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## **Sociofamiliar Characteristics and Health Care Needs of Homeless and Runaway Adolescents in Spain**

To the Editor:

A survey of sociofamiliar characteristics and health care needs among 100 homeless and runaway adolescents (60% male/40% female) admitted to institutional foster care facility in Zaragoza City (Spain) were carried out from 1992-2001. The youth were between the ages of 11 and 17 years, with an average age of 15.2 years. At placement, a psychosocial interview and health screening were performed according to published health care guidelines for homeless and runaway youth [1], to assess the sociofamiliar profile, risk behaviors and health needs, and to identify acute or chronic illness. Health screening included a medical and social history, a complete physical and anthropometric examination, and a laboratory assessment with those tests indicated by historical or physical findings.

With regard to sociofamiliar characteristics, 43% of runaways left home after a disagreement with parents, 31% left home because of problems with parents or relatives, such as neglect, abuse, or serious conflicts, 20% left home because their parents or relatives have abandoned them, asked them to leave, or subjected them to extreme levels of abuse or neglect, and 6% left private or public institutions or foster homes. Sixty per cent of the interviewed adolescents were shown to have suffered some form of maltreatment produced by parents or relatives. Of these, 48% reported physical abuse, 41% neglect, 31% emotional abuse, and 11% sexual abuse. Thirty-two per cent of runaways had come from homes with both parents present, 27% from homes with only mother present, 21% from homes with only father present, 11% from homes with any parent and his/her partner present, and 9% from homes with no parent present. A total of 30% of the youth had come from dysfunctional families with problems of alcohol/drug abuse (15%), delinquency (12%), and psychiatric illness (3%). As a means of survival, 20% of homeless reported involvement in illegal activities such as theft (11%), drug dealing

(7%), and street prostitution (2%). Three adolescents were subjected to sexual or physical victimization by others persons.

With regard to health care needs, the most frequent health problems were mental (54%) [conduct-disordered behaviors (23%), alcohol/drug abuse (14%), depression (5%), suicide attempts (4%), other psychiatric disorders (8%)], dental (41%), visual (23%), dermatologic (18%), and nutritional (16%) [obesity (8%), malnutrition (6%), iron deficiency anemia (2%)]. Less prevalent health problems were incomplete immunization status (10%), respiratory (10%), pregnancy (8%), growth delay (7%), orthopedic (4%), otic (2%), hepatitis B/C infection (2%), and sexually transmitted diseases (1%).

In Spain, running away from home is a phenomenon that has been increasing during the 1990s. Nevertheless, the majority of this young people group return home within a few days and are not placed in foster care. Moreover, many youth that have entered foster care run away from the center within a few hours without have performed the medical screening. This study indicates that several homeless and runaways youth admitted to foster care in Spain come from monoparental and/or dysfunctional families, with a high incidence of abuse, neglect and abandon. In regards to the health needs of these adolescents, the current and prior health problems were consistent with those documented in other developed countries [1, 2], beings that this population is especially in need of mental services. The levels of family violence and dysfunction, maltreatment, mental disorders, and health problems in these youth are higher than the general adolescent population [1,2] and as severe as those reported among maltreated [3] and delinquent adolescents [4] under the care of Juvenile Protective and Correctional Systems. The time in foster care presents a unique opportunity to co-ordinate the physical and mental health, social, educational, vocational, and legal service needs of this high-risk population.

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