



Sexual and Reproductive Health Among Youth Experiencing Homelessness

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Overview

Adolescence and the transition to young adulthood involve physical, emotional, and social changes that have implications for a young person's sexual and reproductive health. During this period, youth need youth-supporting professionals who are informed about their sexual and reproductive health. To inform youth-supporting professionals, this resource summarizes existing data about sexual and reproductive health among youth who have experienced homelessness.

Existing data analyses in this area include the following domains: sexual activity, condom and contraceptive use, sexually transmitted infections, intimate partner and sexual violence, pregnancy and parenting, sex trade, and sex trafficking. This resource first summarizes data from nationally representative samples of youth that include those experiencing homelessness. Then, it summarizes data from national and community-based samples of youth experiencing homelessness who were recruited through shelters, drop-in centers, and street outreach programs. Data from both types of samples can contribute to youth-supporting professionals' knowledge about the sexual and reproductive health of youth who have experienced homelessness.

In addition to presenting and describing available data about sexual and reproductive health among youth who experience homelessness, each section in the summary provides high-level takeaways about the data, along with references for additional information to enhance practice. The resource concludes by highlighting the differences between findings from nationally representative samples of youth and those from community-based samples of youth. An infographic that visualizes key takeaways about youths' sexual and reproductive health accompanies this summary ([Sexual and Reproductive Health Among Youth Experiencing Homelessness](#)).

Activate: The Center to Bring Adolescent Sexual and Reproductive Health Research to Youth-Supporting Professionals bridges the gap between research and practice in support of the Office of Population Affairs' aims to promote adolescent health and prevent unintended teen pregnancy. Activate translates research and creates research-based resources for use by professionals who support young people experiencing the child welfare and/or justice systems, homelessness, and/or disconnection from school and work (i.e., opportunity youth).

Sexual and Reproductive Health Data Among a National Sample of *High School Students* Experiencing Homelessness

This section focuses on a national sample of high school students experiencing homelessness.

Large, nationally representative samples that include youth experiencing homelessness allow for comparisons between youth who experience homelessness and youth who are stably housed. They also allow researchers to look for overall patterns and group differences across the whole population. The Youth Risk Behavior Survey (YRBS) is a widely known source of data based on a nationally representative sample that includes *high school students* experiencing homelessness. More specifically, the YRBS is an annual,

school-based survey of public and private high school students (grades 9–12) across the United States.^{1a} Approximately 3 percent of high school students reported experiencing homelessness within the past 30 days.²

In this summary, we refer to the experience of homelessness based on the definition of unstable housing, which includes youth who reported sleeping in a shelter or emergency housing; in a motel or hotel; in a car, park, campground, or other public place; with a friend, family member, or other person (due to their need to leave home or because their parent or guardian could not afford housing); or not having a usual place to sleep.³ In this summary, we used the YRBS data to estimate the prevalence of sexual activity, condom and contraceptive use, sexually transmitted infection (STI) testing, and intimate partner and sexual violence among high school students. In addition, we used YRBS data to examine differences in the prevalence of sexual activity, condom and contraceptive use, STI testing, and intimate partner and sexual violence between high students experiencing homelessness and high school students who are stably housed.

Sexual activity

Not all young people experiencing homelessness are sexually active: Slightly more than half (59.7%) of high school students experiencing homelessness reported ever having had sexual intercourse.⁴ Although many youth experiencing homelessness are not having sex, high school students experiencing homelessness are more likely to be sexually active than their stably housed peers.⁵

High school students experiencing homelessness report initiating sexual activity at an earlier age and having more sexual partners than youth who are stably housed.^{6,7,8} High school students experiencing homelessness are also more likely to have had sex while under the influence of alcohol or other drugs, relative to their stably housed peers.⁹ Having sex while under the influence of drugs or alcohol is associated with other sexual and reproductive health behaviors, such as condom use, which have implications for unintended pregnancy and STIs among young adults experiencing homelessness.¹⁰ Table 1 includes prevalence estimates for sexual activity.

Table 1. Sexual Activity Estimates by Housing Status

	Students Experiencing Homelessness	Stably Housed Students
Average age at first sexual experience¹¹	14.2 years [€]	14.9 years
Ever had sexual intercourse¹²	59.7% [†]	33.7%
Had sexual intercourse in the last 3 months¹³	48.2% [†]	24.0%
Number of sexual partners in the past 2 months¹⁴	2.04 [€]	1.86
Used alcohol or drugs when they last had sexual intercourse¹⁵	41.0% [†]	19.7%

^a This synthesis draws on peer-reviewed publications that use data from the Youth Risk Behavior Survey across multiple years to ensure comprehensive coverage of key sexual reproductive health indicators to avoid gaps in reporting.

	Students Experiencing Homelessness	Stably Housed Students
Had four or more sexual partners during their lifetime¹⁶	28.0% [†]	6.8%

Note: [‡]Indicates statistically significant difference before accounting for individual characteristics such as sex, grade level, and race/ethnicity. [†]Indicates statistically significant differences after accounting for individual characteristics, such as sex, grade level, and race/ethnicity.

In some instances, researchers have compared the sexual activity estimates between students experiencing homelessness and those who are stably housed. Compared to their stably housed peers, high school students experiencing homelessness were 1.7 times more likely to have ever had sexual intercourse and 1.9 times more likely to have had sexual intercourse in the past three months.¹⁷ High school students experiencing homelessness were also 2.1 times more likely to report having used alcohol or other drugs during their last sexual encounter and 3.4 times more likely to have had four or more sexual partners during their lifetime, compared to their stably housed peers.^{18, 19}

Professionals who support youth who experience homelessness can use information about youth sexual activity to consider additional ways to support these youth. For example, professionals may consider holding conversations with youth about their sexual and reproductive health needs.^a For additional information on talking with young people about their sexual and reproductive health, please refer to the Activate resource: [6 Tips for Youth-Supporting Professionals for Talking with Youth About Sexual and Reproductive Health](#).

Condom and other contraception use

Slightly more than one third of high school students experiencing homelessness reported using a condom during their most recent opposite-sex sexual encounter.²⁰ About one in three reported using hormonal birth control, and only a small proportion reported using both a condom and hormonal birth control.²¹

Information is limited on the factors that influence birth control use among youth experiencing homelessness. Studies involving community-based samples suggest that contraception use among women experiencing homelessness is influenced by the experiences of family and friends, the responses of their partners,²² maintenance requirements,²³ side effects,²⁴ and pregnancy attitudes.²⁵ Table 2 includes prevalence estimates for condom and other contraception use.

Table 2. Condom Use and Other Contraception Use Estimates by Housing Status²⁶

	Students Experiencing Homelessness	Stably Housed Students
Used a condom the last time they had sexual intercourse with an opposite-sex partner	37.6% [†]	55.1%
Used hormonal birth control the last time they had sexual intercourse with an opposite-sex partner	35.8%	34.7%
Used a condom and hormonal birth control the last time they had sexual intercourse with an opposite-sex partner	11.2%	12.1%

Note: [†]Indicates statistically significant differences after accounting for individual characteristics such as sex, grade level, and race/ethnicity.

High school students experiencing homelessness were 1.4 times more likely to report not using a condom than their stably housed peers.²⁷ However, high school students experiencing homelessness were just as likely as their stably housed peers to use hormonal birth control—either alone or in combination with condoms.²⁸ These similar levels of hormonal birth control use could indicate that limited knowledge about where and how to access hormonal birth control is a challenge for high school students regardless of their housing status.

For additional information about condom use among youth experiencing homelessness, please refer to the Activate resource titled: [Fact Sheet: Understanding the Research on Condom Use Among Youth Involved with Systems or Experiencing Homelessness](#).

Sexually transmitted infection testing^b

Compared to their stably housed peers, high school students experiencing homelessness were more likely to be recommended for STI/HIV testing and to have been tested for an STI or HIV when testing was recommended.²⁹ These testing differences could reflect that youth experiencing homelessness are connected to services (e.g., through drop-in centers) that provide access to a variety of sexual reproductive health needs such as STI/HIV testing.^{30,31} However, longer periods of homelessness—and sexual behaviors such as engaging in survival sex to meet basic needs, having multiple sexual partners, substance use, and inconsistent condom use—can lead to youth experiencing homelessness becoming vulnerable to STIs.³² Table 3 includes prevalence estimates for STI/HIV testing.

Table 3. STI or HIV Testing Estimates by Housing Status³³

	Students Experiencing Homelessness	Stably Housed Students
Recommended for STI or HIV testing ^c	80.6%	39.9%
Had been tested for any STIs (if testing was recommended)	46.7%	22.4%
Had been tested for HIV (if testing was recommended)	41.0%	18.0%

For additional information about STIs among youth who experience homelessness, please refer to the Activate resource titled: [Fact Sheet: Understanding the Research on STIs Among Youth Involved with Systems or Experiencing Homelessness](#).

Intimate partner violence and sexual violence

Intimate partner violence and sexual violence are more common among high school students experiencing homelessness than among their stably housed peers.³⁴ Studies using community-based samples of youth

^b National estimates of STI and HIV prevalences are not available for youth experiencing homelessness. For consistency, we use the term STI testing throughout; however, some original resource use the term STD testing.

^c Youth were recommended for STI testing if they were sexually active, had multiple sexual partners, used hard drugs, or were male and had sex with other males (or with both males and females).

and young adults have reported even higher rates of violence that have been linked to PTSD and drug use.^{35, 36} Table 4 provides estimates of intimate partner and sexual violence by housing status.

Table 4. Intimate Partner and Sexual Violence Estimates by Housing Status

	Students Experiencing Homelessness	Stably Housed Students
Forced to have sex one or more times in their lifetime ³⁷	21.1% [†]	8.1%
Experienced sexual dating violence in the past 12 months ^{d38}	22.5% [†]	6.8%
Experienced physical dating violence in the past 12 months ^{e39}	23.0% [†]	6.2%
Experienced sexual violence in the past 12 months ⁴⁰	27.6% [†]	10.6%

Note: [†]Indicates statistically significant differences after accounting for individual characteristics such as sex, grade level, and race/ethnicity.

Compared to their stably housed peers, students experiencing homelessness were 2.6 times more likely to be forced to have sex in their lifetime, 3.1 times more likely to have experienced sexual dating violence, 3.5 times more likely to have experienced physical dating violence, and 2.6 times more likely to have been the survivors of sexual violence perpetrated by anyone.^{41,42}

For answers to common questions about intimate partner violence, review the Activate resource titled: [A Research-Based Question and Answer Resource on Intimate Partner and Teen Dating Violence for Youth-Supporting Professionals](#); or the TA tool titled: [How to Start a Conversation With a Young Person Who May Be Experiencing Intimate Partner Violence or Teen Dating Violence](#).

Sexual and Reproductive Health Data Among Community-Based Samples of Youth Who Experience Homelessness

This section focuses on data analyses of select community-based samples.

Some sexual and reproductive health experiences are difficult to estimate at the national level. However, data collected from community-based samples—such as those gathered through shelters, drop-in centers, and street outreach programs—offer valuable insight into these experiences among youth experiencing homelessness. This section presents prevalence estimates of pregnancy and parenthood, engaging in sex

^d Sexual dating violence involves any unwanted sexual activity that a young person is pressured or forced into by someone they are dating. This can include unwanted kissing or touching, or being physically forced to have sex.

^e Physical dating violence involves being deliberately harmed by a dating partner. This may include being hit, shoved, or injured with an object or weapon.

trade, and sex trafficking from multiple studies of community-based samples of youth who experience homelessness.

Pregnancy and parenthood

Pregnancy and parenthood are common among youth and young adults experiencing homelessness. An estimated 39 percent of women 13 to 25 years old experiencing homelessness report being pregnant or having a child, and 19 percent of males 13 to 25 years old report that they were a parent or had a pregnant partner.⁴³ Table 5 presents findings from a brief survey administered to 4,139 unaccompanied youth and young adults ages 13 to 25 experiencing homelessness across 22 U.S. counties.⁴⁴ The majority of youth experiencing homelessness reported being in a shelter (48%), unsheltered (24%), or staying with others (24%) the night before completing the survey.⁴⁵ Findings indicate that pregnancy and parenthood rates vary significantly by age and sex.⁴⁶

Table 5. Pregnancy or Parenting Estimates by Sex⁴⁷

	Percent of Females Who Are Pregnant or Parenting	Percent of Males With a Pregnant Partner or Parenting
13- to 17-year-olds experiencing homelessness	10%	3%
18- to 25-year-olds experiencing homelessness	44%	18%

The prevalence of pregnancy and parenthood among youth ages 18 to 25 who are experiencing homelessness is higher compared to their stably housed peers in the general population.⁴⁸ Of those who reported having a child and experiencing homelessness, 79 percent of women and 47 percent of men reported having custody of their child(ren).⁴⁹ Pregnant and parenting youth and young adults experiencing homelessness often face significant barriers to maintaining stable housing and consistent relationships with service providers.⁵⁰

For more information on young parents who experience homelessness, review the Activate resource titled: [Exploring the Dual Experiences of Parenting While Being Parented](#).

Survival sex and sex trade^f

Engaging in survival sex—specifically, exchanging sex acts for anything required for survival, such as food, shelter, money, or other basic necessities—is a form of transactional sex that is a reality for many youth experiencing homelessness.⁵¹ This sex occurs not by choice, but in response to extreme economic hardship.^{52,53} Sex trade refers to the exchange of sexual acts for something of value, typically money, and includes a range of experiences from consensual commercial sex work to exploitative or coerced exchanges.⁵⁴ Estimates of engaging in street prostitution and survival sex among youth experiencing

^f Sex trade and survival sex are distinct but overlapping concepts. *Sex trade* broadly refers to the exchange of sex for money, goods, or other resources and can include formal or informal forms of commercial sex. *Survival sex* specifically refers to the exchange of sex for basic needs such as food, shelter, or safety, often in contexts of limited alternatives. While not all individuals engaged in the sex trade are doing so for survival, and not all survival sex is part of the broader sex trade, the two can overlap depending on context and individual circumstances.

homelessness range from 3 percent to 46 percent.⁵⁵ Estimates range widely due to varied sample characteristics, including age and location. Table 6 presents findings from a study of 641 runaway and homeless youth ages 17 to 25 who accessed services through Covenant House’s network of shelters (71%), transitional housing programs (22%), and drop-in centers (7%) at 10 sites around the U.S. and Canada.⁵⁶

Table 6. Survival Sex and Sex Trade Estimates⁵⁷

	Youth Experiencing Homelessness
Turned to survival sex at some point	19%
Engaged in the sex trade at some point	30%
Young men	24%
Young women	38%
Median age of entry into sex trade	18 years old
Engaged in survival sex among those who traded sex	63%

Sex trafficking

Youth experiencing homelessness are also vulnerable to becoming involved in sex trafficking. Sex trafficking is the crime of using “force, fraud, or coercion” to induce another individual to engage in a commercial sex act as defined by the Trafficking Victims Protection Act of 2000 (TVPA).⁵⁸ Minors engaging in a commercial sex act is also considered sex trafficking even if force, fraud, or coercion are not used.⁵⁹ Sex trafficking of a minor is also referred to as the commercial sexual exploitation of children. Table 7 presents estimates from the study of runaway and homeless youth who accessed services through Covenant House.⁶⁰

Table 7. Sex Trafficking Estimates⁶¹

	Youth Experiencing Homelessness
Experienced being sex trafficked at some point	14%
Young men	11%
Young women [§]	20%
Median age of entry into sex trafficking	16 years old

[§] For more information on differences in sex trade and sex trafficking related to individual characteristics among youth experiencing homelessness, see: <https://oag.ca.gov/sites/all/files/agweb/pdfs/ht/murphy-labor-sex-trafficking-homeless-youth.pdf>

	Youth Experiencing Homelessness
Sex trafficked youth who were minors involved in commercial/survival sex without third-party coercion	42%

For answers to common questions about sex trafficking, see [A Research-Based Question and Answer Resource on Sex Trafficking for Youth- Supporting Professionals](#).

Understanding Sexual and Reproductive Health Samples Sources: National vs. Community-Based Samples

This data summary provides prevalence estimates for key sexual and reproductive health experiences among youth experiencing homelessness. The data come from surveys of nationally representative samples that include students experiencing homelessness or housing instability and studies that recruited community-based samples of youth experiencing homelessness. Both sources of data can deepen our knowledge about the sexual and reproductive health of youth experiencing homelessness. However, each data source has strengths and limitations, and professionals must consider both when interpreting findings and applying them to practice.

All data must be understood in the context of how they were collected. Recognizing the strengths and limitations of each data source will help youth-supporting professions accurately interpret findings and apply them in practice.

Representative national samples allow researchers to identify trends and disparities at a population level. Table 8 summarizes the tradeoffs associated with using data derived from nationally representative samples of youth to draw conclusions about the sexual and reproductive health of youth experiencing homelessness.

Table 8. Strengths and Limitations of Nationally Representative Samples

Strengths	Limitations
✓ Broad applicability: Representative samples provide estimates that apply to the population. ✓ Comparative insights: Allow for comparisons with stably housed youth. ✓ Trend identification: Allow for detection of population-level patterns and disparities.	✗ Small sample: Youth experiencing homelessness comprise a small proportion of the total sample, which limits the ability to make group comparisons. ✗ Exclusion of disengaged youth: Youth experiencing or at risk of homelessness may be systematically excluded from samples. For example, student samples do not include youth who have dropped out of school and are at higher risk of experiencing homelessness. ✗ Skewed age of sample: Youth experiencing homelessness who are under age 18 may be overrepresented, potentially leading to lower estimates for some measures of sexual and reproductive health. ✗ Not designed to capture homelessness: Data do not capture the diversity of youth experiences with homelessness.

Community-based samples of youth experiencing homelessness can provide rich insights into the lives and experiences of these youth. However, these insights may not be generalizable to all youth experiencing homelessness because community-based samples are not representative. Table 9 provides a summary of the tradeoffs associated with using data derived from community-based samples to draw conclusions about the sexual and reproductive health of youth experiencing homelessness.

Table 9. Strengths and Limitations of Community-Based Samples

Strengths	Limitations
✓ Rich insights: Provide in-depth understanding of the lived experiences of youth experiencing homelessness. ✓ Targeted recruitment: Effectively reach youth through shelters, drop-in centers, and outreach programs. ✓ More representation of subgroups: Effectively capture populations with differences in individual characteristics, who may be more likely to access services.	✗ Selection bias: Findings may not be generalizable because youth disconnected from services are excluded. ✗ Older samples: Youth are often age 18 or older, which can lead to estimates reflecting higher rates of reporting on some sexual and reproductive health behaviors than would be expected in a younger adolescent population.⁶² ✗ Sex disparities: Young men are more likely to be unsheltered and may be underrepresented.⁶³ ✗ Small sample sizes: Typically include fewer than 200 participants. ✗ Geographic limitations: Results may not apply to other jurisdictions. ✗ Variability in experiences: Homelessness experiences vary widely within and across samples.

Methods

We selected the sexual and reproductive health topics covered in this summary—along with the corresponding measures and data—through a multi-step process that included (1) updating a literature search to identify relevant research and resources and (2) gathering input from members of Activate’s Research Alliance.

We updated a literature search conducted by the Activate team in 2021 using Academic Search Ultimate, a comprehensive EBSCO database of literature, and PubMed, a database focused on health sciences. The original search focused on the same broad topics explored in this summary and the same EBSCO and PubMed databases. We included the results of both searches in the summary.

The original search used a combination of structured search strings and database filters to identify relevant studies for this research summary. The search strings included terms related to sexual and reproductive health (e.g., "contraceptive access") and terms related to youth experiencing homelessness (e.g., "homeless," "unstably housed"). We filtered results to include only English-language publications involving United States-based samples published in peer-reviewed journals from 2011 to 2021. The updated search captured studies published since 2021.

We exported 16 potentially relevant articles that we coded from the updated search to describe the data source, characteristics of the population studied, and the measures of sexual and reproductive health that were used. We used the results of the initial coding to determine the scope of the summary. Then, the research team extracted detailed information from each article.

Collectively, the articles reviewed for this summary were published from 2010 to 2024. We prioritized more recent research (i.e., studies published since 2021), but cited studies identified as part of the original search when the more recent literature was insufficient. We also conducted supplemental searches for additional information when needed.

We solicited feedback from Activate’s Research Alliance members on the literature search findings, as well as the summary’s format, content, and data takeaways.

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