



Huckleberry Youth Programs

# The Creation of Cole Street Clinic

Fall 2006





## Serving At-Risk Youth Through Innovation

Runaway youth shelters and programs were an innovative response to community needs in the late 1960's and those same early programs continue to be innovators in their communities today. Huckleberry Youth Programs (HYP) in San Francisco, California is a prime example of a community based nonprofit organization that continually evolves to address the ever-changing needs of youth in their community.

In 1967, young people from all over the country were *running toward* something – primarily the music scene and the new freedoms associated with the counterculture. Thousands of young runaways made their way to San Francisco, placing enormous demands on the city's services. Founded by a local minister during the 'summer of love', Huckleberry House was the first shelter in the country specifically designed to respond to the needs of runaway youth.

Today, the young people Huckleberry House serves are predominately from the Bay Area and are *running from* something – depression, abuse,

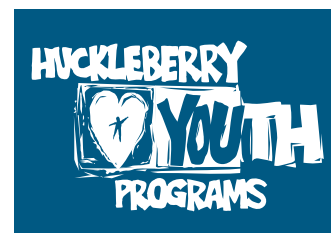
violence, family dysfunction, or abandonment. They run away as a means to escape feelings of helplessness and hopelessness. Many exhibit developmental disabilities and poor academic performance. They may choose to engage in risky behaviors including drug and alcohol abuse and unprotected sex. It is a different world and a different population, with teens presenting more complex and potentially life-threatening struggles to survive, let alone thrive.

Fortunately, Huckleberry Youth Programs, the parent organization for Huckleberry House – and its colleague organizations across the country – are well positioned to adapt to change. Serving some of the most at-risk youth in their communities, they are the "canaries in the mines" that detect emerging youth trends and service needs. Over time they have built the expertise and community partnerships to respond to these trends and needs through innovative programming that strengthens the social fabric of the communities they serve.

## Huckleberry Youth Programs (HYP)

Established in 1967, Huckleberry Youth Programs will soon celebrate its 40<sup>th</sup> anniversary. The agency's mission is to engage adolescents and their families in a comprehensive array of quality services addressing prevention and health promotion, crisis intervention, stabilization and growth. Its programs promote the health and leadership of youth while diverting them from violence, crime and gang involvement, running away and chronic homelessness, drug and alcohol abuse, risky sexual activities, and involvement in the juvenile justice system.

HYP's philosophy of service delivery extends beyond individual development and emphasizes family functioning and community involvement. The organization maintains a strong commitment to respect and affirm the diversity of its clients, to recognize and understand the value and dignity of young people, and to acknowledge their potential to become healthy, responsible adults.





Results from a multi-year, comprehensive outcomes-based evaluation completed in 1998 documented the following improved client behaviors after participation in HYP services: youth experienced improved living stability, decreased violence, decreased emotional and physical abuse, increased emotional well-being, improved school attendance, and increased use of birth control.

The agency has served more than 125,000 youth since its incorporation, including 7,500 youth in 2005. HYP currently employs 55 staff members and operates on a \$3.8 million annual budget. All services are available to youth free of charge.

### The Origins of Service Expansion at HYP

A national movement within the juvenile justice field was advocating for the separation of delinquent youth (those being held for criminal activity) from those who were detained or incarcerated due to histories of abuse and neglect. The term 'status offenders' was coined to describe youth being held for activities that would be legal for adults; thus it was their status as a juvenile that allowed their detention. These status offenses included behaviors such as running away, school truancy, and curfew violations. The national advocacy led to the 1974 Juvenile Justice and Delinquency Prevention Act that created incentives for states to deinstitutionalize status offenders and contained the Runaway Youth Act that created a network of shelters nationally for runaway youth. At the time of the passage of this Act, more than half of the youth in juvenile detention nationally were detained as status offenders.

In California, the local juvenile probation departments retained jurisdiction over status offenders, although other states created processes known as PINS (Person in Need of Services), FINS (Family in Need of Services) or CHINS (Child in Need of Services) that served as entry points for status offenders into the child welfare system. In San Francisco, status offenders continued to be held at the Youth Guidance Center, albeit in a separate section and with separate staff from delinquent youth. In 1988, the decision was made to move the SF status offender program to a local community based organization. (*Need to talk to Bruce about who was involved in the advocacy for this.*) Huckleberry Youth Programs successfully competed for the grant, and services for status offenders in San Francisco were moved to Huckleberry House.

### The Creation of Cole Street Clinic

During the mid-to-late 1980's, San Francisco was one of the national epicenters of the HIV/AIDS crisis. It became apparent to providers that runaway and homeless youth were engaging in behaviors that placed them at high risk for contracting HIV. HYP responded in a variety of ways as the epidemic grew, culminating in 1992 with the opening of its Cole Street Clinic to provide comprehensive healthcare screening for adolescents in San Francisco. Cole Street Clinic was born of the expansion of two distinct services at Huckleberry House: HIV education and medical screenings for youth.

Like many innovations, it arose from a community need, the strength of an advocate, and an opportunity seized.

Danny Keenan, a Residential Counselor at Huckleberry House was HIV-positive and wanted to establish a program to provide HIV prevention information to young people. He was aware the youth at Huckleberry House were engaging in activities that put them at high risk for HIV infection. Through his experience working with at-risk youth, he knew that the most effective way to influence their behavior was to provide information through their



## The Creation of Cole Street Clinic

peers rather than “old people” – anyone over 21. Danny began to train peers as health educators to work with the youth at Huckleberry House.

Through the dedication of advocate Danny Keenan and the agency’s leadership, Huckleberry Youth Programs was one of the first organizations in the country to establish an HIV prevention program for teens. Cole Street Clinic literally originated in the basement of Huckleberry House in the late 1980s. The San Francisco Department of Public Health was providing healthcare to teens at Youth Guidance Center through a program called SPY – Special Programs for Youth. With the move of status offenders to Huckleberry House, SPY agreed to outsource a nurse 20 hours a week to provide care to all youth being served at Huckleberry House – in a room in the basement.

The demand for this service was high. In its first year, more than 1,000 unduplicated youth used the clinic. Even after leaving Huckleberry House youth returned to see the nurse, frequently bringing their friends who needed medical attention as well. Within a year, two providers were weekly offering 60 hours of primary and reproductive healthcare to youth. The program moved out of the basement and soon had a group of six former Huckleberry House clients trained by Danny as Peer Health Educators making presentations at schools and at other youth service programs, as well as doing street outreach. In 1989, the United States Centers for Disease Control recognized HYP’s peer-based HIV education program as a national model and awarded Huckleberry Youth Programs their first HIV prevention grant for a runaway and homeless youth shelter.

HYP approached the San Francisco Department of Public Health about collaborating on an adolescent clinic that would merge Huckleberry’s HIV prevention program and the Department’s medical clinic. The Cole Street Clinic moved into its own facility in 1992, shortly before Danny’s death. At that time, the program expanded to integrate three components that are crucial in meeting the complex needs of at-risk adolescents: primary and reproductive healthcare, provided by DPH providers; HIV prevention and education; counseling and case management, the latter two provided by HYP staff. Huckleberry Youth Programs secured a Robert Wood Johnson Foundation grant, a matching grant from the San Francisco Foundation, and support from the University of California at San Francisco. From 1991-1994, Cole Street Clinic experienced a continuous growth of youth using the program. It received local media attention, CNN coverage of the peer health education program, and hosted a visit by the trustees of the Robert Wood Johnson Foundation.

Today, Cole Street Clinic is one of the city’s only full-time health centers dedicated exclusively to teens. The clinic’s three-component service delivery system goes beyond the traditional primary care approach to adolescent health including the following:

- *Primary and reproductive health care*, including family planning, pregnancy testing and choice counseling, sexually transmitted disease screening and treatment, acute and episodic care, chronic health problem management, HIV testing and counseling.
- *Prevention and education services* are offered through a peer-based approach and include a range of community outreach and on-site clinic services to address high risk behaviors, (such as risky sexual behavior or substance abuse), wellness education, health promotion activities, and life skills training.
- *Psychosocial services* include assessment, treatment, and discharge planning for case management, individual therapy, family mediation and family therapy, as well as make referrals to other service providers.



## The Creation of Cole Street Clinic

Peer Health Educators continue to be integral members of the service and outreach team, creating a teen-friendly environment, maintaining confidentiality, and providing education/outreach in a variety of settings, including schools and other youth services agencies. The VIP (Violence Is Preventable) Girls Program is a San Francisco collaborative project led by HYP and housed at the clinic. In 2005, 1,065 youth received medical services including primary care, reproductive health care, HIV and STD testing and treatment, pregnancy testing and choice counseling, immunizations, and physical and gynecological examinations. Nearly 2,200 youth participated in prevention/education single session or multi-session groups, and 346 youth were reached through outreach activities.

Cole Street Clinic is a public/private partnership involving HYP and the San Francisco Department of Public Health's Community Health Program for Youth (CHPY). Its healthcare providers are an in-kind contribution from DPH while HYP funds all other staff and services.

### ***Lessons Learned***

1. When setting up the program, it is important to create a shared cost structure at the onset and to periodically make adjustments to reflect increased and/or changing costs.
2. Melding different cultures into one organization can be difficult. You need to balance and contend with different work styles, priorities, practices, values, policies, salary structures, data needs – just to name a few of the issues that need to be addressed.
3. Funding the non-healthcare services is a continuous struggle. Very little public money is available and it is difficult to sustain the services on private foundation grants alone. It is important to be aware of, and plan for this challenge.
4. There are constant challenges to sustaining partnerships over the long-term. Most specifically, as staff at the partner agencies turns over, there is the potential for the vision of the project to change and the resulting commitment to the program can therefore change.

### ***Expanding Best Practices***

Huckleberry Youth Programs established the **Huckleberry Teen Health Program (HTHP)** in Marin County in 1995, just north of the Golden Gate Bridge in response to the lack of effective health programs for teens in the county. Modeled on the Cole Street Clinic, it is a comprehensive health promotion and youth development program, also known as the Montecido clinic, serving at-risk Marin County youth ages 12-20. During the past 10 years, HTHP has become the primary provider of health access, education and other support services for underserved youth in Marin County, with a significant focus on reproductive health and teen pregnancy prevention.

Already operating an adolescent shelter in the area since 1974, the Marin Community Foundation was funding Huckleberry Youth Programs in 1992-1993 to provide HIV prevention, including the training of peer health educators. In 1994 a new Marin County Health and Human Services director convened a county-wide forum for school, health, and community based organizations to assess the health needs of Marin County youth. After a



## The Creation of Cole Street Clinic

visit to Cole Street Clinic as part of this planning process, HYP was approached about establishing similar services in Marin County. A location in the only urban area in Marin County, San Rafael, was selected because it was close to bus lines, across the hall from Women's Health Services, a Marin County Department of Public Health clinic, and across the street from San Rafael High School. On its first day, the program served 10 youth; 20-30 a day by the end of the first month; and now more than 700 annually.

HYP is also a partnership between HYP and the Department of Public Health, and the Department contributes toward the rent and provides nurse practitioners and a supervising physician. Immigrant youth were identified as the target population in need of primary care. In addition to HIV prevention, the Montecido clinic provides street outreach, peer health education, case management and counseling, and mental health services for Latino youth.

During 1998-1999, young people were being turned away from the Huckleberry Teen Health Program in San Rafael due to a lack of capacity to serve them. Staff identified that approximately 25 percent of the youth using their program were from Novato, a residential community 10 miles to the north of San Rafael. The Women's Health Services and Novato Youth Center convened a working group to address expanding service capacity by opening a clinic site in Novato.

Drawing upon their previous experience, Huckleberry Youth Programs entered into a collaborative among four community groups to open a clinic in Novato; Planned Parenthood, Novato Youth Center, and the Bay Area Community Resources. The California Endowment provided funding to open the new clinic in October 2006.

## Other HYP Programs

Huckleberry Youth Programs provides the following programs in addition to those featured in this monograph:

*Huckleberry House*, the oldest HYP program, is a 24-hour emergency crisis shelter for homeless, runaway and other high-risk youth. Program services at Huckleberry House include crisis shelter, food, clothing, medical care, telephone information and referral, behavior management, and individual and family counseling provided by the counseling staff. The average stay is four days, offering youth and their families an opportunity for a respite from family conflict while examining family dynamics with the support of a trained clinician. Eighty-eight percent of sheltered clients are reunited with parents or are placed in another safe environment if they cannot return home because of abuse, neglect, or abandonment.

*Counseling Services* are provided to youth and their families at Huckleberry House and Huckleberry's Cole Street Clinic. Clinical services for youth include assessments, individual therapy and case management. Family services included family therapy, as well as family reunification for youth housed at Huckleberry House.

The *Community Assessment and Referral Center (CARC)*, managed by HYP for the City and County of San Francisco, provides immediate intervention through a strength/needs-based assessment to arrested youth who have committed non-violent offenses. This includes moderate-to-intensive case management services and referrals to city agencies and community-based organizations. In addition to HYP staff, it includes staff from the Probation, Public Health, and Police Departments, as well as the Sheriff's Office.

Established more than 30 years ago, *9 Grove Lane (9GL)* is Marin County's only shelter for homeless, runaway, at-risk, abused youth and youth in family crisis. Teens are housed for 1 to 7 days before returning



home or to an alternative safe environment. In addition to offering shelter, crisis services, counseling, telephone hotline, and juvenile justice diversion, 9GL serves as the Marin County shelter for abused and neglected adolescents who are awaiting out-of-home placement.

<b>Programs</b>	<b>Annual visits</b>
Huckleberry House	312
Counseling Services	363
Comprehensive Assessment and Referral Center	524
Nine Grove Lane	102
Cole Street Clinic	3648
Huckleberry Teen Health Program	2570

### ***Innovation Combined with Advocacy***

Throughout its history, HYP has developed programs and fashioned best practices to address the needs of at-risk youth.

- HYP provided testimony and other advocacy for the 1974 passage of the federal Runaway Youth Act and provided a model for hundreds of runaway shelters across the country. After more than 30 years, the Act continues to support safe shelter and family re-unification services for abused and neglected youth who run away from home nationwide.
- In 1981, HYP helped draft and advocate for California legislation to change the laws that made it a criminal offense for abused and neglected children to run away from home. This status offender legislation continues to assure that rather than being incarcerated for being abused and neglected, youth and their families receive needed services.
- In 1988, HYP established San Francisco's status offender system that diverts youth arrested for acts that would not be crimes if they were adults, (i.e., truancy, running away, curfew violations, being beyond parental control) from the juvenile justice system and into HYP's continuum of services.
- In 1991, the US Department of Health and Human Services Office of Inspector General recognized HYP as an innovative and effective program that integrates services at the community level for dysfunctional or multi-problem children and families.
- In 2003, HYP was cited by New York's Vera Institute of Justice as a model in providing respite care as an alternative response for youth at risk of court-ordered placement. New York is in the process of replicating the "Huckleberry Model" of crisis/respite care and family reunification for "incorrigible youth" throughout the state.



## National Network for Youth

As the sponsor of this monograph, the National Network for Youth is committed to advancing innovation and best practices in serving youth-at-risk. The mission of the National Network is to “champion the needs of runaway, homeless, and other disconnected youth through advocacy, innovation, and services.” The National Network for Youth (NNY) was founded in 1974 to advocate for runaway and homeless youth and to provide training and supportive services to the hundreds of organizations serving these young people. Headquartered in Washington, DC, NNY’s membership includes more than 500 community-based organizations that provide an array of services in 49 states, the District of Columbia, Puerto Rico, Guam, Canada, Mexico, Honduras, Guatemala, Columbia, and Australia. In addition, youth, individuals, associations, and regional and state networks of organizations are NNY members. NNY members provide street-based interventions, emergency shelter, transitional and independent living programs, permanent housing, counseling, health, education, workforce development, arts, and recreation services to over 2.5 million youth annually.



The National Network for Youth is also engaged in HIV/AIDS prevention and treatment. Under a five year cooperative agreement with the Centers for Disease Control and Prevention, the NNY’s Prevention Plus Project, P<sup>3</sup>, addresses the disparities in HIV outcomes for runaway and homeless youth by strengthening the HIV prevention capacity of runaway and homeless youth (RHY) organizations, state and local education agencies, state and local homeless education coordinators, and other youth-serving organizations through information dissemination, training and professional development, and technical assistance. P<sup>3</sup> aims to strengthen their understanding of the unique needs of RHY through presentations at appropriate national conferences and the development of a series of issue briefs, and by developing memoranda of understanding with other national non-governmental organizations to provide information, training, and technical assistance to their member organizations regarding HIV prevention for the RHY they serve. The first year of the project is devoted to planning, building the training network, materials development and revision, information dissemination, project promotion and designing the evaluation. Years two to five will focus on implementation.