

**HOW HAVE YOUTH EXPERIENCED TRYING TO GET  
OFF THE STREET: WHAT  
HAS HELPED AND HINDERED**

by

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A THESIS SUBMITTED IN PARTIAL FULFILLMENT OF THE  
REQUIREMENTS FOR THE DEGREE OF

**MASTER OF ARTS**

in

**THE FACULTY OF GRADUATE STUDIES**

**(Counselling Psychology)**

THE UNIVERSITY OF BRITISH COLUMBIA

(Vancouver)

April 2008

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## Abstract

The experience of how youth get off the street is scarcely documented. The present study explored what helped and hindered youth in their experience as they tried to get off the street and addressed the following research question: “How have youth experienced trying to get off the street: what has helped and hindered?” Twenty youth, aged 19-24 years of age, living in Vancouver, British Columbia, Canada who have spent time living on the street were interviewed using Flanagan’s (1954) Critical Incident Technique. The qualitative analysis of the interviews identified 259 critical incidents, forming nine helping categories and six hindering categories when youth tried to leave the streets. The nine helping categories included: (1) Taking Responsibility, (2) Engaging in Constructive Activities, (3) Friends and Family Support, (4) Changing Drug and Alcohol Use, (5) Support from Professional Organizations, (6) Disillusionment of Street Life, (7) Dreams and Hope for a Different Future, (8) Income Assistance and (9) Leaving Negative Influences Behind. The six hindering categories were: (1) Drugs and Alcohol, (2) Emotional Struggles, (3) Lack of Support, (4) Enjoyment of Homelessness, (5) Limited Formal Education, Life Skills and Employment and (6) Income Assistance Difficulties. The results from this study are discussed in relation to implications for theory, practice and future research.

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## Acknowledgements

There are a number of people whom I am very grateful to as I journeyed through this stage of my life.

To my committee members. Thank you to Norm Amundson for your gentle and insightful direction. You have been integral from the beginning of the thesis proposal to the end of the thesis. To Marv Westwood, thank you for your inspiration both in group counselling and your inquiries about my progress. To Ishu Ishiyama, I have learned so much from your quiet and non-intimidating presence. I feel very grateful to have had the three of you on my committee.

There have been others along my journey that has been inspirational, kind and caring. Douglas Cave, your teachings have been a constant source of inspiration to me! Suzanne, we stuck through it together and you were there for me during the tough times. Dianne, your guidance and patience through the ethics process meant more than you can imagine. Karen, you were more than helpful during the analysis process, thank you.

Covenant House, your enduring support over the last five years has been overwhelming. You have shown nothing but appreciation both professionally and academically. Without your support this thesis would have been near impossible to complete.

And finally to the youth I work with everyday, your resiliency is an inspiration to me. Without you sharing your experiences, this project would not have been possible. Thank you, thank you, and thank you.

## CHAPTER I

### INTRODUCTION

#### Background

On March 15, 2005 there were approximately 296 youth under age 25 in Vancouver who were calling the street their home (Greater Vancouver Homeless Count, 2005). Most homeless youth live their day to day lives outside with short reprieves indoors when drop-in spaces are open, or when the security guards at the malls don't notice as they hang out in the common areas. If they have "friends" who live inside and are allowed to have guests, they spend short periods of time with them which is often considered a bonus. For the most part however, their existence is on the street.

Before the street became their home these youth often had come from abusive, violent, conflict ridden and neglectful situations so leaving was one way to escape the maltreatment (MacLean, Embry & Cauce, 1999; Whitbeck, Hoyt & Ackley, 1997). Tyler, Hoyt and Whitbeck (2000) found that 33% of homeless youth suffered from sexual abuse and, according to Tyler and Cauce (2002), more than 50% have experienced physical abuse and/or neglect. Mallett, Rosenthal and Keys' (2005) study found several pathways to homelessness and, in all situations, intense family conflict was present. Given these home circumstances youth either directly go to the street ("runaway" youth) or are removed from the home by a government agency due to the perceived harm they are experiencing ("systems" youth). Sometimes youth make the street their home because their family demands them to leave ("throwaway" youth) (MacLean et al., 1999).

Given these backgrounds it is not surprising that homeless youth have higher than usual rates of mental health concerns and behavioral problems which include anxiety,

depression, posttraumatic reactions, drug and alcohol abuse and aggressive deviant behaviours (Cauce, 2000). Once on the street the youth find it difficult to meet their basic needs and rarely have enough food or shelter. They will often engage in prostitution or crime to fulfill their basic needs (McCarthy & Hagan, 1992). There is also a danger of physical and sexual assault which are common to the street environment. According to Whitbeck et al. (1997), this victimization on the street can be directly related to their abusive family backgrounds. More specifically, Tyler et al. (2000) found early sexual abuse increased the likelihood of sexual victimization among street youth due to high risk behaviours increasing their probability of sexual victimization. In Chen, Tyler, Whitbeck, and Hoyt's (2004) study early sexual abuse among female street youth not only increased their chance of sexual victimization on the street, but also increased their likelihood to use hard drugs, specifically cocaine.

Homeless youth do use significantly more drugs and alcohol than non-homeless youth. However, Smart and Adlaf (1991) found that the drug and alcohol use among street youth is a response to their dysfunctional and hazardous environment and not directly related to their familial backgrounds. The use of drugs and alcohol to cope with this stressful environment has also been shown to increase depression levels which, in turn, increase the youth's stress (Ayerst, 1999). With this increased depression, Kidd (2004) found the youth had feelings of being worthless and lonely which led to feelings of being trapped and often having suicidal thoughts and attempts.

This background of what leads a youth to homelessness, and then life on the street, is not a pleasant image. As someone who has worked directly in the field for the past four years at a crisis shelter, as well as a transitional living program for youth from the street, I am interested in not what leads the youth to the street, or what it is like on the



street, but rather I am interested in their experiences as they have tried to get off the street. Specifically, I am interested in what has helped and hindered them in their efforts to break free and start a new life style. My research question is: “How have youth experienced trying to get off the street: what has helped and hindered?” I am hoping to seek answers from those with the experience and knowledge themselves, the youth. I have ideas which may help answer this question from a youth worker perspective which I will speak more about in the Method chapter of the study.

### **Rationale for Study**

Youth homelessness in major cities of North America, with Vancouver, Canada being no exception, seems to be prevalent. The 2005 Greater Vancouver Homeless Count totaled 296 youth under the age of 25 calling the street their home. The US Department of Housing and Urban Development calculated 1.6 million young people between the ages of 12 and 17 as homeless in the US in 1999. Cauce (2000) estimates youth make up about a quarter of all people who are homeless in the United States and are the most understudied segment within the homeless population which itself is already understudied.

According to Karabanow and Clement (2004) most of the literature concerning street youth focuses on the reasons and causes for being on the street. The research that is available does not have long term outcome evaluations of interventions to provide street youth due to the transient nature of the street youth population. Not only is there very little research on interventions to provide youth who are homeless, there is a need to generate more information regarding exiting street life, specifically, what has helped youth have successful transitions from homelessness. Hearing from the youth themselves

regarding their experiences is significant as their experiences are authentic. For future considerations, research can focus on preventions for at-risk youth to prevent homelessness and interventions to foster the resilience of the youth who are attempting to leave the street.

### **Purpose of the Study**

The purpose for the following study was to understand through the youth's experience what has helped and what has hindered them from leaving the street. Twenty youth, aged 19-24 years of age were interviewed and Flanagan's (1954) *Critical Incident Technique* (CIT) was used. Specifically, the research question to be addressed is '***How have youth experienced trying to get off the street: what has helped and hindered?***' The youth identified factors that were influential in their experience of trying to get off the street. Using CIT a list of categories emerged which identified what helped and what hindered the youth while trying to get off the street. This is a qualitative research method and, as outlined by Butterfield, Brogen, Amundson and Maglio (2005), a total of eight of nine credibility checks were used to ensure the credibility and trustworthiness of the findings.

The use of these interviews illuminate the experience of the youth and provide valuable information to service providers, educators, policy makers and government systems who work with homeless youth. The information that is generated will also be significant in informing the practice of counselling at-risk youth, youth who are homeless and youth who have successfully left the street. Further, the results from this study may help to inform the literature and possible best practice approaches for working with youth who call the street their home.

## CHAPTER II

### **REVIEW OF THE LITERATURE**

Leaving your home behind is often not easy. When your home is the street it can be even more complex. After researching this phenomenon, several themes emerged and are of significance regarding youth who are living on the street. The literature that will be reviewed focuses on the following three areas: (1) – life before the street, (2) - life on the street, and (3) – interventions.

#### **Life before the Street**

Before a youth makes the street their home, their existing home life is often very chaotic, conflict laden and violent. Poverty, familial psychiatric illness, physical abuse, neglect and sexual abuse are common among street youth (Hagan & McCarthy, 1997; MacLean et al., 1999; Whitbeck et al., 1997). In Cauce's 2000 study on the characteristics and mental health of homeless youth, the results regarding the youth's home life seem to be substantial and representative of chaos:

- 55% reported their mother had substance abuse problems and 84% reported their mothers had a problem with the law
- 52% reported their father had substance abuse problems and 70% reported their fathers had a problem with the law
- 33% had been in a foster care placement
- 51% reported being physically abused before leaving home
- 60% girls reported sexual abuse and 23% boys reported sexual abuse before leaving home

Tyler (2006) also found parental substance misuse, criminal activity and child maltreatment as the three main reasons why youth end up leaving home. She categorized leaving home into three themes; running away, foster care and detention. The youth who

ran away usually were running from abuse. The youth in foster care were removed because of abuse and neglect. The detained youth was due to the youth continually running from home and foster care placements so placing them in detention was a secure facility for the government to use. In addition to Tyler's study (2006), MacLean et al. (1999) and Cauce (2000) investigated whether the reasons for separation from the family had psychological affects on the youth once on the street. Their findings point to the traumatic experience of being homeless as the cause of high rates of distress and victimization versus the youth's family background situation.

There have been four identified reasons why a youth leaves their home prematurely (Lindsey, Kurtz, Jarvis, Williams, & Nackerud, 2000):

1. to find excitement or adventure (running to)
2. to escape conflictual or dangerous family situations such as alcoholism, violence, or neglect (running from)
3. because they are alienated from their families who have given up on them and because they are in trouble with school or the law (thrown out)
4. because their families can no longer financially support them (forsaken)

Girls were more likely to have been sexually abused and usually fell into category two because they ran from home. Boys, on the other hand, were usually physically abused and did not run from home but were more often than not thrown out of their home which puts them into category three (Cauce, 2000). Many youth who fall into category four are put into foster care and often the youth on the street are running from their foster care placements or have been in foster care at some point in their life (Lindsey et al., 2000). According to Chernoff in Pearce & Pezzot-Pearce (2001), 92% of youth in foster care have at least one abnormality in a body system, 25% fail vision screens, 16% fail hearing

tests and 35% to 85% of children entering foster care have significant mental health problems. None-the-less, being removed from the home by the government and put into foster care is a pathway into street life for a significant number of youth (Cauce, 2000).

Tyler & Cauce (2002) interviewed 372 homeless youth on the subject of early physical and sexual abuse. Half of the sample reported being physically abused as a child with the duration lasting one to sixteen years. As for sexual abuse, 29% indicated they were sexually abused as a child with the duration being between one and twelve years. The youth who were physically abused had three or more perpetrators abuse them. The sexually abused youth usually had only one perpetrator. For both physical and sexual abuse the majority of the perpetrators were the parents with the second most likely perpetrator being step, adoptive or foster parents.

These types of backgrounds may also add to street youths' high rates of depression, drug and alcohol abuse, sexual, emotional and behavioral problems. Mallet et al. (2005) point out that there is a debate as to whether drug and alcohol use by family members or the youth is a cause or consequence of homelessness. They found four pathways in youth's leaving home stories involving drug use with family conflict being a significant contributing factor:

1. Youth's drug/alcohol use →family conflict→homelessness
2. Family conflict→youth's drug/alcohol use→homelessness
3. Family conflict→homelessness→youth's drug/alcohol use
4. Family member(s) drug/alcohol use→family conflict→homelessness

This type of home life can lead one to argue the street youth phenomenon is more about structural dysfunction than personal pathology (Karabanow & Clement, 2004).

## **Life on the Street**

Once on the street the youth find it difficult to meet their basic needs and rarely have enough food or shelter. They will often engage in prostitution or crime to fulfill their basic needs (McCarthy & Hagan, 1992). They also exhibit disproportionately high rates of emotional and behavioral problems including depression, anxiety, posttraumatic reactions, sexual problems, drug and alcohol abuse, delinquent acting out and aggressive behaviors (Cauce, 2000 & Karabanow & Clement, 2004). Street youth also suffer from high rates of victimization which include physical assault, rape and police hassling (Cauce). Stewart et al. (2004) studied victimization amongst street youth and found the following:

- 82.7% homeless youth were exposed to either physical or sexual victimization since leaving home
- 44.2 % were physically victimized
- 31.0% were both physically and sexually victimized
- 6.4% were sexually victimized
- Males were more often physically victimized and females were more often subject to sexual victimization
- Victimization was also more likely among those with a history of child physical abuse but not among those with a history of child sexual abuse

An abusive family background has been shown to have a strong association with street victimization of youth and, indirectly, it has increased the deviant behaviours of street youth and who they become associated with. It seems as though abusive families may provide “basic training” for deviant behaviours (Whitbeck et al., 1997). Early sexual abuse of females is an indicator that female youth will run away at an earlier age than females not sexually abused, spend more time on the streets, participate in survival sex or trade sex to meet their basic needs and be sexually victimized on the street (Tyler et al., 2000 & Tyler et al., 2001). These females also have a high rate of hard drug use, specifically cocaine (Chen et al., 2004). Among victimized youth, an American study of

301 youth showed 17.7% had symptoms that would fit a PTSD diagnosis with females in the study exhibiting 21.4% and males 14.7% of the PTSD criteria (Stewart et al., 2004).

As mentioned previously, Cauce's study (2000) on the characteristics and mental health of homeless adolescents found that two thirds of the homeless youth interviewed had one or more psychiatric diagnoses based on the DSM-III-R, with disruptive behavior disorder being the most common. The prevalence of disruptive behavior was higher among boys, and girls met the criteria for posttraumatic stress disorder more often than boys. The most striking finding in the study was the extremely high rate of youth whom qualify for a diagnosis of schizophrenia. Ayerst (1999) found that street youth with a self reported history of maltreatment experienced depression at levels 20% higher than non-street youth and higher stress levels. Forty-eight percent of the youth reported, however, that their level of depression and stress on the street was lower than it was while living at home. One of the coping mechanisms street youth use when depressed and stressed was to use drugs and self harm. Smart and Walsh (1993) found that the best indicator of depression in street youth was the length of time they had spent in shelters and low self-esteem. Smart and Adlaf (1991) showed one third of youth had high levels of depression with half of those youth stating they attempted suicide. Kidd (2003/2004) found, with the increased depression and stress levels, the youth had the experiences of feeling trapped, worthless, lonely and hopeless which often led to suicidal thoughts and actions. Youth often appeared to be optimistic and happy, however they were often lonely and their acts of suicidal attempts showed their emotional lives (McCarthy & Hagan, 1992).

Drug and alcohol use among street youth has a lot to do with their environment which is hazardous and dysfunctional versus mainstream youth who used drugs for social reasons. The prevalence of substance use was higher among Toronto street youth in

contrast to other youthful populations with the average alcohol consumption being three times greater than the average for comparable aged youth. For some drugs such as cocaine, LSD and heroin, the rates of use were 10 times higher (Smart & Adlaf, 1991). Adlaf and Zdanowicz (1999) suggested eight clusters of street youth; (a) Entrepreneurs, (b) Drifters, (c) Partiers, (d) Retreatists, (e) Fringers, (f) Transcenders, (g) Vulnerables and (h) Sex Workers. All the street youth in any given cluster showed alcohol, drug and dual substance disorders in varying degrees. Retreatist, however, who were “distinguished by their high coping motivation for substance use” (p. 639) displayed the highest rates of substance problems.

The street environment is often influenced by drug using peers, a criminal lifestyle that financed heavy drug use and typically lack of employment which caused further removal from mainstream society and an increased use of drugs and alcohol. Heavy alcohol use concurred with limited job experience and employment while marijuana and psychedelics were associated with the street lifestyle of drug using peers. Youth who were successful drug traffickers and participated in property crime smoked marijuana and used psychedelics more regularly. The use of hard drugs was an indicator of parental drug use and the length of time homeless (Baron, 1999). After a youth leaves home McCarthy and Hagan (1992) reported the majority of illegal activity, which included the use and selling of drugs, was significantly greater. A coping mechanism for many street youth to deal with their problems was to use marijuana and alcohol. They served as a way to relax and escape from the stresses of street life (Kidd, 2003).



## **Interventions**

“Effective interventions tend to build on people’s strengths; to involve elements of participation, self-help, and mutual support; and to offer the least stigmatizing approach” (Karabanow & Clement, 2004, p. 94). There seems to be three areas to consider for the most appropriate type of intervention: 1) intensive services that are integrated into a continuum of care, 2) services that are flexible and forgiving, allowing the youth to make errors but try again and 3) workers who have the appropriate clinical skills to provide effective treatment (Cauce & Morgan, 1994; Jarvis & Kurtz, 1991; Karabanow & Clement). There are four broad areas which fall into the continuum of care and Karabanow and Clement depict the areas in Figure 1 below. The street youth access services which fulfill their basic needs and continue with accessing services, or a combination of services, depending on their further needs. Until a youth’s basic needs

[Figure 1 has been removed due to copyright restrictions. The figure titled “Conceptual Diagram of Services Offered to Street Youth” is such that there is one component in the center (Basic Needs; Food, Shelter, Safety) and three separate components rotating around it (1. Medical Services, 2. Therapy and Counseling, 3. Social Skills) (Karabanow & Clement, 2004).]

are met, counselling and skill-building interventions will be very minimal (Maslow, 1943). Shelters and drop-ins are the most common services used by street youth and

drop-ins are used the most due to their flexibility (Karabanow & Clement; Stewart et al., 2004).

Cauce and Morgan (1994) found an integrated program approach that focused on: (a) increasing youth's daily living and coping skills, (b) increasing self-esteem and reducing levels of risk taking behaviors, (c) providing support and advocacy for youth and (d) increasing youth's access to needed resources by changing their environment which is integral in decreasing symptoms of depression, problem behavior, and substance abuse and increases in self-esteem. They feel the two greatest mechanisms for change are; (a) receiving appropriate community based services and (b) developing a positive relationship with a one-to-one worker. Kidd (2003) recommends working with street youth and cultivating their existing strengths. This would entail developing positive problem-focused coping strategies and moving towards developing constructive social support. It would also entail youth obtaining their education and focusing their anger and energy by involving themselves in advocacy.

Lindsey et al. (2000) carried out a study of youth who have navigated through homelessness and were successful in their transition out of homelessness found two main dimensions of success; personal strengths and resources, and help received from others. The first dimension, personal strengths and resources, were further broken down into three categories: 1) learning new attitudes and behaviours, 2) personal attributes and 3) spirituality. Learning new attitudes and behaviours was based on what the youth learned about themselves and the process of being in a relationship with others and how they learn from others. Self-confidence, self-love, and how to take care of themselves were the main areas the youth learned about on their own. When learning about being in relationship with others the youth discovered how to be more considerate, take

responsibility and how to get along, trust and accept help from others. Part of the process was also to realize who not to have in their lives and be a better judge of character.

According to the youth, personal attributes were not considered learned traits but rather qualities the youth had that allowed them to deal with difficult times. Some of these attributes were responsibility, sense of independence, maturity and being strong for other people. The final personal strength and resource identified by the youth was spirituality. Spirituality referred to the youth's faith in God or a higher power which allowed them to create success in their lives.

The second dimension of success for youth who have successfully navigated through homelessness and were successful in their transition out of homelessness was help received from family members, friends and professionals. Four categories emerged: 1) caring, 2) setting boundaries and holding youth accountable, 3) concrete assistance and 4) professional intervention. According to the youth, caring referred to "individual attention, unconditional acceptance, nonjudgmental listening, and emotional support" (p. 388). Setting boundaries and holding youth accountable meant being straight forward and challenging while also having consequences and setting boundaries. Temporary shelter, rides, groceries and financial assistance were examples of concrete assistance the youth were grateful for. Lastly, professional interventions referred to conversations with staff, counselling or therapy and residential treatment received from professionals (Kurtz, Lindsey, Jarvis & Nackerud, 2000).

Williams, Lindsey, Kurtz and Jarvis' (2001) study on the resiliency development of former homeless youth found four themes that assisted the youth to be successful in leaving the street; determination, meaning and purpose in life, self-care and readiness to accept help. Determination included developing self-confidence, perseverance in

accomplishing goals, inner strength and pride. Seeing the big picture, or finding meaning and purpose in life, entailed hope and gratitude, spiritual connections and a greater sense of being in a relationship with others. Caring for self was referred to as learning new behaviours and attitudes which enabled the youth to take care of themselves. Accepting help from others was not only about being ready to accept help, but it also involved the quality of help the youth received. Help they received that was more consistent seemed to prove most helpful to the youth when they were ready to accept it.

Karabanow (2005) interviewed youth from Vancouver, Montreal, Toronto, Ottawa and Halifax and investigated the layers and dimensions it took for the youth to leave the street. Six layers emerged within the exiting process: 1) precipitating factors to want to leave street life, 2) the courage to change, 3) securing the help needed to leave, 4) transitioning from the street, 5) a change in routine and lastly, 6) successful exiting. The precipitating factors for youth to want to leave the street ranged from facing a traumatic event, questioning street life, experiencing boredom and fatigue with street life, becoming worn down on the street and deciding enough was enough. The courage to change entailed increased responsibilities, having supportive family and friends, being motivated and committed and having someone who really cared about them. Securing the help needed to leave the street meant accessing services which included detox and treatment facilities and using drop-ins. It also involved searching for a job, apartments, supportive housing, structured programs and school. Transitioning from the street literally meant the youth left the downtown core and they slowly cut ties with street culture and built networks of non-street friends. The youth also participated in non-street activities while gaining an increase in self esteem. A change in routine was going to school or work, having future dreams and being healthier, happier and more driven. Lastly, successfully

exiting the street for the youth meant being in control and having direction, stability, feeling proud, enjoying life and being able to take care of themselves.

A study with youth from Calgary and Lethbridge focused on the challenges and barriers as to why youth felt they could not get off the street. The main reasons for not being able to change were due to limited finances, lack of education, employment limitations, stress, despair, boredom, loneliness and alienation. Optimism and determination and trying to keep in touch with friends and family were some of the coping strategies youth from Calgary and Lethbridge felt they used (Miller, Donahue, Este & Hofer, 2004). Similarly in Winnipeg, a study with youth who had made the decision to transition off the street found the youth used the assistance of another person to help find them secure and stable accommodation and financial assistance (Wingert, Higgitt & Ristock, 2005).

In 1997 the Office of Alcohol, Drugs and Dependency Issues of Health Canada completed a Street Lifestyle Study. In this study they looked at the youth's experiences of getting off the street, and the barriers and opportunities that existed for the youth while trying to leave the street. The barriers that kept youth on the street were the freedom of street life, friendships, money, drugs and the fear of leaving the streets and transitioning to mainstream society. A critical event, disillusionment, bottoming out, fear and taking on responsibility were the factors that influenced the youth's decision to leave the street. Once the youth left the street and found a place to live, they required professional help and eventually got work or went back to school (Caputo, Weiler & Anderson, 1997). Likewise, a study of youth who were homeless and then reduced their drug use or completely gave up their problematic drug use found positive changes in their lives in four areas; improved relationships with family, supportive partners entered their lives,

with who and where they were living improved and, eventually, they moved to more stable accommodation. Lastly, gained employment seemed to go hand in hand with these improvements due to controlling their problematic drug use (Keys, Mallett & Rosenthal, 2006).

Based on the existing literature, a case to use early intervention before homelessness can be made when working with street youth. When a youth becomes homeless they develop an entire set of new problems due to the nature of street life. This makes their move back into mainstream society even more difficult and less likely (Bronstein, 1996). Keeping this in mind, once a youth has become homeless there is a need to consider the “voices” of the youth themselves and answer the research question qualitatively while focusing on the strengths of the youth. There is little qualitative research on homelessness, less research on youth homelessness and a sparse amount of research on the exiting process from the street (Karabanow & Clement, 2004). It is important to learn from the stories and experiences of the youth themselves and use the strengths they identify as the key to successful problem solving rather than have a problem-focused perspective which understands the reasons why the youth go to the street and what it is like on the street.

## CHAPTER III

### METHOD

#### Qualitative Method

Qualitative research looks to highlight, understand and extrapolate findings. It is used to better understand a phenomenon which little is known about or to gain new perspectives and more in-depth information on something that may be difficult to convey quantitatively (Hoepfl, 1997). Denzin and Lincoln (1994) define qualitative research as:

Qualitative research is multimethod in focus, involving an interpretive, naturalistic approach to its subject matter. This means that qualitative researchers study things in their natural settings, attempting to make sense of or interpret phenomena in terms of the meanings people bring to them. Qualitative research involves the studied use and collection of a variety of empirical materials – case study, personal experience, introspective, life story, interview, observational, historical, interactional, and visual texts – that describe routine and problematic moments and meaning in individuals' lives. (p. 2).

At present we are in a post-modern research paradigm and qualitative research can bring a contribution to society and the world in general (Gergen, 2001). According to Cauce (2000) she estimates youth make up about a quarter of all people who are homeless in the United States and are the most understudied population within the homeless population. With this knowledge, hearing the youth's stories and what they felt did help them or can help them leave the street will be important to add to the already existing literature.

#### Critical Incident Technique

More specifically, Flanagan's (1954) Critical Incident Technique (CIT) is important for this kind of knowledge because it is a method that follows a set of

procedures to observe and record human behaviour. These observations are then used to answer practical problems or questions such as the research question: “How have youth experienced trying to get off the street: what has helped and hindered?”

The Critical Incident Technique was developed by John Flanagan (1954) during World War II to help identify effective pilot performance. The technique has a set of simple interview procedures which allows the collection of information from people regarding their direct observations of their own or others' behaviour. More specifically, the pilots were asked what was helpful and harmful to their flying experience. After World War II the method was formalized and became available to industry. The technique was used to develop ethical standards for psychologists, to measure task proficiency, selecting and classifying personnel, clarifying motivation and leadership attitudes, and identifying factors in effective counselling (Woolsey, p. 243, 1986).

Butterfield et al. (2005) reviewed the origin and evolution of the CIT method over the past 50 years and discovered that over the years there has been credibility checks instituted when using the CIT which maintained the intent of Flanagan's (1954) work while also improving the vigor of CIT findings. Due to these findings, Butterfield et al. have suggested using nine credibility checks when using CIT: (1) Find a person who is familiar with CIT to extract critical incidents from the taped interviews or transcriptions. (2) Allow for participant cross checking after the interviews have been analyzed and placed into tentative categories. This gives the participants a chance to state whether the categories make sense or not. (3) An independent judge is asked to place 25 percent of the critical incidents, which are randomly chosen, into categories that have already been formed by the researcher. (4) Researchers track when new categories stop emerging; this is a sign that adequate coverage has taken place. (5) Submission of the categories from



the data analysis is submitted to two or more experts in the field to determine whether they are useful or not and whether there seems to be something missing or not based on their experience. (6) Participant rate is calculated and in order for a category to be valid 25 percent should be achieved. (7) Theoretical validity, also known as theoretical agreement, is looked at by the “presence or absence of agreement within the community of inquirers about the descriptive or interpretive terms used’ (Maxwell, p. 292, 1992). (8) Descriptive validity is incorporated by tape recording research interviews and working directly from the tapes or transcripts derived from the tapes. (9) A CIT expert is asked to listen to a sample of the interview tapes to ensure the researcher is following the CIT method appropriately.

### Definition of terms

Flanagan (1954) defined the word ‘incident’ as “any observable human activity that is sufficiently complete in itself to permit inferences and predictions to be made about the person performing the act” (p. 327). He defined ‘critical’ in reference to an incident which takes place in a situation “where the purpose or intent of the act seems fairly clear to the observer and where its consequences are sufficiently definite to leave little doubt concerning its effects” (p. 327).

The Critical Incident Technique developed by Flanagan contained five steps or procedures for collecting the data: (1) General Aims, (2) Plans and Specifications, (3) Collecting the Data, (4) Analyzing the Data and (5) Interpreting and Reporting. Flanagan did note these procedures should be tailored for each individual situation or study taking place that was using CIT.

### (1) Aim of the Study

The first step is essentially a general statement of objectives of the study or a description of an activity explaining exactly what to do or not to do in order for success to be achieved (Flanagan, 1954). In this study, the participant's experience of trying to get off the street was investigated. Specifically, the aim was to investigate what helped and hindered the youth as they tried to get off the street.

### (2) Plans and Specifications

The second step is required to determine who will be making the observations, what observation will be considered a critical incident and who will be observed (Flanagan). The participant's in this investigation were recruited through posters (Appendix A) placed at Covenant House Vancouver's youth drop in and crisis shelter.

The participants were required to meet the following criteria:

- 1) 19-24 years of age,
- 2) self-reported having been homeless or presently homeless,
- 3) relatively willing to reflect back upon his or her experience of how they became homeless and discuss the experiences which helped and hindered them in leaving the street,
- 4) capacity to make free and informed decisions.

All interested participants were given details about the study in person and then asked a series of questions to confirm their eligibility (Appendix B). If the interested participant met the criteria an interview time was set up. A general self report form (Appendix C) and the consent form (Appendix D) was given at the start of the initial interview. The consent form included: a statement on the purpose of the study, the study procedures, potential risks and benefits of participation, information regarding confidentiality,

remuneration/compensation and, lastly, who to contact for information on the study or concerns about being a research subject.

### (3) Collecting the Data

The third step involved the actual data collection which was done through individual interviews with specific questions asked (Flanagan, 1954). In this investigation semi-structured interviews were conducted with twenty youth aged 19-24 years of age. Eighteen males, one female and one transgender youth participated. Nine youth identified as Caucasian, five identified as Aboriginal, five stated a mixed ethnicity and one youth chose not to identify his ethnicity (Appendix E). The participant involvement ratio was reflective of the youth served at Covenant House Vancouver. In the first interview the participants were reminded of the purpose of the study and then asked to speak about themselves and describe how they came to be on the street. They were asked what helped and hindered them when trying to leave the streets. Immediately following the first interview, the researcher extracted critical incidents and grouped them into helping and hindering themes for the participants to review. The second interview took place within a week of the first interview which allowed the participants to confirm that the critical incidents recorded were heard and categorized correctly. The participants were encouraged to make any changes, deletions or additions during this second interview to ensure data accuracy.

Interviews. Individual interviews were conducted with each participant. The first part of the interview was building rapport with the participant, reviewing the consent form, having the participants complete the self report form and going over the interview questions. The purpose of the study was reviewed and each participant was informed:

*"I am interested in hearing about your experiences of trying to get off the street and what has helped you and hindered you in exiting street life. I imagine that you have been impacted by this experience greatly, and I would like to understand your experience as fully as possible. Please speak as freely as you like. I may ask you to clarify or expand on something. If you feel uncomfortable at any time you may pass on a question, or stop the interview at any time."*

The second part of the interview was audio-taped and the following four questions were asked:

1. Describe how you have come to be on the street?
2. What efforts have you made to get off the street?
3. What has helped you and what has hindered you from leaving the street?
4. What do you think would have helped?

These questions were specifically designed to bring forth critical incidents which helped and hindered the youth as they tried to leave the street. Participants were encouraged to be as forthcoming as possible and, at times, clarification was needed.

To maintain credibility and trustworthiness with the Critical Incident Technique, Butterfield et al. (2005) recommend a second or follow-up interview with the participants once the first interview has been analyzed and placed into tentative categories. This second interview gives the participants a chance to ensure what had been recorded by the researcher was accurate and to confirm that the categories made sense. The participants could also add, eliminate or change what they said in the initial interview (Butterfield et al.). Due to the transient lifestyle often led by youth living on the street, the second interview was scheduled within one week of the first interview. Nineteen of twenty participants completed the second interview. The one youth who did not complete the

second interview decided to stop running from the law and go back home to Ontario and deal with his legal concerns. The second interview was also done in person giving the participants an opportunity to add information, clarify, correct or omit information.

#### (4) Analyzing the Data

The data was analyzed with the purpose being to “summarize and describe the data in an efficient manner so that it can be effectively used for many practical purposes” (Flanagan, 1954, p. 344). This was done using the following steps:

1. Transcription of the tape recorded interviews took place and then subsequent work done directly from the transcripts derived from the tapes.
2. Extraction of critical incidents by the researcher was done when they met the following criteria (Flanagan):
  - (i) An actual and detailed behaviour is reported and observed by the participant.
  - (ii) The behaviour is relevant to the general aim of the activity.
  - (iii) The behaviour is judged to be critical by the participants.
3. Categories were formulated by grouping the incidents into similar themes.

These categories were tentative and more were created as needed. During this process the participant rate was also calculated and, in order for a category to be valid, 25 percent should have been achieved. The researcher tracked when new categories stopped emerging which was a sign that adequate coverage had taken place. An independent judge was asked to place 25 percent of the critical incidents, which were randomly chosen, into categories that had already been formed by the researcher to ensure credibility. Lastly, after the interview and

analysis, participants cross checked the placement into tentative categories to ensure they made sense to them.

4. The categories/themes that emerged from the data analysis were described and a definition of the category given. The number of incidents that fell into each category was provided along with the participation rate as a percentage.
5. Sample quotes from each category were given verbatim from the tape transcriptions.

#### (5) Interpreting and Reporting

The final step was interpreting and reporting the findings. A total of 259 incidents were reported by twenty participants (18 males, 1 female and one transgender) regarding what helps and hinders youth who are trying to leave the street. Categories with self explanatory titles and definitions were given and reliability and validity was established using eight credibility checks. Butterfield et al. (2005) suggested using nine credibility checks when using the CIT method however this investigation used eight of the nine suggested credibility checks: (1) A University of British Columbia professor in the Counselling Psychology Program, who is familiar with CIT, listened to an interview and extracted critical incidents from the taped interview. His extracted incidents were then compared with the researcher's extracted critical incidents and deemed to be on the right track. (2) Participant cross-checking took place during the second interview. Nineteen of the twenty participants were given a typed summary of their first interview. The one participant who did not cross check his interview decided to deal with his legal concerns in Ontario rather than run from the law and hide in British Columbia. Each summary detailed the critical incidents from the individual's interview and were put into helping and hindering categories. The participants read through the incidents and determined

whether the critical incidents were interpreted appropriately and in the correct category. All participants were given the opportunity to omit, correct, add or change their critical incidents. All nineteen participants made minor corrections to the summarization and, when satisfied the critical incidents were articulated accurately, each participant gave the final approval. (3) For this investigation an independent judge was given 120 randomly chosen critical incidents and asked to sort the incidents into the defined helping and hindering categories. Each category, with its definition, was on a cue card as were the critical incidents. There were two sorting sessions that took place with the independent judge; one for the helping categories and one for the hindering categories. Of the 120 critical incidents the independent judge placed 115 of the 120 critical incidents in the same categories as the researcher, achieving 96% agreement. Categories were considered valid if an agreement of 80% was accomplished. The independent judge is a Masters student in the Counselling Psychology Program at the University of British Columbia and is familiar with the Critical Incident Technique. (4) The researcher tracked when new categories stopped forming. Four critical incidents originally were not able to be classified and were put aside. However, they were reevaluated and subsequently classified into existing categories. Therefore, no new categories needed to be formed and exhaustiveness was considered met. (5) Participation rate was determined by calculating the percentage of participants who responded to each category. In order for a category to be considered valid, 25% participation rate must be achieved. In this study the participation rates varied from a low of 30% in two categories (Income Assistance and Leaving Negative Influences Behind) to a high of 90% in one category (Drugs and Alcohol). (6) Descriptive validity took place by tape recording all the interviews and then working directly from the typed transcripts and tapes. (7) A CIT expert was asked to

listen to an interview tape to ensure the researcher was following the CIT method appropriately. The expert chosen works at The University of British Columbia in the Counselling Psychology Program and has studied the CIT method and used the method on several occasions. (8) Lastly, theoretical validity of the helping and hindering categories compared the results found in this investigation with existing literature to determine whether there was support for the categories defined in the present study. This has become known as theoretical agreement (Butterfield et al., p. 488, 2005). If there is no support in the present literature, it does not mean the results are invalid, it simply may mean further research is required in that specific area. In this study, theoretical agreement was found for all of the categories. The theoretical agreement with previous research and the present categories can be found in the Discussion chapter.

### **Researchers Role/Stance**

Extensive efforts were made using the nine credibility checks described above to reduce bias. However, the current study will be affected by my worldview. I am a heterosexual White female counselling psychology graduate student in my mid 30s. I grew up in Newfoundland in a hard working middle class family that was relatively functional, though alcohol was part of the functioning. I did not witness extreme wealth or poverty in Newfoundland and it was not until I graduated from university in Nova Scotia and moved to Toronto that I saw a homeless person and a foreign luxury car; both in the same block. This was the beginning of my questioning as to how the world worked and what meaning everything had.

Having worked for the past four years at Covenant House Vancouver, an agency that works with youth 16-24 years of age who are either homeless, have been homeless or



are somewhere in between, I am researching an area which I am passionate about. Ideally for the future I would like to see youth homelessness be non-existent due to prevention strategies that work with the youth and their families before they become homeless. For the present I would like to see the youth no longer live on the street or at least be given a chance to leave the streets. I have an expectation that Canada will assist these youth when they are looking for the help that Canada says it provides in its social policies. Where I am working right now I do not see this happening. Youth are denied assistance and health care on a regular basis. Having said the above, my bias towards the research is fairly obvious as I have certain desires for these youth. At the same time I was open to hearing how the youth viewed their situation and what helped and hindered them as they have tried to get off the street.

## CHAPTER IV

### RESULTS

A total of 259 incidents were identified by twenty participants; eighteen males, one female and one transgender youth. Thirteen of the twenty participants were homeless at the time of their interview, however all participants had left the street at one point. These incidents determined what helped and hindered youth from trying to leave the street. Nine helping categories and six hindering categories evolved after the data was analyzed. In this section the nine helping categories and six hindering categories will be described. Table 1 lists all the categories in order of highest participation rate. The final question the participants were asked “What do you think would have helped?” will also be detailed at the end of this section and titled ‘Wish List.’

#### Helping Categories

##### **Category 1: Taking Responsibility (33 incidents, 70% participation rate)**

This category emphasizes the participants’ desire and motivation to take responsibility and control of themselves and their lives. When it comes to taking responsibility regarding drugs and alcohol, it is a separate category. The participants in this study were not willing to give up and they speak about using their internal grit and determination to make changes, exit street life and enter mainstream society.

#### Example 1 (Participant AG10)

Honestly, that one for me personally came from within. It was my – I’m – I’ve always been very steadfast when it comes to what I believe in about both the world, about myself and about how I interact with other people. And one of these things is that every time I’ve gone into one of these shelters people are feeling suicidal. And I tell them the same thing each and every single time. I’m no where

**Table 1: List of Categories, Frequency of Critical Incidents and Participation Rate**

| <b><u>Category</u></b>                                  | <b><u>Frequency</u></b><br>(# of critical incidents for each category) | <b><u>Participation Rate</u></b><br>(% of participation in each category) |
|---|--|---|
| <b><u>Helping Categories</u></b>                        |  |   |
| 1. Taking Responsibility                                | 33   | 70%   |
| 2. Engaging in Constructive Activities                  | 17   | 70%   |
| 3. Friends and Family Support                           | 24   | 60%   |
| 4. Changing Drug and Alcohol Use                        | 21   | 60%   |
| 5. Support from Professional Organizations              | 17   | 60%   |
| 6. Disillusionment of Street Life                       | 16   | 55%   |
| 7. Dreams and Hope for a Different Future               | 17   | 35%   |
| 8. Income Assistance                                    | 8  | 35%   |
| 9. Leaving Negative Influences Behind                   | 6  | 30%   |
| <b><u>Hindering Categories</u></b>                      |  |   |
| 1. Drugs and Alcohol                                    | 31   | 90%   |
| 2. Emotional Struggles                                  | 19   | 50%   |
| 3. Lack of Support                                      | 13   | 45%   |
| 4. Enjoyment of Homelessness                            | 17   | 40%   |
| 5. Limited Formal Education, Life Skills and Employment | 11   | 35%   |
| 6. Income Assistance Difficulties                       | 9  | 30%   |
| <b>Total Number of Critical Incidents</b>               | <b>259</b>   |   |

near ready to give up yet. And that's the thing that – that was the always the best thing I think that I had was the fact that I was just never willing to – it was a slip. Maybe it was a fall, but it doesn't matter. As the saying goes, it doesn't matter how you fall – how hard you fall, it's how fast you get up that counts. As long as you're willing to try. That can be sometimes the only thing that can get you anywhere, is if you're willing to try. Find whatever it takes to drive you and use that until it's as burnt and spent as the rest of you is.

Example 2 (Participant RS1)

I didn't understand why I had to live the life that I lived and it wasn't until just recently in the last year or so that I've realized that I basically, we control our own destinies and everything and all things are controlled by perspective. It's easy, easier in some cases done than said, it's an amazing power that I'm just recently discovering that I'm trying to play with and see how, I can really determine the outlook of my day. Wanting more for myself I always knew that I was capable and I couldn't see myself just sleeping on the street or just living that kind of lifestyle.

Example 3 (Participant AS15)

I just never gave up. I just kept on going cause I remember my mom's last words before she died saying AS, wherever you are trials and tribulations, just never give up. You've got to hold the family name cause I know you're going to make it far. So that's, with those words in my pocket and in my mind I'm just going to keep on going until I get everything I've accomplished.

**Category 2: Engaging in Constructive Activities (17 incidents, 70% participation rate)**

In this category, participants state that when they have constructive activities to partake in such as volunteering, working or job training it keeps them busy, motivated and occupied in positive ways.

Example 1 (Participant LG7)

Changing my habits of how I would occupy my time. I volunteer now at the Carnegie Centre. I also volunteer with Out on Screen. So I try to find ways to keep myself busy and keep myself motivated.

Example 2 (Participant RB9)

I just keep trying and just keep employed, keeping my mind occupied, keeping it off the streets.

Example 3 (Participant CS5)

Work, something to keep myself busy. I'd get abused, hit constantly and that really, my drive inside, that's why I like work and just anything to keep me busy.

**Category 3: Friends and Family Support (24 incidents, 60% participation rate)**

This category refers to when the participant receives positive support and generosity from friends and family.

Example 1 (Participant TC14)

Since moving back with my mom for the first time in so many years, you know it really helped me to be stable. Cause I'm still there and it's what? October?

Example 2 (Participant TT11)

I have a great group of friends. I have three solid friends. One guy put me up for a month... for months and months and his mom even allowed it. And they're Chinese and that's very hard in the Asian culture, especially when they're Asian. I have had several friends put me up and they let me as long as they could. They tried to stretch it and stretch it. They'd even be yelling at their parents, "No, he's staying." And they fed me and took me out and they were one of the reasons why I got by.

Example 3 (Participant JW13)

I met this lady when I was in rehab. And her name's Reena and she took one look at me and she knew that if I had stayed in the rehab it would be like a cycle. I'd relapse, go back into it, relapse, go back into it, relapse, go back into it. A lot of guys did that. So I knew she was right. She took me into her house, I got a job, I got back on my feet, met Stephanie, got married.

**Category 4: Changing Drug and Alcohol Use (21 incidents, 60% participation rate)**

This category addresses participants' drug and alcohol use, misuse and abuse and the realization their drug and alcohol use had to change. Some participants stop the use of all drugs and alcohol completely; others reduce their use of drugs and alcohol or change the drugs they use. It also reflects the participants' recognition for drug and alcohol supports in their life such as detox, treatment and recovery.

Example 1 (Participant RS1)

I had a huge weed problem. I was a huge pothead and that caused this huge problem for me and I had to face the fact that I had a problem and I didn't want to accept the fact, marijuana is so mainstream and it's promoted onto the media, through music, so I never really had a problem stopping it until the fact you know, financially it killed me.

Example 2 (Participant LG7)

I'm clean, I don't drink as much. My drinking is down to a bare minimum now. And I just cut back on all my bad habits like smoking and using. And now I'm just, I'm just happy. Happy for myself.

Example 3 (Participant TC14)

The fact that I was, I went to detox. And I've never been to detox. And I told myself that the second I entered detox I'm done. I'm done with drugs. Um and I was. It was the end. And I didn't go back.

**Category 5: Support from Professional Organizations (17 incidents, 60% participation rate)**

In this category participants speak about the various supports and services that are provided from organizations such as schools, employment programs and community agencies. Participants also reflect on the supportive relationships they develop with staff at these organizations.

Example 1 (Participant RB9)

It's the people that I've met, counselors, just major support like Grant Chow, Lou, and the staff of Covenant House.

Example 2 (Participant JR8)

It's also Pops, which systemically was not a government-funded organization. It does not have the same sort of limitation as to where their funding has to go and everything else. So, it's very, it's a very flexible social organization that manages to do a lot of good. And I've got tremendous respect for the way that Pops runs itself. I think it's the best in the country that I've seen.

Example 3 (Participant CF4)

Covenant House, this has been a really good support system for me, they were just the basic. The basics they provide like food, shelter and the opportunity to be able to go out and get a job and not have to worry about you know where are you going to stay at night, where are you getting food, what are you going to do, how are you going to tell your boss you're homeless and stuff like that. It's as simple as that you know, basically providing me with everything I need to live right now cause without Covenant House I'd be nowhere.

**Category 6: Disillusionment of Street Life (16 incidents, 55% participation rate)**

Participants in this category speak about their desire to no longer be homeless. This comes from not wanting to engage in the game of surviving homelessness, the threats of violence on the street, and the monotony and wariness of being homeless. It also relates to the participants' recognition of not wanting to be on the streets as evidenced through their comparison to others on the streets.

Example 1 (Participant RM19)

When you first hit the street it is ok but then after a while it is so tiring, first when you are staying at people's houses it is ok, you spend your day trying to get money to get drunk or high. But then something clicked in my head and I said I gotta do something, this is getting really old, I want to get my shit together and get a home.

Example 2 (Participant JR8)

I get sick of it. Eventually it becomes monotonous. The general patternness of it.

Example 3 (Participant LG7)

I just came to a dead end. It felt like I had no other options and the options that did show... just didn't feel like they would satisfy me. So if I stayed in the position I was in then I would just not be living the life I wanted. So, coming to the realization that I didn't like the dead end, just like the same habits I didn't, I didn't like the routine. I had to change that.

### **Category 7: Income Assistance (8 incidents, 35% participation rate)**

In this category participants speak about the importance of receiving funds from income assistance on a monthly basis. These funds allowed participants to have access to food and shelter. Some participants noted that once they had an address they could start looking for work.

#### Example 1 (Participant CB4)

The thing that helped the most was funding for my from IA—cause if I hadn't had funding it wouldn't have been possible. Surprisingly I have, I'd applied for, cause I'd been living as an addict for a while, I'd been in and out of recovery houses and they'd always, say well go to IA, get IA, and I'd go to IA and they'd tell me no, you can work right? And I'd come back with doctor's notes saying this guy can't work for 6 months or a year, he's trying to go through treatment and they'd still refuse me and the last time, I don't know maybe it was a different office but the Kiwassa office they gave me it. I went in and applied on Wednesday and they gave me a check Thursday. It was, it was weird.

#### Example 2 (Participant RM20)

Income assistance once you get on allows you to get housing. At least then you have an address, can rest up, and start looking for work.

### **Category 8: Dreams and Hope for a Different Future (17 incidents, 35% participation rate)**

In this category participants speak about their dreams and hope for a different future. They desire something different for themselves rather than being homeless.

#### Example 1 (Participant CS5)

Just that drive in me, that's about it, I don't know how to explain, something in me is pushing me to keep going on with it, go do something but I don't know what, in my mind it feels like I'm meant to do something.

#### Example 2 (Participant RS1)

I remember when I was younger I watched *What the Bleep do we Know*, I watched a few other amazing documentaries; Boracca, which is has very little commentary but just visuals of certain parts of the world—dreaming and... and



having a dream, ambition that's what encourages me, that's what's kept me going. It's the fact that I do have hope for the future.

**Category 9: Leaving Negative Influences Behind (6 incidents, 30% participation rate)**

This category refers to the participants' decision to no longer associate with family and friends who are involved in negative activities such as drug dealing, using drugs and alcohol and illegal activities. It also reflects the participants' conclusion to stop drug trafficking themselves.

Example 1 (Participant CF3)

Like it's really not cool to sell drugs, how many people because of you screw up royally, look at Hastings, we don't have anything like that in Hamilton, it really brings light on the situation. I'm responsible for putting kids in detox. I'm responsible for kids getting kicked out of their house, for bringing drugs home. I'm responsible for people getting arrested, just because of what I did and you know I don't like that. I don't think that's nothing to brag about. So that's where I decided to stay back, sometimes you have to take a break, like coming out here did for me and look at it from a different view. You know I am better off not doing what I did before than.

Example 2 (Participant TL12)

I thought maybe to help myself I'd have to get away from people I know, people I love and that might help a little more actually because all the friends I did have back in Edmonton were bad influences on me. And maybe going to a new city where I know no one will help. And just get back on my feet.

Example 3 (Participant RB9)

Support and visualization. It's like after being out of Vancouver for six months and you come back and you see all your friends desecrated. Right? I've seen one of my buddies just gone and it's like he OD'd and he's saying your name like help me out. But there's nothing you can do. And he could have died. Right? I could have been him if I didn't do what I did. And still watching him and knowing that, that's your friend, but that could have been you. And it hurts but you get over it because he has to help himself and do what he has to do. And even after you talk to him a hundred times its still – still the same actions and it's fallen on deaf ears. And friends eventually leave friends and you do what you gotta do because when someone hinders you doing what you have to do you have to take a step back and realize that it's time to go and you've got to really take care of you and not other people.

### Hindering Categories

#### **Category 1: Drugs and Alcohol (31 incidents, 90% participation rate)**

In this category the participants' use, misuse and abuse of drugs and alcohol has hindered them from leaving the streets. Drugs and alcohol has also led some participants to participate in illegal activities, such as drug trafficking to support their own drug and alcohol use. Participants also speak about the economics of trafficking which requires less time and education than mainstream jobs that pay far less to someone with limited formal education and employment.

##### Example 1 (Participant CS5)

My lifestyle, I've just done it for so long. I don't know, just thinking about it, the summer time it's not that hard on the street it's so warm but the rain, that's the only thing that's keeping me off right now. My lifestyle gets in my way, drugs, alcohol, and the violence. I have no idea how to live life other than partying or fights or trafficking. Everything that has to do with drugs or alcohol, I don't know anything else.

##### Example 2 (Participant LG7)

My addiction kept me homeless. I guess I just loved being in denial about a few things because I would tell myself that it wasn't the reason. That wasn't the only reason. And being comfortable with that.

##### Example 3 (Participant TT11)

Partying hard. Doing drugs and not making money, that kept me homeless.

#### **Category 2: Emotional Struggles (19 incidents, 50% participation rate)**

This category refers to emotional struggles such as self doubt, hate, feelings of injustice, disappointment, fear, sadness, loss of hope, anger and rage. Sometimes these emotional struggles lead to outwardly behaviours of violence or lack of trust and pessimism.

Example 1 (Participant AS15)

Having a drive to go to college. But then knowing that you don't know how you're going to get – how you're going to pay for college. And how you're going to live, really. Because you know your friends are going through college and you know what struggles they're going through and you know you have – you're going to go through those struggles but then you also have what you have right now, which is nothing. So, you're going to have even more struggles to go through. And I don't know how to approach that really without suffocating.

Example 2 (Participant TC14)

The fear of being alone started to kick in and that was the thing that sent me over the edge because I've never been alone in my life. And the fact that here I am you know in an apartment all by myself and working. It scared the living shit out of me. And um I - I had to go and um bring my friends back into my life. And you know then with bringing my friends back into my life it um cost me my job. And it cost me my place. My friends are my drugs. For me at that point it was a positive because I didn't want to be alone. And here I am smoking my drugs, staying up all night and um I – once I was doing that I wasn't really alone.

Example 3 (Participant CS5)

Just everything I've been through like, I'm so quiet now because I don't like being the person I was when I was when I was really talkative and loud because I got nothing but jail time, I got too many assault charges. I got it all over and done with now but everything in my life has led me to violence. I've been through so much abusive things and just led me to be a complete nut-job in my mind like—I don't really understand what's wrong with me.

**Category 3: Lack of Support (13 incidents, 45% participation rate)**

In this category, participants expressed that when they were looking for support none was available for them. Often when they did receive support it was unhealthy negative peer and family influences.

Example 1 (Participant CB4)

My relationships, not friends' relationships but it's always been a partner relationship that's dragged me down and it's always the same kind of woman that I go for. It's a co-dependent kind of relationship, I'm a nurturer, so that's how I feel complete and it's hard to find a person who's not using.

Example 2 (Participant TT11)

Um, it was couch surfing here and there but ah for like two years of it I was sleeping outside. When I didn't know where to go. I went to the government for help. They sent me to this office and they told me this office isn't for you. You have to go to this office and blahblahblah. I went oh my god, so I just gave up. I was like well screw it, they're not going to help me.

Example 3 (Participant MD6)

My mom I didn't know until I turned 19 and then I met her, yeah, it was an interesting experience. I found out that she did drugs after. I don't know when she started doing dope, but... In the long run I ended up doing dope with my parents. And then I came to Vancouver. And after I turned 20, I - I started running a crack shack because I wanted to support my own habit.

**Category 4: Enjoyment of Homelessness (17 incidents, 40% participation rate)**

This category refers to the game of surviving on the street and the freedom that homelessness allows. It also reflects being constantly surrounded by other homeless people and the utopian view of homelessness.

Example 1 (Participant RS1)

I'll be honest with you, some of the most amazing people that I've ever met live in a shelter or are homeless you know what I mean? It's so amazing to hear their perspectives on life even though everybody has their problems. I'm with somebody we were smoking weed, I encourage a lot of things like talking, communication, not necessarily peering into their personal lives but just speaking about the situation and being homeless or whatever. So honestly I can relate to a lot of people and their not all punk-junkies. A lot of people just like to be spontaneous and live life on a daily basis and not knowing what's happening tomorrow, you know what I mean? I personally don't like extreme repetitiveness and same old-same old. I want a lot more out of life and that's something I've had to accept the fact that I can't necessarily have unless I work in an environment where I can do that for a living. It's so much different, like I said the freedom and not having.. There's something about not having structure.

Example 2 (Participant MD6)

I like sleeping on the beach, I don't hear any music. Wake up when I feel. It's beautiful. I still sleep on the beach once in a while even when I find my own place.

Example 3 (Participant JR8)

Like it's a lot of fun sometimes and it's what stops you from leaving and there is also memories that hinder me on the on the other foot. Like I remember when I was in Barrie or when I was spending six months in Sudbury. You know? Just sitting in my apartment all by myself. I'm never by myself when I'm out here. That's the only thing – like when I'm always with people always surrounded but when I have a place I'm always alone.

**Category 5: Limited Formal Education, Life Skills and Employment (11 incidents, 35% participation rate)**

In this category participants refer to their limited formal education and life skills and lack of employment as a barrier to leaving homelessness.

Example 1 (Participant BB2)

If I had a better job, if I had my education and if I didn't have a shitty family, if residential school was never enforced upon all us Indians at that time in 18.. after 1867.

Example 2 (Participant WC16)

Lack of life skills and experiences plus I have little formal education. It is hard to get a job and get out of homelessness especially being a young offender.

**Category 6: Income Assistance Difficulties (9 incidents, 30% participation rate)**

Participants in this category speak about being refused income assistance or the long wait period to receive funds. Those who do receive funds describe the difficulty of living on \$610 a month and the barrier of not being able to work due to being cut off from income assistance before having enough money to pay rent and buy food.

Example 1 (Participant JR8)

I say yeah, I just need a month and I'll find some work and then I'm planning on going to school. And they said well, you're going to have to look for work for a

month and then ah you know now that you've applied, look for work for a month and come back and see us. Ah I was like fuck that, I need money now.

### Example 2 (Participant AG10)

It's negligible. It's very – it's so limited, it's not even funny. I mean they say 8 dollars an hour is below the poverty line. I make half that if we go on what income assistance gives. That's the big flaw I think with the system, was that in 1992 I believe it was. You were up until then either 92 or 94 you were still able to earn up to 500 dollars. Well now it's only if you're on Level 2 Disability. You can't even do that on Level 1 Disability. They still take it off dollar for dollar if it's regular income assistance. And I mean so I'm sitting here, I mean there is no inclination of the street people who are on income assistance to get off the system from where they're at. Because they look at it as any time I start trying to work I'm being penalized for trying to work because they're cutting out my support. So, I mean if I only managed to hold two weeks at work no street person is going to be able to save two weeks' worth of wages for the next month in the middle of it. It's not going to be possible. So by the time that I think income assistance is a month behind – by the time they get around to making that deduction you might have already been away from that job for a month because you've lost a job for some reason or because you haven't been working for a while. And all of a sudden you've only got half of your money. You can't even pay your rent and you've got no money. It doesn't make sense, because if they want people to get off the streets, they should give them some – some incentive to do it. All they did was they - they frustrate people trying to make an effort and I remember being so bloody frustrated because I'm sitting here. I've got the full potential ahead of me but every single time I try to make an effort they're cutting me back. So, it's like why am I even trying to bother with income assistance, with getting off income assistance. I'd rather sit around – yeah sure maybe it's not that comfortable but at least I know I've got the comfort and security of knowing that I have a place at the end of the month. Knowing I'm going to have some money for food whether I've got a drug addiction or not.

### Wish List

To conclude each interview the youth were asked “What do you think would have helped?” There were many powerful moments during this question as it was the first time throughout the process the youth were asked to express their desires. Each and every one of them was quite introspective about what they felt would have helped. Three broad themes emerged: (1) Home life, (2) Self and (3) Services. Many youth wished for a better family with a “normal life” that was surrounded with parental love, understanding and to

have been listened to as a kid. They desired for a home without abuse and drugs and alcohol and they wished their parents would have accepted them for who they were as a kid. The second theme of 'self' was in reference to the youth wishing they had made different choices for themselves. Many wished they did not use drugs and alcohol, desired for a better education and dreamt about getting a better job but realized, without the education, it probably would not happen. Some youth spoke about their wish to have chosen different friends which might have taken them down a different road. Lastly, a number of youth spoke about the services they had received and wished for the services to be relationship based not goal oriented. Specifically, a few youth spoke about Covenant House and they wished Covenant House would look at the big picture of their life more often and not be so rule driven and structured. Some youth referred to the foster care system and felt that if the ministry had done more family prevention, then maybe they would not have ended up in care. Once in care, two youth wished for less moves from home to home and for a better transition out of foster care to independence. Income assistance was also a theme within services and several youth wished the dollar amount provided was greater to make ends meet. The youth were very clear on what they felt would have helped. Their voices are important to hear and future research ought to consider what they are saying.

In summary the validity of the categories was tested by using eight tests in this investigation (a person who is familiar with CIT listened to an interview, participant cross checking, independent judge, exhaustiveness, participation rate, descriptive validity, a CIT expert was asked to listen to an interview and theoretical agreement). Critical incidents extracted by the researcher were compared with critical incidents extracted by a person familiar with CIT who listened to an interview and then deemed to be similar.

Accuracy of participants' responses was ensured by participant cross checking and an independent judge ensured trustworthiness of the categories chosen by the researcher by achieving a 96% agreement level. Exhaustiveness was achieved when the incidents withheld were placed into previously established categories. Participation rate in this investigation ranged from 30% to 90%, which is reasonably above the 25% established to be considered valid. All interviews were taped and transcribed and an expert listened to an interview to ensure the researcher was following the CIT method appropriately. Lastly, theoretical agreement with previous research was shown in all 15 categories and will be discussed in the Discussion chapter.



## **CHAPTER V**

### **DISCUSSION**

After conducting interviews with 20 participants on what helps and hinders youth from leaving the street, in their experience, 15 valid and reliable categories (9 helping and 6 hindering) emerged. The 15 categories included: ‘Helping’ – Taking Responsibility, Engaging in Constructive Activities, Friends and Family Support, Changing Drug and Alcohol Use, Support from Professional Organizations, Disillusionment of Street Life, Dreams and Hope for a Different Future, Income Assistance, Leaving Negative Influences Behind, and ‘Hindering’ – Drugs and Alcohol, Emotional Struggles, Lack of Support, Enjoyment of Homelessness, Limited Formal Education, Life Skills and Employment and Income Assistance Difficulties. In this chapter, theoretical agreement, general findings, implications for counselling theory and practice, limitations and future research will be addressed.

#### Theoretical Agreement

In this study, theoretical agreement was found for all of the categories. The theoretical agreement with previous research and the present categories are:

Taking Responsibility. In six different studies youth spoke about their determination, strength, desire, personal attributes, or belief in their personal ability as factors in leaving street life (Caputo et al., 1997; Karabanow, 2005; Kidd, 2003; Lindsey et al., 2000; Miller et al., 2004; Williams et al., 2001). Determination was found to be one of four themes related to the development of resiliency among youth interviewed by Williams et al. This determination allowed the youth to make it through the tough times

and attain their goals. Lindsey et al. shows the youth felt their personal attributes were not learned but rather qualities within themselves which allowed them to cope successfully with their difficulties. Participants in this study stated they realized they wanted more for themselves and their “grit” and “determination” allowed them to leave the streets. They echoed this determination as something that was within them which they needed to act on it.

Engaging in Constructive Activities. Youth in Calgary, Lethbridge, Vancouver, Toronto, Ottawa, Montreal and Halifax have all expressed the importance of having employment, job training programs, or school as a significant aspect to exiting street life (Caputo et al., 1997; Karabanow, 2005; Kidd, 2003; Miller et al., 2004). In Caputo et al.’s study, when youth were asked the importance of employment when making the transition to mainstream society, 41% of participants placed it as very important and 25% rated it as important. Karabanow found the majority of youth stated they wanted to find employment rather than getting on social assistance as an important part of leaving street life. Employment allowed a shift in lifestyle to a more mainstream culture with a new way to live their lives. Participants in this study stated working, job training programs and volunteering to replace boredom or negative activities kept them motivated and helped them leave the streets.

Friends and Family Support. Kidd (2003) claimed that, even though most youth come from turbulent families, some still have contact with a few family members. This contact may not be formal, however, several youth in Kidd’s study mentioned they would not give up on themselves because it would hurt members of their family. This type of family support was described by the youth as something that helped them through the hard times. Caputo et al. (1997) showed 16% of the youth received help from friends and

20% stated help came from family. Tangible assistance from family, friends and professionals can range from groceries, financial assistance, transportation, spiritual support, accommodations, to mentoring (Karabanow, 2005; Kurtz et al., 2000; Miller et al., 2004; Williams et al., 2001). Several youth in this study stated their experience of leaving homelessness would not have been possible without the support from friends and family.

Changing Drug and Alcohol Use. Keys et al. (2006) found that when young homeless people had stopped or controlled their drug use their lives improved dramatically. The young people reported positive changes in their lives when their drug use was eliminated or lowered. One of the positive changes was their accommodation; where they were living and with whom they were living with improved. Karabanow (2005) found when the youth became worn out from heavy drug use the youth decided enough was enough and came to a point to make a change. In this study some participants expressed the need to completely quit the use of any drugs or alcohol, while others stated the need to either the change the type of drugs they used or reduce the amount they were using. In both cases, however, the participants stated that in order to leave homelessness their drug and alcohol use had to be considered.

Support from Professional Organizations. Karabanow (2005) and Williams et al. (2001) suggests before youth accept help from others there is a readiness for help which needs to be acquired. Once the readiness is internalized the youth learn to ask and accept the help from others. Caputo et al. (1997) found 70% of youth in their survey received help getting off the street. Of those, 53% stated they got professional help such as counselling and 33% received personal support from friends, family and agency staff. The majority of the youth (63%) stated the help was from agency staff or professional

counsellors. Wingert et al. (2005) found the youth in Winnipeg used the assistance of professionals when trying to get financial assistance and accommodations. The participants in this study refer to the support of professional organizations for seeking employment, counselling and meeting their basic needs of food and shelter.

Disillusionment with Homelessness. Disillusionment, boredom and fatigue of street life, plus a desire for something more than living on the street, has been a theme in two studies that have explored youth leaving the streets (Caputo et al., 1997; Karabanow, 2005). Caputo et al. interviewed 70 youth and 34% of the respondents stated disillusionment was the influencing decision to leave the street. They found disillusionment to be the second largest category of influencing decisions to leave the street in their study. The freedom that often drives a young person to the street is also the same reason why they desire to exit the street; looking for something more in their life. That yearning for something more, coupled with the struggle of meeting their basic needs, was a factor to leaving the streets in the Getting Off the Street study (Karabanow). Participants in this study stated an added incentive to help them leave the streets was the desire to no longer want to be homeless or engage in the game of survival on the streets

Dreams and Hope for a Different Future. Williams et al. (2001) found when former homeless youth transitioned from trauma to resiliency a theme the youth expressed was finding meaning and purpose to life. The youth in the study had the ability to see the bigger picture and have hope. Participants in this study had a vision and dreamed for a different future rather than being homeless.

Income Assistance. Karabanow (2005) suggests often when the leaving the streets income assistance is a temporary financial solution. Wingert et al. (2005) refers to this financial support of income assistance as a help for the youth to find housing, seek

treatment, look for employment and sometimes go back to school. Participants stated income assistance gave them access to food and shelter which enabled them to take care of their basic needs and be off the streets.

Leaving Negative Influences Behind. Williams et al. (2001) study with former homeless youth concentrated on the development of resiliency. A major theme that surfaced during the study was the youth's desire to learn new behaviours and adopt attitudes that helped the youth care for themselves. Part of caring for oneself involved self protection which meant setting boundaries or distancing themselves from unhealthy relationships (p. 246). Learning about being in relationship with others was a personal strength the youth developed. Equally important was learning who not to trust and to avoid people who were negative influences. This often meant avoiding people who tempted the youth to do things they did not want to do (Lindsey et al., 2000). Participants in this study stated when they left the negative influences of friends and family behind and took care of themselves it helped them leave the streets.

Drugs and Alcohol. Adlaf and Zdanowicz (1999) found 70% of youth who were living on the streets reported substance abuse problems. McCarthy and Hagan (1992) reported 80% of youth used marijuana, 55% used hallucinogens, cocaine (42%), and amphetamines (34%). Homeless youth are at high risk for developing significant drug and alcohol problems. Smart and Adlaf (1991) suggests drug use, rather than alcohol use, is more dependent on the environment and, when living on the streets, the use of drugs significantly increases which is probably due to its high availability. Baron (1999) refers to youth homelessness and the length of homelessness, the greater the opportunity the youth has to be exposed to drugs which are less available in other environments. As homelessness continues the youth's feelings of isolation increases which leads to further

drug use. Kidd (2003) shows that drugs use was linked with the worthlessness of the addict identity and addiction was linked to the youth's feelings of being trapped, hopeless and given up. Participants in this study refer to their use and abuse of drugs and alcohol while being on the street hindered them from leaving the streets and living a clean and sober lifestyle.

Emotional Struggles. Cauce (2000) claimed youth come from disturbing and troubling backgrounds. Their backgrounds coupled with their experiences on the street often leads the youth to becoming disturbed and troubled themselves. Cauce suggests it is very difficult to determine whether it is the youth's prior home life or street life that creates the youth's emotional difficulties. One third of the youth in Cauce's sample had attempted suicide. Kidd (2003) suggests the feelings of being trapped, lonely and hopeless for youth on the street is prevalent. Often the youth have negative self perceptions, feel like nothing is changing and they are unable to escape. Suicide or being suicidal was an escape from negative feelings. McCarthy and Hagan (1992) found 27% youth in their study tried to end their lives due to the youth's emotional state and similar to Cauce, Smart and Adlaf (1991) claimed one third of street youth had high levels of depression and half of those youth reported attempting suicide. Smart and Walsh (1993) found depression was the greatest among youth who had low self esteem and those youth who spent a great amount of time in shelters. Several participants in this investigation stated their anger and loneliness hindered them from leaving the streets. Many stated the use of drugs and alcohol helped minimize these emotional struggles.

Lack of Support. Kidd (2003) described an environment where youth used each other for money and drugs. Friendships were superficial, unreliable, vicious, and manipulative and friends pushed drugs and prostitution on one another. This led to

loneliness and worthlessness and contributed to the difficulty of getting off the street. Karabanow (2005) suggests one of the difficulties of disengaging from the street is leaving behind street friends. These friends often were the first time the youth felt security, love and acceptance. Participants in this study stated how the time they spent with their friends was often unhealthy and negative but this combination made it difficult to leave the streets.

Enjoyment of Homelessness. Caputo et al. (1997) found the main barriers to leaving the street was the power and freedom and the money and excitement associated with street life that made homelessness attractive. When youth were asked, “What was the hardest thing about leaving the street,” 67% stated leaving the street way of life as their biggest barrier. Participants in this study talk about the fondness of surviving the game of homelessness and the comradely amongst street youth which makes life on the street hard to leave.

Limited Formal Education, Life Skills and Employment. Baron (1996) suggests street youth often do not have the life skills to maintain in mainstream society. The youth interviewed in Miller et al. (2004) study state a challenge they face is lack of education and employment limitations. Karabanow (2005) refers to becoming responsible and gaining life skills such as cleaning, cooking and the youth looking after themselves as a challenge. Looking for employment coupled with paying bills was a challenge for most youth as living off of income assistance or a minimum wage job does not allow ends to meet easily regardless of how careful the youth were with budgeting. Wingert et al. (2005) claimed none of the 12 youth in their study were able to find and maintain employment and the youth’s lack of education was the greatest hurdle in finding decent employment. Participants in this study observed they were not taught life skills, did not

have enough education to get employment and that, when they tried to live in mainstream society, they did not know how to function.

Income Assistance Difficulties. With limited food, shelter and employment, most youth on the street are in need of social assistance, McCarthy and Hagan (1992) suggests the majority of youth do not apply for assistance due to ignorance of the assistance program, lack of proper identification required to apply and the hassle it takes to officially qualify for assistance. Kidd (2003) refers to the bureaucratic catch 22s and time delay it takes to receive assistance making it difficult to leave the streets. Karabanow (2005) found “the majority of youth participants spoke of the stigmatizing, disrespectful and a demeaning process involved with gaining access to social assistance” (p. 124). When successful in obtaining assistance the monthly amount given does not provide enough money for the youth to provide for their basic needs which in turn encourages youth to continue to participate in money making street activities to financially survive. Several youth in this study spoke of the seemingly impossible barriers to receiving income assistance and, once they were successful, the amount was not enough to survive. When the youth found employment to compliment their income assistance they were cut off assistance but still did not have enough money to survive before their next pay check arrived.

### General Findings

This study focused on those factors which helped and hindered youth, in their experience, from leaving the street. Nine helping categories emerged with two categories; Taking Responsibility and Engaging in Constructive Activities having an equal participation rate of 70%. The difference between these two categories was the number of



critical incidents. Taking Responsibility had 33 critical incidents and Engaging in Constructive Activities had 17 critical incidents. Given these two categories had equal participation rates, the relationship between the two are of interest. When someone takes responsibility for their life and what they want to do with their life, it would be fitting to have constructive activities such as school, employment and job training to engage in. Due to the nature and style of the interview the youth did not associate the two themes, however, it would be remiss to not question the relationship.

Friends and Family Support along with Support from Professional Organizations also had equal participation rates of 60%. The number of critical incidents was closer together for these two categories with Friends and Family Support having 24 critical incidents and Support from Professional Organizations having 17 critical incidents. Given the second greatest factor the youth stated helped them leave the streets was having support, it makes sense to follow the two highest categories that helped youth leave the street; Taking Responsibility and Engaging in Constructive Activities. Seemingly, when the youth has made the decision to take responsibility and engage in constructive activities it would also be relevant to connect with support systems to help obtain their goals.

The category Changing Drug and Alcohol Use also had a participation rate of 60% with 21 critical incidents. Participants referred to their drug and alcohol use as a negative. It seems only fitting that as the youth take responsibility for themselves and their life, their drug and alcohol use will change and more positive behaviours will increase, such as going back to school, finding employment or job training programs. Without supports in their lives all these types of changes would be difficult.

Not far behind, Disillusionment of Street Life had a participation rate of 55% and 16 critical incidents. As Karabanow (2005) illustrates, leaving street life is intricate and exiting is neither linear nor unidirectional. The first six categories mentioned; Taking Responsibility, Engaging in Constructive Activities, Friends and Family Support, Changing Drug and Alcohol Support, Support from Professional Organizations and Disillusionment of Street Life are wonderful themes in support of the intricate and unidirectional steps it takes to leave the street as evidenced by the youth in this study.

The final three helping categories are clustered together with similar participation rates as well. Dreams and Hope for a Different Future and Income Assistance both had a participation rate of 35% and lastly, Leaving Negative Influences Behind had a 30% participation rate. In the literature, the two categories found in this study; Dreams and Hopes for a Different Future and Taking Responsibility are often put together and frequently referred to as personal attributes. However, this investigation found the critical incidents for Dreams and Hope for a Different Future to be more vision oriented whereas the critical incidents for Taking Responsibility were more action and determination focused. Even though these are all personal attributes spoken of in the literature, to not separate them for this study would lose the fundamental differences being expressed by the youth.

Six themes were identified by the youth when they expressed what hindered them from leaving the streets in their experience; Drugs and Alcohol, Emotional Struggles, Lack of Support, Enjoyment of Homelessness, Limited Formal Education, Life Skills and Employment and lastly, Income Assistance Difficulties. Overwhelmingly, Drugs and Alcohol had the largest participation rate of 90% with 31 critical incidents in this investigation. A majority of the youth were very clear that their drug and alcohol misuse

and abuse was the greatest hindrance from them leaving the street. The reasons why they misused and abused drugs and alcohol varied. Interestingly though, the two hindering categories identified by the youth that followed the Drugs and Alcohol category were Emotional Struggles and Lack of Support. Emotional Struggles had a participation rate of 50% with 19 critical incidents and Lack of Support had a participation rate of 45% with 13 critical incidents. Kidd (2003) states a way to relax and escape the stresses of street life when a youth is feeling trapped, worthless, lonely and helpless is to use drugs and alcohol.

Enjoyment of Homelessness was the fourth hindering category identified by the youth when trying to leave the street. The way of life of homelessness is contradictory to mainstream society. There are a completely different set of rules to follow and very little structure. Therefore, it is not surprising that Limited Formal Education, Life Skills and Employment would have a participation rate of 35% closely behind Enjoyment of Homelessness. The education needed for the street is survival skills and the upbringing many of youth on the street have is a training ground for surviving the street (Whitbeck et al., 1997).

Even though Income Assistance Difficulties was the lowest hindering category with a 30% participation rate and nine critical incidents, the anger, despair and frustration in the voices of the youth who identified income assistance as a hindrance was palpable. This was the only category the youth did not seem to understand why it had to be a barrier. The five other hindering categories the youth could identify where the hindrance came from, income assistance as a barrier seemed to be unfathomable to them.

Of note would be the five helping categories that correspond opposite to the four hindering categories. Friends and Family Support and Support from Professional

Organizations would be linked and contrary to Lack of Support. Changing Drug and Alcohol versus Drug and Alcohol, Disillusionment of Street Life would be counter to Enjoyment of Street Life and Income Assistance and Income Assistance Difficulties are both in the helping and hindering categories but aids and abets the youth's experience in leaving the street.

The findings in this study suggest there are a number of ways the youth have found to be helpful in getting off the street. The identification of these factors and how they affect the youth and their exiting process provides a greater understanding of what are the most influential factors in allowing the youth to leave the street. Since there are few studies that have identified what is helpful in exiting the street, the findings in this investigation would be considered significant. To know what allows the youth to leave the street will be useful in counselling, education, policy reform and service provision.

### Implications for Theory

This study focused on youth exiting street life and their experiences of what helped and hindered them during that process. There is considerable research regarding why the youth make the street their home. There is a smaller amount of research highlighting what living on the street entails. There is very little research on the exiting process from the street. The findings in this investigation not only confirm and extend the research relating to those factors which support and challenge a youth from the leaving the street but it found levels of differential importance via participation rates for each identified category. This calculated participation rate adds richness to the identified helping and hindering categories as it shows the degree of importance it is to the youth when trying to leave the street.

The categories in this investigation can also provide the current service delivery model (Karabanow & Clement, 2004), which has four broad areas; basic needs, medical services, social skills and therapy and counselling with themes specifically identified by the youth in this investigation to help guide the service delivery for youth. In this study, the findings can encourage other investigations to support or deny evidence linked to the youths' experience of leaving the street. The categories identified can also be used to create a model consisting of those helping and hindering categories which have been influential to the youth as they try and leave the street.

### Implications for Practice

This current study offers valuable information for educators, policy makers, government systems and service providers. In particular, the findings will be of importance to counsellors in a number of areas. First, it will allow practitioners to understand and be aware of the factors that exist for youth who have lived on the street and for those who are still on the street. Second, the categories can be used by counsellors when working with youth who are trying to leave the street and for those who have left the street but are still vulnerable from their experiences of street life and living in mainstream society. Counsellors will have to keep in mind it may be very difficult for youth to participate in group or individual therapy without being somewhat stable. In particular the counsellors can help support the youth by:

- (i) Helping youth identify, validate and strengthen their personal attributes.
- (ii) Create awareness and identify strategies for the youth to develop support systems such as peers, family, and community resources.

- (iii) Help youth identify their patterns of drug and alcohol use, misuse and abuse and determine what they feel is necessary to assist with changing their patterns of use.
- (iv) Encourage the youth to explore their dreams and hope for a different future.
- (v) Help the youth explore and examine areas where they have internalized negative experiences from their past.
- (vi) Generate psycho educational and peer support groups using the helping and hindering categories identified by the youth to initiate group discussion and stimulate thinking. These groups can help normalize the youth's experiences and provide peer support for the youth.

Findings from this investigation can be used in the development and design of a supportive program for youth who have experienced trying to get off the street. As well, the findings can help professional organizations continue to understand, through the youths' experiences, what helps and hinders them from leaving the streets. Policy makers and government systems might do well to consider what the youth are saying about income assistance, foster care and the youths' desire to have a better home life which includes family intervention as prevention to entering foster care.

### Limitations

The current study has a number of limitations. First, twenty participants is a limited recruitment size, and of the twenty participants eighteen were male creating a gender imbalance. This gender imbalance is representative of the youth seen at Covenant House however, the female experience is not necessarily represented in this study. Since

females were not equally represented, generalizing the findings for women is limited which is unfortunate as it prevents extrapolating the results to women.

Second, the participants in this investigation had to have the capacity to make free and informed decisions. This eliminated youth who were experiencing psychosis. Due to the nature of street life however, many youth that would otherwise qualify for this study are using drugs that cause psychosis or have mental health concerns where psychosis is present.

One must question whether the youth that participated in this study are further away from homelessness and, in turn, were interested in this experience due to the changes they have already made for themselves. According to the youth the greatest helping factor when leaving the street is taking responsibility therefore the youth who participated may be more along the exiting process of taking responsibility for themselves.

Lastly, this investigation recruited via posters from only one service provider for youth in downtown Vancouver; Covenant House. There are two other drop-in services for youth in downtown Vancouver which were not recruited from due to limitations of the researcher.

### Future Research and Recommendations

Future research ought to focus on the following areas: First, a longitudinal study looking at youth who have experienced leaving the street is necessary. More qualitative research is required to further understand and support the specific themes youth identify as helpful in their exiting process from the street. This will allow a more complete picture of how exiting street life actually occurs, what the processes are and the impact it has on

the youth. Second, it is essential to try and determine what the youth consider helped them change their drug and alcohol use. In this study, and in other studies, youth point out drugs and alcohol as a problem and, in order to leave the streets, they must change that. This study found drugs and alcohol as the greatest hindrance to leaving the street. If future research can determine what helped youth change their drug and alcohol use maybe there can be a link which can decrease the hindrance of drugs and alcohol for youth on who are trying to leave the street.

The female experience of leaving street life needs to be explored. Even though there are more male youth represented in this study, there are female youth who are homeless and trying to exit street life. Determining what would be helpful to females when leaving the street is equally important and requires investigation.

A comparative study regarding successful family intervention programs implemented around the world with what happens here in British Columbia, and the rest of Canada, would be beneficial. Many youth who are, or have been, homeless spent time in foster care. If this can be avoided with appropriate family intervention programs, it ought to be considered here in British Columbia.

It is important to realize how schools can help with the prevention of homelessness in conjunction with other supportive systems. There must be information generated to help understand the impact school has on youth who are at risk and what they can do to help avoid further risk and support the youth.

Lastly, prevention of homelessness and the real reasons or co morbid conditions as to why it exists needs to be investigated. There are many studies that state why youth are on the street. However, what needs to be investigated is not why youth are on the street but what is causing the abuse, neglect, and violence at home. Is it poverty, lack of



parenting skills, family distress, violence, or child welfare failures? In order to end youth homelessness we need to know where it truly begins.

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## Appendix A

### Recruitment Letter

# Have You Experienced Trying to Get Off the Street?

*Would you be interested in sharing your experiences of how you have tried to get off the street?*

A graduate research study exploring how youth have experienced trying to get off the street: what has helped and hindered, is being conducted by Tracy Brown, a Master's Student in the Department of Counselling Psychology.

If you meet the following criteria, I would be most interested in hearing from you:

- You are 19-24 years of age,
- You self-report as having been homeless or is presently homeless,
- You are relatively willing to reflect back upon how you became homeless and discuss the experiences which helped and hindered you in leaving the street,
- You have the capacity to make free and informed decisions.

#### *Participation in the study involves:*

- A total of approximately 1.75 – 2 hours consisting of two separate, confidential meetings.
- Discussing your thoughts and feelings regarding your experiences trying to get off the street.

#### *Compensation:*

- You will receive a \$20 honorarium. This will be in two payments of either cash or gift certificate, \$10 after the first interview and the remaining \$10 after the second interview.

This study is completely confidential and the results will be shared with you upon completion.

## **Appendix B**

### **Participant Eligibility and Interview Questions**

“Thank you for your interest in my study. I would like to give you a few details about the study and then figure out if you are eligible. Does that sound OK?”

“This study focuses on your experiences of trying to get off the street. The main question I am interested in answering is: “How have you experienced trying to get off the street: what has helped and hindered?” I’m now going to ask you a few questions to confirm that the study is a good fit for you.”

“Do you have any questions?”

1. Have you spent time living on the street?
2. How old are you?
3. Are you available for two interviews (1<sup>st</sup> 60-90 minutes, and 2<sup>nd</sup> 30-60 minutes?)
4. Are you ready and willing to discuss your experience with me?
5. Are you experiencing psychosis or a traumatic state at present?

If the individual says no to any of the above questions or is younger than 19 years of age, I will thank them for their interest but say the study’s criteria and their experience do not match.

If the individual meets the criteria then I will arrange for a face-to-face first interview where we will discuss details of the study, address questions and concerns, and obtain informed consent. If the potential participant requires more time to think about their participation I will let them know they have one week.

### **1<sup>st</sup> Interview:**

#### **Orienting interview statement:**

“I am interested in hearing about your experiences of trying to get off the street and what has helped you and hindered you in exiting street life. I imagine that you have been impacted by this experience greatly, and I would like to understand your experience as fully as possible. Please speak as freely as you like. I may ask you to clarify or expand on something. If you feel uncomfortable at any time you may pass on a question, or stop the interview at any time.”

#### **Main interview questions:**

5. Describe how you have come to be on the street?
6. What efforts have you made to get off the street?
7. What has helped you and what has hindered you from leaving the street?
8. What do you think would have helped?



## Appendix C

### Participant Questionnaire

Age: \_\_\_\_\_ Participant Code Number: \_\_\_\_\_

Gender: \_\_\_\_\_ Place of birth: \_\_\_\_\_

Ethnicity: \_\_\_\_\_ Religious Affiliation: \_\_\_\_\_

Level of education: \_\_\_\_\_

Employment status: \_\_\_\_\_

At what age did you first become homeless?: \_\_\_\_\_

How many times have you been on and off the street?: \_\_\_\_\_

Please list as many incidents and give examples of what has helped and hindered you as you have tried to get off the street. If you are presently off the street what helped and hindered you in the past when you were on the street. An example would be:

*“Getting on welfare helped me get off the street” or “not being able to trust anyone hindered me from getting off the street.”*

#### HELPED

1.

2.

3.

4.

#### HINDERED

1.

2.

3.

4.

(Use back of page if more space for examples is needed)

## Appendix D

### Consent Form

#### **How Have Youth Experienced Trying To Get Off the Street: What Has Helped and Hindered**

**Principle Investigator:**

Dr. Norman Amundson, UBC Department of Educational and Counselling Psychology, and Special Education (Counselling Psychology Program, 604-822-3302)

**Co-Investigator:**

Tracy Brown, UBC Department of Educational and Counselling Psychology, and Special Education (Counselling Psychology Program)

The research conducted for this study will be part of a master's thesis eventually made available to the public.

**Purpose:**

The purpose for the following study is to gain an understanding through youth who have lived on the street their experience of what has helped and hindered them from leaving the street.

**Study Procedures:**

As a participant in this study you will be involved in a 1 to 1.5 hour, audio-taped interview with the co-investigator on your experience of what has helped and hindered you from leaving the street. A second follow up interview will take place which will be .5 to 1 hour. The second interview gives you a chance to ensure what has been recorded by the researcher is accurate and to confirm that the categories make sense. As a participant you can also add, eliminate or change what you said in the initial interview. The total amount of time required of you is approximately 1.75 to 3.0 hours. Any questions you have regarding the procedures may be directed to the co-investigator.

**Potential Risks:**

Talking about your experience may involve recounting painful or emotionally sensitive events or situations. You may be at increased risk for experiencing strong emotions such as sadness or embarrassment while speaking about your experience. Should I touch on areas that are too uncomfortable or distressing, you can indicate this and we will move on to other things, or if you prefer stop the interview. You can withdraw your participation at any time. The interview is meant to be reflective and not therapeutic. A list of appropriate and free counselling services will be provided to you before the interview begins, in case you decide you would benefit from counselling support.

**Potential Benefits:**

The potential benefits of talking about your experience include gaining insight(s) into your experience that you did not previously have, and sharing your experience may be helpful to others.

**Confidentiality:**

All efforts will be made to ensure your identity remains confidential. You will not be identified by name in any reports of the completed study. Direct quotes from the interview(s) may be reported in the findings of this study, but these quotes will not reveal any identifying information. All printed documents and audio-tapes will be kept in a locked file cabinet and all electronic files will be password protected.

**Remuneration/Compensation:**

You will receive a \$20 honorarium. This honorarium will be presented in two payments of either cash or gift certificate, \$10 after the first interview and the remaining \$10 after the second interview by the co-investigator.

**Contact Information about the Study:**

For further information about this study you may contact Dr. Norman Amundson, the Principle Investigator at 604-822-3302.

**Contact for Concerns about being a Research Subject:**

If you have any concerns about your treatment or rights as a research subject, you may contact the Research Subject Information Line in the UBC Office of Research Studies at 604-822-8598.

**Consent:**

Your participation in this study is entirely voluntary and you may refuse to participate or withdraw from the study at any time.

Your signature below indicates that you have received a copy of this consent form for your own records.

Your signature indicates that you consent to participate in this study.

\_\_\_\_\_

Subject Signature

\_\_\_\_\_

Date

\_\_\_\_\_

Subject name (printed)

## Appendix E

### Summary of Demographic Information

| Participant Code | Age | Gender      | Age First Became Homeless | # Times On/Off Street |
|------------------|-----|-------------|---------------------------|-----------------------|
| 001 RS           | 22  | Male        | 16                        | 16                    |
| 002 BB           | 20  | Male        | 19                        | 2                     |
| 003 CF           | 19  | Male        | 19                        | 3                     |
| 004 CB           | 23  | Male        | 18                        | 5                     |
| 005 CS           | 22  | Male        | 22                        | 7                     |
| 006 MD           | 22  | Male        | 20                        | 3                     |
| 007 LG           | 23  | Transgender | 19                        | 4                     |
| 008 JR           | 23  | Male        | 16                        | 12                    |
| 009 RB           | 22  | Male        | 19                        | 4                     |
| 010 AG           | 20  | Male        | 18                        | 5                     |
| 011 TT           | 20  | Male        | 13                        | 6                     |
| 012 TL           | 19  | Male        | 18                        | 5                     |
| 013 JW           | 19  | Male        | 13                        | 3                     |
| 014 TC           | 22  | Male        | 19                        | 12                    |
| 015 AS           | 19  | Male        | 17                        | 2                     |
| 016 WC           | 22  | Male        | 15                        | 3                     |
| 017 CS           | 21  | Male        | 16                        | 4                     |
| 018 RH           | 22  | Male        | 19                        | 12                    |
| 019 RM           | 19  | Female      | 16                        | 4                     |
| 020 MB           | 22  | Male        | 16                        | 4                     |



The University of British Columbia  
Office of Research Services  
**Behavioural Research Ethics Board**  
Suite 102, 6190 Agronomy Road,  
Vancouver, B.C. V6T 1Z3

## CERTIFICATE OF APPROVAL - FULL BOARD

|  |   |                                       |
|--|---|---------------------------------------|
| <b>PRINCIPAL INVESTIGATOR:</b><br>Norman E. Amundson   | <b>INSTITUTION / DEPARTMENT:</b><br>UBC/Education/Educational & Counselling Psychology, and Special Education | <b>UBC BREB NUMBER:</b><br>H07-00792  |
| <b>INSTITUTION(S) WHERE RESEARCH WILL BE CARRIED OUT:</b>  |   |                                       |
| <b>Institution</b>   |   | <b>Site</b>                           |
| UBC  |   | Point Grey Site                       |
| <b>Other locations where the research will be conducted:</b><br>The study interviews will take place in a private office at Covenant House Vancouver. This is a youth drop and crisis shelter located in downtown Vancouver. |   |                                       |
| <b>CO-INVESTIGATOR(S):</b><br>Tracy Brown  |   |                                       |
| <b>SPONSORING AGENCIES:</b><br>N/A   |   |                                       |
| <b>PROJECT TITLE:</b><br>How Have Youth Experienced Trying to Get Off the Street: What Has Helped and Hindered.  |   |                                       |
| <b>REB MEETING DATE:</b><br>April 12, 2007   | <b>CERTIFICATE EXPIRY DATE:</b><br>April 12, 2008   |                                       |
| <b>DOCUMENTS INCLUDED IN THIS APPROVAL:</b>  |   | <b>DATE APPROVED:</b><br>May 17, 2007 |
| <b>Document Name</b>   | <b>Version</b>  | <b>Date</b>                           |
| <b>Protocol:</b>   |   |                                       |
| Research Proposal  | Final   | March 27, 2007                        |
| <b>Consent Forms:</b>  |   |                                       |
| Study Informed Consent   | Final   | March 25, 2007                        |
| <b>Advertisements:</b>   |   |                                       |
| Recruitment Letter   | Final   | March 25, 2007                        |
| <b>Questionnaire, Questionnaire Cover Letter, Tests:</b>   |   |                                       |
| Interview Guide  | Final   | March 25, 2007                        |
| Participant Questionnaire  | Final   | March 25, 2007                        |
| <b>Other Documents:</b>  |   |                                       |
| Support Letter   | Final   | March 27, 2007                        |
| The application for ethical review and the document(s) listed above have been reviewed and the procedures were found to be acceptable on ethical grounds for research involving human subjects.                              |   |                                       |
| <i>Approval is issued on behalf of the Behavioural Research Ethics Board</i>   |   |                                       |

***and signed electronically by one of the following:***

---

Dr. Peter Suedfeld, Chair  
Dr. Jim Rupert, Associate Chair  
Dr. Arminee Kazanjian, Associate Chair  
Dr. M. Judith Lynam, Associate Chair  
Dr. Laurie Ford, Associate Chair