



Chapter 8.1

A Longitudinal Approach to Research on Homelessness

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It is ... time to rethink directions, and to become more ambitious in our efforts ... We need to harness a variety of theories and methods to enable us to understand nuanced 'place-specific happenings as well as more structurally-determined 'space-compressing' processes... (Wolch & Philo, 2000, p. 149).

Wolch and Philo's rallying cry to geographers who study mental health might equally apply to Canadian homelessness researchers. Their observations about a disjuncture between broad quantitative analyses of incidence on the one hand, and small, in-depth analyses of particular populations or problems on the other, might well describe extant Canadian research. It is our assertion that conducting carefully constructed, systematic studies of what happens to homeless people over time is one way in which to overcome this disjuncture and contribute new insights to homelessness research in Canada.

While the Panel Study on Homelessness in Ottawa is limited insofar as it is a single site study, it does illustrate a number of the features pro-

moted by Wolch and Philo (2000). This article discusses some of these features and reports some preliminary findings. This article is divided into four sections. We begin by reviewing longitudinal studies that address homelessness in the North American context, with an examination of recent academic health and social science literature in this area. Following this review, we introduce the Panel Study on Homelessness and highlight some of its key theoretical and methodological features. We then examine the distinctive housing pathways of five groups of individuals who were homeless when first interviewed in 2002-2003 and then interviewed again in 2004-2005, as well as their reflections on what helped and hindered their efforts to find stable housing. The concluding section reflects on the lessons learned from this longitudinal analysis and suggests there may be value in planning and executing a multi-site longitudinal study of homeless people in Canada as a next phase of research.

Longitudinal Studies of Homelessness

Longitudinal studies that collect data on the same people over time are scarce in the current literature on homelessness, and there are few Canadian studies of this type. Extant Canadian research is dominated by inferences drawn from the American context, without fully accounting for differences in the social safety net, or in health and social service provision and other institutional factors unique to this country. Most profile the population of homeless individuals in general, or describe one particular group, such as youth, women, aboriginal persons, or families. Some studies discuss and describe policies, programs, and services for persons who are homeless. The scarcity of Canadian longitudinal research restricts our understanding of why and how people become homeless in this country, what factors help individuals escape homelessness, and how to evaluate the effectiveness of programs, services, and supports developed to address and end homelessness.

Our review of the Canadian research literature found only two studies that followed a cohort of homeless persons over time. In Toronto, Goering et al. (1997) conducted a longitudinal study to evaluate the effectiveness of outreach services by examining their impacts on homeless single male and female adults with psychiatric disabilities. In Montreal, a group of researchers is following a cohort of street youth to determine

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the incidence and risk factors for HIV infection and mortality rate (Roy et al., 2000, 2001, 2003, 2004).

Among unpublished research reports, one recent longitudinal study in Toronto is also noteworthy (Anucha, 2003). This study had both cross-sectional and longitudinal components, and examined housing stability in participants of housing programs for “hard-to-house” individuals. The longitudinal component focused on the experiences of a small sample of participants who had received eviction notices and whose housing was at risk. Although these participants had successfully maintained their housing at follow-up, in-depth interviews revealed a number of challenges. Unemployment and underemployment were cited as major barriers to maintaining housing. Unfavourable living situations, such as sharing accommodations with individuals who sabotaged participants’ efforts to battle substance abuse or attend employment training programs were also cited.

A review of U.S. research identified several city or county-based studies where data about individuals were collected over a period of time. Some of these studies evaluated the impact of psychosocial interventions for homeless persons with psychiatric disabilities (e.g., Bebout et al., 1997; Humphreys & Rossenheck, 1998; Morse et al., 1992; Toro et al., 1997). Others used a panel study design to examine the use of health and social services (Kreider & Nicholson, 1997; Wong, 1999), the patterns and course of homelessness (Sosin et al., 1990), and the prevalence of HIV and HIV-risk behaviour (Clatts et al., 1998; Sobo et al., 1997).

Other American longitudinal research documented the experiences and consequences of homelessness among specific subgroups in the homeless population such as women (Browne & Bassuk, 1997), families (Stretch & Krueger, 1992), children (Clatts et al., 1998; Zima et al., 1999), and men (Concover et al., 1997; Lam et al., 1995). Among these studies, results reporting interactions between such variables as gender, disability, length of time homeless, and number of times homeless have been inconclusive and inconsistent.

Such longitudinal research has drawn on data collected in several locations. Piliavin and his colleagues examined pathways into and out of homelessness for homeless men, women and families in Minneapolis and Alameda County, California (Piliavin et al., 1996; Wong & Piliavin,

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1997; Wong et al., 1998; Zlotnick et al., 1999). In New York City, Shinn and colleagues investigated predictors of homelessness and of exiting homelessness for families (Shinn et al., 1998; Stojanovic et al., 1999). More recently, also in New York City, Caton et al. (2005) explored risk factors for long-term homelessness.

Many of these longitudinal studies concluded that the provision of economic resources was the best predictor for: (1) avoiding homelessness, (2) becoming re-housed, and, most importantly, (3) retaining stable housing after an episode of homelessness. For example, Wong and Piliavin (1997) noted that while personal disability, including drug and alcohol abuse and mental health problems, was associated with a decreased chance of exiting homelessness, institutional resources, such as being employed, or receiving benefits or housing subsidies, were associated with a reduced risk of repeat homelessness. In their study of families using a homeless shelter, Stojanovic et al. (1999) found that the vast majority of those who obtained subsidized housing remained housed during the study's entire five-year follow-up period, usually in the same dwelling. In contrast, families without subsidized housing were unlikely to be at the same address at follow-up; nearly half experienced subsequent emergency shelter stays. Those who initially left the shelter to enter unsubsidized housing often reported doubling up with friends or family, resulting in unstable, overcrowded housing situations.

Shinn et al. (1998) confirmed the obvious conclusion: provision of subsidized housing was the main predictor of housing stability for such families. Similarly, Zlotnick et al. (1999) found that economic variables, such as receiving consistent benefits and subsidized housing, were the strongest predictors of exits from homelessness to stable housing in a sample of homeless men, women and families. In this study, women with children became rehoused more quickly than the single adults, and were more likely than the other groups to report contact with case managers and to receive benefits and subsidized housing.

Cohen, Ramirez, Teresi, Gallagher, and Sokolovsky (1997) found that only social support and the number of community services used predicted exits from homelessness in a sample of older women. Piliavin and his colleagues (Piliavin et al., 1996; Wong & Piliavin, 1997) found that having an inconsistent work history was associated with repeated

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episodes of homelessness, while recent employment and job training were associated with exiting homelessness.

The longitudinal literature raises many questions about causes of homelessness and the factors that predict a successful exit to regular housing. There appears to be a growing consensus about the significance of subsidized housing for keeping formerly homeless individuals and families stably housed, and more generally about the efficacy of institutional or systemic factors to entrench or mitigate people's vulnerability to homelessness. In contrast, the individual factors usually associated with homelessness in popular opinion, such as substance abuse, unemployment, and mental illness, do not unequivocally predict longer or more entrenched homelessness in these studies and moreover, their explanatory power appears to differ among demographic groups.

Study Objective

Our study examined the range of factors that facilitated or impeded people who were homeless from becoming housed again. The Panel Study on Homelessness in Ottawa addressed some of the gaps in previous research by examining pathways out of homelessness for a relatively large sample, reflecting the diverse subgroups within the homeless population in a Canadian context. To extend understanding of the housing trajectories of people experiencing homelessness, we used mixed methods that included testing quantitative measures as predictors of housing status, and analyzing retrospective qualitative accounts of people's housing experiences subsequent to their episode(s) of homelessness. The present paper focuses on some of the qualitative findings in our study.

Method

The Panel Study of Homelessness (PSH) emerged out of a history of collaboration between university researchers, the City of Ottawa, and the Alliance to End Homelessness in Ottawa, a community-based organization established in mid 1990s to address the increasing problem of homelessness in the Ottawa area. In line with previous research in the area (Caton et al., 2005; Pilavin et al., 1996; Shinn et al., 1998), "homelessness" was defined as "a situation in which an individual or an adult with one

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or more children under 16 has no housing at all, or is staying in a temporary form of shelter.”

Study sample

The sample consisted of 412 individuals who were homeless, in five approximately equal subgroups based on age, sex, and family status were interviewed at baseline. These subgroups were:

- single male adults (n=88);
- single female adults (n=85);
- male youth between 16 and 19 years of age (n=78);
- female youth between 16 and 19 years of age (n=78);
- adults within families (n=83).

Overall, the sample was made up of more women (55 percent) than men (44 percent), because of the larger proportion of women who were interviewed in the family subgroup. Two respondents identified themselves as transgendered. Further details about the sampling strategy used in the study are outlined in Aubry, Klodawsky, Hay, and Birnie (2003).

Of the original 412 people, 225 (62 percent) were re-interviewed at follow-up. In the Panel Study, the success rate varied between subgroups:

- 49 percent of single men (n=43);
- 65 percent of single women (n=55);
- 63 percent of male youth (n=49);
- 65 percent of female youths (n=50);
- 71 percent of adults in families (n= 58).

The response rate was comparable to other longitudinal studies of homeless persons (Aubry et al., 2004), ranging from 49 percent for a general homeless sample followed for a period of 18 months (Toro et al., 1997) to 90 percent for a sample of homeless individuals with substance abuse problems followed for 12 months (Wright et al., 1995).

Follow-up respondents were compared to those who had participated only in the first phase of the study (hereafter called non-respondents). Overall, respondents and non-respondents were similar in terms of sex, age, marital status, education, employment and country of origin. One point of difference though, was that non-respondents were

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more likely to have reported living in Ottawa for less than 6 months and less likely to have lived in the city for more than 10 years.

Measures

The Panel Study's conceptual framework and instruments were strongly influenced by the insights and approaches of the American studies identified above. A combination of quantitative and qualitative interview methods was used in both phases. The measures used at baseline served as the foundation for the follow-up instrument. Interviews for the first phase of the Panel Study included closed and open-ended questions that asked individuals about their demographic characteristics, housing history, health status, and health and social service use and needs (Aubry, et al., 2003). Questions to facilitate tracking individuals over time were also incorporated (Aubry et al., 2004) to address the objective of conducting a second phase of interviews about two years after the first set had taken place.

Open-ended questions were incorporated throughout the interview, to encourage respondents to elaborate upon or explain a specific closed-ended response or scaled selection. The respondents' answers to the following open-ended questions form the basis of the current paper.

- "Why did you leave the last place you were living?"
- "What would have been helpful to keep you housed?"
- "What would help you achieve the best/most desirable place for you to live?"
- "What prevents you from getting regular housing?"
- "What helped you find this housing?"
- "What has been the most helpful in keeping you in this housing?"

Procedures

Initial interviews were carried out in English (356), French (30), or Somali (14). The services of cultural interpreters were used in 16 other interviews; they helped participants understand interview questions by explaining them in a language other than English or French. Initial interviews were conducted in a private area in emergency shelters and drop-

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in centres. The length of initial interviews ranged from 50 minutes to 150 minutes with an average of 75 minutes.

The follow-up interviews were conducted over a seven-month period, in a similar sequence to the initial interviews. For example, every effort was made to interview those we first met in October 2003, two years later in October 2005. The interviews explored the extent to which individual, interpersonal, and community-level resources contributed to a successful exit from homelessness, and to assess the relationship between housing stability and health. The relationship of respondents' sex, age, family status and citizenship to successful exits, was also explored.

Follow-up interviews were conducted in a private location, such as a private room in a community centre or at the University of Ottawa, near the individual's place of residence. A small number of phone interviews were conducted to accommodate people living outside the Ottawa region. Follow-up interviews were carried out in English (221), French (13), or Somali (13) and eight others were conducted with the help of cultural interpretation services. Interviews ranged from 50 minutes to 150 minutes and averaged 75 minutes overall, with phone interviews taking an additional 10-20 minutes.

Results

As Table 1 indicates, among respondents, 76 percent were considered stably housed at the time of the second interview by virtue of having been in their own housing for 90 or more days. However, significant variability in housing stability emerged among the subgroups. Almost all the families (97 percent) were housed and had been housed for longer periods (average = 646 days) than those in other groups. Conversely, less than half of the single men (47 percent) had exited homelessness and, on average, had been housed for a shorter period (average = 265 days) than others. Adults in families at 77 percent and single women at 47 percent were the two subgroups most likely to report living in subsidized housing. No men reported living in subsidized housing.

We calculated the average number of moves per year for respondents, in the period between the initial and follow-up interviews (see Table 1). Adults in families were the most stable group: 53 percent reported moving only once within the two-year period, typically from an

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emergency shelter into permanent housing. Single women were less stable than families but more stable than the other subgroups, with an average of approximately 1.5 moves per year. Single men, and male and female youth were more frequent movers, reporting an average of 2 or more moves per year.

Table 1: Comparison of Different Subgroups on Housing History Variables Between Initial and Follow-up Interviews

	Percent Stably Housed ^{1*}	Percent Self-Reported Living in Subsidized Housing**	Average # of Moves Per Year Over Study Period**** M (SD)	Average # of Homeless Episodes Over Study Period**** M (SD)
Adults in Families (N = 58)	97	77	0.87 (0.55)	0.10 (.31)
Single Women (N = 55)	73	47	1.45 (0.98)	0.80 (.73)
Single Men (N = 43)	47	0	1.97 (1.19)	1.14 (.99)
Female Youth (N = 49)	90	16	2.45 (1.35)	0.92 (.90)
Male Youth (N = 50)	67	14	2.32 (1.36)	1.15 (1.07)
Total Sample (N = 255)	76	36	1.77 (1.25)	0.79 (.91)

¹ Respondents considered stably housed if in their housing for 90 days or more.

* Chi Square, $p < .001$; Adults in Families > Single Women, Male Youth, Single Men; Female Youth > Male Youth, Single Men

** Chi Square, $p < .001$; Adults in Families > Single Women, Single Men, Female Youth, Male Youth; Single Women > Female Youth, Male Youth, Single Men; Female Youth, Male Youth > Single Men

*** $F=18.67$, $p < .001$; Adult in Families < Single Women, Single Men, Female Youth, Male Youth; Single Women < Single Men, Female Youth, Male Youth;

**** $F=14.56$, $p < .001$; Adult in Families < Single Women, Single Men, Female Youth, Male Youth

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There were similar results when the average number of new homeless episodes per year between interviews was examined. Adults in families reported fewer new episodes of homelessness than did any of the other subgroups. Only six of the 58 adults in families (10 percent) experienced homeless episodes after being housed, and each of them experienced only one episode of homelessness. In contrast, 33 of the 48 male youth (71 percent) experienced homelessness during the study period after being housed, and 15 of these individuals (31 percent) experienced two or more homeless episodes. These results are in keeping with the overall findings of the study, which indicate that adults in families tend to be the most stably housed of the subgroups (Aubry et al., 2007).

Finding and Keeping Housing: Insights from the Respondents

A series of overall themes that addressed barriers and facilitators to housing stability emerged from the respondents' comments. These themes were: economic factors; interpersonal supports and conflicts; substance use problems; health status; community services and supports; and housing and neighbourhood quality.

Economic factors

Many respondents described their housing problems as being closely tied to the high cost of housing and not having enough money for rent. In response to a question about what services were helpful, one man explained: "Even for those that are employed with minimum wages, the rents are too high. Even when I worked, I came here to eat, because I was making \$800 a month and had to pay \$600 for rent." The gap between housing costs and income was particularly pronounced for individuals receiving social assistance but not supplementary Ontario Disability Support Program (ODSP) benefits. Many single adults highlighted the significance of the extra funds they received through this benefit program. When asked about helpful services, one man replied: "ODSP, they help pay for this place."

Those in low-wage jobs also expressed frustration at their inability to bridge the gap between income and expenses, or to live so close to the edge that any negative change would mean the loss of housing. For ex-

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ample, one man explained that the reason he lost his housing was that “the rent cheque did not come in on time.” Economic problems were apparent across all subgroups. For adults with children though, access to subsidized housing was certainly a more realistic possibility than it was for other respondents. As one woman explained, “It has made all the difference for our family. We are no longer worried about how we are going to pay \$1,000 in private housing.”

For single youth or adults, the inability to access rent-geared-to-income housing, or other affordable housing, seemed to result in a series of tenuous arrangements that often had negative outcomes. Living from cheque to cheque while dependent on an unsympathetic landlord was one scenario reported by respondents. For example, one female youth explained that she was particularly bothered by a landlord in private housing: “[The] last landlord lived right above and was always coming over. With community housing, landlords are more understanding.” Another common problem was sharing the cost of housing with others, either by living with roommates or by returning to the family home. While these strategies sometimes were successful, they more often seemed to result in negative outcomes. When asked why he moved out of his last residence, one man explained: “Everybody was splitting up and going their way. I could not afford to stay with the one unreliable roommate that was staying. If he did not pay his share, I would not have been able to foot the whole rent.”

Interpersonal supports and conflicts

Many single respondents tried to find and keep regular housing by sharing the cost of rent with others, or by returning to their family home. For some, living with others was a reflection of other changes that substantially increased the possibility of success. This certainly was the case for one male youth who explained what had helped him stay housed:

[I] live with grandparents and girlfriend and her kid, do not feel homeless... Wanted to move in because my grandparents are getting old and they need help getting around the house, so I asked them if I could move in. I am done with street life. My girlfriend changed my life. I don't want her to have a loser boyfriend and she and her kid are relying on me. Also, I see my friends and my brother who are junkies and older and they have

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kids of their own and I don't want to be like that. It's a good place, my grandparents' place, to save some money because they pay for much of the expenses. You don't have to worry about take-out, more regular meals and regular habits, you can shop for good food to eat, it's your base, you have a place to relax and set up things, and make it your own.

A female youth, reflecting on the reasons she has been able to stay housed, echoed some of these sentiments: "[I] stopped doing drugs, so I don't fight with my mom about it anymore; [I] stopped being cocky." For others, though, continuing differences heightened the chances of becoming homeless again. One female youth explained that she wasn't able to do what her parents expected of her because she was depressed and anxious, and her parents' way of coping was to kick her out.

For those using sharing as a simple cost-saving measure, there were many challenges and a significant chance of failure. One adult male explained the reason he lost his housing as follows:

I got sick and tired of my roommate. I would buy food and he would eat it all. (What would have been helpful to keep you housed?) My roommate being more considerate.

Some respondents identified a conflict between being housed and retaining "street friendships," including one male youth who reflected on the negative aspects of being in regular housing: "Lot more responsibility. Draws me away from my friends who are still on the streets. They show up late at night, but I have to get up at 5 a.m. to work."

Unresolved interpersonal conflicts and experiences of abuse further confounded efforts to stay housed. Among single females, both adults and youth, conflicts with abusive partners was often a reason for leaving regular housing, as captured in the statements of three respondents:

I was not getting along with my roommate. Her boyfriend threatened me, so I left.

My boyfriend was abusive. He would not help with the rent, he beat me up. He went to jail. I could not afford to stay there.

My boyfriend was violent emotionally and sexually, but I couldn't leave because the shelters were full and I was scared of him. Plus I had a dog, which is a problem in shelters.

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Health status

For some respondents, physical and/or mental health issues created circumstances that affected their search for and ability to maintain housing. One adult female, when asked why she left the place she was living, explained the interactions between health status and housing as follows: "Medical reason – couldn't live by myself; the Y [YWCA] wanted to move me into a smaller apartment without my own bathroom or kitchen, which increased my panic attacks." Another male respondent explained his situation as follows: "The reason that I am homeless is because my wife has chronic schizophrenia. For seven months, I was giving her money for rent, but she didn't pay the landlord. As a result, we were evicted from our home."

In other cases, being identified as having physical or mental health difficulties was a route to stable housing. As one male explained in response to a question about what had been most helpful in keeping him in his housing: "My disease. I can stay because of that." The same woman who had to leave the Y located a suitable apartment with the help of her Canadian Mental Health Association worker.

Substance abuse problems

For some respondents, substance abuse problems were barriers to achieving stable housing. One adult female described the reason she was evicted as "drinking." Some individuals tried to address these problems. One single man blamed crack for having to leave the last place he was living: "People would use my room as a 'dart board.' Other homeless men would always come to my place to hang around and do drugs." Having greater security in the building would have been helpful to keep him housed, "if the place was more fixed up so that less people could climb through the window." One single woman echoed this sentiment: saying that having "less drugs around; less partying" would have been helpful in keeping her housed.

Community supports and services

Many respondents identified a significant role for community workers and organizations in helping them find housing. Respondents differed

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widely in identifying the services and supports that they found helpful. For some, it was a matter of accessing one key targeted service at the right time and place, as in the case of one man and his family: "I have been getting a monthly cheque from social services." A female youth told us: "I turned myself into the CAS [Children's Aid Society]. I was sick of dealing with being homeless, hungry and cold." For many others though, the need was for an appropriate, on-going "basket" of complementary services and supports. For example, one young woman identified a series of steps and support services that she would require. She was living in a young women's emergency shelter at the time, but she wanted to go home. To do so, she needed to get better grades and continue to go to counselling for substance abuse, but personal problems were preventing this from happening.

Some respondents highlighted the value of supportive housing in helping to stay housed. One adult woman told us about the staff on site who had helped her with practical and emotional support. Others emphasized the complex nature of their challenges and the consequent need for a range of services. One man told us: "Most shelter residents suffer from substance abuse and mental health problems. There needs to be more resources for these problems as opposed to putting you in jail. More help, more housing, more counseling, more second-stage housing are needed. People like me are sick and we need help."

Housing and neighbourhood quality

Some respondents, primarily women, emphasized the significance of certain housing and neighbourhood characteristics for helping them to stay housed. Safety and location were commonly mentioned as a reason for leaving an unsafe area or preferring a safer one. Other respondents identified negative environmental features as a reason for leaving their housing and becoming homeless. One man who lived with his family told us: "The hydro didn't work. It was costing us \$400 per month per unit. Prostitutes were doing tricks in front of the house. The neighbourhood was too far from [my] west-end connections."

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Conclusions

Even at this early stage, the longitudinal approach has yielded some important findings. One was the differing levels of success among people who have been homeless in achieving housing stability after experiencing an episode of homelessness. Specifically, adults in families had more success than other individuals. They also were far more likely to access subsidized housing than the other subgroups in the study. In contrast, single men had the least success in exiting homelessness and none of those who were housed were living in subsidized housing. These differences raise questions about the impact of differential institutional rules on the experience of being homeless.

The self-reports also suggest that less support was available to help single people find stable housing than for adults in families, even though respondents in all of the subgroups highlighted economic problems as barriers to finding and keeping regular housing. These results add Canadian evidence as well as generalizability to the conclusions of several American longitudinal studies concerning the critical role of subsidized housing in helping people who were homeless achieve housing stability (Shinn et al., 1998; Stojanovic et al., 1999; Wong & Pilavin, 1997; Zlotnick et al., 1999).

The need for further analysis on the significance of health and social services such as supportive housing, case management, drug rehabilitation, mediation, and counselling, and the governance rules that determine their availability, is also raised by these findings. It is evident, for example, that in Ottawa, access to subsidized housing is much easier if you are homeless with a child than if you are alone, or if you are a single woman with a mental illness or someone who is fleeing domestic abuse. Much of Ottawa's supportive and supported housing is specifically for individuals with severe and persistent mental illness and thus provides a route for accessing subsidized housing. In addition, priority status for social housing is available to individuals, usually women, escaping spousal abuse. These matters draw attention to the work of anthropologists (Knowles, 2000; Passaro, 1996), and geographers (DeVerteuil, 2003; Wekerle, 1997; Wolch & Dear, 1993) who have explored the extent to

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which governance rules shape the differential experiences and ultimate duration of being homeless for various groups of people.

The role of institutions and institutional rules about support services, especially those dealing with financial matters, interpersonal conflict, and substance abuse, are significant, according to our participants. What is less clear though, is the extent to which they affect individuals' ability to secure and maintain stable housing. For example, respondents' remarks about the positive experience of being on ODSP are likely explained by the higher funds that this category of social support yields. Yet, it also highlights the fact that standard social assistance payments are too low to allow people to find or stay in regular housing in the private market (Alliance to End Homelessness in Ottawa, 2005, 2006, 2007, 2008). It raises the question: what impact would a increase in social assistance rates have on the extent to which formerly homeless individuals are able to maintain stable housing, in spite of health vulnerabilities or interpersonal difficulties that they might have or encounter?

Similarly, respondents' remarks about problems that accrue from the availability of illicit drugs and drug users, and about interpersonal conflicts more generally, raise questions about the value that increased access to psychosocial treatments such as mental health case management and drug rehabilitation might yield in conjunction with access to stable, affordable housing.

These questions highlight the value of encouraging further Canadian longitudinal research on homelessness that would include several cities and allow a comparative investigation of issues raised in this analysis. Given the diversity of provincial and municipal rules, regulations, and procedures with regard to the delivery of specialized health and social services, including social housing, case management, and drug rehabilitation, this (admittedly ambitious) venture has the potential of contributing significant insights about the relations between governance rules and homelessness.

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