - Youth Assaulting Other Format: F10 Missing Values: 8	283
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	
PI01	Emotional Abuse - Father Figure Format: F10 Missing Values: 8	284
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	
PI02	Emotional Abuse - Mother Figure Format: F10 Missing Values: 8	285
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	

PI03	Emotional Abuse - Parent's Partner Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	286
PI04	Emotional Abuse - Spouse/Partner Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	287
PI05	Emotional Abuse - Foster/Group Home Member Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	288
PI06	Emotional Abuse - Other Household Member Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	289
PI07	Emotional Abuse - Other Non-Household Member Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	290



PI08	Emotional Abuse - Youth Abusing Household Member Format: F10 Missing Values: 8	291
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M   Mismatched	
PJ01	Substance Abuse by Household Member Format: F10 Missing Values: 8	292
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M   Mismatched	
PJ02	Substance Abuse by Spouse/Partner Format: F10 Missing Values: 8	293
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M   Mismatched	
PJ03	Substance Abuse by Youth Format: F10 Missing Values: 8	294
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M   Mismatched	
PK01	Lack of Social Skills Format: F10 Missing Values: 8	295
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M   Mismatched	

PK02	Problem with Peers Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	296
PK03	Violent Youth Behavior Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	297
PK04	Gang Involvement Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	298
PK05	Cult Involvement Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	299
PK06	Survival Sex Format: F10 Missing Values: 8  Value      Label  0      Not Checked 1      Checked 8 M    Mismatched	300

PK07	Prostitution Format: F10 Missing Values: 8  Value    Label  0    Not Checked 1    Checked 8 M  Mismatched	301
PK08	Selling Drugs Format: F10 Missing Values: 8  Value    Label  0    Not Checked 1    Checked 8 M  Mismatched	302
PK09	Other Social Issues Format: F10 Missing Values: 8  Value    Label  0    Not Checked 1    Checked 8 M  Mismatched	303
PL01	Neglect - Father Figure Format: F10 Missing Values: 8  Value    Label  0    Not Checked 1    Checked 8 M  Mismatched	304
PL02	Neglect - Mother Figure Format: F10 Missing Values: 8  Value    Label  0    Not Checked 1    Checked 8 M  Mismatched	305

PL03	Neglect - Parent's Partner Format: F10 Missing Values: 8	306
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	
PL04	Neglect - Spouse/Partner Format: F10 Missing Values: 8	307
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	
PL05	Neglect - Foster/Group Home Member Format: F10 Missing Values: 8	308
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	
PL06	Neglect - Other Household Member Format: F10 Missing Values: 8	309
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	
PL07	Youth Neglecting Child Format: F10 Missing Values: 8	310
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	

PL08	Youth Neglecting Spouse/Partner Format: F10 Missing Values: 8	311
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	
PM01	Charged with Misdemeanor Format: F10 Missing Values: 8	312
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	
PM02	Charged with Felony Format: F10 Missing Values: 8	313
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	
PM03	Drug Possession/Distribution (Youth) Format: F10 Missing Values: 8	314
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	
PM04	Drug Possession/Distribution (Parent) Format: F10 Missing Values: 8	315
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	

PM05	On Probation/Suspended Sentence Format: F10 Missing Values: 8	316
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	
PM06	On Parole Format: F10 Missing Values: 8	317
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	
PM07	In Need of Supervision Format: F10 Missing Values: 8	318
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	
PM08	Household Member Format: F10 Missing Values: 8	319
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	
PM09	Spouse/Partner Format: F10 Missing Values: 8	320
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	

PM10	Immigration/Naturalization Format: F10 Missing Values: 8	321
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	
PM11	Other Involvement with Justice System Format: F10 Missing Values: 8	322
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	
PN01	Unemployment - Father Figure Format: F10 Missing Values: 8	323
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	
PN02	Unemployment - Mother Figure Format: F10 Missing Values: 8	324
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	
PN03	Unemployment - Parent's Partner Format: F10 Missing Values: 8	325
	Value      Label	
	0      Not Checked	
	1      Checked	
	8 M    Mismatched	

PN04	Unemployment - Spouse/Partner Format: F10 Missing Values: 8	326																
	<table border="0"> <tr> <td style="padding-right: 20px;">Value</td> <td>Label</td> </tr> <tr> <td>0</td> <td>Not Checked</td> </tr> <tr> <td>1</td> <td>Checked</td> </tr> <tr> <td>8 M</td> <td>Mismatched</td> </tr> </table>	Value	Label	0	Not Checked	1	Checked	8 M	Mismatched									
Value	Label																	
0	Not Checked																	
1	Checked																	
8 M	Mismatched																	
PN05	Unemployment - Youth Unemployment Format: F10 Missing Values: 8	327																
	<table border="0"> <tr> <td style="padding-right: 20px;">Value</td> <td>Label</td> </tr> <tr> <td>0</td> <td>Not Checked</td> </tr> <tr> <td>1</td> <td>Checked</td> </tr> <tr> <td>8 M</td> <td>Mismatched</td> </tr> </table>	Value	Label	0	Not Checked	1	Checked	8 M	Mismatched									
Value	Label																	
0	Not Checked																	
1	Checked																	
8 M	Mismatched																	
FEMP2	FATHER FIGURE EMPLOYED? Format: F1 Missing Values: 5 thru 7	328																
	<table border="0"> <tr> <td style="padding-right: 20px;">Value</td> <td>Label</td> </tr> <tr> <td>1</td> <td>YES</td> </tr> <tr> <td>2</td> <td>NO</td> </tr> <tr> <td>3</td> <td>E</td> </tr> <tr> <td>4</td> <td>F</td> </tr> <tr> <td>5 M</td> <td></td> </tr> <tr> <td>6 M</td> <td>DO NOT KNOW</td> </tr> <tr> <td>7 M</td> <td>NOT APPLICABLE</td> </tr> </table>	Value	Label	1	YES	2	NO	3	E	4	F	5 M		6 M	DO NOT KNOW	7 M	NOT APPLICABLE	
Value	Label																	
1	YES																	
2	NO																	
3	E																	
4	F																	
5 M																		
6 M	DO NOT KNOW																	
7 M	NOT APPLICABLE																	
CHILDYN	Has children Format: F1	329																
	<table border="0"> <tr> <td style="padding-right: 20px;">Value</td> <td>Label</td> </tr> <tr> <td>0</td> <td>No</td> </tr> <tr> <td>1</td> <td>Yes</td> </tr> </table>	Value	Label	0	No	1	Yes											
Value	Label																	
0	No																	
1	Yes																	
UNDER12	Is youth under 12 Format: F8.2	330																
	<table border="0"> <tr> <td style="padding-right: 20px;">Value</td> <td>Label</td> </tr> <tr> <td>.00</td> <td>no</td> </tr> <tr> <td>1.00</td> <td>yes</td> </tr> <tr> <td>9.00</td> <td>missing</td> </tr> </table>	Value	Label	.00	no	1.00	yes	9.00	missing									
Value	Label																	
.00	no																	
1.00	yes																	
9.00	missing																	



PHYSICAL	Received physical abuse Format: F4.1	331
	Value      Label	
	.0      no	
	1.0     yes	
	9.0     missing	
PERPP	Perpetrated physical abuse Format: F4.1	332
	Value      Label	
	.0      no	
	1.0     yes	
EMOTION	Received emotional abuse Format: F4.1	333
	Value      Label	
	.0      no	
	1.0     yes	
	9.0     missing	
PERPE	Perpetrated emotional abuse Format: F4.1	334
	Value      Label	
	.0      no	
	1.0     yes	
SEXUAL	Received sexual abuse Format: F4.1	335
	Value      Label	
	.0      no	
	1.0     yes	
	9.0     missing	
PERPS	Perpetrated sexual abuse Format: F4.1	336
	Value      Label	
	.0      no	
	1.0     yes	

NEGLECT	Received neglect Format: F4.1	337
	Value      Label	
	.0      no	
	1.0     yes	
	9.0     missing	
PERPN	Perpetrated neglect Format: F4.1	338
	Value      Label	
	.0      no	
	1.0     yes	
ANYABUSE	Received any abuse Format: F4.1	339
	Value      Label	
	.0      no	
	1.0     yes	
	9.0     missing	
ANYPERP	Perpetrated any abuse Format: F4.1	340
	Value      Label	
	.0      no	
	1.0     yes	
	9.0     missing	
BEERWINE	Ever used beer or wine Format: F8.2	341
	Value      Label	
	.00     no	
	1.00    yes	
	9.00    missing	
LIQUOR	Ever used liquor Format: F8.2	342
	Value      Label	
	.00     no	
	1.00    yes	
	9.00    missing	

ALCOHOL	Ever used any alcohol Format: F8.2	343
	Value      Label	
	.00      no	
	1.00     yes	
	9.00     missing	
BEERWIN6	Used beer/wine in past 6 months Format: F8.2	344
	Value      Label	
	.00      no	
	1.00     yes	
	9.00     missing	
LIQUOR6	Used liquor in the past 6 months Format: F8.2	345
	Value      Label	
	.00      no	
	1.00     yes	
	9.00     missing	
ALCOHOL6	Used alcohol in the past 6 months Format: F8.2	346
	Value      Label	
	.00      no	
	1.00     yes	
	9.00     missing	
SMOKE	Ever smoked tobacco Format: F4.1	347
	Value      Label	
	.0        no	
	1.0       yes	
	9.0       missing	

SMOKE6	Smoked tobacco in the past 6 months Format: F4.1	348
	Value      Label	
	.0      no	
	1.0     yes	
	9.0     missing	
CHEW	Ever chewed tobacco Format: F4.1	349
	Value      Label	
	.0      no	
	1.0     yes	
	9.0     missing	
CHEW6	Chewed tobacco in the past 6 months Format: F4.1	350
	Value      Label	
	.0      no	
	1.0     yes	
	9.0     missing	
TOBACCO	Ever used any tobacco Format: F4.1	351
	Value      Label	
	.0      no	
	1.0     yes	
	9.0     missing	
TOBACC06	Used any tobacco in the past 6 months Format: F4.1	352
	Value      Label	
	.0      no	
	1.0     yes	
	9.0     missing	

BINGE	Ever binge-drank Format: F4.1	353
	Value      Label	
	.0      no	
	1.0     yes	
	9.0     missing	
BINGE6	Binge-drank in past 6 months Format: F4.1	354
	Value      Label	
	.0      no	
	1.0     yes	
	9.0     missing	
INHALE	Ever used inhalants Format: F4.1	355
	Value      Label	
	.0      no	
	1.0     yes	
	9.0     missing	
INHALE6	Used inhalants in past 6 months Format: F4.1	356
	Value      Label	
	.0      no	
	1.0     yes	
	9.0     missing	
COUNTER	Ever abused OTC drugs Format: F4.1	357
	Value      Label	
	.0      no	
	1.0     yes	
	9.0     missing	

COUNTER6	Abused OTC drugs in past 6 months Format: F4.1	358
	Value      Label	
	.0      no	
	1.0     yes	
	9.0     missing	
POT	Ever used marijuana Format: F4.1	359
	Value      Label	
	.0      no	
	1.0     yes	
	9.0     missing	
POT6	Used marijuana in the past 6 months Format: F4.1	360
	Value      Label	
	.0      no	
	1.0     yes	
	9.0     missing	
COCAINE	Ever used powder cocaine Format: F4.1	361
	Value      Label	
	.0      no	
	1.0     yes	
	9.0     missing	
COCAINE6	Used powder cocaine in the past 6 months Format: F4.1	362
	Value      Label	
	.0      no	
	1.0     yes	
	9.0     missing	

CRACK	Ever used crack Format: F4.1	363
	Value      Label	
	.0      no	
	1.0     yes	
	9.0     missing	
CRACK6	Used crack in the past 6 months Format: F4.1	364
	Value      Label	
	.0      no	
	1.0     yes	
	9.0     missing	
ANYSUBST	Ever used any substance Format: F4.1	365
	Value      Label	
	.0      no	
	1.0     yes	
	9.0     missing	
TOBACTYP	type of tobacco used Format: F4	366
	Value      Label	
	0      no use, missing	
	1      smoke tobacco	
	2      chew tobacco	
	3      smoke and chew tobacco	
FY	Fiscal year Format: F4.1 Missing Values: .0	367
DYNAMICS	Any household dynamics problems Format: F4.1	368
	Value      Label	
	.0      no	
	1.0     yes	
	9.0     missing	

HOUSING	Any housing problems Format: F4.1	369
	Value      Label	
	.0      no	
	1.0     yes	
	9.0     missing	
SCHOOL	Any school problems Format: F4.1	370
	Value      Label	
	.0      no	
	1.0     yes	
	9.0     missing	
PSYCHO	Any psychological problems Format: F4.1	371
	Value      Label	
	.0      no	
	1.0     yes	
	9.0     missing	
HEALTH	Any physical health problems Format: F4.1	372
	Value      Label	
	.0      no	
	1.0     yes	
	9.0     missing	
SERVTR0B	Any trouble receiving social services Format: F4.1	373
	Value      Label	
	.0      no	
	1.0     yes	
	9.0     missing	



AOD	Any alcohol or drug problems Format: F4.1	374
	Value      Label	
	.0      no	
	1.0     yes	
	9.0     missing	
SOCIALIZ	Any socialization problems Format: F4.1	375
	Value      Label	
	.0      no	
	1.0     yes	
	9.0     missing	
JUSTICE	Any juvenile justice problems Format: F4.1	376
	Value      Label	
	.0      no	
	1.0     yes	
	9.0     missing	
UNEMPLOY	Any unemployment problems Format: F4.1	377
	Value      Label	
	.0      no	
	1.0     yes	
	9.0     missing	
THERAPY	Received therapy Format: F4.1	378
	Value      Label	
	.0      no	
	1.0     yes	
	9.0     missing	

YOUTHED	Received education services Format: F4.1	379
	Value      Label	
	.0      no	
	1.0     yes	
	9.0     missing	
LIFESKIL	Received life skills training Format: F4.1	380
	Value      Label	
	.0      no	
	1.0     yes	
	9.0     missing	
HOTLINE	Received Hotline services Format: F4.1	381
	Value      Label	
	.0      no	
	1.0     yes	
	9.0     missing	
BASICSUP	Received basic support (bed, food) Format: F4.1	382
	Value      Label	
	.0      no	
	1.0     yes	
	9.0     missing	
HEALTHSE	Received health services Format: F4.1	383
	Value      Label	
	.0      no	
	1.0     yes	
	9.0     missing	

AODPREV	Received alcohol/drug prevention services Format: F4.1	384
	Value      Label	
	.0      no	
	1.0     yes	
	9.0     missing	
ALTERHOU	Received alternative housing services Format: F4.1	385
	Value      Label	
	.0      no	
	1.0     yes	
	9.0     missing	
LEGALSER	Received legal services Format: F4.1	386
	Value      Label	
	.0      no	
	1.0     yes	
	9.0     missing	
RECREATI	Received recreational services Format: F4.1	387
	Value      Label	
	.0      no	
	1.0     yes	
	9.0     missing	
SUPPORTG	Received support group treatment Format: F4.1	388
	Value      Label	
	.0      no	
	1.0     yes	
	9.0     missing	

EMPLOYME	Received employment services Format: F4.1	389
	Value      Label	
	.0      no	
	1.0     yes	
	9.0     missing	
BIOMOM	guardian includes biological mother Format: F4	390
	Value      Label	
	0      no	
	1      yes	
	9      missing	
BIODAD	guardian includes biological father Format: F4	391
	Value      Label	
	0      no	
	1      yes	
	9      missing	
ADOPTMOM	guardian includes adopted mother Format: F4	392
	Value      Label	
	0      no	
	1      yes	
	9      missing	
ADOPTDAD	guardian includes adopted father Format: F4	393
	Value      Label	
	0      no	
	1      yes	
	9      missing	

BIORENTS	both biological parents are guardians Format: F4	394
	Value      Label	
	0      no	
	1      yes	
	9      missing	
AGENCYGD	public agency is guardian Format: F4	395
	Value      Label	
	0      no	
	1      yes	
	9      missing	
BIOGUARD	intermediate step to create newguard Format: F4	396
	Value      Label	
	0      all others	
	1      both biological parents	
	2      biomom	
	3      biodad	
GARD3	intermediate variable to recode guardian Format: F4	397
	Value      Label	
	0      all others	
	1      both bio parents	
	2      biomom	
	3      biodad	
	4      adopted parents	
NEWGUARD	combined guardian Format: F4	398
	Value      Label	
	0      all others	
	1      both biological parents	
	2      biological mother	
	3      biological father	
	4      adopted parent	
	5      public agency	

EVER_RAN	ever ran away from home Format: F4	399
	Value      Label	
	0      no	
	1      yes	
	9      missing	
NUM_AWAY	days away from home recoded to midpoint Format: F4	400
A01	Crisis Intervention Format: F1	401
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
A02	Individual (Youth) Format: F1	402
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
A03	Individual (Parent) Format: F1	403
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
A04	Family Format: F1	404
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	

A05	Home-Based Format: F1	405
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
A06	Group (Youth) Format: F1	406
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
A07	Group (Parent) Format: F1	407
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
A08	Outdoor Adventure/Challenge Format: F1	408
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
A09	Peer (Youth) Format: F1	409
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	

A10	Expressive/Art Format: F1	410
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
A11	Other Format: F1	411
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
B01	Assessment Format: F1	412
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
B02	Tutoring Format: F1	413
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
B03	Alternative Education Format: F1	414
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	



B04	GED Prep/Test Format: F1	415
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
B05	Vocational Training Format: F1	416
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
B06	Other Format: F1	417
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
C01	Communication Skills Format: F1	418
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
C02	Assertiveness Format: F1	419
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	

C03	Conflict Resolution Format: F1	420
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
C04	Goal Setting/Life Planning Format: F1	421
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
C05	Budgeting Format: F1	422
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
C06	Employment Format: F1	423
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
C07	Consumerism Format: F1	424
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	

C08	Hygiene Format: F1	425
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
C09	Sex Education Format: F1	426
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
C10	Parenting Skills Format: F1	427
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
C11	Nutrition Format: F1	428
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
C12	Leisure Skills Format: F1	429
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	

C13	Household Management Format: F1	430
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
C14	Other Format: F1	431
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
D01	Crisis Counseling Format: F1	432
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
D02	Information and Referral Format: F1	433
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
D03	Other Format: F1	434
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	

E01	Food Format: F1	435
	Value    Label	
	1    Direct service	
	2    Referral service	
	3    Both services	
E02	Clothing Format: F1	436
	Value    Label	
	1    Direct service	
	2    Referral service	
	3    Both services	
E03	Emergency Shelter Format: F1	437
	Value    Label	
	1    Direct service	
	2    Referral service	
	3    Both services	
E04	Transportation Format: F1	438
	Value    Label	
	1    Direct service	
	2    Referral service	
	3    Both services	
E05	Other Format: F1	439
	Value    Label	
	1    Direct service	
	2    Referral service	
	3    Both services	

F01	General Medical Format: F1	440
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
F02	Dental Format: F1	441
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
F03	Psychological/Psychiatric Format: F1	442
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
F04	Substance Abuse Assessment Format: F1	443
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
F05	Alcohol/Other Drug Treatment Format: F1	444
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	

F06	Eating Disorders Format: F1	445
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
F07	Gynecological Format: F1	446
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
F08	Pre-Natal Format: F1	447
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
F09	HIV/AIDS Related Format: F1	448
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
F10	Other Format: F1	449
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	

G01	Education/Information Format: F1	450
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
G02	Positive Peer Leadership Format: F1	451
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
G03	Alternative Activities/Recreation Format: F1	452
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
G04	Refusal Skills Format: F1	453
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
G05	Substance Abuse Screening Format: F1	454
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	



G06	Other Format: F1	455
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
H01	Other Emergency Youth Shelter Format: F1	456
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
H02	Foster Home Format: F1	457
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
H03	Host Home Format: F1	458
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
H04	Group Home Format: F1	459
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	

H05	Transitional Living Program Format: F1	460
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
H06	Independent Living Program Format: F1	461
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
H07	Job Corps Format: F1	462
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
H08	Residential Treatment Format: F1	463
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
H09	Other Format: F1	464
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	

I01	To the Youth Format: F1	465
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
I02	To the Family Format: F1	466
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
J01	Organized Sports Activities Format: F1	467
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
J02	Arts and Crafts Format: F1	468
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
J03	Field Trips Format: F1	469
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	

J04	Other Format: F1	470
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
K01	Alcoholics Anonymous Format: F1	471
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
K02	Narcotics/Cocaine Anonymous Format: F1	472
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
K03	Alateen Format: F1	473
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
K04	Alanon Format: F1	474
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	

K05	Other Format: F1	475
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
L01	Career Counseling Format: F1	476
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
L02	Job Training Format: F1	477
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
L03	Employment Referral/Placement Format: F1	478
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	
L04	Job Corps Non-Residential Format: F1	479
	Value      Label	
	1      Direct service	
	2      Referral service	
	3      Both services	

L05	Other Format: F1	480
	Value    Label	
	1    Direct service	
	2    Referral service	
	3    Both services	
M01	Outreach Services in Community Format: F1	481
	Value    Label	
	1    Direct service	
	2    Referral service	
	3    Both services	
DURATION	How many days they were in the program Format: F4	482
AGECAT	age in categories Format: F4 Missing Values: 0	483
	Value    Label	
	1    less than 16	
	2    16-17	
	3    18+	
FAMABUSE	a household member abuses alcohol Format: F4	484
	Value    Label	
	0    none mentioned	
	1    one or more mentioned	
CLUSTER	count of cluster problems Format: F4.1	485
INTAK_DY	Day youth enters the program, MMDDYY Format: F8.2	486
INTAK_MO	Month youth enters the program, MMDDYY Format: F8.2	487
INTAK_YR	Year youth enters the program, MMDDYY Format: F8.2	488

BIRTH_MO	Youth's month of birth, MMDDYY format Format: F8.2	489
BIRTH_YR	Youth's year of birth, MMDDYY format Format: F8.2	490
DRUGFLAG	Drug information collected Format: F8.2	491
	Value      Label	
	.00      Drug information was not collected	
	1.00      Drug information was collected	

## **APPENDIX C**

### **DEMOGRAPHICS Coding Supplement**



This appendix is meant to serve as a supplement to *Appendix B, Coding Information for RHY92*. Specifically, this appendix provides detailed definitions of the responses for many of the DEMOGRAPHICS fields in RHY92.

### **Components of the Unit of Observation**

#### **Center I**

Unique Agency ID Number. This is a required field and is never blank. The first four characters of this field provide geographic information. The first two characters represent the region where the agency is located and the next two characters represent the state where the agency is located. Refer to Appendix I for a Region Map of the U.S.

#### **Youth ID**

Unique Youth ID Number. This is a required field and is never blank. The same youth ID is used when a youth returns to the same agency with a different intake date.

#### **Intake D**

This is a required field and is never blank. The date is entered in the format, MM/DD/YY.

## Youth demographics Fields

The demographics section of the youth profile contains basic information about the youth, the youth's family, and the circumstances that the youth was facing at the time of intake into the program.

**Ethnicity**: The coding of ethnicity is based on the youth's self perception. For youth unable to make an identity determination, program staff choose the ethnic category which most closely reflects the youth's recognition in their community.

The following ethnicity classifications are defined by the U.S. Department of Commerce, Directive No. 15.16. The classifications should not be interpreted as being scientific or anthropological in nature, nor should they be viewed as determinants of eligibility for participation in any Federal program. They have been developed in response to needs expressed by both the executive branch and the Congress to provide for the collection and use of compatible, non-duplicated, exchangeable racial and ethnic data by Federal agencies.

<i>Code</i>	<i>Response</i>	<i>Description</i>
1.	<b>American Indian or Alaskan Native</b>	A person having origins in any of the original peoples of North America, and who maintains cultural identification through tribal affiliation or community recognition.
2.	<b>Asian or Pacific Islander</b>	A person having origins in any of the original peoples of the Far East, Southeast Asia, the Indian subcontinent, or the Pacific Islands. This area includes, for example, China, India, Japan, Korea, the Philippine Islands, and Samoa.
3.	<b>Black, Not of Hispanic Origin</b>	A person having origins in any of the black racial groups of Africa.
4.	<b>Hispanic</b>	A person of Mexican, Puerto Rican, Cuban, Central or South American or other Spanish culture or origin, regardless of race.
5.	<b>White, Not of Hispanic Origin</b>	A person having origins in any of the original peoples of Europe, North Africa, or the Middle East.

**Refugee**: The term refugee refers to any person who is outside their home country and is (1) unable or unwilling to return to that country because of persecution or a well-founded fear of persecution on account of race, religion, nationality, membership in a particular social group, or political opinion; and/or (2) specified by the President under section 207(a) of the Immigration and Nationality Act as being a refugee.

**Marital Status**: Response that most closely corresponds to the youth's marital status at intake.

<u>Code</u>	<u>Response</u>	<u>Description</u>
1.	<b>Single, Never Married</b>	The youth is single, has never been married, and is not living with a partner.
2.	<b>Single, Living with Partner</b>	The youth is single, living with a partner just prior to intake.
3.	<b>Married</b>	The youth is legally married.
4.	<b>Other</b>	The youth's marital status is not described by any of the above choices.

**School Program**: If the youth was not attending a school program at intake, the last school program he or she attended is indicated.

<u>Code</u>	<u>Response</u>	<u>Description</u>
1.	<b>Elem/Middle/High School</b>	A school program which leads to an elementary/middle school certificate or a high school diploma.
2.	<b>GED</b>	A program that prepares the youth to take the General Education Development test. Earning the GED is equivalent to earning a high school diploma.
3.	<b>Vocational</b>	A vocational education program, prior to completing secondary school, designed to prepare the youth for a vocation such as plumber, electrician, or auto mechanic.

- |    |   |   |
|----|---|---|
| 4. | <b>Special Education</b>                      | A special education program designed to address a diagnosed learning disability, or other developmental disability such as a physical, mental, or emotional handicap.   |
| 5. | <b>Alternative/<br/>Homebound<br/>Program</b> | An accredited school that is not part of the traditional public private school system or an accredited program taught at home.  |
| 6. | <b>Post-Secondary<br/>Training</b>            | The youth has completed secondary school and is attending a post-secondary program other than college, such as a trade school. For example, he or she may be attending an automotive repair school or a beautician academy. |
| 7. | <b>College</b>                                | A college program, including community college programs.  |
| 8. | <b>Not Applicable</b>                         | The youth has never been enrolled in school, or has not been enrolled for a significant period of time.   |
| 9. | <b>Do Not Know</b>                            | The staff does not have enough information on the last school program the youth attended to correctly choose a response.  |

**School Status:** Indicates youth's school status at intake. If school was not in session at the time of the youth's intake, **School Not in Session** is indicated.

<u>Code</u>	<u>Response</u>	<u>Description</u>
1.	<b>Attending School Regularly</b>	The youth is currently enrolled in an educational program and attends classes regularly, without extended absenteeism.
2.	<b>Graduated High School</b>	The youth has earned a high school diploma.
3.	<b>Completed GED</b>	The youth has earned an equivalent high school diploma through the General Education Development program.

4. **Attending School Irregularly/Extended Truancy** The youth is currently enrolled in, but frequently absent from the educational program in which he or she is enrolled.
5. **Dropped Out** The youth formally withdrew from school on his/her own initiative prior to completing the course of study.
6. **Suspended** Temporarily removed from school through official school action.
7. **Expelled** Permanently removed from school through official school action.
8. **School Not in Session** The youth's school program from Item 12 was not in session at time of intake.
9. **Do Not Know** There is no information available on the youth's school status at exit.

**Last Living Situation of Youth:** Indicates the last apparently stable/permanent place in which the youth resided before coming to the agency. This living situation may not be their legal residence but does represent a place with which the youth has some identification as a "home." For example, if the youth lived with grandparents for three months, and ran from that residence and lived on the street for two days prior to entering the shelter, the grandparents' home (relative's home) would be the appropriate choice for completing this item.

<u>Code</u>	<u>Response</u>	<u>Description</u>
1.	<b>Parent/Legal Guardian's Home</b>	The residence of the biological parent(s), adoptive parent(s), or legal guardian.
2.	<b>Other Parent's Home</b>	The residence of the parent who is not the youth's legal guardian.

3. **Relative's Home** The residence of a relative other than the youth's parent(s).
4. **Friend's Home** The residence of a friend not related to the family.
5. **Other Adult's Home** The residence of an adult other than a relative or a friend.
6. **Foster Home** A temporary residence in which the youth has been legally placed by a social services agency.
7. **Group Home** A structured residential program that provides a home-like environment for youth unable to return home, generally for a minimum of three months and a maximum of two years stay.
8. **Transitional Living Program** Program for older youth who have no family or State support, to assist them in their move toward self-sufficient living and prevent long-term dependency on social services.
9. **Independent Living Program** A skill-based program that prepares youth in the foster care system to live on their own, independently from that system.
10. **Job Corps** Residential structured/vocational training program aimed at developing skills that will lead to self sufficiency.
11. **Basic Center** Community-based agency providing core services (shelter, food, clothing, counseling) to runaway and homeless youth. Basic Center services may be provided in one central location, such as a group home residence, or in decentralized locations, such as host homes. Federal guidelines dictate that youth usually receive shelter for two weeks or less at FYSB-funded Basic Center programs.
12. **Homeless Family Center** A program designed to provide shelter and services to homeless families.

13. **Living Independently** The youth lives on his/her own, has an address, and is able to support and take care of him/herself.
14. **On the Run** Youth has run away from the program and it is not clear where he/she will go.
15. **On the Street** No identifiable place of permanent, stable residence.
16. **In Squat** A facility that has become an informal shelter for runaway and homeless youth and adults. It may be an apartment the leaser allows to be used, an abandoned building, or other location. It usually is temporary, and may be illegally operating.
17. **Educational Institute** A residence at a school, such as a boarding school or college dormitory.
18. **Drug Treatment Center** Residential treatment center focusing on detoxification and substance abuse treatment.
19. **Residential Treatment** Highly structured, intensive 24-hour treatment program that addresses the full range of needs of the youth, including social, educational, mental health and psychological. This residence is different from **Mental Hospital**, response (t).
20. **Mental Hospital** Medical facility providing treatment for psychiatric illness.
21. **Correctional Institute/ Detention Center** A secure facility operated in conjunction with the juvenile justice system.
22. **Other Institution** Institution other than one for drug treatment, psychiatric treatment, education, or detention.
23. **Other Temporary Shelter** A shelter not described by any of the above that provides a temporary place to sleep.

- 24. **Military** A facility operated by a military organization or a residence approved for military personnel.
- 25. **Other** Other living situation not described by (a) through (x) above.
- 26. **Do Not Know** The staff does not have enough information on the youth's living situation to correctly choose a response.

**Primary Living Situation for Past Year:** Indicates the living situation in which the youth spent at least six of the twelve months prior to intake. If the youth did not spend more than six months at one residence during the twelve months prior to intake, the code indicates the residence in which he or she spent the most time during that period. This variable includes the same responses as the variable “Last Living Situation of Youth”.

**Employment Status of Youth:** The response that best describes the youth's employment status at intake.

<i>Code</i>	<i>Response</i>	<i>Description</i>
1.	<b>Full-Time (Over 35 Hours)</b>	Youth is employed and regularly works 35 hours per week or more.
2.	<b>Part-Time</b>	Youth is employed and regularly works less than 35 hours per week.
3.	<b>Seasonal/ Sporadic</b>	Youth is employed occasionally with periods of unemployment interspersed with employment. This includes summer or holiday specific employment.
4.	<b>Not Employed, Looking for Work</b>	Youth has no job and is actively looking for employment.
5.	<b>Not Employed</b>	Youth has been employed but is not currently working because he or she is in school, unable to work, or another reason.



6. **Never Employed** Youth has never been employed because he or she is too young, in school, unable to work, or another reason.
7. **Do Not Know** No information is available on the youth's employment status at intake.

**Have any of the youth's household members run away or been thrown away:** Indicates if at the present or in the past any of the members of the youth's household - **other than the youth currently receiving service** - have run away (by their own decision, were away from home at least overnight) or were thrown away or forced to leave home (left to fend for themselves because their parents or guardians communicated that they would accept no further responsibility for the youth).

**Who are the Youth's Legal Guardians:** Identifies the youth's legal guardian(s) at intake.

<u>Code</u>	<u>Response</u>	<u>Description</u>
<b>FEMALE</b>		
1.	<b>Biological Mother</b>	There is substantial assurance that the parent figure is the natural mother.
2.	<b>Adoptive Mother</b>	The adoptive mother must follow the State's legal definition for adoption.
3.	<b>Stepmother</b>	A female married to the youth's father who has not legally adopted the youth.
4.	<b>Foster Mother</b>	Foster mother as legally defined by a local or State authority.
5.	<b>Parent's Partner</b>	Female involved in an intimate relationship with the youth's parent.
6.	<b>Youth's Spouse/ Partner</b>	Youth's wife or a female involved in an intimate relationship with the youth.
7.	<b>Aunt</b>	Parent's sister, stepsister, or half-sister.

- 8. **Grandmother** Parent's mother, stepmother, or adoptive mother.
- 9. **Sister** Female who shares both biological parents with the youth.
- 10. **Other** Another female not described by any of the above responses is the youth's guardian.

**MALE**

- 11. **Biological Father** There is substantial assurance that the parent figure is the natural father.
- 12. **Adoptive Father** The adoptive father must follow the State's legal definition for adoption.
- 13. **Stepfather** A male married to the youth's mother who has not legally adopted the youth.
- 14. **Foster Father** Foster father as defined by a local or State authority.
- 15. **Parent's Partner** A male involved in an intimate relationship with the youth's parent.
- 16. **Youth's Spouse/  
Partner** Youth's husband or a male involved in an intimate relationship with the youth.
- 17. **Uncle** Parent's brother, stepbrother, or half-brother.
- 18. **Grandfather** Parent's father, stepfather, or adoptive father.
- 19. **Brother** A male who shares both biological parents with the youth.
- 20. **Other** Another male not described by any of the above responses is the youth's legal guardian.

**OTHER**

- 21. **Child Welfare/  
DSS** Public agency charged with ensuring the safety and well-being of children and youth.
- 22. **Juvenile Justice/  
DJS** Public agency responsible to the courts/legal system for ensuring public safety while focusing on the rehabilitation of youth charges with legal offenses.
- 23. **Self** The youth has reached majority according to State law by virtue of age, marriage, or other legal criteria.
- 24. **Do Not Know** The legal guardians of the youth are unknown.

**Who referred the youth to the agency:** The individual or organization through which the youth was sent, advised, or directed to enroll at the agency for treatment, aid, or other information.

<b><u>Code</u></b>	<b><u>Response</u></b>	<b><u>Description</u></b>
1.	<b>Self Referral</b>	The youth came to the agency without any direction from another person or organization.
2.	<b>Parent(s)/Legal Guardian</b>	The youth's parent(s) or guardian directed the youth to agency.
3.	<b>Foster Parent</b>	A foster parent of the youth directed the youth to the agency.
4.	<b>Other Relative</b>	A relative other than the youth's parent or guardian directed the youth to the agency for enrollment.
5.	<b>Other Youth</b>	A youth other than a relative directed the youth to the agency for enrollment.

6.       **Other Adult**               An adult other than one described above directed the youth to the agency for enrollment.
  
7.       **Child Welfare/CPS** Child Welfare, Child Protective Services, or Social Services directed the youth to the agency.
  
8.       **Safe Place**                The youth was directed to the agency for services by a Safe Place Safe Places include community businesses and organizations that agree to be places of contact for runaway and homeless youth. Usually youth may stay at the safe place until staff or volunteers from the local shelter come and pick them up.
  
9.       **Law Enforcement/Police** A legally recognized law enforcement body for a town, city, county, or such as a sheriff's department.
10.      **Juvenile Justice**        Agencies such as, but not limited to, juvenile courts, correctional institutions, and detention facilities, or probation and parole workers.
  
11.      **School Staff**               A staff member of a school directed the youth to the agency for services.
  
12.      **Street Outreach**         A street outreach worker employed by the agency directed the youth to the agency for services. If an outreach worker from another agency referred the youth, choose (o) **Other Youth Services Agency**.
  
13.      **Religious Organization**     Church, temple, or other organized group espousing the tenets of a spiritual or religious teaching.
  
14.      **Other Agency Program**       Another program that is run by the agency that is not Street Outreach.
  
15.      **Other Youth Services Agency** Another agency that provides residential or non-residential services to youth.

- 16. **Other Organization** Another agency not described above.
- 17. **National Switchboard** The youth was directed to the agency by the National Runaway Switchboard.
- 18. **Other Hotline** The youth was directed to the agency by a hotline other than the National Switchboard.
- 19. **Do Not Know** Sufficient information is not available to determine how the youth was referred to the agency.

**Status of Youth:** The youth's status at intake.

<u>Code</u>	<u>Response</u>	<u>Description</u>
1.	<b>At Home</b>	Living at home with parent(s) or legal guardian, at relative's home, or with another responsible adult. This includes youth who are contemplating running <u>and</u> youth who are dealing with other problems but not currently considering running away, even though they may be <b>at risk</b> for future runaway episodes.
2.	<b>Runaway</b>	A youth who, by his/her own decision, is away from home or place of legal residence at least overnight. Generally, runaway actions are taken without the knowledge of the parent or legal guardian in charge of the youth's supervision.
3.	<b>Throwaway</b>	A youth who is left to fend for him/herself because the youth's parents or guardians have evicted him/her from the home and have communicated that they will accept no further responsibility for the youth.

4.       **Homeless**       A youth who is in need of services and is without a place of shelter where he or she can receive supervision and care. For youth who are homeless because they have run away, or were thrown away, from their home, choose **Runaway** or **Throwaway**. Mark this category if a youth is homeless as a result of some family crisis or problem such as parental illness and hospitalization, or family eviction.
  
5.       **Emancipated**     A youth who has reached majority according to State law by virtue of age, marriage, or other legal criteria.
  
6.       **Juvenile Justice Placement**   A youth who has been placed at the youth services agency while under the custody of a Juvenile Services Agency.
  
7.       **Child Welfare Placement**     A youth who has been placed at the youth services agency while under the custody of a Social Services Agency (Child Welfare/Child Protective Services)
  
8.       **Other**             The status of the youth at intake is different than the responses described above.

**Location of Household Relative to the Program:** Indicates the location of the youth's household relative to the program.

**How many times has the youth run away:** Indicates the number, or an estimate of the number, of times youth has run away from home not including the current runaway episode.

**Of these runaway episodes, how many resulted in receipt of services from this agency:** Of the runaway episodes entered, this variable indicates the number of times that the youth has received services from this agency.

**Of these runaway episodes, how many resulted in receipt of services from another agency:** Of the runaway episodes entered, this variable indicates the number, or an approximation of the number, of times that the youth has received services from another agency.

## Intake and Exit Information

The status log tracks the youth's service history at the agency. It contains the dates of entrance and exit for each program in which the youth participated.

**Service Status:** This is an **optional** field. It indicates the service category to which the youth/family is being admitted. A youth's service category can be updated as the youth's status changes.

<u>Code</u>	<u>Response</u>	<u>Description</u>
1.	<b>Full Admission</b>	This category would account for most of the youth being served in any one of the RHY grant programs. It represents youth who have gone through a screening or intake process, and have been admitted for the full range of services offered.
2.	<b>Orientation/ Probation</b>	Category for youth admitted provisionally into a program -- i.e. especially in the TLP programs when a youth's readiness for a full range of services must be demonstrated prior to being granted full admission.
3.	<b>Initial Contact/ Waiting List</b>	Initial information gathered on all clients that are screened for service, even though they not be placed in service until a later date, if ever. This category may help grantees to gather information on the types of youth/families who are seeking services from their agency.
4.	<b>Drop-In</b>	The drop-in category includes two different types of clients. The first represents those youth/families who contact the program for the purpose of receiving brief, immediate, (and often, one time only) service. The second represents those youth who participate in <i>drop-in</i> services on a sporadic basis, such as may occur at a drop-in or recreation center.

- 5. **Hot Line** Category for youth/families who receive telephone hot-line service that accounts for a significant amount of staff time and effort.
- 6. **Street Outreach** Youth seen by street outreach workers as they conduct their outreach activities. Generally, this category would include only those youth with whom some repeated contact had been made, and some basic information been obtained.

**Exit Date:** Indicates the date the youth left the program in the format MM/DD/YY.

**Discharge Status:** Indicates the code that best describes the youth's situation at exit.

<u>Code</u>	<u>Response</u>	<u>Description</u>
1.	<b>Residential Services Completed, Aftercare Planned</b>	Youth has completed planned residential services and an after care program has been developed and agreed upon by both the agency staff and the youth. If the agency treats aftercare services as a separate service component and keeps files on youth receiving aftercare, re-enter the youth on the service log with their new intake date and indicate the youth is entering Non-Residential Services.
2.	<b>Services Completed, No Referral Made</b>	Youth has completed treatment plan at this agency and no referral for additional services has been made.
3.	<b>Services Completed, Referral Made</b>	Youth has completed treatment plan at this agency and a referral organization has been contacted for the youth to receive additional services.
4.	<b>Parent(s) Stopped Services</b>	The youth's parent figure(s) stopped services before the youth completed his/her treatment plan.
5.	<b>Youth Stopped Services</b>	The youth stopped services before completing the treatment plan.



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|----|---|--|
| 6. | <b>Family Moved</b>                       | The youth and/or the youth's family moved before treatment plan was completed.                                       |
| 7. | <b>Youth Violated Program Rules</b>       | The youth was disqualified from services or asked to leave the program because he or she violated some program rule. |
| 8. | <b>Youth Removed by Protective Agency</b> | The youth was removed from the program by Child Protective Services before the treatment plan was completed.         |
| 9. | <b>Other</b>                              | The youth's discharge status is not described by any of the above choices.   |

**Living Situation at Exit** – Includes the most appropriate code to describe the youth's living situation upon exiting their current program category.

<u>Code</u>	<u>Response</u>	<u>Description</u>
1.	<b>Parent/Guardian's Home</b>	The residence of the biological parent(s), adoptive parent(s), or legal guardian.
2.	<b>Other Parent's Home</b>	The residence of the parent who is not the youth's legal guardian.
3.	<b>Relative's Home</b>	The residence of a relative other than the youth's parent(s).
4.	<b>Friend's Home</b>	The residence of a friend not related to the family.
5.	<b>Other Adult's Home</b>	The residence of an adult other than a relative or a friend.
6.	<b>Foster Home</b>	A temporary residence in which the youth has been legally placed by a social services agency.

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| 7.  | <b>Group Home</b>                  | A structured residential program that provides a home-like environment for youth unable to return home, generally for a minimum of three months and a maximum of two years stay.  |
| 8.  | <b>Transitional Living Program</b> | Program for older youth who have no family or State support, to assist them in their move toward self-sufficient living and prevent long-term dependency on social services.  |
| 9.  | <b>Independent Living Program</b>  | A skill-based program that prepares youth in the foster care system to live on their own, independently from that system.   |
| 10. | <b>Job Corps</b>                   | Residential structured educational/vocational training program aimed at developing skills that will lead to self sufficiency.   |
| 11. | <b>Basic Center</b>                | Community-based agency providing core services (shelter, food, clothing, counseling) to runaway and homeless youth. Federal guidelines dictate that youth generally stay at FYSB-funded Basic Centers for two weeks or less.                      |
| 12. | <b>Homeless Family Center</b>      | A program designed to provide shelter and services to homeless families.  |
| 13. | <b>Living Independently</b>        | The youth lives on his/her own, has an address, and is able to support and take care of him/herself.  |
| 14. | <b>On the Run</b>                  | Youth has run away from the program and it is not clear where he/she will go.   |
| 15. | <b>On the Street</b>               | No identifiable place of permanent, stable residence.   |
| 16. | <b>In Squat</b>                    | A facility that has become an informal shelter for runaway and homeless youth and adults. It may be an apartment the leaser allows to be used, an abandoned building, or other location. It usually is temporary, and may be illegally operating. |

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| 17. | <b>Educational Institute</b>                        | A residence at a school, such as a boarding school or college dormitory.  |
| 18. | <b>Drug Treatment Center</b>                        | Residential treatment center focusing on detoxification and substance abuse treatment.  |
| 19. | <b>Residential Treatment</b>                        | Highly structured, intensive 24-hour treatment program that addresses the full range of needs of the youth, including social, educational, mental health, and psychological. This residence is different from Mental Hospital, (response 20). |
| 20. | <b>Mental Hospital</b>                              | Medical facility providing treatment for psychiatric illness.   |
| 21. | <b>Correctional Institute/<br/>Detention Center</b> | A secure facility operated in conjunction with the juvenile justice system.   |
| 22. | <b>Other Institution</b>                            | Institution other than one for drug treatment, psychiatric treatment, education, or detention.  |
| 23. | <b>Other Temporary Shelter</b>                      | A shelter not described by any of the above that provides a temporary place to sleep.   |
| 24. | <b>Military</b>                                     | A facility operated by a military organization or a residence approved for military personnel.  |
| 25. | <b>Other</b>  | Other living situation not described by (a) through (v) above.  |
| 26. | <b>Do Not Know</b>                                  | The staff does not have enough information on the youth's living situation to correctly choose a response.  |

**Employment Status at Exit:** Indicates the code describing the youth's employment status upon exiting the current program category.

<u>Code</u>	<u>Response</u>	<u>Description</u>
1.	<b>Full-Time (Over 35 Hours)</b>	Youth is employed and regularly works 35 hours per week or more.
2.	<b>Part-Time</b>	Youth is employed and regularly works less than 35 hours per week.
3.	<b>Volunteer</b>	Youth regularly performs job tasks under supervision and does not receive financial compensation.
4.	<b>Seasonal/Sporadic</b>	Youth is employed occasionally with periods of unemployment interspersed with the employment. This includes summer or holiday specific employment.
5.	<b>Not Employed, Looking for Work</b>	Youth has no job and is actively looking for employment.
6.	<b>Not Employed</b>	Youth has been employed but is not currently working because he or she is in school, unable to work, or other reason.
7.	<b>Never Employed</b>	Youth has never been employed because he or she is too young, in school, unable to work, or another reason.
8.	<b>Do Not Know</b>	No information is available on the youth's employment status at exit.

**School Program at Exit**: Indicates the code describing the type of school program the youth is attending at exit, or is planning to attend at exit, from the program.

<u>Code</u>	<u>Response</u>	<u>Description</u>
1.	<b>Elem/Middle/ High School</b>	A standard school program which leads to an elementary/middle school certificate or a high school diploma. Do not include special education programs here.
2.	<b>GED</b>	A program that prepares the youth to take the General Education Development test. Earning a GED is equivalent to earning a high school diploma.
3.	<b>Vocational</b>	A vocational education program, prior to completing secondary school, designed to prepare the youth for a vocation such as plumber, electrician, or auto mechanic.
4.	<b>Special Education</b>	A special education program designed to address a diagnosed learning disability, or other developmental disability such as a physical, mental, or emotional handicap.
5.	<b>Alternative/ Homebound Program</b>	Youth is attending either an accredited school that is not part of the traditional public or private school system, or is receiving instructions through an accredited program taught at home.
6.	<b>Post-Secondary Training</b>	The youth has completed secondary school and is attending a post-secondary program other than college, such as a trade school. For example, he or she may be attending an automotive repair school or a beautician academy.
7.	<b>College</b>	A college program, including community college programs.
8.	<b>Not Applicable</b>	The youth was not enrolled in a school program at exit or had no plans to enroll in a school program following program exit.

9. **Do Not Know** There is insufficient information available on the youth's school program at exit to correctly choose a response.

**School Status at Exit**: Indicates the code describing the youth's school attendance status on the day that the youth exits the current program.

<b><u>Code</u></b>	<b><u>Response</u></b>	<b><u>Description</u></b>
1.	<b>Attending School and Regularly</b>	The youth is currently enrolled in an educational program and attends classes regularly, without extended absenteeism.
2.	<b>Graduated High School</b>	The youth has earned a high school diploma.
3.	<b>Completed GED</b>	The youth has earned an equivalent high school diploma through the General Education Development program.
4.	<b>Attending School Irregularly/ Extended Truancy</b>	The youth is currently enrolled in, but frequently absent from the educational program in which he or she is enrolled.
5.	<b>Dropped Out</b>	The youth formally withdrew from school on his/her own initiative prior to completing the course of study.
6.	<b>Suspended</b>	Temporarily removed from school through official school action.
7.	<b>Expelled</b>	Permanently removed from school through official school action.
8.	<b>School Not in Session</b>	The youth's school status at exit cannot be determined because school is recessed for a holiday or vacation.
9.	<b>Do Not Know</b>	There is no information available on the youth's school status at exit.

## **Drug Information**

The youth drug and alcohol assessment section provides a way for agency staff to record and report greater detail regarding specific problems that the youth and family present. This section records the youth's past and current drug and alcohol experiences. This assessment is completed for youth who have identified problems with alcohol, tobacco, or other drugs.

**Has the youth contemplated suicide:** **Yes** if there is reason to believe that the youth's thoughts of suicide may result in a suicide action or if the youth had actually formulated a plan for suicide and had a means by which to kill him/herself. **Yes** if the youth has ever met this criteria. **No** if the youth has never seriously thought about committing suicide.

**Estimate the number of times the youth has attempted suicide:** The actual number or an approximate number of times the youth has tried to kill him/herself. **0** if the youth has never attempted suicide.

**Number of times the youth has been hospitalized after suicide attempts:** The number of times the youth was hospitalized as a result of a suicide attempt. **0** if the youth has never been hospitalized as a result of trying to kill him/herself. This hospitalization may have been for treatment of physical injury or for psychiatric assessment and/or treatment.

### **Frequency and Age at First Use of Many Substances**

For the following substances, indicate the frequency and age at first use.

**Smoked Cigarettes**

**Used Smokeless Tobacco (chewing tobacco, snuff)**

**Had Beer, Wine (other than for religious use) or Wine Coolers**

**Had Liquor (such as rum, vodka, or whiskey)**

**Had Five or More Servings of any Alcohol on the Same Occasion**

**Used Inhalants (glue, paint, rush, cleaning fluids, gasoline)**

**Used Over-the-Counter drugs (diet pills, No-Doz, caffeine) Above Recommended Dosage**

**Frequency of Use** - Indicate the approximate number of times the youth has used the substances listed in their life time and during the past six months. Check **Never Tried** if the youth has never tried a particular substance.

**Age at First Use** - Indicate the youth's age at which he or she first used the substances listed below. If the youth has never used a particular substance, **Never Tried** should be checked and this sections should be left blank.

**Has the youth ever used illicit drugs** - If the youth uses or has used illicit drugs, **Yes** is indicated. If the youth has never used illicit drugs, **No** is indicated, and **related drug questions** have value=**No**.

For the following substances, indicate the frequency and age at first use.

**Used Marijuana/Hashish**

**Used Cocaine (exclude use of crack)**

**Smoked Crack Cocaine (rock)**

**Frequency of Use** - Check the appropriate boxes corresponding to the approximate number of times the youth has used the substances listed in their life time and during the past six months. Check **Never Tried** if the youth has never tried a particular substance.

**Age at First Use** - Check the box corresponding to the youth's age at which he or she first used the substances listed below. If the youth has never used a particular substance, **Never Tried** should be checked and this section should be left blank.



**Has the Youth Ever...** - If youth has ever used illicit drugs, indicate **Yes** for each drug-related activity that the youth experienced. Include experimental use. **No** is recorded if the youth has never used in the specified manner.

**Taken Steroids**

**Taken Stimulants (such as prescription diet pills, uppers, speed, ice)**

**Taken Depressants (such as Valium, quaaludes)**

**Taken Narcotics (such as heroin/smack, codeine, morphine, Dilaudid)**

**Taken Hallucinogens (such as PCP/angel dust, LSD/acid, mescaline, mushrooms, ecstasy)**

**Used Two or More Drugs on the Same Occasion (Exclude alcohol and tobacco or the mixing of alcohol and tobacco with other drugs.)**

**Used Alcohol and Marijuana on the Same Occasion**

**Used a Needle to Inject Cocaine, Heroin, or Other Illicit Drugs**

**Has the Youth Ever Been Asked to Sell Drugs** - **Yes** if the youth indicates that he/she was approached by someone who asked them to sell, or otherwise participate in the selling and illegal distribution of drugs. **No** if the youth indicates that he/she has never been so approached.

**Has the Youth Ever Sold Drugs** - **Yes** if the youth reports actually selling or otherwise participating in the selling or illegal distribution of drugs. **No** if the youth denies selling drugs or participating in their distribution.

**How was the Youth Influenced to Use** - Indicates the choice that best describes the primary factor that first contributed to the youth's own later use of alcohol or other drugs.

**Response**

**Description**

**Parents**

The youth's parents offered the youth alcohol, made alcohol available in the house and did not restrict its use, drank in front of the youth, or in other ways influenced the youth's use of alcohol and/or drugs.

**Other Household**

A member of the youth's household (other than the parent

<b>Member</b>	figures) offered the youth alcohol, made alcohol available in the house and did not restrict its use, drank in front of the youth, or in other ways influenced the youth's use of alcohol and/or drugs.
<b>Friends</b>	The youth's friends offered the youth alcohol or drugs, encouraged the youth to drink or use drugs, or drank/used drugs in front of the youth.
<b>Through Selling It</b>	The youth was encouraged to sell and/or was involved with illegal possession and distribution of drugs.
<b>Other</b>	Other influences, not listed above, contributed to the youth's subsequent ATOD use.

**Household Member's Substance Use** - Drug use is defined here as any use of illicit drugs or use of legal drugs for anything other than their prescribed or intended use, such as use of cough medicine significantly above its recommended dosage. Alcohol abuse refers to situations in which the household member drinks alcoholic beverages with a frequency, quantity, or at a time which is determined by the youth, or staff, to cause problems such as physical, emotional or social harm.

<b><u>Response</u></b>	<b><u>Description</u></b>
<b>Yes</b>	The household member has a history of use of illegal drugs, or abuse of legal drugs or alcohol.
<b>No</b>	The household member has not abused drugs or alcohol.
<b>N/A</b>	The question is not applicable because there was no such household member type residing with the youth.

## **APPENDIX D**

### **PROBLEMS Coding Supplement**

This appendix is meant to serve as a supplement to *Appendix B, Coding Information for RHY92*. Specifically, this appendix provides detailed definitions of the responses for many of the PROBLEMS fields in RHY92.

### **Components of the Unit of Observation**

#### **Center I**

Unique Agency ID Number. This is a required field and is never blank. The first four characters of this field can be used for geographic comparisons. The first two characters represent the region where the agency is located, and the next two characters represent the state the agency is located in. Refer to Appendix I for a Region Map of the U.S.

#### **Youth ID**

Unique Youth ID Number. This is a required field and is never blank. The same youth ID is used when a youth returns to the same agency with a different intake date.

#### **Intake D**

Intake date is recorded as the date the youth enters the program in MM/DD/YY format. This is a required field and is never blank.

### **Youth Problems and Issues**

The remainder of this appendix contains information about issues facing runaway and homeless youth. The information recorded reflects a combination of the staff's and youth's perception of the issues facing them at intake and while participating at the agency.

## Household Dynamics

What follows is a list of potential problems that fall under the heading of household dynamics. These problems are caused by interactions and interrelationships within the household.

<u>Problem</u>	<u>Description</u>
<b>Relationship with Father Figure</b>	Problems exist between the youth and the adult who fulfills the role of the male parent. This may include such problems as poor communications or the father figure is too strict.
<b>Relationship with Mother Figure</b>	Problems exist between the youth and the adult who fulfills the role of the female parent. This may include such problems as poor communications or the mother figure is too strict.
<b>Relationship with Parent's Partner</b>	Problems exist between the youth and the parent's partner, when that partner is not perceived by the youth to be the father/mother figure.
<b>Relationship between Parent Figures</b>	Problems exist between the youth's parent figures which negatively impact the youth.
<b>Relationship with Spouse/Partner</b>	Problems exist between the youth and his/her spouse or partner. This may include such problems as poor communications or other conflict in their relationship.
<b>Relationship with Foster/Group Home Member</b>	Problems exist between the youth and someone in the foster or group home. These problems can include poor communications, lack of clear limits, or inappropriate discipline.
<b>Relationship with Other Household Member</b>	Problems exist between the youth and some member of the household other than the mother, father, parental and/or youth's spouse/partner.
<b>No Parental Figure</b>	Youth is having problems because he or she lives in a household with no parental figure or because the youth has no parental role model.

<b>Youth Unsupervised</b>	The youth lives at home with at least one parent figure, but the parent is not involved in the youth's life. The youth lacks an <u>appropriate</u> adult role model. The youth is left to fend for him/herself.
<b>Divorced Family</b>	The youth is having problems related to his/her parents divorce.
<b>Blended Family</b>	The youth is experiencing problems related to parent's remarriage and resulting new family.
<b>Youth Wants to Live With Other Parent</b>	Problems in cases where the parent figures are living separately and there is conflict as to where the youth wishes to live.
<b>Other</b>	Other household dynamics problem not described above.

### **Housing Issues**

What follows is a list of potential problems that fall under the heading of housing issues. These problems are caused by lack of sufficient housing or shelter.

<b>Youth Homeless</b>	The youth is in need of services, and is without a place of shelter where he or she can receive supervision and care.
<b>Family Homeless</b>	The youth's family is in need of services, and is without a place of shelter where they can both provide and receive care.
<b>Youth Rejected from Homeless Shelter</b>	Includes youth who have been separated from homeless families in order for the family to gain access to a shelter which restricts adolescents.
<b>Custody Change</b>	Youth is unable to deal with potential or new custody situation.
<b>Chose to Leave Previous Residence</b>	The youth voluntarily left a previous residence.

<b>Forced to Leave Previous Residence</b>	The youth is left to fend for him/herself because his previous residence members or parent figures have evicted him/her from the home and have communicated that they will accept no further responsibility for the youth.
<b>Legally Evicted from Previous Residence</b>	A legal action was taken to remove the youth and/or the youth's family from their previous residence.
<b>Other</b>	The youth faces problems caused by a housing issue not addressed by any of the situations described above. This may include a youth whose home is substandard (e.g., no heat in winter).

### **School and Educational Issues**

What follows is a list of potential problems that fall under the heading of school and educational issues.

<b>Bad Grades</b>	The youth is failing school or has very poor grades and low academic achievement.
<b>Illiteracy</b>	The youth lacks sufficient education, especially reading and writing skills.
<b>Learning Disability</b>	The youth has been diagnosed as having a disorder in one or more of the basic psychological processes involved in understanding or using language (spoken or written) which may manifest itself in an imperfect ability to listen, think, speak, read, write, spell, or do mathematical calculations. The term includes such conditions as perceptual handicaps, brain injury, minimal brain dysfunction, dyslexia, and developmental aphasia. The term does not include children who have learning problems which are primarily the result of visual, hearing, or motor handicaps; mental retardation or emotional disturbance; or of environmental, cultural, or economic disadvantage.

<b>Cannot Get Along With Teachers</b>	The youth fights, or has other conflicts, with teacher(s).
<b>Poor School Attendance/Truancy</b>	The youth is cutting classes or skipping school.
<b>Dropped Out</b>	The youth has voluntarily withdrawn from school.
<b>Suspended</b>	The youth has been temporarily removed from school through official school action.
<b>Expelled</b>	The youth has been permanently removed from school through official school action.
<b>Other</b>	The youth has other school or education related problems not described by any of the above responses.

### **Psychological Issues**

What follows is a list of potential problems that fall under the heading of psychological issues. These problems are caused by issues relating to youth mental health status.

<b>Youth Depressed</b>	Youth displays physical and/or emotional signs of depression. Youth may or may not be clinically diagnosed as depressed.
<b>Youth Suicidal</b>	Youth displays behavioral signs of possible suicide, talks about harming him/herself, and/or has attempted suicide before.
<b>Poor Self Image</b>	Youth does not have positive attitudes or feelings about him/herself, has low self-esteem, and/or has feelings of personal failure.
<b>Youth's Sexuality/ Behavior</b>	The youth is having severe personal problems coping with an emerging sexual role. These problems may cause the youth to sexually act out.



<b>Youth's Sexual Orientation</b>	The youth is having trouble dealing with the consequences (feelings of alienation, family rejection) of his/her sexual orientation or preference.
<b>Parent Figure's Sexuality/Behavior</b>	The youth is having severe personal problems coping with a parent figure's sexuality and/or behavior.
<b>Parent Figure's Sexual Orientation</b>	The youth is having trouble dealing with a parent's sexual orientation or preference.
<b>Searching for Biological Parent</b>	The youth is having problems resulting from not being able to locate a biological parent(s).
<b>Racial/Ethnic Identity</b>	The youth is having problems resulting from their race or ethnicity. These problems include feelings of not being accepted and/or not being able to identify with a particular racial or ethnic group.
<b>Loss and Grief Issues of Youth</b>	Unresolved or inadequately resolved grief, such as may result from the death of a loved one or a divorce.
<b>Abandonment</b>	The youth is having trouble resulting from their past or present abandonment by a parental figure or loved one.
<b>Suicidal Friend(s) of Youth</b>	Youth's friend displays behavioral signs of possible suicidal ideation, talks about harming self, or has attempted suicide before. This may affect the youth by making him/her believe suicide is acceptable or by leading him or her to feel loss, anger, or guilt about the friends' situation.
<b>Suicidal Family Member(s)</b>	Youth's family member displays behavioral sign of possible suicidal ideation, talks about harming self, or has attempted suicide before. This may affect the youth by making him/her believe suicide is acceptable or by leading him or her to feel loss, anger, or guilt about the family member's situation.

<b>Witnessed Violent Crime</b>	Youth has problems resulting from witnessing a violent crime, such as murder, rape, or other assault.
<b>Crime Victim</b>	Youth has problems related to being a victim of a violent crime, such as assault, rape, sexual or physical abuse.
<b>Mental Problem of Family Member</b>	A member of the family has been institutionalized and/or diagnosed as having a serious mental health problem.
<b>Other</b>	The youth has a problem resulting from another psychological issue that isn't described above.

### **Health Issues**

What follows is a list of potential problems that fall under the heading of health issues. These problems relate to youth physical well-being.

<b>Youth Has/ Suspects Sexually Transmitted Disease</b>	The youth suspects or knows that he or she has a sexually transmitted disease.
<b>Youth Has/ Suspects HIV/ AIDS Infection</b>	The youth suspects or knows that he or she has Acquired Immunodeficiency Syndrome (AIDS), a disease caused by a retrovirus known as Human Immunodeficiency Virus (HIV) which attacks primarily the immune system and ultimately destroys the ability to ward off disease.
<b>Family Planning</b>	Youth needs help/information /services related to sexual issues and/or birth control.
<b>Pregnancy</b>	
<b>Female</b>	Youth suspects or knows that she is pregnant and this has caused a problem for her.
<b>Male</b>	Youth suspects or knows that he has caused a pregnancy and this has caused a problem for him.

<b>Eating Disorder</b>	The youth has problems resulting from an eating disorder, such as anorexia or bulimia.
<b>Youth Physically Challenged</b>	The youth has a physical disability.
<b>Youth Not Appropriately Using Medication</b>	The youth is incorrectly using their prescribed medication. For example, the youth takes too little or too much medication, or misuses the medication possibly as a way to get attention.
<b>Health Problem of Family Member</b>	The youth has a problem resulting from a family member's health problem.
<b>Other Chronic Health Problem of Youth</b>	The youth has an ongoing, long-term health problem that is not described above.
<b>Other Current Health Problem of Youth</b>	The youth, at the time of receiving agency services, has a problem resulting from a health issue that is not described above.

### **Youth Having Trouble Getting Services**

What follows is a list of potential problems that fall under the heading of difficulty getting services. These problems stem from the fact that the youth needs or wants services and cannot access them because 1) the services are not available in the youth's community, 2) the youth cannot afford the services, 3) the youth does not know how to access services, 4) the youth was refused services, or 5) the youth is unable to obtain needed services for some other reason.

<b>Child Protective Services</b>	Youth is neglected or abused and needs official intervention.
<b>Social Services</b>	Youth is eligible for services and/or financial support.

**Alcohol and Other Drug Treatment Program** Youth needs or wants alcohol or other drug treatment.

**Day Care** Youth needs appropriate adult supervision of his/her own child, in order to pursue school and/or work.

**Education Program** The youth is in need of an education program, such as job corps.

**Other** The youth needs and is unable to access services, other than those described above.

### **Physical Abuse/Assault**

What follows is a list of potential problems that fall under the heading of physical abuse and assault. These problems reflect the infliction of physical injury by punching, beating, kicking, biting, burning, or otherwise harming a child. Although the injury is not an accident, the parent, caretaker, or other person, may not have intended to hurt the youth. The injury may have resulted from over-discipline or physical punishment that is inappropriate for the youth's age.

**By Father Figure** The youth has experienced physical abuse by the adult who fulfills the role of the male parent.

**By Mother Figure** The youth has experienced physical abuse by the adult who fulfills the role of the female parent.

**By Parent's Partner** The youth has experienced physical abuse/assault by the parent figure's partner.

**By Spouse/Partner** The youth has experienced physical assault by his/her own spouse or partner.

**By Foster/Group Home Member** The youth has experienced physical abuse/assault by a member of a foster or group home.

**By Other Household Member** The youth has experienced physical abuse/assault by a household member other than one described above.

**By Other Non-Household Member** The youth has experienced physical abuse/assault by a person not residing in their household.

**Domestic Violence** Physical conflict among any members of the family.

**Youth Assaulting Other** The youth has physically abused/assaulted another person.

**Other** Other physical abuse/assault issue not described above.

### **Sexual Abuse/Assault**

What follows is a list of potential problems that fall under the heading of sexual abuse and assault. These problems reflect sexual abuse and sexual assault and include the following: fondling a child's genitals, intercourse, incest, rape, sodomy, exhibitionism, and sexual exploitation. To be considered child abuse these acts have to be committed by a person responsible for the care of the youth (for example, a parent, a baby sitter, or a day care provider.) If a person, other than one responsible for the care of the youth has committed one of these acts, it would be considered sexual assault. Responses represent both present abuse/assault and past abuse/assault that affect the youth.

**By Father Figure** The youth has experienced sexual abuse by the adult who fulfills the role of the male parent.

**By Mother Figure** The youth has experienced sexual abuse by the adult who fulfills the role of the female parent.

**By Parent's Partner** The youth has experienced sexual abuse/assault by their parent figure's partner.

**By Spouse/Partner** The youth has experienced sexual assault by their spouse or partner.

**By Foster/Group Home Member** The youth has experienced sexual abuse/assault by a member of his or her foster or group home.

**By Other Household Member** The youth has experienced sexual abuse/assault by a household member other than one described above.

**By Other Non-Household Member** The youth has experienced sexual abuse/assault by a person not residing in the youth's household.

**Youth Assaulting Other** The youth has sexually abused/assaulted another person.

**Other** Other sexual abuse/assault issue not described above.

### **Emotional Abuse**

What follows is a list of potential problems that fall under the heading of emotional abuse. These abuse problems reflect acts or omissions by the parents or other persons responsible for the youth's care that have caused or could cause serious behavioral, cognitive, emotional, or mental disorders. In some cases of emotional/psychological abuse the parental acts alone, without any harm evident in the youth's behavior or condition, are sufficient to be called emotional/psychological abuse. For example, the parents/caretaker use of extreme or bizarre forms of punishment, such as confinement of a child in a dark closet, or refusal to acknowledge the youth's presence in the household.

**By Father Figure** The youth has experienced emotional abuse by the adult who fulfills the role of the male parent.

**By Mother Figure** The youth has experienced emotional abuse by the adult who fulfills the role of the female parent.

**By Parent's Partner** The youth has experienced emotional abuse by their parent figure's partner.

**By Spouse/Partner** The youth has experienced emotional abuse by their spouse or partner.

**By Foster/Group Home Member** The youth has experienced emotional abuse by a member of their foster or group home.

**By Other Household Member** The youth has experienced emotional abuse by a household member besides the youth's parent figures, parent figure's partner, own partner, or a member of the foster/group homes.

**By Other Non-Household Member** The youth has experienced emotional abuse by a person who does not live in the same household.

**Youth Abusing Household Member** The youth has emotionally abused a household member.

**Other** Other emotional abuse issue not described above.

### **Alcohol and Other Drug Abuse**

What follows is a list of potential problems that fall under the heading of alcohol and other drug abuse. The problems reflect any illegal use of alcohol or illicit drugs, or abuse of legal or prescription drugs. Alcohol abuse includes any use of alcohol by an individual under the legal age. Abuse of legal or prescription drugs can include drug use that causes physical, emotional, or educational problems for the individual. If alcohol or drug abuse is checked as a problem for the youth, the Alcohol and Drug Assessment Information section should be completed.

**Substance Abuse by Family Member** A household member, as defined above, uses substances to the extent that it causes a life problem.

**Substance Abuse by Spouse/Partner** The youth's spouse/partner uses substances to the extent that it is causing life problems.

**Substance Abuse by Youth** The youth uses illegal substances to the extent that it is causing life problems.



**Other** Other alcohol and other drug abuse issue not described above.

### **Socialization Issues**

What follows is a list of potential problems that fall under the heading of socialization issues. These problems are caused by difficulties interacting with others, living in a socially organized environment, and/or knowing how to cooperate with other people.

**Lack of Social Skills** The youth severely lacks skill necessary to interact and/or communicate with people in their environment.

**Problem with Peers** The youth has problems getting along with their peers or has problems resulting from their relationships with peers.

**Violent Youth Behavior** The youth displays violent or out of control behavior.

**Gang Involvement By Youth** The youth is a member of, or involved with, a gang.

**Cult Involvement** The youth is a member of, or involved with, a cult.

**Survival Sex** The youth, regardless of gender, uses sex in exchange for basic necessities such as food, or a place to sleep.

**Prostitution** The youth, regardless of gender, is receiving money or other support in exchange for sex. The youth perceives activities more as a job with which to earn money than as merely a way to survive.

**Selling Drugs** The youth is illegally exchanging drugs for money.

**Other** The youth is having problems, other than those described above, interacting with people outside their household.

## Neglect

What follows is a list of potential problems that fall under the heading of neglect. Neglect is characterized by failure to provide for the youth's basic needs. Neglect can be physical, educational, or emotional. Physical neglect includes refusal of, or delay in seeking, health care, abandonment, expulsion from home or not allowing a runaway to return home, and inadequate supervision. Educational neglect includes permission of chronic truancy, failure to enroll a youth of mandatory school age, and inattention to a special educational need. Emotional neglect includes refusal of or failure to provide needed psychological care and nurturing support.

**By Father Figure** The youth has experienced neglect by the adult who fulfills the role of the male parent.

**By Mother Figure** The youth has experienced neglect by the adult who fulfills the role of the female parent.

**By Parent's Partner** The youth has experienced neglect by the parent figure's partner.

**By Spouse/Partner** The youth has experienced neglect by a spouse or partner.

**By Foster/Group Home Member** The youth has experienced neglect by a member of a foster or group home.

**By Other Household Member** The youth has experienced neglect by another family member that is not listed above.

**Youth Neglecting Child** The youth is neglecting his/her own child.

**Youth Neglecting Spouse/Partner** The youth is neglecting his/her own spouse or partner.

**Other** Other neglect issue not described above.



## **Involvement with the Justice System**

What follows is a list of potential problems that fall under the heading of involvement with the justice system. These problems reflect the fact that an individual is currently, or has been, charged with a status offense, with criminal behavior, or is on probation or parole. The legal definitions reflect local community definitions for the following choices:

**Youth Charged with Misdemeanor**

**Youth Charged with Felony**

**Alcohol or Other Drug Possession/Distribution (Youth)**

**Drug Possession/Distribution (Parent Figure)**

**Youth on Probation/Suspended Sentence**

**Status Offense**      An offense that comes under the jurisdiction of the juvenile justice system by virtue of the fact that it was committed by a minor (eg. running away from home).

**Use of Guns/Weapons**

**Youth on Parole**

**Youth in Need of Supervision**

**Household Member**      A person residing in the youth's household is currently or has been charged with a status offense, charged with criminal behavior, or is on probation, and this involvement is causing problems in the youth's life.

**Spouse/Partner**      The youth's spouse or partner is currently or has been charged with a status offense, with criminal behavior, or is on probation and this involvement with the Justice System is causing problems in the youth's life.

**Immigration/  
Naturalization**      The youth is encountering legal difficulties related to immigration or naturalization.

**Other**      The youth has other involvement with the justice system not described above.

## **Unemployment**

What follows is a list of potential problems that fall under the heading of unemployment. These problems reflect difficulty due to the unemployment of one of the following persons:

- |                           |   |
|---------------------------|---|
| <b>Father Figure</b>      | The youth is having problems resulting from the unemployment of the adult who fulfills the role of the male parent.   |
| <b>Mother Figure</b>      | The youth is having problems resulting from the unemployment of the adult who fulfills the role of the female parent. |
| <b>Parent's Partner</b>   | The youth is having problems resulting from the unemployment of the parent figure's partner.                          |
| <b>Spouse/Partner</b>     | The youth is having problems resulting from the unemployment of his/her spouse or partner.                            |
| <b>Youth Unemployment</b> | The youth is have problems resulting from his/her own unemployment.   |
| <b>Other</b>              | Another unemployment issue is causing the youth problems.   |

**APPENDIX E**

**SERVICES Coding Supplement**

This appendix is meant to serve as a supplement to *Appendix B, Coding Information for RHY92*. Specifically, this appendix provides detailed definitions of the responses for many of the SERVICES fields in RHY92.

## **Components of the Unit of Observation**

### **Center I**

Unique Agency ID Number. This is a required field and is never blank. The first four characters of this field can be used for geographic comparisons. The first two characters represent the region where the agency is located, and the next two characters represent the state the agency is located in. Refer to Appendix I for a Region Map of the U.S.

### **Youth ID**

Unique Youth ID Number. This is a required field and is never blank. The same youth ID is used when a youth returns to the same agency with a different intake date.

### **Intake D**

Intake date is recorded as the date the youth enters the program in MM/DD/YY format. This is a required field and is never blank.

## **Service Information**

The remainder of this appendix contains information about services provided to the youth either directly by the agency, through a coordinating agency, or through referral while the youth is on an active caseload at the agency. The “Services To Youth” section was completed at the youth's exit from the program or at appropriate milestones in the treatment process to ensure that all services delivered were noted. Each time the youth left/exited one agency program, the “Services To Youth” section was updated.

## **Provision of Services**

The 1995 RHY MIS data, in its original form, included information about who provided each service to each youth. However, the RHY MIS data files that are released by NDACAN include only limited information about who provided services. **The released files indicate only whether or not a service was provided by the original agency.** This information is imbedded in the coding for each of the service variables in SERVFILE. For information about the service variables and their coding, refer to Appendix D, Coding Information for SERVFILE.

## **Counseling/Therapy**

What follows is a list of services that fall under the heading of counseling and therapy. These services reflect the provision of guidance, support, and advice designed to alleviate the problems that contributed to the youth's running away or being homeless, resolve intra-family problems, reunite such youth with their families whenever appropriate, and to help them decide upon a future course of action.

<u>Response</u>	<u>Description</u>
<b>Crisis Intervention</b>	Process by which the immediate situation is assessed and immediate alternative actions are evaluated for the purpose of diffusing fear/anxiety so safety can be assured and longer term services can be introduced.
<b>Individual (Youth)</b>	Provision of guidance, support, and advice to the youth on a one-to-one basis designed to focus on casework goals.
<b>Individual (Parent)</b>	Provision of guidance and counseling to parent figure(s) around the issues of parenting.



<b>Family</b>	Provision of a forum for family members to explore their relationships, expectations, and patterns of interactions with the goal of making positive changes.
<b>Home Based</b>	Provision of services to the youth and family in their home environment.
<b>Group (Youth)</b>	Services to a group of youth to promote sharing of similar situations and feelings, and allow for feedback and learning from other youth.
<b>Group (Parent)</b>	Services to a group of parents to promote sharing of similar situations and feelings, and allow for feedback and learning from other parents.
<b>Outdoor Adventure Challenge</b>	Structured activities, generally physically challenging and requiring risk on behalf of the participant, which are therapeutic and can improve the participant's sense of self. These activities include one-time activities or formal programs/classes occurring over a scheduled period of time. Examples are ropes courses, camping, survival hikes, and other trust activities.
<b>Peer (Youth)</b>	Helping services provided by trained youth volunteers or staff to the clientele.
<b>Expressive/Art</b>	Use of art, music, movement, or other expressive media to encourage communication of problems and feelings.
<b>Mediation</b>	Negotiation, problem solving, or conflict resolution services provided by a professional with specialized mediation training/certification.
<b>Other</b>	Other counseling or therapy that is not described above.

## Youth Education

What follows is a list of services that fall under the heading of youth education.

<u>Response</u>	<u>Description</u>
<b>Assessment</b>	Evaluation of level of learning and/or presence of learning disabilities. Assessment can include time spent testing the youth, checking school records, or talking with the youth's past teachers.
<b>Tutoring</b>	Assistance given to youth to help with regular school work.
<b>Alternative Education</b>	Temporary provision of class work activities in lieu of regular school attendance.
<b>GED Prep/Test</b>	Services aimed at helping youth pass the General Education Development test, which results in a certificate equivalent to a high school diploma.
<b>Vocational Training</b>	Services aimed at training youth for a particular vocation. For example, training for a trade such as plumber or electrician.
<b>Other</b>	Educational services not described above.

## Life Skills Training

What follows is a list of services that fall under the heading of life skills training.

<u>Response</u>	<u>Description</u>
<b>Communication Skills</b>	Training in ways to more accurately and effectively convey an intended message.
<b>Assertiveness</b>	Training in developing skills to distinguish valid "self advocacy" from aggression.

<b>Conflict Resolution</b>	Practice in the steps of problem solving and negotiation.
<b>Goal Setting/ Life Planning</b>	Training in identifying skills, setting priorities, and making a plan for reaching adult independence.
<b>Budgeting</b>	Learning to develop and maintain a financial plan, checking and saving accounts, and credit.
<b>Employment</b>	Practicing job searches, filling out applications, interviewing, and job maintenance skills.
<b>Consumerism</b>	Training in comparative shopping, unit pricing, and other issues that lead to economically wise purchasing.
<b>Hygiene</b>	Learning how to appropriately care for self including hair, skin, teeth, and clothing.
<b>Sex Education</b>	Basic information about sexuality, reproduction, birth, sexually transmitted diseases, birth control, and relationships.
<b>Parenting Skills</b>	Development of skills for effective parenting based on sound knowledge of child development. This may include learning communication skills, limit-setting, and positive reinforcement.
<b>Nutrition</b>	Training on how to choose, purchase, store, and prepare healthy food, for adequate dietary needs.
<b>Leisure Skills</b>	Identifying healthy activities for recreation and relaxation.
<b>Household Management</b>	Training in skills for maintaining a day-to-day routine in the home, including cleaning, laundry, and other housekeeping tasks.
<b>Other</b>	Life skills training not described above.

## Phone Services

What follows is a list of services that fall under the heading of phone services.

<u>Response</u>	<u>Description</u>
<b>Crisis Counseling</b>	Telephone intervention to help callers define their problems and explore possible immediate alternative actions.
<b>Information and Referral</b>	Provision of information about tangible services and/or resources from which the caller may receive help.
<b>Advocacy</b>	Efforts made on behalf of the youth/family (eg. arranging for the youth to receive low cost tutoring).
<b>Other</b>	Telephone services not described above.

## Basic Support Services

What follows is a list of services that fall under the heading of basic support services.

<u>Response</u>	<u>Description</u>
<b>Food</b>	Provision of meals to youth while in the care of the program.
<b>Clothing</b>	Provision of articles of clothing (shoes, underwear, shirts, etc.) for the youth to keep.
<b>Emergency Shelter</b>	Provision of temporary, short-term, overnight lodging and/or non-residential shelter services during the day, in response to a crisis situation.
<b>Transportation</b>	Provision of money for transportation or the actual transport of the youth during their stay, such as between the project and the youth's home or an alternative living arrangement.
<b>Other</b>	Basic life support services not described above.

## Health Care

What follows is a list of services that fall under the heading of health care.

<u>Response</u>	<u>Description</u>
<b>General Medical</b>	Provision of general health care or surgical services by licensed medical practitioners. This includes testing and/or treatment of males for sexually transmitted diseases.
<b>Dental</b>	Assistance of dentist or dental technician in assessing and dealing with problems of the teeth or gums.
<b>Psychological or Psychiatric</b>	Provision of emergency assessment or routine treatment services by a licensed/certified medical health professional.
<b>Substance Abuse Assessment</b>	Comprehensive evaluation of an individual's current and/or past involvement with alcohol and other drugs, and potential need for treatment.
<b>Alcohol and Other Drug Treatment</b>	Provision of alcohol and other drug intervention or treatment aimed at stopping the use of alcohol or other drugs.
<b>Eating Disorders</b>	Provision of medical care to treat and/or cure an eating disorder.
<b>Gynecological</b>	Testing and/or treatment by medical professional for sexually transmitted diseases, pelvic inflammatory disease, or birth control/family planning. This also includes pregnancy testing.
<b>Pre-Natal</b>	Provision of medical care for a pregnant woman and her unborn child, and neo-natal care immediately following delivery and childbirth.
<b>HIV/AIDS Related</b>	Testing, counseling, and/or treatment of HIV infection and complications resulting from the HIV infection.

**Other** Health care services not described above.

### **Alcohol and Other Drug Prevention**

What follows is a list of services that fall under the heading of alcohol and other drug prevention.

<u>Response</u>	<u>Description</u>
<b>Education/ Training</b>	Presentation of materials (pamphlets, films, lectures, etc.) to increase knowledge of alcohol, drugs, and the effects and consequences of their use.
<b>Positive Peer Leadership</b>	Use of an interactive system designed to increase the positive influence of peers.
<b>Alternative Activities/Recreat.</b>	Recreational, cultural, social, or other events designed to divert youth from alcohol or other drug use.
<b>Refusal Skills</b>	Training and practice in ways to resist pressure to use alcohol or other drugs.
<b>Substance Abuse Screening</b>	Initial assessment of an individual's current and/or past involvement with alcohol and other drugs. Initial screen often precedes comprehensive assessment (see Health Care).
<b>Other</b>	Alcohol and other drug prevention programs not described above.

## **Alternate Housing**

What follows is a list of services that fall under the heading of alternate housing. The services refer to active assistance, as part of a treatment plan, in finding a place for the youth to live other than from where he or she ran or resided prior to coming to the project.

<u>Response</u>	<u>Description</u>
<b>Other Youth Shelter</b>	Community-based program providing core services (shelter, food, clothing, counseling) to runaway, homeless, and other youth in a crisis situation.
<b>Foster Home</b>	A private home, licensed by the State to provide care for one or more youth in State custody.
<b>Host Home</b>	A private home in which the residents agree to provide short-term shelter for a runaway or homeless youth. Do not include Independent or Transitional Living Programs in this category.
<b>Group Home</b>	A home generally run by a public agency to provide shelter services to youth in the foster or emergency care system.
<b>Transitional Living Program</b>	A program for older youth who have no family or state support, designed to assist them in their move toward self-sufficient living and prevent long-term dependency on social services. Residential services may be provided in group homes, host homes, or apartments.
<b>Independent Living Program</b>	A skill-based program that prepares youth in the foster care system to live on their own, independently from that system. Residential services may be provided in group homes, host homes, or apartments.
<b>Job Corps (Residential)</b>	Structured education/vocational training program aimed at developing skills that will lead to self sufficiency. Youth live on-site while receiving services.

**Residential Treatment** Highly structured, intensive 24-hour treatment program that addresses the full range of needs of the youth, including social, educational, mental health and psychological.

**Other** Housing referral or placement not described above.

### **Legal Services**

Legal services are typically provided through referral or a coordinating agency, legal counsel or via advice provided to the youth. Legal services generally are not provided by a youth services agency unless the agency has an attorney or other person licensed to give legal advice or assistance to the staff. Legal services may have been provided either **to the Youth** or **to the Family**.

### **Recreational Activities**

What follows is a list of services that fall under the heading of recreational activities.

<u>Response</u>	<u>Description</u>
<b>Organized Sports Activities</b>	Athletic participation, either individual or team.
<b>Arts &amp; Crafts</b>	Creative activities using a variety of media (eg, clay, paint, or fabric).
<b>Field Trips</b>	Visits to historic/cultural/natural points of interest or other events.
<b>Other</b>	Recreational activities not listed above.



## Support Groups

What follows is a list of services that fall under the heading of support groups.

<u>Response</u>	<u>Description</u>
<b>Alcoholics Anonymous</b>	Mutual support group for individuals who have problems with alcohol.
<b>NA/CA</b>	Mutual support group for individuals who have a problem with drugs other than alcohol, especially cocaine (NA=Narcotics Anonymous, CA=Cocaine Anonymous).
<b>Alateen</b>	Mutual support group for teens who have been affected by alcoholism or drug abuse by a family member, usually a parent.
<b>Alanon</b>	Mutual support group generally for adults who are in a relationship with someone who abuses alcohol or other drugs.
<b>Spiritual</b>	Mutual support group organized and operated by members of a church, temple, or other recognized religious organization.
<b>Other</b>	Support group not listed above.

## Employment

What follows is a list of services that fall under the heading of employment.

<u>Response</u>	<u>Description</u>
<b>Career Counseling</b>	Guidance regarding career choices including: skill, aptitude, and interest assessment; information about job training requirements; and evaluation of opportunities within specific fields.
<b>Job Training</b>	Specific skills training to develop competencies required for a particular job.
<b>Employability Training</b>	Training in skills necessary for obtaining and keeping a job. It may include a wide range of topics such as resume writing, interviewing skills, time management, or organizational skills.
<b>Employment Referral/Placement</b>	Provision of the link between individuals in need of a job with appropriate job opportunities. The agency may refer a youth to another resource, or may serve as the hiring agent.
<b>Job Corps (Non-Residential)</b>	Structured education/vocational training program aimed at developing skills that will lead to self sufficiency.
<b>Other</b>	Any employment services that are not described in the above categories.

## Area Services

What follows is a list of services that fall under the heading of area services.

<u>Response</u>	<u>Description</u>
<b>Outreach</b>	Services provided directly to youth outside of the agency facility. This may include on-foot or van outreach to youth on the street, staff availability at popular youth congregating locations (fast food restaurants, malls, arcades), or extension of services to youth in generally non-accessible facilities such as detention centers.
<b>Promotional/ Instructional Materials</b>	Provision of informative materials (books, pamphlets, flyers) on topics related to youth needs.
<b>Language Assistance</b>	Interpretive services for youth and families who have special language needs. This may include signing services for hearing impaired youth or translators for foreign speaking youth.
<b>Respite Care</b>	Child care staff or other resources provided for the purpose of giving parent figures/primary care givers time off from their responsibilities of caring for a youth with special needs. Respite care may be provided in the youth's home, or at a program facility.
<b>Community Education Events</b>	Community based activities designed to inform attendees regarding a defined topic. A program may sponsor such activities or support the youth's attendance at such events sponsored by other agencies.
<b>Training/ Consultation</b>	Educational and informational exchanges designed to strengthen and enhance the skills of other professionals. Generally provided only to other professional staff, rather than directly to your or families.
<b>Other</b>	Other area services not described in the above categories.



## **APPENDIX F**

### **Mapping Variables from the 1992-1995 RHY MIS to the 1996 Dataset**

Mapping Variables from the 1992-1995 RHY MIS Dataset to the 1996 Dataset					
Position	RHY 92 Name	RHY 92 Label	RHY 96 Database	RHY 96 Name	
400	A01	Crisis Intervent	SERVFILE	cns_cris	
401	A02	Individual (Youth)	SERVFILE	cns_ityh	
402	A03	Individual (Parent)	SERVFILE	cns_ifml	
403	A04	Family	SERVFILE	cns_faml	
404	A05	Home-Based	SERVFILE	cns_home	
405	A06	Group (Youth)	SERVFILE	cns_gyth	
406	A07	Group (Parent)	SERVFILE	cns_gfml	
407	A08	Outdoor Adven	SERVFILE	cns_advn	
408	A09	Peer (Youth)	SERVFILE	cns_peer	
409	A10	Expressive/Art	SERVFILE	cns_expr	
410	A11	Other	SERVFILE	cns_othr	
392	ADOPTDAD	guardian includ	Not included	Not included	
391	ADOPTMOM	guardian includ	Not included	Not included	
172	AGE	Age	Not included	Not included	
482	AGECAT	age in categori	Not included	Not included	
394	AGENCYGD	public agency is	Not included	Not included	
342	ALCOHOL	Ever used any a	Not included	Not included	
345	ALCOHOL6	Used alcohol in	Not included	Not included	
384	ALTERHOU	Received altern	Not included	Not included	
338	ANYABUSE	Received any a	Not included	Not included	
339	ANYPERP	Perpetrated an	Not included	Not included	
364	ANYSUBST	Ever used any s	Not included	Not included	
373	AOD	Any alcohol or	Not included	Not included	
383	AODPREV	Received alchol	Not included	Not included	
411	B01	Assessment	SERVFILE	yed_asse	
412	B02	Tutoring	SERVFILE	yed_tutr	
413	B03	Alternative Edu	SERVFILE	yed_altr	
414	B04	GED Prep/Test	SERVFILE	yed_gedp	
415	B05	Vocational Trai	SERVFILE	yed_voca	
416	B06	Other	SERVFILE	yed_othr	
381	BASICSUP	Received basic	Not included	Not included	
343	BEERWIN6	Used beer/wine	Not included	Not included	
340	BEERWINE	Ever used beer	Not included	Not included	
352	BINGE	Ever binge-drar	Not included	Not included	
353	BINGE6	Binge-drunk in	Not included	Not included	
390	BIODAD	guardian includ	Not included	Not included	
395	BIOGUARD	intermediate st	Not included	Not included	
389	BIOMOM	guardian includ	Not included	Not included	
393	BIORENTS	both biological	Not included	Not included	
488	BIRTH_MO	Birth month	DEMOFILE	BIRTH_MO	
489	BIRTH_YR	Birth year	DEMOFILE	BIRTH_YR	
417	C01	Communication	SERVFILE	skl_comm	

418	C02	Assertiveness	SERVFILE	skl_asrt	
419	C03	Conflict Resolu	SERVFILE	skl_conr	
420	C04	Goal Setting/Li	SERVFILE	skl_goal	
421	C05	Budgeting	SERVFILE	skl_budg	
422	C06	Employment	SERVFILE	skl_empl	
Position	RHY 92 Name	RHY 92 Label	RHY 96 Databa	RHY 96 Name	
423	C07	Consumerism	SERVFILE	skl_cons	
424	C08	Hygiene	SERVFILE	skl_hygi	
425	C09	Sex Education	SERVFILE	skl_sexe	
426	C10	Parenting Skills	SERVFILE	skl_prnt	
427	C11	Nutrition	SERVFILE	skl_nutr	
428	C12	Leisure Skills	SERVFILE	skl_leis	
429	C13	Household Man	SERVFILE	skl_hous	
430	C14	Other	SERVFILE	skl_othr	
2	CENTER_I	CENTER_ID	DEMOFILE	CENTER_I	
348	CHEW	Ever chewed to	Not included	Not included	
349	CHEW6	Chewed tobacc	Not included	Not included	
328	CHILDYN	Has children	Not included	Not included	
484	CLUSTER	Count of cluste	Not included	Not included	
360	COCAINE	Ever used powe	Not included	Not included	
361	COCAINE6	Used powder co	Not included	Not included	
356	COUNTER	Ever abused OT	Not included	Not included	
357	COUNTER6	Abused OTC dr	Not included	Not included	
362	CRACK	Ever used crack	Not included	Not included	
363	CRACK6	Used crack in t	Not included	Not included	
431	D01	Crisis Counselin	SERVFILE	phn_cris	
432	D02	Information and	SERVFILE	phn_info	
433	D03	Other	SERVFILE	phn_othr	
196	DAY_AWAY	How long away	DEMOFILE	DAY_AWAY	
167	DISCHARG	Discharge statu	DEMOFILE	DISCHARG	
197	DISTANCE	Distance ran fr	DEMOFILE	DISTANCE	
490	DRUGFLAG	Drug informatio	DEMOFILE	DRUGFLAG	
481	DURATION	How many days	Not included	Not included	
367	DYNAMICS	Any household	Not included	Not included	
434	E01	Food	SERVFILE	bsc_food	
435	E02	Clothing	SERVFILE	bsc_clot	
436	E03	Emergency She	SERVFILE	bsc_shlt	
437	E04	Transportation	SERVFILE	bsc_tran	
438	E05	Other	SERVFILE	bsc_othr	
155	EIGHT_A	INFLUENCED AI	DEMOFILE	EIGHT_A	
156	EIGHT_B	INFLUENCED DI	DEMOFILE	EIGHT_B	
332	EMOTION	Received emot	Not included	Not included	
169	EMPLOY	EMPLOYMENT /	DEMOFILE	EMPLOY	
388	EMPLOYME	Received emplc	Not included	Not included	
176	ENGLISH	Would services	DEMOFILE	ENGLISH	

175	ETHNIC	ETHNICITY	DEMOFILE	ETHNIC	
398	EVER_RAN	ever ran away	Not included	Not included	
166	EXIT_DT	Exit date	DEMOFILE	EXIT_DT	
168	EXIT_SIT	LIVING SITUATI	DEMOFILE	EXIT_SIT	
439	F01	General Medica	SERVFILE	hcr_gnrl	
440	F02	Dental	SERVFILE	hcr_dent	
441	F03	Psychological/P	SERVFILE	hcr_psyc	
442	F04	Substance Abu	SERVFILE	hcr_subs	
443	F05	Alcohol/Other	SERVFILE	hcr_drug	
444	F06	Eating Disorder	SERVFILE	hcr_eatd	
Position	RHY 92 Name	RHY 92 Label	RHY 96 Databa	RHY 96 Name	
445	F07	Gynecological	SERVFILE	hcr_gyne	
446	F08	Pre-Natal	SERVFILE	hcr_pren	
447	F09	HIV/AIDS Relat	SERVFILE	hcr_aids	
448	F10	Other	SERVFILE	hcr_othr	
483	FAMABUSE	a household me	Not included	Not included	
327	FEMP2	FATHER FIGURE	DEMOFILE	FEMP	
111	FIVE_A	CONTEMPLATE	DEMOFILE	FIVE_A	
112	FIVE_B	NUMBER OF SU	DEMOFILE	FIVE_B	
113	FIVE_C	NUMBER OF HO	DEMOFILE	FIVE_C	
366	FY	Fiscal year	Not included	Not included	
449	G01	Education/Infor	SERVFILE	adpadp_educ	
450	G02	Positive Peer Le	SERVFILE	adp_peer	
451	G03	Alternative Act	SERVFILE	adp_altr	
452	G04	Refusal Skills	SERVFILE	adp_refu	
453	G05	Substance Abu	SERVFILE	adp_scrn	
454	G06	Other	SERVFILE	adp_othr	
396	GARD3	intermediate va	Not included	Not included	
183	GRADE	LAST GRADE C	DEMOFILE	GRADE	
193	GUARDIA1	LEGAL GUARDIA	DEMOFILE	GUARDIA1	
192	GUARDIAN	PRIMARY LEGAL	DEMOFILE	GUARDIAN	
455	H01	Other Emergen	SERVFILE	ahs_shlt	
456	H02	Foster Home	SERVFILE	ahs_fost	
457	H03	Host Home	SERVFILE	ahs_host	
458	H04	Group Home	SERVFILE	ahs_grup	
459	H05	Transitional Liv	SERVFILE	ahs_tran	
460	H06	Independent Liv	SERVFILE	ahs_inde	
461	H07	Job Corps	SERVFILE	ahs_jobc	
462	H08	Residential Tre	SERVFILE	ahs_resi	
463	H09	Other	SERVFILE	ahs_othr	
371	HEALTH	Any physical he	Not included	Not included	
382	HEALTHSE	Received health	Not included	Not included	
380	HOTLINE	Received Hotlir	Not included	Not included	
368	HOUSING	Any housing pr	Not included	Not included	
464	I01	To the Youth	SERVFILE	lgl_yuth	



465	I02	To the Family	SERVFILE	Igl_fmly	
354	INHALE	Ever used inhal	Not included	Not included	
355	INHALE6	Used inhalants	Not included	Not included	
4	INTAKE_D	Intake date	DEMOFILE	INTAKE_D	
485	INTAK_DY	Intake day	DEMOFILE	INTAK_DY	
486	INTAK_MO	Intake month	DEMOFILE	INTAK_MO	
487	INTAK_YR	Intake year	DEMOFILE	INTAK_YR	
466	JO1	Organized Spor	SERVFILE	rec_sprt	
467	JO2	Arts and Crafts	SERVFILE	rec_arts	
468	JO3	Field Trips	SERVFILE	rec_trip	
469	JO4	Other	SERVFILE	rec_othr	
375	JUSTICE	Any juvenile jus	Not included	Not included	
470	K01	Alcoholics Anor	SERVFILE	sup_alca	
471	K02	Narcotics/Coca	SERVFILE	sup_naca	
472	K03	Alateen	SERVFILE	sup_alat	
Position	RHY 92 Name	RHY 92 Label	RHY 96 Databa	RHY 96 Name	
473	K04	Alanon	SERVFILE	sup_alan	
474	K05	Other	SERVFILE	sup_othr	
475	L01	Career Counsel	SERVFILE	emp_coun	
476	L02	Job Training	SERVFILE	emp_jtrn	
477	L03	Employment Re	SERVFILE	emp_plac	
478	L04	Job Corps Non-	SERVFILE	emp_jobc	
479	L05	Other	SERVFILE	emp_othr	
385	LEGALSER	Received legal	Not included	Not included	
379	LIFESKIL	Received life sk	Not included	Not included	
203	LIFE_FRQ	Estimated hour	DEMOFILE	LIFE_FRQ	
341	LIQUOR	Ever used liquo	Not included	Not included	
344	LIQUOR6	Used liquor in t	Not included	Not included	
198	LOCATION	NEAREST RELA	DEMOFILE	LOCATION	
185	LST_LIVE	LAST LIVING SI	DEMOFILE	LST_LIVE	
480	MO1	Outreach Servic	SERVFILE	ara_outr	
178	MARITAL	MARITAL STAT	DEMOFILE	MARITAL	
188	MEMP	MOTHER FIGUR	DEMOFILE	MEMP	
336	NEGLECT	Received negle	Not included	Not included	
397	NEWGUARD	combined guar	Not included	Not included	
158	NINE_AA	MOTHER USED	DEMOFILE	NINE_AA	
157	NINE_AD	MOTHER USED	DEMOFILE	NINE_AD	
160	NINE_BA	FATHER USED /	DEMOFILE	NINE_BA	
159	NINE_BD	FATHER USED I	DEMOFILE	NINE_BD	
162	NINE_CA	SPOUSE USED /	DEMOFILE	NINE_CA	
161	NINE_CD	SPOUSE USED I	DEMOFILE	NINE_CD	
164	NINE_DA	OTHER MEMBEF	DEMOFILE	NINE_DA	
163	NINE_DD	OTHER MEMBEF	DEMOFILE	NINE_DD	
399	NUM_AWAY	days away from	Not included	Not included	
200	NUM_CENT	Num episodes r	DEMOFILE	NUM_CENT	

180	NUM_CHIL	How many child	DEMOFILE	NUM_CHIL	
201	NUM_OTHE	Num episodes r	DEMOFILE	NUM_OTHE	
184	NUM_PLAC	Number of livin	DEMOFILE	NUM_PLAC	
199	NUM_RUN	How many time	DEMOFILE	NUM_RUN	
190	OTHER_RH	Other household	DEMOFILE	OTHER_RH	
204	PA01	Father Figure C	PROBFILE	hhd_fath	
205	PA02	Mother Figure C	PROBFILE	hhd_moth	
206	PA03	Parent's Partne	PROBFILE	hhd_part	
207	PA04	Rel between Pa	PROBFILE	hhd_btwn	
208	PA05	Spouse/Partne	PROBFILE	hhd_spou	
209	PA06	Foster/Group H	PROBFILE	hhd_fost	
210	PA07	Other Househo	PROBFILE	hhd_hhdm	
211	PA08	No Parental Fig	PROBFILE	hhd_nopa	
212	PA09	Youth Unsuper	PROBFILE	hhd_unsp	
213	PA10	Divorced Family	PROBFILE	hhd_divc	
214	PA11	Blended Family	PROBFILE	hhd_blnd	
215	PA12	Youth Wants O	PROBFILE	hhd_lwop	
216	PA13	Other Conflict	PROBFILE	hhd_othr	
202	PAYMENT	Primary method	DEMOFILE	PAYMENT	
217	PB01	Youth Homeles	PROBFILE	hou_yhls	
Position	RHY 92 Name	RHY 92 Label	RHY 96 Databa	RHY 96 Name	
218	PB02	Family Homeles	PROBFILE	hou_fhls	
219	PB03	Youth Rejected	PROBFILE	hou_rjct	
220	PB04	Custody Chang	PROBFILE	hou_cstd	
221	PB05	Chose to Leave	PROBFILE	hou_chlv	
222	PB06	Forced to Leav	PROBFILE	hou_fclv	
223	PB07	Legally Evicted	PROBFILE	hou_evct	
224	PB08	Other Housing	PROBFILE	hou_othr	
225	PC01	Bad Grades	PROBFILE	edu_grad	
226	PC02	Illiteracy	PROBFILE	edu_ilit	
227	PC03	Learning Disabi	PROBFILE	edu_ldis	
228	PC04	Cannot Get Alc	PROBFILE	edu_tchr	
229	PC05	Truancy	PROBFILE	edu_trun	
230	PC06	Dropped Out	PROBFILE	edu_drop	
231	PC07	Suspended	PROBFILE	edu_susp	
232	PC08	Expelled	PROBFILE	edu_expl	
233	PC09	Other Educatio	PROBFILE	edu_othr	
234	PD01	Youth Depresse	PROBFILE	psy_depr	
235	PD02	Youth Suicidal	PROBFILE	psy_sucd	
236	PD03	Poor Self Image	PROBFILE	psy_imag	
237	PD04	Youth's Behavi	PROBFILE	psy_sexb	
238	PD05	Y's Sexual Orier	PROBFILE	psy_sxor	
239	PD06	Parent's Behav	PROBFILE	psy_psb	
240	PD07	P's Sexual Orier	PROBFILE	psy_pso	
241	PD08	Searching for B	PROBFILE	psy_srch	

242	PD09	Racial/Ethnic I	PROBFILE	psy_race	
243	PD10	Loss/Grief Issu	PROBFILE	psy_loss	
244	PD11	Abandonment	PROBFILE	psy_aban	
245	PD12	Suicidal Friends	PROBFILE	psy_sufr	
246	PD13	Suicidal Family	PROBFILE	psy_sufa	
247	PD14	Witnessed Viol	PROBFILE	psy_witn	
248	PD15	Crime Victim	PROBFILE	psy_crim	
249	PD16	Family's Ment	PROBFILE	psy_mntl	
250	PD17	Other Psycholo	PROBFILE	psy_othr	
251	PE01	Has/Suspects S	PROBFILE	hth_sxtd	
252	PE02	Has/Suspects H	PROBFILE	hth_aids	
253	PE03	Pregnancy	PROBFILE	hth_preg	
254	PE04	Eating Disorder	PROBFILE	hth_edis	
255	PE05	Physically Chall	PROBFILE	hth_phsl	
256	PE06	Improper Use o	PROBFILE	hth_medi	
257	PE07	Health of Famil	PROBFILE	hth_fmbr	
258	PE08	Other Chronic F	PROBFILE	hth_chro	
259	PE09	Other Current F	PROBFILE	hth_curr	
333	PERPE	Perpetrated em	Not included	Not included	
337	PERPN	Perpetrated ne	Not included	Not included	
331	PERPP	Perpetrated ph	Not included	Not included	
335	PERPS	Perpetrated se	Not included	Not included	
260	PF01	Child Protective	PROBFILE	svc_chps	
261	PF02	Social Services	PROBFILE	svc_socs	
262	PF03	Drug/Alcohol T	PROBFILE	svc_drug	
Position	RHY 92 Name	RHY 92 Label	RHY 96 Databa	RHY 96 Name	
263	PF04	Day Care	PROBFILE	svc_dayc	
264	PF05	Education Prog	PROBFILE	svc_educ	
265	PF06	Other Trouble C	PROBFILE	svc_othr	
266	PG01	Physical Abuse	PROBFILE	paa_fath	
267	PG02	Physical Abuse	PROBFILE	paa_moth	
268	PG03	Physical Abuse	PROBFILE	paa_part	
269	PG04	Physical Abuse	PROBFILE	paa_spou	
270	PG05	Physical Abuse	PROBFILE	paa_fost	
271	PG06	Physical Abuse	PROBFILE	paa_hhdm	
272	PG07	Physical Abuse	PROBFILE	paa_nhhm	
273	PG08	Physical Abuse	PROBFILE	paa_domv	
274	PG09	Physical Abuse	PROBFILE	paa_yass	
275	PH01	Sexual Abuse -	PROBFILE	saa_fath	
276	PH02	Sexual Abuse -	PROBFILE	saa_moth	
277	PH03	Sexual Abuse -	PROBFILE	saa_part	
278	PH04	Sexual Abuse -	PROBFILE	saa_spou	
279	PH05	Sexual Abuse -	PROBFILE	saa_fost	
280	PH06	Sexual Abuse -	PROBFILE	saa_hhdm	
281	PH07	Sexual Abuse -	PROBFILE	saa_nhhm	

282	PH08	Sexual Abuse -	PROBFILE	saa_yass	
330	PHYSICAL	Received physio	Not included	Not included	
283	PI01	Emotional Abus	PROBFILE	ema_fath	
284	PI02	Emotional Abus	PROBFILE	ema_moth	
285	PI03	Emotional Abus	PROBFILE	ema_part	
286	PI04	Emotional Abus	PROBFILE	ema_spou	
287	PI05	Emotional Abus	PROBFILE	ema_fost	
288	PI06	Emotional Abus	PROBFILE	ema_hhdm	
289	PI07	Emotional Abus	PROBFILE	ema_nnhm	
290	PI08	Emotional Abus	PROBFILE	ema_yass	
291	PJ01	Substance Abu	PROBFILE	drg_hhdm	
292	PJ02	Substance Abu	PROBFILE	drg_spou	
293	PJ03	Substance Abu	PROBFILE	drg_yuth	
294	PK01	Lack of Social S	PROBFILE	soc_skill	
295	PK02	Problem with P	PROBFILE	soc_peer	
296	PK03	Violent Youth E	PROBFILE	soc_viol	
297	PK04	Gang Involvement	PROBFILE	soc_gang	
298	PK05	Cult Involvement	PROBFILE	soc_cult	
299	PK06	Survival Sex	PROBFILE	soc_ssex	
300	PK07	Prostitution	PROBFILE	soc_pros	
301	PK08	Selling Drugs	PROBFILE	soc_sell	
302	PK09	Other Social Iss	PROBFILE	soc_othr	
303	PL01	Neglect - Fathe	PROBFILE	ngl_fath	
304	PL02	Neglect - Moth	PROBFILE	ngl_moth	
305	PL03	Neglect - Paren	PROBFILE	ngl_part	
306	PL04	Neglect - Spou	PROBFILE	ngl_spou	
307	PL05	Neglect - Foste	PROBFILE	ngl_fost	
308	PL06	Neglect - Other	PROBFILE	ngl_hhdm	
309	PL07	Youth Neglectir	PROBFILE	ngl_nglc	
310	PL08	Youth Neglectir	PROBFILE	ngl_nglc	
Position	RHY 92 Name	RHY 92 Label	RHY 96 Databa	RHY 96 Name	
311	PM01	Charged with M	PROBFILE	jst_msdm	
312	PM02	Charged with F	PROBFILE	jst_flny	
313	PM03	Drug Possessio	PROBFILE	jst_dds	
314	PM04	Drug Possessio	PROBFILE	jst_drpo	
315	PM05	On Probation/S	PROBFILE	jst_prob	
316	PM06	On Parole	PROBFILE	jst_prol	
317	PM07	In Need of Sup	PROBFILE	jst_supr	
318	PM08	Household Men	PROBFILE	jst_hhdm	
319	PM09	Spouse/Partne	PROBFILE	jst_spou	
320	PM10	Immigration/Na	PROBFILE	jst_immg	
321	PM11	Other Involvement	PROBFILE	jst_othr	
322	PN01	Unemployment	PROBFILE	une_fath	
323	PN02	Unemployment	PROBFILE	une_moth	
324	PN03	Unemployment	PROBFILE	une_part	

325	PN04	Unemployment	PROBFILE	une_spou	
326	PN05	Unemployment	PROBFILE	une_yune	
358	POT	Ever used marij	Not included	Not included	
359	POT6	Used marijuana	Not included	Not included	
179	PREGNANT	PREGNANT	DEMOFILE	PREGNANT	
186	PRM_LIVE	LAST LIVING SI	DEMOFILE	PRM_LIVE	
165	PROG_CAT	PROGRAM CATI	Not included	Not included	
370	PSYCHO	Any psychologi	Not included	Not included	
386	RECREATI	Received recrea	Not included	Not included	
177	REFUGEE	Refugee status	DEMOFILE	REFUGEE	
1	REGION	Region	Not included	Not included	
195	RHY_STAT	STATUS AT INT	DEMOFILE	RHY_STAT	
5	SA01	Crisis Intervent	SERVFILE	cns_cris	
6	SA02	Individual (You	SERVFILE	cns_ityh	
7	SA03	Individual (Pare	SERVFILE	cns_ifml	
8	SA04	Family	SERVFILE	cns_faml	
9	SA05	Home-Based	SERVFILE	cns_home	
10	SA06	Group (Youth)	SERVFILE	cns_gyth	
11	SA07	Group (Parent)	Not included	Not included	
12	SA08	Outdoor Adven	SERVFILE	cns_advn	
13	SA09	Peer (Youth)	SERVFILE	cns_peer	
14	SA10	Expressive/Art	SERVFILE	cns_expr	
15	SA11	Other Counselin	SERVFILE	cns_othr	
	Not Included	Group (Family)	SERVFILE	cns_gfml	
16	SB01	Assessment	SERVFILE	yed_asse	
17	SB02	Tutoring	SERVFILE	yed_tutr	
18	SB03	Alternative Edu	SERVFILE	yed_altr	
19	SB04	GED Prep/Test	SERVFILE	yed_gedp	
20	SB05	Vocational Trai	SERVFILE	yed_voca	
21	SB06	Other Educatio	SERVFILE	yed_othr	
22	SC01	Communication	SERVFILE	skl_comm	
23	SC02	Assertiveness	SERVFILE	skl_asrt	
24	SC03	Conflict Resolu	SERVFILE	skl_conr	
25	SC04	Goal Setting/Li	SERVFILE	skl_goal	
26	SC05	Budgeting	SERVFILE	skl_budg	
Position	RHY 92 Name	RHY 92 Label	RHY 96 Databa	RHY 96 Name	
27	SC06	Employment	SERVFILE	skl_empl	
28	SC07	Consumerism	SERVFILE	skl_cons	
29	SC08	Hygiene	SERVFILE	skl_hygi	
30	SC09	Sex Education	SERVFILE	skl_sexe	
31	SC10	Parenting Skills	SERVFILE	skl_prnt	
32	SC11	Nutrition	SERVFILE	skl_nutr	
33	SC12	Leisure Skills	SERVFILE	skl_leis	
34	SC13	Household Man	SERVFILE	skl_hous	
35	SC14	Other Life Skills	SERVFILE	skl_othr	

181	SCHL_P	School program	Not included	Not included	
182	SCHL_S	SCHOOL STATU	Not included	Not included	
369	SCHOOL	Any school pro	Not included	Not included	
170	SCHOOL_P	SCHOOL PROGR	DEMOFILE	SCHOOL_P	
171	SCHOOL_S	SCHOOL STATU	DEMOFILE	SCHOOL_S	
36	SD01	Crisis Counselin	SERVFILE	phn_cris	
37	SD02	Information and	SERVFILE	phn_info	
38	SD03	Other Hotline S	SERVFILE	phn_othr	
39	SE01	Food	SERVFILE	bsc_food	
40	SE02	Clothing	SERVFILE	bsc_clot	
41	SE03	Emergency She	SERVFILE	bsc_shlt	
42	SE04	Transportation	SERVFILE	bsc_tran	
43	SE05	Other Basic Sup	SERVFILE	bsc_othr	
189	SEMP	SPOUSE/PARTN	DEMOFILE	SEMP	
372	SERVTR0B	Any trouble rec	Not included	Not included	
145	SEVEN_A	USED STERIODS	DEMOFILE	SEVEN_A	
146	SEVEN_B	USED STIMULA	DEMOFILE	SEVEN_B	
147	SEVEN_C	USED DEPRESS	DEMOFILE	SEVEN_C	
148	SEVEN_D	USED NARCOTI	DEMOFILE	SEVEN_D	
149	SEVEN_E	USED HALLUCII	DEMOFILE	SEVEN_E	
150	SEVEN_F	USED TWO OR	DEMOFILE	SEVEN_F	
151	SEVEN_G	USED ALCOHOL	DEMOFILE	SEVEN_G	
152	SEVEN_H	USED NEEDLE	DEMOFILE	SEVEN_H	
153	SEVEN_I	YOUTH ASKED	DEMOFILE	SEVEN_I	
154	SEVEN_J	YOUTH SOLD D	DEMOFILE	SEVEN_J	
173	SEX	Youth's sex	DEMOFILE	SEX	
334	SEXUAL	Received sexual	Not included	Not included	
44	SF01	General Medica	SERVFILE	hcr_gnrl	
45	SF02	Dental	SERVFILE	hcr_dent	
46	SF03	Psychological o	SERVFILE	hcr_psyc	
47	SF04	Substance Abu	SERVFILE	hcr_subs	
48	SF05	Alcohol/Drug T	SERVFILE	hcr_drug	
49	SF06	Eating Disorder	SERVFILE	hcr_eatd	
50	SF07	Gynecological	SERVFILE	hcr_gyne	
51	SF08	Pre-Natal	SERVFILE	hcr_pren	
52	SF09	HIV/AIDS Relat	SERVFILE	hcr_aids	
53	SF10	Other Health C	SERVFILE	hcr_othr	
85	SFM01	BIOLOGICAL MO	Not included	Not included	
86	SFM02	ADOPTIVE MOT	Not included	Not included	
87	SFM03	STEP-MOTHER	Not included	Not included	
Position	RHY 92 Name	RHY 92 Label	RHY 96 Databa	RHY 96 Name	
88	SFM04	FOSTER MOTHE	Not included	Not included	
89	SFM05	FEMALE PARTN	Not included	Not included	
90	SFM06	YOUTH FEMALE	Not included	Not included	
91	SFM07	AUNT	Not included	Not included	

92	SFM08	GRANDMOTHER	Not included	Not included	
93	SFM09	SISTER	Not included	Not included	
94	SFM10	STEP/HALF SIS	Not included	Not included	
95	SFM11	YOUTH'S DAUG	Not included	Not included	
96	SFM12	OTHER FEMALE	Not included	Not included	
97	SFM13	FEMALE NON-R	Not included	Not included	
98	SFM14	BIOLOGICAL FA	Not included	Not included	
99	SFM15	ADOPTIVE FAT	Not included	Not included	
100	SFM16	STEP-FATHER	Not included	Not included	
101	SFM17	FOSTER FATHE	Not included	Not included	
102	SFM18	MALE PARTNER	Not included	Not included	
103	SFM19	YOUTH MALE P	Not included	Not included	
104	SFM20	UNCLE	Not included	Not included	
105	SFM21	GRANDFATHER	Not included	Not included	
106	SFM22	BROTHER	Not included	Not included	
107	SFM23	STEP/HALF BR	Not included	Not included	
108	SFM24	YOUTH'S SON	Not included	Not included	
109	SFM25	OTHER MALE R	Not included	Not included	
110	SFM26	MALE NON-REL	Not included	Not included	
54	SG01	Education/Infor	SERVFILE	adp_educ	
55	SG02	Positive Peer Le	SERVFILE	adp_peer	
56	SG03	Alternative Act	SERVFILE	adp_altr	
57	SG04	Refusal Skills	SERVFILE	adp_refu	
58	SG05	Substance Abu	SERVFILE	adp_scrn	
59	SG06	Other ATOD Se	SERVFILE	adp_othr	
60	SH01	Other Youth Sh	SERVFILE	ahs_shlt	
61	SH02	Foster Home	SERVFILE	ahs_fost	
62	SH03	Host Home	SERVFILE	ahs_host	
63	SH04	Group Home	SERVFILE	ahs_grup	
64	SH05	Transitional Liv	SERVFILE	ahs_tran	
65	SH06	Independant Liv	SERVFILE	ahs_inde	
66	SH07	Job Corps	SERVFILE	ahs_jobc	
67	SH08	Residential Tre	SERVFILE	ahs_resi	
68	SH09	Other Alternati	SERVFILE	ahs_othr	
69	SI01	Legal Services	SERVFILE	lgl_yuth	
70	SI02	Legal Services	SERVFILE	lgl_fmly	
135	SIXFLAG	EVER USED ILIC	DEMOFILE	SIXFLAG	
114	SIX_A1	SMOKED IN LIF	DEMOFILE	SIX_A1	
115	SIX_A2	SMOKED IN SIX	DEMOFILE	SIX_A2	
116	SIX_A3	AGE FIRST SMC	DEMOFILE	SIX_A3	
117	SIX_B1	SMOKELESS TC	DEMOFILE	SIX_B1	
118	SIX_B2	SMOKELESS TC	DEMOFILE	SIX_B2	
119	SIX_B3	AGE FOR SMOK	DEMOFILE	SIX_B3	
120	SIX_C1	USED BEER/WII	DEMOFILE	SIX_C1	
121	SIX_C2	USED BEER/WII	DEMOFILE	SIX_C2	
Position	RHY 92 Name	RHY 92 Label	RHY 96 Databa	RHY 96 Name	

122	SIX_C3	AGE FIRST DRA	DEMOFILE	SIX_C3	
123	SIX_D1	USED LIQUOR II	DEMOFILE	SIX_D1	
124	SIX_D2	LIQUOR PAST S	DEMOFILE	SIX_D2	
125	SIX_D3	AGE FIRST LIQU	DEMOFILE	SIX_D3	
126	SIX_E1	FIVE OR MORE	DEMOFILE	SIX_E1	
127	SIX_E2	FIVE OR MORE	DEMOFILE	SIX_E2	
128	SIX_E3	AGE FOR FIVE C	DEMOFILE	SIX_E3	
129	SIX_F1	USED INHALAN	DEMOFILE	SIX_F1	
130	SIX_F2	USED INHALAN	DEMOFILE	SIX_F2	
131	SIX_F3	AGE FIRST INHA	DEMOFILE	SIX_F3	
132	SIX_G1	USED COUNTER	DEMOFILE	SIX_G1	
133	SIX_G2	USED COUNTER	DEMOFILE	SIX_G2	
134	SIX_G3	AGE FIRST COU	DEMOFILE	SIX_G3	
136	SIX_H1	USED MARIJUA	DEMOFILE	SIX_H1	
137	SIX_H2	USED MARIJUA	DEMOFILE	SIX_H2	
138	SIX_H3	AGE FIRST MAR	DEMOFILE	SIX_H3	
139	SIX_I1	USED COCAINE	DEMOFILE	SIX_I1	
140	SIX_I2	USED COCAINE	DEMOFILE	SIX_I2	
141	SIX_I3	AGE FIRST COC	DEMOFILE	SIX_I3	
142	SIX_J1	USED CRACK E	DEMOFILE	SIX_J1	
143	SIX_J2	USED CRACK S	DEMOFILE	SIX_J2	
144	SIX_J3	AGE FIRST CRA	DEMOFILE	SIX_J3	
71	SJ01	Organized Spor	SERVFILE	rec_sprt	
72	SJ02	Arts and Crafts	SERVFILE	rec_arts	
73	SJ03	Field Trips	SERVFILE	rec_trip	
74	SJ04	Other Recreatio	SERVFILE	rec_othr	
75	SK01	Alcoholics Anor	SERVFILE	sup_alca	
76	SK02	Narcotics/Coca	SERVFILE	sup_naca	
77	SK03	Alateen	SERVFILE	sup_alat	
78	SK04	Alanon	SERVFILE	sup_alan	
79	SK05	Other Support	SERVFILE	sup_othr	
80	SL01	Career Counsel	SERVFILE	emp_coun	
81	SL02	Job Training	SERVFILE	emp_jtrn	
82	SL03	Employment Re	SERVFILE	emp_plac	
83	SL04	Job Corps Non-	SERVFILE	emp_jobc	
84	SL05	Other Employm	SERVFILE	emp_othr	
346	SMOKE	Ever smoked to	Not included	Not included	
347	SMOKE6	Smoked tobacc	Not included	Not included	
374	SOCIALIZ	Any socializati	Not included	Not included	
194	SOURCE	SOURCE OF REF	DEMOFILE	SOURCE	
174	STATE	State	Not included	Not included	
387	SUPPORTG	Received suppo	Not included	Not included	
377	THERAPY	Received thera	Not included	Not included	
350	TOBACCO	Ever used any	Not included	Not included	
351	TOBACCO6	Used any tobac	Not included	Not included	



365	TOBACTYP	type of tobacco	Not included	Not included	
329	UNDER12	Youth is under	Not included	Not included	
376	UNEMPLOY	Any unemployr	Not included	Not included	
191	UN_INCOM	Household rece	DEMOFILE	UN_INCOM	
Position	RHY 92 Name	RHY 92 Label	RHY 96 Databa	RHY 96 Name	
187	YEMP	EMPLOYMENT S	DEMOFILE	YEMP	
378	YOUTHED	Received educa	Not included	Not included	
3	YOUTH_ID	Youth ID numb	DEMOFILE	YOUTH_ID	
		Youth's languag	DEMOFILE	L_NATIVE	
		Youth's languag	DEMOFILE	L_ENGLIS	
		Youth's languag	DEMOFILE	L_SIGN	
		Youth's languag	DEMOFILE	L_SPANIS	
		Youth's languag	DEMOFILE	L_ASIAN	
		Youth's languag	DEMOFILE	L_OTHER	
		Number househ	DEMOFILE	MEMBA -	
				MEMBB (26)	
		Unearned inc. r	DEMOFILE	INCA (7)	
		Unearned inc. r	DEMOFILE	INCB (4)	
		Unearned inc. r	DEMOFILE	INCC (3)	
		Unearned inc. r	DEMOFILE	INCD (4)	
		Unearned inc. r	DEMOFILE	INCE (2)	
		Type of admiss	DEMOFILE	SSTATUS	

## **APPENDIX G**

### **Glossary**

This glossary presents definitions for the standard terms that are used by the RHY MIS.

**Adult**

A person 18 years old or older.

**Aftercare**

The provision of services to runaway or otherwise homeless youth and their families following the youth's return home, or placement in alternative living arrangements, which assist in alleviating the issues that contribute to the runaway or homeless episode.

**Agency**

The first level of an organization that *administers* the Basic Center, Transitional Living, and/or Drug Abuse Prevention programs. The youth service agency may operate only one program or it may oversee multiple programs. In addition, the agency may provide services directly to youth or it may act solely as an administrator of the programs it oversees. As the administering agent for the RHY grant, it is the agency's responsibility to obtain RHY MIS data from all of its RHY grant programs.

**Basic Center Program (BCP)**

Community-based agency providing core services (emergency shelter, food, clothing, counseling) to runaway and homeless youth. Basic Center services may be provided in one central location, such as a group home residence, or in decentralized locations, such as host homes.

**Drug Abuse Prevention (DAPP)**

Community-based program, funded under the Federal RHY Abuse Prevention Program, to address the problem of drug abuse among runaway and homeless youth and their families, by provision of prevention and early intervention services aimed at the reduction of drug dependency.

**Exit Date**

Exit refers to the date at which a youth leaves a program or completes services, a youth is no longer on active caseload at an agency program, or a youth leaves one program category and enters another program, such as when he or she completes shelter services and starts non-residential services.

**Homeless**

A youth who is in need of services and is without a place of shelter where he or she can receive supervision and care.

**Household**

A living situation where a group of individuals have permanent or apparent permanent places of residence, thereby influencing the family system at the residence. For the purposes of information collected in the RHY MIS, household refers to the apparently permanent group of persons which the youth identifies as household members. For homeless youth and homeless families, responses will refer to the last *stable* residence that this group shared together.

**Independent Living Program (ILP)**

A skill-based program that prepares youth in the foster care system to live on their own, independently from that system.

**Intake Date**

The date of a youth's entry or admission into a runaway and homeless youth program. A youth can have more than one intake date if he or she comes to a program multiple times, or if he or she enters into different program components within an agency on different dates.

**Legal Residence**

The residence of the youth's legal guardian or custodian.

**Long-Term Shelter**

A program that provides services to the youth for more than 15 days. These programs include foster care, structured shelter care, Transitional Living Programs, and Independent Living Programs. Long term shelter programs usually provide a more in-depth assessment of youth's needs than a short term program. In addition, long term programs generally prepare behavioral, educational, psychological, and placement plans for their participants.

**Non- Residential Services**

Services provided to or for runaway and homeless youth that do not reside at the program or at a facility operated by the program. If an agency uses part of its RHY grant to purchase shelter services from another organization or to subsidize shelter arrangements (as for apartment rent in a TLP), it is considered to be providing residential services. For an agency to meet this non-residential criteria, it would not expend any of the RHY grant funds on shelter services.

**Program**

Program refers to an organization that directly provides runaway and homeless youth related services funded under the Federal Runaway and Homeless Youth BCP, TLP, DAPP, or any combination of the three Federal RHY programs. A program may be one service component within an administering **agency**. A program also may have other public or private sponsors.

**Program Category**

Refers to the broad category of service delivery type in which the youth is participating at the agency. The youth can be receiving short-term residential services, long-term residential services, or non-residential services. These categories remain in Version 3.0 for reference only. They have been supplanted by *Program Name*.

**Runaway**

A youth who, by their own volition, is away from home or place of legal residence at least overnight. Generally, runaway actions are taken without the knowledge of the parent or legal guardian in charge of the youth's supervision.

**Safe Place**

Safe Places include community businesses and organizations that agree to be places of contact for runaway and homeless youth. Usually a youth may stay at the safe place until staff or volunteers from the local shelter come and pick them up.

**Service Status**

Refers to the type of service a youth or family is receiving from an agency. A youth or family can receive brief drop-in, hotline, street outreach services, or a full range of longer-term services.

**Short-Term Shelter**

Programs that provide residential services to youth for usually for 14 days or less, although under exceptional circumstances youth can stay at a short term shelter for a longer period. Services at short term shelters are designed to provide emergency and core services, such as a bed, clothing, food, basic nurturing, protection, crisis intervention, counseling, and referral.

**Throwaway**

A youth who has been forced to leave his place of legal residence and whose legal guardians or parent figures refuse to assume any further responsibility for his/her care and well being.

**Transitional Living**

Programs for older youth, aged 16 to 21 years who have no family or state support, to assist them in their move toward self-sufficient living and to **Program** prevent long-term dependency on social services. Services are provided for **(TLP)** up to 18 months.

**Youth**

A person under the age of 18. Youth also refers to the clients served at the youth services agencies. In some cases (such as Transitional Living Programs) the client can be as old as 21 years. The RHY MIS will still refer to these individuals as youth.

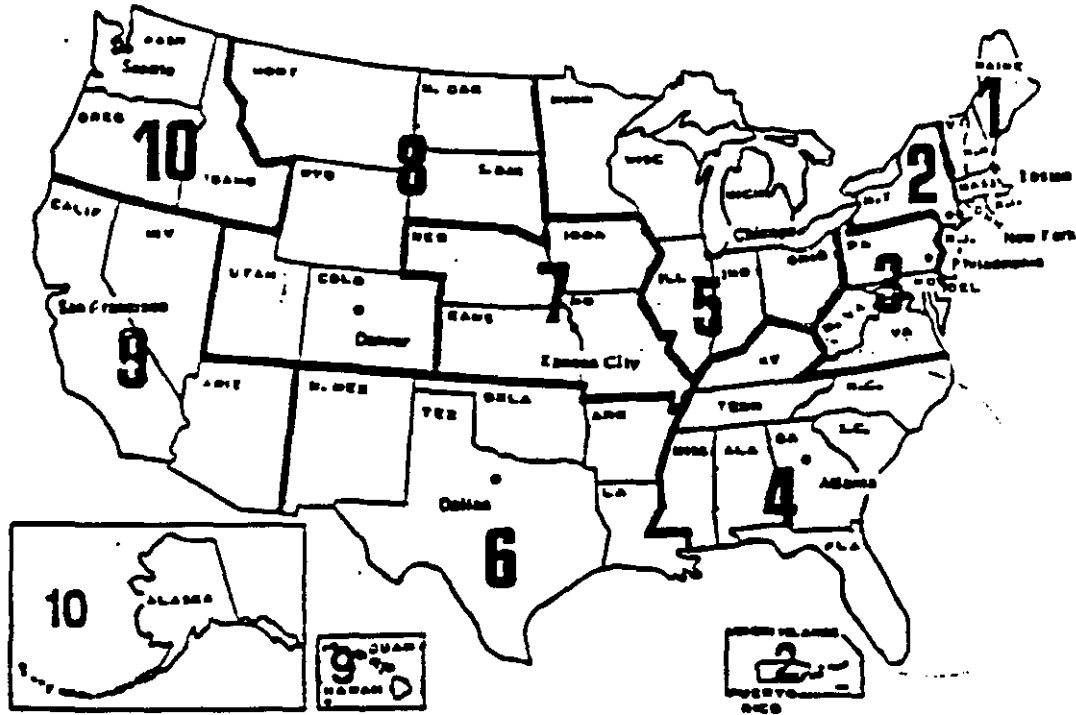
**Youth Service Agency**

The youth service agency (or *agency*) is the first level of an organization that administers the Basic Center, Transitional Living, and/or Drug Abuse Prevention programs. The youth services agency may operate only one program or it may oversee multiple programs. In addition, the youth services agency may provide services directly to youth or it may act solely as an administrative organization to the programs it oversees. As the administering agent for the RHY grant, it is the youth service agency's responsibility to submit RHY MIS data from all of its RHY grant programs.

## **APPENDIX H**

### **Region Map**





- Regions**
- 4 — Alabama
  - 10 — Alaska
  - 9 — Arizona
  - 6 — Arkansas
  - 9 — California
  - 8 — Colorado
  - 1 — Connecticut
  - 3 — Delaware
  - 3 — D.C.
  - 4 — Florida
  - 4 — Georgia
  - 9 — Hawaii
  - 10 — Idaho
  - 5 — Illinois
  - 5 — Indiana
  - 7 — Iowa
  - 7 — Kansas
  - 4 — Kentucky
  - 6 — Louisiana

- Regions**
- 1 — Maine
  - 3 — Maryland
  - 1 — Massachusetts
  - 5 — Michigan
  - 5 — Minnesota
  - 4 — Mississippi
  - 7 — Missouri
  - 8 — Montana
  - 7 — Nebraska
  - 9 — Nevada
  - 1 — New Hampshire
  - 2 — New Jersey
  - 6 — New Mexico
  - 2 — New York
  - 4 — North Carolina
  - 8 — North Dakota
  - 5 — Ohio
  - 6 — Oklahoma
  - 10 — Oregon

- Regions**
- 3 — Pennsylvania
  - 1 — Rhode Island
  - 4 — South Carolina
  - 8 — South Dakota
  - 4 — Tennessee
  - 6 — Texas
  - 8 — Utah
  - 1 — Vermont
  - 3 — Virginia
  - 10 — Washington
  - 3 — West Virginia
  - 5 — Wisconsin
  - 8 — Wyoming
  - 9 — American Samoa
  - 9 — Guam
  - 2 — Puerto Rico
  - 2 — Virgin Islands
  - 9 — Northern Marianas
  - 9 — Trust Territory (Palau)