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"Then You Fall Off": Youth Experiences and Responses to Transitioning to Homelessness

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"Then You Fall Off": Youth Experiences and Responses to Transitioning to Homelessness

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Introduction

The National Center on Family Homelessness estimates that approximately 2.5 million American children experienced an episode of homelessness in 2013 (Bassuk, Murphy, Coupe, Kenney, & Beach, 2014). To address this, the United States Interagency Council on Homelessness (2014) set forth a framework to end youth homelessness by 2020 through improving data collection and capacity building of youth serving organizations and providers. This paper contributes to the larger goal of ending homelessness by exploring and characterizing how homeless youth experience the entry into homelessness and how they respond to becoming homeless. By understanding this transition, we can start to define critical points of intervention that may facilitate self-sufficiency and an exit out of homelessness.

Once homeless, youth experience worse physical and mental health than the general adolescent population with widespread and significant negative health outcomes and social implications (Kulik, Gaetz, Crowe, & Ford-Jones, 2011). Youth homelessness is associated with increased risk for HIV (English, 2006; Pfeifer & Oliver, 1997; Ray, 2006), sexually transmitted infections (STIs) (Medlow, Klineberg, & Steinbeck, 2014), substance use (Rosenthal, Mallett, Milburn, & Rotheram-Borus, 2008; Unger et al., 1998), and psychiatric disorders (Edidin, Ganim, Hunter, & Karnik, 2012). The mortality rate for homeless adolescents is 10 times higher than the general adolescent population with suicide and drug overdose as the leading causes of death for homeless youth (Roy et al., 2004).

We define youth homelessness to include those 13-24 years old who are literally homeless (i.e. living on the streets) or unstably housed (i.e. temporarily staying with friends, in hotels, or in homeless shelters), a definition commonly used for homeless youth (Kulik et al., 2011). Youth experiencing homelessness and unstable housing often move between these different living arrangements. Youth become homeless in several ways. Contributing factors include physical or sexual abuse (Mayock, Corr, & O'Sullivan, 2011), domestic violence (Grant et al., 2007), parental and personal substance use (Mallett, Rosenthal, & Keys, 2005), psychiatric disorders (Edidin et al., 2012), and criminality (Martijn & Sharpe, 2006). Youth with a history of involvement in the foster care system are also at greater risk of homelessness (Zlotnick, 2009). Qualitative studies have described similar reasons for youth homelessness including adverse family experiences marked with substance use, maltreatment, and violence as well as being pushed out of the home by family or removed from the home by child protective services (CPS) (Tyler & Schmitz, 2013). In addition, youth who experience family homelessness as younger children may be at increased risk for transitioning to unaccompanied homelessness as teenagers or young adults.

Adverse Family Experiences

Adverse family experiences such as neglect, physical, sexual, and emotional abuse and stressful and chaotic family environments are contributing factors to youth homelessness (Mallett et al., 2005). Experiences of adversity, common in homeless youth, may provide some insight into the family breakdowns that can lead to youth homelessness. Rew et al. (2001) found that nearly half of homeless youth (47%) reported sexual abuse with one third reporting leaving home due to parental sexual

abuse. Additionally, it was reported that 51% of youth were thrown out of their homes by their parents and 37% left home because of parental disapproval of their substance use (Rew, Taylor-Seehafer, Thomas, & Yockey, 2001). In a sample of runaway youth, family factors were a significant predictor of running away. Those who reported having neglectful parents (12%) were 65% more likely to run away, and those reporting feeling no trust or security with parents (40%) were 30% more likely to run away multiple times (Thompson & Pillai, 2006). Homeless youth are disproportionately burdened by histories of family related adversity including abuse, neglect, and housing instability (Kidd, 2006). Experiencing such adversity prior to age 16 can compromise stress reactions and lead to behavioral impulsivity (Lovallo, 2013), potentially adding to the risk for running away. These adversities may also put the entire family, not just youth, at risk of being homeless (Zlotnick, Tam, & Zerger, 2012). Many homeless youth used substances prior to leaving home but also attributed their personal substance use to parental substance drug use/abuse (Mallett et al., 2005).

Family Homelessness

Family homelessness is pervasive among poor and low-income families (Grant, Gracy, Goldsmith, Shapiro, & Redlener, 2013). While the prevalence appears to have dropped about 8% since 2007, the Department of Housing and Urban Development's 2014 Annual Homeless Assessment Report, found that homeless families account for about 37% of all the homeless, a prevalence that has remained steady since 2009. Studies exploring family homelessness have provided contextual information about the specific risks of family homelessness. Few studies have explored the

role of family homelessness on subsequent episodes of unaccompanied youth homelessness (Paquette & Bassuk, 2009).

Homeless youth may also experience homelessness as the heads of households. The rates of pregnancy among homeless young adults are higher than those in the general population. A multi-city study found that 48% of street living youth and 33% of youth living in emergency shelters reported at least one pregnancy during their lifetime (Greene & Ringwalt, 1998), much higher than the 25% of all youth who were estimated to experience a pregnancy by the age of 20 in 2014 (National Campaign, 2014). Homeless adolescents and young adults twenty-one years of age or younger who are parenting are twice as likely to have a history of foster care and are less likely to live independently prior to becoming homeless than their housed peers (Nunez, 2001). Housing instability for young parents increases stress which may impede their ability to function as a consistent and supportive caregiver, a challenge that may have long-term consequences for their children and on their children's ability to function as parents (Hausman & Hammen, 1993).

Foster Care Youth

Youth with a history of foster care experience homelessness at approximately 34 times the rates of same-aged non-foster youth (Zlotnick, 2009). Young adults who have left the foster care system are at high risk of experiencing periods of homelessness in the years immediately after they leave foster care (Dworsky, Napolitano, & Courtney, 2013). A national study that followed youth as they left foster care has documented rates of homelessness to be between 11-22% in the first several years after youth exit foster care (Brandford & English, 2004; Dworsky & Courtney, 2010; Fowler, Toro, & Miles, 2009; Pecora et al., 2006) and if housing instability

or “couch surfing” are included, these estimates rise to 25-40% (Brandford & English, 2004; Courtney, Piliavin, Grogan-Kaylor, & Nesmith, 2001; Dworsky & Courtney, 2010; Fowler et al., 2009). Also, while in foster care, many youth run away and become homeless, a coping mechanism that is both a response to a stressful situation and a further contributor to housing instability (Rosario, Schrimshaw, & Hunter, 2012). Young adults with histories of foster care involvement are also overly represented among youth who access homeless services. Studies have found that 24-35% of those accessing homeless services have histories of child welfare involvement or out-of-home placement (Park, Metraux, & Culhane, 2005; Thompson & Hasin, 2011). Homeless young adults with a history of foster care have been identified as at greater risk for mental health and substance use problems compared to those without foster care experience (Thompson & Hasin, 2012; Thompson & Hasin, 2011). In addition, youth who age out of foster care have high rates of emotional and behavioral problems (McMillen et al., 2005) which put them at risk for sustained instability in housing (Fowler et al., 2009).

Purpose

The current study adopts a resilience framework (Fergus & Zimmerman, 2005) to examine data from a qualitative study that explored how youth experience homelessness. Specifically, we focus on two main research questions: 1) How do homeless youth describe their entry into homelessness? And 2) How do homeless youth respond to becoming homeless? Better understanding this phenomenon, particularly from an assets model (Leffert et al., 1998), can assist in shaping policies and identifying intervention foci to help youth experiencing homelessness build

protective factors and transition to stable housing, reducing the high social and health costs of extended periods of homelessness.

Methods

We conducted a qualitative study with an embedded quantitative demographic survey to address our research questions following a process described by Creswell et al. (2011). The study included 13 focus groups and surveys with 64 homeless and unstably housed youth.

Sample and Recruitment

A nonprobability, purposive sample of homeless youth aged 14-24 were recruited from two emergency shelters, drop-in centers, one foster-care alumni and youth service center, five community-based magnet events (e.g. homeless youth dinners), and street outreach over a 6-month period in a large urban county in the Southwest. Health and social services providers, key informants, and the local coalition of homeless youth organizations identified appropriate locations for targeted recruitment. Recruitment efforts focused on increasing representation of hard-to-reach subgroups of homeless youth including minors, pregnant and parenting youth, unsheltered youth, and lesbian, gay, bisexual, and transgender (LGBT) youth. Participants were eligible for the study if they were English speaking, under age 25, were not living with a parent or guardian or getting stable supportive housing from a family member or were staying in a shelter or other location not intended for domicile (e.g. hotel, outside, vacant building) at the time of focus group interviews, were able to consent and were available to participate in a focus group during the data collection period. Participants were approached at the recruitment sites to determine eligibility and interest in the study. Participants were predominately African

American, over 18 years old, and staying at a shelter (Table 1). The research protocol was approved by the human subjects review board at each of the three participating institutions.

Focus Group Procedures

Thirteen focus groups were conducted by two PhD-level investigators and a graduate social work student at the various community locations. Participants first consented (adults) or assented (minors) to participate in the focus groups. For minors, the state appointed guardian from Child Protective Services (CPS) and advocate first consented for youth to be approached about their interest in participating in the study. For youth who were approved to be recruited, verbal assent was obtained prior to participation. Once consented and assented, participants took a short survey. The survey was conducted prior to the focus group to elicit demographic characteristics and sensitive information such as sexual orientation that were potentially unsafe to inquire about in a group setting. Participants provided information about their age, race/ethnicity (self-identified allowing them to choose multiple racial groups), gender, sexual orientation, parenting status, length of homelessness, educational situation, and foster care history. No identifying personal information was collected from the participants. Each participant received a \$20 gift card for a local grocery store.

Focus groups lasted approximately 1-1.5 hours with 3-8 youth in each group (mean=6). The locations of the groups were private, had minimal distractions, were easily accessible to the participants, and were in open view yet sufficiently private to prevent nonparticipants from overhearing the conversation. Focus groups were conducted with gender-divided groups of males and females except for two groups of unsheltered

street youth who preferred to conduct the group together. We divided by gender to improve comfort and disclosure of sensitive information among the participants. A semi-structured interview guide was used to assist in shaping the direction of the conversation. Following Seidman (2012), we used a loosely structured, comfortable, and conversational interview style to conduct the focus groups (Seidman, 2012). Questions and probes were used to elicit information about the homelessness experience and youth's transition to homelessness and unstable housing. Questions proposed during the interview were modified using an iterative process by which participant responses informed subsequent questions. Focus groups were recorded and professionally transcribed verbatim. One group of minor youth in CPS custody was not recorded by request of one participant's court appointed youth advocate. Research assistants took copious field notes during all focus groups that were used in the data analysis.

Analytic Strategy

A team of four PhD-level qualitative analysts used thematic content analysis to develop a codebook through preliminary discussion of themes, then refined the codebook iteratively to form a final set of codes. First, audio files were transcribed, cross-validated with transcriptions, and cleaned. Second, we coded a subset of transcripts and used investigator consensus building to merge differing interpretations of text. Third, we conducted a cross case thematic content analysis of the entire data set to look for common themes present in the entire sample (Bernard & Ryan, 2010). Analysts discussed emerging themes and subthemes identified to generate final results. ATLAS.ti (version 7) was used to manage the data, organize codes, and determine representativeness of the quotes. Thematic content analysis and peer consensus were used to determine themes that emerged

from the data. Confirmability of data was verified among the analysts using peer debriefing of coding, thematic exemplars, and supportive quotes for cohesion of descriptive interpretations.

Results

Sample Demographics

Participants represent a nonprobability, purposive sample of 64 homeless and unstably housed youth ages 14-24 years old (Table 1). The sample was composed of 67% sheltered and 33% unsheltered youth and was ethnically diverse with 75% African American and 12% Hispanic. It contained key subpopulations of homeless youth including 19% LGBT, 25% pregnant or parenting, 23% minors (mean=18 years, median=19 years), and 52% female. Additionally, 48% of the sample had a history of or were currently in foster care. All minor youth (n=15) were currently attending school onsite at the shelter. Of the adult youth participants, 35% had not completed high school. Some (22%) of the parenting youth currently had their children with them while others had relinquished child custody either formally or informally. Length of current homeless episode ranged from 30-365 days (mean= 91 days) for minor youth and from three days to seven years (mean=503 days) in young adults.

Thematic Findings

Three main themes emerged relating to the transition into homelessness; family homelessness, histories of foster care, and non-supportive family processes. Youth describe how these experiences manifested and influenced their transition into homelessness. In response to this transition into homelessness three themes emerged; self-reliance,

hope, and resilience. The range of participant characteristics is identified with their quotes to demonstrate the variance in respondents.

Transitions to Homelessness

Family Homelessness *“When I was little, we used to stay in shelters.”*

Issues related to family homelessness emerged in several ways. Youth talked about their past experiences as children in homeless families and as homeless parents themselves. Many youth who were currently homeless talked about experiences of homelessness as they were growing up. One sheltered young woman described her experience of family homelessness. “When I was little, we used to stay in shelters and stuff, like stay in hotels for a year. So like besides that, like me being on my own, this is the first shelter I ever been in, like on my own.” Another sheltered young woman described how she and her mother managed while homeless.

“So me and my mom... we was like kind of safe because we was next door to a fire department...We stayed there for a couple of months...then we went to the westside to the storage unit, and we slept there. [In city], we slept downtown, because the people you see drunk they’ll be dropping money or they’ll give us money so we can eat or like [pay] for [hotel] rooms.”

There were several consistent factors that emerged in these narratives as contributors to homelessness. Some youth described parental intimate partner violence as a precursor to becoming homeless as the family fled the situation. “I was with my mom. She was in an abusive situation, so

they wanted to put us up.” (Unsheltered adult male). In addition, youth talked about intimate partner violence contributing to recent homelessness. One unsheltered young woman described episodic homelessness with her six year old child. They found themselves homeless when fleeing intimate partner violence. “He hit me in my eye and stuff and threw me across the room, and he tried to set me on fire. He stabbed me in my heart. He hit me with a sledge hammer, a knife, and then I became homeless again.”

Other contributing factors included sudden relocation, financial problems and transiency. One unsheltered male described the intersection of these issues: “I’ve been homeless for now like--ever since I came down to [city], it just slowly became that... I’m homeless. All our money went into our plan to get down here, because we’re in a situation like we had to leave immediately, so we’re down here broke.” (Unsheltered adult male). Parental substance use was also a contributing factor in several narratives: “We was living in a shelter that helped us get our own apartment, but then my mom started doing stuff I didn’t like [drugs], so we kept arguing and fighting...” (Sheltered adult female).

Prior experiences with homelessness shaped how young people talked about their current situations. One sheltered young man described his views on his family’s history of homelessness: “I feel that homelessness is a curse. I feel that we’ve been cursed because my family’s involved in this...We called on God, and he don’t give much help. So I feel that we’re being punished for things that we did in the past, and it’s kind of like a lesson and a punishment at the same time.” Another sheltered young woman described how she would do anything to keep her child out of a shelter since that was where she grew up. “I swore up and down I wasn’t going to put my baby into a shelter...I was going to dance or I was going do to it or what I had to do to stay out of a shelter.”

Experience with the Foster Care System

Leaving the Family Home. "CPS Took Us."

Foster care experiences were frequently part of the stories of becoming homeless. Youth who were currently in foster care, had a history of foster care, or who had aged out of the foster care system often described their entry into the system and their placement experiences. Some of the same issues that led to family homelessness led to youth entering the foster system such as parental substance use and abuse.

"I was living with my mom and four of my brothers. She used to do pills and it wasn't bad with the pain killers because off of work she used to do them. It wasn't really nothing. Then a couple months go by and she started to get heavily into pills, then she ends up losing her job. Then we started living with my aunt but my aunt was no help because she was selling pills too so my mom started selling pills. Then one day I came home from school and the police was there. And she had a warrant for a DUI. My grandma was there and she was supposed to take us. [city] called CPS and CPS took us."
(Sheltered minor male).

Youth who had been placed at a shelter by CPS described abusive situations that led to their current unstable living situation. A sheltered minor young man described family abuse. "I came into care because my grandparents told on my mom saying we don't have enough food in the house...and she didn't have a job but she was prostituting. She left at nighttime. I didn't know where she went. CPS got me when I was 9." Another

female sheltered minor youth described lifetime abuse and being kicked out by her foster and adoptive family. “The people who raised...I’m not related to them... my grandma. She was kind of psycho. I remember she was abusive, and when I was like 6, 7, and 8, she used to kick me out...late at night—and I would like roam the streets...I recently got kicked out by my adopted family”

A sheltered young woman also mentioned abuse as the precursor to entering foster care. “Me and my brother were taken because me and my little brother was molested by my uncle who’s not even my real uncle. He was actually adoptedIt’s like a generational curse with me, like everything my mom went through, I’m going through...He molested me from the age of 10-12 and penetrated me. They took us from the home and because my mom was on drugs, we was gone at a young age.”

Aging Out. “She drove me to a shelter and cut me loose.”

Some youth expressed that they became homeless when they were kicked out of their foster homes as they aged out of the foster care system. An unsheltered young woman described how her foster family brought her to the shelter when she turned 18 years old.

“I was adopted. When I turned 18, my parents told me I had to get out of the house because I had no check, no support. My checks stopped coming. I ran down the stairs on my 18th birthday, “Mom, guess what today is?” I grew up in [city] a high-class area... And she told me, “It’s time for you to get the hell out of my house.” I’m homeless today. She drove me to a shelter and cut me loose. My intake date at [the shelter] for

the very first time was my birthday...That's how I became homeless.”

Another youth described how her foster parents brought her to the shelter when she aged out of the system in the hopes that it would help her learn to make it on her own. “She [foster mother] said she brought me here for a reason, so I kind of can understand.” (Sheltered adult female).

Running Away. “We don't much get along—so I ran away.”

Minors were often in the midst of conflicts with family or foster parents and described running away. Foster youth discussed some of the precursors to running away from home. “My foster mom started getting real mean. I started getting into it with her because I started working. She was telling CPS I was stealing when I wasn't. Thanksgiving her son-in-law came upstairs and hit me because he thought I was smoking. So my foster mom thinks I'm not gonna run. But I get a couple of stuff and I run at night.” (Sheltered minor male). Family dynamics frequently played a role in running away. “The reason I'm here is because my mama—me and her, we don't much get along—my adopted mama, we don't much get along—so I ran away.” (Sheltered minor female). Another sheltered minor female described ending up at a CPS shelter because of running away. “I ran away from my sister's house, because I was being bullied at school, and I didn't feel comfortable telling my sister.” Several older youth described how they ran away while in foster care. One unsheltered young man said, “So I started running away from here to there to there. I'm from [city, state] so like they sent me here to [city], and I met people down here, and I started running away and going to their house.”

Additionally, homeless youth experienced abuse and adversities while in the foster care system. Adverse conditions in foster homes appeared to lead some youth to reject the permanency of foster homes in favor for temporary shelters. One sheltered minor male expressed his wish to 'to take foster youth to a shelter' and 'have those foster homes shut down'. "To be honest, CPS is...they're making prisons just for us because the majority of the CPS kids are going straight to jail...kids come in who were raped and molested as children. You need to put them in a safe environment instead of foster homes."

Other sheltered minor youth described the changes they hope to see in the foster system that may address some of the reasons they expressed for running away.

"You should find people with higher degrees, basically a place for counselors to sit there and talk to you. Even just right now you all sitting and listening to us. It's like, well maybe some people do care....The best way to help kids in our situation [abused] is...some staff have been in CPS and have been down that [same] road. Kind of a like a mentor. You need to find someone who's been through what you've done."

Non-Supportive Family Processes

Abuse and Family Conflicts. "My parents were emotionally abusive."

Even for youth that did not end up being removed from their families by CPS, family disruption was generally at the heart of the problems that led to homelessness. Youth described how disruptive family events and family coping strategies led to homelessness and unstable housing, a

common precursor to homeless episodes. One youth described how they could pick out youth and tell whether they would end up homeless by knowing their family situation. “Most likely if their family’s messed up, they’re messed up.” (Sheltered pregnant female). Another youth who described a lifetime of emotional abuse and neglect by her biological parents described how she came to be at the shelter.

“My parents were emotionally abusive...when I turned 18, I knew that I was going to get kicked out. So after that, I just—I basically moved from place to place, living with friends, and then I finally had nowhere else to go, so then I ended up here [shelter].” (Sheltered adult female).

Some youth mentioned that they would voluntarily seek shelter in order to avoid adverse family events. “When I go to [the shelter], I decide to be there because it be so much stuff that’s going on in my family that I just need a break. So I go... and I chill. And when they kick me out or whatever, I know where I can go back home to. I’m not that experienced on the streets because I try to avoid it.” (Unsheltered adult male). One sheltered young man described how a fight with family led to being kicked out in the middle of the night. “I was kicked out at 1:00 in the morning, and I was on the streets for two days. I was sleeping in a car.” Conflicts with family members also preceded homelessness. One youth described how an incident of perceived lying led to being kicked out. “When he [my dad] thought I was lying he just said I had to go.” (Sheltered pregnant female). Another sheltered young man discussed family fights that were a catalyst for homelessness. “I was paying for my cell phone because I had—like—a \$200 cell phone bill, and my adopted mom—like—found out, and she was talking about I was being

selfish for saving money for my cell phone. That's one thing she kicked me out."

Youth also expressed leaving home to avoid further abuse. An unsheltered adult male said, "I became homeless when I was 15. I ran away because I got tired of being abused." Some youth felt that they had chosen to leave the family home to come live at the shelter. "The reason I chose to come here [shelter]—me and my mom weren't really seeing eye to eye, and I knew it was 'cause I was trying to find out who I was, but disrespecting her in a sense. So, I left home, came here, and I feel like it's better and it helped me." (Sheltered adult female).

Lack of Supportive Family. "My mom didn't want me to come back."

Youth also described families that did not support them. One sheltered young woman expressed why she left home. "Me and my mom weren't getting along—her boyfriend—she picked her boyfriend over me—you know, all kinds of stuff. We'd get into it—fight, all that. She put her hands on me and stuff, so I couldn't take no more, so I got out the house." Again, parental drug use and decision making contributed to this lack of support. "[I was] bouncing around house to house, my mama don't pay the rent, you know, smoke weed, do heroin, whatever, um, I was abused. So like, it was crazy, I used to beg God, like please let her just kick me out, and when I turned 14, she finally kicked me out." (Sheltered adult female). Another youth described how being kicked out led to her current situation: "I have been on the street for--well, homeless--for 3 years... My mom kicked me out on my birthday and told me I had to leave because I was a grown woman. I was supposed to do what I was supposed to do for myself. I'm

currently pregnant, staying at a friend's house by the grace of God, because otherwise I would be on the street." (Unsheltered adult pregnant female).

Families were also reluctant to take youth back in after being let out of jail or prison. "Well, I came here [the shelter] because when I got out of jail my mom didn't want me to come back." (Sheltered adult male). Another youth had no place to go after prison. "I got out of state jail on January 2. I've been on the streets since." (Unsheltered adult male). In the survey several minors and adults (33% and 32%, respectfully) reported spending at least one night in a detention center such as jail in the past 12 months.

Youth Problems. "I was being stupid, doing drugs, selling drugs ..."

Youth also discussed how their personal behaviors, such as drug use, drug dealing, and other criminal activities led to being kicked out. "I was using drugs at my house. Like selling drugs...My friends and I were on drugs and we decided to break into my grandmas' house and steal her car. So we started driving around stealing other people's cars. My cousin told on me and my mom took me to the cops. She wouldn't let me get back in the house." (Sheltered minor male). An unsheltered young woman said, "I became homeless because I was being stupid, doing drugs, selling drugs out of the house, stealing stuff from my parents, breaking stuff in my house." A sheltered minor young man described how his behavior led to being kicked out.

"I was just acting up a lot. Like—I didn't feel like changing at that moment...if they feel like they're in a bad situation at their home, they should find a—a relative...stay over there with them. Unless they... don't have that option. You just do what you've got to do."

Unstable Housing. “Then I fell off.”

Many youth also described how they began in unstable housing, living with extended family members, family friends, and acquaintances and how the instability of these living arrangements led to episodes of homelessness. “Basically I got kicked out of the school. So I went to my aunt’s house...and the next thing I knew, my stuff was on the street.” (Unsheltered adult female). A sheltered young woman described how unstable housing preceded being on the streets: “I was staying with some people, but when you’re being homeless, you can’t just—nobody’s going to let you just stay on their stuff, you know, live in their house...so I was bouncing around, bouncing around, but then I fell off and I had to sleep at parks, you know, walk—I walked for days.” Another sheltered young woman also talked about the fragile nature of housing stability and her sudden move to homelessness.

“Like, okay, like you be doing good, like you come up, you’re stable, you fall off, and you be back to square one again, you know? So like, I went—me, I’m the type like I try to help people, too, and then when it’s my turn and need help, nobody’s there, so that’s what I mean by fall off, being left alone out there. So that’s kind of like your—I was doing good, me and my boyfriend had an apartment and stuff. His grandmamma called the police and he go to jail. And then I’m about to go to the college, and the next day my purse gets stolen. So my rent money, my wallet, my everything. So I fell off. Like I was doing good and they let me stay, and then I fell off, and then I had to do this [come to the shelter].

Our data suggest that youth who become homeless end up in these situations because of push factors from their family of origin and that these events may affect their own ability to adequately reach self-sufficiency. Homeless youth often experience very tenuous housing situations that can rapidly and unexpectedly lapse into literal homelessness as they ‘fall off’. This unstable housing appears to be a precursor to homelessness and is often experienced prior to entering a shelter, seeking services, or spending time on the streets.

Response to Homelessness

Youth responded to their transition into homelessness by increasing their self-reliance, finding strength in hope, and demonstrating resilience to the adversities of homelessness.

Self-Reliance: “Just Do Me”

Youth described self-reliance as both a response to failed connections with supportive others and the desire to do it on their own. Youth appear to have developed a strong self-reliance as a response to family conflict and victimization while homeless. Negative experiences often made youth wary of connections with others. This wariness led to self-reliance that appeared to be both reactive (i.e. don’t want to get hurt) and a source of strength (i.e. self-determination and empowerment).

One unsheltered young man described this,

“I choose not to. I just try to live my life by myself because when I’m by myself—I’ve got friends. You feel me? But I don’t think my family’s—they have their issues, you know, so I try

to let them live their life and let me do me. I figure I'm an adult. I can deal with it. I can do everything else myself. I can do this myself."

One sheltered young woman said, "Yeah, I had like bag up when I got raped, so I had to be like, I'm not letting nobody hurt me no more, **** 'em, like I'm going to just do me, **** everybody, right?" A sheltered, pregnant young woman described why she only relies on herself and how it impacts relationships with others while homeless.

"Well I can't do it because I've been screwed over so many times, I'm solo molo. I don't give a damn. I don't care how cool we are. I'll give you my all. I'll give you my last. But I've been screwed over too many times to be trusting people. I can't do it...I'm just worried about me—too many times. It's just about me now. Me and God, that's it. Even my ex—I'm done. I'm done. I don't care. It's all about me. I'll help you out. Don't get me wrong; I'm about cool people, but don't get attached. I tell people that all the time because I'm always moving."

Another sheltered young woman mentioned how she relies on herself. "I'm one-deep. I ride by myself, go to work by myself, go anywhere, you know?" Some participants believed that their self-reliance was a barrier to getting the help they needed. "I've never been in a shelter, like even being on my own, like I never went to a shelter, no nothing, I just tried to do it by myself." A young woman who had sought help at a shelter described how she moved from relying on herself to asking for help.

“I swallow my pride too much, I don’t want nobody’s help, no nothing, I’m going to do me by myself. And so now I’m at the point where I need help, and I thought it was going to be horrible, asking for help, but it’s not even that bad to be honest. I’m like letting my guards down just a tiny bit.”

A sheltered young man mentioned, “You’re in a situation where you’re homeless, and you try to get it on your own, it’s not going to work out.” An unsheltered young man described this by saying, “Pride problems. I got pride issues, too. That’s why I don’t ask my family for nothing.”

Hope. “I’m Not Out of Help.”

As youth described their responses to homelessness, many expressed a sense of hope and some youth described how spirituality fueled their sense of hope. Hope appears to come from a sense of self-efficacy for being able to rise out of homelessness. This differed from the way youth discussed resilience as a strength against adversity. A sheltered adult female expressed her hope as a sense of peace in knowing her needs will be met by those who are able to provide help. “Cause I know—I know that I’m not—I’m not out of help, you know? I can—if I need something, they have what I need. I’m never homeless.” Another sheltered young woman described her hope in the future.

“I’m grateful, do you know what I mean? I never call myself lower than I am, do you know what I mean? Even now that I’m at the [shelter]...From here, I’m going to go somewhere higher, do you know what I mean? He [God] brought me here for a reason, and I’m very thankful to Him, you know, the

[shelter]. And from here, we're going to go somewhere above that, you know, and the people that doubt in me is going to say wow...And I'm grateful that there's people that actually can help you, in your life, you know, so it's good (laughs)."

Another sheltered young woman expressed her hope.

"So now I try to like say hi to everybody, see how everybody's doing, you know, smile, and live my life, because everything's going to be better at the end of the day. And the only reason why I say that is because I seen this sign, and it's like what you saying and what God's saying, you say it's not worth it, and God says it will be worth it; you say I can't do it, God says you can do all things; you say I'm stressed and frustrated and ready to give up, God says put all your stress and frustration in my care."

An orientation toward the future was also a source of hope. One sheltered young woman described her hope in the future and how she will move past this experience of homelessness.

"I'm going to set my goals, so then I ain't got to think about, oh, yeah, I can leave all that stuff in the past, what I've been through, and move forward and I know I'm going to have something to fall back on. I will be successful when I get out from here, I will finish school, and I will have my own family, and later on, I will never let my kids be in this situation that I am at right now."

Another sheltered young woman described her hope for the future. “I want to get stable. When I’m stable, then I know like I don’t have to worry no more because I’m aggressive, like I never give up, so when I do finally get a task and, also like when I get a job or whatever, it’s going to keep me striving for something” Others talked about being motivated by seeing others succeed. A sheltered young man said, “So I can stand firm and stand strong. I’m dealing with the law right now, but I seen people who made it through, and I can do it, too. [The shelter] would just give me a better route. I don’t have to worry about... where am I going to stay the night, where is my next meal going to come from.” Finally, some found hope in breaking out of their family histories and doing things differently. A sheltered pregnant young woman described her struggle with breaking the cycle of homelessness in her family and expressed future hope.

“I’m nothing like my mama. Just because I’m through what she’s going through [homelessness], I’ve been through what she’s gone through [teenage pregnancy], doesn’t mean I’m going to be like her [drug addict]. I can change that around and change this curse because that’s all it is. It’s pissing me off.”

Sources of Resilience. “Ten Toes Down.”

Despite the extreme hardships associated with homelessness, many youth expressed a high level of resilience in relation to the lived experiences filled with adversity. Youth also expressed different sources of resilience. One sheltered young woman described what self-reliance meant to her.

“Ten toes down. All you got is your feet, your two legs, and a heartbeat, you got to survive, you got to do it on your own, nobody—ain’t nothing free in life.”

A sheltered young woman described her resilience while facing homelessness. “So, I don’t know, it just depends, if you’re strong enough. I don’t know, I take it like surviving, you know? You just got to figure it out to survive, so I survived. I’m still alive, I’m good.” Another sheltered young woman mentioned, “Stuff happens for a reason. It’s just going to make me stronger. Like she said, people doubt her, she’s going to prove them wrong, prove myself wrong, too, but like, you can do it.” A sheltered young woman expressed her resilience as motivation.

“Like it was just motivation. In my head, when I wake up every morning, I tell myself I’m fine, so then I won’t be thinking about it. It depends, like how you feel when you wake up, and I just be trying to stay motivated and tell myself I’m fine, even if I have to tell myself 100 times in my head, I’m fine, I’m fine, I’m fine, and that’s what keeps me going.”

A sheltered young man expressed how ‘wanting it’ fueled his resilience through adversity.

“Yeah. And you’ve got to keep going. You’ve got to keep wanting it to go. You’ve got to keep striving. You’ve got to want it...I’ve done been through too much for me to leave here [shelter] and go back to being homeless. And I’ve done seen and been through a lot. And I was still able to—you know what

I'm saying—move forward.”

An eye toward the future was a strong component of this resilience for many youth who described how the current situation would make them stronger for the future. A sheltered young woman described her resilience as an ability to keep trying against all odds. “I came here to try and get on my feet and everything, so I'm doing the best I can, you know, it's not easy. So, I'm working my way up...so I'm trying. I just stay determined. I like setting myself a goal to strive for, and I'm still trying.” A sheltered young man described homelessness as a learning experience. “Being homeless—but you can learn from that and try not to let that happen anymore or often, if you can help that.” Another sheltered male described how he thinks about being kicked out of his family home as an opportunity. “They kicked me out of my house and—but then I came over here to try to be a better person, to start over, try to succeed.” A sheltered young man said, “I look at it as a part of like once we overcome this, we're going to be real proud, like, “Yeah, I was homeless, but now I'm here.” Another sheltered male described how he hopes to look back on his struggle with homelessness in the future. “I feel like it takes the bad times to really appreciate the good times. We overcome this and look back and be like, yeah, I was homeless one time. I lived at the shelter. You can be like a millionaire.”

Discussion

We conducted this qualitative study to explore the experience of becoming homeless and the response to homelessness in both sheltered and unsheltered youth 14-24 years old. These experiences provide context to how youth conceptualize their experience of entering homelessness and how they respond to homelessness and its many challenges. Participants

in this study spent a significant amount of time moving around between family and friends' homes before they stayed on the street. They moved from place to place frequently, relied heavily on themselves before seeking help, and expressed histories of abuse, family conflict, foster care, and family homelessness. Our data suggest that youth who become homeless are generally doing so because of push factors from their networks or family of origin. In addition, when youth are exposed to adverse family events and pushed out by their networks, it affects their own ability to adequately reach self-sufficiency and fuels a determination to make it on their own. They are essentially positioned to 'fall off' and being 'one-deep.'

Three main themes emerged relating to family dynamics that may contribute to the risk for youth homelessness; family homelessness, histories of foster care, and non-supportive family processes. Youth described how these experiences manifested and influenced how they became homeless or unstably housed. One expressed homelessness as 'a curse' that had been in the family for generations. Often there was poor family functioning due to substance use and abuse originating both from the youth and their families. While this study did not explicitly ask about psychopathology, drug and alcohol problems, criminal involvement and re-victimization, research suggest that once homeless there is a high probability of mental illness, substance use, crime, and victimization (Martijn & Sharpe, 2006). These factors, as well as family conflicts, were present in our study and contributed to youth being pushed out of their homes.

The breakdown of family processes can be viewed as cyclical as parents who are under stress and homeless are themselves often traumatized which impedes their ability to be a supportive and consistent caregiver. To prevent intergenerational homelessness, there needs to be an emphasis on transitions out of public social systems, both the criminal

justice and foster care systems particularly for youth who do not have a stable, supportive family unit to return to when they transition. Youth in foster care have high rates of pregnancy (Oshima, Narendorf, & McMillen, 2013) and data suggests that young parents who were in foster care are less likely to live independently as adults (Nunez, 2001). In our study we found that several of the parenting teens had a history of family homelessness and/or experiences in the foster care system. Participant responses support previous literature that pregnancy can disrupt family relations and exhaust support networks, driving young parenting and pregnant women into shelters (Hausman & Hammen, 1993). In order to fully support parents and their children as they exit homelessness, homeless service programs should consider the broader context of the nontraditional family system and support networks (Paquette & Bassuk, 2009).

This study also provides evidence that the breakdown in family processes can lead to a family's inability to continue supporting youth monetarily or with shelter or food (Martijn & Sharpe, 2006). Youth who are pushed out of family homes due to abuse, neglect, breakdown in communication, and/or are kicked out due to family conflict are often drawn into risky survival behaviors and experience victimization. Youth also reported that due to family breakdown such as conflicts with parents, the family home became unsustainable (Mallett et al., 2005). Policies tend to focus on unaccompanied homeless youth as distinct from adolescents in families. Our data suggests that successfully addressing family homelessness or targeting interventions to youth in these families may be a critically important way to prevent future incidents of unaccompanied youth homelessness.

Youth who aged out of the foster system into homelessness felt abandoned and reluctant to seek help from other systems. Research in states that have extended foster care to age 21 suggests that those who remained in care after age 18 have a more positive transition to adulthood than those who exit at age 18 (Fowler et al., 2009). Additionally, many homeless youth experienced abuse and adversities while in the foster system, even calling for an end to foster care after experiencing the relative safety of a CPS shelter. One sheltered minor male expressed his wish to 'to take foster youth to a shelter' and 'have those foster homes shut down'. That said, the experiences reflected here are a snapshot of youth staying at an emergency shelter due to negative foster care experiences and do not reflect the opinions of youth who have lived with positive and nurturing foster families.

Data Driven Recommendations

Data from this study support several recommendations regarding mental health care, foster care, and identification and referrals for homeless youth. Homeless youth service providers should consider innovative ways to build on the strengths of homeless youth such as their self-reliance, hope, and resilience. Youth expressed spirituality as a source of hope and resilience suggesting that some youth may appreciate interventions that validate and build on this source of resilience. Developing new attitudes and behaviors including a reliance on spirituality appears to help youth cope with the streets and also transition off the streets (Lindsey, Kurtz, Jarvis, Williams, & Nackerud, 2000). Other studies suggest that homeless youth feel comforted by knowing that God was protecting them (Bender, Thompson, McManus, Lantry, & Flynn, 2007). Youth can also benefit from interventions that teach them to build healthy relationships, support stress-

management skills, and address histories of trauma. Strengths-based approaches should be used to bolster homeless youths' ability to interact with their foster families or families of origin who may lack resources linked to nurturing, support and advice, but who have the potential to offer support and facilitate or expedite youth return to stable housing. Service providers across the health and mental health sectors and in schools should assess for homelessness across their clients, patients, and student populations, and determine if the services they offer to homeless youth are comprehensive and support the needs that often stem from family rejection, neglect, abuse, and negative foster care experiences (Thompson & Pillai, 2006). Finally, data from this study suggest that states that have not authorized the extension of foster care past age 18, which is offered through the Fostering Connections to Success Act of 2008, and has been found to decrease the onset of homelessness among foster youth (Dworsky & Courtney, 2010) should strongly consider doing so. Foster youth often lack essential supports that families usually provide, including monetary resources, shelter, food, and required documentation, necessary to become independent and self-sufficient at 18 years old.

While findings from this study add to our understanding of youth homelessness, there are several limitations. The purposive, convenience sample cannot be generalized to other homeless youth. However, the themes here align with the literature. An additional limitation relates to the use of focus groups. Youth may have responded in socially desirable ways and may not have felt comfortable discussing sexual orientation, abuse, or other sensitive topics that might have contributed to how to become homeless and how they respond to it. Therefore, we can only base our conclusions on the information that was shared, and we must consider that additional information was not disclosed in the focus groups. Despite these

limitations, this study adds to the body of research on this topic by 1) providing the youth perspective on how and why they enter into homelessness, 2) highlighting the strength-based responses to homelessness that could be potentially strengthened with targeted interventions, and 3) recommending data-driven ways to reduce the risk of homelessness and facilitate transition to independent living.

Table 1: Sample Demographics (N=64)

| | Sheltered | Unsheltered | Total n (%) |
|------------------|------------------|--------------------|------------------------|
| Overall | 44 | 20 | 64 (100%) |
| Male | 22 | 8 | 30 (47%) |
| Female | 21 | 12 | 33 (52%) |
| African American | 26 | 12 | 48 (75%) |
| Hispanic | 4 | 4 | 8 (13%) |
| White | 6 | 2 | 8 (13%) |
| Multiracial | 6 | 3 | 9 (14%) |
| Aged 14-17 | 15 | 0 | 15 (23%) |
| Aged 18-24 | 28 | 21 | 49 (76%) |
| LGBTQ | 8 | 4 | 12 (19%) |

| | | | |
|--------------------|------------------------|----------|-------------|
| Pregnant/Parenting | 8 | 8 | 16 (25%) |
| Foster Care Youth | 3 adults; 15 minors | 7 adults | 25 (38%) |

References

- Bassuk, E., Murphy, C., Coupe, N., Kenney, R., & Beach, C. (2014). America's youngest outcasts 2014: State report card on child homelessness. *Retrieved November, 24, 2014.*
- Bender, K., Thompson, S. J., McManus, H., Lantry, J., & Flynn, P. M. (2007). *Capacity for survival: Exploring strengths of homeless street youth*. Paper presented at the Child and Youth Care Forum.
- Bernard, H. R., & Ryan, G. W. (2010). *Analyzing qualitative data: Systematic approaches*: Sage.
- Brandford, C., & English, D. (2004). Foster youth transition to independence study. *Seattle, WA: Office of Children's Administration Research, Washington State Department of Social and Health Services.*
- Courtney, M. E., Piliavin, I., Grogan-Kaylor, A., & Nesmith, A. (2001). Foster youth transitions to adulthood: A longitudinal view of youth leaving care. *Child Welfare-New York-*, *80*(6), 685-718.
- Creswell, J. W., & Clark, V. L. P. (2011). *Designing and conducting mixed methods research* (2nd ed.): Wiley Online Library.
- Dworsky, A., & Courtney, M. E. (2010). The risk of teenage pregnancy among transitioning foster youth: Implications for extending state

care beyond age 18. *Children and Youth Services Review, 32*(10), 1351-1356.

Dworsky, A., Napolitano, L., & Courtney, M. (2013). Homelessness during the transition from foster care to adulthood. *American Journal of Public Health, 103*(S2), S318-S323.

Edidin, J. P., Ganim, Z., Hunter, S. J., & Karnik, N. S. (2012). The mental and physical health of homeless youth: a literature review. *Child Psychiatry & Human Development, 43*(3), 354-375.

English, A. (2006). Youth Leaving Foster Care and Homeless Youth: Ensuring Access to Health Care. *Temp. L. Rev., 79*, 439.

Fergus, S., & Zimmerman, M. A. (2005). Adolescent resilience: A framework for understanding healthy development in the face of risk. *Annu. Rev. Public Health, 26*, 399-419.

Fowler, P. J., Toro, P. A., & Miles, B. W. (2009). Pathways to and from homelessness and associated psychosocial outcomes among adolescents leaving the foster care system. *American Journal of Public Health, 99*(8), 1453.

Grant, R., Gracy, D., Goldsmith, G., Shapiro, A., & Redlener, I. E. (2013). Twenty-five years of child and family homelessness: where are we now? *American Journal of Public Health, 103*(S2), e1-e10.

- Grant, R., Shapiro, A., Joseph, S., Goldsmith, S., Rigual-Lynch, L., & Redlener, I. (2007). The health of homeless children revisited. *Advances in pediatrics*, 54(1), 173-187.
- Greene, J. M., & Ringwalt, C. L. (1998). Pregnancy among three national samples of runaway and homeless youth. *Journal of Adolescent Health*, 23(6), 370-377.
- Hausman, B., & Hammen, C. (1993). Parenting in homeless families: the double crisis. *American Journal of Orthopsychiatry*, 63(3), 358.
- Kidd, S. A. (2006). Factors Precipitating Suicidality among Homeless Youth A Quantitative Follow-Up. *Youth & Society*, 37(4), 393-422.
- Kulik, D. M., Gaetz, S., Crowe, C., & Ford-Jones, E. L. (2011). Homeless youth's overwhelming health burden: A review of the literature. *Paediatrics & child health*, 16(6), e43.
- Leffert, N., Benson, P. L., Scales, P. C., Sharma, A. R., Drake, D. R., & Blyth, D. A. (1998). Developmental assets: Measurement and prediction of risk behaviors among adolescents. *Applied Developmental Science*, 2(4), 209-230.
- Lindsey, E. W., Kurtz, P. D., Jarvis, S., Williams, N. R., & Nackerud, L. (2000). How runaway and homeless youth navigate troubled waters: Personal strengths and resources. *Child and Adolescent Social Work Journal*, 17(2), 115-140.

- Lovallo, W. R. (2013). Early life adversity reduces stress reactivity and enhances impulsive behavior: Implications for health behaviors. *International journal of psychophysiology, 90*(1), 8-16.
- Mallett, S., Rosenthal, D., & Keys, D. (2005). Young people, drug use and family conflict: Pathways into homelessness. *Journal of Adolescence, 28*(2), 185-199.
- Martijn, C., & Sharpe, L. (2006). Pathways to youth homelessness. *Social Science & Medicine, 62*(1), 1-12.
- Mayock, P., Corr, M. L., & O'Sullivan, E. (2011). Homeless young people, families and change: family support as a facilitator to exiting homelessness. *Child & Family Social Work, 16*(4), 391-401.
- McMillen, J. C., Zima, B. T., Scott, L. D., Auslander, W. F., Munson, M. R., Ollie, M. T., & Spitznagel, E. L. (2005). Prevalence of psychiatric disorders among older youths in the foster care system. *Journal of the American Academy of Child & Adolescent Psychiatry, 44*(1), 88-95.
- Medlow, S., Klineberg, E., & Steinbeck, K. (2014). The health diagnoses of homeless adolescents: A systematic review of the literature. *Journal of Adolescence, 37*(5), 531-542.
- National Campaign to Prevention Teenage nad Unwanted Pregnancy. *Fast Facts: Teen Pregnancy in the United States*. 2014 [cited 2015 March 10]; Available from: <http://thenationalcampaign.org/sites/default/files/resource-primary->

[download/fast facts -
teen pregnancy in the united states aug 2014 0.pdf.](#)

- Nunez, R. (2001). Family homelessness in New York City: A case study. *Political Science Quarterly*, 116(3), 367-379.
- Oshima, K. M. M., Narendorf, S. C., & McMillen, J. C. (2013). Pregnancy risk among older youth transitioning out of foster care. *Children and Youth Services Review*, 35(10), 1760-1765.
- Paquette, K., & Bassuk, E. L. (2009). Parenting and homelessness: Overview and introduction to the special section. *American Journal of Orthopsychiatry*, 79(3), 292-298.
- Park, J. M., Metraux, S., & Culhane, D. P. (2005). Childhood out-of-home placement and dynamics of public shelter utilization among young homeless adults. *Children and Youth Services Review*, 27(5), 533-546.
- Pecora, P. J., Kessler, R. C., O'Brien, K., White, C. R., Williams, J., Hiripi, E., . . . Herrick, M. A. (2006). Educational and employment outcomes of adults formerly placed in foster care: Results from the Northwest Foster Care Alumni Study. *Children and Youth Services Review*, 28(12), 1459-1481.
- Pfeifer, R. W., & Oliver, J. (1997). A study of HIV seroprevalence in a group of homeless youth in Hollywood, California. *Journal of Adolescent Health*, 20(5), 339-342.

- Ray, N. (2006). *Lesbian, Gay, Bisexual and Transgender Youth: An epidemic of homelessness*. New York: National Gay and Lesbian Task Force Policy Institute and the National Coalition for the Homeless.
- Rew, L., Taylor-Seehafer, M., Thomas, N. Y., & Yockey, R. D. (2001). Correlates of resilience in homeless adolescents. *Journal of Nursing Scholarship, 33*(1), 33-40.
- Rosario, M., Schrimshaw, E. W., & Hunter, J. (2012). Risk factors for homelessness among lesbian, gay, and bisexual youths: A developmental milestone approach. *Children and Youth Services Review, 34*(1), 186-193.
- Rosenthal, D., Mallett, S., Milburn, N., & Rotheram-Borus, M. J. (2008). Drug use among homeless young people in Los Angeles and Melbourne. *Journal of Adolescent Health, 43*(3), 296-305.
- Roy, É., Haley, N., Leclerc, P., Sochanski, B., Boudreau, J.-F., & Boivin, J.-F. (2004). Mortality in a cohort of street youth in Montreal. *JAMA: the journal of the American Medical Association, 292*(5), 569-574.
- Seidman, I. (2012). *Interviewing as qualitative research: A guide for researchers in education and the social sciences*: Teachers college press.

- Thompson, R. G., & Hasin, D. (2012). Psychiatric disorders and treatment among newly homeless young adults with histories of foster care. *Psychiatric Services, 63*(9), 906-912.
- Thompson, R. G., & Hasin, D. S. (2011). Cigarette, marijuana, and alcohol use and prior drug treatment among newly homeless young adults in New York City: relationship to a history of foster care. *Drug and alcohol dependence, 117*(1), 66-69.
- Thompson, S. J., & Pillai, V. K. (2006). Determinants of runaway episodes among adolescents using crisis shelter services. *International Journal of Social Welfare, 15*(2), 142-149.
- Tyler, K. A., & Schmitz, R. M. (2013). Family histories and multiple transitions among homeless young adults: Pathways to homelessness. *Children and Youth Services Review, 35*(10), 1719-1726.
- Unger, J. B., Kipke, M. D., Simon, T. R., Johnson, C. J., Montgomery, S. B., & Iverson, E. (1998). Stress, coping, and social support among homeless youth. *Journal of Adolescent Research, 13*(2), 134-157.
- Zlotnick, C. (2009). What research tells us about the intersecting streams of homelessness and foster care. *American Journal of Orthopsychiatry, 79*(3), 319.
- Zlotnick, C., Tam, T., & Zerger, S. (2012). Common needs but divergent interventions for US homeless and foster care children: Results

from a systematic review. *Health & social care in the community*,
20(5), 449-476.