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## International note: Association between perceived resilience and health risk behaviours in homeless youth

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## ABSTRACT

Homeless youth are regarded as an extremely high risk group, susceptible to suicidal ideation substance abuse, and high rates of mental illness. While there exists a substantial body of knowledge regarding resilience of homeless youth, few studies has examined the relationship between perceived resilience and health risk behaviours. The present study describes the findings from a quantitative examination of street-related demographics, resilience, suicidal ideation, substance abuse, sexual risk behaviours and violent related behaviours among 227 homeless youth. The findings revealed that perceived resilience was negatively related to suicidal ideation, substance abuse and violence. Suicidal ideation was positively related to both substance abuse and violence, whilst violence and substance abuse were positively correlated. Multiple regressions showed that perceived resilience served as a protective factor for suicidal ideation and having multiple sexual lifetime partners, suggesting that youth with lower level of perceived resilience were more likely to engage in various health risks behaviours.

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Homeless youth are regarded as an extremely vulnerable group, susceptible to suicidal ideation, substance abuse, and high rates of mental illness (Cleverley & Kidd, 2011; WHO, 2011). Despite the challenging environment in which they live and the health risks associated to their context, homeless youth are generally regarded to be resilient (Theron & Malindi, 2010). While there exists a substantial body of knowledge regarding resilience of homeless youth (Malindi, 2014; Theron & Malindi, 2010), few studies have examined the relationship between resilience and health risk behaviours. Most of the studies that have examined the association between mental health constructs such as loneliness, suicidal ideation and resilience among homeless youth (Cleverley & Kidd, 2011; Kidd & Shahar, 2008; Rew, Taylor-Seehafer, Thomas, & Yockey, 2001) have been conducted in developed Western countries. There are currently no data regarding resilience and health risk behaviours within the Sub-Saharan Africa. Given that socio-cultural factors influence resilience significantly, it is therefore important to examine how resilience influences other health risk behaviours of homeless youth in sub-Saharan Africa. To the researchers' best knowledge; we are unaware of any similar research that has been conducted using a sample of homeless youth in Ghana.

The purpose of the study was therefore to examine the association among the key health risk behaviours (suicidal ideation, substance abuse, violence and sexual risk) and perceived resilience as a protective factor in a sample of street youth in Accra, Ghana. It is expected that a negative significant relationship would exist between perceived resilience and each of

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the health risk indices. We further hypothesized that a significant positive relationship between each of the health risks behaviours would be found to account for the clustering effect of youth risk behaviours. It was hoped that the study would contribute to the lack of information about how resilience acts to ameliorate the effects of health risk behaviours among street youth.

## Method

### *Participants and procedure*

A cross sectional survey was conducted among 227 homeless children and adolescents conveniently selected in the Central Business District of Accra, Ghana. Male constitutes 54% of the sample with ages ranging from 8 to 19 years with a mean age of 12.58 (SD = 2.51). Over 59% of the participants subscribed poverty as the main reason for them being homeless and about 25% mentioned physical and sexual abuse as reasons. The data was collected through an interviewer-administered questionnaire due to low levels of education among youth. The aims and objectives of the study, the voluntary nature of participation, confidentiality and anonymity of data were discussed with participants in their preferred language and informed consent was obtained.

### *Measures*

The Connor-Davidson Resilience Scale (CD-RISC; Connor & Davidson, 2003), a brief self-rated assessment was used to help quantify perceived resilience in a form of 25 items with responses in a form of 5–point Likert scale ranging from 0 (not true at all) to 4 (true nearly all the time). The tool includes five dimensions, which are focused on personal competence, tolerance of negative effects, adaptability, control and spiritual influences. A Cronbach's alpha of 0.90 for CD-RISC was calculated in this study.

Health risk behaviours namely substance use, sexual risk behaviours, suicidal ideation, and violent behaviours were measured using adapted questions from the South African Youth Risk Behaviour Survey (Reddy et al., 2010). Five questions were asked to assess substance use while four questions were used to assess the frequency of suicide-related thought and behaviours. In these measures, higher scores related to higher levels of substance use and suicidal ideation respectively. A violence scale consisting of 11 questions assessed specific behaviours related to violence, violence related and aggressive behaviours among street children. In this study the measures for substance use, suicidal ideation, and violent behaviours yielded Cronbach's alpha values of 0.81, 0.75 and 0.72 respectively. Participant's sexual activity was assessed based on 4 questions enquiring into sexual behaviour.

### *Data analysis*

The Pearson *r* was used to examine the relationship between perceived resilience and the four main health risk behaviours, and a standard multiple regression analysis was used to predict resilience on the evidence of the 4 main health risk behaviours. The Statistical Package for the Social Sciences version 21.0 for Window (IBM SPSS) was used for data analysis.

## Results

In terms of health risk behaviours about 69% of the participants were sexually active and only 17% indicated to have used condoms in their last sexual activity in the past month. Over half (55%) had multiple sexual partners, and 53% of the street children have had sex in exchange for food, money, clothes or even a place to sleep. Approximately 80% reported having used alcoholic beverages and about 26% and 28% reported to have made a plan to commit suicide and attempted suicide on one or two occasions respectively. We found that street youth who were having suicidal ideation were abusing substance and engaged in violence-related behaviours.

Table 1 shows the correlations between health risk behaviours and perceived resilience in street children and adolescents. Engagement in health risk behaviours were associated with low levels of resilience, suggesting that street adolescents who had lower perceived resilience at the time of the study were also experiencing higher levels of suicidal ideation, substance abuse, engaging in violent activities, had multiple sexual partners and engaged in some form of survival sex. Regression analysis (Table 2) showed resilience was protective of suicidal ideation ( $\beta = -.44$ ;  $t = -5.79$ ;  $p < .001$ ) and multiple sexual lifetime partners ( $\beta = -.32$ ;  $t = -3.71$ ;  $p < .001$ ) Street adolescents who reported high levels of suicidal ideation and had two or more sexual lifetime partners tended to have low levels of resilience.

## Discussion

The findings of this study showed that perceived resilience in the sample of homeless youth was significant and negatively correlated with suicidal ideation, substance use and violence. Stronger perceived resilience was therefore associated with lower levels of exposure to health risk behaviours among homeless youth. Consistent with previous studies conducted in developed countries (Cleverley & Kidd, 2011; Rew et al., 2001), street youth perceived resilience was associated with less suicidal ideation and other life threatening behaviours. It is likely that street youth, who are resilient, access and mobilize

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