

**A Report for the Calgary Homeless Foundation**

**On the Brink?**

**A Pilot Study of the Homelessness Assets and Risk Tool (HART) to Identify those at Risk of Becoming Homeless**

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By

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- YWCA of Calgary Sheriff King Home

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Copies of the HART can be obtained from the principle investigator, Leslie Tutty, at [tutty@ucalgary.ca](mailto:tutty@ucalgary.ca)

## **Executive Summary**

Homelessness has become an all-too pervasive and visible problem in Canada. It has spread from large urban centres to rural, northern and remote communities. While a number of programs have been developed to address the needs of the homeless in the hope of re-housing them, a large population of those at risk of homelessness receive little attention until their needs become dire. There are both societal and individual costs to be borne when this occurs.

Preventing homelessness has the potential to save countless individuals from the misery of life on the streets. However, with the major effort focusing on assisting those that become homeless, where does one start to prevent this significant social ill? The few authors who have written about prevention provide no clear answers, but raise the importance of prevention as a focus (Burt, Pearson & Montgomery, 2007, US; Moses, Kresky-Wolf, Bassuk & Brundstein, 2007, US; Wireman, 2007, US). One key question is how to define the population of those at risk of becoming homeless.

The research team originally conducted a literature review summarizing research, particularly published studies from the past decade or so, that focus on the risk factors, predictors and pathways in and out of homelessness (Tutty et al., 2009). Unpublished research reports from reputable organization, especially Canadian ones, were also included. Our primary focus was on factors that differentiate those that have become absolutely homeless from those that are on the cusp of homelessness, either being relatively homeless, or living in hidden homelessness. As such, the analysis focused particularly on studies that differentiated between these groups. We also searched for articles on resilience and protective factors, again finding relatively few.

These assets and protective factors formed the core of a screening tool, The Homelessness Assets and Risk Screening Tool (HART) that could be used to identify vulnerability to homelessness in at-risk populations, but those not yet experiencing homelessness, in the hope of providing early interventions. The purpose of the current research is to test the validity of the HART, including its predictive validity with respect to identifying those at risk of homelessness.

A second objective was to determine the applicability of the HART tool in a Calgary context and assess the tool's feasibility from an administrative perspective. This was achieved by utilizing the HART tool with an initial sample of service recipients at multiple community agencies within the city of Calgary. This allowed us to test the tool's content validity (the ability to capture elements of risk) by comparing responses to the HART to responses to the ETHOS (described below) and to test the HART's predictive validity (ability to predict homelessness) by tracking a sub-sample of participants over a one-year period.

## **Methodology**

The study participants were 740 adult residents of the Calgary area who presented at the participating Calgary agencies, primarily community resource agencies that provide assistance for a broad range of issues, homelessness being only one. Only those presenting for agency services who were not currently homeless were invited to participate in the study (with the exception of a sample of women from a women's emergency shelter for domestic violence). Individuals who agreed to participate were provided with a \$25 honorarium.

Following their completion of the survey instruments, the participants had the choice to stop or to continue to an electronic information sheet about Phase 2. If they choose to participate

in Phase 2, they provided consent to be contacted at a later date as well as their contact information and contact information for up to three additional individuals who would likely know of their whereabouts. Strategies to ensure confidentiality were addressed.

The acronym “ETHOS” stands for the European Typology of Homelessness and Housing Exclusion. This framework has been commonly used by member states in the European Union for reporting on homelessness and housing exclusion (European Federation of National Associations Working with the Homeless, 2007). The classification system broadly categorizes the housing situation of people who are absolutely homeless as “roofless” or “houseless.” ETHOS items were included in the HART pilot to provide a more comprehensive idea of the extent to which the study participants had experienced diverse forms of homelessness in the past ten years.

### **Who Answered the HART?**

In total, 740 Calgarians answered the HART survey, although not all answered every item on the measure. Seven Calgary agencies provided space and invited their clients to answer the HART. Most respondents specified at what agency they had completed the survey (720 of 740 or 97.3%). Across the seven agencies, there was a relatively equal distribution of respondents (from 8% to 18.8%).

With respect to gender, almost two-thirds (63.9% or 458 of 717) respondents were women and a little more than one-third were men (36.1% or 259 of 717). Regarding the age of the respondents, as anticipated, the largest proportion of those who completed the HART survey was between the ages of 25 and 49. However, seniors are relatively well-represented with about one-sixth of the total (16.2%) between the ages of age 50 and older. Youth are similarly represented with almost 14 percent of the total sample.

With respect to racial background, while almost half of the respondents were of Caucasian/White background, another almost third were of Aboriginal origins and a fifth were from visible minority groups. According to data from the 2006 Canadian census (City of Calgary, 2012) , which was the last for which this information was collected, Aboriginal groups make up about 2.4% of the Calgary population and visible minority groups about 22.2%. In the HART data set, individuals of Aboriginal origins are over-represented in the current sample of those seeking assistance from community resource centres.

About ten percent (69 of 707 or 9.8%) of the HART survey respondents had immigrated to Canada from a different country within the past five years. Of those, about half (30 of 69 or 43.5%) came as refugees. In the 2006 Canadian census, 23% of Calgarians identified themselves as immigrants, a slightly larger proportion than the HART respondents.

Regarding whether the respondents have children under the age of 18 who were currently living with them, almost two-thirds (59.7% or 423 of 709) had children, while 40.3% (286 of 709) did not.

A little over half had their highschool matriculation (52.8% or 373 of 707), while 47.2% (334 of 707) had not completed highschool. The majority of the respondents had not been employed during the past month (70.4% or 491 of 697); 39.6 or 206 of 697 were employed. The women were less likely to be employed than men to a statistically significant degree. Of those who are currently unemployed but interested in finding work, the majority (254 of 354 or 71.8%) were worried about finding employment.

Respecting finances, the HART included a question, “Until now, have your finances/income been fairly stable?” Of the 715 individuals (96.6%) who answered, a little more than half responded “no” (53.4% or 382 of 715). Two supplementary questions were about whether the respondents had any difficulty paying rent or buying groceries or other necessities. More than three-quarters of the respondents have had some difficulty with these two basic needs expenditures. Notably, about one-quarter of the respondents had considerable difficulty with both paying for their rents and for food and other necessities. The respondents were also asked whether they had family or friends who could help with housing and/or finances for a while if needed. Of the 711 (96.1%) who answered, almost two-thirds (66.9% or 476 of 711) did **not** have such financial support, while 33.1% (235 of 711) did.

### **Current Housing**

The majority of the HART respondents were currently housed (83.9% or 618 of 737) defined as “having a place where you pay rent or a mortgage.” Another 8.4% (62 of 737) had no place to live currently where they paid rent or a mortgage and a further 7.7% (57 of 737) were living in a violence-against-women emergency shelter, the YWCA of Calgary Sheriff King Home. Almost three-quarters (439 of 596 or 73.7%) were renting, and about one-sixth (95 of 596 or 15.7%) lived in public housing.

It was of interest to establish how many times the respondents had moved in the past year. Of the 720 individuals (97.3%) who answered that questions, only a little more than one third had not moved during the previous year. In response to a question about whether in the past 12 months the respondents had moved because of conflict with a roommate, family member, landlord or neighbour, of the 721 (of 740 or 97.4%) that answered the question, two-fifths (40.4% or 291 of 721) had moved for this reason. A further question enquired about whether the respondents had ever stayed with friends or family for long periods of time (over a month). Answered by the majority of respondents (719 of 740 or 97.2%), 60.8% (437 of 719) had done so, while 39.2% (282 of 719) had not.

### **Health and Mental Health Issues**

A series of questions in the HART were with respect to any medical, mental health or other problems such as gambling or addictions. Several of the above questions have potential housing issues associated with them as transitions from an institution back to the community can be accompanied by housing difficulties.

About one-third (29% or 203 of 701) had “ever been diagnosed with any serious physical health problems or disability.” Regarding admission to a hospital or other medical facility (for something other than a mental health or addiction issue) in the past five years, 209 individuals had been hospitalized. Of these, the majority (79.5% or 167 of 209) had “appropriate or stable, safe, adequate and affordable housing to move into upon your return to the community;” however, one-fifth (20.1% or 42 of 209) did not have appropriate housing after hospitalization.

A similar percentage (30% or 207 of 700) had “been diagnosed with any serious mental health problem such as depression, anxiety, Post Traumatic Stress Disorder, bi-polar disorder or psychosis/schizophrenia.” Of 69 individuals who, in the past five years, had been admitted to a “mental health facility (including a general hospital psychiatric unit),” one-third (33% or 26 of 69) had not had appropriate or stable, safe, adequate and affordable housing to move into upon their return to the community, whereas the other two thirds (66% or 46 of 69) did.



A question with respect to the sensitive issue of substance abuse was phrased as follows: “In the past five years, have you been concerned about or has any one close to you expressed concern about your use of alcohol, other substances or medical prescriptions?” Again, slightly over one-quarter of the respondents (28.2% or 196 of 696) indicated that this was the case. Of 25 people who had been admitted to an addictions facility in the past five years, about one third (32% or 8 of 25) did not have appropriate or stable, safe, adequate and affordable housing to move into upon their return to the community, in comparison to the other two-thirds (68% or 17 of 25).

A similarly phrased question with respect to gambling, “In the past five years, have you been concerned about or has any one close to you expressed concern about your gambling?” was endorsed by a much smaller number (3.1% or 21 of 670).

Another housing transition that may prove difficult for some is returning home after having been in a prison. Our community contacts suggested separating this question by whether the individuals had been in a provincial/youth facility or a federal correctional facility, because the post-prison support/housing facilities are somewhat different. The HART respondents were asked if, “In the past 5 years, have you spent time in a provincial adult correctional or youth custody facility?” Of the 95 individuals who had been imprisoned in adult or youth correctional facilities, slightly less than two-thirds (62.1% or 59 of 95) had appropriate or stable, safe, adequate and affordable housing to move into upon their return to the community. The remaining 37.9% (36 of 95) of individuals did not have adequate housing.

A smaller number of respondents had spent time in a federal correctional facility in the past five years. Of these 25 respondents, slightly less than half (48% or 12 of 25) had appropriate or stable, safe, adequate and affordable housing to move into upon their return to the community, while a little more than half (52% or 13 of 25) were appropriately housed.

Looking at the two groups (provincial/youth or federal prison), 102 individuals (of 729 or 14%) had spent time in either (or in a few cases both) in the past 5 years.

### **Childhood Experiences**

Several questions regarding the climate of their families when they were children and current support from family and friends were included. Coming from a warm and caring family was seen as a protective factor in the literature on homelessness. In the current sample, 61.8% (436 of 705) answered “yes” to the question, “When you were a child or teenager, was your family warm and supportive?” In contrast, 37.3 (262 of 702) responded that they had been “abused or neglected as a child by a parent or caregiver” In answer to the question “When growing up, did one of your parents have addictions and/or mental health difficulties?” 45.3% (315 of 696) responded that this was the case for them.

A total of 186 individuals (of 708 or 26.3%) had been in foster care or another youth facility as a child or adolescent. Only 167 individuals of these youth answered a subsequent question regarding whether they had been assisted in finding appropriate or stable, safe, adequate and affordable housing afterwards. Of these, almost two-thirds (63.5% or 106 of 167) had **not** been assisted; whereas a little more than one-third of foster care graduates (36.5% or 61 of 167) had received assistance in finding appropriate accommodations.

About half of the HART respondents (49.9% or 369 of 740) chose not to answer a question about whether they had been “Homeless when younger than 18 years of age (by yourself, not with parents).” Of the 369 who did answer, 42% (156) had been homeless when under the age of 18.

## **Ever Homeless by Core Demographic Characteristics**

As mentioned previously, 50.8% (367 of 722) of the 740 Calgarians who answered the HART at the community resources centres and other agencies self-reported having been homeless at some time, defined as “without a permanent place to live at some point during your life.” With respect to the core demographic and health and childhood variables and whether the HART respondent had ever been homeless, neither gender nor age group predicted an individual being without a permanent place to live. Being a recent immigrant (in the last five years), being from a visible minority group, having completed highschool and having a current place to live where one pays rent or a mortgage were among the protective factors in this sample.

The statistically significant demographic and health and childhood variables (24 of 28) were then entered into a binomial regression analysis to identify which were most strongly associated with whether the individuals had ever been homeless or not. Of the total sample of 740, 546 cases were included in the binary regression analysis. The strongest model included nine variables that correctly classified 74.7% of membership in the categories of ever homeless or never homeless. These significant variables (predictors) were (in order of significance):

- Having stayed with friends and family for long time periods (over a month);
- Having been abused as a child by parents or caregivers;
- In the past 5 years, having spent time in a provincial or federal adult correctional or youth custody facility;
- Currently have a place to live where I pay rent or a mortgage (protective factor)
- Foster care as a child
- In the past 12 months, I have lost support because of conflict with friends and family
- In the past 5 years, being admitted to a hospital or other medical facility (for something other than a mental health or addiction issue);
- Have moved four or more times in the past year
- Immigrating to Canada in past 5 years (protective factor)

## **Responses to the ETHOS Scale**

The ETHOS scale (European Typology of Homelessness and Housing Exclusion) was used to assess the characteristics of housing or strategies to address housing difficulties, with 688 (92.9%) completing the 26-item measure. Note that, given the time period covered (10 years), an individual can endorse a number of items, highlighting the transitional nature of housing for many people.

It was of interest to look at these issues by comparing those who reported that they had been homeless at some point in their lives with those who had not been homeless. Individuals who only endorsed that they had lived in “good” or “adequate” housing in the past ten years were considered as “not homeless in the past ten years.” Notably, about the same proportion of those who had been homeless at some point in the past ten years had lived in good and adequate housing at some point over the past ten years as those who had never been homeless, confirming the transitional nature of homelessness.

## **Rooflessness vs. At Risk vs. Never Homeless in the HART Pilot**

To assess the HART items vis à vis the ETHOS questionnaire, a new variable was created to assess the comparison of never homeless, at risk and roofless. “Never homeless” was created

from those who only endorsed having had “good” or “adequate” accommodation in the last ten years but also, because almost two-thirds of the HART respondents had at some time stayed with friends and family, those who endorsed this item (N = 231 or 33.6%). The group “roofless” was created based on responses to the last two ETHOS questions: 134 or 19.5% of the HART respondents had lived roofless or in an overnight shelter for homelessness at some point in the past 10 years). “At risk” was determined by respondents endorsing any number of the other 23 ETHOS items related to insecure or inadequate housing (323 or 46.9%).

As with the comparison of “ever” to “never” homeless, the majority of the HART items (23 of 27) significantly differentiated between being ever roofless, at risk of rooflessness and never roofless. While most significant items constituted risk factors (i.e., health, mental health, childhood abuse and difficulty with finances), having children under 18 living with you, being from a visible minority and being a recent immigrant (last five years) were protective factors for ever having lived roofless in this Calgary sample.

Because there were no significant differences between the “at risk” and “ever roofless” groups, we conducted a binary logistic regression analysis looking at “ever roofless” and “never roofless,” combining the “at risk” group into the “never roofless” category.

Of the total 740 cases, 531 cases were included in the regression analysis. The strongest model included six variables that correctly classified 81.4% of membership in the categories of ever roofless or never roofless in the past ten years. These significant variables (predictors) were (in order of significance):

- In the past 5 years, have spent time in a provincial or federal adult correctional or youth custody facility;
- Currently have children (under the age of 18) living with you (Protective factor).
- Spent time in foster care as a child
- In the past year, had lots of difficulty with money/finances.
- Abused as a child by parents or caregivers; and
- In past 12 months have lost support from family or friends because of conflict.

### **The HART Follow-up**

As part of the HART pilot, individuals were invited to be involved in a follow-up component, to be contacted at 6-month intervals to assess their housing as a strategy to examine the predictive validity of the HART with respect to subsequent homelessness or stable housing. Of the total 740 HART respondents, 174 (23.5%) provided contact information. Of these, the project research staff were able to connect with 71 individuals (40.8% of those who had agreed to be contacted). At less than 10% of the total original sample, the follow-up sample was smaller than anticipated and the results presented below must be reviewed cautiously and as exploratory.

To assess the extent to which the follow-up sample was representative of the total sample of HART respondents, a series of chi-square analyses on the core demographics characteristics were conducted. In general, the follow-up sample of 71 was a good fit with the original sample of 740 HART respondents. The exception was that fewer individuals of Aboriginal origin were available for the follow-up sample.

Of those available for follow-up at 6 months, almost two-thirds (46 or 64.8%) were living at the same address as when they originally completed the HART, with 25 (35.2%) having moved at least once. Of the group that had moved, most had moved only once (17 or 68%), six (24 %) had moved two or three times and two (8%) had moved four or more times.

Few had accessed services for homelessness: three had stayed in an overnight shelter for homelessness with no usual place of residence, and one other had stayed in a hostel for homelessness. Five had stayed in temporary accommodation (less than one year); one had stayed in a women's shelter and another individual had stayed in transitional supported accommodation.

The 71 individuals who were contacted at 6 month follow-up were considered as having insecure housing if they had moved more than once or twice, and if they endorsed any one of the ETHOS items reflecting problematic housing (with the exception of staying with friends and family, which was ubiquitous).

The demographic and health and history variables were entered into a binary logistic regression model to identify which were most strongly associated with being stably or unstably housed at follow-up. Because of missing data, only 57 cases were included in the statistical analysis. Only one demographic variable, being of Aboriginal origin, was predictive of not having stable housing at 6 month follow-up [ $\text{Exp}(\beta) = 10.36 (1.8 - 58.8)$ ]. These results should be viewed cautiously for several reasons. The total number of individuals with which we connected was less than what was anticipated. Further, the number of individuals of Aboriginal origin in the follow-up sample was only 8. As such, additional research with a larger sample of individuals at follow-up is necessary to establish the prospective predictive validity of the HART.

## **Discussion and Implications**

The current study of the characteristics of individuals who completed the HART is unique in several ways. First, much of the research focuses on a large cohort of individuals who are currently homeless or using services to address housing issues. In contrast, the current study engaged with individuals who were seeking assistance at community resource centres for a number of issues, with only small proportion being insecurely housed (about 16%, including 57 women from an emergency violence against women shelter, the only anomaly in the sample).

That at least half of this sample had been homeless at some point in their lives suggests that community resource centre clientele are indeed vulnerable to housing difficulties and such agencies should consider assessing housing, whether the presenting problem or not. The HART items represent characteristics that many agencies already collect at intake. The tool could be used as an intake form, while also having the potential to provide information on risks for homelessness.

Secondly, the HART was created based on research comparisons of homeless individuals and those not currently homeless but at risk. In contrast to the bulk of the research that has focused on one facet of the homeless population (i.e. individuals with mental health problems or youth), we looked across populations. The current examination of homelessness predictors resulted in the HART being comprised of many more variables (over 30) than most researchers use in their research comparisons.

That the majority of the HART items differentiated homeless and roofless samples provides some evidence of the content and construct validity of the tool. In the Calgary sample, across the ever-homeless and ever-roofless categories, several HART items consistently identified homeless issues:

- Prison in the past 5 years
- Child abuse history
- Foster care history
- In the past 12 months, having lost support because of conflict with friends and family

These variables could be used as red flags by Calgary community agencies to inquire about housing difficulties and to offer individuals housing assistance if needed. However, these particular issues cannot be generalized to other cities, even in Alberta, since the characteristics of at-risk individuals as well as the municipalities are likely different. The HART will be available to those who would like to use it to explore the characteristics of at risk individuals in their own locations.

Many of the issues represented by the HART items are inter-correlated, which may explain why some of the more common variables associated with homelessness such as mental health and substance use, for example, did not emerge as significant in the strongest regression models predicting membership in the homeless or roofless groups. To present only one example of the nature of such inter-correlations, we can look at the relationship between Aboriginal background and child abuse and foster care, two variables consistently correlated with homelessness and rooflessness in the HART sample. In the latest Canadian National Incidence Study of Child Maltreatment in 2008 (Trocmé et al., 2010) 22% of substantiated cases of abuse were with respect to children of Aboriginal heritage, a much higher proportion than in the Canadian population. Further, Aboriginal children are severely over-represented in the foster care system (Trocmé, 2004). Child maltreatment has often been linked to mental health consequences both in childhood and adulthood (Banyard, 2001; Springer, 2007), especially when children have been victims of several types of abuse, a not unusual circumstance (Finkelhor, 2005).

By including a large number of variables associated with homelessness, the current study allowed for a more nuanced analysis of the core variables: In the previous example, having a history of child maltreatment and foster care were both more significantly associated with homelessness than simply being of Aboriginal descent. Many researchers use core demographics as predictor variables (including racial background) and often do not consider such historic factors as child abuse and foster care status, thus likely coming to the conclusion that Aboriginal background was the risk factor to homelessness, not childhood abuse and the structural intervention of foster care. That conclusion could be potentially stigmatizing.

The difficulty connecting with individuals at follow-up in the current study was unfortunate since, while the HART items did predict whether individuals had ever been homeless or roofless in the past, we cannot establish whether the HART can predict which individuals at risk for homelessness have housing difficulties in the future. Conducting follow-up research is always challenging. Researchers who have done so successfully, such as Shinn et al. (1998), have put considerable resources into staying in touch with people and re-contacting individuals through such core programs as social assistance and housing.

Despite putting much effort into numerous contact addresses and incentives to reconnect, the current study managed to recontact only about 10% of the original HART sample, not enough to conduct meaningful data analyses. As such, further exploration of the tool's predictive validity is necessary.

Those familiar with research on chronic homelessness may be surprised that many of the core characteristics of homeless individuals, such as mental health and addictions diagnoses, were unrelated to homelessness in this sample in the final regression models. One key distinction is that this group of people were not seeking assistance for current homelessness. That half of the sample had been previously homeless and a fifth of the sample had lived roofless or had stayed at an overnight homeless shelter at some point, reminds us of the transient nature of homelessness for many. It is not possible to determine how the individuals in the pilot study transitioned out of homelessness, but it nevertheless highlights the importance of programs and housing supports (Shinn et al., 1998).

Further, some research with chronically homeless individuals in programs has access to files that contain formal diagnoses on mental health, substance abuse or gambling. With a “non-clinical” sample (i.e. not currently homeless or in treatment for psychiatric or substance abuse), the HART used questions such as, “In the past five years, have you been concerned about or has any one close to you expressed concern about your use of alcohol, other substances or medical prescriptions?” to assess these sensitive topics. With issues such as addictions and gambling that are characterized by denial, such questions may not have been answered honestly. These questions, as well as others, will be considered as the HART team revises the tool based on the current results.

In summary, the current study has provided a unique exploration of risks and protective factors to homelessness in a group of Calgarians not currently seeking assistance for this critical issue. The extent of past episodes of homelessness of this group (50%) confirms that, in addition to the essential focus on providing emergency and long-term assistance to individuals currently afflicted by homelessness, we must also consider the needs of those that are not currently but may be at risk to experience this devastating structural problem.

The HART shows promise as a tool to identify risk and protective factors associated with preventing individuals from becoming homeless in particular locations. With additional research to establish its ability to predict homelessness in future, it could become an important asset in the continuum of strategies to prevent homelessness.

Copies of the HART can be obtained from the principle investigator, Leslie Tutty, at [tutty@ucalgary.ca](mailto:tutty@ucalgary.ca)

## Chapter 1: Introduction to the HART Scale

Homelessness has become an all-too pervasive and visible problem in Canada. It has spread from large urban centres to rural, northern and remote communities. While a number of programs have been developed to address the needs of the homeless in the hope of re-housing them, a large population of those at risk of homelessness receive little attention until their needs become dire. There are both societal and individual costs to be borne when this occurs.

Preventing homelessness has the potential to save countless individuals from the misery of life on the streets. However, with the major effort focusing on assisting those that become homeless, where does one start to prevent this significant social ill? The few authors who have written about prevention provide no clear answers, but raise the importance of prevention as a focus (Burt, Pearson & Montgomery, 2007, US; Moses, Kresky-Wolf, Bassuk & Brounstein, 2007, US; Wireman, 2007, US). One key question is how to define the population of those at risk of becoming homeless.

The team originally conducted a literature review summarizing research, particularly published studies from the past decade or so, that focus on the risk factors, predictors and pathways in and out of homelessness (Tutty et al., 2009). Unpublished research reports from reputable organization, especially Canadian ones, were also included. Our primary focus was on factors that differentiate those that have become absolutely homeless from those that are on the cusp of homelessness, either being relatively homeless, or living in hidden homelessness. As such, the analysis focused particularly on studies that differentiate between these groups.

We also searched for articles on resilience and protective factors, again finding relatively few. A final focus of the literature review was studies on the pathways in and out of homelessness. Although the pathways into becoming homeless are clearly relevant, studies on the pathways out of homeless are, by definition, looking at individuals who are already homeless. While some identify characteristics of individuals that contribute to a short homeless experience, others focus on program attributes, a topic that, while interesting, is beyond the scope of this paper.

This analysis identified the assets and resiliencies of those who do not become homeless, and highlighted protective factors or strategies that could prevent a journey into homelessness. These assets and protective factors formed the core of a screening tool, The Homelessness Assets and Risk Tool (HART) that could be used to identify vulnerability to homelessness in at-risk populations, but those not yet experiencing homelessness, in the hope of providing early interventions.

### Defining Homelessness

Homelessness can include a range of housing conditions, and is commonly defined by broad categories: absolute, hidden, and relative (Echenberg & Jensen, 2008, CAN; Hulchanski, Campsie, Chau, Hwang & Paradis, 2009, CAN; Valentine, 2001, UK). The most visible face of homelessness is that of *absolute homelessness* where people are living on the streets or in emergency shelters. The *hidden homeless* are people without a place of their own. They may live in a car or be temporarily housed with friends or relatives (couch surfing). The *relative homeless* are those who are housed but who reside in inadequate (substandard, overcrowded or unsafe) housing and/or insecure housing whereby they may be at risk of losing their shelter (e.g., under threat of eviction or violence). According to these definitions, the traditional counts that focus on

absolute homelessness in Canada represent only the ‘tip of the iceberg’ (Echenberg & Jensen, 2008, CAN). Affordability, suitability and adequacy factors need to be taken into consideration when using the hidden and relative definitions of homelessness (European Federation of National Associations Working with the Homeless, 2007, EU).

The *chronically homeless* is another important subgroup. Of the group of individuals that become absolutely homeless at any point in their lives, an estimated 70 to 80% move out of homelessness (Burt, 2001a, US). Commonly adopted definitions of what it means to be chronically homeless include being continually homeless for a year or more, or at least four episodes of homelessness in the past three years (Caton, Wilkins & Anderson, 2007, US).

While the review in this document covers homelessness worldwide, Canadian publications are especially relevant because of the uniqueness of Canada’s social policies and structures. As Hulchanski and colleagues (2009, CAN) describe, Canada’s social safety net, including such programs as universal health care, old age pensions and unemployment insurance provide a unique safety net, even though these have been plagued with cutbacks, including cuts to social housing.

Canadian studies are also important because of the unique nature of Canada. When U.S. studies describe homeless individuals from different races, they are typically referring to people from African American and Latino roots, as well as illegal immigrants. In Canada, we are more likely to be referring to Canadians of Aboriginal origin, although immigrant and visible minority populations are becoming increasingly prominent among homeless groups.

Considerable research has identified risk factors associated with becoming homeless in Canada. Several authors argue that such sociocultural factors as extreme poverty, interpersonal violence or conflict and an inability to find affordable housing are the main determinants of homelessness (Burt, 2001a, US; Gamache, 2001, US; Hulchanski, 2005; Ji, 2006, US; Perissini, 2007, CAN).

Other researchers have focused on groups at particular risk. These groups - youth, individuals with mental health diagnoses and substance abuse problems, families, immigrants and refugees, abused women and older adults - have often been the focus of special housing programs or interventions. In terms of observed population groups, Aboriginal Peoples are over represented in the homeless populations of our cities compared to their proportional representation in Canadian society (Walker, 2008, CAN; Wentz, 2000, CAN). In order to identify the factors that differentiate those who do not, versus those who do, become homeless, we have taken a group-at-risk approach to synthesizing the existing research.

The other aspect of our approach to identifying the risks that lead to vulnerability and the assets or protective factors that may mitigate some of this vulnerability is the recognition that pathways to homelessness are multi-determinant. It is the complexity involved in these pathways that make it difficult to predict with any certainty which factors are both necessary and sufficient to lead to homelessness and what interaction between the factors adds to the vulnerability of any given individual or family. The multiple determinants model integrates the social, behavioural, biological, environmental and structural forces and the interrelationships between these factors that determine the degree of vulnerability and the differing pathways by which factors might influence homelessness.



## **The Faces of Canadian Homelessness**

As Perissini (2009, CAN) aptly argues, the homeless population is not homogeneous, but is made up of individuals across the life-span with various issues and unique dilemmas, from youth through older adults, from individuals with a mental health and/or substance abuse issue to woman abused by intimate partners, to homeless families. Research on homelessness has tended to focus on these sub-groups rather than the whole.

How many Canadians are homeless? Despite the difficulties entailed in the various definitions of homelessness, Laird (2007, CAN) suggests that as many as 300,000 Canadians are homeless. There has not yet been a Canadian national study, so research is often regional or focused on particular cities. Pointing out the characteristics of those that avoid becoming homeless compared to those that live in absolute homelessness is thus difficult.

In the absence of a Canadian national study, Hwang (2001, CAN) compared the demographics of the absolute homeless in one-night stays in shelters for various populations in nine Canadian cities (an underestimate, obviously, since many homeless individuals do not use shelters). In that report, about 70% of the homeless are men, and individuals of Aboriginal origins are overrepresented by a factor of about 10. However, with more accurate survey methodology, those 2001 estimates have changed dramatically, with, for example, more women represented among the homeless. More immigrants have also been noted.

### **Who is Vulnerable to Homelessness?**

While the majority of studies of homelessness focus on individuals who are living in absolute homelessness, the focus of this document is individuals at risk of homelessness. This population is more difficult to address and to estimate numbers since they are not visible in the same way as those living homeless. Who is at risk? Hulchanski (2000, CAN) identifies a number of ways that individuals can become at risk of homelessness, including:

- People at risk of losing their housing.
- Those facing the risk of losing their shelter either by eviction or lease expiry, with no other shelter available.
- Prisoners, health or mental health clients or others living in other institutions facing release with no place to go.
- The many Canadians who are inadequately housed. While this is not the same as absolute homelessness, most homeless individuals were previously inadequately housed.

Another measure of who is at risk of homelessness is the ‘affordability factor’. The Canadian Mortgage and Housing Corporation (2002, CAN) suggests the general rule that monthly shelter costs (i.e., rent, electricity, heat, water, and municipal services) should be less than 30% (before-tax household income). This general rule is supplemented by another that suggests one’s “entire monthly debt load shouldn’t be more than 40% of your gross monthly income, including housing costs and other debts such as car loans and credit card payments” (p. 13). Hulchanski (2005, CAN) analyzes this type of affordability ratio as “at best a crude indicator of the number of households facing ‘shelter poverty’ – those who do not have enough money left in over in the budget, after paying for housing, to pay for other essentials” (p. 7). However, Hulchanski suggests that the ratio could be used to describe household expenditures, analyze household trends, compare

different household types, and to define eligibility criteria and subsidy levels in rent-geared-to-income housing.

The '30% rule' has become the accepted wisdom for affordability across the country, but there is little documentation with respect to whether this housing expenditure-to-income ratio is practically useful. When the '30% rule' is breached, it is intended to show a "core housing need" (Pomeroy, 2007, CAN). In urban centres, home owners rather than renters are less likely to exceed the 30% rule according to Statistics Canada's Labour and Household Survey's Analysis Division (Luffman, 2006, CAN).

If the ratio is changed to spending 50% of monthly income on housing, a different picture emerges, which is the case for 17% of Calgary households (Statistics Canada, 2008, CAN). Luffman (2006, CAN) found that households in this situation have little room for discretionary spending and earn significantly less than households that spend less than half their monthly income on housing costs. Pomeroy (2007, CAN) used the '50%' ratio to identify a severe housing affordability problem that places individuals and families at high risk of homelessness.

As Main (1998, AUS) clarifies, the many studies focusing on pathways into homelessness tend to focus on two major sets of causes - structural and individual. Structural causes are societal and policy-based issues such as poverty, the housing market, and trends in unemployment. Individual factors include mental illness and health difficulties including substance abuse and the lack of a work ethic. Main reviewed 40 years of research on these two sets of causes published prior to 1998, concluding that authors tended to choose one or the other. Main argues the importance of both. Importantly though, Hulchanski and colleagues (2009, CAN) cite U.S. activist and researcher Cushing Dolbeare who makes the critical statement that:

The one thing all homeless people have in common is a lack of housing. Whatever other problems they face, adequate, stable, affordable housing is a prerequisite to solving them. Homelessness may not be *only* a housing problem, but it is *always* a housing problem; housing is necessary, although sometimes not sufficient, to solve the problem of homelessness (Dolbeare, 1996, p. 34, US).

### **Homelessness as Related to Structural Issues**

According to most authors, homelessness is first a housing and poverty issue. These factors "create the conditions within which individual characteristics can lead to homelessness" (Burt, 2001b, p. 3, US). Understanding the structural causes of homelessness is essential for targeting appropriate responses to this phenomenon and raising the issue beyond individual vulnerabilities and individual-focused interventions.

Any examination of the individual risk factors that lead to homelessness must be premised on the fact that they are associated with societal causes. According to Laird (2007, CAN), poverty is the leading cause of homelessness in Canada with a lack of income or high housing costs most often cited as contributing factors. Government neglect of poverty, social housing and urban development in the last two decades has led to an unacceptable rise in those who face housing loss. Homelessness exacerbates a number of social ills in those disposed including lack of income and employment, malnutrition, ill health, deteriorating mental health, and a rise in addictions. These factors are both caused by, and cause, major determinants in the overall well-being of persons who become homeless.

Burt (2001b, US) outlines four structural factors that significantly affect the problem of homelessness in the United States that are relevant to the Canadian context today. First, more and more people are being priced out of the housing market, especially low income individuals and families. Second, employment opportunities for those with a high school or less education are dwindling and contribute to low income levels for many families and individuals. Also, the reduction of institutional supports to persons with severe mental illness leaves these persons with very limited housing options. Finally, many people are excluded from the paucity of affordable housing that exists due to racial, ethnic and/or class discrimination.

For the last 20 years, social housing in Canada has been the neglected step-child of federal initiatives and many provincial efforts (Hulchanski & Network, 2002). As documented by Hulchanski and the National Housing and Homelessness Network, in the mid-1980s, the federal government cut back on social housing programs. By 1993, the annual growth of federal sponsorship had been reduced to zero. Local responsibility for housing has also been influenced by provincial supports, or lack thereof, with most cities reluctant to supply anything other than acutely needed emergency shelters, primarily for homeless individuals.

Quigley and Raphael (2001, US) completed a comprehensive analysis of all systematic information available on homelessness in US urban areas – including census counts, shelter bed counts, records of transfer payments, and administrative agency estimates. These authors found that there was an increasing demand for low-quality, low-cost housing, and as the price increased for those units, incidences of homelessness also increased.

Systematic discrimination is a structural barrier faced by Aboriginal peoples in Canada that leaves many vulnerable to homelessness and the discrimination experienced within the shelters has been found to deter Aboriginal people from seeking services (Greater Toronto Area Aboriginal Housing Consultation, 2008, CAN; Menzies, 2006, CAN; Social Data Research, 2005, CAN). This was also the case for many immigrants and refugees. Zine (2009, CAN) reported that 68% of the Latin American and Muslim immigrants in Toronto who were part of the study reported some form of housing related discrimination such as rejection from landlords based on a preconceived bias.

We recognize that the key structural precipitants to homelessness are poverty and lack of affordable, available, supported housing (Hulchanski, 2003, CAN); however, those impacted have specific vulnerabilities and resiliencies that are further explored in this literature review. While the growing body of knowledge about “who” becomes homeless is invaluable, considerably less is known about the characteristics of groups at risk for becoming part of the absolute homeless, who manage to avoid or prevent this occurrence: the focus of this project.

The key question is what differentiates those who fall into homelessness from those who do not - and what resources or personal assets do they utilize? In addition, what factors/assets are central in individuals who manage to permanently exit homelessness? Once we have a clear understanding of these risks and assets, programs or strategies can be developed to assist individuals to prevent their becoming homeless. Such programs and strategies may already exist in Canada (Forchuk et al., 2008, CAN) or internationally (Pawson, Netto & Jones, 2006, UK).

### **Individual Factors Related to Homelessness**

The risk factors that are associated with increases in the chances of becoming homeless (absolute, hidden and relative) are numerous and have been studied by many researchers. Risk

factors may include any characteristic of a *person* (e.g., age or ethnicity), a *situation* (e.g., the severity of a traumatic event), or a *person's environment* (e.g., family life or social network) that increases the likelihood that that person will eventually become homeless. Many of the research studies concerned with identifying individual risk factors or vulnerabilities do so without taking into account the more structural factors associated with homelessness described above.

Some risk factors have been identified as potential triggering events for specific groups examined in this literature review. Researchers discuss how ‘triggers’ or stressful life events can push individuals and families from being at risk of becoming homeless into homelessness. These triggering events may be sudden such as an accident, illness or loss of employment or they can be characterized as ‘tipping points’ when a breaking point is reached after a cumulative buildup of largely economic problems (Pomeroy, 2007, CAN). This is especially prevalent in the literature on older adults and homelessness (Cohen, 1999, US; Crane et al., 2005, UK; Crane & Warnes, 2001, UK; McDonald, Dergal, & Cleghorn, 2007, CAN; Shinn et al., 2007, US).

Triggers such as widowhood, loss of housing, job loss, or relationship breakdown destabilize a vulnerable person and “when combined with poverty, addiction problems, mental illness, or poor [coping] skills, the person... lacks the resources, skills, or support to prevent...homelessness” (Crane et al., 2005, p. 154, UK). Stressful life events, when experienced by individuals in housed comparison groups, tend to have higher levels of social supports or economic resources to help cope with the event (Shinn et al., 2007, US). When the literature mentions triggering events, they will be noted along with the risk factors identified.

## Chapter 2: Risk and Assets for Homelessness: Developing and Testing the HART

The literature review highlighting specific studies regarding vulnerable populations for homelessness was presented in Tutty et al. (2009). As is clear from the preceding chapter, there is no one reason, no one pathway to homelessness. Homelessness, whether absolute, hidden or relative is the result of multiple factors (structural/systemic and individual). Sometimes there is an identifiable event that, when combined with risk factors, provides the trigger for moving into extreme vulnerability to absolute homelessness.

While in the previous chapter we highlighted factors specific to vulnerable groups, in this chapter we look across the vulnerable groups to identify common factors that can identify individuals at risk of being homeless. A difficulty with the analysis is simply that many issues are correlated. For example, poor social skills may be a result of a mental illness. Thus, many factors overlap.

The following sections examine the structural, risk and protective factors reviewed from the homelessness literature. Primarily, we relied on the analysis of research studies that differentiated those at risk of becoming homeless (i.e., still housed though many may be among the relative homeless because they are living in overcrowded or inadequate housing) from those who were experiencing absolute homelessness. Some of these events and factors are common across the life-span; other factors are specific to a certain subgroup among the homeless or those at risk of becoming homeless. Appendix I provides a summary of the issues. The citations for comparison studies or longitudinal studies that provide comparative data for housed as compared to homeless individuals are **bolded**, as are the key differentiating factors.

### Structural Factors

Housing, economic, social support, and health structural factors have been identified in the literature as critical structural issues to ameliorate homelessness. These provide the context into which individual and family characteristics must be placed. The following were the specific structural factors investigated as affecting the vulnerability to becoming homeless outside the personal or family realm.

Housing-related systemic conditions reported in the literature include the **availability of subsidized and affordable housing**, whether we are looking at the general homeless population (**Klodawsky et al., 2009, CAN**), or women fleeing abusive relationship (**MacKnee & Mervyn, 2002, CAN**). The housing also needs to be of good quality according to **Klodawsky et al. (2009, CAN)**.

Non-comparison studies that noted the availability of subsidized housing included studies for women fleeing abusive relationship (Baker, Cook, & Norris, 2003, US; Bopp et al., 2007, CAN; Metraux & Culhane, 1999, US; Thurston et al., 2006, CAN), youth (Van Daalen-Smith & Lamont, 2006, CAN; Toronto Youth Cabinet, 2005, CAN); persons with mental health problems (Nelson, Aubry & Lafrance, 2007; Susser, Moore & Link, 1993, US); families with limited income (Goodman, 1991, US; McChesney, 1995, US; Shinn, Baumohl & Hopper, 2001; Waegemakers Schiff, 2007, CAN), immigrants and refugees (Anucha, Smylie, Mitchell & Omorodion, 2007, CAN; Anucha, 2006, CAN; O'Sullivan, 2008, EU; Wolch & Li, 1997, US), and older adults (Cohen, 1999, US; Rota-Bartelink & Lipmann, 2007, UK; Lipmann et al., 2004, UK; Crane et al., 2005, UK).

The primary economic structural factor that impacts the vulnerability of becoming homeless include **difficulty in obtaining and maintaining access to financial assistance programs** (Folsom et al., 2005, US; Klodawsky, Aubry, Nemiroff, Bonetta & Willis (2009, CAN); MacKnee & Mervyn, 2002, CAN; Smith et al., 2008, UK). This was also true for seniors (Allen, et al., 2004, US; Shinn et al., 2007, US), and women and families (Bassuk et al., 1997, US) and for those with health risks (Smith, et al., 2006, US).

This factor was identified as important in non-comparison studies as well (Anucha et al., 2007, CAN; Anucha, 2006, CAN; Crane & Warnes, 2001, UK; Lipmann et al., 2004, UK; Crane, et al., 2004, UK; Crane et al, 2005, UK; Crane et al., 2006, UK; Bopp et al., 2007, CAN; Greater Toronto Area Aboriginal Housing Consultation, 2008, CAN; Luchins et al., 1997, US; McChesney, 1995, US; Thurston et al., 2006, CAN; Toronto Youth Cabinet, 2005, CAN; Wood et al., 1990, US).

A **combination of low income levels and high rents** was identified in a number of comparison studies especially for women and families (Browne & Bassuk, 1997, US; Caton et al., 2000, US; Fertig et al., 2008, US; Pavao et al., 2007, US), seniors (Gardiner & Cairns, 2002, CAN; Shinn et al., 2007, US), men (Caton et al., 2000, US), those with mental illness (Mojtabai, 2005, US) and individuals of Aboriginal origin (Gardiner & Cairns, 2002, CAN).

The intersection of increasing market rents (Cohen, 1999, US; Crane & Warnes, 2001, UK; Lipmann et al., 2004, UK; Quigley & Raphael, 2001, US), lack of affordable/subsidized housing (Crane et al., 2005, UK; McDonald, Donahue, Janes, & Cleghorn, 2006, CAN), discrimination against older adults entering/re-entering the workforce (Shinn et al., 2007, US; Gardiner & Cairns, 2002, CAN; McDonald et al., 2006, CAN), and age-restricted government-funded social assistance programs (Gardiner & Cairns, 2002, CAN; McDonald et al., 2006, CAN; Stergiopoulos & Hermann, 2003, CAN) contribute to ‘the gap’ in funding and services for adults age 50-64.

A further difficulty is **access to appropriate programs and support for issues besides housing and finances**. Molino’s 2007 US study of youth identified those who came in conflict with a youth or family service agency as more likely to become homeless. Finding services and supports for everyday living that were specifically oriented to youth (Van Daalen-Smith & Lamont, 2006) and outreach or adequate and appropriate treatment programs for individuals with mental health or addictions difficulties (Bassuk et al., 1997, US; Folsom et al., 2005, US; Susser, et al., 1993, US) is a systemic problem related to remaining housed. In addition, programming targeted towards ‘seniors’ does not adequately meet the increased needs of older adults at risk of homelessness. Programming for the general homeless population seems intimidating to older adults homeless for the first time (Shinn et al., 2007, US), also noted by non-comparison studies (Cohen, 1999, US; Crane, Warnes & Fu, 2004, UK; McDonald et al., 2003, CAN; Stergiopoulos & Hermann, 2003, CAN).

Finally, **racial background or minority status** was identified as a risk factor in several studies. Aboriginal background for youth was cited by four studies (Bearsley-Smith et al., 2008, AUS; Shelton et al., 2009, UK; Tyler & Bersani, 2008, US; Robert et al., 2005, CAN), minority status in two studies of women/families (Bassuk et al., 1997, US; Pavao et al., 2007, US). Interestingly though, one study with women (Lehmann et al., 2007, US) found that Caucasian women were more likely and Fertig and Reingold (2008, US) found that women of minority status were less likely to become homeless.

## Protective Factors

Considerable research has been dedicated to examining the risk factors associated with becoming homeless. However, only a small number of studies look at resilience or protective factors that prevent or reduce the vulnerability for becoming homeless. This section examines the positive conditions, personal and social resources that promote resiliency, protect and buffer the individual, and reduce the potential for becoming homeless. Most are not comparison studies, so do not reach the level of support that we had hoped to find. However they are interesting, in and of themselves, since they represent such a dramatic shift from looking at deficits to strengths. Studies that included a comparison with a comparable but housed group are in **bold** type-face.

Notably, many protective factors are the opposite of risk factors. The positive discourse involved when presenting issues as strengths rather than deficits is seen as an important strategy in approaching those who are vulnerable.

The bulk of studies on resilience focus on homeless youth (Bender, Thompson, McManus, Lantry & Flynn, 2007, US; Kidd, & Davidson, 2007, CAN/US; Lindsey, Kurtz, Jarvis & Nackerud, 2000, US; Munro & LaBoucane-Benson, 2007, CAN; Williams, Lindsey, Kurtz & Jarvis, 2001, US).

Munro and LaBoucane-Benson (2007, CAN) conducted a study in Alberta with 18 young women between the ages of 18 to 26, asking about their experiences of being homeless as adolescents. A unique aspect of the study was assessing the young women using the Minnesota-based Search Institute's 40 Developmental Asset model, which takes a positive approach to youth development. Of these 40, survival assets and transition assets comprised sets of skills necessary to cope as a homeless young woman.

The other studies identified such **coping skills** as developing street smarts (Bender et al., 2007, US), informal supports (Bender et al., 2007, US) and internal capacities such as self-esteem and self-care (Bender et al., 2007, US; Kidd & Davidson, 2007, CAN/US; Williams et al., 2001, US), readiness to accept help (Williams et al., 2001, US) and spirituality (Lindsey et al., 2001, US). Strong interpersonal skills were identified as critical in one comparison study on the generally homeless population (Klodawsky et al., 2009, CAN) and another on women (Wagner & Perrine, 1994, US). Developing social supports beyond one's street friends was identified as important by MacKnee and Mervyn (2002, CAN)

In a review of longitudinal studies of homelessness, Klodawsky and colleagues (2009, CAN) conclude that the best predictor for avoiding homelessness was the **provision of economic resources**. This is confirmed by the finding that the ability to access and utilize social services such as social assistance or housing subsidies is a protective factor (Bassuk et al., 1997, US; Shinn et al., 1998, US). Other non-comparison studies that identified this factor were found (Allen, et al., 2004, US; Baker, et al., 2003, US; Social Data Research, 2005, CAN; Thurston et al., 2006, CAN). This includes being familiar with community supports and local resources (Bassuk et al., 1997, US).

**Being the primary tenant or owning property** (Bassuk et al., 1997, US; Shinn et al., 1998, US) as well as attaining at least a **high school education** can be buffers to becoming homeless for the general homeless population (Bassuk et al., 1997, US; Wood et al., 1990, US), women/mothers (Caton et al., 2000, US; LaVesser, Smith & Bradford, 1997, US), youth (Commander et al., 2002, UK), and men (Caton et al., 2000, US). Interestingly the relationship

did not hold for seniors (Shinn et al., 2007, US) or individuals with addictions (**Eyrich-Garg et al., 2008, US**). A highschool education was supported by non-comparison studies (**Lavesser et al., 1997**; Martijn & Sharpe, 2005, US; Slesnick, Bartle-Haring, Dashora, Kang & Aukward, 2008, US; Susser, et al., 1993, US).

Protective factors specific to youth included family-related dynamics such as **parental monitoring and involvement** with youth (**Bearsley et al., 2008; Tyler & Bersani, 2008, US**). Non-comparison study factors included family communication and problem solving abilities as well as family agreement on values (Orthner, Jones-Sanpei & Williamson, 2004, US; Vandergriff-Avery, Anderson & Braun, 2004, US).

**Current or previous employment** was identified as a protective factor in the general homeless population (**Caton et al., 2005, US**). Having **family members or relatives that will assist** with housing needs was highlighted for women and families in two studies (**Fertig & Reingold, 2008, US; Toohey et al., 2004, US**).

Two final protective factors identified in the research literature were **average cognitive skills** for women/mothers (**LaVesser et al., 1997, US**) and **having children or dependents** (**Orwin et al., 2005, US**).

### **Individual Risk Factors**

Of the many populations reviewed in the previous chapter, a number of common factors that leave individuals vulnerable to becoming homeless have been identified. These will be addressed under the broad topics of current interpersonal and family factors, mental health and substance abuse issues, childhood factors, health problems and housing transitions.

#### **Childhood Factors**

A foster care, group homes or juvenile detention placement as a minor was associated with homelessness in a number of studies with respect to the general homeless population (**Goering et al., 2002, CAN**); youth (**Bearsley-Smith et al., 2008, AUS; Commander et al., 2002, UK; Robert et al., 2005, CAN; Tyler & Bersani, 2008, US**); women/mothers (**Bassuk et al., 1997, US; Wood et al., 1990, US**), and individuals with mental health issues (**Shelton et al., 2009, UK**).

A childhood history of abuse, which is often related to foster care placement was connected to homelessness in youth (**Bearsley-Smith et al., 2008, AUS; Molino, 2007, US; Robert et al., 2005, CAN; Shelton et al., 2009, UK; Tyler & Bersani, 2008, US**), neglect but not other forms of abuse (**Molino, 2007, US**), and women/mothers (**Browne & Bassuk, 1997, US; Wood et al., 1990, US**). Interestingly, the relationship was not confirmed for seniors (**Shinn et al., 2007, US**). Closely related to being the victim of abuse is witnessing parental or family violence or severe conflict. Several studies identified this as a factor for youth (**Bearsley-Smith et al., 2008, AUS; Robert et al., 2005, CAN; Shelton et al., 2009, UK; Tyler & Bersani, 2008, US**), women (**Ingram et al., US**) and individuals of Aboriginal origin (**Gardiner & Cairns, 2002, CAN**).

Interpersonal factors specific to youth include coming from a **single-parent headed** household (**Bearsley-Smith et al., 2008, AUS; Shelton, et al., 2009, UK; Tyler & Bersani, 2008, US; Robert et al., 2005, CAN**), substance abuse by a family member (**Bearsley-Smith et al., 2008, AUS; Shelton et al., 2009, UK; Tyler & Bersani, 2008, US; Robert et al., 2005, CAN**) and the family being on **long-time social assistance** (**Bearsley-Smith et al., 2008, AUS; Robert et al., 2005, CAN; Shelton et al., 2009, UK; Tyler & Bersani, 2008, US**). Youth also reported several types of victimization that may affect their vulnerability to become homeless: School



victimization in the forms of bullying and/or being threatened (Tyler & Bersani, 2008, US) and neighbourhood victimization that may take the form of their house being broken into or witnessing violence in the area (Tyler & Bersani, 2008, US).

**Parental incarceration** (Shelton et al., 2009, UK) and **family of origin involvement with social services, primarily child welfare** (Shelton et al., 2009, UK) were specific childhood issues for adults with severe mental health problems and substance abuse. A **younger age of first homelessness** was a significant predictor according to Goering et al. (2002, CAN) who found that being homeless before age 18 differentiated those who were more likely to continue being homeless.

### **Current Interpersonal and Family Factors**

Under the broad category of interpersonal factors are risk factors associated with the individual's situation such as lack or loss of social support or relationship breakdown, and factors related to the person's environment especially victimization, which plays a significant role in the risk for absolute or hidden homelessness.

Poor social support was perhaps the most commonly identified factor across studies and sub-populations. It was identified for the general homeless population (MacKnee & Mervyn, 2002, CAN; Muñoz & Vázquez, 2004, ESP); women/families (Wood et al., 1998, US; Bassuk et al., 1997, US; Letiecq, Anderson & Koblinsky, 1998, US (for women in emergency shelter and transitional housing but not those doubled up); addictions (Eyrich-Garg et al, 2008, US); mental illness (Kertesz, et al., 2005, US), seniors (Shinn et al., 2007, US, regarding family that could provide housing) and those of Aboriginal background (Gardiner & Cairns, 2002, CAN). Another key factor for seniors was disputes with landlords or neighbours (Shinn et al., 2007, US).

**Lack of employment**, being precariously employed or having a recent job loss or short tenure in the longest job held is an individual risk factor that intersects with the structural issue of the economy. It also likely represents interpersonal issues since working with others is a key factor in employability. Employment issues were identified as factors connected to homelessness in studies on women/families (Lehmann et al., 2007, US; Pavao et al., 2007, US), Youth (Commander et al., 2002, UK), seniors (Shinn et al., 2007, US) and individuals of Aboriginal origin (Gardiner & Cairns, 2002, CAN).

Being the **victim of intimate partner violence** (or violence from other family members) was identified as significant in a number of studies of women and mothers (Bassuk et al., 1997, US; Browne & Bassuk, 1997, US; Fertig & Reingold, 2008, US; Pavao et al., 2007, US; Wood et al., 1990, US), Aboriginal women (Gardiner & Cairns, 2002, CAN) and seniors (Gardiner & Cairns, 2002, CAN). For women whose partners abuse them, an incidence of violence may be the trigger for an episode of absolute homelessness (Shinn et al., 2007, US), also mentioned in non-comparison studies (Baker et al., 2003, US; Crane et al., 2004, UK; Crane et al, 2005, UK; Crane et al., 2006, UK; Bopp et al., 2007, CAN; Lipmann, Mirabelli, & Rota-Bartelink, 2004, UK; Native Women's Association of Canada, 2004, CAN; Rota-Bartelink, & Lipmann, 2007, UK). Interestingly though, several studies found similar rates of intimate partner abuse among homeless and poor, housed women (Ingram et al, 1996, US; LaVesser, Smith & Bradford, 1997, US; Lehmann et al., 2007, US; Tucker et al., 2005, US), raising the question of whether another associated variable account for the vulnerability to homelessness.

Another risk factor for women was being **separated, divorced or single** (Fertig & Reingold, 2008, US; LaVesser et al., 1997, US; Lehmann et al., 2007, US; Pavao et al., 2007, US). Also specific to women was being a recent victim of sexual aggression (Ingram et al., 1996, US; Tucker et al., 2005, US), being a young mother (Shinn et al., 1998, US; Weitzman et al., 1992, US) and having a child in foster care (Lehmann et al., 2007, US).

Involvement with the criminal justice system was linked to homelessness for youth (Molino, 2007, US) and those with mental health issues (Commander & Odell, 2001, UK)

Several interpersonal issues were specific to youth. The family-related variables that have been associated with an increased risk of homelessness for youth include **family conflict** (e.g., fighting, arguing) (Bearsley-Smith et al., 2008, AUS; Klodawsky et al., 2009, CAN; Molino, 2007, US; Robert et al., 2005, CAN).

### **Mental Health and Addictions**

One of the clearest risk factor for homelessness, and one that crosses all age groups is the presence of a significant mental health diagnosis or problem (Bassuk et al., 1997, US; Fertig & Reingold, 2008, US; Shelton et al., 2009, UK; Weitzman et al., 1992, US) and/or addictions (Shinn et al., 1998, US; Weitzman et al., 1992, US; Wood et al., 1990, US). Non-comparison studies also identified this as a factor for homelessness with respect to mental health symptoms (Lavesser et al., 1997, US; Crane & Warnes, 2001, UK; Cohen, 1999, US; Crane et al., 2004, UK; Crane et al, 2005, UK; Crane et al., 2006, UK; Lipmann, Mirabelli, & Rota-Bartelink; 2004, UK; Letkemann, 2004, CAN; Martijn & Sharpe, 2005, US; Waegemakers Schiff, 2007, CAN; and/or severe addictions (Anucha et al., 2007, CAN; Bassuk et al., 1997, US; Lavesser et al., 1997, US; Cohen, 1999, US; Crane & Warnes, 2001, UK; Crane et al. 2004, UK; Crane et al., 2005, UK; Crane et al., 2006, UK; Fertig & Reingold, 2008, US; Kraus, Luba & Goldberg, 2005, CAN; Letkemann, 2004, CAN; Lipmann, Mirabelli & Rota-Bartelink; 2004, UK; McChesney, 1995, US; Menzies, 2006, CAN; Waegemakers Schiff, 2007, CAN; Sider, 2005, CAN;).

Mental health and/or addiction issues are often combined with other risk factors or triggering events (e.g., interpersonal conflict involving parents, landlords and others) leading to episodes of hidden or absolute homelessness.

The most common risk factor among those with mental health issues was the **severity of the symptoms, psychological distress and behaviour problems** (Commander & Odell, 2001, UK); Eyrich-Garg et al., 2008, US; Folsom et al., 2005, US; Shelton, et al., 2009, UK; Kertesz et al., 2005, US). Severe symptoms were also identified as risk factors for women/mothers (Ingram et al., 1996, US; Wood et al., 1990, US). This relationship did not hold for men in Caton and colleague's 2000 US study, where more severe symptoms were not linked to homelessness.

For youth, similar difficulties were labelled as **“acting out” problems** and included school suspensions and delinquent behaviours (Bearsley-Smith et al., 2008, AUS; Molino, 2007, US; Robert et al., 2005, CAN; Shelton et al., 2009, UK; Tyler & Bersani, 2008, US).

The specific psychiatric diagnosis was linked to homelessness in some research. **Depression** was cited most often, linked primarily to youth (Bearsley-Smith et al., 2008, AUS; Robert et al., 2005, CAN; Shelton et al., 2009, UK; Tyler & Bersani, 2008, US) and to women (Fertig & Reingold, 2008, US). Post-Traumatic Stress Disorder (PTSD) was linked to women/mothers by LaVesser et al. (1997, US).

**Alcohol or substance abuse** broadly defined was linked to homelessness for women/mothers, (Bassuk et al., 1997, US; Fertig & Reingold, 2008, US; Wood et al., 1990, US) including heroin. Interestingly Molino (2007, US) did not find that substance use made a difference in becoming homeless for youth.

Severe addictions, including the use of crack and cocaine, were identified in individuals with addiction problems who became homeless (Eyrich-Garg et al., 2008, US, US; Orwin et al., 2005, US). This issue was also identified in the general homeless populations (Klodawsky et al., 2009, CAN). Interestingly, especially given the stereotype that homelessness and addictions go hand in hand, two studies, one with women/families (Lehmann et al., 2007, US) and one with men (Caton et al., 2000, US) found that the presence of severe substance abuse did not predict homelessness.

Concurrent mental health and substance abuse was linked to homelessness for individuals with mental health issues (Commander & Odell, 2001, UK; Eyrich-Garg et al., 2008, US; Kertesz et al., 2005, US) and for women by (Ingram et al., 1996, US; Wood et al., 1990, US).

### **Health Issues**

In the 2002 Calgary Homeless study, participants with mental health problems overwhelmingly also had physical health conditions that required treatment – 91% of the absolutely homeless and 100% of the relatively homeless (Vista Evaluation and Research Services, 2003c, CAN). Both those with health and mental health difficulties faced a number of barriers accessing healthcare including lack of money, wait was too long, lack of trust, lack of transportation, no healthcare card, limited hours of service, fear and lack of knowledge.

Comparison studies noted the relationships between health problems and homelessness for those in the general homeless population (Muñoz et al., 2005, Spain), women/families (Fertig & Reingold, 2008, US), those with mental health problems (Kertesz et al., 2005, US), seniors (Gardiner & Cairns, 2002, CAN) and those of Aboriginal background (Gardiner & Cairns, 2002, CAN). Interestingly, having a **disability** was not linked to homelessness for seniors in the study conducted by Shinn and colleagues (2007, US).

Women-specific health problems included an inability to manage daily living and household tasks whether associated with being pregnant or having recently given birth (Shinn et al., 1998, US; Weitzman et al., 1992, US).

### **Housing Transitions**

Transitions from one residence to the next, including release from institutions such as psychiatric hospitals (Forchuk, 2005) and shelters, also are associated with housing difficulties. **Psychiatric hospitalization** (especially in the past 5 years) was identified as a predictor of homelessness with individuals with a mental health history (Bassuk et al., 1997, US; Folsom et al., 2005, US; Shelton et al., 2009, UK; Wood et al., 1990, US) and women/families (Bassuk et al., 1997, US). Non-comparison studies that highlighted this factor for those with mental health problems included Lipmann et al., (2004, UK) and Susser et al. (1993, US).

**Being evicted or marginally housed in the past year** is linked with homelessness for women/families (Bassuk et al., 1997, US; Lehmann et al., 2007, US; Shinn et al., 1998, US), individuals of Aboriginal origin (Gardiner & Cairns, 2002, CAN) and seniors (Shinn et al., 1998, US). Another home or home placement variables that indicate a woman/family is at greater risk of becoming homeless is a **history of staying with family or friends and housing instability**

(Bassuk et al., 1997, US; Goodman, 1991, US; Wood et al., 1990, US). Shinn et al. (1998, US) found this to be true with respect to seniors. Two non-comparison studies also highlighted this variable (Marin & Vacha, 1994; McChesney, 1995, US). Another significant factor for seniors was housing being converted or needing significant repairs (Shinn et al., 2007, US).

Moving to a new country in the previous years was identified as a risk factor for homelessness form women/families (Lehmann et al., 2007, US; Fertig & Reingold, 2008, US)

A history of **being kicked out or running away** were considered risk factors for hidden or absolute homelessness for youth (Shelton et al., 2009, UK). Two non-comparison studies also mentioned this factor (Auerswald & Eyre, 2002, US; Miller et al., 2004, US). **Women moving away because of violence** was noted for this population by Tucker et al. (2005, US).

### **Homelessness Asset and Risk Screening Tool (HART)**

One of the major goals of this project was to develop a tool that would serve to assess individuals at risk of homelessness, but who had not yet been homeless. Several organizations have developed measures for assessing issues in individuals that are already homeless. These assessment tools tend to provide detailed information about a number of aspects of the lives of individuals who are homeless in the hope of providing the most appropriate interventions. A prime example is the Vulnerability Index™ or Assessment Tool (O’Connell) developed to guide housing placements and to identify homeless individuals at most risk of dying.

In contrast, risk assessment measures are often developed for broad populations, composed of individuals who are not seeking services and may not, in fact, identify as having the problem on which the scale focuses on. As such, they are typically short, from 20 to 30 items. The purpose is to identify factors that predict the development of problems in the future. If the individual has already developed or experienced the issue, a more in-depth assessment tool such as that previously mentioned is more appropriate. For example, a screening tool would rarely ask for specifics such as level of income. In contrast, in a screening tool, the issue is whether the income is sufficient to pay for adequate housing.

Further, however, because risk assessment measures are intended to predict the occurrence of a problem in future, they must establish predictive validity, the focus of the next phase of the project. The attached scale was based on an in-depth literature review that examined studies that differentiated homeless from non-homeless individuals. It constitutes a compendium of issues that have been found to differentiate “at-risk but housed” from homeless groups. However, since the studies are from around the world, the relevance of each factor for Calgary/Alberta populations needs to be tested. In fact, the tool would need to be validated in each centre in which it is used to assess that the variables are valid for that location. These testings will provide construct validity for the tool for each locale.

The following factors were considered guiding principles for the draft screening tool

1. Start with several broad questions about concerns about housing. This will identify those who will be invited to take the remainder of the questionnaire.
2. Ask about structural issues and those related to housing first. Since the focus is housing, where one is living and how one pays for one’s accommodation create what is termed “face validity”.
3. Phrase issues as assets whenever possible. This makes the tool more positive in tone and perhaps more agreeable to respond to.

4. Be the least intrusive as possible. Only ask about issues that are critical.
5. Ask more sensitive questions later. Issues such as mental health status and substance use are deemed by most as intrusive. Therefore, they need to be approached later when the respondent is engaged in the task. A suitable rationale for asking such questions is necessary.
6. The final sets of questions are specific to various sub-groups and will ONLY be asked of that group.

Note also that the current draft was developed to focus on content not formatting. Once the content is accepted, links to specific questions can be formatted more effectively. The current assumption is that the tool will be used as a telephone survey, with the person administering the tool, doing so on a computer screen. A self-report version can easily be developed for later, and once the tool's psychometric properties have been tested.

### **Rationale for the Current Study**

To summarize the literature review, homelessness is a significant problem in Canada with both social and economic implications, affecting large and small communities across the country. While many "at-risk" groups have been identified, including those with mental health issues and addictions, of Aboriginal origin, youth, older adults, and women who have experienced domestic violence, little is understood about why individuals in these groups may end up homeless. In attempts to address homelessness, services and interventions often focus on those who are currently homeless, and little attention has been paid to the prevention of homelessness.

Without an increased understanding of homelessness risk factors and without preventative interventions, there exists a gap in the ability to effectively work towards ending homelessness. In response to this need a literature review, "Risks and assets for homeless prevention: A literature review for the Calgary Homelessness Foundation" was prepared in September 2009 that summarized risk factors, predictors and pathways in and out of homelessness, and protective factors and assets against homelessness.

From this literature review, an assessment tool, the Homelessness Assets and Risks Tool (HART), was drafted. The long-term aim of this study is to develop a tool that can aid service providers in identifying individuals who are at risk of homelessness. The purpose of the current research is to test the validity of the HART, including its predictive validity with respect to identifying those at risk of homelessness.

The main objectives of this research are to:

- 1) Determine the ability of the HART tool to identify risks and assets that are predictive of future housing problems.
- 2) Determine the applicability of using the HART tool within a Calgary context.
- 3) Assess the tool's feasibility from an administrative perspective.

This was achieved by:

- 1) Utilizing the HART tool with an initial sample of service recipients at multiple community agencies within the city of Calgary.
- 2) Testing the tool's content validity (the ability to capture elements of risk) by comparing responses to the HART to responses to the ETHOS (described below).

- 3) Testing the HART's predictive validity (ability to predict homelessness) by tracking a sub-sample of participants over a two-year period.

## **Methodology**

The study participants were adult residents of the Calgary area who presented at the participating Calgary agencies, primarily community resource agencies that provide assistance for a broad range of issues, homelessness being only one.

Prior to appointments the frontline staff or agency staff provided potential participants with a flier briefly describing the study and inviting people to participate. Individuals who chose to participate in the study were directed to laptop computers on which they completed the HART and ETHOS instruments via an on-line computer program. The locations in which the laptop computers were placed was dependent on individual agencies (e.g., available private space). Laptops were placed so as to ensure the greatest possible degree of privacy for participants when completing the questionnaires.

Only those presenting for agency services who were not currently homeless were invited to participate in the study (with the exception of a sample of women from a women's emergency shelter for domestic violence). Individuals who agreed to participate were provided with a \$25 honorarium by mail by providing contact information via the on-line computer program. This information was not directly linked to their survey responses in order to ensure confidentiality.

Following their completion of the survey instruments, the participants had the choice to stop or to continue to an electronic information sheet about Phase 2. If they choose to participate in Phase 2, they provided consent to be contacted at a later date as well as their contact information and contact information for up to three additional individuals who would be likely to know of their whereabouts. Strategies to ensure confidentiality were addressed.

When employing a longitudinal design, retaining participants for the duration of the research is often a challenge. In previous research projects, the provision of an honorarium to participants has assisted in overcoming this challenge. This approach was utilized for this study: individuals who take part in Phase 2 received \$20 at each 6-month follow-up, upon completion of the follow up questions.

The consent form was situated at the beginning of the on-line computer survey, to be read prior to completing the measures. That these adult participants begin answering the survey measures indicates their understanding of the project and their consent.

### **The ETHOS classification system**

The acronym "ETHOS" stands for the European Typology of Homelessness and Housing Exclusion. It has been commonly used by member states in the European Union for reporting on homelessness and housing exclusion (European Federation of National Associations Working with the Homeless, 2007). The classification system broadly categorizes the housing situation of people who are absolutely homeless as "roofless" or "houseless" (see Appendix III). Accommodation used by people who are relatively homeless is categorized as either "inadequate" or "inadequate" (Amore, Baker & Howden-Chapman, 2011). The ETHOS was previously used in Calgary (Calgary, 2008) in a study looking at abused women in the Calgary Women's emergency shelter. It was considered useful for expanding the definitions of homelessness beyond living rough or on the streets, the typical public perception of being homeless.

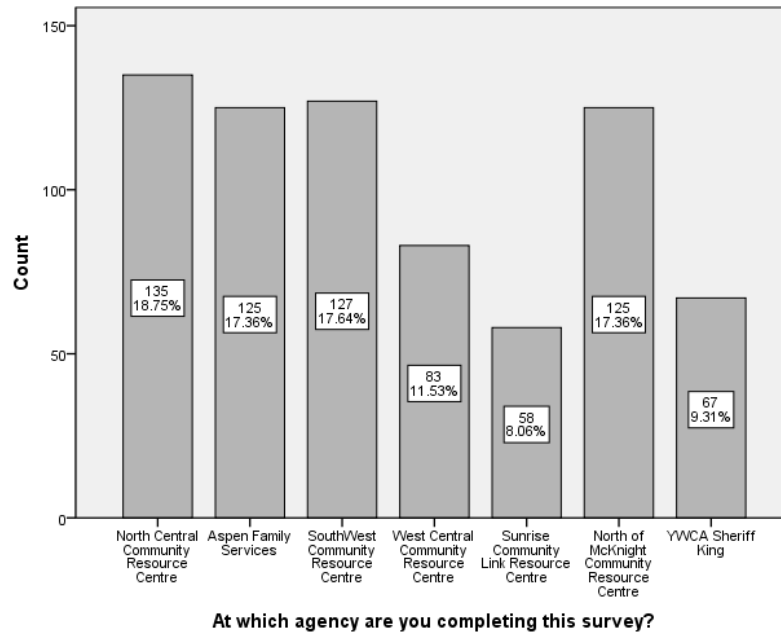
The ETHOS was included in the HART pilot to provide a more comprehensive idea of the extent to which the study participants had experienced diverse forms of homelessness in the past ten years. The ETHOS is not a scale of homelessness per se. The homelessness forms or risk factors were re-conceptualized as 26 items relating to housing in the past ten years (see Appendix IV).

## Chapter 3: Results

### Who Answered the HART?

In total, 740 Calgarians answered the HART survey, although not all answered every item on the measure. As such, the following demographic information is often based on a somewhat smaller sample size, which is noted in the narrative or table.

Seven Calgary agencies provided space and invited their clients to answer the HART. Most respondents specified at what agency they had completed the survey (720 of 740 or 97.3%). Across the seven agencies, there was a relatively equal distribution of respondents (from 8% to 18.8%).



With respect to gender, of the 717 individuals (96.9%) who answered the question, almost two-thirds (63.9% or 458 of 717) respondents were women and a little more than one-third were men (36.1% or 259 of 717).

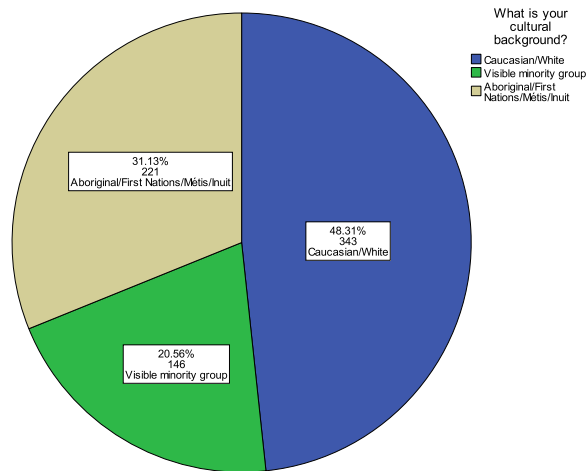
The age of the respondents is presented in Table 1. As anticipated, the largest proportion of those who completed the HART survey was between the ages of 25 and 49. However, seniors are relatively well-represented with about one-sixth of the total (16.2%) between the ages of age 50 and older. Youth are similarly represented with almost 14 percent of the total sample.

Table 1: Age Groups of HART Respondents

Age Group	
Ages 15 to 24	97 (13.5%)
Ages 25 to 49	504 (70.2%)
Ages 50 to 64	109 (15.2%)
Age 65 plus	8 (1.1%)
Total	718



With respect to racial background, as can be seen in the chart below (with data from 710 individuals or a 95.9% response rate), while almost half of the respondents were of Caucasian/White background, another almost third were of Aboriginal origins and a fifth were from visible minority groups. According to data from the 2006 Canadian census (City of Calgary, 2012), which was the last for which this information was collected, Aboriginal groups make up about 2.4% of the Calgary population and visible minority groups about 22.2%. In the HART data set, individuals of Aboriginal origins are over-represented in the current sample of those seeking assistance from community resource centres.



About ten percent (69 of 707 or 9.8%) of the HART survey respondents had immigrated to Canada from a different country within the past five years. Of those, about half (30 of 69 or 43.5%) came as refugees. In the 2006 Canadian census, 23% of Calgarians identified themselves as immigrants, a slightly larger proportion than the HART respondents.

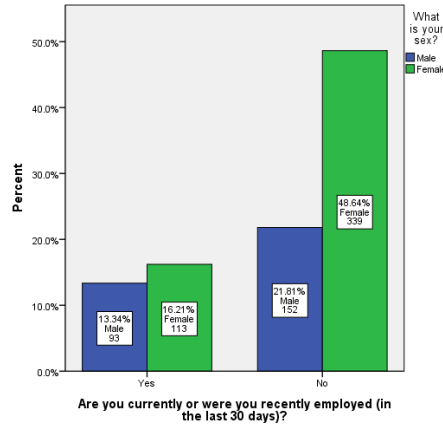
Regarding whether the respondents have children under the age of 18 who were currently living with them, of the 709 (95.8%) who answered the question, almost two-thirds (59.7% or 423 of 709) had children, while 40.3% (286 of 709) did not.

Of the 707 respondents (95.5%) who answered a question about whether they had completed high school, a little over half had their highschool matriculation (52.8% or 373 of 707), while 47.2% (334 of 707) had not.

A small proportion of the HART survey respondents (24 of 696 or 3.4%) self-identify as lesbian, gay, transgendered, bisexual, or queer.

### Employment and Finances

The employment status of the HART respondents is displayed in the chart below, broken down by sex. This question was answered by 697 (94.2%). The majority of the respondents had not been employed during the past month (70.4% or 491 of 697); 29.6% or 206 of 697 were employed. The women were less likely to be employed than men to a statistically significant degree (Pearson's chi-square - contingency corrected = 12.2,  $p < .001$ , with a phi coefficient of .13, indicating a weak to moderate effect.)



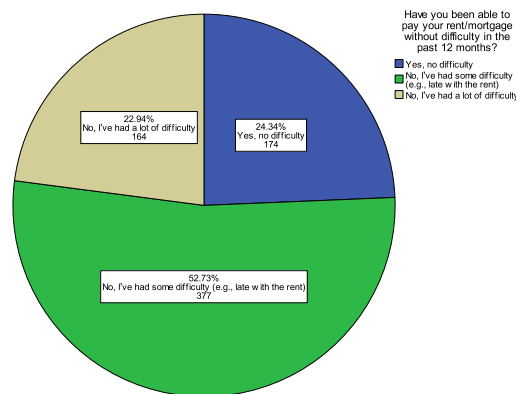
As a breakdown of the data in Table 2 suggests, of those who are currently unemployed but interested in finding work, the majority (254 of 354 or 71.8%) were worried about finding employment.

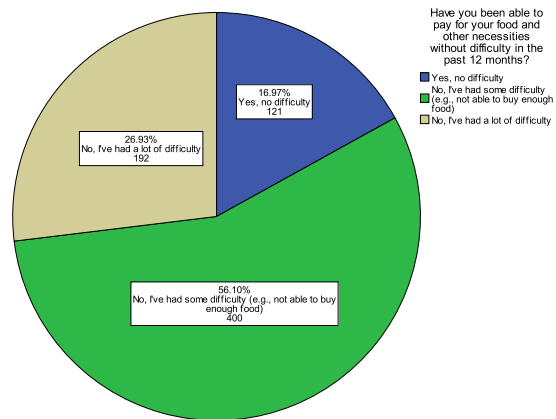
Table 2: If not employed, are you worried about finding employment?

Worried about finding employment?	
Yes	254 (50.1%)
No, I don't expect to have a hard time finding a job	100 (19.7%)
No, I won't be looking for a job in the next several months	153 (30.2%)
Total	507
No response	233 (31.5% of 740)

Respecting finances, the HART included a question, “Until now, have your finances/income been fairly stable?” Of the 715 individuals (96.6%) who answered, a little more than half responded “no” (53.4% or 382 of 715), while the other almost half responded “yes”: 46.6% (333 of 715).

Two supplementary questions were with respect to the respondents having any difficulty paying rent or buying groceries or other necessities. As can be seen in the following two charts, more than three-quarters of the respondents have had some difficulty with these two basic needs expenditures. Notably, about one-quarter of the respondents had considerable difficulty with both paying for their rents and for food and other necessities.

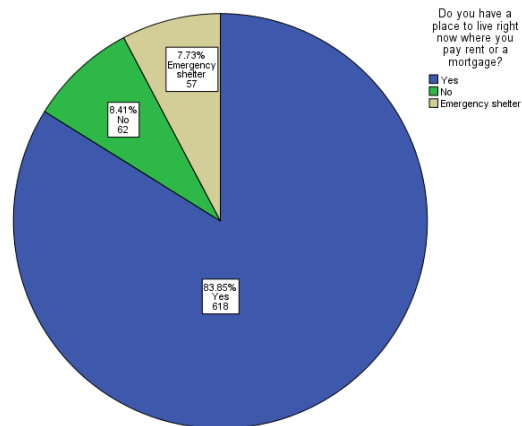




The respondents were also asked whether they had family or friends who could help with housing and/or finances for a while if needed. Of the 711 (96.1%) who answered, almost two-thirds (66.9% or 476 of 711) did **not** have such financial support, while 33.1% (235 of 711) did.

### Current Housing

The majority of the HART respondents were currently housed (83.9% or 618 of 737) defined as “having a place where you pay rent or a mortgage.” Another 8.4% (62 of 737) had no place to live where they pay rent or mortgage and a further 7.7% (57 of 737) were living in a violence-against-women emergency shelter, the YWCA of Calgary Sheriff King Home.



Given that the women in emergency shelter were chosen to represent a population particularly vulnerable to homelessness, it was of interest to determine the characteristics of the other group of individuals who did NOT have current housing.

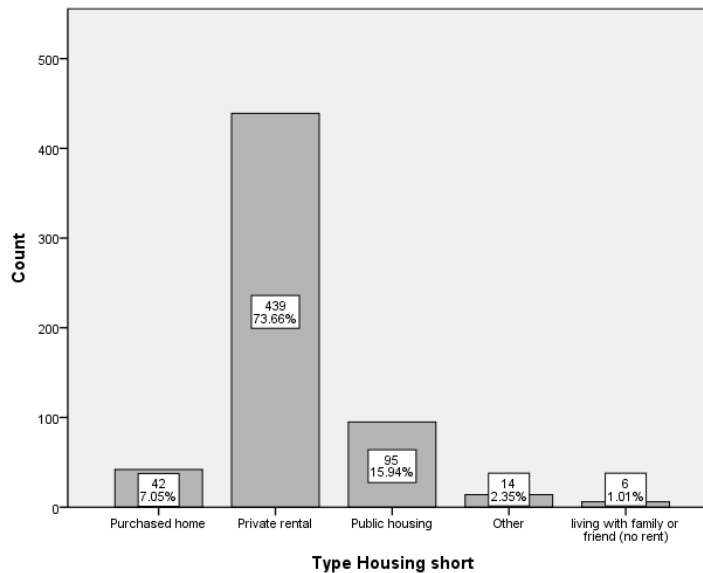
In that narrowed group, slightly more were women (55.4% or 31 of 56 individuals); more were of Aboriginal background (48% or 28 of 58) as compared to 41.4% Caucasian (24 of 58) and 10.3% (6 of 58) from visible minority groups; and the majority were from the 25 to 49 age group (75.4% or 43 of 57), 17.5% were youth from 15 to 24 years (10 of 57) and a smaller proportion (7% or 4 of 57) was from the 50 and over age group.

Table 3 includes a breakdown of whether the respondent was the owner or the tenant in their current accommodation.

Table 3: Owner or Tenant?

Owner or Tenant?	
Tenant	536 (88.4%)
Owner	48 (7.9%)
Neither Owner nor Tenant	22 (3.6%)
Total	606

The type of accommodation in which the respondent currently resided is displayed in the next chart (596 of 740 or 80.5% replied to this item). Almost three-quarters (439 of 596 or 73.7%) were renting, and about one-sixth (95 of 596 or 15.7%) lived in public housing.



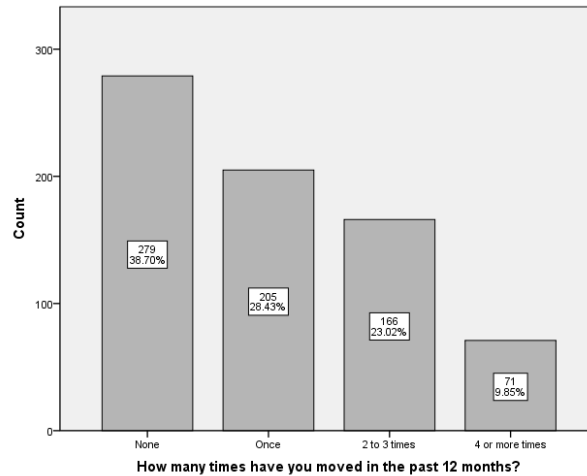
Those who had a current place to live (618) were asked four questions about the nature of their residences. There was only an option to endorse the characteristic, so declining to answer yes must be interpreted as that variable not being the case. As such, the most concerning characteristics for the HART respondents were affordability and stability with about two-thirds noting that this was **not** the case for their current residence. Only about 50% found their current residences to be of good quality and accessible.

Table 4: Quality of Current Housing (N = 618)

	Yes	No response
Good quality and healthy (i.e. no broken appliances)	331 (53.6%)	287 (46.4%)
Affordable (costs no more than 50% of your gross income)	220 (35.6%)	398 (64.4%)
Stable (you are not at risk of eviction)	213 (34.5%)	405 (65.5%)
Accessible	314 (50.8%)	304 (49.2%)

It was of interest to establish how many times the respondents had moved in the past year. Of the 720 individuals (97.3% of respondents) who answered that questions, only a little more than one third had not moved during the previous year. In response to a question about whether in the past 12 months the respondents had moved because of conflict with a roommate, family member,

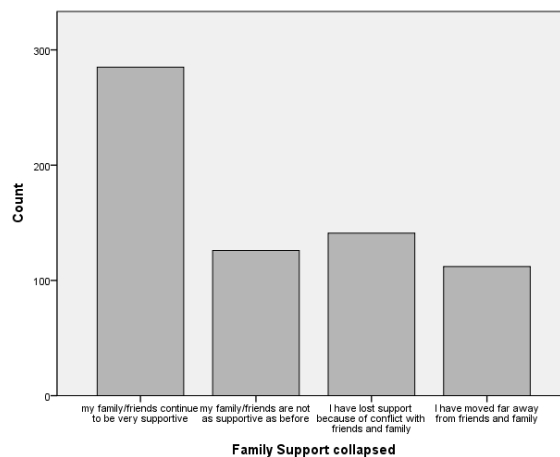
landlord or neighbour, of the 721 (of 740 or 97.4%) that answered the question, two-fifths (40.4% or 291 of 721) had moved for this reason.



A further question enquired about whether the respondents had ever stayed with friends or family for long periods of time (over a month). Answered by the majority of respondents (719 of 740 or 97.2%), 60.8% (437 of 719) had done so, while 39.2% (282 of 719) had not.

Another question was with respect to whether, in the past 12 months, the respondent's family and friends have continued to be supportive. A total of 321 (43.3%) individuals responded that this was the case. A further 207 individuals (28%) endorsed the item, "In the past 12 months, I have moved far away from family and friends." Finally, 46 individuals (6.2%) noted that in the past 12 months they had lost support because of the death of a close support person.

In an effort to create one variable that reflected social support in the past 12 months, the above items (except for death of a close support) were coded into one variable, "family support". When individuals endorsed more than one of these items, the item that reflected some conflict or loss of support was used, since even some difficulties could affect functioning. Further, even if one had moved away, if they endorsed that their family and friends were still supportive, this was coded.



## Health and Mental Health Issues

A series of questions in the HART were with respect to any medical, mental health or other problems such as gambling or addictions. Several of the above questions have potential housing issues associated with them as transitions from an institution back to the community can be accompanied by housing difficulties.

About one-third (29% or 203 of 701) had “ever been diagnosed with any serious physical health problems or disability.” Regarding admission to a hospital or other medical facility (for something other than a mental health or addiction issue) in the past five years, 209 individuals had been hospitalized. Of these, the majority (79.5% or 167 of 209) had “appropriate or stable, safe, adequate and affordable housing to move into upon your return to the community;” however, one-fifth (20.1% or 42 of 209) did not have appropriate housing after hospitalization.

A similar percentage (30% or 207 of 700) had “been diagnosed with any serious mental health problem such as depression, anxiety, Post Traumatic Stress Disorder, bi-polar disorder or psychosis/schizophrenia.” Of 69 individuals who, in the past five years, had been admitted to a “mental health facility (including a general hospital psychiatric unit),” one-third (33% or 26 of 69) had not had appropriate or stable, safe, adequate and affordable housing to move into upon their return to the community, whereas the other two thirds (66% or 46 of 69) did.

A question with respect to the sensitive issue of substance abuse was phrased as follows: “In the past five years, have you been concerned about or has any one close to you expressed concern about your use of alcohol, other substances or medical prescriptions?” Again, slightly over one-quarter of the respondents (28.2% or 196 of 696) indicated that this was the case. Of 25 people who had been admitted to an addictions facility in the past five years, about one third (32% or 8 of 25) did not have appropriate or stable, safe, adequate and affordable housing to move into upon their return to the community, in comparison to the other two-thirds (68% or 17 of 25).

A similarly phrased question with respect to gambling, “In the past five years, have you been concerned about or has any one close to you expressed concern about your gambling?” was endorsed by a much smaller number (3.1% or 21 of 670).

Another housing transition that may prove difficult for some is returning home after having been in a prison. Our community contacts suggested separating this question by whether the individuals had been in a provincial/youth facility or a federal correctional facility, because the post-prison support/housing facilities are somewhat different. The HART respondents were asked, “In the past 5 years, have you spent time in a provincial adult correctional or youth custody facility?” Of the 95 individuals who had been imprisoned in adult or youth correctional facilities, slightly less than two-thirds (62.1% or 59 of 95) had appropriate or stable, safe, adequate and affordable housing to move into upon their return to the community. The remaining 37.9% (36 of 95) of individuals did not have adequate housing.

A smaller number of respondents had spent time in a federal correctional facility in the past five years. Of these 25 respondents, slightly less than half (48% or 12 of 25) had appropriate or stable, safe, adequate and affordable housing to move into upon their return to the community, while a little more than half (52% or 13 of 25) were appropriately housed.

Looking at the two groups (provincial/youth or federal prison), 102 individuals (of 729 or 14%) had spent time in either (or in a few cases both) in the past 5 years.

## **Childhood Experiences**

Several questions regarding the climate of their families when they were children and current support from family and friends were included. Coming from a warm and caring family was seen as a protective factor in the literature on homelessness. In the current sample, 61.8% (436 of 705) answered “yes” to the question, “When you were a child or teenager, was your family warm and supportive?” In contrast, 37.3 (262 of 702) responded that they had been “abused or neglected as a child by a parent or caregiver.”

In answer to the question “When growing up, did one of your parents have addictions and/or mental health difficulties?” 45.3% (315 of 696) responded that this was the case for them.

A total of 186 individuals (of 708 or 26.3%) had been in foster care or another youth facility as a child or adolescent. Only 167 of these individuals answered a subsequent question regarding whether they had been assisted in finding appropriate or stable, safe, adequate and affordable housing afterwards. Of these, almost two-thirds (63.5% or 106 of 167) had **not** been assisted; whereas a little more than one-third of foster care graduates (36.5% or 61 of 167) had received assistance in finding appropriate accommodations.

About half of the HART respondents (49.9% or 369 of 740) chose not to answer a question about whether they had been “Homeless when younger than 18 years of age (by yourself, not with parents).” Of the 369 who did answer, 42% (156) had been homeless when under the age of 18.

## **Individuals Not Currently Securely Housed when Answering the HART**

It was of interest to assess the demographic characteristics of individuals who were not securely housed when they completed the HART survey. The following statistical comparisons in Table 5 and 6 considered the 57 women shelter residents in addition to the other non-housed respondents in comparison to those who were currently securely housed. As can be seen, women were more likely than men to be currently neither renting nor owning housing, although this is affected by the decision to include an emergency shelter for abused women, the only agency that specifically served individuals who were currently not securely housed. Youth aged 15 to 24 were more likely to be currently not securely housed than older adults and those of Aboriginal origins were more likely to be securely housed than Caucasians or visible minority groups, all to a statistically significant degree with effect sizes in the weak to moderate range.

Of the health and childhood variables (see Table 6), only concern regarding substances abuse in the past five years, having been in a provincial prison in the past five years and having been abused or neglected by parents or caregivers as a child were significantly related to whether an individual was securely or not securely housed when they completed the HART.

The statistically significant demographic and health and childhood variables (11 of 28) were then entered into a binomial regression analysis to identify which were most strongly associated with the secure nature of current housing. The adjusted odds ratio column indicates which variables remained significant when statistically adjusting for the others. A number of the variables are correlated, so only the strongest associations with being currently securely housed are included in the final iteration.

**Table 5: Core Demographics and Current Housing (Secure versus Not Secure)**

		Currently Securely Housed	Not Currently Securely Housed	Totals	Chi-square <sup>2</sup>	Adjusted odds ratio (95% CI) <sup>3</sup>
<b>Gender</b>	Male	228 (90.1%)	25 (9.9%)	253 (35.7%)	<b>10.3 (p = .001); Phi = .12</b>	<b>.427** (.25-.74)</b>
	Female	369 (80.9%)	87 (19.1%)	456 (64.3%)		
	Total	597	112	709		
<b>Age Group</b>	15 to 24	72 (73.2%)	25 (25.8%)	97 (13.5%)	<b>17.4 (p = .000); Cramer's V = .156</b>	
	25 to 49	420(83.7%)	82 (16.3%)	502 (70.1%)		
	50 and above	111 (94.9%)	6 (5.1%)	117 (16.3%)		
	Total	603	103	716		
<b>Racial Background</b>	Caucasian/White	299 (87.4%)	43 (12.6%)	342 (48.3%)	<b>10.4 (p = .005); Cramer's V = .12</b>	
	Visible Minority	126 (86.9%)	19 (13.1%)	145 (20.5%)		
	Aboriginal	171 (77.7%)	49 (22.3%)	220 (31.1%)		
	Total	596	111	707		
Are you a recent immigrant (moved to Canada from another country in the past 5 years)?	Yes	60 (87%)	9 (13%)	69 (9.8%)	0.5 (p = .48) n.s.	
	No	532 (83.6%)	104 (16.4%)	636 (90.2%)		
	Total	592	113	705		
If a recent immigrant, did you come as a refugee?	Yes	28 (93.3%)	2 (6.7%)	30 (5.3%)	2.2 (p = .139) n.s.	
	No	446 (83.1%)	91 (16.9%)	537 (94.7%)		
	Total	474	93	567		
Do you currently have children (under the age of 18) living with you?	Yes	330 (83.1%)	67 (16.9%)	397 (59.1%)	0.88 (p = .34) n.s.	
	No	236 (85.8%)	39 (14.2%)	275 (40.9%)		
	Total	566	106	672		
<b>Have you ever been homeless</b>	Yes	284 (77.6%)	82 (22.4%)	366 (50.8%)	<b>20.9 (p &lt; .000) Phi = .17</b>	<b>2.8*** (1.6-4.8)</b>
	No	320 (90.1%)	35 (9.9%)	355 (49.2%)		
	Total	604	117	721		
Homeless when younger than 18 years of age (by yourself, not with parents)?	Yes	120 (76.9%)	36 (23.1%)	156 (21.4%)	6.3 (p = .01) Phi = .09	
	No	491 (85.7%)	82 (14.3%)	573 (78.6%)		
	Total	611	118	729		
<b>How many times have you moved in the past 12 months?</b>	None	262 (94.2%)	16 (5.8%)	278 (38.7%)	<b>57.8 (p &lt; .000) Cramer's V = .284</b>	<b>3.1*** (1.5-6.3)</b>
	Once	170 (82.9%)	35 (17.1%)	205 (28.5%)		
	2 to 3 times	130 (78.8%)	35 (21.2%)	165 (22.9%)		

<sup>2</sup> Contingency corrected for all 2X2 tables

<sup>3</sup> 95% confidence interval for adjusted odds ratio



		Currently Securely Housed	Not Currently Securely Housed	Totals	Chi-square <sup>2</sup>	Adjusted odds ratio (95% CI) <sup>3</sup>
	4 or more	42 (59.2%)	29 (40.8%)	71 (9.9%)		
	Total	604	115	719		
<b>In the past 12 months did you have to move because of conflict with a roommate, family member, landlord or neighbour?</b>	Yes	209 (72.1%)	81 (27.9%)	290 (40.3%)	<b>48.7 (p &lt; .000)</b> <b>Phi = .26</b>	<b>2.2)***</b> <b>(1.3-3.8)</b>
	No	394 (91.6%)	36 (8.4%)	430 (59.7%)		
	Total	603	117	720		
Have you ever had to stay with friends and family for long time periods (over a month)?	Yes	349 (82.7%)	73 (17.3%)	422 (62.2%)	2.34 (p = .13 (n.s.))	
	No	223 (87.1%)	33 (12.9%)	256 (37.8%)		
	Total	572	106	678		
Did you complete highschool?	Yes	317 (85.2%)	55 (14.8%)	372 (52.8%)	0.4 (p = .57) n.s.	
	No	278 (83.5%)	55 (16.5%)	333 (47.2%)		
	Total	595	110	705		
Are you currently or were you recently employed (in the last 30 days)?	Yes	174 (83.3%)	35 (16.7%)	209 (29.5%)	0.10 (p = .76) n.s.	
	No	421 (84.2%)	79 (15.8%)	500 (70.5%)		
	Total	595	114	709		
<b>Until now, have your finances/income been fairly stable?</b>	Yes	295 (88.9%)	37 (11.1%)	332 (46.6%)	<b>9.7 (p = .001)</b> <b>Phi = .12</b>	<b>.54* (.33-.89)</b>
	No	305 (80.1%)	76 (19.9%)	381 (53.4%)		
	Total	600	113	713		
Have you been able to pay your rent/mortgage without difficulty in the past 12 months?	Yes	151 (87.3%)	22 (12.7%)	173 (24.3%)	3.8 (p = .151) n.s.	
	Some difficulty (late rent)	320 (85.1%)	56 (14.9%)	376 (52.7%)		
	A lot of difficulty	131 (79.9%)	33 (20.1%)	164 (23%)		
	Total	602	111	713		
Have you been able to pay for your food and other necessities without difficulty in the past 12 months?	Yes	97 (80.8%)	23 (19.2%)	120 (17%)	1.02 (p = .599) n.s.	
	Some difficulty (e.g., not able to buy enough food)	338 (84.7%)	61 (15.3%)	399 (56%)		
	A lot of difficulty	161 (83.9%)	31 (16.2%)	192 (27%)		
	Total	596	115	711		
<b>In the past 12 months, has your family been supportive</b>	Family/friends very supportive	245 (86.6%)	38 (13.4%)	283 (42.8%)	<b>10.1 (p = .017)</b> <b>Cramer's V = .127</b>	
	Family/friends not as supportive as before	106 (84.8%)	19 (15.2%)	125 (18.9%)		
	Lost support: Conflict with friends and family	105 (74.5%)	36 (25.5%)	141 (21.3%)		
	Moved far away from friends/ family	93 (83%)	19 (17%)	112 (16.9%)		
	Total	549	112	661		

**Table 6: Health and History Variables Associated with Current Secure Housing**

Variable		Securely Housed	Not Securely Housed	Totals	Chi-square	Adjusted odds ratio <sup>4</sup>
Have you ever been diagnosed with any serious physical health problems or disability?	Yes	181 (87.9%)	25 (12.1%)	206 (29.1%)	2.96 (p = .085) n.s.	
	No	415 (82.7%)	87 (17.3%)	502 (70.9%)		
	Totals	596	112	708		
In the past 5 years, have you been admitted to a hospital or other medical facility (for something other than a mental health or addiction issue)?	Yes	177 (8.3%)	38 (17.7%)	215 (30.3%)	0.58 (p = .45) n.s.	
	No	418 (84.6%)	76 (15.4%)	494 (69.7%)		
	Total	595	114	709		
Have you been diagnosed with any serious mental health problem such as depression, anxiety, Post Traumatic Stress Disorder, bipolar disorder or psychosis/schizophrenia?	Yes	175 (84.1%)	33 (15.9%)	208 (29.5%)	0.005 (p = .95) n.s.	
	No	420 (84.3%)	78 (15.7%)	498 (70.5%)		
	Totals	595	111	706		
In the past 5 years, have you been admitted to a mental health facility (including a general hospital psychiatric unit)?	Yes	60 (83.3%)	12 (16.7%)	72 (10.2%)	0.004 (p = .95) n.s.	
	No	531 (83.6%)	104 (16.4%)	635 (89.8%)		
	Total	591	116	707		
<b>In the past five years, have you been concerned about or has any one close to you expressed concern about your use of alcohol, other substances or medical prescriptions?</b>	Yes	155 (79.1%)	41 (20.9%)	196 (27.9%)	<b>5.5 (p = .014)</b> <b>Phi = .093</b>	
	No	439 (86.6%)	68 (13.4%)	507 (72.1%)		
	Totals	594	105	703		
In the past five years, have you been concerned about or has any one close to you expressed concern about your gambling?	Yes	20 (83.3%)	4 (16.7%)	24 (3.4%)	0.033 (p = .86) n.s.	
	No	470 (84.7%)	103 (15.3%)	673 (95.6%)		
	Totals	590	107	697		
<b>In the past 5 years, have you spent time in a provincial adult correctional or youth custody facility?</b>	<b>Yes</b>	<b>71 (73.2%)</b>	<b>26 (26.8%)</b>	<b>97 (13.6%)</b>	<b>9.4 (p = .002)</b> <b>Phi = .12</b>	
	No	529 (86%)	86 (14%)	615 (86.4%)		
	Total	600	112	712		
In the past 5 years, have you spent time in a federal correctional facility?	Yes	23 (82.1%)	5 (17.9%)	28 (4%)	0.000 (p = 1.00) n.s.	
	No	563 (83.9%)	108 (16.1%)	671 (96%)		
	Total	586	113	699		
<b>In the past 5 years, have you spent time in a provincial or federal adult correctional or youth custody facility?</b>					<b>8.8** (p = .002)</b> <b>Phi = .116</b>	
	Yes	75 (73.5%)	27 (26.5%)	102		
	No	535 (87.5%)	89 (14.3%)	624		
	Total	610	116	726		
	Yes	150 (80.6%)	36 (19.4)	186 (26.3%)		

<sup>4</sup> 95% confidence interval for adjusted odds ratio

Variable		Securely Housed	Not Securely Housed	Totals	Chi-square	Adjusted odds ratio <sup>4</sup>
When you were a child or teenager, were you ever in foster care or another youth facility?	No	447 (86%)	73 (14%)	520 (73.7%)	2.57 (p = .085) n.s.	
	Totals	597	109	706		
When you were a child or teenager, was your family warm and supportive?	Yes	375 (86.4%)	59 (13.6%)	434 (61.7%)	2.8 (p = .095) n.s.	
	No	219 (81.4%)	50 (80.6%)	269 (38.3%)		
	Totals	594	109	703		
<b>Were you abused or neglected as a child by a parent or caregiver?</b>	<b>Yes</b>	<b>208 (79.4%)</b>	<b>54 (20.6%)</b>	<b>262 (37.4%)</b>	<b>8.0 (p = .001)</b> <b>Phi = .111</b>	
	No	384 (87.7%)	54 (12.3%)	438 (62.6%)		
	Totals	592	108	700		
When growing up, did one of your parents have addictions and/or mental health difficulties?	Yes	264 (83.8%)	51 (16.2%)	315 (45.4%)	0.647 (p = .41) n.s.	
	No	327 (83.6%)	52 (91.3%)	379 (54.6%)		
	Totals	591	403	694		

Of the total number of cases (740), 595 were included in the regression analysis. The strongest model included five variables that correctly classified 84.3% of membership in the category of securely housed or not securely housed. These significant variables (predictors) were:

- Having ever been homeless;
- Not having moved in the past year (Protective factor);
- Moving in the past year because of conflict with a roommate, family member, landlord or neighbour;
- Gender (noting the previous anomaly in the data collection); and
- Finances being relatively stable (Protective factor)

To repeat the concern about gender, given the fact that about half the sample of the not securely housed included women currently staying in a shelter for domestic violence, the only agency specific to homelessness, the high proportion of women in the not securely housed sample needs to be re-considered with a different population.

### **Ever Homeless by Core Demographic Characteristics**

As mentioned previously, 50.8% of the 740 Calgarians who answered the HART at the community resources centres and other agencies (367 of 722) self-reported having been homeless at some time, defined as “without a permanent place to live at some point during your life.” Table 7 presents a breakdown of the core demographic variables and whether the HART respondent had ever been homeless. Of interest, neither gender nor age group was predictive of an individual being without a permanent place to live at some point in their lives. Being a recent immigrant (in the last five years), being from a visible minority group, having completed highschool, and having a current place to live where one pays rent or a mortgage were among the protective factors in this sample.

It was also of interest to examine the responses to the health and childhood variables question in light of whether the individual had ever been homeless (See Table 8).

The statistically significant demographic and health and childhood variables (24 of 28) were then entered into a binomial regression analysis to identify which were most strongly associated with whether the individuals had ever been homeless or not. As before, the adjusted odds ratio column indicates which variables remained significant when statistically adjusting for the others. A number of the variables are correlated, so only the strongest associations with being homeless are included in the final iteration.

Of the total sample of 740, 546 cases were included in the binary regression analysis. The strongest model included nine variables that correctly classified 74.7% of membership in the categories of ever homeless or never homeless (self-defined). These significant variables (predictors) were (in order of significance):

- Having stayed with friends and family for long time periods (over a month);
- Having been abused as a child by parents or caregivers;
- In the past 5 years, having spent time in a provincial or federal adult correctional or youth custody facility;
- Currently have a place to live where I pay rent or a mortgage (protective factor);
- Foster care as a child

**Table 7: Core Demographic Characteristics and Ever Homeless**

		Homeless at some point	Never Homeless	Totals	Chi-square <sup>5</sup>	Adjusted odds ratio <sup>6</sup>
Gender	Male	130 (51.8%)	121 (48.2%)	251 (35.8%)	0.041 (p = .84) n.s.	
	Female	230 (51%)	221 (49%)	451 (64.2%)		
	Total	360 (51.3%)	342 (49%)	702		
Age Group	15 to 24	58 (59.8%)	39 (40.2%)	97 (13.7%)	3.76 (p = .15) n.s.	
	25 to 49	249 (50.1%)	248 (49.9%)	497 (70%)		
	50 and above	55 (47.4%)	61 (52.6%)	116 (17.3%)		
	Total	362 (51%)	348 (49%)	710		
<b>Racial Background</b>	Caucasian/White	178 (52.8%)	159 (47.2%)	337 (48.1%)	<b>50.5 (p = .000);</b> <b>Cramer's V = .311</b>	
	Visible Minority	40 (27.8%)	104 (72.2%)	144 (20.6%)		
	Aboriginal	144 (65.8%)	75 (34.2%)	219 (31.3%)		
	Total	362	338	700		
<b>Are you a recent immigrant (moved to Canada from another country in the past 5 years)?</b>	Yes	14 (20.6%)	54 (79.4%)	68	<b>27.9 (p &lt; .000)</b> <b>Phi = -.20</b>	<b>2.64 (p = .01) 1.2 - 5.8</b>
	No	342 (54.3%)	288 (45.7%)	630		
	Total	356	342	698		
If a recent immigrant, did you come as a refugee?	Yes	8 (26.7%)	22 (73.3%)	30	7.6 (p = .006) n.s.	
	No	279 (52.5%)	252 (47.5%)	531		
	Total	287	274	561		
Children under 18 living with you?	Yes	199 (47.5%)	220 (52.5%)	419	6.2 (p < .013) n.s.	
	No	161 (57.1%)	121 (42.9%)	282		
	Totals	360	341	701		
<b>Do you have a place to live right now where you pay rent or a mortgage?</b>	Yes	284 (47%)	320 (53%)	604	<b>19.9 (p &lt; .000)</b> <b>Phi = .17</b>	<b>2.6* 1.4-4.8</b>
	No	82 (70.1%)	35 (29.9%)	117		
	Totals	366	355	721		
<b>How many times have you moved in the past 12 months?</b>	None	109 (39.6%)	166 (60.4%)	275 (38.6%)	<b>68.7 (p &lt; .000)</b> <b>Cramer's V = .311</b>	<b>2.9** (1.3-6.8)</b>
	Once	84 (41.4%)	119 (58.6%)	203 (28.5%)		
	2 to 3 times	107 (65.2%)	57 (34.8%)	164 (23%)		
	4 or more	60 (85.7%)	10 (14.3%)	70 (9.8%)		
	Total	360	352	712		
	Yes	190 (66.2%)	97 (33.8%)	287 (40.2%)	<b>44.3 (p &lt; .000)</b>	

<sup>5</sup> Contingency corrected for all 2X2 tables

<sup>6</sup> 95% confidence interval for the adjusted odds ratio

		Homeless at some point	Never Homeless	Totals	Chi-square <sup>5</sup>	Adjusted odds ratio <sup>6</sup>
<b>In the past 12 months did you have to move because of conflict with a roommate, family member, landlord or neighbour?</b>	No	173 (40.5%)	254 (59.5%)	427 (59.2%)	<b>Phi = .252</b>	
	Total	363	351	714		
<b>Have you been able to pay for your food and other necessities without difficulty in the past 12 months?</b>	Yes	36 (30%)	84 (70%)	120 (17.0%)	<b>32.7 (p &lt; .000)</b> <b>Cramer's V = .215</b>	
	Some difficulty (not enough for food)	207 (51.9%)	192 (48.1%)	399 (56.4%)		
	A lot of difficulty	119 (63.3%)	69 (36.7%)	188 (26.6%)		
	Total	362	345	707		
<b>Did you complete highschool?</b>	Yes	153 (41.58%)	215 (58.5%)	369 (52.9%)	<b>27.7 (p = .000);</b> <b>Phi = .202</b>	
	No	203 (61.7%)	126 (38.3%)	329 (47.1%)		
	Total	356	342	698		
<b>Are you currently or were you recently employed (in the last 30 days)?</b>	Yes	93 (44.3%)	117 (55.7%)	210 (29.9%)	<b>5.47 (p = .015)</b> <b>Phi = .19</b>	
	No	267 (54.3%)	225 (45.7%)	492 (70.1%)		
	Total	360	342	702		
<b>Do you have a place to live right now where you pay rent or a mortgage?</b>	Yes	284 (47%)	30 (53%)	604 (83.7%)	<b>25.707 (p &lt; .000)</b> <b>Cramer's V = .189</b>	
	No	48 (80%)	12 (20%)	60 (8.3%)		
	Emergency shelter	34 (59.6%)	23 (40.4%)	57 (7.9%)		
	Total	366	355	721		
<b>Have you been able to pay your rent/mortgage without difficulty in the past 12 months?</b>	Yes	68 (39.8%)	103 (60%)	171 (34.2%)	<b>14.5 (p = .001)</b> <b>Cramer's V = .143</b>	
	I've had some difficulty (i.e. late rent)	196 (52.5%)	177 (47.5%)	373 (52.9%)		
	I've had a lot of difficulty	97 (60.2%)	69 (34.8%)	161 (22.8%)		
	Total	361	344	705		
<b>Have you ever had to stay with friends and family for long time periods (over a month)?</b>	Yes	282 (65.1%)	151 (34.9%)	433	<b>88.1 (p &lt; .000)</b> <b>Cramer's V = .351</b>	<b>.32***</b> <b>(.21-.48)</b>
	No	82 (29.2%)	199 (70.8%)	281		
	Total	364	340	714		
<b>Until now, have your finances/income been fairly stable?</b>	Yes	152 (46.1%)	178 (53.9%)	330 (46.7%)	<b>6.7 (p = .01)</b> <b>Phi = .10</b>	
	No	211 (56.1%)	165 (43.9%)	376 (53.3%)		
	Total	363	343	706		
<b>In the past 12 months, has your family been supportive</b>	Family/friends very supportive	107 (37.9%)	175 (62.1%)	282	<b>59.1 (p , .000)</b> <b>Cramer's V = .301</b>	<b>2.1** (1.2-3.4)</b>
	Family/friends not as supportive as before	71 (57.3%)	53 (42.7%)	124		
	Conflict with friends & family	108 (77.1%)	32 (22.9%)	140		
	Moved far away from friends/ family	57 (52.3%)	52 (47.7%)	109		
	Total	343	312	655		

**Table 8: Health and History Variables and Ever Homeless**

Variable		Ever Homeless	Never Homeless	Totals	Chi-square	Adjusted odds ratio <sup>7</sup>
<b>Have you ever been diagnosed with any serious physical health problems or disability?</b>	Yes	120 (59.1%)	83 (40.9%)	203 (29%)	<b>6.9 (p = .007)</b>	
	No	238 (47.8%)	260 (5.2%)	498 (71%)	<b>Phi = .103</b>	
	Totals	358	343	701		
<b>In the past 5 years, have you been admitted to a hospital or other medical facility (for something other than a mental health or addiction issue)?</b>	Yes	141 (65.9%)	73 (34.1%)	214 (30.4%)	<b>25.7 (p , .000)</b>	<b>.49** (.31-.77)</b>
	No	219 (44.8%)	280 (55%)	489 (69.6%)	<b>Phi = .194</b>	
	Total	360	343	703		
<b>Have you been diagnosed with any serious mental health problem such as depression, anxiety, Post Traumatic Stress Disorder, bi-polar disorder or psychosis/schizophrenia?</b>	Yes	134 (64.7%)	73 (35.3%)	207 (30%)	<b>21.8 (p &lt; .000)</b>	
	No	222 (45%)	271 (55%)	493 (70%)	<b>Phi = .18</b>	
	Totals	356	344	700		
<b>In the past 5 years, have you been admitted to a mental health facility (including a general hospital psychiatric unit)?</b>	Yes	52 (72.2%)	20 (27.8%)	72 (10.2%)	<b>13.6 (p , .000)</b>	
	No	306 (48.5%)	325 (51.5%)	631 (89.8%)	<b>Phi = .144</b>	
	Total	358	345	703		
<b>In the past five years, have you been concerned about or has any one close to you expressed concern about your use of alcohol, other substances or medical prescriptions?</b>	Yes	143 (73%)	53 (27%)	196 (28.2%)	<b>51.4 (p &lt; .000)</b>	
	No	212 (42.4%)	288 (67.6%)	500 (71.8%)	<b>Phi = .275</b>	
	Totals	355	341	696		
<b>In the past five years, have you been concerned about or has any one close to you expressed concern about your gambling?</b>	Yes	19 (79.2%)	5 (20.8%)	24 (3.5%)	<b>6.66 (p = .005)</b>	
	No	333 (50%)	333 (50%)	666 (96.5%)	<b>Phi = .107</b>	
	Totals	352	338	690		
<b>In the past 5 years, have you spent time in a provincial or federal adult correctional or youth custody facility?</b>	Yes	83 (83.2%)	18 (17.8%)	101	<b>43.9 (p , .000)</b>	<b>3.2*** (1.6-6.3)</b>
	No	284 (46%)	333 (54%)	617	<b>Phi = .25</b>	
	Total	367	351	7184		
<b>When you were a child or teenager, were you ever in foster care or another youth facility?</b>	Yes	180 (70%)	77 (30%)	257 (37.1%)	<b>56.7 (p &lt; .000)</b>	<b>.51** (.31-.83)</b>
	No	175 (40.1%)	261 (59.9%)	436 (6.9%)	<b>Phi = .29</b>	
	Totals	355	338	693		
<b>When you were a child or teenager, was your family warm and supportive?</b>	Yes	172 (40%)	58 (60%)	430 (61.8%)	<b>53.4 (p. &lt; .000)</b>	
	No	183 (68.8%)	83 (31%)	266 (38.2%)	<b>Phi = -.28</b>	
	Totals	355	341	696		
<b>Were you abused or neglected as a child by a parent or caregiver?</b>	Yes	180 (70%)	77 (30%)	257 (37%)	<b>56.7 (p. &lt; .000)</b>	<b>.43*** (.27-.67)</b>
	No	175 (40.1%)	261 (59.9%)	436 (63%)	<b>Phi = .29</b>	
	Totals	355	338	693		
<b>When growing up, did one of your parents have addictions and/or mental health difficulties?</b>	Yes	203 (65.5%)	107 (34.5%)	310 (45.2%)	<b>43.5 (p &lt; .000)</b>	
	No	150 (39.5%)	226 (60.1%)	376 (54.8%)	<b>Phi = .255</b>	
	Totals	353	333	686		

<sup>7</sup> 95 percent confidence interval

- In the past 12 months, I have lost support because of conflict with friends and family
- In the past 5 years, being admitted to a hospital or other medical facility (for something other than a mental health or addiction issue);
- Have moved four or more times in the past year
- Immigrating to Canada in past 5 years (protective factor)

### Responses to the ETHOS Scale

As noted previously, some form of homelessness had been experienced by 50.8% of the 740 Calgarians who answered the HART (367 of 722). Homelessness was defined as “without a permanent place to live at some point during your life,” and this includes homelessness categories beyond what is typically visible, as in living rough or staying in homeless shelters.

The table below portrays the experiences of the respondents according to the FEANTSA typology of homelessness and housing entitled the European Typology of Homelessness and Housing Exclusion (ETHOS). The ETHOS scale was used to assess the characteristics of housing or strategies to address housing difficulties, with 688 (92.9%) completing the 26-item measure. Note that given the time period covered (10 years) an individual can endorse a number of items, highlighting the transitional nature of housing for many people.

It was of interest to look at these issues by comparing those who reported that they had been homeless at some point in their lives compared to those who had not been homeless. Individuals who only endorsed that they had lived in “good” or “adequate” housing in the past ten years were considered as “not homeless in the past ten years.” As can be seen in Table 5, notably, about the same proportion of those who had been homeless at some point in the past ten years had lived in good and adequate housing at some point over the past ten years as those who had never been homeless, confirming the transitional nature of homelessness.

**Table 9: ETHOS Responses**

ETHOS Item	Not Homeless in past 10 years	Homeless at some point in past ten years	Total endorsed (% of 688)
<b>Good/Adequate housing items</b>			
Lived in a good house/apartment in the past 10 years	237 (49.6%)	237 (49.6%)	478 (69.5%)
Lived in an adequate house/apartment in the past 10 years	175 (45.7%)	208 (54.3%)	383 (55.7%)
<b>Roofless</b>			
Lived in the streets or public spaces, without a shelter	2 (2.1%)	92 (97.9%)	93 (13.5%)
Lived in an overnight shelter, with no usual place of residence	5 (4.9%)	97 (95.1%)	102 (14.8%)
<b>Houseless</b>			
Hostel for individuals who are homeless	4 (7.3%)	51 (92.7%)	55 (7.9%)
Temporary accommodation (less than one year)	20 (15.4%)	110 (84.6%)	130 (18.8%)
Women’s shelter accommodation (due to domestic violence; less than one year)	25 (21.7%)	90 (78.3%)	115 (16.7%)
Migrant worker’s accommodation	0	1 (100%)	1 (0.1%)
Temporary accommodation/reception centres (due to immigrant status)	3 (30%)	7 (70%)	10 (1.5%)
Correctional facility (no housing available prior to release)	5 (11.9%)	37 (88.1%)	42 (6.1%)
Medical institution (stayed longer than needed due to lack of housing)	2 (14.3%)	12 (85.7%)	14 (2.3%)
Children’s institution/home (no housing identified, e.g. by 18th birthday)	1 (6.7%)	14 (93.3%)	15 (2.2%)
Residential care for older homeless adults	1 (16.7%)	5 (83.3%)	6 (0.9%)



ETHOS Item	Not Homeless in past 10 years	Homeless at some point in past ten years	Total endorsed (% of 688)
Transitional supported accommodation	5 (11.9%)	37 (88.1%)	42 (6.1%)
Supported accommodation for formerly homeless people (more than one year)	3 (5.9%)	48 (94.1%)	51 (7.4%)
<b>Insecure Housing</b>			
Temporarily lived with family/friends	126 (34.9%)	235 (65.1%)	361 (52.3%)
Lived in a dwelling with no legal tenancy/sub-tenancy	13 (18.6%)	57 (81.4%)	70 (10.2%)
Occupied land with no legal rights	5 (17.2%)	24 (82.8%)	29 (4.2%)
Lived under threat of eviction (rental) (legal orders for eviction)	80 (28%)	206 (72%)	286 (41.8%)
Re-possession orders (owned) (mortgagor has legal order to re-possess)	14 (37.8%)	23 (62.2%)	37 (5.4%)
Lived under threat of violence (including domestic violence)	54 (24.9%)	163 (75.1%)	217 (31.5%)
<b>Inadequate</b>			
Lived in mobile homes (not intended as usual residence) in the past 10 years	10 (16.7%)	50 (83.3%)	60 (8.7%)
Lived in non-conventional building (makeshift shelter, shack or shanty) in the past 10 years	1 (2.4%)	40 (97.6%)	41 (5.9%)
Lived in temporary structure (semi-permanent structure hut or cabin) in the past 10 years	6 (13%)	40 (87%)	46 (6.6%)
Lived in occupied dwellings unfit for habitation (defined as unfit for habitation by national legislation or building regulations)	18 (22%)	64 (78%)	82 (11.9%)
Lived in extreme overcrowding (defined as exceeding national density standard for floor-space or useable rooms)standards in the past 10 years	34 (25.4%)	100 (74.6%)	134 (19.5%)

### **Rooflessness vs. At Risk vs. Never Homeless in the HART Pilot**

To assess the HART items vis à vis the ETHOS questionnaire, a new variable was created to assess the comparison of never homeless, at risk and roofless. “Never homeless” was created from those who only endorsed having had “good” or “adequate” accommodation in the last ten years but also, because almost two-thirds of the HART respondents had at some time stayed with friends and family, those who endorsed this item (N = 231 or 33.6%). The group “roofless” was created based on responses to the last two ETHOS questions: 134 or 19.5% of the HART respondents had lived roofless or in an overnight shelter for homelessness at some point in the past 10 years. “At risk” was determined by respondents endorsing any number of the other 23 ETHOS items related to insecure or inadequate housing (323 or 46.9%).

As with the comparison of “ever” to “never” homeless, the majority of the HART items (23 of 27) significantly differentiated between being ever roofless, at risk of rooflessness and never roofless. While most significant items constituted risk factors (i.e., health, mental health, childhood abuse and difficulty with finances), having children under 18 living with you, being from a visible minority and being a recent immigrant (last five years) are among the protective factors for ever having lived roofless in this Calgary sample.

**Table 10: Core Demographics and ETHOS Never Homeless, At Risk and Ever Roofless**

		Never Roofless	At risk	Roofless	Total s	Chi-square	Adjusted odds ratio <sup>8</sup> (CI) <sup>9</sup>
<b>Gender</b>	Male	91 (36.8%)	94 (38.4%)*	62 (25.1%)	247	<b>13.5 (p &lt; .001)</b> <b>Cramer's V = .14</b>	
	Female	136 (31.6%)	223 (51.9%)	71 (16.5%)	430		
	Total	227	317	113	677		
Age Group	15 to 24	27 (29%)	44 (47.3%)	22 (23.7%)	93	1.65 (p = .80) n.s.	
	25 to 49	162 (33.8%)	227 (47.3%)	91 (19%)	480		
	50 and above	39 (35.5%)	50 (45.5%)	21 (19.1%)	110		
	Total	228	321	134	683		
<b>Racial Background</b>	Caucasian/White	107 (32.8%)	151 (46.3%)	68 (20.9%)	326	<b>39.6 (p &lt; .000)</b> <b>Cramer's V = .17</b>	
	Visible Minority	72 (52.8%)*	55 (39.6%)	12 (8.6%)*	139		
	Aboriginal	45 (21.2%)*	113 (53.3%)	54 (25.5%)	212		
	Total	224	319	134	677		
<b>Are you a recent immigrant (moved to Canada from another country in the past 5 years)?</b>	Yes	39*** (60.9%)	23 (35.9%)	2** (3.1%)	64	<b>27.8 (p &lt; .000)</b> <b>Cramer's V = .20</b>	
	No	186 (30.4%)	295 (48.3%)	130 (21.3%)	611		
	Total	225	318	132	675		
If you are a recent immigrant, did you come as a refugee?	Yes	16 (55.2%)	11 (37.9%)	2 (6.9%)	29	5.7 (p = .06) n.s.	
	No	180 (35%)	234 (45.5%)	100 (19.5%)	514		
	Total	196	245	102	543		
<b>Do you currently have children (under the age of 18) living with you?</b>	Yes	137 (34.4%)	206 (51.8%)	55 (13.8%)*	398	<b>23.9 (p &lt; .000)</b> <b>Cramer's V = .188</b>	<b>.44***</b> <b>(.28-.71)</b>
	No	88 (32%)	108 (39.2%)	79 (28.7%)*	275		
	Total	225	314	134	373		
<b>How many times have you moved in the past 12 months?</b>	none	118 (44.7%)*	111(42%)	35 (13.3%)*	264	<b>44.4 (p &lt; .000)</b> <b>Cramer's V = .181</b>	
	once	64 (33.7%)	97 (51.1%)	29 (15.3%)	190		
	2 to 3 times	37 (23.4%)*	77 (48.7%)	44 (27.8%)*	158		
	4 or more	11 (16.7%)*	31 (47%)	24 (36.4%)*	66		
	Total	230	316	132	678		
<b>In the past 12 months did you have to move because of conflict with a roommate, family member, landlord or neighbour?</b>	yes	54 (19.6%)*	149 (54%)	73 (26.4%)*	276	<b>43.1 (p &lt; .000)</b> <b>Cramer's V = .252</b>	
	no	174 (43.2%)*	168 (42.7%)	61 (15.1%)*	403		

<sup>8</sup> For binary logistic regression comparing ever roofless to never roofless.

<sup>9</sup> 95% confidence intervals

		Never Roofless	At risk	Roofless	Total s	Chi-square	Adjusted odds ratio <sup>8</sup> (CI) <sup>9</sup>
	total	228	317	134	679		
<b>Have you been able to pay for your food and other necessities without difficulty in the past 12 months?</b>	Yes	57 (51.8%)*	43 (39.1%)	10 (9.1%)*	110	<b>46.6 (p &lt; .000)</b> <b>Cramer's V = .186</b>	
	I've had some difficulty (e.g., not able to buy enough food)	138 (36.1%)	175 (45.8%)	69 (19.1%)	383		
	I've had a lot of difficulty	31 (16.8%)*	98 (53.3%)	55 (29.9%)*	184		
	Total	226	316	134	676		
<b>Did you complete highschool?</b>	Yes	146 (40.9%)*	159 (44.5%)	52 (14.6%)*	357	<b>22.7 (p &lt; .000)</b> <b>Cramer's V = .183</b>	
	No	80 (24.9%)*	163 (50.8%)	78 (24.3%)*	321		
	Total	226	352	130	678		
Are you currently or were you recently employed (in the last 30 days)?	Yes	74 (36.5%)	93 (45.8%)	36 (17.7%)	203	1.38 (p = .50) n.s.	
	No	151 (32.2%)	222 (47.3%)	96 (20.5%)	469		
	Total	225	315	132	672		
<b>Do you have a place to live right now where you pay rent or a mortgage?</b>	yes	211 (36.5%)	262 (45.3%)	106 (18.3%)	579	<b>27.7 (p &lt; .000)</b> <b>Cramer's V = .142</b>	
	no	15 (26.8%)	22 (39.3%)	19 (33.9%)*	56		
	Emergency shelter	5 (9.6%)*	39 (75%)*	8 (15.4%)	52		
	total	231	323	133	687		
<b>Have you ever had to stay with friends and family for long time periods (over a month)?</b>	Yes	111 (26.2%)*	212 (50.1%)	100 (23.6%)	423	<b>29.2 (p &lt; .000)</b> <b>Cramer's V = .201</b>	
	No	116 (45.3%)*	107 (41.8%)	33 (12.9%)*	256		
	Total	227	319	133	679		
<b>Have you been able to pay your rent/mortgage without difficulty in the past 12 months?</b>	Yes	79 (48.5%)*	61 (37.4%)	23 (14.1%)	163	<b>32.6 (p &lt; .000)</b> <b>Cramer's V = .155</b>	
	Some difficulty (e.g., late with rent)	115 (32.2%)	176 (49.3%)	66 (18.5%)	357		
	A lot of difficulty	32 (20.4%)*	80 (51%)	45 (28.7%)*	157		
	Total	226	317	134	677		
<b>Have you been able to pay for food and other necessities without difficulty in the past 12 months</b>	Yes	57 (25.2%)*	43 (13.6%)	10 (7.5%)*	110	<b>46.6 (p &lt; .000)</b> <b>Cramer's V = .18</b>	<b>.51** (.32-.83)</b>
	Some difficulty	131 (61.1%)	175 (55.4%)	69 (51.5%)	375		
	Much difficulty	31 (13.7%)*	98 (31%)	55 (41%)*	382		
	Total	226	316	134	676		
<b>Until now, have your finances/income been fairly stable?</b>	Yes	128 (40.3%)*	138 (43.4%)	52 (16.4%)	318	<b>13.4 (p = .000)</b>	
	No	98 (27.3%)*	180 (50.1%)	81 (22.6%)	359		

		Never Roofless	At risk	Roofless	Totals	Chi-square	Adjusted odds ratio <sup>8</sup> (CI) <sup>9</sup>
	Total	226	318	133	677	<b>Cramer's V = .141</b>	
<b>In the past 12 months, has your family been supportive</b>	Family/friends very supportive	116 (43.8%)**	109 (41.1%)	40 (15.1%)	265	<b>47.4 (p &lt; .000) Cramer's V = .194</b>	
	Family/friends not as supportive as before	40 (33.6%)	58 (48.7%)	21 (17.6%)	119		
	Lost support: Conflict with friends and family	19 (13.8%***)	70 (50.7%)	49 (35.5%***)	138		<b>.50*** (.30-.82)</b>
	Moved far away from friends/ family	34 (31.5%)	55 (50.9%)	19 (17.6%)	108		
	Totals	209	292	129	630		

**Table 11: Health and History Variables and ETHOS Roofless, At Risk and Never Roofless**

Variable		Never Homeless in past 10 years	At Risk	Roofless in Past 10 years	Totals	Chi-square	Adjusted odds ratio <sup>10</sup> (CI) <sup>11</sup>
<b>Have you ever been diagnosed with any serious physical health problems or disability?</b>	Yes	54 (27%)	91 (45.5%)	55 (27.5%)*	200	<b>12.5 (p = .002)</b> <b>Cramer's V = .136</b>	
	No	172 (36%)	228 (47.7%)	78 (16.3%)	478		
	Totals	226	319	133	678		
<b>In the past 5 years, have you been admitted to a hospital or other medical facility (for something other than a mental health or addiction issue)?</b>	Yes	44 (21%)**	96 (47.5%)	62 (30.7%)**	202	<b>28.9 (p &lt; .000)</b> <b>Cramer's V = .208</b>	
	No	180 (38.5%)	217 (46.4%)	71 (15.2%)*	468		
	Total	224	313	133	670		
<b>Have you been diagnosed with any serious mental health problem such as depression, anxiety, Post Traumatic Stress Disorder, bi-polar disorder or psychosis/schizophrenia?</b>	Yes	41 (21.2%)**	95 (49.2%)	57 (29.5%)**	193	<b>28.9 (p &lt; .000)</b> <b>Cramer's V = .196</b>	
	No	186 (38.5%)	221 (45.8%)	76 (15.7%)*	483		
	Totals	227	316	133	676		
<b>In the past 5 years, have you been admitted to a mental health facility (including a general hospital psychiatric unit)?</b>	Yes	14 (20.9%)	30 (44.8%)	23 (34.3%)**	67	<b>12.2 (p = .002)</b> <b>Cramer's V = .135</b>	
	No	212 (35.3%)	282 (46.9%)	107 (17.8%)	601		
	Total	226	312	130	668		
<b>In the past five years, have you been concerned about or has any one close to you expressed concern about your use of alcohol, other substances or medical prescriptions?</b>	Yes	36 (18.8%)**	91 (47.4%)	65 (33.9%)**	192	<b>44.2 (p &lt; .000)</b> <b>Cramer's V = .256</b>	
	No	191 (39.5%)*	224 (46.3%)	69 (14.3%)**	484		
	Totals	227	315	134	676		
In the past five years, have you been concerned about or has any one close to you expressed concern about your gambling?	Yes	5 (23.8%)	8 (38.1%)	8 (38.1%)	21	4.5 (p = .11) n.s.	
	No	218 (33.6%)	305 (47%)	126 (19.4%)	649		
	Totals	223	313	134	670		
<b>In the past 5 years, have you spent time in a provincial or federal adult correctional or youth custody facility?</b>	Yes	213 (26.2%)	287 (48.7%)	89 (15.1%)	589	<b>52.3 (p &lt; .000)</b> <b>Cramer's V = .276</b>	<b>.30*** (.18-.53)</b>
	No	17 (17.3%)	36 (36.7%)	45 (45.9%)	98		
	Total	230	323	134	687		
<b>When you were a child or teenager, were you ever in foster care or another youth facility?</b>	Yes	32 (17.8%)**	87 (48.3%)	61 (33.9%)**	180	<b>43.6 (p &lt; .000)</b> <b>Cramer's V = .253</b>	<b>2.1** (1.3-3.5)</b>
	No	195 (39.1%)*	232 (46.5%)	72 (14.4%)**	499		
	Totals	227	319	133	679		

<sup>10</sup> For binary logistic regression comparing ever roofless to never roofless.

<sup>11</sup> 95% confidence intervals

Variable		Never Homeless in past 10 years	At Risk	Roofless in Past 10 years	Totals	Chi-square	Adjusted odds ratio <sup>10</sup> (CI) <sup>11</sup>
<b>When you were a child or teenager, was your family warm and supportive?</b>	Yes	170 (40.8%)**	186 (44.6%)	61 (14.6%)*	417	<b>33.8 (p &lt; .000)</b> <b>Cramer's V = .224</b>	
	No	55 (21.2%)*	132 (51%)	72 (27.8%)**	259		
	Totals	225	318	133	676		
<b>Were you abused or neglected as a child by a parent or caregiver?</b>	Yes	51 (20.2%)*	123 (48.6%)	79 (31.2%)*	253	<b>48.2 (p &lt; .000)</b> <b>Cramer's V = .268</b>	<b>1.9* (1.1-3.1)</b>
	No	171 (40.7%)*	196 (46.7%)	53 (12.6%)*	420		
	Totals	222	319	132	673		
<b>When growing up, did one of your parents have addictions and/or mental health difficulties?</b>	Yes	69 (22.7%)*	158 (52%)	77 (25.3%)*	304	<b>30.7 (p &lt; .000)</b> <b>Cramer's V = .215</b>	
	No	153 (42.3%)*	154 (42.5%)	55 (15.2%)*	362		
	Totals	222	312	132	666		

Because there were no significant differences between the “at risk” and “ever roofless” groups, we conducted a binary logistic regression analysis looking at “ever roofless” and “never roofless,” combining the “at risk” group into the “never roofless” category.

Of the total 740 cases, 531 cases were included in the regression analysis. The strongest model included six variables that correctly classified 81.4% of membership in the categories of ever roofless or never roofless in the past ten years. These significant variables (predictors) were (in order of significance):

- In the past 5 years, have spent time in a provincial or federal adult correctional or youth custody facility;
- Currently have children (under the age of 18) living with you (Protective factor);
- Spent time in foster care as a child;
- In the past year, had lots of difficulty with money/finances;
- Abused as a child by parents or caregivers; and
- In past 12 months have lost support from family or friends because of conflict.

### The HART Follow-up

As part of the HART pilot, individuals were invited to be involved in a follow-up component, to be contacted at 6-month intervals to assess their housing as a strategy to examine the predictive validity of the HART with respect to subsequent homelessness or stable housing. Of the total 740 HART respondents, 174 (23.5%) provided contact information. Of these, the project research staff were able to connect with 70 individuals (40.8% of those who had agreed to be contacted). At less than 10% of the total original sample, the follow-up sample was smaller than anticipated and the results presented below must be reviewed cautiously and as exploratory. Nevertheless, we decided to analyze the data on this group of individuals who were willing to be re-contacted.

To assess the extent to which the follow-up sample was representative of the total sample of HART respondents, a series of chi-square analyses on the core demographics characteristics were conducted and are presented in Table 12. In general, the follow-up sample of 71 was a good fit with the original sample of 740 HART respondents. The exception was that fewer individuals of Aboriginal origin were available for the follow-up sample.

**Table 12: Core Demographics of the Total Compared to the Follow-up Sample**

Items on original HART (completed 6 months earlier)		Did not complete Follow-up	Completed Follow-up	Totals	Chi-square <sup>12</sup>
Gender	Male	234 (36.2%)	25 (35.7%)	259	.006 n.s.
	Female	413 (63.8%)	45 (64.3%)	458	
	Total	647	70	717	
Age Group	15 to 24	91 (14%)	6 (8.6%)	97	2.07 (p = .35) n.s.
	25 to 49	454 (70.1%)	50 (71.4%)	504	
	50 and above	103 (15.9%)	14 (20.0%)	117	
	Total	648	70	718	
<b>Racial Background</b>	Caucasian/White	308 (48%)	37 (52.9%)	345	

<sup>12</sup> Contingency corrected for all 2X2 tables

	Visible Minority	121 (18%)	25 (35.7%)	146	<b>18.7 (p &lt; .000)</b> <b>Cramer's V = .16</b>
	Aboriginal	213 (33.2%)	8 (11.4%)	221	
	Total	624	70	712	
Do you have a place to live right now where you pay rent or a mortgage?	Yes	557 (83.5%)	61 (87.1%)	618	.62 n.s.
	No	110 (16.5%)	9 (12.9%)	119	
	Totals	667	70	737	
Have you ever been homeless?	Yes	333 (51.1%)	34 (48.6%)	367	.16 n.s.
	No	319 (48.9%)	36 (51.4%)	355	
	Totals	652	70	722	

Of those available for follow-up at six months, almost two-thirds (46 or 64.8%) were living at the same address as when they originally completed the HART, with 25 (35.2%) having moved at least once. Of the group that had moved, most had moved only once (17 or 68%), six (24%) had moved two or three times and two (8%) had moved four or more times.

Few had accessed services for homelessness: three had stayed in an overnight shelter for homelessness with no usual place of residence, and one other had stayed in a hostel for homelessness. Five had stayed in temporary accommodation (less than one year); one had stayed in a women's shelter and another individual had stayed in transitional supported accommodation.

Twelve individuals did the follow-up at one year. Of these, only two (16.6%) had moved during the previous six month period, all into good accommodations. Because this number is small, the one-year follow-up is not included in the data analysis of the HART items as linked to insecure housing.

The 71 individuals who were contacted at 6 month follow-up were considered as having insecure housing if they had moved more than once or twice, and if they endorsed any one of the ETHOS items reflecting problematic housing (with the exception of staying with friends and family, which is ubiquitous).

The demographic and health and history variables were entered into a binary logistic regression model to identify which were most strongly associated with being stably or unstably housed at follow-up. Because of missing data, only 57 cases were included in the statistical analysis. Only one demographic variable, being of Aboriginal origin, was predictive of not having stable housing at 6 month follow-up [ $\text{Exp}(\beta) = 10.36 (1.8 - 58.8)$ ].

These results should be viewed cautiously for several reasons. The total number of individuals with which we connected was less than what was anticipated. Further, the number of individuals of Aboriginal origin in the follow-up sample was only 8. As such, additional research with a larger sample of individuals at follow-up is necessary to establish the prospective predictive validity of the HART.

Nevertheless, because of the exploratory nature of the research, data analyses were conducted: Tables 12 and 13 present the core demographics and health, mental health and childhood history characteristics of the follow-up contacts.



**Table 13: Core Demographics of the Follow-up Sample**

Items on original HART (completed 6 months earlier)		Not Securely Housed at Follow-up	Securely Housed at Follow-up	Totals	Chi-square <sup>13</sup>
Gender	Male	10 (40%)	15 (60%)	25	1.3 (p = .25) n.s.
	Female	11 (23.9%)	35 (76.1%)	46	
	Total	21	50	71	
Age Group	15 to 24	3 (50%)	3 (50%)	6	3.4 (p = .17) n.s.
	25 to 49	16 (32%)	34 (68%)	50	
	50 and above	2 (13.3%)	13 (86.7%)	15	
	Total	21	50	71	
<b>Racial Background</b>	Caucasian/White	9 (23.7%)	29 (76.3%)	38	<b>8.9 (p = .011)**</b> <b>Cramer's V = .355</b>
	Visible Minority	6 (24%)	19 (75%)	25	
	Aboriginal	6 (75%)	2 (25%)	8	
	Total	21	50	71	
Children under 18 living with you?	Yes	13 (29.5%)	31 (70.5%)	44	0.0 n.s.
	No	8 (30.8%)	18 (69.2%)	26	
	Totals	21	49	70	
Do you have a place to live right now where you pay rent or a mortgage?	Yes	17 (27.4%)	45 (72.6%)	62	.43 n.s.
	No	4 (44.4%)	5 (56.5%)	9	
	Totals	21	50	71	
Have you ever been homeless?	Yes	14 (40%)	21 (60%)	35	2.7 (p = .10) n.s.
	No	7 (19.4%)	29 (80.6%)	36	
	Totals	21	50	71	
How many times have you moved in the past 12 months-when answered HART?	none	7 (23.3%)	23 (76.7%)	30	1.2 n.s.
	once	8 (34.8%)	15 (65.2%)	23	
	2 to 3 times	5 (35.7%)	9 (64.3%)	14	
	4 or more	1 (25%)	3 (75%)	4	
	Total	21	50	71	
In the past 12 months did you have to move because of conflict with a roommate, family member, landlord or neighbour?	yes	9 (36%)	16 (64%)	25	.36 (n.s.)
	no	12 (26.1%)	34 (73.9%)	46	
	total	21	50	71	
Have you been able to pay for your food and other necessities without difficulty in the past 12 months?	Yes, no difficulty	5 (26.3%)	14 (73.7%)	19	1.2 (p = .54) n.s.
	I've had some difficulty (e.g., not able to buy enough food)	9 (25%)	27 (75%)	36	
	I've had a lot of difficulty	6 (40%)	9 (60%)	15	
	Total	20	50	70	
Did you complete highschool?	Yes	13 (28.9%)	32 (71.1%)	45	.07 n.s.
	No	8 (32%)	17 (68%)	15	
	Total	21	49	70	
	Yes	5 (22.7%)	17 (77.3%)	22	.72 n.s.
	no	16 (32.7%)	33 (67.3%)	49	

<sup>13</sup> Contingency corrected for all 2X2 tables

Items on original HART (completed 6 months earlier)		Not Securely Housed at Follow-up	Securely Housed at Follow-up	Totals	Chi-square <sup>13</sup>
Are you currently or were you recently employed (in the last 30 days)?	total	21	50	71	
Have you been able to pay your rent/mortgage without difficulty in the past 12 months?	Yes	5 (26.3%)	14 (73.7%)	19	1.2 (p = .54) n.s.
	I've had some difficulty (e.g., late with rent)	9 (25%)	27 (75%)	36	
	I've had a lot of difficulty	6 (40%)	9 (60%)	15	
	Total	20	50	70	
Have you ever had to stay with friends and family for long time periods (over a month)?	Yes	11 (30.6%)	25 (69.4%)	36	.00 n.s.
	No	10 (28.6%)	25 (71.4%)	35	
	Total	21	50	71	
Until now, have your finances/income been fairly stable?	Yes	8 (22.9%)	27 (77.1%)	35	.38 n.s.
	No	11 (32.4%)	23 (67.6%)	34	
	Total	19	50	69	
I have friends or family who could help me with housing/finances for a while if needed	Yes	9 (34.6%)	17 (65.4%)	26	.14 n.s.
	No	12 (27.3%)	32 (72.7%)	44	
	Total	21	49	70	
In the past 12 months, has your family been supportive	Family/friends very supportive	9 (29%)	22 (71%)	31	.87 n.s.
	Family/friends not as supportive as before	3 (23.1%)	10 (76.9%)	13	
	Lost support: Conflict with friends and family	4 (30.8%)	9 (69.2%)	13	
	Moved far away from friends/ family	3 (42.9%)	4 (57.1%)	7	
	Total	19	49	64	

**Table 14: Health and History Variables and Securely Housed at Follow-up**

Variable		Not Securely Housed	Securely Housed	Totals	Chi-square
Have you ever been diagnosed with any serious physical health problems or disability?	Yes	7 (33.3%)	14 (66.7%)	21	.01 n.s.
	No	14 (28.6%)	35 (71.4%)	49	
	Totals	21	49	70	
In the past 5 years, have you been admitted to a hospital or other medical facility (for something other than a mental health or addiction issue)?	Yes	9 (34.6%)	17 (65.4%)	26	.14 n.s.
	No	12 (27.3%)	32 (72.7%)	44	
	Total	21	49	70	
Have you been diagnosed with any serious mental health problem such as depression, anxiety, Post Traumatic Stress Disorder, bipolar disorder or psychosis/schizophrenia?	Yes	9 (32.1%)	19 (67.9%)	28	.013 n.s.
	No	12 (27.9%)	31 (72.1%)	43	
	Totals	21	50	71	
In the past 5 years, have you been admitted to a mental health facility (including a general hospital psychiatric unit)?	Yes	3 (33.3%)	6 (66.7%)	9	.000 n.s.
	No	18 (30.5%)	41 (69.5%)	59	
	Total	21	47	68	
	Yes	7 (30.4%)	16 (69.6%)	23	.01 n.s.

Variable		Not Securely Housed	Securely Housed	Totals	Chi-square
In the past five years, have you been concerned about or has any one close to you expressed concern about your use of alcohol, other substances or medical prescriptions?	No	14 (29.2%)	34 (70.8%)	48	
	Totals	21	50	71	
In the past five years, have you been concerned about or has any one close to you expressed concern about your gambling?	Yes	1 (50%)	1 (50%)	2	.35 n.s.
	No	20 (30.3%)	46 (69.7%)	66	
	Totals	21	47	68	
In the past 5 years, have you spent time in a provincial or federal adult correctional or youth custody facility?	No	17 (28.3%)	43 (71.7%)	60	.03 (n.s.)
	Yes	4 (36.4%)	7 (63.6%)	11	
	Total	21	50	71	
When you were a child or teenager, were you ever in foster care or another youth facility?	Yes	6 (42.9%)	8 (57.1%)	14	.72 n.s.
	No	15 (26.8%)	41 (73.2%)	56	
	Totals	21	49	70	
When you were a child or teenager, was your family warm and supportive?	Yes	11 (29.7%)	26 (70.3%)	37	.000 n.s.
	No	10 (30.3%)	23 (69.7%)	33	
	Totals	21	49	70	
Were you abused or neglected as a child by a parent or caregiver?	Yes	11 (32.4%)	23 (67.6%)	34	.025 n.s.
	No	10 (37.8%)	26 (72.2%)	36	
	Totals	21	49	70	
When growing up, did one of your parents have addictions and/or mental health difficulties?	Yes	10 (33.3%)	20 (66.7%)	30	.04 n.s.
	No	11 (28.2%)	28 (71.8%)	39	
	Totals	21	48	69	

## Discussion and Implications

The current study of the characteristics of individuals who completed the HART is unique in several ways. First, much of the research focuses on a large cohort of individuals who are currently homeless or using services to address housing issues. In contrast, the current study engaged with individuals who were seeking assistance at community resource centres for a number of issues, with only a small proportion being insecurely housed (about 16%, including 57 women from an emergency violence against women shelter, the only anomaly in the sample).

That at least half of this sample had been homeless at some point in their lives suggests that community resource centre clientele are indeed vulnerable to housing difficulties and such agencies should consider assessing housing, whether the presenting problem or not. The HART items represent characteristics that many agencies already collect at intake. The tool could be used as an intake form, while also having the potential to provide information on risks for homelessness.

Secondly, the HART was created based on research comparisons of homeless individuals and those not currently homeless but at risk. In contrast to the bulk of the research that has focused on one facet of the homeless population (i.e., individuals with mental health problems or youth), we looked across populations. The current examination of homelessness predictors resulted in the HART being comprised of many more variables (over 30) than most researchers use in their research comparisons.

That the majority of the HART items differentiated homeless and roofless samples provides some evidence of the content and construct validity of the tool. In the Calgary sample, across the ever-homeless and ever-roofless categories, several HART items consistently identified homeless issues:

- Prison in the past 5 years;
- Child abuse history;
- Foster care history; and
- In the past 12 months, having lost support because of conflict with friends and family

These variables could be used as red flags by Calgary community agencies to inquire about housing difficulties and to offer individuals housing assistance if needed. However, these particular issues cannot be generalized to other cities, even in Alberta, since the characteristics of at-risk individuals as well as the municipalities are likely different. The HART will be available to those who would like to use it to explore the characteristics of at risk individuals in their own locations.

Many of the issues represented by the HART items are inter-correlated, which may explain why some of the more common variables associated with homelessness such as mental health and substance use, for example, did not emerge as significant in the strongest regression models predicting membership in the homeless or roofless groups. To present only one example of the nature of such inter-correlations, we can look at the relationship between Aboriginal background and child abuse and foster care, two variables consistently correlated with homelessness and rooflessness in the HART sample. In the latest Canadian National Incidence Study of Child Maltreatment in 2008 (Trocmé et al., 2010) 22% of substantiated cases of abuse were with respect to children of Aboriginal heritage, a much higher proportion than in the Canadian population. Further, Aboriginal children are severely over-represented in the foster care system (Trocmé, 2004). Child maltreatment has often been linked to mental health consequences both in childhood and adulthood (Banyard, 2001; Springer, 2007), especially when children have been victims of several types of abuse, a not unusual circumstance (Finkelhor, 2005).

By including a large number of variables associated with homelessness, the current study allowed for a more nuanced analysis of the core variables: In the previous example, having a history of child maltreatment and foster care were both more significantly associated with homelessness than simply being of Aboriginal descent. Many researchers use core demographics as predictor variables (including racial background) and often do not consider such historic factors as child abuse and foster care status, thus likely coming to the conclusion that Aboriginal background was the risk factor to homelessness, not childhood abuse and the structural intervention of foster care. That conclusion could be potentially stigmatizing.

The difficulty connecting with individuals at follow-up in the current study was unfortunate since, while the HART items did predict whether individuals had ever been homeless or roofless in the past, we cannot establish whether the HART can predict which individuals at risk for homelessness have insecure housing difficulties in the future. Conducting follow-up research is always challenging. Researchers who have done so successfully, such as Shinn et al. (1998), have put considerable resources into staying in touch with people and re-contacting individuals through such core programs as social assistance and housing.

Despite putting much effort into numerous contact addresses and incentives to reconnect, the current study managed to recontact only about 10% of the original HART sample, not enough to conduct meaningful data analyses. As such, further exploration of the tool's predictive validity is necessary.

Those familiar with research on chronic homelessness may be surprised that many of the core characteristics of homeless individuals, such as mental health and addictions diagnoses, were unrelated to homelessness in this sample in the final regression models. One key distinction is that this group of people were not seeking assistance for current homelessness. That half of the sample had been previously homeless and a fifth of the sample had lived roofless or had stayed at an overnight homeless shelter at some point, reminds us of the transient nature of homelessness for many. It is not possible to determine how the individuals in the pilot study transitioned out of homelessness, but it nevertheless highlights the importance of programs and housing supports (Shinn et al., 1998).

Further, some research with chronically homeless individuals in programs has access to files that contain formal diagnoses on mental health, substance abuse or gambling. With a “non-clinical” sample (i.e., not currently homeless or in treatment for psychiatric or substance abuse), the HART used questions such as, “In the past five years, have you been concerned about or has any one close to you expressed concern about your use of alcohol, other substances or medical prescriptions?” to assess these sensitive topics. With issues such as addictions and gambling that are characterized by denial, such questions may not have been answered honestly. These questions, as well as others, will be considered as the HART team revises the tool based on the current results.

### **Future Considerations**

Future research with the HART could utilize the newly constructed Canadian definition of homelessness (Canadian Homelessness Research Network, 2012) rather than or in addition to the items on the ETHOS scale. The Canadian definition was only published this year, so was not available when the HART pilot study was designed. The factors are similar to the homelessness issues included in ETHOS, although some are configured somewhat differently.

An additional question to the HART that would increase its utility in the United States is with respect to any active service in the military. The original literature review did not explore issues for veterans, especially since Canada has had less military involvement in the past several decades (excluding the recent deployments to Afghanistan). A subsequent literature review found some important considerations, all from the United States. Despite the overrepresentation of veterans in the homeless population in the US, Kline, Callahan, Butler, Hill, Losonczy, and Smelson (2009, US) are of the opinion that military service alone is not a precipitator of homelessness; rather it is the multitude of factors related to medical and mental health, substance use and social/socio-demographic risk factors that determine vulnerability to homelessness (Mares, 2004). However, in contrast, Tessler, Rosenhack and Gamache (2002, US) proposed that the factors that put veterans at risk post-military service was non-existent prior to deployment; suggesting that combat experience and trauma exposure play key factors.

Adams (2007) compared the characteristics of housed and homeless veterans and at the rates of medical and psychiatric hospitalizations in a US national sample of 43,868 veterans (11.8% homeless). Veterans who were homeless were significantly more likely to have been hospitalized for substance and psychiatric issues (79.9% compared to 29.1%), with the homeless veterans admitted at a much earlier age. While the question with respect to mental health and addictions diagnoses would have been relevant to many veterans, asking explicitly whether HART respondents had served in the military could put any mental health and substance abuse issues into perspective. Knowing how many individuals were veterans would also inform practitioners and

policy makers. Further, although not yet appearing in the published literature, there are media reports about Canadian veterans being at risk for homelessness. The 2012 Calgary homeless count survey (Calgary Homeless Foundation, 2012) included a question about service in the Canadian Armed Forces, although no results are reported.

In summary, the current study has provided a unique exploration of risks and protective factors to homelessness in a group of Calgarians not currently seeking assistance for this critical issue. The extent of past episodes of homelessness of this group (50%) confirms that, in addition to the essential focus on providing emergency and long-term assistance to individuals currently afflicted by homelessness, we must also consider the needs of those that are not currently but may be at risk to experience this devastating structural problem.

The HART shows promise as a tool to identify risk and protective factors associated with preventing individuals from becoming homeless in particular locations. With additional research to establish its ability to predict homelessness in future, it could become an important asset in the continuum of strategies to prevent homelessness.

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## Appendix I: Risk & Asset Factors that Differentiate Homeless from At Risk of Homeless

Risk Factors	Population of Note	Supported	Contradicted
<b>Childhood Factors</b>			
Abuse in childhood	Women/families	Browne & Bassuk, US, 1997; Wood et al., 1990, US; (Bassuk, 1988)	
	Youth	Bearsley-Smith et al., 2008, AUS; Shelton, et al., 2009, UK; Tyler & Bersani, 2008, US; Robert, et al., 2005, CAN; Molino, 2007, US (neglect)	Molino, 2007, US (not other abuse forms)
	Seniors		Shinn et al., 2007, US
Foster placement in childhood	General homeless	Goering, et al., 2002, CAN	
	Youth	Bearsley-Smith et al., 2008, AUS; Shelton, et al., 2009, UK; Tyler & Bersani, 2008, US; Robert, et al., 2005, CAN; Commander, et al., 2002, UK	
	Families/Women	Bassuk et al., 1997, US; Wood et al., 1990, US	
	Mental health	Shelton, et al., 2009, UK	
Witness parental/family violence/family conflict	Youth	Bearsley-Smith et al., 2008, AUS; Shelton, et al., 2009, UK; Tyler & Bersani, 2008, US; Robert, et al., 2005, CAN	
	Aboriginal	Gardiner & Cairns, 2002, CAN	
	Women	Ingram, et al., 1996, US	
Coming from a single parent/step-family	Youth	Bearsley-Smith et al., 2008, AUS; Shelton, et al., 2009, UK; Tyler & Bersani, 2008, US; Robert, et al., 2005, CAN	
Drug/substance use by family member	Youth	Bearsley-Smith et al., 2008, AUS; Shelton, et al., 2009, UK; Tyler & Bersani, 2008, US; Robert, et al., 2005, CAN	
	Women/Families	Bassuk et al., 1997, US; Wood et al., 1990, US	
Long-time social assistance	Youth	Bearsley-Smith et al., 2008, AUS; Shelton, et al., 2009, UK; Tyler & Bersani, 2008, US; Robert, et al., 2005, CAN	
<b>Current Interpersonal and Family Factors</b>			
Poor social support	General homeless	MacKnee & Mervyn, 2002, CAN; Muñoz & Vázquez, 2004, ESP	
	Addictions	Eyrich-Garg, et al., 2008, US;	
	Aboriginal	Gardiner & Cairns, 2002, CAN	
	Mentally Ill	Kertesz, et al., 2005, US	
	Women/Families	Wood et al., 1990, US; Bassuk et al., 1997, US; (Bassuk, 1988); Letiecq, et al., 1998, US (for women in emergency shelter & transitional housing but not those doubled up)	
Separated, divorced or single	Women/Families	Pavao et al., 2007, US; Lehmann, et al., 2007, US; Fertig & Reingold, 2008, US; LaVesser, et al., 1997, US	



Disputes: landlords or neighbours	Seniors	Shinn et al., 2007, US	
Bullying/neighbourhood violence	Youth	Tyler & Bersani, 2008, US	
Family or other interpersonal conflict	Youth	Bearsley-Smith, et al., 2008, AUS; Robert, et al., 2005, CAN; Klodawsky, et al., 2009, CAN; Molino, 2007, US	
Intimate partner or other family violence	Women/mothers	Pavao et al., 2007, US; Browne & Bassuk, 1997, US; Wood et al., US, 1990; Fertig & Reingold, 2008, US; Bassuk et al., 1997, US;	Both experienced considerable violence: Lehmann, et al. 2007, US; Tucker et al., 2005, US; Ingram et al, 1996, US; LaVesser, et al., 1997, US
	Aboriginal	Gardiner & Cairns, 2002, CAN	
	Seniors	Gardiner & Cairns, 2002, CAN	
Lack of employment/Precariously employed/Job loss/shorter tenure in longest job held	Women	Pavao et al., 2007, US; Lehmann, et al., 2007, US	
	Aboriginal	Gardiner & Cairns, 2002, CAN	
	Seniors	Shinn et al., 2007, US	
	Youth	Commander, et al., 2002, UK	
Recent victim of sexual aggression	Women	Ingram, et al., 1996, US; Tucker, et al., 2005, US	
Young parenting	Women/families	Weitzman et al., 1992, US; Shinn et al., 1998, US	
Children in care	Women	Lehmann, et al., 2007, US	
<b>Mental Health/Addictions</b>			
Depression	Youth	Bearsley-Smith et al., 2008, AUS; Shelton, et al., 2009, UK; Tyler & Bersani, 2008, US; Robert, et al., 2005, CAN	
	Women	Fertig & Reingold, 2008, US	
Antisocial behaviour i.e. school suspensions, delinquent behaviours	Youth	Bearsley-Smith et al., 2008, AUS; Shelton, et al., 2009, UK; Tyler & Bersani, 2008, US; Robert, et al., 2005, CAN; Molino, 2007, US	
Severe mental health symptoms/psychological distress	Mental Illness	Commander & Odell, 2001, UK; Eyrich-Garg, et al., 2008, US; Folsom et al., 2005, US; Shelton, et al., 2009, UK; Kertesz, et al., 2005, US	
	Men		Caton et al., 2000, US
	Mothers	Ingram, et al., 1996, US; Wood et al., 1990, US; (Bassuk, 1988)	
PTSD Diagnosis	Mothers	LaVesser, et al., 1997, US	
Alcohol or drug use	Youth		Molino, 2007, US
	Mothers	Wood et al., 1990, US; Fertig & Reingold, 2008, US; Bassuk et al., 1997, US (including heroin); (Bassuk, 1988)	
Severe addictions (includes use of crack & cocaine)	Addictions	Eyrich-Garg, et al., 2008, US; Orwin, et al., 2005, US	
	Women/families		Lehmann, et al., 2007, US
	Men		Caton et al., 2000, US
	General homeless	Klodawsky, et al., 2009, CAN	
Concurrent mental health & substance abuse	Women/families	Ingram, et al., 1996, US; Wood et al., 1990, US	
	Mentally ill	Commander & Odell, 2001, UK; Eyrich-Garg et al., 2008, US, Kertesz, et al., 2005, US	

Health Problems			
	General homeless	Muñoz, et al., 2005, ESP	
	Aboriginal	Gardiner & Cairns, 2002, CAN	
	Seniors	Gardiner & Cairns, 2002, CAN	
	Mental Illness	Kertesz, et al., 2005, US	
	Women/Families	Fertig & Reingold, 2008, US	
Difficulties with pregnancy or recently childbirth	Women/families	Shinn et al., 1998, US; Weitzman et al., 1992, US	
Disability	Seniors		Shinn et al., 2007, US
Housing Transitions			
Recent move to new country in previous year	Women/Families	Lehmann, et al., 2007, US; Fertig & Reingold, 2008, US	
Eviction/ Marginally housed in past year	Women/families	Lehmann, et al., 2007, US; Shinn et al., 1998, US; Bassuk et al., 1997,US	
	Aboriginal	Gardiner & Cairns, 2002, CAN	
	Seniors	Shinn et al., 2007, US	
Psychiatric Hospitalization (especially in past 5 years) or recently leaving hospital	Mental Health	Shelton et al., 2009, UK; Wood et al., 1990, US; Bassuk et al., 1997, US; Folsom et al., 2005, US	
	Women/Families	Bassuk et al., 1997, US	
History of staying with family or friends/ housing instability	Seniors	Shinn et al., 1998, US	
	Woman/families	Bassuk et al., 1997, US; Goodman, 1991; Wood et al., 1990, US;	
Housing being converted or needing significant repairs	Seniors	Shinn et al., 2007, US	
Moved because of violence	Women	Tucker et al., 2005, US	
Being kicked out of home	Youth	Shelton et al., 2009, UK	
Other Factors			
Aboriginal ancestry	Youth	Bearsley-Smith et al., 2008, AUS; Shelton, et al., 2009, UK; Tyler & Bersani, 2008, US; Robert, et al., 2005, CAN	
Caucasian ancestry	Women	Lehmann, et al., 2007, US (Protective factor)	
Minority status	Women/Families	Bassuk et al., 1997, US; Pavao et al., 2007, US	Fertig & Reingold, 2008, US
Male gender	Seniors	Shinn et al., 2007, US	
	Youth	Commander, et al., 2002, UK	
	Generally homeless	Muñoz & Vázquez, 2004, ESP	
Neighbourhood victimization/being bullied	Youth	Tyler & Bersani, 2008, US	
Criminal justice involvement/ history	Mental Illness	Commander & Odell, 2001, UK	
	Youth	Molino, 2007, US	
Protective Factors			

Social support (beyond street-life)	General homeless	MacKnee & Mervyn, 2002, CAN	
Owning home or being primary tenant	General homeless	Bassuk et al., 1997, US; Shinn et al., 1998, US	
	Women	Shinn et al., 1998, US	
Having completed highschool	General homeless	Bassuk et al., 1997, US; Wood et al., 1990, US	
	Women/families	LaVesser, et al., 1997, US; Caton et al., 2000, US; Pavao et al., 2007, US	
	Men	Caton et al., 2000, US	
	Youth	Commander, et al., 2002, UK	
Good interpersonal skills	General homeless	Klodawsky, et al., 2009, CAN	
	Women	Wagner & Perrine, 1994, US	
Current or previous employment	General homeless	Caton et al., 2005, US	
Relatives that will help w. housing	Women/Families	Toohy et al., 2004, US; Fertig & Reingold, 2008, US	
	Seniors	Shinn et al., 2007, US (that could provide housing)	
Parental monitoring & supervision	Youth	Bearsley et al., 2008, AUS; Tyler & Bersani, 2008, US	
Average cognitive skills	Women/families	LaVesser, et al., 1997, US	
Having children/dependents	General homeless	Orwin, et al., 2005, US	
<b>Structural Factors</b>			
Access to subsidized housing	General homeless	Klodawsky, et al., 2009, CAN; MacKnee & Mervyn, 2002, CAN	
	Women/Families	Bassuk et al., 1997, US; Shinn et al., 1998, US	Fertig & Reingold, 2008, US
	Mental illness	Folsom et al., 2005, US	
Access to resources such as social assistance or housing supports	Generally homeless	Klodawsky, et al., 2009, CAN; MacKnee & Mervyn, 2002, CAN; Smith, et al., 2008, UK.	
	Seniors	Allen et al., 2004, US; Shinn et al., 1998, US	
	Women/Families	Bassuk et al., 1997, US	Fertig & Reingold, 2008, US
	At-risk Health	Smith, et al., 2006, US	
Low income levels/high rent	Women/families	Pavao et al., 2007, US; Browne & Bassuk, 1997, US; Caton et al., 2000, US; Fertig et al., 2008, US	
	Men	Caton et al., 2000, US	
	Mental Illness	Mojtabai, 2005, US	
	Aboriginal	Gardiner & Cairns, 2002, CAN	
	Seniors	Gardiner & Cairns, 2002, CAN; Shinn et al., 2007, US	
Good quality housing	Women	Klodawsky, et al., 2009, CAN	
Appropriate programs & supports not available or problems develop	Mental health/addictions	Bassuk et al., 1997, US; Folsom et al., 2005, US	
	Seniors	Shinn et al., 2007, US	
	Youth	Molino, 2007, US	
<b>Racial Background</b>			
Aboriginal ancestry	Youth	Bearsley-Smith et al., 2008, AUS; Shelton, et al., 2009, UK; Tyler & Bersani, 2008, US; Robert, et al., 2005, CAN	

Caucasian ancestry	Women	Lehmann, et al., 2007, US	
Minority status	Women/Families	Bassuk et al., 1997, US; Pavao et al., 2007, US	Fertig & Reingold, 2008, US

## Appendix II: Annotated Homelessness Asset and Risk Screening Tool (HART)

**Administration:** This measure is a screening tool to identify individuals at risk of homelessness and who may be in need of services to prevent this. As such, it gathers information only on variables that have been found by researchers (based on an in-depth literature review<sup>14</sup>) to distinguish whether a person may be “at-risk” of being homeless.

### Introductory Questions about Housing

1. Do you have a place to live in right now?  
 Yes  
 No
  - a. *If yes, to #1, are you the owner or primary tenant<sup>15</sup>? (Protective factor)*  
 Yes  
 No
  - b. *If yes, to #1, is this place: (check any of the following if yes):*  
 Adequate (i.e. in good repair; repairs done<sup>16</sup> if requested; no vermin)  
 Affordable (costs no more<sup>17</sup> than 50%<sup>18</sup> of your gross income)  
 Stable (you are not<sup>19</sup> at risk of eviction)  
 In a safe neighbourhood<sup>20</sup>

If the individual’s scores indicate current difficulties with housing, invite them to answer the remaining questions.

**Script:** Your answers to the first few questions indicate that your current housing is not meeting all of your needs. I have additional questions about housing challenges. Would you be willing to answer these? It should take another about 15 minutes of your time. Some questions may seem personal. The reason they are included is that they are factors that differentiate individuals who became homeless from those who remained housed. You can refuse to answer any question and stop at any time. Stopping or declining to answer will not affect any of the services that you are receiving from our organization.

### Factors that Influence Housing Stability

2. How many times have you moved in the past 12 months (risk factor<sup>21</sup>)?  
 None or Once       2-3 times       4 or more times
3. Have you ever had to stay with friends and family for long time periods (over a month)?

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<sup>14</sup> Tutty, L., Bradshaw, C., Waegemakers Schiff, J., Worthington, C., MacLaurin, B., Hewson, J., Dooley, D., Kean, S. & McLeod, H. (2009). Risks and assets for homelessness prevention: A literature review for the Calgary Homeless Foundation.

<sup>15</sup> Bassuk et al., 1997, US; Shinn et al., 1998, US; Shinn et al., 1998, US

<sup>16</sup> Klodawsky, et al., 2009, CAN

<sup>17</sup> Pavao et al., 2007, US; Browne & Bassuk, 1997, US; Caton et al., 2000, US; Fertig et al., 2008, US; Caton et al., 2000, US; Mojtabai, 2005, US; Gardiner & Cairns, 2002, CAN

<sup>18</sup> Pomeroy, 2007, CAN; Luffman, 2006, CAN; Statistics Canada, 2008

<sup>19</sup> Lehmann, et al., 2007, US; Shinn et al., 1998, US; Bassuk et al., 1997, US; Gardiner & Cairns, 2002, CAN; Shinn et al., 2007, US

<sup>20</sup> Tyler & Bersani, 2008, US

<sup>21</sup> Higher numbers are “Marginally housed” Lehmann, et al., 2007, US; Shinn et al., 1998, US; Bassuk et al., 1997, US; Gardiner & Cairns, 2002, CAN; Shinn et al., 2007 US

No  
 Yes

4. If you needed it, is subsidized housing<sup>22</sup> readily available in your community?

No  
 Yes  
 Don't know

5. In the past 12 months did you have to move any time because of conflict with a roommate/landlord or neighbour<sup>23</sup>?

No  
 Yes

6. Have you ever been homeless?

No  
 Yes

a. If yes to #6, were you ever homeless when you were younger than 18 years of age<sup>24</sup>?

No  
 Yes

### **Housing Transitions**

7. In the past 5 years, have you spent time in a mental health or addictions care facility<sup>25</sup>? If yes, did you have stable housing to move into upon your return to the community?

Yes  
 No

8. In the past 5 years, have you spent time in a correctional facility<sup>26</sup>?

Yes  
 No

a. If yes to #8, did you have stable housing to move into upon your return to the community?

Yes  
 No

9. In the past five years, have you moved away from your home country<sup>27</sup>?

Yes  
 No

### **Income/Education:**

10. Are you currently or recently employed<sup>28</sup>?

Yes

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<sup>22</sup>Klodawsky, et al., 2009, CAN; MacKnee & Mervyn, 2002, CAN; Bassuk et al., 1997, US; Shinn et al., 1998, US; Wagner & Perrine, 1994, US; Folsom et al., 2005, US

<sup>23</sup> Shinn et al., 2007, US

<sup>24</sup> Goering, Tolomiczenko, Sheldon, Boydell, & Wasylenki, 2002. Those with previous homelessness before age 18 more likely to remain homeless.

<sup>25</sup> Shelton et al., 2009, UK; Wood et al., 1990, US; Bassuk et al., 1997, US; Folsom et al., 2005, US; Bassuk et al., 1997, US

<sup>26</sup> Commander & Odell, 2001, UK; Molino, 2007, US

<sup>27</sup> Lehmann, et al., 2007, US; Fertig & Reingold, 2008, US

<sup>28</sup>Caton et al., 2000, US

No

a. *If no to #10, do you expect to have difficulty<sup>29</sup> finding employment?*

Yes

No, I don't expect to have a hard time finding a job.

No, I won't be looking for a job in the next several months.

11. Until now, have you worked in relatively stable<sup>30</sup> and secure jobs?

Yes

No

12. Have you been able to pay your rent/mortgage without difficulty<sup>31</sup> in the past 12 months?

Yes, no difficulty.

No, I've had some difficulty.

No, I've had considerable difficulty.

### Social Supports

13. In the past 12 months, have there been any important changes or losses in your family/support system?

My family/friends are<sup>32</sup> very supportive.

My family/friends are not as supportive as before.

I live far away from family and friends.

I have lost support through interpersonal conflict or the death of a caregiver

14. I have family or friends that could help me with housing and/or finances<sup>33</sup> for a while if I needed. (Protective factor)

Yes

No

15. Do you currently have children<sup>34</sup>? (Protective factor)

Yes

No

The next sets of questions are with respect to various groups of individuals that research suggests may have particular housing problems. Answering them would help us identify certain challenges or assets that you might face with respect to finding secure, appropriate housing.

What is your sex?

Male<sup>35</sup>

Female

Transgendered

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<sup>29</sup> Commander, et al., 2002, UK; Pavao et al., 2007, US; Lehmann, et al., 2007, US; Gardiner & Cairns, 2002, CAN; Shinn et al., 2007, US

<sup>30</sup> Commander, et al., 2002, UK; Pavao et al., 2007, US; Lehmann, et al., 2007, US; Gardiner & Cairns, 2002, CAN; Shinn et al., 2007, US

<sup>31</sup> Pavao et al., 2007, US; Browne & Bassuk, 1997, US; Caton et al., 2000, US; Fertig et al., 2008, US; Caton et al., 2000, US; Mojtabai, 2005, US; Gardiner & Cairns, 2002, CAN

<sup>32</sup> MacKnee & Mervyn, 2002, CAN; Muñoz & Vázquez, 2004, ESP; Eyrich-Garg, et al., 2008, US; Gardiner & Cairns, 2002, CAN; Wood et al., 1990, US; Bassuk et al., 1997, US; Letiecq, et al., 1998, US

<sup>33</sup> Toohey et al., 2004, US; Fertig & Reingold, 2008, US for mothers. Shinn et al., 2007, US for seniors. Fit for others?

<sup>34</sup> Orwin, et al., 2005, US

<sup>35</sup> Shinn et al., 2007, US; Commander, et al., 2002, UK; Muñoz & Vázquez, 2004, ESP

In which of the following age-groups are you?

Under 15 to 24

25 to 49?

50 and up

What is your cultural background?

Caucasian/White<sup>36</sup>

I am from a visible minority<sup>37</sup> group.

If yes, are you a recent immigrant (past 5 years)?

yes

no

I am Aboriginal/First Nations<sup>38</sup>/Métis

16. In the past five years, have you been diagnosed<sup>39</sup> with any serious physical health problems or disability?

Yes

No

17. In the past five years, have you been diagnosed with any serious<sup>40</sup> mental health problem such as depression<sup>41</sup>, anxiety, PTSD<sup>42</sup>, bi-polar disorder or psychosis/schizophrenia?

Yes<sup>43</sup>

No

18. In the past five years, has any one close to you expressed concern about your use of alcohol, other substances or medical prescriptions<sup>44</sup>?

Yes

No

### Childhood/Youth Factors

19. Did you complete highschool<sup>45</sup>? (protective factor)

Yes

No

20. As a child or youth was your family generally warm and supportive<sup>46</sup> (Protective factor)?

Yes

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<sup>36</sup> Protective Lehmann et al., 2007.

<sup>37</sup> For women: Bassuk et al., 1997, US; Pavao et al., 2007, US

<sup>38</sup> For Youth: Bearsley-Smith et al., 2008, AUS; Shelton, et al., 2009, UK; Tyler & Bersani, 2008, US; Robert, et al., 2005, CAN

<sup>39</sup> Muñoz, et al., 2005, ESP; Gardiner & Cairns, 2002, CAN; Kertesz, et al., 2005, US; Fertig & Reingold, 2008, US

<sup>40</sup> Commander & Odell, 2001, UK; Eyrich-Garg, et al., 2008, US; Folsom et al., 2005, US; Shelton, et al., 2009, UK; Kertesz, et al., 2005, US; Ingram, et al., 1996, US; Wood et al., 1990, US

<sup>41</sup> Bearsley-Smith et al., 2008, AUS; Shelton, et al., 2009, UK; Tyler & Bersani, 2008, US; Robert, et al., 2005, CAN; Fertig & Reingold, 2008, US

<sup>42</sup> LaVesser, et al., 1997, US

<sup>43</sup> If yes to 27 and 28, give an extra point. Concurrent: Ingram, et al., 1996, US; Wood et al., 1990, US; Commander & Odell, 2001, UK; Eyrich-Garg et al., 2008, US, Kertesz, et al., 2005, US

<sup>44</sup> Klodawsky, et al., 2009, CAN ; Wood et al., 1990, US; Fertig & Reingold, 2008, US; Bassuk et al., 1997, US (including heroin); Eyrich-Garg, et al., 2008, US; Orwin, et al., 2005, US

<sup>45</sup> Bassuk et al., 1997, US; Wood et al., 1990, US; LaVesser, et al., 1997, US; Caton et al., 2000, US; Pavao et al., 2007, US; Caton et al., 2000, US; Commander, et al., 2002, UK

<sup>46</sup> Bearsley-Smith et al., 2008, AUS; Shelton, et al., 2009, UK; Tyler & Bersani, 2008, US; Robert, et al., 2005, CAN; Gardiner & Cairns, 2002, CAN; Ingram, et al., 1996, US



\_\_\_\_\_ No

21. As a child or youth were you ever in the foster care system or other youth<sup>47</sup> facility?

\_\_\_\_\_ Yes

\_\_\_\_\_ No

### Questions for Specialized Groups and Risk Factors/Triggers

#### Youth (age 25 and below)

\_\_\_\_\_ Do you come from a single parent or step-family<sup>48</sup>?

\_\_\_\_\_ Were you ever suspended from school or have problems following rules<sup>49</sup>?

\_\_\_\_\_ Have you been the victim of bullies<sup>50</sup> or of neighbourhood violence?

\_\_\_\_\_ When you were a child, was there significant conflict in your family<sup>51</sup>?

\_\_\_\_\_ Have you ever been abused by a parent or caregiver<sup>52</sup>?

\_\_\_\_\_ Have you been “kicked out of the house<sup>53</sup>” in the past year? (trigger)

\_\_\_\_\_ Does one of your parents have addictions and/or mental health difficulties<sup>54</sup>.

\_\_\_\_\_ Was your family of origin on social assistance for long<sup>55</sup> periods?

\_\_\_\_\_ Are you currently a single parent<sup>56</sup>?

Do your parents take an interest in and supervise your activities<sup>57</sup>? (Protective factor)

\_\_\_\_\_ Yes

\_\_\_\_\_ No

Have you recently utilized any youth-oriented<sup>58</sup> services to help you stay housed? (Protective factor)

\_\_\_\_\_ Yes

\_\_\_\_\_ No

#### Adult women/mothers:

\_\_\_\_\_ Have you recently divorced or left your spouse or partner<sup>59</sup>?

\_\_\_\_\_ Have you ever had to leave home because of an abusive partner<sup>60</sup>?

\_\_\_\_\_ Have you recently moved because of violence in general<sup>61</sup>?

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<sup>47</sup>Goering, et al., 2002, CAN; Bearsley-Smith et al., 2008, AUS; Shelton, et al., 2009, UK; Tyler & Bersani, 2008, US; Robert, et al., 2005, CAN; Commander, et al., 2002, UK; Bassuk et al., 1997, US; Wood et al., 1990, US; Shelton, et al., 2009, UK

<sup>48</sup> Bearsley-Smith et al., 2008, AUS; Shelton, et al., 2009, UK; Tyler & Bersani, 2008, US; Robert, et al., 2005, CAN

<sup>49</sup>Bearsley-Smith et al., 2008, AUS; Shelton, et al., 2009, UK; Tyler & Bersani, 2008, US; Robert, et al., 2005, CAN; Molino, 2007, US

<sup>50</sup> Tyler & Bersani, 2008, US

<sup>51</sup> Bearsley-Smith et al., 2008, AUS; Shelton, et al., 2009, UK; Tyler & Bersani, 2008, US; Robert, et al., 2005, CAN

<sup>52</sup> Bearsley-Smith et al., 2008, AUS; Shelton, et al., 2009, UK; Tyler & Bersani, 2008, US; Robert, et al., 2005, CAN; Molino, 2007, US (neglect)

<sup>53</sup>Shelton et al., 2009, UK

<sup>54</sup>Bearsley-Smith et al., 2008, AUS; Shelton, et al., 2009, UK; Tyler & Bersani, 2008, US; Robert, et al., 2005, CAN

<sup>55</sup> Bearsley-Smith et al., 2008, AUS; Shelton, et al., 2009, UK; Tyler & Bersani, 2008, US; Robert, et al., 2005, CAN

<sup>56</sup>Weitzman et al., 1992, US; Shinn et al., 1998, US

<sup>57</sup> Bearsley et al., 2008, AUS; Tyler & Bersani, 2008, US

<sup>58</sup> Molino, 2007, US

<sup>59</sup> Pavao et al., 2007, US; Lehmann, et al., 2007, US; Fertig & Reingold, 2008, US; LaVesser, et al., 1997, US

<sup>60</sup>Browne & Bassuk, US, 1997; Wood et al., 1990, US

<sup>61</sup> Tucker et al., 2005, US

- \_\_\_\_\_ When you were a child, was there significant conflict in your family<sup>62</sup>?
- \_\_\_\_\_ Were you abused as a child by a parent or caregiver<sup>63</sup>?
- \_\_\_\_\_ When growing up, did one of your parents have addictions<sup>64</sup> and/or mental health difficulties?
- \_\_\_\_\_ Have you recently been pregnant or given<sup>65</sup> birth? If yes, did these present any significant difficulty?
- \_\_\_\_\_ Have you ever had your child/children taken into care by child welfare authorities<sup>66</sup>?
- \_\_\_\_\_ Have you been the victim of a recent sexual assault<sup>67</sup>?

**Older adults:**

- \_\_\_\_\_ In the past 12 months, have you had a sudden<sup>68</sup> accident or rapid deterioration of physical or mental health (trigger)
- \_\_\_\_\_ Have you ever had to leave home because of an abusive partner<sup>69</sup>?
- \_\_\_\_\_ Is your housing at risk of being converted<sup>70</sup> or needing significant repairs?
- \_\_\_\_\_ Are there adequate supports and programs to help you stay in your home<sup>71</sup>?

**People of Aboriginal Origins**

- \_\_\_\_\_ When you were a child, was there significant conflict or in your family?
- \_\_\_\_\_ Have you ever had to leave home because of an abusive partner?
- \_\_\_\_\_ Were you or your parents in a residential school?
- \_\_\_\_\_ Have you recently moved from a reserve or moved back and forth from a reserve?

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<sup>62</sup> Bearsley-Smith et al., 2008, AUS; Ingram, et al., 1996, US; Shelton, et al., 2009, UK; Tyler & Bersani, 2008, US; Robert, et al., 2005, CAN

<sup>63</sup> Browne & Bassuk, US, 1997; Wood et al., 1990, US

<sup>64</sup> Bassuk et al., 1997, US; Wood et al., 1990, US

<sup>65</sup> Shinn et al., 1998, US; Weitzman et al., 1992, US

<sup>66</sup> Lehman et al., 2007

<sup>67</sup> Ingram, et al., 1996, US;. Tucker, et al., 2005, US

<sup>68</sup> Gardiner & Cairns, 2002, CAN

<sup>69</sup> Gardiner & Cairns, 2002, CAN

<sup>70</sup> Shinn et al., 2007, US

<sup>71</sup> Shinn et al., 2007, US

### Appendix III: ETHOS Categories and Definitions

Operational Category		Living Situation		Generic Description
Roofless	1	People living rough	1.1 Public Space or External Space	Living in the streets or public spaces, without a shelter that can be defined as living quarters
	2	People in emergency accommodation	2.1 Night shelter (for the homeless)	People with no usual place of residence who make use of overnight shelter, low threshold shelter
Houseless	3	People in accommodation for the homeless	3.1 Homeless hostel	Where the period of stay is intended to be short term (less than a year).
			3.2 Temporary accommodation	
			2.2 Homeless transitional supported accommodation	
	4	People in Women's Shelter (VAW Shelter)	4.1 Women's shelter accommodation	Women accommodated due to experience of domestic violence and where the period of stay is intended to be short term (less than 1 year)
	5	People in accommodation for immigrants	5.1 Temporary accommodation/reception centres	Immigrants in reception or short term accommodation due to their immigrant status
			5.2 Migrant workers accommodation	
	6	People due to be released from institutions	6.1 Penal institutions	No housing available prior to release  Stay longer than needed due to lack of housing  No housing identified e.g. by 18 <sup>th</sup> birthday
			6.2 Medical institutions (including psychiatric hospital)	
			6.1 & 6.2 Penal & medical institutions	
			6.3 Children's institutions/homes	
7	People receiving longer-term support due to homelessness	7.1 Residential care for older homeless people	Long stay accommodation with care for formerly homeless people, normally more than one year	
		7.2 Supported accommodation for formerly homeless people		
Insecure	8	People living in insecure accommodation	8.1 Temporarily with family/friends	Living in convention housing but not the usual or place of residence due to lack of housing
			8.2 No legal (sub) tenancy	Occupation of dwelling with no legal tenancy, illegal occupation of a dwelling
			8.3 Illegal occupation of land	Occupation of land with no legal rights
	9	People living under threat of eviction	9.1 Legal orders enforced (rented)	Where orders for eviction are operative
			9.2 Re-possession orders (owned)	Where mortgagor has legal order to re-possess

Operational Category		Living Situation		Generic Description
		9.1 & 9.2	Rented or owned property	
	10	People living under threat of violence	10.1 Police recorded incidents	Where police action is taken to ensure place of safety for victims of domestic violence
Inadequate	11	People living in temporary/ non-conventional structures	11.1 Mobile homes	Not intended as a place of usual residence
			11.2 Non-conventional building	Makeshift shelter, shack or shanty
			11.3 Temporary structure	Semi-permanent structure such as a hut or cabin
			11.2 11.3 Non-conventional and temporary buildings	
	12	People living in unfit housing	12.1 Occupied dwellings unfit for habitation	Defined as unfit for habitation by nation legislation or building regulations
13	People living in extreme overcrowding	13.1 Highest national norm of overcrowding:	Defined as exceeding national density standard for floor-space or useable rooms	

#### Appendix IV: ETHOS questions added to the HART pilot

Please check whether you have experienced any of the following housing conditions **in the past 10 years**. Check all that apply.

- Living in a good house/apartment
- Living in an adequate house/apartment
- Living in extreme overcrowding (defined as exceeding national density standard for floor-space or useable rooms)
- Living in occupied dwellings unfit for habitation (defined as unfit for habitation by national legislation or building regulations)
- Living in temporary structure (semi-permanent structure hut or cabin)
- Living in non-conventional building (makeshift shelter, shack or shanty)
- Living in mobile homes (not intended as place of usual residence)
- Living under threat of violence (including domestic violence)
- Re-possession orders (owned) (mortgagor has legal order to re-possess)
- Living under threat of eviction (rental) (legal orders for eviction)
- Occupation of land with no legal rights
- Occupation of dwelling with no legal tenancy/sub-tenancy
- Temporarily living with family/friends
- Supported accommodation for formerly homeless people (more than one year)
- Residential care for older homeless adults
- Children's institution/home (no housing identified, e.g. by 18th birthday)
- Medical institution (stay longer than needed due to lack of housing)
- Penal institution (no housing available prior to release)
- Migrant worker's accommodation
- Temporary accommodation/reception centres (due to immigrant status)
- Women's shelter accommodation (due to domestic violence; less than one year)
- Transitional supported accommodation
- Temporary accommodation (less than one year)
- Hostel for individuals who are homeless
- Living in streets or public spaces, without a shelter
- Living in an overnight shelter, with no usual place of residence