



## Risk and resilience among young adults experiencing homelessness: A typology for service planning



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### A B S T R A C T

**Purpose:** This study examined risk and resilience indicators in a sample of young adults experiencing homelessness to identify subgroups with different service needs.

**Methods:** Data came from a 2014 survey of homeless young adults (age 18–24) in Houston ( $n = 374$ ). Participants self-reported risk and resilience indicators which were used to fit a latent class model.

**Results:** A four-class solution was the best fit. Group-1 ( $n = 73$ ), had high adult support and low trauma. Group-2 ( $n = 60$ ) had low trauma but low adult support. Group-3 ( $n = 151$ ), had high trauma exposure, high rates of mental health problems and low substance use. Group-4 ( $n = 90$ ), had high rates across all risk variables.

**Conclusion:** Trauma, adult support, and substance use were key distinguishing features to inform screening and service planning.

### 1. Introduction

Over three million young adults ages 18–25 are estimated to experience homelessness in the United States each year (Morton et al., 2018). These young adults experience a variety of living conditions, including sleeping outdoors or in other places not meant for human habitation, using emergency shelters or transitional housing programs, and “couch surfing” (i.e., staying temporarily with friends, family, or acquaintances) that place them at risk for adverse outcomes as they make the transition to adulthood. The unique vulnerability as well as the largely untapped resilience of this population is increasingly gaining national attention, leading the U.S. Department of Housing and Urban Development (HUD) to establish ending youth and young adult homelessness as a key policy priority in recent years (HUD, 2016). The current study assists in this call by providing new information to facilitate identification of subgroups of young adults experiencing homelessness with different service needs in order to more effectively address their complex needs.

#### 1.1. Understanding risk and resilience for young adults experiencing homelessness

A large body of empirical work has documented the elevated levels

of risk indicators that are present among homeless youth and young adults (Kidd, 2012). Evidence suggests that the sources of this risk are two fold—both historical and current. Youth and young adults who become homeless are more likely to have histories of adversity and mental health problems and the conditions of being on the street lead to further exposure to adversity, stress, and high risk behaviors (Bender, Brown, Thompson, Ferguson, & Langenderfer, 2015; Narendorf, 2017). Past risk indicators focus on trauma and adverse experiences, which may occur both prior to and following entry into homelessness. Research conducted in the general population suggests that adverse childhood experiences (ACEs) such as physical and sexual abuse, parental substance abuse, and parental incarceration are correlated with a range of health and social sequelae in early and later adulthood (Felitti et al., 1998). Experiences of physical, sexual, and/or emotional abuse are particularly prevalent among homeless youth and young adults, and are a major risk factor for entering homelessness. In one study, nearly 80% of homeless young adults reported two or more types of childhood abuse, with many reporting additional victimization experiences while living on the street (Bender, Brown, et al., 2015). In addition, homeless youth and young adults experience high rates of cross-systems involvement during childhood, with engagement in the child welfare and juvenile justice systems being particularly common (Bender, Yang, Ferguson, & Thompson, 2015; Snyder et al., 2016). Although the

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concept of trauma is subjective, incorporating an individual's perceptions, emotions, and responses to an adverse or stressful event, the literature suggests that abuse, child welfare experiences, and juvenile justice system experiences are indeed traumatic for many young adults experiencing homelessness, and are associated with a variety of negative health and social outcomes (Bender, Yang, et al., 2015; Lim, Rice, & Rhoades, 2016; Snyder et al., 2016).

In addition to the high-risk situations that contribute to experiencing homelessness, the circumstances of being homeless are associated with engagement in behaviors that are considered high-risk, such as heavy use of alcohol and other drugs, trading sex for food or money, and engaging in criminal activity (Dashora, Erdem, & Slesnick, 2011; Martino et al., 2011; Wachter, Thompson, Bender, & Ferguson, 2015). Researchers have suggested that these acts may be understood as survival behaviors that young people engage in as a response to the stressors associated with being homeless or to meet their needs for food and shelter (Wachter et al., 2015). These stressors include the need for constant vigilance and self-protection while on the streets, a need that may be felt more strongly for young adults who sleep outdoors or in other places not meant for human habitation, in comparison to those who are couch-surfing or staying in shelters or transitional housing (Bender, Brown, et al., 2015). Mental health and mental distress in young adults experiencing homelessness—such as symptoms of depression and anxiety—may also serve as internal stressors that underlie high-risk behaviors such as substance use, self-harm, suicide attempts, or risky sexual behaviors (Lim et al., 2016; Moskowitz, Stein, & Lightfoot, 2013; Yoder, Longley, Whitbeck, & Hoyt, 2008). The elevated incidence of risky sexual behaviors contributes to high rates of pregnancy while homeless, with pregnancy and parenting often adding additional demands and stressors for young adults in unstable housing circumstances (Begun, 2015; Narendorf, Jennings, & Santa Maria, 2016).

An understanding of the circumstances of young adults experiencing homelessness is incomplete, however, without consideration of factors that may promote more positive outcomes (Kidd, 2012). In addition to the literature on risk factors, researchers have also examined conditions and factors that promote resilience. Resilience is a concept that reflects the process or outcome of successfully adapting to and recovering from circumstances that are perceived as stressful, threatening, or traumatizing (Thompson et al., 2016). The challenges of homelessness make it difficult for young adults to complete their educations and pursue employment, so milestones such as attaining a high school diploma and securing paid employment have been conceptualized as sources of resilience (Ferguson, Bender, & Thompson, 2015; Rahman, Turner, & Elbedour, 2015). For example, homeless young adults who secure legal wage-earning jobs are less likely to resort to illicit or illegal means of obtaining money that can be very high-risk, such as stealing or selling drugs (Ferguson et al., 2015).

In addition, an emergent literature documents the importance of access to social capital and social support for homeless youth and young adults, such as having relationships with reliable adults or positive peers from whom they can receive instrumental or emotional support (Barman-Adhikari & Rice, 2014; Dang, Conger, Breslau, & Miller, 2014). Such support is linked to positive outcomes, such as lower likelihood of engaging in drug use or risky sexual behaviors and greater engagement in services (Barman-Adhikari & Rice, 2014; Barman-Adhikari et al., 2016; Ferguson & Xie, 2012). Connections with stable adults who can act as natural mentors are particularly important for helping vulnerable youth and young adults function to the best of their potential and pursue future goals (Dang et al., 2014; Munson, Brown, Spencer, Edguer, & Tracy, 2015).

### 1.2. Data-driven typologies of youth and young adult homelessness

Despite the extensive literature on risk and resilience for homeless youth and young adults, a remaining challenge is to better understand

how different risk and resilience factors may be related, and to distill this information in a concise way to inform policy and service provision. One method of accomplishing this aim is to use data-driven approaches to develop typologies delineating categories of homeless young adults that have varying risk and resilience profiles (Toro, Lesperance, & Braciszewski, 2011; U.S. Interagency Council on Homelessness, 2012). These categories can then serve as a basis for targeting health care, housing, and other services.

Prior work has used cluster analysis and latent class analysis techniques to develop data-driven typologies, using data collected from homeless youth and young adults in diverse settings. Early typologies framed risk in terms of distinguishing youth based on the circumstances that led to their homelessness, delineating categories such as runaways (those who leave home by choice), throwaways (youth who are kicked out), systems youth (youth who become homeless after exiting the child welfare or juvenile justice systems), and street youth, who may not be literally homeless but spend much of their time on the street (Rahman et al., 2015; Toro et al., 2011). One study found that clusters of homeless youth, grouped based on reasons for becoming homeless, varied in their likelihood of receiving different services; for example, youth whose homelessness was tied to leaving abusive situations were more likely to receive medical services (Heinze, Hernandez Jozefowicz, Toro, & Blue, 2012). However, such typologies are limited because these categories are not mutually exclusive and do not capture the reality that young people often become homeless for a number of intersecting reasons (Toro et al., 2011). Further, the practical utility of categorizing youth and young adults by cause of homelessness is questionable, as needs for services and resources may vary more according to present circumstances and personal characteristics than by their reasons for becoming homeless.

Addressing these limitations, some typologies have integrated a variety of risk characteristics experienced by young people either prior to or since becoming homeless, such as drug use, mental health diagnoses, involvement in criminal activity, or experiences of abuse and victimization (Bucher, 2008; Heinze et al., 2012; Hodgson, Shelton, & Bree, 2015). Other studies have incorporated resilience factors—such as education, employment, and social support—along with risk to develop typologies (Kort-Butler & Tyler, 2012; Milburn et al., 2009). In general, these prior studies have found that distinct groups of homeless youth and young adults can be identified on the basis of differing clusters of risk and resilience factors. For example, Milburn et al.'s (2009) study identified three clusters of newly homeless youth, described as protected, at-risk, and risky, on the basis of their response patterns related to six risk factors (e.g. substance use, emotional distress, and unprotected sex) and five protective factors (e.g. good health, school attendance, and employment). Kort-Butler and Tyler (2012) took a different approach, using cluster analysis to identify groups on the basis of service use patterns, and then highlighting differences in risk and resilience factors between these service-based clusters. The young people with the highest number of risk factors, such as having a physical and sexual abuse history, engaging in risky sexual behavior, and spending more nights on the street, appeared to use the greatest number of services.

Beyond adding to the research literature, some researchers have suggested that empirical typologies of homeless youth and young adults could be used to develop assessment tools and inform service planning (Bucher, 2008; Heinze et al., 2012; Kort-Butler & Tyler, 2012; Milburn et al., 2009). However, there are few examples of community-based research partnerships to bridge this research-to-practice gap. One example is the Transition Age Youth (TAY) Triage Tool, which was developed using data from a survey of 646 homeless youth in Los Angeles (Rice, 2014). In consultation with homeless service providers and other stakeholders, analysis of the survey data yielded a six-item triage tool to identify youth with the highest level of needs who should receive priority for permanent supportive housing. Although an important contribution, this tool only helps to identify young people at high risk of

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