NO ROOM OF HER OWN: A LITERATURE REVIEW ON WOMEN AND HOMELESSNESS

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and Homelessness

November 1996

by

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PURPOSE

Since homelessness was previously viewed as a male experience and problem, gender has not been a factor in much of the literature on this topic, but this is changing with the growing numbers of homeless women. This report is based on a review of the recent literature on women and homelessness, including the role of violence against women, health factors, and shelter provision. A brief overview of regional field reports on women's homelessness in Canada is included, as are recommendations for future research.

EXECUTIVE SUMMARY

Introduction

Homelessness has been viewed as a male experience and problem. With the increasing number of women among the visible homeless, and the development of the women's shelter movement, there is a growing literature that includes and focuses on women's homelessness, although there remains little racial analysis. Since the 1960s, the 'new' homeless are distinguished from the 'old' as being younger, more often female, disproportionately racial minority, and arguably, have more problems with mental illness and drug abuse. Differences in definitions of homelessness and research methodology influence these findings, and may account for wide variations. There is a strong consensus in the Canadian literature that causes of homelessness are structural. While women are more likely than men to have housing affordability problems, and relatively higher proportions of women are being reflected in recent enumerations of the homeless, they remain less likely than men to be without shelter, or to use hostels for as long as men.

Discourse and Homelessness

While the meanings most women attribute to home include various social and psychological dimensions beyond physical shelter, including personal safety and security, homeless women with histories of family disruption and abuse distinguish being housed from being safe, so that homelessness is a problem for women, but it is also a strategy for escaping violence.

Taken as a form of discourse, much of the literature presents homeless people as victims or sick. Portrayals of homeless people as victims, rather than deviants or vagrants, have contributed to the politicization of homelessness as a social problem, but may risk denying their agency.

Women and Homelessness

Relations of class, gender, and race determine housing status and vulnerability to homelessness. Sex and racial discrimination contributes to the greater housing poverty of female-led and racial minority households. While there is some evidence that racial minority women are over-represented among the visible homeless, this is not the case for racial majority women. This may be due to methodological problems in part, but is also due to the strategies women use to disguise or avoid homelessness.

There is some evidence that women's homelessness is more hidden than men's, but to what extent is not clear. The research on gender differences among homeless people is derived predominantly from shelter and street populations and may not reflect adequately women's experiences. According to research that is predominantly from the United States, homeless women are younger in age than homeless men; more likely to retain social connection; more likely to suffer from a mental illness; less likely to suffer from alcoholism; and much more likely to have dependent children, although the process of becoming homeless separates family members.

While there is some Canadian research on homeless women, there is virtually none on homeless families, although their number is increasing. Research in the United States has probed various characteristics of homeless parents, almost all of them women, and suggests that homeless women with children are a younger group, have fewer mental health or substance abuse problems, and have avoided homelessness more assiduously than either single men or single women, exhausting the material assistance available through their support networks of family and friends before using shelters.

Violence Against Women and Homelessness

Although in part causative, the relationship between violence against women and their homelessness is complex, since there is also a great risk of violence when women are homeless. The prevalence of previous physical and sexual abuse, in childhood and as adults, is quite high among homeless women. When working class or low income women's housing is made unsafe by men's violence, homelessness is a strategy used by some to maintain their safety. And many homeless women seek safety by forming relationships with men—to protect them from other men. Women may be compelled to maintain a precarious balance between potential and actual danger and their autonomy.

Health and Homelessness

Homeless people have a range of chronic health problems due to their extreme poverty and lack of stable housing. They do not receive adequate medical care and draw heavily on emergency hospital services. A focus on mental health issues is apparent within the health-related literature on homelessness, most of which is American. While early research suggested that homeless women were more likely than men to be suffering from mental illness, this is being countered by more recent research, however, it is clear that deinstitutionalisation and the withdrawal of psychiatric and medical services contributes to chronic homelessness.

Shelters and So Forth

The dynamics of shelters as institutions are largely criticized as embodying systems and social relations of domination and social control. While violence and fear are more prevalent in men's shelters, domesticating social control appears to be more characteristic of women's shelters.

While there is some debate about the relative merits of ethno-specific shelter services in combatting racism and providing a culturally sensitive context, various groups, notably aboriginal communities, argue in favour of them.

There is little known about appropriate housing solutions for homeless women, but there are some indictations that shared-unit mixed-sex models are problematic. Most homeless women express a desire for self-contained units, rather than shared accommodation, and favour having women as neighbours. Although there is a relatively small demand for sex-segregated buildings, sexual harassment by male residents is a common problem within Toronto projects designed for homeless people. Based on the input of homeless women, some new projects have adapted by designing exclusive women's spaces.

Expert Consultation

Expert opinion from field workers across Canada reflects regional similarities and variations on the underlying economic and government policy causes of homelessness, along with issues of violence against women.

Recommendations for Research

A research agenda is proposed to address questions on women's homelessness and the role of government and economic policies, male violence against women, relationship breakdown, and mental health service provision. Other research gaps include the health costs of homelessness and health implications of homelessness, the extent and form of rural homelessness, and new models that go beyond the provision of emergency housing.

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SECTION 1: INTRODUCTION

Since homelessness has been viewed as a predominantly male experience and problem, gender has not been a factor in much of the writing on this topic. Some of the contemporary literature refers to women within a demographic profile of who is homeless, or includes narratives about homeless woman, but often gender does not enter the analytic or explanatory account. This is changing with the evident increase in the number and proportion of women among the homeless, the development by feminists of an alternative shelter system for women who have been abused by their male partners, and the emerging literature on gender and housing.

This review covers the new literature on women and homelessness, placing a priority on Canadian research published since 1982, although it also reflects the greater volume of research from the United States. Some research from Britain and Australia is included. Note that terminology within the review is not always consistent since it closely reflects the varied language use of different writers and different disciplines.

In addition, we conducted a brief consultation with field workers and experts across Canada, the results of which constitute a snapshot commentary on current issues of women's homelessness that reveals regional distinctions, but stresses underlying economic causes, the withdrawal of welfare state assistance, and violence against women.

Women's Housing Status

There is a modest, but growing, literature on gender and housing that demonstrates how market-dominated housing policies disadvantage women, particularly female-led households, based on a gendered division of labour, in terms of a segmented labour market and responsibility for familial care, and widespread sexist and racist discriminatory practices, including various forms of violence against women (Wekerle and Novac 1991: 2). Similar patterns of women's lower incomes and familial responsibilities have been shown to negatively affect the housing status of women-led households in Canada (Wekerle and Novac 1991; Klodawsky, Spector, and Rose 1985; McClain and Doyle 1983), the United States (Daphne Spain 1990; Eugenie Ladner Birch 1985; National Council of Negro

Women 1975), Britain (Gilroy 1994; Muir and Ross 1993; Watson and Austerberry 1986), as well as other countries (Moser 1987).

Women-led households are predominantly renters. Their severe affordability problems in the private rental sector, and the lack of sufficient subsidised housing, are obvious factors in their vulnerability to homelessness. While homelessness is conventionally viewed as an economic or income problem, women's homelessness is also structured by gender relations of power, especially family or household relations, although these dynamics and their housing-related outcomes have not been adequately investigated to date.

Women's overall labour force participation and their earnings actually increased during the 1970s and 1980s, at the same time that more women were becoming homeless, a paradox that Jencks (1994) attributes, in part, to the decline in the marriage rate, specifying that it was because "unskilled women ... continued to have children that pushed more of them into the streets" (Ibid.: 58). He argues that the weakening of family ties has contributed to homelessness since married couples hardly ever become homeless, and living with another adult, "not only reduces housing costs but helps create emotional ties that allow the indigent to make claims on the more affluent" (Ibid.: 77). Families have traditionally been more willing to provide permanent support for indigent female than male relatives.

> "Widows and maiden aunts often lived their entire life with more affluent kin, never paying their way. Today, however, most Americans expect a single woman to get a job. A woman who cannot hold a job may therefore be more vulnerable to homelessness than she was in an earlier era, especially if she becomes mentally ill or alcoholic after having lived alone or with a husband for an extended period" (Ibid.: 78).

As more women have personal incomes, they have also been more likely to form autonomous households (and demand autonomy within households), which has been assisted by the expansion of public and social housing programs in Canada since 1945 (Miron 1993). These private and public forms of obtaining economic independence, however, are now in decline, with a harsh impact on women, and marriage remains an unstable

guarantee of succour. When marital relationships break down, the economic consequences of divorce are considerably different for women and men. While men's income increases slightly, women's household income after divorce drop over 40 percent, and the poverty rate for women increases almost threefold (Finnie 1993).

In an English study of post-divorce housing issues, McCarthy and Simpson (1991) speculated on the impact of relationship breakdown on subsequent homelessness.

> Among the 120,000 households accepted as homeless by local authorities during 1986, more than a fifth were homeless because of the breakdown of a relationship with a partner... In our own research no less than 35 percent moved into the homes of relatives or friends immediately after separation... a significant minority embarked upon a downward housing spiral from which they were unlikely to recover (Ibid.: 130).

It is not known how many became homeless as part of this downward spiral, but women were much more likely than men to move out of owner-occupation and into council housing (Ibid.).

Women's Homelessness

The literature on homelessness has only recently expanded to include or focus on women's experiences. Watson and Austerberry's book on women and homelessness, published in 1986, was the first comprehensive analysis of patriarchal policies that favour nuclear families, accounting for single women's vulnerability to homelessness within a market-dominated housing system. The impact of government policies becomes apparent when the authors describe how lodging house accommodation was provided during the war years to assist women into the labour force. The government then resumed its former support for nuclear family households and private ownership, contributing again to the marginalization of single households. The lodging houses which previously accommodated single women were eventually demolished in the process of urban development, part of a general pattern repeated in other advanced industrial countries (Groth 1994).

By applying an analysis of patriarchal and capitalist relations, Watson and Austerberry argued that "family structures can give rise to homelessness which then takes different forms depending on the relation of the

individual to the labour market," and that family and class relations cannot easily be separated, so that "a woman's marital and parental status affect her labour force participation which in turn affects her level of autonomy and independence within and outside of marriage" (Watson and Austerberry 1986: 148). Their study of women's experience and definitions of homelessness illustrated a range of factors that influence a woman's position on the home-to-homelessness continuum, the most significant of which are marital background and housing status during marriage, education and training, current and past social relationships, psychological state, knowledge of the housing system, and the advice and support she receives from institutional agencies (Ibid.: 166).

Watson and Austerberry view the concept of homelessness as a social and historical construction that obscures concealed homelessness by being

> employed statutorily in the narrowest way possible to exclude many households who do not have adequate housing in their own terms. Hence the extent of unsatisfactory housing that individuals and households have to tolerate is grossly underestimated by the use of this term (Ibid.: 167).

Lack of Racial Analysis

The housing literature lacks an integrated gender, race, and class analysis to account for racial minority women's experiences in countries such as Canada. For example, the housing discrimination literature focuses on either racial or gender discrimination, but rarely both (Novac 1996).

There has been little racial analysis of homelessness, although it is clear from demographic profiles that racial minority persons are over-represented among the homeless in the United States, as they are among the unemployed and poor. A racial comparison of the characteristics of homeless men in the United States found that white men exhibited a higher rate of personal risk factors, such as substance abuse or psychiatric hospitalization, and African-American men had higher educational levels, leading the researchers to conclude that economic factors and racial discrimination account for their over-representation among the homeless (Davis and Winkely 1993: 83). Passaro (1996) has used a

theoretical framework of class, gender, and race to account for the predominance of chronically homeless black men in New York City.

There is some evidence that racial minority women and immigrant women comprise a disproportionate share of shelter users in Toronto (Novac et al. 1996, Farge 1989). The extent of homelessness among racial minority people may be underestimated by the narrow definitions used by many researchers, which exclude people who live in extreme poverty and are marginally housed, as well as those at great risk of becoming homeless. People who are disadvantaged by racism constitute a large portion of this broader portion of the population. Certain factors that may constitute barriers to housing access, such as racial harassment, language differences, and refugee and immigration status, affect racial minority people. A study of the marginal or hidden homeless in London established that Black and ethnic minority people are over-represented by a two-to-one ratio, and the number of females and males may be almost equal (Ye-Myint 1992).

In some parts of Canada, aboriginal people are over-represented among the local homeless population (Wolch and Dear 1993). According to one report, the withdrawal of federal funds for housing in northern Canada has made extremely poor housing conditions worse for a predominantly aboriginal population, contributing to serious overcrowding and familial conflict (Pauktuutit N.d.). There are no new commitments for off reserve housing (although existing projects continue to be funded), and funding for new reserve housing has been reduced, so that the rate of new building is substantially diminished. Involuntary doubling up is the primary form of homelessness in northern climates and small communities.

Exploratory analysis of Canadian census data shows that racial minority and immigrant households are more likely to be renters, to live in crowded conditions, and have affordability problems. Racial minority female-led households and racial minority single male households are the most likely to have serious housing affordability problems (Novac 1996). The experiences of racial minority immigrant women also include instances of housing-related crisis exacerbated by their immigration circumstances or status, sometimes resulting in their homelessness. In response to their housing difficulties, racial minority immigrant women have organized to develop innovative and unique housing services, relying largely on their own volunteer labour (Ibid.).

Problems of everyday racism and racial harassment not only diminish housing equity and contribute to homelessness (Novac 1995), they exacerbate the vulnerability of homeless women who must rely on white-dominated services and whose own community supports are weakened (Novac 1996).

Structural Causes and Individual Characteristics

Most of the literature on homelessness is from and about the United States. This literature appears more likely to reflect an ideological debate on the causes of homelessness, on the attribution of structural versus individual causes (see, for example, Goodman 1991 and Baum and Burnes 1993), although some researchers assume no dichotomy exists between them (e.g., O'Flaherty 1996; Buchner et al. 1993). The fact that there are different interpretations about the basic causes of homelessness is primarily a reflection of who is writing about the problem. "The advocates focus on economic distress and the service providers on social or physical distress" (Hoch 1986: 228).

The analogy of musical chairs has been used to describe how individual attributes may represent important factors in selecting who are the most vulnerable to homelessness within a determinant disequilibrium of housing supply and demand (Sclar 1990 cited in Buchner et al. 1993).

> [I]ndividual factors can account for *who* becomes homeless but do not explain *why* homelessness exists as a major social problem in the first place (emphasis in original) (Buchner et al. 1993: 391).

Whenever they have been asked, homeless people themselves usually offer economic reasons to account for their circumstances, citing eviction, inability to pay a rent increase, utility shutoffs, and underlying causes, such as unemployment and underemployment, reduced welfare rates, and a shrinking supply of low rent housing (Hoch 1986, Coston 1989). Women are more likely to report familial/social reasons for their homelessness, such as conflicts in an overcrowded household, or abandonment by parents or a spouse.

There is a greater consensus in the Canadian literature that the causes of homelessness are structural. This may be due to somewhat stronger support for a welfare state among Canadians. Dear and Wolch (1993) attribute the rise in homelessness to two decades of fundamental global economic restructuring, deinstitutionalisation, the rise in lower paid service sector jobs, and more unemployment, alongside significant restructuring of the welfare state, and the rapidly diminishing supply of affordable housing. Whether the stock of affordable housing is actually decreasing, or is instead mismatched to the need, as some argue, there is general agreement that the lack of sufficient affordable housing is a factor in homelessness.

With federal government devolvement of social welfare programs to provincial governments, there is more focus on that level of government. An assessment of the impacts on low income tenants of recent provincial cutbacks in Ontario found that more rooming house stock has disappeared and the rate of homelessness has accelerated, waiting lists for social housing are longer, and shelter allowances for social assistance recipients have fallen further below actual rents. Still more cuts are proposed. About ten percent of those who left the welfare rolls are presumed now to be homeless (Campsie 1996).

The problem of homelessness is not reducible to that of inadequate income, although extreme poverty is the common context for homeless persons. For instance, the "most frequently stated reason for homelessness in Edmonton from the perspective of the community agencies is inadequate transfer payments, by far the most common source of income of homeless persons in Edmonton" (Edmonton Coalition on Homelessness 1987: 61). Since 1945, the housing system has undergone a dichotomization of housing haves and have-nots (Miron 1993).

> Among the haves, typical housing consumption is currently at a level that in some respects exceeds any plausible minimum standard of decent accommodation. The haves, if anyone, represent the success stories of the post-war Canadian housing market and housing policy. Never before have so many Canadians been accommodated in comfortable, warm, healthy, and safe housing, nor had such access to community infrastructure and social services. At the same time, a persistent and growing number of Canadian households

(and would-be households) have not been well served; they either simply cannot find housing at all, or can ill afford what they do find. (Ibid.: 359-60).

In his analysis of the Canadian welfare state during the 1980s, Mishra (1990) argued that with rental housing overwhelmingly in the market sector and the lack of commitment to social and public housing, "the federal government's general economic and fiscal policy of greater reliance on market forces and private incentives is likely to worsen the problem of homelessness," and only a comprehensive national housing policy would effectively combat homelessness and ensure that low-income people are adequately housed (Ibid.: 110).

Such an analysis goes hand in hand with a broad definition of homelessness, such as this one based on the United Nations elaboration of *absolute* and *relative* homelessness.

> [T]he absence of a continuing or permanent *home* over which individuals and families have personal control and which provides the essential needs of shelter, privacy and security at an affordable cost, together with ready access to social, economic and cultural public services (Charette 1991: 14).

Although unwieldy to operationalise for empirical research purposes, this definition incorporates a range of aspects of homelessness that includes not merely the lack of shelter, but shelter that meets some essential standards. This is critical for a feminist analysis of homelessness, especially in its accommodation of issues such as personal safety, autonomy, affordability, and access to employment and services.

Measuring Homelessness

Compared to the United States, there has been far less attention to enumerating homeless people in Canada, and only a few attempts have been made at the local and national level (Perissini et al. 1995). Available counts have focused on those who are without shelter, less on those who are marginally housed, and least on those who are most at risk of becoming homeless. A recent count of hostel users in Toronto was comprised of 12,588 single men, 4,439 single women, 1,450 two parent families, and 1,765 single parent families; an approximate breakdown of adults in this group by gender suggests that 55 percent of them are women.

Since women are at greater risk than men of becoming homeless, their lesser representation among those without shelter should be taken into account. The staking out of public space is dominated by homeless men (Passaro 1996).Women have more reasons to fear homelessness than men, and use different strategies for dealing with extreme poverty and homelessness, including disguising their gender, finding a boyfriend to protect them, and using public facilities to better maintain the appearance of being housed (Passaro 1996).

Methodological issues are of critical importance in the representation of homelessness and although demographic profiles are prominent in the literature, the results are highly contingent on the researcher's construction of who counts and how to count them.

> Counting the homeless is very difficult for a number of reasons. The criteria used in identifying a population for study, depend on the definition of homelessness. There are wider and narrower definitions, and the space between them often serves mainly as an arena for controversial exchanges between partisans of opposing social policies and philosophies (Bentley 1995: v).

Opposing viewpoints on the severity of homelessness, its causes, and policy options for addressing the problem are rife with political implications and demonstrate a wide range of interests (see Roleff (1996) for a reflection of the disparate positions taken). In outlining state-of-the-art research methods of counting the homeless, Bentley stresses the interconnection between definitional issues and techniques of enumeration.

> The definition ranges from the narrow concept of literally living on the streets, to lack of a fixed, regular and adequate nighttime address, to those in temporary or potentially unstable accommodation (doubling up), to those in inadequate, marginal or vulnerable living/housing circumstances. The definition *certainly affects* the size of the homeless population (emphasis in original) (Ibid.: viii).

The definition also affects the gender and racial composition of the resulting population.

Most research samples of homeless people are based on those who live on the street or in shelters, however, homeless women are far less likely than men to be publicly visible or live on the street (Watson and Austerberry 1986). It is not uncommon for researchers to report that they can find no women, only men, among those living on the street, although there are many women in shelters (for example, see Passaro 1996, Smith et al. 1993). Women without housing also form relationships, of varying length, with men to avoid being in a shelter, although these relationships may be abusive (Baxter 1991). The issue of definition is of critical importance to a gender and racial analysis of homelessness.

If homelessness is viewed as part of a continuum of better to worse housing conditions, as Watson and Austerberry interpret it, then it is understandable that there are difficulties in determining a cutoff point for the worst conditions, with implications for the analysis of homelessness. A fundamental aspect of these implications are demonstrated in the literature that links extreme housing poverty to other associated factors, such as health (for example, disability and mental illness), and social relations (for example, familial stability, alienation, and victimization). An example of such implications is described in an investigation of the role of victimization and homelessness.

> [T]he evidence for direct links between an event definable as victimization and subsequent homelessness is limited by methodological problems, chiefly lack of standardized response categories and inability to assign priorities to multiple reasons, which reduce the generalizability of their findings. In many cases, patterns of victimization underlie reasons more readily reported. For example, a Baltimore man stated that he was homeless because he was unemployed, but further inquiry elicited the fact that he could not work because he had lost one eye and much of the sight in the remaining eye as a result of assault. Sampling procedures may also obscure the true prevalence of victimization through selection of individuals with lower probabilities of victimization-related homelessness. The most obvious effect is underestimating the causal role of domestic violence through exclusion of specialized facilities for battered women from most shelter surveys (Fischer 1992: 233).

Bentley (1995) suggests that enumerations of homeless people at daytime centres where they receive services

such as food, clothing, medical assistance and so on "allows researchers to obtain information about doubled-up families and other precariously housed or imminently or intermittently homeless people," (Ibid.: 27) but even this may not be sufficient to adequately include homeless women.

Baker (1994) argues that "the researcher's choice of a sampling frame exerts greater influence on the demographic breakdown of a homeless sample than does any other methodological choice" (Ibid.: 477). And Hardhill (1993) states that the very nature of services provided in the community selects for a male-dominated sampling frame by focusing on street and shelter populations, excluding shelters for battered women, and relying on cross-sectional research that over-represents long-term homeless.

> In Toronto, women are thought to be a significantly small (sic) proportion of the homeless population than men. However, these estimates are often based on the number of hostel beds available for women, for example, which is much smaller than the number available for men, or they are based on the number of women visible in places traditionally utilized by homeless people, such as drop-in centres. These strategies are misleading, because homelessness is a much more dangerous condition for women than men. Women often avoid drop-in centres serving large numbers of men because they are subject to physical and sexual harassment and abuse. They are simply not safe. As well, because they are so at risk "on the street," women are frequently forced into the condition of cohabiting with men, often residing in physically, sexually and emotionally abusive relationships (Hardill 1993: 21).

Shinn, Knickman, and Weitzman (1991) explain how cross-sectional studies over represent people who have been homeless for long periods, and those with particular problems.

> [P]eople who became homeless in the past but had short episodes of homelessness have left the sampling frame, whereas those experiencing longer episodes remain to be sampled. To the extent that the long-term homeless have more psychological or social problems than those who find housing more rapidly, cross-sectional studies

overestimate such problems among homeless people" (Ibid.: 1180).

There are signs that research methodology on this topic is advancing beyond the first level of crude estimations and skewed sampling frames, but the deeper question of how homelessness is defined remains driven by ideological positions.

Women experience more poverty than men, suggesting that more of them would become homeless. Since valid measures of homeless women are compromised by these various methodological issues, perhaps that is why their numbers, while climbing, remain lower than that of men. Addressing this question, Baker (1994) argues that this is only partly due to research methodology, that there are actual gender differences. She states that women were more likely to form separate households during the1970s and 1980s, but their greater poverty and worse position in the housing market was buffered by the social welfare system. Further, women are more likely to secure support from their families than men, and women are more easily viewed as dependent and arouse more sympathy and less hostility than men. Thus, women's homelessness is more episodic and less likely to take on attributes of a 'master status' or be the single defining characteristic, either to themselves or others. Gender may also influence the social construction of homelessness such that men are viewed as deviant, while women are viewed as dependent. On the other hand, Baker suggests that extraordinary levels of housing discrimination and residential segregation may explain the over-representation of African-Americans among the homeless in the United States. In contrast, Latinos are more successful at avoiding outright discrimination, are more geographically dispersed and less likely to use shelters, but more likely to be over-crowded and doubled-up. This gender and racial analysis, unique in the literature, does not, however, address the position of racial minority women, except to infer that the gender-typed construction of homelessness that views women as dependent rather than deviant applies primarily to white women.

Passaro (1996) argues that homeless women "are seen as the apotheosis of Woman—dependent, vulnerable, frightened. They benefit from traditional gender ideologies because their individual failures are not compounded by gender failure—a dependent needy woman, after all, is no challenge to dominant beliefs"

(Ibid.: 2). As long as women learn to work their way through the system, to appear docile and worthy, they are less likely than men to remain homeless for long. Her postmodern analysis of class, gender, and race dominance accounts for the predominance, and long-term homelessness, of working class black men in New York City.

> The status of homelessness merges with gender and racial stereotypes to produce a pattern of discrimination perpetuated by social welfare legislation, the evaluative practices of social service personnel, and the evaluative practices of the rest of us, who daily decide which homeless people deserve our money or our sympathy (Ibid.: 29).

SECTION 2: DISCOURSE AND HOMELESSNESS

Based on archival documents and early social scientific research, Rossi (1989) conducted an historic review of homelessness in the United States during the twentieth century in which he outlined several distinctions between the "old" and "new" homeless. The decline in homelessness that serves as the historic point of change occurred during the 1960s, by which time there were fewer traditional urban missions, and those that existed provided fewer beds but bolstered services (O'Flaherty 1996: 48). Demographic distinctions between the old and new homeless are based on a shift from a fairly homogeneous profile of older white males to a diverse profile with variances of age, gender, and ethno-racial status.

Rossi's summation of the changed form of homelessness outlines why it has now become defined as a social problem, with advocate groups and organizations.

> [M]ore Americans are exposed to the sight of homelessness because homeless persons are *less spatially concentrated* today. Second, homelessness has shifted in meaning: the old homeless were sheltered in inadequate accommodations, but they were not sleeping out on the streets and in public places in great numbers. *Literal homelessness has increased* from virtually negligible proportions to more than half of the homeless population. Third, homelessness now means *greater deprivation*. The homeless men living on Skid Row were surely poor, but their average income from casual and intermittent work was three to four times that of the current homeless. The emergency shelter housing now available is at best only marginally better than the cubicle rooms of the past. Finally, the composition of the homeless has changed dramatically. Thirty years ago old men were the majority among the homeless, with only a handful of women in that condition and virtually no families. The current homeless are younger and include a significant proportion of women (emphasis in original) (Rossi 1989: 43-4).

Harris and Pratt (1993) state that the composition of working class households in Canada has altered significantly during this century. While boarders were common in such households until the end of the depression, the vast majority of families currently live without a boarder or another family. And by 1991, almost a quarter of households were comprised of a single person (Novac 1995). Given the regressive effects of federal housing policy, Harris and Pratt suggest that we may be "returning to the housing arrangements typical of the early twentieth century" (Harris and Pratt 1993: 296). They note that while major public redevelopments that threaten neighbourhoods have been effectively challenged, gentrification processes continue unabated, and tenant rights are being lost. They also argue that government policy threatens one of the meanings attached to home—security and personal control.

> [F]or many Canadians, the home as place of security and personal control is intermingled with stress, related to lack of affordabilty and insecurity of tenure. Growing homelessness in many large urban centres represents the extreme experience of such insecurity; ethnographic reports suggest that it touches and transforms the core of personal identity" (Ibid.: 297).

Meanings of Home and Homelessness

Due to the shift of paid employment away from the house, the meaning of home has changed over the last century, and with this increased separation between home and work, the home has taken on new meanings (Harris and Pratt 1993).

> "It has become a haven for a family life protected from the stimulation and threat of the city. For the adult, it has become a refuge from an alienating and exhausting world of work, a place of security, privacy, and personal control. Third, it has become an important status symbol, a measure and symbol of personal success" (Ibid.: 281).

Women attach a variety of meanings to the concept "home," which include decent material conditions and standards, emotional and physical well-being, loving and caring social relations, control and privacy, and simply living/sleeping space. Consequently, home-lessness is defined by the absence or inadequacy of these same qualities. This mixture of emotional,

psychological, social and material aspects far surpasses the standard definitions of homelessness that focus on lack of physical shelter (Watson and Austerberry 1986).

In their exploration of the meaning of home, Tomas and Dittmar (1995) argue that while current formulations suggest that the homelessness of women is a problem, and housing the solution, their findings suggest that housing is the problem, to which homelessness may well be a solution. Compared to securely housed working class women, the majority of moves in the housing history of homeless women had been made to avoid abuse and social service relocations. While all of the securely housed women could confidently define a difference in meaning between a 'house' and a 'home', most of the homeless women did not. They equated 'home' with safety and security, the same terms used in the literature to define what housing means, and the two most salient features largely absent in homeless women's experience of housing. Residential instability per se did not sufficiently distinguish their experiences from that of the securely housed women, rather it was the pattern of abuse and relocation that marked the experience of homeless women. For homeless women, a house is someone else's house where other people live with you (dependence). The relationship between 'housing' as a place of safety and security and home as psychologically meaningful had been severed completely for these women. Physical and sexual abuse were particularly common when women depended on men for housing. Thus, the homeless women did not consider themselves homeless—they just lacked a place of safety and security. Their housing histories were marked by a dependence on others to provide housing, coupled with residential instability arising from both abusive and disruptive episodes which began in childhood and continued into the present.

Representation and Discourse

It is probable that women have always been among the homeless, but the gender pattern has varied. For example, among those who lacked designated settlement rights in seventeenth-century New England, and least likely to obtain public assistance, were "widows and children, as well as disabled or aged adults, [who] were often 'warned' to leave town" (Rossi 1989: 17). In the nineteenth century, transient homelessness became masculinized, as well as institutionalized and segregated in cities in the form of "skid row" concentrations of

businesses and services that catered to the basic needs of poor, "familyless workingmen" (Ibid.: 20-1). Skid row areas reached their peak during the early decades of the twentieth century when the men living there provided a necessary pool of day workers who carried out heavy work, much of it in the shipping yards. Since the decline in homelessness during the 1960s, the gender and racial balance changed dramatically among the growing numbers of new homeless, and there was an absolute and proportional rise in the number who were female or racial minority. By the end of the 1980s, the North American public was familiar with the term "shopping bag ladies" as a reflection of urban life (O'Flaherty 1996), and homeless women were subjectified in various ways, not only though the popular media, but in expert discourse as well (Fraser 1990).

According to Hoch (1986), homelessness discourse has incorporated varied social meanings from the past that portray the homeless as vagrant, deviant, sick, or victim, all grounded in a cultural framework of the work ethic than remains intact. All of these interpretations are reflected in contemporary studies of the homeless, but most of the new homeless are defined as victims of the economy or sick. Certainly, there is a great deal of literature on mental illness and substance abuse among the homeless. Allen (1994) suggests that in the current developing discourse of homelessness, these people are viewed not only as victims but also as perpetrators of their circumstances.

Harris (1991) has explored several images of homeless women: as victim, exile, predator, and rebel. She argues that the extreme dissonance aroused by the sight of homeless women "hunched over and clinging to the sides of city buildings" in contrast to the American dream image of a modern wife in the suburbs contributes to a definition of the homeless women as "other." Alienation and disaffiliation from the dominant culture, as well as self, mark the state of homelessness.

Susser (1993) interprets the New York City shelter system in terms of its imposition of a female-headed household as the model for poor people who receive government subsidies, contrasting means-tested welfare provision with universal social security welfare programs that are based on a nuclear family model and designed to provide financial assistance to higher income households. She notes that access to the shelter system is largely determined by sex, age, mental status,

and family structure, with separate barracks for men and women, hotels for families, special shelters for mentally ill women which exclude children, and other gender-specific shelters serving the older population of men and women. Susser argues that by separating fathers from mothers and their children, shelters are depriving mothers of their company and assistance with child care, which men are sometimes able to provide in the privately run 'homeless' hotels.

> "In spite of their official absence from statistics and measures of households among the poor, men were certainly present among the families of the homeless. As soon as the women with whom we worked were relocated to apartments, men appeared in their homes. But within the institutions, both hotels and transitional housing, men and young boys were relegated to the status of criminals and reduced to sneaking in illegally (in the hotels) or shut out altogether (in the transitional housing)... Thus, the overall impact of the shelter system was to separate households and undermine whatever co-operation or mutual responsibilities might have been developed among men, women and children" (Susser 1993: 278).

Allen (1994) similarly argues that such municipal shelter policies have a divisive effect on couples and undermines the stated goal of helping families.

> Even when men are the mates or legal husbands of the women admitted to the shelter and the fathers of the children, men are separated from homeless women and children and are required to live somewhere else, in facilities for single men. If the main component of a home may be considered to be the family and the basic unit of the family, a couple, to separate a couple is to damage the integrity of families and homes (Ibid.: 181).

And Passaro (1996) argues that men are "being written out of the picture of home" (Ibid.: 90), although her analysis stresses the preferential treatment given to homeless women within a context of favouring family formation and protection.

There is no research on these aspects of shelter policies in Canada, however, one case has been reported of an immigrant woman who resisted the separation of her oldest son when she and two children were homeless

(Novac 1996: 72). She was told that he would have to go to another shelter. The majority of shelters in Toronto do separate men and older male youth, except for the municipal family shelter which is obligated to house entire families, placing them in motels if necessary.

Victim or Agent

The literature on homelessness is divided on whether its causes are the result of personal failings or a combination of impersonal forces (Bentley 1996). While the former approach risks pathologizing homeless people, the latter may also be problematic in this regard.

Ruddick argues that presentations of the homeless as victims of a host of interrelated structural causes have effectively countered the image of "homeless by choice, a vision which characterized the homeless as intractable or even happy in their situation" (1996: 166). While successful in this regard, she points out there is a problem with portraying the homeless as victims since "we confuse notions of structural victimization with those of personal, and by extension, political incapacities," which leads to the "conflation of the homeless with social pathologies" (Ibid.: 168). Ruddick contrasts the portrayal of homeless as victims with homeless as agents, stating that the latter is accomplished by advocacy researchers,

> often working within a post modern or post structuralist framework, that has attempted to establish the role of the homeless as agents, by examining the way that the homeless, through their own acts, have attempted to confront their victimization, the ways they challenge received notions about who they are (Ibid.).

This approach, however, has garnered concerns that homelessness would thus be portrayed as an acceptable condition, normalized, possibly feeding political inaction.

By referring to a critique of the women's shelter movement over the past twenty years, Ruddick suggests that there is an inherent tension between focusing on broad political analysis or action and specific ameliorative work.

> [T]he response of women's shelters has moved away from wider political connection with the feminist movement, away from linking the need for women's shelters with wider systemic

structures of sexism and patriarchy, and confining the shelter industry—not with the intent to blame the victim, but rather with the intent of treating the victim, rehabilitating her to be able to return to what is considered a 'normal and functioning (read homed) society' (Ruddick 1996: 169).

Her proposed solution to the dilemma of portraying the homeless as victims or agents is to erase the division by addressing the homeless as active, creative and thinking political agents, "to build a new vision of the homeless not as people we must organize for, but as people we might organize with" (Ibid.: 170).

Baxter's (1991) discussions with a group of squatters in Vancouver emphasizes the significance to them of being viewed as "radicals" challenging the authority of private property, rather than "victims" or "helpless homeless" who are non-threatening. This distinction frames their agency and involvement in a progressive political critique.

On the other hand, Farge (1989) has addressed the question of homeless women's "freedom of choice," advising caution in the application of this concept. She notes that within extreme constraints, homeless women do have elements of choice, including that of avoiding hostels and remaining on the streets.

> To the women who "choose" to use hostels as a primary vehicle of housing, the pay-offs of safety, secure (if temporary) food and shelter, and the concern of other women for their welfare, outweigh the punitive aspects of hostel life. This fact is less a comment on the value of the hostels themselves than it is a statement about the impoverishment which our society is content to leave at the core of the lives of marginalized women (Ibid.: 143).

Liggett suggests that the homeless experience a "social death" because they are penniless and alienated from normal community and support systems; they are dishonoured, being difficult to look at; and common identification of the homeless with "substance abuse, the deinstitutionalised mentally ill, minority groups, dirt, and bad smells" are distancing mechanisms (Liggett 1991: 206). The homeless are not needed within an advanced capitalist structure. They form a "surplus population outside of the generative structures of

society" (Ruddick 1996), however, they may serve an ideological function.

Liggett speculates that there is a social control element to homelessness in postmodern society that operates in the interests of capital, with a powerful message especially for the working class.

> Productive activity in society can only continue if the orderly continuation of reproductive relations is assured (a hard working labor pool, the urban professional slave, for example). In pre-industrial society people were kept in their place by an ideology of natural order, which they helped to represent. In industrial society people are kept in their place by the promise that they could leave it. In postmodern society there is some basis for arguing that people are kept in their place by the fear that they might lose it (Ibid.).

Certainly there is a powerful stigma associated with being homeless.

> [A]ssigning the adjective 'homeless' to a given segment of the population is seen to suggest that they are persons *without a home*, persons who lack something essential in the sphere of human relations... Homeless families represent a social step down from families receiving welfare who have stable, albeit publicly subsidized housing. Several homeless mothers told me that this stigma is the worst part of being homeless" (Allen 1994: 179).

Drawing on Foucault's work on the particular importance of the fields of medicine and the social sciences to the creation of contemporary Western discourse, Allen comments on the "enormous, recent attention to homelessness paid by medical and social scientists... virtually all of the work is written by medical professionals, psychologists, and psychiatrists, the 'experts' in this new field" (Ibid.: 183).

State-funded and directed agencies play a dominant role in determining who falls outside the bounds of normal society, with an emphasis on "restoring docility" by a complex web of institutional responses that primarily regulates a particular segment of society (Farge 1987). While observing the public inquiry that followed the death of a homeless woman in Toronto, Farge described how the "picture of Drina which emerged from this process was not of a once-living, breathing woman, but of someone who had fallen 'under the jurisdiction' of

various agencies of the state and whose life and death
were now defined by these institutional relationships"
(Ibid.: 22).

SECTION 3: WOMEN AND HOMELESSNESS

Then and Now

It is through stories that it is easiest to draw attention to the plight of homeless women—to make their lives palpable to the reader, their situation more understandable, and to elicit empathy. There is also a fascination with women who apparently flaunt conventional society, "the semi-fiction of the tabloids that shopping-bag ladies are romantic vagabonds, passionately independent eccentrics, charming madwomen with fortunes squirrelled away in their bags" (Kates 1985: 27).

Depression era stories of homeless women resembled that of "Boxcar Bertha", whose tales of crisscrossing the United States as a hobo were described in an autobiographical account. She is presented as an unconventional and adventurous woman who eventually chose to settle down with her young daughter. If there is a moral, it is that family life requires a stable domicile. Bertha's own analysis of why women become homeless is not too far removed from current explanations:

> I have thought a lot about why women leave home and go on the road. I've decided that the most frequent reason they leave is economic and that they usually come from broken or poverty-stricken homes. They want to escape from reality, to get away from misery and unpleasant surroundings. Others are driven out by inability to find expression at home or maybe because of parental discipline (Reitman 1941: 14).

Bertha elaborates this assessment with an observation about the role of mental illness among homeless women and its significance.

> "About five percent of the women of the road are afflicted with psychoses and insanity. But the "Well Offs" have as many mental cases. They are sent to private institutions to taken care of. They do not burden the taxpayers, and the public never knows of them" (Ibid.: 215).

The next is a contemporary story in which the image of adventurousness is exchanged for tough street smarts within a more dangerous environment. Ria is one of the very few women living in an abandoned train tunnel in New York City that is home to about 50 persons. Her assessment of her own living arrangements combines references to both the autonomy and the vulnerability that she faces as a homeless woman (Morton 1995: 64).

> I feel free. No bills. Nobody knocking on the door. You get a head in the window every once in a while. That's it. Other than that, happy-go-lucky. You get your weirdos. You get people that walk up to you and proposition you and you get your people who try to take advantage of you. Several occasions I almost got raped. But I carry a weapon. I carry an icepick. Punctured a lung. Now he sees me and he goes to the next block. It's a little bit more dangerous than for a man. You have more risks. You have the risk of getting raped, mugged more easier than a man. I've stayed in little corners and stuff by myself. Like I said, I have my own protection. I protect myself very well (Morton 1995: 64).

Contemporary stories of homeless women include frequent references to relations with men that involve a complex dynamic between male protection and domination or violence (Guzewicz 1994, Baxter 1991).

There were few Canadian studies of women's homelessness during the 1980s. One of the earliest documents to explore the situation of homeless women in Canada is Ross's (1982) account of the women frequenting a drop-in centre (Chez Doris) and a night shelter (Maison Marguerite) run by Grey nuns. She outlined many of the issues facing the women: poverty, alcoholism, drug addiction, physical and mental health problems, unsafe rooming houses, lack of low cost housing, isolation from family and friends, and lack of appropriate housing and services. Loneliness, depression, and violent incidents were common. Ross investigated the women's survival strategies on the street—prostitution, conning and manipulation, stealing, and begging—and emphasized the breakdown of family support as a major traumatic event for many of the women. At least half of the women were defined by staff as being "emotionally disturbed" and had been treated in "mental hospitals." Hospital practices were viewed as problematic: either they were reluctant to admit or treat the women, or once admitted to the psychiatric ward, women had difficulty in being released. Ross also outlined the difficulties of shelter staff who struggled to come to terms with their goal to

have an open and accessible service when some of the women were violent and abusive to others.

In the early 1980s, more women with severe housing problems were approaching Halifax service agencies. This prompted investigation and the eventual development of a women's shelter. The majority of agency contacts were single mothers needing housing, most of whom were temporarily doubled up with family or friends, often leading to serious over-crowding, conflicts with landlords, and family and social strife. Agency workers attributed the problems to lack of low cost housing, a low vacancy rate, income testing, and landlord discrimination against those receiving social assistance and against children (Mellett 1983).

In 1988, King and Carley documented the dilemma of setting up a shelter (All Saints Women's Shelter in Ottawa), a bandaid solution, while there is little done to address the lack of low cost housing.

> Many people have said that what's happening at the shelter is a wonderful thing, a true example of Christian charity. People who say this have never visited the shelter. It isn't wonderful to sleep on a cot in a makeshift dormitory; to have a bowl of soup, a cup of tea and stale doughnut at 10:00 p.m. as your only food of the day; to line up with strangers for a shower and have to undress in front of them; to be afraid to fall asleep while listening to coughing, crying, and angry muttering around you; to have to leave in the morning, no matter what the weather, even if you're sick. Above all, it isn't wonderful to be alone (King and Carley 1988: 1).

In her journalistic account of homelessness, despite her disclosure that she had been homeless herself, Baxter (1991) found women more difficult than men to locate and to engage in conversation. Among a group of squatters who set up a communal system in several houses in a Vancouver neighbourhood that was being re-developed, a small women's group formed and set up a women-only house to counter the sexism and male dominance exhibited by the male squatters. Like the men, they developed an empowering political critique of the gentrification process that left them and others homeless, but the women couched the significance of their struggle in a framework of feminist analysis, identifying how gender and race shaped the process and outcome of homelessness.

Women's Housing Poverty

Asking who "drops out" of homeownership, Kieleman, Clark, and Deurloo (1995) found that families with children are less likely to be able to remain in the homeowner market than couples, and that households with two income earners are more likely to be able to stay in the market than a one income earner. The drop from homeownership can be matched by the concept of a housing affordability slide, which Mulroy (1992) coined to demonstrate how single mothers approach homelessness. Critical elements of the slide constitute a resource squeeze between high housing costs and low incomes, with concomitant frequent residential mobility, limited locational choice, and multiple stress burdens. Advocates for the homeless are familiar with how economic squeezes on a societal level affect the poor, as this commentator notes (quoted in Baxter 1991: 101).

> In the present day, the well-to-do bump the people who are a little less well-to-do who bump... and so on until the poorest are evicted or forced out with rents just too high for them to have a bed and eat.

This constitutes a popular re-framing of the classic, disputed 'trickle-down theory" of economics, placing it on its head.

Several researchers have stressed the feminization of poverty as a causal factor in women's homelessness (Timmer et al. 1994, O'Reilly-Fleming 1992, Abramovitch 1992, Ouellette 1989, Bachrach 1987, Foscarinis n.d.). Women-headed households in advanced industrial countries are more likely to have serious housing problems (Novac 1996), and, internationally, women face problems of attaining shelter that are directly related to their gender (Dandekar and Shetty 1995).

Comparisons of women's homelessness in the "north" and "south" suggest that there are both similarities and differences in the dynamics. Glasser (1994) suggests that the main factors in the north are lack of affordable housing, coupled with family disintegration, drug and alcohol abuse, and deinstitutionalisation, while rural to urban migration, unemployment, and refugees are the factors in the south. Brown (1995) stresses the similarities between north and south, noting that family breakdown, loss of children (due to death or children taking to the streets in Nairobi, and placement in foster care in Toronto), unemployment, health problems, and a

high incidence of physical and sexual assault are common among homeless women in both urban locations. Moreover, Brown notes that Kenya and Canada have both moved away from the provision of social housing, as well as social services such as health care and education, and that women and children are most vulnerable to these reductions in the welfare state.

Watson and Austerberry (1986) argue that since the concept of homelessness is a relative one, it is necessary to frame women's housing status within a home-to-homelessness continuum. They found a hierarchy within their sample of homeless women which highlighted the tendency for women's homelessness to be less visible than men's.

> The younger, employed women were more likely to stay with friends or to remain in unsuitable relationships when they lost accommodation. However, the older, married, and unqualified women, who had little knowledge of the housing system, were more likely to be living in a direct-access hostel (cited in Marshall and Reed 1992: 763).

According to Webb (1994), hidden homelessness takes many forms, for instance, a nomadic existence of moving from household to household among family and friends, or being trapped, sometimes suffering harassment or abuse, but unable to secure alternative accommodation. Relying on a 'host' household is associated with lack of privacy and space, inadequate sleeping arrangements, a poor diet, and stress and anxiety. One woman, who had lived in her car after being forced from her home by an abusive husband, "catalogued 163 cases of women who have successfully survived for varying lengths of time in cars, vans, or campers" (Bard 1987: 18). The ability to appear presentable in terms of hygiene and attire contributes to women's ability hide their homeless situation (Ibid).

Ouellette (1989) suggests that it is because they are not daughters, mothers, or wives, that homeless women are marginalized, and that many survive because they still provide sexual and housekeeping services in exchange for money or a roof. This supports the analysis and argument (Watson and Austerberry 1986 and Passaro 1996) that family ideology powerfully influences who is homeless and that housing policy is family policy.

Young Women

Paradis (1990) found that young homeless women in Montreal commonly experienced a chaotic, frequently abusive family life, with constant arguing between parents, repeated separations, divorce, placement of children in group homes, violence, wife abuse, child abuse, and parental mental illness, causing irrational and aggressive behaviours, emotional and physical neglect. The lack of appropriate support services contributes to the likelihood that homeless young women will drift into a life of prostitution (O'Reilly-Fleming 1992).

A high level of invisibility characterises homeless young single women in Scotland (Webb 1994). And according to a study of young homeless women in the United Kingdom (Dibblin 1991), young lesbian, Black, and Asian women are the most reluctant to ask agencies for help. Most of the young women left their parental home because they had been evicted, or due to violence or sexual abuse in the family, circumstances that they may not want to disclose to authorities who urge them to reunite with their families. Once on the street, many young women turn to men for protection and a roof. Homeless young women are often viewed as fallen, having brought the situation on themselves, while young men are viewed as having a bit of an adventure.

According to Visser (1992), homeless girls are much more likely to become pregnant, and the combined crises of teenage parenting and homelessness exacerbate each other, thus homelessness can be seen as a contributing factor to teen pregnancy. Commonly from chronically troubled family lives, girls who became homeless were often desperately searching for anyone who might give them love and protection. They typically became sexually active as a way to maintain relationships that they hoped would keep them from being out on the streets alone, even if the relationship is a bad one.

Gender Differences

During the 1980s, Rossi (1989) determined that a fifth to a quarter of the urban homeless in the United States were women. Street populations were more likely to be male, with a significantly higher proportion of women living in shelters. Almost all homeless families were headed by women and found in special shelters. Recent research shows that the numbers of women and women

with children among the homeless are increasing in the United States (Dail and Shelley 1996).

According to Virgona et al. (1993), the proportion of women among homeless people in Australian cities is relatively low, 18 percent in Melbourne, and 11 percent in Sydney. Other reports suggest that single parents and their children are the major group of homeless or inadequately housed in Australia, and that 38 percent of shelter users are female (Bentley 1995). Such wide variations are indicative of varying definitions of homelessness and the difficulties in accurately measuring its extent.

In Canada, a 1987 shelter count estimated that 28 percent of the homeless were women, and that 16 percent were battered women and children (McLaughlin 1987). The growth in Toronto's shelter population, mostly among women and youth, began in the 1970s when battered women's shelters began to be set up. These women's shelters have had continually higher occupancy rates than the single men's shelters (O'Flaherty 1996).

Although the majority of homeless people using Toronto shelters are single males, their number is decreasing while the number of single women and two parent families is increasing. The total number of hostel admissions has gone up since 1991, through repeat usage, and more people are staying longer (Advisory Committee on Homeless and Socially Isolated Persons 1996). This suggests an entrenched state of homelessness for many of the thousands of people in the Toronto shelter system. In 1995, women constituted about 35 percent of Toronto shelter users (Ibid.). It is estimated that from 30 to 40 percent of the homeless population in Montreal are women, and 15 percent of those using shelters are women (Fournier et Mercier 1996).

There is not much research on young homeless women in Canada. Among street youth, females are somewhat more likely than males to be unemployed and to work as prostitutes, but considerably less likely to abuse drugs or be a youthful offender (Joyce L. Radford, Alan J. C. King, and Wendy K. Warren. 1989. *Street Youth and AIDS*, Queens University, cited in Baxter 1991: 175).

Research in the United States shows that single men tend to be homeless for longer periods of time, are more likely to have had treatment for alcohol or drug dependency, and to have been incarcerated, while single

women, but not women with children, are more likely to have been in hospital for mental disorders (Burt 1992). Homeless women are more likely to have children in their care, are younger, more likely to be members of a minority group, are homeless for a shorter time, and spend less time in unsheltered conditions. Women without children are more likely to be white, have been homeless longer, and more often have a history of alcoholism or schizophrenia (North and Smith 1993).

Canadian research has also found that men living on the street are more likely to have histories of incarceration and addiction problems, and women are more likely to have histories of physical and/or sexual abuse, as well as mental health problems (Ambrosio 1992; Laskin and Guberman 1991).

Social Relations and Networks

Despite some personal rivalries, homeless women living in shelters demonstrate co-operation amongst themselves and tend to form groups, suggesting that theories of disaffiliation are of limited relevance in explaining women's homelessness (Cabana-Renaud 1983). Recent research suggests that there may not be a significant difference in the social supports of homeless and nonhomeless working class women (Jackson-Wilson and Borgers 1993).

Among homeless people in the United States, women are twice as likely as men to be in contact with their family (Breakey et al. 1989). Based on a study of women living in homeless communities, encampments, and a shelter for battered women, Rowe (1987) argues that one of the final steps in the path to homelessness is the crumbling of social networks, although women form new relationships among their homeless peers and with service providers. Lover or spouse relationships provided an anchor and offered some protection.

According to Rowe and Wolch (1990), who observed several homeless communities during 1980s, homeless women were much more likely than men to enter into a lover/spouse relationship, although to some extent this was a reflection of the fact that males far exceeded the number of females. A crucial factor in a woman's choice was her vulnerability to physical assault, consequently many homeless women sought relationships with men to satisfy their immediate need for protection. These relationships, most of them based on mutual affection and companionship, provided

emotional support, a sense of identity, and positive self-esteem. They would sometimes take on the character and functions of a lost home base, providing for a pooling of resources and daily continuity. Some of these relationships were abusive or exploitive or both.

> "Women tolerated abusive relationships when they lacked the physical or mental resources to face a threatening locale without support or to find alternative support networks. The relationship still served the logistical and material function of a home base, but the effect on short- and long-term morale could be devastating. With no alternative, homeless women often endured predictable patterns of abuse rather than face alone the uncertain dangers of the streets" (Ibid.: 283).

The street encampments themselves could also serve as a replacement for a lost home base, and their social networks could ensure the protection and security of camp members and their possessions. This stability and support could also substitute for a spouse and allow a woman to leave an abusive male partner (Rowe and Wolch 1990).

Passaro (1996) also noted that the women who lived in homeless encampments in New York were almost always "identified as girlfriends, fiancees, or wives" of homeless men, and that the price paid for this attachment is that "women take a backseat to men in the establishment of camp rules and in the formulation of camp politics" (Ibid.: 100).

Homeless Families and Mothering

There is almost no Canadian research on families or homeless women with dependent children, although there are several thousands of them living in shelter and motel accommodation in Toronto alone (Advisory Committee on Homeless and Socially Isolated Persons 1996, O'Reilly-Fleming 1992). O'Flaherty (1996) attributes the lower number of homeless families in Canada, compared with the United States, to the relatively higher social assistance rates. Where these rates are now being reduced, however, the proportion of families among the homeless is now increasing (Advisory Committee on Homeless and Socially Isolated Persons 1996).

According to Kozol (1988), poor families lose their jobs first, then their homes, and finally their families. Studies

of homeless families in the United States show that almost all homeless families are headed by women. Among the three dominant gender/family composition groups, single men, single women, and women with children, the latter are more likely to be younger, African-American, with a lower rate of mental hospitalization, and lower rate of substance abuse (Baker 1994, Robertson 1991).

Homeless women with children appear to have avoided homelessness with meagre resources far longer than had either single women or single men (Baker 1994). A study of homeless mothers (Bassuk, Rubin, and Lauriat 1986) found that over half of them had a high school eduction, but few had any employment experience. Almost all of them received social assistance and had long histories of residential instability. The vast majority of them had been doubled-up, and half had previously used emergency housing facilities. Almost one-third of them described a social precipitant: dissolution of a relationship with a man, battering, death or illness within the mother's nuclear family, or inability to get along with others in shared domestic arrangement (excluding overcrowding). One-third of them had been abused during childhood, and two-thirds experienced a major family disruption. Almost two-thirds lacked or had minimal supportive relationships, and one-fourth named their child as the major support. Half of their children had developmental lags, anxiety, depression, and learning difficulties.

Banyard and Graham-Bermann (1995) found a strong sense of determination among homeless mothers living in shelters. They placed a high value on their ability to be good mothers, provide for their children, and care for others, as well as be independent, self-reliant, and fend for themselves. Their ability to be good mothers was compromised by shelter rules about disciplining children.

> "Well-meant shelter policies often failed to consider the special needs and circumstances of these women. Thus, they cited instances of being scolded by staff in front of their children, and reported feeling that they had lost credibility as authority figures with the children as a result" (Ibid.: 487).

Class differences between shelter staff and users are cited as the basis for differences over methods and goals of child discipline (Davidson and Jenkins 1989).

Shelters prevented mothers from mothering, frequently encouraging them to entrust their children to some form of foster care. Those who had been reported to child welfare agencies were observed for future problems and lived under the threat of loss of their children to foster care for infractions of shelter regulations—they were deprived of assistance from male partners and other relatives and friends, then criticized for not being able to rear their children alone (Susser 1993).

Among homeless mothers in Detroit shelters, Mills and Ota (1989) noted a pattern of teenage pregnancy and commented on the implications for another generation growing up homeless.

> It is clear that the lack of a stable residence directly affects performance in school and peer relations through constant uprooting and movement. Moreover, the effect on the children's perceptions of themselves and the world may be devastating. Basic safety and security needs often are not met. Every move represents a loss of familiar objects. The social and psychological impact of growing up without a stable home carries over into adulthood and affects the ability to fulfill the demands of adult roles (Ibid.: 488).

Dail (1990) found a higher level of education and labour force participation among another group of homeless mothers living in the southeastern United States, but a lack of family and social or emotional support systems, reflected in a strong distrust of others and a reluctance to make friends. The children were subject to both physical and emotional abuse, and had little opportunity to develop their social skills. They exhibited a diminished sense of self and of their future, and their mothers felt "helpless and impotent about their own ability to ensure that their children will not suffer the same misfortunes that they have experienced" (Ibid.: 293)

> The tendency has been to move from place to place because of some combination of personal crisis, eviction, community gentrification, uninhabitable dwellings, and/or job loss. Many of these families have lived with friends or relatives, in homeless shelters, and on the streets for some period of time (Ibid.: 294).

About a quarter of these women have mental health and drug abuse problems, but it was "not clear whether the tendency toward substance abuse in this group is a form of self-medication, or a way of facing the realities of life on the streets, or a cause of becoming homeless in the first place" (Ibid.: 294). Despite their severe social isolation and other difficulties, these women appeared to maintain a surprisingly good overall psychological state, perhaps because their children are a stabilizing focus.

Those who are part of the social networks of homeless mothers, "were unable to rescue them from the streets", "most often, they offered emotional support, but could not provide instrumental help, such as financial aid, child-care, transportation or most importantly, shelter" (Bassuk 1990: 429). Their children suffered severe developmental lags that were related to their mother's difficulties, and the school-age children manifested high levels of anxiety and depression, emotional and learning problems (Ibid.).

In another study of homeless mothers, Shinn, Knickman, and Weitzman (1991) found that the women had three times as many traumatic childhood experiences involving either abuse or separation as housed women, including being placed in a foster or group home, being homeless, being physically abused, and being sexually abused. Their social networks, however, were not different from housing mothers. In fact, at the point of seeking public shelter, the homeless mothers were more likely than housed mothers to have recently contacted their parents, other relatives, and friends, although they were less likely to draw on these resources for help with their current housing needs. "More than three fourths of families seeking shelter had already stayed with members of their social network in the past year. The data suggest that they had used up potential sources of support before turning to public shelter"(Ibid.: 1180). These authors conjectured that the differences between housed and homeless families diminished when the housing market became extremely tight and a larger group of poor families became homeless. Not only were these mothers not socially isolated, their relatives and friends provided a critical safety net preventing homelessness.

Also countering earlier research that suggested social isolation was a contributing factor to the homelessness of mothers, Goodman (1991) found that the social support networks among homeless and housed women who live on social assistance were similar, except in one aspect—homeless mothers were significantly less trusting of their social network. Goodman suggested

that the trauma of homelessness itself disrupted the women's social relationships, created a sense of insecurity and aloneness, and changed the women's feelings about the trustworthiness of others. Goodman's results confirmed that homeless mothers have as many social ties as housed mothers, and indeed rely on them so heavily prior to seeking public shelter that they use up the available assistance, but they continue to rely on their network members in other ways.

According to Hausman and Hammen (1993), the loss of autonomy that results from public mothering erodes the mother-child relationship, and "virtually all the high risk conditions that have been studied for their negative impact on mothers and children come together in the situation of homelessness" (Ibid.: 365). While pregnancy disrupts family relations and exhausts supports, driving women out of their homes or shared domiciles to search for other shelter, it is also a protective factor against future homelessness, attracting more private and public support.

For a woman leaving an abusive husband, there may be serious dilemmas regarding child custody.

> "Child custody issues inevitably complicate the situation for a battered woman who has left her home. If she takes the children with her, she can be challenged in court for placing them in an 'unstable environment,' that is, a shelter. If, for safety reasons, she decides to leave the children with her parents or a friend, she could be attacked in court for abandoning them. If she leaves them with the abuser, she could jeopardize their safety—and be charged with abandonment as well" Zappardino and DeBare (1992: 757).

Since homelessness itself is a serious threat to women's ability to care for their children, a considerable number of homeless women who appear to be single may in fact be mothers.

> While there are certainly women who have severed emotional and financial ties with their offspring and who navigate through the world as single entities, some of the "single" women seen in shelters, in soup kitchens, and on the street have children living with relatives or in foster care whom they visit and plan to reunite with (Bourroughs, Bouma, O'Connor, and Smith 1990: 140).

The state of homelessness frequently means that their ability to regain custody of their children is lost, and social service agencies generally do not assist women to obtain adequate housing that would convince a court to release the children into their care again (Ibid.)

> "Paradoxically, the care of dependent children can both protect against and increase the risk of homelessness among women. On the one hand, children may be a single mother's only source of emotional support and can provide access to benefits and social services that would not otherwise be available to a single adult on the brink of homelessness. On the other hand, young children require constant care, and the lack of affordable day-care options and enforceable child-support legislation makes full participation in the work force very difficult for single mothers. Furthermore, the frequent disparity between the wages of men and women compounds a mother's financial difficulties. Poor women who manage to work typically float just above the waters of economic ruin: a missed paycheck, medical emergency, or other complication may lead to eviction. Should calamity strike, the depth and duration of their economic submersion will depend on the strength of their ties to relatives and friends" (Buchner et al. 1993: 386).

Smith and North (1994) found that homeless mothers with children in tow were younger than other homeless women and more likely to be unemployed and welfare dependent, but had lower rates of alcoholism and other psychiatric disorders. Despite the enormous difficulties of retaining custody of dependent children when homeless, women who do not are already being described as more deviant, with more personal vulnerabilities such as mental health problems and alcoholism.

SECTION 4: VIOLENCE AGAINST WOMEN AND HOMELESSNESS

The connection between men's violence against women and housing has long been obvious to those who initiated and are involved in the "battered women's movement" where the necessity for service provision (to provide safe houses and support) has threatened to overwhelm and gradually deter feminist activists from their early emphasis on political action. According to Walker (1990), a major factor in the dilution of feminist analysis has been state involvement in redefining practices of male dominance as distinctive social problems amenable to professional intervention. Although it seems obvious that women usually lose their housing when they flee from abusive male partners, there is no research that ascertains the extent to which this occurs, or perhaps more importantly, the extent to which the fear of becoming impoverished and homeless deters women from leaving unsatisfactory or abusive relationships with men.

The housing literature and the literature on violence against women have been quite distinct. Where there is some limited integration, such as within the review of housing evolution, research, and policy in Canada since 1945 edited by Miron (1993), "women as victims of domestic violence" and "the homeless and displaced persons" are portrayed as distinct groups within an array of "special needs" consumer groups (McClain 1993).

Since various forms of victimization are contributing or causal factors in homelessness, and not all women who lose their housing due to violent spouses are found in battered women's shelters, we need to learn more about the histories of all homeless people to better understand the role of victimization and violence. For instance, in addition to their own histories of abuse, homeless women also reported a similar abusive background for their spouse or boyfriend.

Recent research suggests that there is an increase in the degree to which violence against women and children by husbands and fathers is a causal factor in homelessness among women (Dail and Shelley 1996). And there are reasons to distinguish the circumstances of women who have been abused by their spouses, for whom safety is the prime consideration.

> Under such circumstances, the concept of home as a place where one is safe is shattered. Home is a prison, a place that becomes more dangerous than anywhere else. This reality, perhaps more than any other, distinguishes battered women and their children from other homeless families and makes resolution of their situations even more complex. This issue is not one of finding a home, it is one of finding a home that offers safety. The fear of being found and harmed keeps many battered women on the move. Its keeps many of them homeless (Zappardino and DeBare 1992: 755).

There are particular psychological aspects unique to women in these circumstances. For instance, there is little advance preparation possible for a woman who has left her home without having planned or anticipated homelessness. Forfeiting that home to the person who caused her danger adds further trauma and may result in her viewing herself as temporarily displaced. Waiting for possible resolutions involving child custody, a restraining order, or conviction, all may contribute to living in a world of denial for many months or even years (Ibid.).

Except for those crisis circumstances where familial violence has directly preceded a woman's use of a shelter, it is difficult to assess to what extent men's violence against women is a causal factor in homelessness. It is primarily poverty and the lack of affordable housing that causes women to remain in the hostel system for long periods (Timmer et al. 1994). A woman may successfully leave an abusive spouse and then later experience a slide into homelessness, rather than an abrupt crisis. Moreover, wife assault is not the only form of violence that leads to homelessness.

According to the Council on Scientific Affairs, the "role that prior victimization plays in creating runaway youths who consider themselves homeless cannot be overstated. Teenage girls have frequently been sexually abused by family members in their homes" (1989: 1360). Their traumatic childhood experiences often lead to drug consumption and addiction, in turn prompting other problematic strategies, such as prostitution, drug trafficking, theft - all activities where violence is again prevalent (Côté 1991). In one study, women attributed their homelessness, addiction, and involvement in prostitution to their childhood experiences of sexual abuse, and their alcoholic parents (Ralston 1996).

Women who were sexually abused in their childhood evidence a higher rate of unemployment as adults, which has obvious implications for their economic independence and ability to stay housed (Russell 1986).

A number of studies have found high rates of childhood physical and sexual abuse among homeless adults. Homeless women are much more likely to report abuse histories than their male counterparts. They are nearly twice as likely to have been physically abused, and more than three times as likely to have been sexually abused compared to homeless men. While abuse was generally confined to childhood among the men, women reported abuse well into adolescence (Fischer 1992). Moreover, there is some evidence that early sexual abuse increases the probability of involvement in prostitution among adolescent and adult homeless women (Simons and Whitbeck 1991), thereby continuing a high risk of abuse. With childhood abuse constraining their life chances, the process of becoming homeless begins early on for some women (Passaro 1996).

Safety in Relation to Men

Homeless women are much more likely than men to say they need to learn how to protect themselves (Herman, Struening, and Barrow 1994). Women's fear of some men keeps them seeking help from others who will protect them. Some researchers find homeless women's choices in this matter difficult to understand.

> Women usually seek the man for protection, and in exchange, they allow the man to be totally dominant. The bargain is somewhat paradoxical because the women sacrifice the same autonomy and independence in the tunnels that they would relinquish in a homeless shelter, yet they refuse to enter a shelter program, they often say, in order to keep their freedom (Toth 1993: 219).

Others see a logical pattern given some women's extremely limited options. Tomas and Dittmar (1995) found that homeless women referred to safety in relation to men, rather than in relation to housing. Not only was the loneliness of temporary accommodation described as unbearable, but also as very unsafe. Men were needed to provide protection from other men, both inside and outside housing. Live-in relationships with men were initiated from the ages of fifteen to eighteen years, and the men were typically considerably older than the women.

Men were always found to be 'safe' at first, their violence frequently excused at least for some time, and were finally 'left', either because the violence started to take on life threatening forms or the possibility of a safer situation presented itself, more often in the form of another man. Sleeping anywhere, without a man for protection from other men, was considered the most dangerous option in terms of both loneliness and safety. Her safety was dependent on them... It appears that homeless women do not want what is currently offered to them. They say that they would rather tolerate a degree of physical abuse in a relationship with men, and feel safer and more secure, than accept the unsafe isolation of the 'accommodation' offered by social services. They accept these conditions only under duress, and stay for only as long as they have to (Ibid.: 509-510).

In Baxter's (1991) street-wise assessment of homelessness, based largely on conversations with homeless people in Vancouver, there are many references to women's strategies to avoid sleeping on the street by agreeing to sex with men who can provide a bed for the night. The theme of sexual violence also threads through her book. In the midst of a Vancouver drop-in centre where women were talking about the pressure to work in the sex trade to pay rent increases, a staff member commented on the increase in women and children among the homeless, as well as the relationship between violence against women and their housing.

> More and more women are living in violent situations. The transition houses are always backed up. We have women who are living in really crummy hotels that don't have proper locks on the doors. It's a real challenge for the women and kids to get to the bathrooms down the end of the halls in the hotels safely. A couple of instances where women have been raped because a landlord refused to put a decent lock on the goddamn door (Baxter 1991: 41).

This indicates some of the conditions under which women choose to stay with men or live alone.

Context of Violence Against Women

In assessing the role of violence in women's homelessness, it is important to understand the context of male dominance and the backdrop of men's violence

to women in our society generally. The following overview of the extent of violence against women and girls draws on the results of a national survey conducted by Statistics Canada.

One-half of all Canadian women have been physically or sexually assaulted since the age of sixteen, mostly by men. Abuse by a male partner constitutes a major portion of this abuse. Emotional abuse by a male partner was reported by 59 percent of the women. And almost a third (29 percent) have been physically or sexually assaulted by a male partner: by a former partner in the case of 48 percent of the women, and by a current partner for 15 percent (Statistics Canada 1994: 4). When these incidents occurred, women relied mostly on family and friends for support. Only a quarter of them reported the incident to the police; a quarter contacted a social service for assistance; and 22 percent never told anyone (Ibid.: ii).

Of those who lived with violent partners, one-quarter used alcohol, drugs, or medication to help them cope with the situation. Those who endured emotional abuse were more likely (31 percent) to use alcohol or drugs to cope (Ibid.: 15). Women who feared for their lives were more likely to leave abusive male partners than those who did not (72 versus 28 percent), and those with children who had witnessed the violence were twice as likely to leave as those whose children were not witnesses (60 versus 28 percent) (Ibid.: 38).

The majority of women who left stayed with friends or relatives. Of the remaining, some went to transition houses or shelters (13 percent), and some moved into a place of their own (13 percent); only a small number (5 percent) stayed in a hotel. When women returned to their homes, these were their reasons, in descending order of frequency: for the sake of their children (31 percent), to give the relationship a second chance (24 percent), because the partner promised to change (17 percent), and due to a lack of money or housing (9 percent) (Ibid.: 40).

Girls are more likely than boys to be physically and sexually assaulted, and when they are sexually assaulted, it is more likely to be committed by a parent (Ibid.: ii). In cases of violent marriages, more than a third of the children witness the abuse. And there is some evidence of a generational cycle of family violence in that boys who observe their fathers abuse their mothers are more likely to later abuse their own wives,

and girls may be more likely to become involved in abusive relationship as adults (Ibid.: 18).

Sexual Harassment and Assault

Sexual harassment of tenants and on the streets is a problem that has received little study and far less public recognition than workplace harassment. A Montreal study of discrimination against women as tenants was the first to include questions on sexual harassment. Twelve percent of the respondents reported that they had been sexually harassed, most often by a landlord (Bourbonniere et al. 1986). A subsequent Ontario survey found that one in four women had been sexually harassed, by male tenants as often as landlords or their agents (Novac 1994).

Ross (1982) declared homeless women to be among the most defenceless in the community, whose poverty and transience is a reflection of extreme disenfranchisement and powerlessness that is not lost on unscrupulous housing gatekeepers. According to Golden (1992), the state of homelessness publicly signifies that women are husbandless and no longer domestically subordinate, and some men interpret this as a licence to sexually violate.

The results of a survey of homeless women in Toronto demonstrate the risk of sexual violence (these findings derive from the Street Health survey, with a sample of over four hundred homeless people, that is described further below). Almost half of the women had been assaulted at least once in the previous year, and experiences of sexual harassment were commonplace (Hardill 1992).

> Of all the women ... 43.3 percent reported having been sexually harassed, having experienced unwelcome advances or having been grabbed or touched when they did not want to be. Thirteen women stated that this happened to them so frequently that they could not count the number of times. More than one in five women reported having been raped in the last year (Ibid.: 87).

Homelessness and Sexual Violence

Psychological trauma is part of the very process of becoming and dealing with being homelessness (Goodman, Saxe, and Harvey 1991). Violent behaviour is also very much a part of the lives of the homeless, and "it seems to be part of a broader picture of problems associated with risk for and experience of homelessness" (North, Smith, and Spitznagel 1994: 95).

In their study of homeless women and men living on the street and in shelters in a mid-sized American city, Ritchy, La Gory, and Mullis (1991: 40) found that women were much more likely than men to have ever been physically and sexually abused (71 percent versus 28 percent, and 46 percent versus 3 percent, respectively). And a survey of homeless adults in New York City found extremely high rates of victimization and injury, especially among those with mental illness (Padgett and Struening 1992). Homeless women in the United States are 20 times more likely to be assaulted sexually than the general population of women (Wright and Weber 1987).

When a Toronto drop-in centre for homeless and socially isolated women conducted a needs assessment, the staff and researchers assumed that most of the service users had experienced sexual violence. Using some creative research methods, they found that over two-thirds (68 percent) of the women who participated revealed that they had experienced sexual abuse and violence in their lives. This prevalence rate constituted a combined total of various forms of violence experienced as children and adults, "including sexual assault, wife assault, sexual harassment, incest, child sexual abuse, and sexual intrusion" (Laskin and Guberman 1991: 25).

Shelter workers in Montreal also believe that the vast majority of homeless women they see, regardless of their age, have experienced incest, sexual abuse, or other forms of abuse. Often the women are not willing to discuss this in a structured interview or as the reason for admission, but it may be disclosed later once trust in a staff member has been established (Ouellette 1989).

Various studies of homeless women in the United States have demonstrated high lifetime rates of childhood physical and sexual abuse and of assault by intimate male partners, higher than that experienced by comparison groups of poor housed women (Browne 1993). Contrary to these results, one study found no significant difference in the rates of victimization between homeless and housed poor mothers (Goodman 1991a). Among homeless women with serious mental illness, Goodman, Dutton, and Harris (1995) found that almost all (97 percent) of their sample of formerly homeless women referred by a shelter or psychiatric hospital in a major American city had experienced physical or sexual abuse, usually severe, at some time in their lives. A third of these women reported physical or sexual assault during an episode of homelessness.

Using a slightly broader definition of homelessness than that commonly used by researchers in the United States, Breton and Bunston (1992) found that three-quarters of the single homeless women in Toronto had been physically or sexually abused, usually by a male family member and commonly within their home, prior to becoming homeless. Almost all these women were living in hostels, and they were relatively young (their average age was 27 years). On average, the women had been homeless for two years. With no distinction between those who left the family-of-origin or marital/common-law home, almost two-thirds of them (62 percent) cited relationship problems within the family as the reason for leaving; and almost a third stated that economic problems precipitated their current episode of homelessness.

Although repeated incidents of assault were frequent, Breton and Bunston found that very few of the women who had been assaulted by their father or step-father while living at home, were later assaulted by a husband, common-law partner, or boyfriend, suggesting that re-victimization is not attributable to learned behaviour by abused women who "set themselves up for further abuse." Further, the incidence of physical and sexual assault was lower after the women left home than before, suggesting that while being homeless places women at risk of victimization, leaving a violent home is an effective strategy to protect themselves.

> The findings do not imply that the streets are safe for women. They do indicate, however, that many single homeless women are in greater danger of physical and sexual assault in the home environment than when they are living in hostels and spending a lot of time on the streets (Ibid.: 40).

SECTION 5: HEALTH AND HOMELESSNESS

The lack of adequate shelter or a reasonably safe and secure place to live takes a mighty toll on one's health, making homelessness an important health issue. In fact, according to Daly (1991: 39) there is little point in distinguishing these aspects of homelessness, especially in terms of solutions.

> [F]or the homeless, the issues of housing and health are inseparable. It is nonsensical to deal with one aspect of poverty in a vacuum. Comprehensive programs are essential to ensure adequate service delivery for a variety of problems encountered by increasingly heterogeneous homeless populations.

Daly points out that health problems are implicated in diminished employability and therefore the risk of homelessness. For example, it is frequently the case that individuals who contract AIDS are shunned by friends, families, and lovers, lose their job, and are evicted; on the other hand, homeless people who are drug users or engage in the sex trade to earn money for survival are particularly susceptible to AIDS. And there is a range of health problems that commonly affect homeless people: cold, injury, cardio-respiratory diseases, tuberculosis, skin diseases, nutritional deficiencies, and sleep deprivation, all magnified by the difficulty that homeless persons have obtaining access to adequate health services.

Physical Illness

Most of the extensive health-related literature on homeless persons is American. Wright and Weber (1987) found that virtually any health condition was likely to have higher prevalence and incidence rates among homeless adults than in the U.S. adult population overall. The homeless are "particularly at risk because of increased levels of psychological strain, climatic exposure, and exposure to high-density environments in public shelter, where the potential for communicable disease exists" (Ritchey, La Gory, and Mullis 1991: 34).

Disaffiliation from medical and social services resources is common among all homeless persons, but the implications are greater for homeless women who are more frequently accompanied by children, and more depressed due to increased vulnerability to life stresses,

economic strains, and social isolation (Crawford et al. 1993).

Pregnancy presents a whole range of health risks and complications for homeless women, with attendant implications for their babies (Bourroughs et al. 1990). Among homeless women who gave birth while living in a shelter in New York City, the risk of receiving no prenatal care, of low birth weight, and for infant mortality were all approximately twice that of other women (Chavkin et al. 1987). "Their babies are at high risk of developing serious medical and developmental problems" (Bassuk and Weinreb 1993.: 348).

Dependent children of homeless mothers suffer emotional and learning problems as well as a variety of health problems, double the rate of chronic physical disorders, immunization delays, lead poisoning, and poor nutritional status (Bassuk 1990). And homeless adolescents suffer from a range of health problems: "nutrition, substance abuse, psychiatric problems, physical complaints (especially those related to exposure and hygiene), sex-related medical concerns, and problems associated with victimization and abuse" (Council on Scientific Affairs 1989: 1359).

Street Health is a Toronto agency that operates community-based nursing stations for women and men who are homeless and underhoused. Building on the user statistics they had gathered for several years, they designed and conducted a survey of the health issues among homeless people. Their respondents were younger than the general population, and a third of the sample was racial minority (Native, Black, or Asian). A quarter were born outside of Canada, usually from the United Kingdom, Jamaica, and the United States. According to their findings, the homeless do not have different illnesses, just a higher prevalence of chronic conditions due to their living circumstances and poverty (higher rates of arthritis/rheumatism, allergies/hay fever, emphysema/chronic bronchitis, hypertension, asthma, myocardial infarction (heart attack), epilepsy, head injury, diabetes, and stroke). Over half the respondents had used hospital emergency departments in the previous year, and an equal number had been refused medical treatment in emergency departments at some point due to lack of an Ontario Health Card. They were twice as likely not to receive dental care as the general population. The level of reported alcohol

consumption was similar to that of the general city population, and alcohol was more commonly used than all other drugs combined. Less than a tenth of the respondents used licit or illicit drugs on a daily basis. Over a quarter of the people had considered suicide in the past year, and eight percent had attempted suicide in that period. Almost half of the women had been assaulted in the previous year, compared to over a third of the men. Thirteen percent of the women were pregnant, and most of them were receiving pre-natal care, but they were missing too many meals for adequate nutritional health. A third of those who had delivered their last baby in a hospital had no place to go after discharge.

According to O'Flaherty, there have not been any studies of substance abuse among the homeless in Toronto, however, the "drug of choice" appears to vary by city; crack predominates in New York and Newark, alcohol in Toronto and London, England (O'Flaherty 1996: 250).

In his comparative review of programs in Canada, Britain and the United States, Daly concludes that accessibility to services is an issue in each of these countries.

> Homeless persons find it extremely difficult, without a fixed address, to gain entrance to the health-care system. Because they lack the resources to maintain personal hygiene, and perhaps because they may not appear terribly attractive, these people find that doctors and nurses are reluctant to treat them. People in emergency rooms are often unreceptive, and transients are frequently treated as abusers of the benefits system. Moreover, many would argue that the notion of a safety net which catches people *after* they fall over the precipice is a matter of 'too little, too late' (emphasis in original) (1991: 57).

At least one Toronto hospital, located in an inner-city area where there is a concentration of homeless and poor persons, has acknowledged not only the health problems and diseases more common among homeless persons, but is trying to accommodate their particular needs in other respects.

> For example, homeless patients who need rest and medication are no longer discharged to the streets by the Emergency Department;

arrangements are made with local hostels to allow these patients to stay indoors during the day. Street Health staff also provide follow-up treatment and act as a liaison between patient and hospital. The Emergency Hospital provides hot meals for patients who must wait a long time for treatment, and subway tokens or cab chits to those worried about missing out on a hostel bed because of their wait. A staff-education program is designed to change negative attitudes toward the homeless through visits to nearby hostels and soup kitchens (Lechky 1993: 1780-1).

The hospital projects' initial target groups include street youth and homeless women.

Nutritional deficiencies are more common among homeless women than homeless men, although it is not clear why. When Bunston and Breton (1990) investigated the eating habits of 84 women who used hostels and drop-in centres in Toronto, their respondents attributed their food problems to poverty rather than a lack of information. Daily meals, at least breakfast and dinner, were provided for most of the women by hostels, supplemented by the drop-ins. Although the women's nutritional levels were less than adequate, the food provided by service agencies made a significant improvement in the nutritional value of the women's food intake, leading the researchers to conclude that hostels and drop-in centres provide not only shelter, but have also assumed most of the responsibility for feeding the homeless.

Sexuality

Few homeless women seek contraception, and birth control methods are very difficult to use since bulky items are subject to theft or loss, and homeless women rarely meet the medical requirement for intrauterine devices due to the instability of their life circumstances (Bourroughs et al. 1990).

> "Most shelters do not permit sexual activities or allow the privacy people may seek, but it is certainly absurd to conclude that homeless women do not have sexual relations. Many women have partners who are also homeless and have access to private shelters during the day or sleep out in order to spend intimate time with their partners. Prostitution is the only way for a woman in poverty to support a drug habit, but that is difficult information for a client to reveal

to providers. Sensitivity toward sexual orientation is important for providers in this population, in which self-esteem is low and women may be quickly alienated" (Ibid.: 142).

The reasons for women's alienation from medical providers may be rooted in the treatment they receive. According to the Street Health study, homeless people report poor attitudes on the part of physicians and medical staff, as the following quote reveals.

> I went to an emergency room after I was raped. The doctor was very rude. He said I deserved what I got. He asked me if I was still working the streets and I said no. He said, 'Why are you still getting raped then? It must have been one of your old customers you ripped off' (Ambrosio et al. 1992: 39).

There is some evidence that African-American mothers living in shelters in the midwest United States are misinformed about HIV/AIDS, do not perceive themselves to be at risk, and "as a result they may be less likely to engage in behaviors that protect their health" (Ibid.: 490). In fact, African-American women are much more likely to contract AIDS, and the authors conjecture that these women perceive AIDS to be a disease of gay men and injection users, or that AIDS may be a lower priority for them than dealing with overriding problems of poverty, racism, and sexism (Ibid.: 49). The high risk of AIDS infection and transmission among homeless youth "with their high levels of sexual activity" has also been noted as a serious health problem (Council on Scientific Affairs 1989: 1360).

Homeless women also have a high incidence of abnormal Pap smears and sexually transmitted diseases (Johnstone, Tornabene, and Marcinak 1993). And shelters for battered women and their children are considered an under-recognized source of communicable disease transmission, notably diarrhoeal illness (Gross and Rosenberg 1987).

Mental Illness

The bulk of the health-related literature on homelessness is not about physical health, it is focused on mental illness within the homeless population. The National Institute of Mental Health has been a major contributor to the funding of research on homelessness in the United States, and "research on the new homeless almost

invariably attempts to estimate the prevalence of mental illness among them" (Rossi 1989: 38, 42). Rossi concluded that "the new homeless suffer from much the same levels of mental illness, alcoholism, and physical disability as the old homeless" (Ibid.: 41).

This is a vexed area of inquiry since an emphasis on individual dysfunction or pathology is easily amenable to "victim-blaming" reasoning (Bachrach 1987), making discussion of the role of mental illness in the onset, course, and consequences of homelessness highly controversial (Buchner et al. 1993). Some argue that the experience of homelessness itself may prompt symptoms of mental illness (Goodman, Saxe, and Harvey 1991; Coston 1989), and others note that homeless women adopt disturbing behavioural patterns or poor hygiene as a defence, to ward off people who may cause them harm (Golden 1992, Stoner 1983). Bachrach (1987) suggests that women who have been evicted or abused by their spouses may take on characteristics of severe mental disorders, such as an inability to converse intelligently, difficulties with memory, and demonstrate an attitude of despair, depression, and bitterness. It is important to note that women have been the main subjects of psychiatric intervention.

On the other hand, medical researchers are trying to respond to such criticisms. For example, North et al. (1993) argues that antisocial personality can be a valid diagnosis among homeless, rather than an artifact. They found that onset of symptoms of antisocial personality disorder usually preceded the onset of homelessness among a random sample of homeless persons living in shelters and on the streets in St. Louis. Adjusting for factors that are compounded with homelessness, they determined that 23 percent of men and 7 percent of women met the criteria for antisocial personality disorder. In fact, homeless men scored higher on all but one of the symptoms (the exception being an assessment of responsible parenting), including "irritable and aggressive behavior, failure to conform to social norms of lawful behavior," and "lacks remorse for hurting or stealing" (Ibid.: 580).

The tension between advocates for the homeless and health researchers has led to defensive and painstaking explanations that "a diagnosis is not an indictment" (Breakey as quoted in Bachrach 1987: 377), that severe mental illness is only one of many risk factors for homelessness, and that the relationship between

homelessness and trauma is complicated and possibly reciprocal in nature, especially for women whose experience of sexual or physical abuse preceded homelessness (Buchner et al. 1993).

Methodological issues arise regarding prevalence and incidence figures for mental illness, since "estimates of the prevalence of major mental illness and substance abuse among homeless persons vary widely depending on how homelessness is defined, the sampling strategy, the interview site, and assessment procedures" (Buchner et al. 1993: 387). Problems in some of the commonly used methodologies for measuring mental illness have also been noted (Bachrach 1987, North and Smith 1993b). And the lack of reliable data in Canada is partially due to the difficulties in studying mental illness among the homeless (Hewitt 1994).

Research on the prevalence of schizophrenia and associated factors among the homeless in general and homeless women in particular has become a burgeoning sub-set of the literature. The prevalence of schizophrenia among women living in shelters has been reported at 30 percent in Sydney, Australia (Virgona et al. 1993) and over 50 percent in London, England (Marshall and Reed 1992). Geographic stability among these women was reported to be high in Australian and English cities, but low in the American cities (Virgona et al. 1993). Mentally ill homeless women admitted to a London psychiatric hospital during the 1970s were reported to be more socially stable than their male counterparts (Herzberg 1987).

Compared to mentally ill women who have never been homeless, mentally ill homeless women have "higher rates of a concurrent diagnosis of alcohol abuse, drug abuse, and antisocial personality disorder," less adequate family support, and are more likely to be Black and less likely to be Hispanic (Caton et al. 1995: 1153, 1155), although adequacy of family support was a more important risk factor than any aspect of illness (Ibid.: 1156).

Rossi (1989) noted that the problem of alcoholism was the focus of much previous research on the old homeless, out of proportion to its actual reported prevalence. The problem focus has apparently changed from that of alcoholism, which was and continues to be more prevalent among homeless men, to mental illness which is more prevalent among homeless women. Rossi suggests that the rate of mental illness has not altered much over time. There is, unfortunately, no

comparative data on gender differences in mental illness among the old homeless. Rossi argues that at no time has either of these disabilities, alcoholism or mental illness, affected the majority of homeless persons, male or female. Even among contemporary homeless women, "the large numbers escaping psychiatric disorders speak to their resilience and to the likelihood that important factors other than mental illness contribute to their homelessness" (Smith et al. 1993: 82). Moreover, both Rossi and Burt (1992) make it clear that mental illness or chemical dependency among homeless persons prior to the 1980s did not prevent them from finding some form of shelter most of the time.

> "Our tendency to focus on psychopathology leads us away from potential positive uses of information to be gained from this population. Further study may also help us better understand how disadvantaged women learn to cope psychologically with chronic stresses in the face of limited resources" (Ibid.: 87).

Ball et al. (1984) found that mentally ill homeless adults who were repeat users of hospital-based psychiatric services "often blamed their inability to avoid readmissions on their lack of basic resources for survival" (Ibid.: 917). And regardless of whether homeless persons also suffer from mental illness, they consistently offer economic reasons to account for their predicament (Hoch 1986).

Ouellette (1989) argues that the focus on individual health problems sidesteps the economic and social causes of homelessness and notes that gender stereotypes make it easier for women to accept and internalize labels of mental illness. She suggests that the association between mental illness and homelessness is not necessarily causal, and that ex-psychiatric patients lack adequate and continuous assistance from private or public sources. Since current psychiatric practice neglects the needs of homeless women, much of the burden of care falls on hostel staff who have limited resources and training (Marshall and Reed 1992).

Since mentally ill homeless women are particularly likely to be sent "from pillar to post," it falls on shelter workers to care for people who are sometimes quite difficult (Ouellette 1989). Many shelter workers express frustration and feelings of isolation at being faced with complex problems for which there seem to be no solutions, especially when a woman has "burned her bridges" with other service providers (Racine 1994).

Unlike earlier studies of mental illness among homeless people, which stressed the higher prevalence and greater severity of mental illness among women, recent research indicates comparable psychiatric and psychopathology histories among homeless women and men (Fournier et Mercier 1996).

Attempts to support homeless women in the community with medical and support services (case management programs) establish that homeless women are capable of forming social attachments, but such programs have limited success otherwise due to the overriding impact of poverty, poor health, and drug abuse (Mercier and Racine 1993, Harris and Bachrach 1990).

Some mentally ill homeless women are incarcerated, usually for minor offences related to their homelessness, such as noise, loitering, public inebriation, "thefts under," and solicitation. A Montreal study of jailed ex-psychiatric patient homeless women found that offences against property were the most common, followed by offences related to prostitution and breach of parole (Vallières et Simon 1988). A higher incidence of offences against the person distinguished these women from others in jail. Aggressive and defensive behaviours, and rejection of others, may explain the penal control exerted on these women, however, very few of them are released to a medical institution, and the revolving door of their agency and institutional contacts are not likely to be interrupted given the current cutbacks in psychiatric services (Ibid.).

SECTION 6: SHELTERS AND SO FORTH

Advocates for abused women have consistently emphasized the need for more safe, affordable housing for those who are leaving battered women's shelters, describing this as a significant barrier to women's ability to move on with their lives, and a major factor in some women's return to abusive partners. Most advocates for the homeless and researchers of homelessness in Canada, while concerned to deal with immediate crises of homelessness, do not support the provision of more shelters, which have been called "latter-day lodging houses for the poor" (Daly 1991: 41).

Kozol (1988) uses the term shelterization to refer to processes that "make healthy people ill, normal people clinically depressed, and those who may already be unwell a great deal worse ... And it is this institution, one of our own invention, which will mass-produce pathologies, addictions, violence, dependence" (Ibid.: 21).

To avoid conflict and violence, shelters are compelled to institute rules and restrictions which are patronizing and cause some homeless people to prefer the street. Jencks (1994) outlines this a dilemma.

> Everyone wants the stranger in the next bed to be unarmed and sober. But no one wants to be frisked or have their breath smelled to determine whether they themselves are unarmed and sober. There is no easy way out of this dilemma. A congregate shelter that admits everyone will scare away may of its potential clients. A congregate shelter that makes strict rules will also drive away many of its potential clients. The only solution is to move beyond congregate shelters, giving everyone a private space of their own, the way the old cubicle hotels did" (Ibid.: 109).

Shelters operate under restrictive and demeaning policies and practices, and tend to be located "in fringe areas of the city, surrounded by dangerous and isolated neighbourhoods where the women seeking the shelter are constantly harassed" (Stoner 1983: 572).

> Although shelters have been described as sanctuary spaces, in the lives of some homeless women, they can also be violent and dangerous places. In general, large shelters tend to be less safe for women than small private shelters,

especially those that serve only women. Some women in Boston and New York prefer to stay in abandoned buildings or in the street because of their fear of the shelters. In shelters that are completely gender-segregated, violence among women occurs occasionally. Overcrowding, tension caused by the diversity of the population, intolerance of mental illness, and the escalation of an argument all can lead to violence. Elderly women are occasionally the victims of humiliation and harassment by younger women (Bourroughs et al. 1990: 147).

Most shelters reinforce a lack of control for women, offering "little opportunity for the women to have private conversations or to be out of the view of the staff, even in the shower area. They are also required to ask for toilet paper each time they go to the bathroom" (Imbimbo and Pfeffer 1987: 15).

According to Bachrach (1980), the needs for mentally ill homeless people for adequate treatment and housing are subordinated to their right to live 'freely' in 'non-restrictive' settings. On this dilemma, Jencks (1994) suggests that we will have to supplement housing subsidies and social workers with occasional coercion, as well as rethink the question of involuntary commitment.

Women's Shelters

In her research on trauma and recovery, drawing careful parallels between the experiences and effects of domestic abuse and political terror, Herman makes it clear that the first stage toward recovery is to establish safety—not an easy step, but "a gradual shift from unpredictable danger to reliable safety, from dissociated trauma to acknowledged memory, and from stigmatized isolation to restored social connection" (1992: 155). Not only safe shelter, but safe relationships are critical in developing the reconnection to community that homelessness has destroyed for many women (Brown and Ziefert 1990). Weinreb, Browne, and Berson (1995) recommend that any intervention with homeless women and children attend to the reality of violence in their lives.

A total of 371 residential facilities for abused women opened across Canada from 1970 to 1993, more than

half of which are concentrated in Ontario and Quebec, with typical stays of 11 to 20 days. The rate of yearly admissions also continues to grow (over 86,000 admissions in 1992-3) and almost half of these are children. Women with disabilities are less likely to use shelters, although they are at high risk of abuse. While abuse was the reason for most women using these shelters, about 20 percent had lost their housing (Statistics Canada 1994).

Homeless women are apparently more satisfied than men with the quality of services they receive from shelters in Montreal and Toronto (Fournier et Mercier 1996). This may be explained by the distinctive philosophy prevalent in women's shelters, which developed at a later period and in a different context than men's shelters. Hostels developed during the nineteenth and beginning of the twentieth century were designed primarily to accommodate seasonal workers during periods of unemployment and offered few services. In contrast, hostels for women have been developed since the 1960s as transition residences, mostly for women fleeing abusive situations. Influenced by a feminist philosophy that sought to support women's struggles in a patriarchal society, the atmosphere was intentionally warm, inviting, and supportive, although this commitment may be changing with the professionalization of shelter staff (Fournier et Mercier 1996, Single Displaced Persons Project 1983, Fraser 1990).

Although there are differences in the social climates of men's and women's shelters, with more violence and chronic fear in men's shelters, women's shelters may be demanding in another sense—more gatekeeping, or exclusion of troublesome residents, and more social control in the form of domestication (Baxter and Hopper 1981, Bachrach 1985). For instance, women are expected to perform more domestic work within shelters. Harmon (1989) argues that shelters function in part as institutions of social control, reproducing dependency and domesticity among women.

According to Farge, unhoused woman are forced to provide extensive information about their private lives to enter hostels, contributing to a system of surveillance and the gathering of statistical information which can be used to individualize problems so that people are seen to need rehabilitation, and thereby providing proof of the undeserving nature of the population.

The exercise of power in hostels is a function of government in this broad sense. It is to maintain order. The agencies and their workers do not exercise their prerogatives in order to personally damage the women in their charge. On the contrary, most, if not all, sincerely wish to see things go well for the residents. The action of the workers' power over the residents—the threats, the surveillance, the repetition of rules, guiding and counselling—all must be understood within the context of the institutional imperative to run smoothly (Farge 1988: 88).

Farge suggests that the politics of scarcity largely determines the staff's actions, and that enforced moves from shelter to shelter contribute to women's dependency and disrupts their ability to organize and alter the balance of power.

Liebow (1993) also discusses the relations between shelter staff and residents and contrasts two hostels—one run primarily by volunteers with few rules and little intervention in the lives of the women and a more professionally run shelter which sought to "lift the women out of homelessness." Nevertheless, power differentials characterize both. He suggests that fear sometimes underlies the relations— on the part of staff, fear of violence from residents, and on the part of residents, fear of eviction from the shelter. The shelter which sought to change the women and assist them in moving from the street pried more into their lives, asked many more questions and set up counselling interviews.

> It is difficult to appreciate the intensity of feeling, the bone-deep resentment that many of the women felt at always having to answer questions, often very personal, and often the same ones, over and over again. But having to answer questions was part of the price they paid for being powerless (Liebow 1993: 137).

The conviction that things must not be made too easy for the poor and homeless, lest they become dependent, legitimizes harsh treatment and the dominance of organizational needs and requirements.

> To enter the system is to enter a world of uncertainty, where one may be treated with exquisite compassion one day and contempt the next; a world of hurry-up-and-wait, of double-binds and contradictions, where arbitrary and differential treatment, and myriad rules and

regulations, triumph over the very purposes of the sytsem itself (Liebow 1993: 147).

Both Farge and Liebow conducted their research in shelters for single women and suggest that aspects of social control, notably their analysis of intrusive questioning, is particular to women's shelters. It is not clear whether this analysis applies equally to men's shelters.

Shelters and Racism

Several researchers have observed that racial minority women and immigrant women comprise a disproportionate segment of shelter users. There are also refugee women among Toronto shelter users, for whom citizenship status is a critical factor in eligibility for service provisions. A refugee woman caught between her husband's dominance and that of the state may easily find herself homeless. Shelter workers sometimes struggle with this delineation of eligibility for women in crisis (Novac 1996). There are issues of racism within shelters that negatively affect not only users, but staff as well. Preferential treatment of white women takes various forms, much of it subtle or re-framed as due to cultural differences (Novac 1996).

Ethno-specific shelters may help overcome racist discrimination, but may also lead to ghettoisation (Canada Mortgage and Housing Corporation 1994). There is more consensus that Aboriginal women are better served by shelters and transition houses run by staff who share and understand how the societal context of racism and cultural domination contributes to their oppression and who can provide culturally-appropriate support and healing modalities (Canadian Council on Social Development and Native Women's Association of Canada 1991; Hager N.d.). In small northern aboriginal communities, there are debates about whether shelters for battered women should be located in their communities. Shelters for abusers are proposed to allow women to stay in their homes and communities, along with a multi-service centre with programs for victims, abusers, and the community as a whole (Pauktuutit N.d.). Aboriginal people take a more holistic, flexible approach to addressing family violence issues, one which accounts for the unique relation to colonization processes (Canada Mortgage and Housing Corporation 1994).

And Onwards

"In environments where safety is a real concern, individual housing units are especially valued for their security" (Harris and Pratt 1993: 283). A study of the preferences of homeless women in Toronto suggests that most single homeless women want their own apartment, with a minority expressing a need for support services of various kinds (Goering 1990). A majority of the women objected to sharing a bedroom or bathroom, although they were somewhat more willing to share a living room and kitchen. Security of their person and possessions was particularly important to the women. They objected to any restrictions on access, curfews, and limitations on visitors. Only rules that are related to safety and security were considered acceptable. Even among this predominantly single group of women, the presence of children was supported. Regarding the presence of men, they "were almost equally divided in their preferences for an all-women's or a mixed residence" (Goering 1989: 792).

Since shared accommodation is less costly, such housing models are viewed as a more feasible housing form for new development. This view is bolstered by an assumption that shared housing models are, or can be, more socially supportive, especially for people with mental health problems. Based on an Australian study of single men, psychiatric impairment, and housing forms, Neil (1990) suggests that this philosophy needs to be carefully considered.

> Where there are a variety of alternative forms of social contact, it may be that those who have most difficulty establishing an adequate social network will also have most difficulty with coping with sharing dwelling space (Ibid.: 24).

The lack of gender awareness has led to some ill-conceived solutions for homelessness (Brown 1995).

> As a result, homeless men who have been on the streets or in the men's hostel system for years and who typically have histories of addiction and/or incarceration, and homeless women who have suffered from domestic violence or who arrived on the street due to mental health problems, are slated for the same housing projects. Predictably, there have been problems. Women have been fearful of sharing space with men from the street with whom they have had no

previous contact. Violent incidents have often occurred during the start-up phase of new projects and in come cases, women have been assaulted and/or revictimized (Ibid.: 11).

Questions of shared living models were also addressed by a Toronto study of formerly homeless women which probed gender relations and personal safety issues among women and men living in a range of permanent housing projects designed to accommodate homeless people (Novac et al. 1996). There was some variance in the women's experiences of homelessness and residential instability since the housing projects varied in their eligibility criteria, but over three-quarters of the women stated that they had been homeless previously, and over half had actually lived on the street.

When asked about a range of potential sources of danger in and around their buildings, these women expressed levels of concern similar to those of a group of housed low-income women, except for a more widespread concern over loitering by strangers, especially by women who had been sexually harassed in their building. In buildings where sexual harassment, physcial assault, or family violence occurred with some frequency, more than three-quarters of the women stated that they felt unsafe because of these incidents. Over a third of the women reported that they had been sexually harassed by male residents (formerly homeless men) in their building, and a further 14 percent had witnessed other women being sexually harassed. Since this prevalence rate refers only to current residencies (which varied from a few weeks to seven years), this rate is astonishingly high. Not surprisingly, very little sexual harassment was reported by women living in sex-segregated buildings. Among those living in sex-integrated buildings, women in shared housing reported a higher level of sexual harassment, which calls into the question the relative safety for women in sex-mixed projects with shared living space. Among racial minority women, there was also considerable concern over racial problems in their buildings, and 60 percent of the women said they felt unsafe because of racial incidents (Novac et al. 1996).

Ward (1989) notes that it is primarily working class men who have ended up on the street and that they have little tolerance for deviance from traditional sex roles, while the female homeless population has very different attitudes. He suggests that women have been radicalized by their oppressive experiences and exposure to

feminist viewpoints espoused in women's shelters, contributing to a critical awareness of male domination and traditional sex roles.

New Plans

In 1988, Daly's assessment of Canada's situation suggested that its safety net of social programs lessened the rate of homelessness compared to Britain and the United States, delaying a public sector response to develop new programs to assist the homeless, and that federal government devolvement of responsibility to the provincial and municipal level would further hamper the development of solutions to homelessness and cause "substantial ramifications for public policy with respect to housing, health and community services" (Daly 1991: 43).

Daly argues for a universal rather than targetted or "special needs" approach, locally devised programs backed by federal funding on a continuing basis to assure permanent solutions.

> The problems underlying homelessness represent institutional failures on a massive scale. Much of the homelessness dilemma is a reflection of urban economic development trends. Although not a new issue, it has dramatically increased in severity in all three countries since 1980. The traditional response to homelessness, then, requires critical rethinking. Governments and certain charitable organizations have been inclined to do things *for* the homeless, whereas many of the homeless individuals stress that they are a resource unto themselves. They want to be involved in building their own housing. The concept of co-operative or self-help housing should, then, be fully exploited as it represents a rare congruity among homeless people, liberal advocacy groups, and conservative governments (Daly 1991: 58).

One of the more innovative programs to address homelessness in Toronto, Street City, adopted such a self-help approach in its design, construction, and management, however, homeless women were a belated and peripheral group during this project's development. As residents, the inequity of gender relations are played out in largely unacknowledged ways, although it is difficult to completely ignore repeated incidents of outright sexual harassment and violence (Novac et al. 1996). Initial staff suggestions that some of the 'houses'

within the loose complex of Street City be designated co-ed were rejected by all the women residents, and by most of the men. The Street City's women's preferences, as well as those of other homeless women, have been incorporated into the development of Street City II which is also composed of sex-segregated 'houses.' Women residents appreciate the intentional 'women's space' thus created, and although they have relationships with male residents, including sexual relationships, they prefer to retain a retreat from dealing with men.

Another innovative development, the Women's Street Survivors' Project, is about to open in Toronto. It will house women exclusively and will be designed to accommodate those who have lived on the street a long time, women who have avoided other housing options (perhaps because they are too restrictive and demanding, or because they are sex-integrated). The initital spacial design is only loosely determined and highly flexible since the staff are prepared to be guided by the women they hope to entice into this space—to settle and to trust again. We are now experimenting with new solutions for the new problems we have created.

SECTION 7: EXPERT OPINIONS FROM THE FIELD

Relying on the expertise of people who are working with and on behalf of homeless women, we sought their opinions regarding the most pressing issues currently affecting women's homelessness in Canada. Organized by region, the following synopsis represents a 'snapshot' assessment or brief consultation rather than a thorough survey.

Although we made attempts to contact both women's shelter staff and relevant government agencies in each province and in the north, it was sometimes not possible to reach people in a given area during the time available. Phone contacts were made with approximately 50 people (a list of their names, organizational affiliation, and locations are appended to this report). Many of the conversations were brief (as little as ten minutes), some served only to identify appropriate informants, others were more lengthy. For front-line staff, we asked questions about the factors most relevant for the women with whom they work (e.g., issues of violence, racism, health, and housing affordability), and the respondents focused on their own assessment of the salient issues.

The results emphasize the worsening economic situation, and the impact of government policies and funding reductions, both of which exacerbate women's inability to access permanent or emergency housing.

Comments from Across the Country

Newfoundland

Homelessness is not a big issue in Newfoundland, but finding an adequate and affordable place to live is difficult. There is a shortage of social housing and a three year waiting list for what exists. The Newfoundland and Labrador Housing Corporation has a policy on victims of family violence which gives priority to women leaving abusive situations. The situation is more difficult, however, for women without children as they are not eligible for social housing. Due to cutbacks in social services, single women can usually afford to rent only a room. Moreover, there are very few affordable, appropriate places for women with disabilities.

Funding cutbacks have also added pressure on shelters. During one year (from April 1, 1995 to March 31, 1996), one shelter reported 1,153 calls from new women, 1,430 calls from former residents seeking on-going support, in addition to the 459 women who stayed at the shelter.

Shelter workers believe that there has been an increase in the extent of violence against women since the moratorium on cod fishing. For men who are prone to violence, shelter workers believe that factors such as unemployment, fewer financial resources, and more time spent at home exacerbate violence against women and children.

Nova Scotia

The shelter allowance for single women has decreased from $350 to $225 making it difficult for women to get even a room in a run-down rooming house. In Halifax, some homeless women and children are being lodged in motels because it is less costly to government, despite the fact that there are some shelter spaces available and there are more support services in women's shelters.

Prince Edward Island

There is little visible homelessness in the province, however, provincial cuts to social services have affected people's living standards and housing conditions. In 1994, the government cut the rent allowance for singles, and in 1995 the cuts were extended to other areas, contributing to hidden homelessness. Workers observe that more people are doubling-up and using food banks. And women may feel further compelled to stay in abusive situations because of the lack of housing options.

New Brunswick

Addressing homelessness caused by spousal abuse and family break-up, shelter workers said it is devastating for women to move from their house to a one-bedroom apartment in a new area. The lack of decent, safe, and affordable housing is definitely a factor in women's decisions to return to violent situations. In rural areas or small communities, the abuser may intimidate prospective landlords to ensure that his wife does not get alternate housing, and women who leave a spouse often have to leave their community. Lack of access to

transportation is another critical issue since many women are unable to travel to urban areas where services are located.

Because there is often a lengthy wait before women begin to receive child support payments, many women who want to leave relationships think that they cannot make it on their own. Second stage housing projects that provide support services along with shelter are greatly needed. Staff at a shelter for abused women argued for legislation that would give women with children the right to stay in the marital home until the children are grown, as well as the improved enforcement of court orders (for example, regarding alimony payments and restraining orders).

There is a network of twelve transition houses that accommodate women and men across the province, but few general purpose shelters for women. Some of the shelters are gender-mixed, which is problematic for many women.

Welfare rates in New Brunswick are the lowest in the country at $257 per month. Subsidized housing projects have long waiting lists and there is little affordable housing available for singles. Many older women find themselves alone in a small room with no supports.

Once again, respondents emphasized the desperate need for affordable, safe and decent housing within their communities, for low income women and their children.

Quebec

In a context of economic recession and high unemployment, political agendas that focus mostly on financial savings often translate into cutbacks in services to the most vulnerable. As a result, there is a steady increase in homelessness in Quebec, mostly in large cities.

Many factors are at the root of homelessness—poverty, spousal violence, and mental illness were the most frequently identified. Drug abuse was also identified, but it was considered a consequence of violence or mental illness and not necessarily a cause in itself. Addictions, however, aggravate the difficulties of the homeless woman and make it harder for her to re-establish stability in her life.

More women are now placed in the position of choosing between having a roof over their heads and meeting their other essential needs. Those who are housed use most of their income to pay rent, and are left with nearly nothing for food, clothing, and other necessities.

Women with children are particularly vulnerable. There are no resources for homeless mothers and children, and the DPJ (Direction de la protection de la jeunesse) will intervene and place the children in care if a mother loses her housing. Mothers will therefore tolerate abusive situations for longer periods, accept unacceptable housing conditions, or go hungry to pay the rent, because they fear losing their children. Only shelters for battered women will accept women with children, and although they will sometimes house non-abused women and children on an emergency basis, this is not their primary mandate.

Shelter workers report that there are more women with severe mental illness among the homeless, probably due to the reductions in hospital services. For this population, often characterized as the 'hard cases', there has been an attempt to develop a case management approach in which a streetworker provides continued support to a woman in whatever environment she lives (the street, rooming house, or shelter) and serves as a link with the community. Unfortunately, with the anticipated cutbacks in social services, it is not likely that there will be sufficient numbers of street workers for such a program in the near future.

The impact of violence on homeless women, past and present, is also a significant factor. Most homeless women have known violence since childhood, and this is often the precipitating factor in a process of marginalization. The most pressing issue, however, is that of current violence in their life. Rapes, thefts, physical abuse, and sexual harassment are not uncommon in the experience of homeless women on the street, in rooming houses, or even in shelters. It is imperative that housing providers and managers pay particular attention to women's safety in these environments.

A range of housing and services is needed, and should be adapted to the different needs among homeless women. This should include services that are non-interventionist, for homeless women who are very disengaged and unable to trust; services that deal with coincidental issues such as substance abuse or lack of life skills; and programs that take into consideration issues of poverty, residential instability, and social isolation.

Improved co-ordination and co-operation is required between existing health and social services, as well as a better understanding by traditional service agencies of the reality of women's lives. Although there has been some improvement over the years, the present cutbacks and other constraints (tighter eligibility criteria, for instance) often make it more difficult for homeless women to gain access to services.

Ontario

At the same time that the provincial government abruptly halted all new non-profit housing programs, and terminated planned developments, the waiting lists for social housing are stretching to seven and eight years in Toronto. Massive social assistance cuts have resulted in increasing numbers of women losing their housing and ending up in hostels. In Toronto, over 20 churches have had to open their doors to the homeless over the past few years to provide emergency shelter during the winter months. This is in addition to the over 40 hostels which provide shelter throughout the year.

In both Toronto and Ottawa, there are programs in which mobile vans go out at night to deliver blankets or food to those sleeping on the street. Although men are the main users of both the Out of the Cold Program (organized by the churches) and the mobile street patrols, increasing numbers of women are making use of these services. Women are considered to be more vulnerable to homelessness as a result of increasing unemployment and reductions in social assistance rates.

Ontario is beginning another wave of de-institutionalization as the number of hospital beds are decreased and reserved for acute patients, and medical services are being amalgamated. More women with mental health problems are turning to shelters for accommodation, and once in the shelter system, find there are few opportunities to obtain permanent housing. Most of these women have no family supports. Some of them need on-going support services in order to maintain their housing, but little of this is available. Most of the women with mental health problems have histories of physical and or sexual abuse, and counselling and support services in these areas are also lacking.

A flow of new refugees without support and resources also use hostels and shelters, though usually for short periods of time. Sponsorship breakdown and "immigration limbo" also contributes to women's

shelter use, sometimes for very long periods of time (i.e., years) as they are ineligible for social benefits and have no other options.

Manitoba

Respondents in Manitoba expressed many of the same concerns as those already raised in other regions—lack of affordable housing and insufficient services for women, including emergency shelters and long-term support services.

Saskatchewan

Rents in Saskatchewan are increasing while welfare allowances for housing have been capped. As a result of reduced funding, social service agencies are being re-structured and their effectiveness reduced, while more people with addictions or mental health problems require assistance. Inter-agency committees are trying to find new ways of working together and involving municipal agencies and the private sector in housing provision.

Many aboriginal women have difficulty finding housing, particularly if they have children, and the housing which is available is often of very poor quality. In Regina and Prince Albert, there is a shortage of good quality affordable housing, and in some areas there is insufficient shelter accommodation for women.

Alberta

Respondents suggested that research be conducted to track what happens to homeless women and those cut off welfare. They postulate that many women are forced to enter dependent relationships with men in order to put a roof over their heads. Many of them cannot afford basic services such as telephones which restricts their social connections and access to emergency services. Children are being kept out of school because their mothers cannot afford lunches for them. Women have to be extremely desperate to leave an abusive situation as the alternatives are so bleak.

Welfare rates are very low—$372 per month for a single person, with $160 of this designated for shelter. Women are compelled to accept housing in areas where they feel both isolated and unsafe.

The population of homeless women has increased. One shelter has 52 beds but sleeps about 60 a night and sees approximately 85 to 90 women during the day. Women

who come to them often have mental health problems—"the scars of abuse and poverty." Many are unemployed or unemployable, and suffer from low self-esteem. The number of suicides and suicide attempts is increasing. They also see many aboriginal women who have survived sexual abuse and are dealing with alcoholism.

One second stage housing project for women and children leaving violent situations, offering six month stays in fully-furnished self-contained apartments with 24 hour security, support, counselling and child-care, currently houses 43 families with 139 people, but turned away more than that number during the past year alone.

Much of the old rooming house and low-income housing stock is being torn down. Transition houses are needed. The system is seen to be failing. There is a high vacancy rate in Edmonton, but discrimination is a barrier for women who receive social assistance, aboriginal women, and women with mental health problems. Drug abuse (both crack and other street drugs) is a factor in homelessness, but addictions are usually related to previous histories of abuse. There are increasing numbers of women on the street, especially those with special needs, and young women. Additional second stage and third stage housing (varying levels of support services and independent living) is needed, and there is a gap in services for single women needing support. Cutbacks have hit hard.

British Columbia

Welfare cuts have been devastating, resulting in more women using food-banks and soup kitchens and coming to centres for free clothing.

Low income people with particular needs, such as the frail elderly, those with disabilites, or addictions have great difficulty in obtaining housing. There are few services for women with mental health problems. Once people are on the street for a period of time, they adapt to a new culture, and it can be difficult for them to re-adapt to the available housing projects. There are over 10,000 people on the waiting list for subsidized housing in Vancouver.

Women in single room occupancy hotels (SROs) are often subject to violence. Although there are more men than women in the downtown east side, women are also sleeping in doorways, on loading ramps, and under viaducts. Some respondents spoke of a small group of women who sleep under the viaducts and dig holes to bury their belongings for safe-keeping during the day, and wash and shower at drop-in centres.

British Columbia has implemented a 90 day residency requirement which means that new arrivals to the province do not qualify for social assistance during this time period, causing some of them considerable hardship.

The North

Housing is in short supply in the Northwest Territories. The housing stock is a mixture of government-owned (for government employees) and non-profit housing, with only a small amount within the private market. There is usually at least a six-month wait for non-profit housing and sometimes much longer. Women and children have a better chance of obtaining subsidized housing, but it is very difficult for singles. Extended families usually provide for people, resulting in crowded conditions which may exacerbate other family problems, such as domestic violence or child sexual abuse.

There have been dramatic rent increases in the Northwest Territories in the past few years as a result of changes in housing subsidy policies. Reductions in federal funds have led to fewer subsidized housing units, consequently rents have skyrocketed for some households. More services related to domestic violence, physical and sexual abuse, incest, and addictions are required.

In James Bay, homelessness is not really an acknowledged problem as people often move in with their extended families. In cases of domestic violence, the man is usually forced to leave, and he generally moves in with his extended family or friends. In some cases, the abuser is publicly embarassed. Since it is now accepted that women and children have the right to retain their housing, the Cree band council has begun listing women as the householders. As the federal government has reduced its spending on housing in the North, housing conditions have worsened with more crowding and poorer living conditions.

RECOMMENDATIONS FOR RESEARCH

There are many questions not adequately addressed by the existing literature regarding women's homelessness in Canada. Certain patterns of women's homelessness in the United States may not be reflective of the situation in Canada, for instance, the high proportion of homeless women with dependent children, and the prevalence of mental health problems among homeless women. This leaves an open field for research directions, but the following suggestions summarize our proposed research agenda. It ranges from analyses of the structural components of women's homelessness to research that is focused on specific problem-solving, and addresses aspects of the major issues that have been reviewed in this report.

1) An analytical review of federal and provincial/territorial, and municipal government policies and their impacts on the extent and forms of women's homelessness in Canada. An assessment of how recent policy and economic changes are associated with women's housing status, homelessness, and with male violence against women.

2) Research on male violence against women and homelessness, for example, a longitudinal study of women's shelter users. To what extent is women's homelessness short term or transitional—a turbulent period followed by eventual housing stability, or part of a downward spiral to marginal housing conditions and homelessness?

3) Investigation of the role of marital relationship breakdown and subsequent housing outcomes for women and men, including any resulting homelessness.

4) A study of mental health services provision and women's homelessness, including an assessment of whether there is a pattern of disintegration among mentally ill homeless women.

5) A study of the health costs, in terms of both financial costs and human suffering, of homelessness. This should incorporate a gender and racial analysis and include an assessment of transinstitutional use, such as jails.

6) An investigation of the extent and forms of women's homelessness in rural areas.

7) Evalution research on existing and new alternative housing projects (for example, the Women's Street Survivors Project for those who avoid hostels) to evaluate their effectiveness and to develop better intervention programs. Participatory research techniques should be considered to promote community-level action.

8) An assessment of low cost housing models that are designed by and for women, including how they might participate in designing, developing, and managing it.

LIST OF FIELD EXPERT CONTACTS

We would like to thank the following people who gave of their time and contributed their expertise.

Newfoundland

Wanda Crocker, Naomi Centre, St. John's

Coleen Dingwell-Corbin, Women's Centre, St. John's

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