



Chapter 3.1

Homeless Youth: The Need to Link Research and Policy

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Homeless youths are typically defined as a group of adolescents and young adults, ranging in age from approximately 12 to 24, who live in shelters, on the streets, in abandoned buildings, or who otherwise do not have an adequate place to dwell (stable, with appropriate shelter and amenities) that serves as a permanent home (U.S. Department of Education, 1989). These young people are concentrated primarily in large urban centres and, though the accuracy of estimates regarding the extent of youth homelessness is questionable, statistics from the United States suggest that numbers are increasing, with at least one million youths thought to be homeless in North America at the present time (Kidd & Scrimenti, 2004).

While there may be myriad reasons behind a given youth's becoming homeless, the research literature has highlighted some common factors. These include young people being thrown out of, or running away from, homes in which abuse and neglect are occurring (Maclean et al., 1999; Molnar et al., 1998; Ringwalt et al., 1998). Also frequent are histories of domestic violence, parental criminality and substance abuse, and poverty (Buckner & Bassuk, 1997; Hagan & McCarthy, 1997; Maclean et al., 1999; Ringwalt et al., 1998).

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On the streets, homeless youth face numerous serious risks. These include high rates of victimization (Whitbeck et al., 2000) and ongoing problems finding shelter and maintaining an appropriate diet (Antonides & Tarasuk, 1998). Drug use and dependence are common (Greene & Ringwalt, 1996), as are sex trade involvement (Kidd & Kral, 2002) criminality (Hagan & McCarthy, 1997), serious mental illness (Rotheram-Borus, 1993; Whitbeck et al., 2000), poor physical health and high incidences of communicable disease (Booth et al., 1999), and suicidal thoughts and attempts (Kidd, 2006). Mortality rates are extremely high, with conservative estimates indicating rates in Canada of up to 11 times that of the general youth population (Roy et al., 1998). Mortality rates up to 40 times greater than the average have been noted in the United Kingdom (Shaw & Dorling, 1998). Suicide is the leading cause of death for homeless youth (Roy et al., 2004).

Substantially less information is available on the services provided to homeless youths. The few studies that have been conducted generally attest to the difficulty in providing effective services for this group that achieve lasting gains in mental and physical health domains (Barry et al., 2002; Booth et al., 1999; Cauce et al., 1994; Thompson et al., 2002). The numerous and interacting risks accompanied by unstable living circumstances and structural barriers combine to hamper the effectiveness of any number of innovative and well-conceived interventions. Thus far, there is a lack of any clear distinction between the American and Canadian literature with respect to the etiology, risk, and intervention among homeless youths. Findings to date would not, however, suggest marked differences.

Of the range of factors involved in youth homelessness, socio-cultural and policy issues have received the least attention in the mental and physical health literature. This circumstance prevails despite emerging evidence that social stigma at both public (insults, physical assaults, denial of employment and housing due to homeless status) and structural (multiple arrests, inadequate funding for services) levels can significantly heighten levels of risk and hamper intervention efforts (Kidd, 2003; Shissel, 1997).

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The picture in Canada regarding policy and legislation suggests numerous areas of difficulty. Ongoing problem areas that likely compound and contribute to the problem of youth homelessness include:

- difficulty accessing income support (Gaetz & O'Grady, 2002; Raising the Roof, 2001) unemployment insurance and disability payments (City of Toronto, 2001);
- increasing criminalization and disproportionate arrests (Eberle, 2001; Novac et al., 2002; O'Grady & Greene, 2003);
- declines in affordable housing, difficulty accessing socially supported housing, increasing evictions (Kidd et al., 2007);
- breakdown in continuity of care due to child welfare service age cut-offs (ranging from 16-19) (Novac et al., 2002) and youth services age cutoffs (typically 24) (Kidd et al., 2007);
- a lack of services specific to the needs of homeless youths such as adequate discharge planning from health care and criminal justice systems (Raising the Roof, 2001).

Also lacking are employment skills training programs, acute treatment centres (e.g., detox programs) and temporary housing (Eberle, 2001), and educational programs such as alternative high schools (Josephson, n.d.).

The narratives of homeless youth reflect these barriers, filled as they are with descriptions of multiple arrests due to restrictions on their rights to use public spaces or solicit money, problems finding affordable housing or employment, and difficulties negotiating social assistance services (Kidd, 2003).

Given this situation, there would seem to be a compelling need for researchers to launch an examination of larger social processes and social policy as they affect homeless youth. The following represents a proposal for prevention and intervention efforts that might serve to better address youth homelessness. These recommendations emphasize linkages between research and policy.

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Addressing the contexts from which youths run and are thrown out

The difficulty in leaving the streets once a youth becomes entrenched in street culture (Barry et al., 2002) suggests that the greatest impact might be made with youths at risk of becoming homeless. Avenues of prevention are, however, under-represented in the literature and in service provision initiatives (Karabanow & Clement, 2004). An important direction for future work lies in examining programs that serve to

- identify and intervene with youths at risk of becoming homeless and their families in various contexts such as schools and mental health service provision settings;
- reduce the likelihood of youths becoming homeless following problematic experiences in contexts such as child welfare and criminal justice systems - both common pathways into homelessness (Karabanow, 2004);
- increase opportunities for impoverished children (e.g., after-school programs).

Policy and social stigma

Research and public policy both have the potential to substantially ameliorate the social conditions that contribute to the youth homelessness problem. Some proposed strategies in this area include the following:

- In public statements, government representatives can claim some degree of collective responsibility for the homeless youth situation, citing failures in policy and publicly funded services - rather than individual deficits or behaviours that have led to increasing numbers of children and youth on the streets.
- Challenging legislation that results in the criminalization of homeless youth and hampers their ability to access public assistance and supported housing. These challenges may be undertaken either by legislators or through legal action.
- Research can be used to highlight the extent of the social stigma faced by homeless youth, the erroneous foundations upon which stigma is based, and the damage caused by stigmatization and prejudicial policy/legislation (O'Grady & Greene, 2003). These kinds of

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data - such as work which has shown disproportionate arrests of homeless adults for primarily non-violent, minor, and victimless crimes (Snow et al., 1989) and findings that social stigma contributes to suicidality among homeless youth (Kidd, 2004) – can be used to undermine biased portrayals appearing in media and policy and increase understanding of systemic factors as they influence the lives of homeless young persons.

- More important, perhaps, is the direct impact that research can have on policy. In this arena, researchers have the potential to have a major constructive impact on the lives of homeless youth through careful examination of the various impacts of existing policy, analysis of the outcomes of emerging legislation, and evaluation of ways in which existing policy might be altered to allow for improved outcomes. Such an impact has been made previously in areas such as domestic violence, sexual harassment, and prejudice against sexual minorities (Keuhl, 2000).

Pathways off the streets

As noted above, along with the compelling need to develop an evidence base regarding the effectiveness of interventions for homeless youths, there needs to occur a careful review of funding practices and strategies in a manner informed by research. Current knowledge (Josephson, n.d.; Kidd, 2003) would suggest that the following strategies may represent a significant improvement upon existing practices:

- Funding investigation/evaluation by multidisciplinary task forces comprised of researchers and stakeholders for the purpose of generating solutions ranging from interventions focusing on individuals to changes in legislation.
- Providing funding commensurate with both the extent of the problem in terms of numbers of homeless youth and the complexity of their needs. This will include recognizing, in ongoing evaluation of funded programs, the need to measure “success” in a way that acknowledges the unique challenges of homelessness (i.e., success should not be measured solely by the number of youth who get jobs, return to school, and/or become housed; success may also mean a youth surviving the winter or using fewer harmful substances).

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- Providing sustained funding. A key to the effectiveness of interventions is the degree to which they do not resemble street existence or problematic home environments (Kidd et al., 2007). Stated differently, adequate and sustained funding allows for consistency in service provision and programming and lowers staff turnover, allowing for a thorough assessment of youth needs and the development of stable and trusting relationships with service providers.

Conclusion

At present, there are major gaps in knowledge transfer with regards to youth homelessness. Beyond publication in academic journals, there would appear to exist few examples of knowledge disseminated in practical formats to youth workers or used to inform policy development at any level. In addition to difficulties surrounding the transfer of existing findings, it is essential that research follows through on increasing calls for the development and examination of primary prevention efforts and attention to the impacts of social stigma and legislation as they impact this population. This need for academic researchers to move beyond the role of “knowledge gatherer” and engage in more active participation in policy development, evaluation, dissemination of practical and accessible knowledge, and advocacy is increasingly entering the forefront of critical examinations of various fields (Prilleltensky, 1997).

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