Title: Homelessness and Family contact
The IMFC wishes to thank the Ottawa Mission and staff for their partnership in this project and efforts in data collection. We especially acknowledge the contribution of Jason Fox for his work with the project and informed reflection on the data.
This project is an introductory exploration of the relationship between the homeless and their families. It serves as an orientation to the issue and assists in identifying areas for further research. When individuals lose community, family and stable housing and enter a life on the streets, shelter services offer physical necessities as well as companionship and emotional and spiritual support. The question is: Have those who are dependent on shelter services lost all contact with family?

This project was initiated to find out, by examining the frequency of contact between clients of one Ottawa shelter and their families.

The Institute of Marriage and Family Canada conducted this research in partnership with the Ottawa Mission, a long established non-profit organization that offers shelter services and resources to homeless men in Ottawa’s downtown core. The Ottawa Mission provides shelter to 217 men on average, per night. Services provided by the organization include meals, education completion and job services programs, addiction recovery programs and a hospice.

The majority of the men in the sample have little or no contact with family. Of those who have regular contact with family, approximately 75 per cent are involved in addiction treatment programs at the Ottawa Mission. A significant majority of men have never married or are separated or divorced. A minority of men with children remain in contact with them. Our review of literature on homelessness and family contact revealed that Canadian data is needed. This study is the first step by the IMFC to further Canadian research in this field.
METHODS:
The project provides a snapshot view of the frequency of family contact among a sample of male clients who use the services of the Ottawa Mission. The four-question survey conducted by Ottawa Mission staff, sampled 37 clients connected to the organization through one of four programs. Client Services, which assists clients in completing education, finding housing and jobs, and enrolling in welfare programs, had the greatest representation with 19 respondents. The Life House addiction program involves several months of residence-based treatment. The survey includes eight clients from that program. The Stabilization program serves as an initial drug and alcohol treatment program lasting several weeks. Clients typically move on to programs like Life House when they complete Stabilization. Seven respondents are enrolled in this program. The remaining 3 respondents are connected to the Ottawa Mission through the Day Program that provides drop-in counselling and peer group support for those struggling with addiction. The median age of men in the survey is 43 years old which is consistent with the average age Ottawa Mission clients in 2006.

Respondents were asked about their frequency of contact with immediate and extended family as well as contact with children and current marital status. They were asked to rate the frequency of contact with family on a four point scale. In addition to the survey of Ottawa Mission clients, we conducted a literature review of existing studies and work related to homelessness and family contact. This served to inform the results of the survey and to help determine areas for further research. There is a lack of Canadian based research in this field. Additional research would further inform this issue, particularly from a Canadian perspective.

CONTACT WITH IMMEDIATE FAMILY:
Respondents were asked to evaluate their frequency of contact with immediate family members. For the purpose of the survey, immediate family was defined as parents or siblings. Four response options were presented: none, little (annual contact), some (monthly contact) and regular (weekly contact).

Nearly 65% of respondents reported having little or no contact with immediate family members. Of four available responses, “none” was selected most often. The second most selected response was “regular” at 32.4%, resulting in the top two selections representing opposite poles on the response scale.

Further examination of the profiles of respondents who selected regular weekly contact revealed that 75% were participants in the Stabilization program or the Life House program. Respondents from these two substance treatment programs accounted for 40.5% of the total number of respondents. Speculating on these results, we suggest there is an association between family contact and addiction treatment programs at the Ottawa Mission.

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2 We selected a four point scale to provide a simple but diverse standard of measurement that would be user friendly for OM staff.
3 The IMFC would like to thank Dr. Kelly Schwartz of Ambrose University College for his guidance in the development of the survey.
It could be that regular family contact is a catalyst for seeking treatment. Conversely, these treatment programs may prompt clients to seek contact with immediate family. Jason Fox, Manager of Programs at the Ottawa Mission, suggests that both theories are plausible. From his experience he suggests that clients may seek family contact more regularly as they progress through the addiction services at the Mission.

Still, the majority of respondents have little or no contact with immediate family. Consulting previous research affirms the survey findings regarding lack of contact. The late sociologist Peter Rossi suggested that less than half of the homeless in his study maintained contact with their families (1990). Augsburg College sociologist Timothy Pippert reports similar results in his study released in the spring of 2007 (2007).

While current research cannot confirm causal links between family history and homelessness, the relationship cannot be ignored. Pippert found that family disruption was common among the respondents in his study. Substance abuse, poverty, institutionalization, abandonment and separation were familiar themes in the family history of his sample (2007). This is consistent with a number of other studies that demonstrate the prevalence of family disruption among homeless adults (Lee & Schreck, 2005; Caton et al, 2000; Herman et al, 1997; Koegel et al, 1995). Still other studies have demonstrated that a disproportionate number of the homeless were in foster care or institutionalized care compared to the general population (Roman & Wolfe, 1995; Susser et al, 1987). Fox notes clients in addiction services are most often from disruptive family histories and rarely from two-parent stable family backgrounds.

Conversely, Columbia University psychiatrist Carol Caton speculates that emotional and financial support from family may prevent those at risk for homelessness from entering the streets (2000). Caton also suggests that homeless individuals with some support from family may face shorter periods of homelessness (2005). Fox suspects that this is the case with many of the clients at the Ottawa Mission. Pippert’s provides an agreeable summary when he observes, “The most important and effective social institution at keeping its members from living on the street is the family. Family safety nets of financial and emotional support are what keep the ranks of the homeless from exploding on a daily basis.” (2007) The compilation of evidence suggest that homelessness and family contact is an important area of study where further research would be welcomed.

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4 See the bibliography for a list of studies pertaining to family relations and homelessness.
5 We speculate that further adjustments to the sample size of clients in addiction services, and further diversification of response options would provide refined data from which to test this hypothesis.
As expected, the survey revealed that respondents had less contact with extended family members such as aunts, uncles and cousins than with immediate family members. A clear majority of respondents had little or no contact at 83.8% with only 8.1% having regular contact with immediate family.

Marital status:
The majority of the survey sample reported never marrying at 54 per cent. The second highest selected response was divorced at 24.3 per cent while 16.2 per cent reported being separated. One of the 37 respondents said he was currently married and one reported he was remarried. Pippert’s study investigated marital history, concluding that the men in his sample who married had done so more than once. He suggests that romantic relationships among his respondents were typically short (2007). Separation and divorce were common among those who had been married in our sample, though we did not inquire about duration of relationships.

About half of the respondents reported being fathers with 36.8 per cent having contact with their children. Fox suggests that clients in longer term addiction programs at the Ottawa Mission frequently talk about the state of their relationship with children while in counselling. Aware of the sensitivity around this issue, our survey did not seek specific information about children, but inquired if respondents had contact with their children.

In our survey, fathers who were divorced or separated were a little more likely to have contact with children than those who were never married, but further study would be needed to determine if marital status is a factor in contact with children. Pippert’s interviews suggest that contact with children is often “gated” by the child’s mother. (2007) Further study could identify the variables that influence contact with children.

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6 The remaining 8.1% reported having some (monthly) contact.
DISCUSSION AND QUESTIONS FOR FURTHER RESEARCH:

The majority of survey respondents have little or no contact with immediate and extended family. This finding is consistent with previous research. While studies have not solidified causation, the research indicates that family history is related to homelessness and that family support may act as a safety-net for those at risk of becoming homeless. Jason Fox confirms from experience in the field that family disruption is common among clients at the Ottawa Mission. In light of these frequent stories of family separation and breakdown, Fox suggests that many of the men at the Ottawa Mission express the desire for restored family relationships.

A number of questions for further research arose from this study. Points of interest for further inquiry include the following questions:

• Is there a link between the type of shelter services someone uses and frequency of family contact? Further research could examine the relationship between higher levels of family contact among those in addiction treatment.

• Is there an association between duration of use of shelter services at the Ottawa Mission and frequency of family contact?

• What is the nature of contact between those who use shelter services and their families? Further research would contribute to several studies that have examined this question from various perspectives.

• Do individuals who use shelter services desire family contact?

Finally, there are a number of questions that could be explored regarding fathers who use shelter services and contact with their children:

• What factors commonly influence the level of contact the homeless have with their children?

• For those who do have contact, what mode of contact is preferred? What is the context in which contact occurs?

• Does marital status and marital history influence frequency of contact with children?

CONCLUSION

This introductory exploration of the relationship between the homeless and their families begins to address the need for Canadian data and raises prospective questions for further research. The survey suggests that clients who use the Ottawa Mission services are largely disconnected from family. The data indicates that those in addiction services are more likely to report being in regular weekly contact with family. We speculate that increased family contact could be associated with entering treatment, or could result from time in treatment. Previous research suggests that disruptive family history is prevalent among the homeless. Other studies have suggested that individuals with family financial and emotional support may face shorter periods of homelessness. A majority of respondents in our sample who have children do not have contact with them. While this project is introductory, it raises many questions for further research, particularly with Canadian data. The Institute of Marriage and Family Canada is considering future projects to expand the depth of research in this area on a national scale.

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7 Mothers may “gate” access to children for many legitimate reasons including legal reasons or out of concern for emotional or physical safety. There are numerous variables that influence contact with children.


