



## Brief report

## Brief report: Youth pathways out of homelessness – Preliminary findings



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### A B S T R A C T

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While there exists an extensive body of knowledge regarding the risks associated with youth homelessness, very little work has addressed the process of exiting street contexts. This paper reports baseline findings from an ongoing longitudinal study assessing factors associated with a successful transition out of homelessness. Fifty-one formerly homeless youth who obtained stable housing in the past 2 months to 2 years participated in this study which took place in two Canadian urban centres. Findings include poorer functioning across all domains for youth residing in housing contexts without supports, a lack of relationship between psychological and behavioural aspects of community integration, and the central role of self-concept in mental health and quality of life. These findings suggest the need for ongoing support for youth exiting street spaces and social contexts, with attention to the importance of self-concept and psychological aspects of community integration.

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Youth between the ages of 16 and 24 are one of the fastest growing segments of the homeless population (Laird, 2007). The trajectories of homeless youth are characterized by adversity. Pre-street histories of abuse, neglect, and multiple forms of instability are present for most (Karabanow, 2004; Kidd, 2006) and poor mental and physical health are prominent during homelessness. Mortality rates are typically 10 or more times that of the general adolescent population with suicide and drug overdose as the leading causes of death (Roy et al., 2004). While pre-street and street risks have been exhaustively documented in the literature, very little is known about how youth navigate pathways out of homelessness. Some cross-sectional qualitative investigations of the experiences of youth contemplating or in the early stages of transition have highlighted barriers including addictions, trauma, discrimination, unemployment, and breaking ties with street culture and street friends (Karabanow, 2008) and other work has suggested the importance of self-concept in these transitions (Kidd & Davidson, 2007). What have been lacking are longitudinal designs and quantitative examination of these factors and the study of youth who have successfully transitioned from the streets into stable circumstances. This paper builds on previous qualitative work by quantitatively examining factors associated with behavioural and psychological integration into community among youth who have recently transitioned out of homelessness. Subgroup analyses were also conducted to probe differences previously

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highlighted as important such as gender and sexual identity. The study framework is exploratory as it is, to the best of our knowledge, the first to examine these domains with this population.

## Methods

The study was initiated in 2011 in two Canadian urban settings, one being a mid-sized coastal city and the other being Canada's largest, and highly diverse urban centre. Youth between the ages of 16 and 25, who had experienced at least 6 months of homelessness and subsequently obtained stable housing between 2 months and 2 years prior to recruitment were sought. Recruitment involved two phases, with one being referrals from local service providers and the second phase involving snowball sampling from the social networks of participants. This study was reviewed and approved by an institutional research ethics board.

The cross-sectional analysis presented here examines time 1 data from the longitudinal study, which involves the collection of data at four time points over the course of 1 year. The goal of the larger longitudinal study is to use qualitative and quantitative measures to articulate pathways out of street spaces and sociocultural contexts. The measures below build upon earlier qualitative work of the authors suggesting their importance in transitions out of homelessness. The following measures were used: (i) the Self-Concept Clarity Scale (Campbell et al., 1996) to evaluate the role of identity cohesion, (ii) the Community Integration Scale (Mental Health Commission of Canada, 2010) which taps psychological (belongingness) and behavioural (activities) components of community participation, (iii) the brief World Health Organization Quality of Life Scale (WHOQOL-BREF), (iv) the Mental Health Continuum-Short Form (MHC-SF; Keyes et al., 2008), and, (v) Snyder's cognitive measure of hope (Snyder et al., 1991).

## Results

Fifty-one participants were recruited across the two sites, including 26 females and 24 males with a mean age of 21 year (range 17–25) (see Table 1). Through independent samples *t*-test analyses it was found that females had spent significantly less time on the streets (mean 18.73 months vs 32.79;  $t = 1.84, p = .12$ ), but otherwise emerged as equivalent across other domains. No differences were noted as a function of sexual identity (dichotomized to heterosexual and other). Youth in independent housing (versus supported housing structures) reported less behavioural community integration (3.85 vs 4.11;  $t = -.58, p = .04$ ), lower quality of life (91.00 vs 98.93;  $t = -1.96, p = .05$ ) and poorer mental health (43.17 vs 48.85;  $t = 1.87, p = .002$ ).

Regression analyses were based upon significant correlations (Table 2). With behavioural and psychological transitions to community treated as dependent variables, we ran two series of regressions. Examining behavioural engagement in community, simultaneous regression revealed a significant model that included hope, quality of life, and mental health ( $F = 4.54, R^2 = .23, p = .007$ ) with mental health having the strongest association  $\beta = .47$  versus  $\beta = .15$  (hope) and  $\beta = -.09$  (quality of life). Examining psychological engagement with community, the model was significant ( $F = 3.71, R^2 = .19, p = .018$ ). Again, mental health had a stronger association ( $\beta = .40$ ) as compared with self-concept ( $\beta = .06$ ) and quality of life ( $\beta = .01$ ). The apparent independence of behavioural and psychological community integration was probed in a regression with mental health as the dependent variable. The model was significant ( $F = 14.05, R^2 = .37, p < .001$ ) with similar beta weights (behavioural  $\beta = .43$  and psychological  $\beta = .41$ ).

**Table 1**  
Participant descriptive statistics.

Variable	Frequency and mean (SD) data
Age (range 17–25)	21.0 (2.30)
Months homeless (range 6–114)	25.1 (27.5)
Months housed (range 2–27)	8.8 (7.4)
Percentage white (even dispersion across other racial identifiers)	47.3%
Heterosexual (versus bisexual, gay/lesbian, and other)	55%
Parent of 1 or more children	67%
Living in independent (non-supported) housing	47%
Unemployed	81.8%
Income assistance or disability subsidy	63.6%
High school not completed	49.1%
Currently enrolled in academic program	47.1%
Community integration – behavioural (range 0–7)	3.95 (1.57)
Community integration – psychological (range 6–20)	14.11 (3.19)
Hope (range 47–89)	69.64 (9.72)
Self-concept cohesion (range 16–56)	38.61 (10.09)
Global quality of life (range 50–119)	94.76 (14.96)
Mental health and wellbeing (range 11–66)	45.88 (11.07)

$N = 51$  ( $n = 30$  from large urban centre;  $n = 21$  from medium-sized urban centre).

**Table 2**  
Correlation matrix of scale scores and months homeless and housed.

Measure	1	2	3	4	5	6	7	8
1. Months homeless		-.06	.254	-.40**	.07	.01	-.09	-.03
2. Months housed			-.13	.12	.25	-.08	.08	.19
3. Community integration – behavioural				.06	.31*	.26	.34*	.49***
4. Community integration – psychological					.174	.29*	.38**	.44***
5. Hope						.01	.23	.40**
6. Self-concept cohesion							.60***	.56***
7. Global quality of life								.85***
8. Mental health and wellbeing								

N = 51; \*p < .05, \*\*p < .01, \*\*\*p < .001.

## Discussion

This report examines community integration among Canadian youth who have successfully transitioned out of homelessness. While limited in terms of an ability to comment on the directionality of observed associations and the small sample size available, several findings of interest emerged.

Aside from less time homeless for females, no significant differences across mental health, quality of life, self-concept, and community integration were noted as a function of gender or sexual orientation. This stands in contrast with the homelessness literature which typically indicates greater adversity among females and sexual minority youth. This may reflect either a selection bias of healthier youth exiting the streets or an equalization of risks as they are removed from contexts characterized by heightened victimization. It was also noteworthy that youth not living in supported contexts (living independently individually or in groups) reported poorer community engagement, quality of life, and mental health.

Behavioural integration with community was not associated with psychological integration and these two domains of community integration are largely independent of one another in terms of their association with mental health. This finding suggests that spending time in the community does not necessarily translate into a sense of psychological belonging, or vice versa, and that these two domains make separate contributions to mental well-being. In line with the qualitative work of Karabanow (2008) and Kidd & Davidson (2007) it was found that a greater length of time on the streets was linked to more difficulty developing a sense of belonging in non-street communities. Additionally, cohesion of self-concept was strongly related to quality of life, mental health, and more modestly linked with a psychological sense of community integration. These findings likely support the qualitatively observed importance of identity shifts in making such transitions. Sense of hope, as well, was tied to both mental health and psychological integration within communities. Our findings suggest that mental health, framed as satisfaction with life and positive individual and societal functioning, would seem to have the strongest and most pervasive linkages with community integration, be it behavioural or psychological.

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