

“Every Time I Try to Get Out, I Get Pushed Back”¹: The Role of Violent Victimization in Women’s Experience of Multiple Episodes of Homelessness

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Abstract

Research shows that, for most people, homelessness is not a chronic state that one enters and never leaves. Instead, homelessness tends to be dynamic, with individuals cycling in and out of multiple periods of homelessness throughout their lives. Despite this recognition, and a wealth of research on the causes of homelessness, generally, there is a lack of scholarship on the pathways to multiple episodes of homelessness. In particular, the relationship between violent victimization and women’s likelihood of being homeless multiple times is largely unexplored. Drawing on data collected from 269 structured interviews conducted with women using the services of homeless shelters and/or transitional housing in three U.S. and two U.K. cities, we use multivariate logistic regression to assess whether violent victimization increases women’s likelihood of experiencing multiple episodes of homelessness. Our results show that adult victims of stranger-perpetrated physical assault are significantly more likely to be homeless on

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multiple occasions. In addition, those who experience multiple forms of victimization (e.g., physical and sexual abuse) in childhood, adulthood, and/or across the life course are significantly more likely to experience multiple episodes of homelessness. Given recent efforts to eradicate homelessness, our results suggest specific vulnerable groups that may benefit from targeted social and policy interventions.

Keywords

homelessness, victimization, violence, women

In 2010, the U.S. government released an “ambitious” federal plan to prevent and end homelessness (United States Interagency Council on Homelessness, 2010, p. 3). Among the administration’s objectives was to eliminate chronic homelessness by 2015 and to formulate a plan to, over time, eliminate all homelessness.² Although some progress has been made toward these objectives, on a single night in January 2014 more than 578,000 people were homeless in the United States, of which more than 84,000 were characterized as chronically homeless (Henry, Cortes, Shivji, & Buck, 2014).³ Like in the United States, homelessness has been identified as an important concern in Britain. According to current single night estimates, more than 4,100 individuals were homeless in England in 2016, which represents a 16% increase over 2015 estimates. Indeed, England’s homeless population has increased every year since 2010 (Homeless Link, n.d.). Accordingly, British legislators introduced the *Homelessness Reduction Bill*, before the House of Lords at the time of writing, which proposes to increase local governments’ responsibility for preventing homelessness and would require public services to become more proactive in identifying those at risk of homelessness (Weaver, 2017).

Preventing and eliminating homelessness is a complex undertaking; however, there appears to be promise in efforts aimed at mitigating the “triggers” of homelessness (Busch-Geertsema & Fitzpatrick, 2008; Lindblom, 1991). Matters are complicated by the fact that there are multiple known pathways into homelessness. Indeed, “just as there is no one type of homeless person, so too there is no one cause that results in people being homeless” (Jasinski, Wesely, Wright, & Mustaine, 2010, p. 41). Nevertheless, the past two decades have given rise to increasing political, governmental, and policy interest in improving services for homeless populations and preventing homelessness altogether (Crane, Warnes, & Fu, 2006).

Early cross-sectional studies assumed that homelessness was a chronic state into which one enters and remains indefinitely. Over time, researchers learned that homelessness is, instead, a dynamic state into which individuals

enter, exit, and, sometimes, reenter over several iterations (Koegel, 2004). For example, Burnam and Koegel (1988), reporting on the results of the Los Angeles Skid Row Study, found that two thirds of homeless individuals had experienced multiple episodes of homelessness as adults. Similarly, Jones (1999) observed that nearly half of the women in his study of homelessness in four U.K. cities exited and reentered homelessness more than once. Accordingly, over time, a growing body of literature has developed that explores variables associated with exit from, and reentry into, homelessness. Notably absent from this literature—despite its importance to predicting one’s likelihood of becoming homeless in the first place (Browne & Bassuk, 1997; Jasinski et al., 2010; Tessler, Rosenheck, & Gamache, 2001)—is the issue of violent victimization. Furthermore, most of the literature on homelessness has neglected gender or has focused on homeless male samples, despite the fact that women comprise about one third of homeless persons in both the United States and the United Kingdom (Homeless Link, n.d.; Solari et al., 2015).

In this article, our objective is to shed some light on the relationship between various types of violent victimization experienced in childhood and adulthood and women’s likelihood of experiencing multiple episodes of homelessness. Specifically, we focus on three types of childhood victimization—physical abuse, sexual abuse, and gang-related violence—and four types of victimization experienced in adulthood—physical assault, sexual assault, intimate partner violence (IPV), and gang-related violence—in answering the following research question:

Research Question 1: Does violent victimization increase women’s likelihood of experiencing multiple episodes of homelessness?

We begin by briefly discussing the literature on pathways into homeless more generally, before we center our attention on violence as a cause of homelessness, especially for women. We then review our data collection and analysis strategies, before presenting the results of our research. What our analysis reveals is that victims of violence—especially victims of physical assault in adulthood—are more likely to experience multiple episodes of homelessness. In addition, we find that those who experience multiple forms of violence in childhood, adulthood, and across the life course are more likely to be homeless multiple times. We conclude by discussing the implications of these findings.

Pathways to Homelessness

Pathways to homelessness include those factors that result in one’s being homeless. Researchers have identified personal, social, and structural variables that are associated with homelessness, finding that pathways are gendered

(Tessler et al., 2001). For example, men are likely to become homeless following a job loss or institutional discharge, or as a result of mental illness or addiction. Conversely, women most often become homeless as a result of violent victimization, especially violence perpetrated by an intimate partner (Tessler et al., 2001).

This is not to say that women do not become homeless for other reasons. Financial difficulties and housing problems, which are closely related, are important pathways to homelessness (Bassuk et al., 1996; Tessler et al., 2001). Substance use has also been indirectly linked to women's homelessness through its negative influence on one's ability to maintain employment, and, therefore, housing (Tessler, Gamache, Rossi, Lehman, & Goldman, 1992). Physical and mental health problems have also been implicated in women's homelessness (Crane et al., 2005; Tessler et al., 2001). Like addiction, mental illness may indirectly increase one's likelihood of becoming homeless by interacting with one's ability to maintain stable employment or housing (Tessler et al., 1992).

Many women become homeless following a family dispute (Tessler et al., 2001; Wagner & Menke, 1992) or marital breakdown (Evans & Forsyth, 2004). Women who are dependent on others for their survival are particularly prone to homelessness in such circumstances (Tessler et al., 2001). Compared with housed women, homeless women are significantly more likely to have spent time during childhood or adolescence in a foster or group home (D'Ercole & Struening, 1990; Wood, Valdez, Hayashi, & Shen, 1990), to have run away from home (Shinn, Knickman, & Weitzman, 1991), or to have parents who abused alcohol or drugs (Wood et al., 1990). Younger homeless women, especially, often have family histories characterized by conflict and duress, and leaving home might be one of their few options to "escape" (Hyde, 2005).

Much research on homelessness emanating from Britain has centered on structural factors implicated in women's homelessness (Fitzpatrick, 2005). For instance, deinstitutionalization, unemployment rates, and the housing market have been identified as important pathways into homelessness (Kemp, Lynch, & Mackay, 2001). Furthermore, recent increases in homelessness have been attributed to economic factors, changing social welfare policies, and the decreasing availability of social housing (Third & Yanetta, 2000). Some scholars have argued that structural factors ought to be given greater attention when considering the causes of women's homelessness in the United States. For example, poor social welfare policies and inadequate family benefits have been cited as reasons for higher-than-expected homelessness rates in the United States (Shinn, 2010), and Ellen and O'Flaherty (2010)

suggest that poor housing policy in the United States has allowed homelessness to flourish.

In short, personal, social, and structural variables have been identified as factors that increase one's likelihood of becoming homeless. Often, pathways to homelessness are gendered, with women more likely than men to become homeless following violent victimization. Nevertheless, financial difficulties, housing problems, addiction, physical and mental illness, and family disputes have been noted as important covariates explaining women's homelessness. Structural factors have also been cited as an explanation for homelessness in the United States and the United Kingdom. Still, one cannot ignore the powerful impact of victimization on women's likelihood of becoming homeless. In the following section, we address this literature in greater detail.

Violence as a Primary Pathway to Homelessness

Although others factors contribute to homelessness for women, researchers agree that violence is often a primary cause (Tessler et al., 2001). When directly queried about what caused their homelessness, one quarter to one half of homeless women indicate violence as the most proximal exogenous factor (Browne & Bassuk, 1997; Jasinski et al., 2010; Tessler et al., 2001). Frequently, women become homeless when they flee violent situations (Jasinski et al., 2010).

Homeless women are far more likely than others to have been a victim of violence (Bassuk et al., 1996). Indeed, researchers have reported that 80% or more of homeless women have been victimized in their lives (Browne & Bassuk, 1997; Jasinski et al., 2010). Among their sample of 99 episodically homeless mentally ill women, Goodman and Dutton (1996) found that 92% were victims of child abuse, 92% were victims of abuse or assault as adults, and 87% were abused as children *and* adults. Others have found that at least one third of homeless women had experienced *major* violence in the past year (Huey, Fthenos, & Hryniewicz, 2012; Wenzel, Leake, & Gelberg, 2001).

Homeless women often have lengthy histories of violent victimization, with abuse frequently beginning in childhood (Bassuk et al., 1996; D'Ercole & Struening, 1990). Indeed, victimization in childhood is directly associated with adult homelessness for women (Jasinski et al., 2010; Mayock, Sheridan, & Parker, 2015). Physical, sexual, and emotional abuse are all common childhood experiences among homeless women (Browne & Bassuk, 1997; Goodman & Dutton, 1996), and rates of childhood abuse among homeless women are much higher than those observed in the general population (Jasinski et al., 2010). Jasinski et al. (2010) surveyed more than 700 homeless

women in Florida and found that the average woman experienced more than six episodes of physical abuse as a child. In their study of homelessness across seven British cities, Fitzpatrick, Bramley, and Johnsen (2013) identified childhood trauma, including physical abuse and neglect, as precipitating factors in women's homelessness. In their respective studies of homeless women in New York City and St. Louis, D'Ercole and Struening (1990) and North and Smith (1992) both observed that about one quarter of their participants had been sexually abused as children. Such high rates of childhood sexual abuse are not common to all homeless citizens; rather, sexual abuse affects far more women than men (Jasinski et al., 2010).

Alongside high rates of physical and sexual abuse in childhood, homeless women also experience frequent violence as adults (Wenzel, Koegel, & Gelberg, 2000). D'Ercole and Struening (1990) found that shelter-using African American women in New York City are 106 times more likely to be sexually assaulted than housed African American women in the same city. Jasinski et al. (2010) observed that more than half of their research participants were the victim of an attempted or completed sexual assault, concluding that "while unwanted sex was by no means universal among this sample [of homeless women], either as adults or children, neither could it be described as rare" (p. 35).

High rates of physical violence have also been witnessed in the lives of homeless women. Often, an intimate partner or other close relative is the perpetrator of this abuse (Bassuk, Dawson, & Huntington, 2006; Wenzel et al., 2000), and IPV has been cited as a "major contributory factor to homelessness" in Britain, the United States, and elsewhere (Netto, Pawson, & Sharp, 2009, p. 719; see also Browne & Bassuk, 1997; Evans & Forsyth, 2004; Mayock et al., 2015; Pawson, Third, & Tate, 2001). Among homeless women, IPV often begins at a young age and is associated with childhood victimization and family dysfunction (Bassuk et al., 2006; Tyler & Melander, 2012). Commonly, women who flee an abusive relationship have already exhausted family and social supports, making homelessness one of their few options (Hudson et al., 2010). In other instances, women plan to voluntarily enter shelters to leave their abusive partner (Browne & Bassuk, 1997), but both Britain and the United States have a scarcity of shelter beds relative to the number of abused women, which can result in homelessness (Davis, 2005; Evans & Forsyth, 2004; Levison & Harwin, 2000).

Little research has examined adult homeless women's experiences with gang violence. However, because gangs often congregate in low-income neighborhoods (Harley & Hunn, 2015), it is likely that some homeless women are touched by gang violence prior to becoming homeless. Research exploring the gang involvement of homeless or runaway youth finds that

some youth consider gangs appealing as a source of kinship and protection (Yoder, Whitbeck, & Hoyt, 2003). While involvement in gangs increases one's risk of exposure to gang-related violent victimization (Battin, Hill, Abbott, Catalano, & Hawkins, 1998; Yoder et al., 2003), such risks are gendered (Miller & Decker, 2001; Miller & White, 2004). For example, women in gangs are much less likely than men to be a victim of a gang homicide, and when murdered, they are rarely the intended target (Miller & Decker, 2001). In all, it is clear that violence affects the individual life histories of homeless women, and is a leading factor in their becoming homeless.

Pathways for Women who Experience Multiple Episodes of Homelessness

A considerable amount of scholarship has examined pathways to homelessness for women; however, this scholarship focuses on those factors that produce women's initial period of homelessness. As noted previously, there is a common misconception that homelessness is an indefinite, irreversible state. On the contrary, most homelessness is episodic or transitional rather than chronic (Kuhn & Culhane, 1998; Wright, 2009). In other words, many individuals repeatedly cycle between short periods of homelessness and being housed (Jasinski et al., 2010).

Therefore, although it has been the subject of limited research, experiencing multiple episodes of homelessness appears to be common (Tutty, Ogden, Giurgiu, & Weaver-Dunlop, 2014). In their two-wave panel study on the presence and durations of exits from homelessness among a sample of 265 individuals in Minneapolis, Sosin, Piliavin, and Westerfelt (1990) observed that about 75% of participants left the streets for at least two consecutive weeks, often to temporarily live with a friend or relative. Anderson and Christian (2003) similarly found that about one third of those who exit homelessness in the United Kingdom later return to homelessness. Crane et al. (2005) studied homelessness in later life in the United States, England, and Australia, reporting that 33% of their participants had been previously homeless. However, aside from reporting this frequency, they did not analyze differences between the singly and multiply homeless.

Given the extent to which individuals can cycle through homelessness, it is unfortunate that only a few factors have been examined in relation to multiple episodes of homelessness. Of these, it is unsurprising that the likelihood of returning to a state of homeless is lowest for males and those who have been gainfully employed most of their adult lives (Piliavin, Entner Wright, Mare, & Westerfelt, 1996). Those receiving social assistance are also less likely to return to homelessness (Wong, Culhane, & Kuhn, 1997). The

influence of other variables on the exit from and reentry to homelessness is less certain. For example, Sosin et al. (1990) found that prior homelessness is unrelated to future homelessness; conversely, Wong et al. (1997) reported that those who had never been homeless previously were less likely to return to homelessness. Similarly, Piliavin et al. (1996) found that the type of exit from homelessness is not associated with returns to homelessness, but others have reported that those who exit homelessness by returning to their own private residence are less likely to experience subsequent homelessness than those who live in transitional housing or similar arrangements (Dworsky & Piliavin, 2000; Wong et al., 1997).

Despite its importance for predicting homelessness in general, violent victimization has rarely been studied in relation to experiencing multiple episodes of homelessness. The limited literature that does exist on the topic principally addresses victimization among homelessness mothers with young children. Comparative research shows that mothers who become homeless on multiple occasions have been found to have higher rates of childhood sexual abuse, sexual molestation, and violence perpetrated by strangers than those who are homeless for the first time (Bassuk, Perloff, & Dawson, 2001). Prospective analyses conducted by Bassuk et al. (2001) demonstrated that first-time homeless mothers who experienced IPV after exiting homelessness were more than three times more likely to experience a second episode of homelessness. An exception is Mayock et al. (2015), who used detailed biographical interviews to identify IPV as a reason for women's—and not only mothers'—reentry into homelessness.

Although a large proportion of homeless citizens will experience more than one episode of homelessness as adults, variables associated with one's likelihood of experiencing multiple episodes of homelessness are understudied. To complicate matters further, some variables widely believed to strongly predict homelessness—most notably violence—have been largely unexplored in relation to reentry to homelessness. In this study, we address this gap in the literature by examining the relationship between violent victimization and women's experiences of multiple episodes of homelessness. Specifically, we ask the following research question:

Research Question 1: Does violent victimization in childhood and/or adulthood increase women's likelihood of experiencing multiple episodes of homelessness?

In response to this question, we offer two hypotheses:

Hypothesis 1 (H1): Female victims of any form of violence experienced in childhood or adulthood will have increased odds of experiencing multiple episodes of homelessness.

Hypothesis 2 (H2): Women who have experienced multiple forms of violent victimization will have increased odds of experiencing multiple episodes of homelessness.

Method

Data

Data for this study are derived from a larger comparative project investigating access to service for homeless victims of violence in the United States and Britain. Indeed, homelessness has been a popular topic of study in both countries (Fitzpatrick, 2005). As O'Connell (2003) notes, "despite the differences in their political systems, the U.S. and the U.K. have a number of common social problems, with homelessness perhaps being one of the most visible" (p. 158). Furthermore, the United States and the United Kingdom share similarities in homelessness policies, with notable emphases on prevention and local decision making (O'Connell, 2003). In Britain, though, decision making is more centralized, and welfare policy distinguishes between "statutory" and "nonstatutory" homelessness with public housing guaranteed to those meeting the criteria for statutory homelessness (Anderson & Christian, 2003; O'Connell, 2003).

Participants consisted of a nonprobability sample of 269 homeless women using the services of a homeless shelter or transitional housing in three U.S. (Los Angeles, Chicago, and Detroit) and two U.K. (Manchester and Liverpool) cities.⁴ No data were missing. To construct our sample, a sampling frame was assembled from a list of shelters and transitional housing programs that serve homeless women in each city. Each organization was approached to determine whether they would facilitate access to their clients. In total, 30 shelter agencies agreed to participate. All participants were self-selected from participating agencies after being informed about the study and its purposes. In addition, participants met three inclusion criteria: (a) They were women who were at least 18 years old, (b) they were using the services of the selected agency, and (c) they appeared capable of providing informed consent.⁵

Data were collected through in-person structured interviews, and surveys were developed by the researchers. The current study primarily draws upon responses to questions pertaining to traumatic events experienced. In this

section of the interview, participants were asked a series of questions about forms of trauma they may have experienced as children, adolescents, or adults. In relation to violence experienced during childhood, participants were asked whether they had ever experienced physical abuse, sexual abuse, and/or gang-related violence. Similarly, they were asked whether they had ever experienced physical assault, sexual assault, IPV, and/or gang-related violence as adults. Interviews averaged about 40 min in length, and all participants received a US\$10 gift card to either Walgreen's or McDonald's.

Measures

The dependent variable is whether or not the participant had experienced multiple episodes of homelessness as an adult prior to the interview date. Participants were asked how many episodes of homelessness they had experienced (one, two, or three or more).⁶ This variable was recoded so that those who were on their first episode of homelessness were coded 0, and those who had experienced two or more episodes of homelessness were coded 1.

To assess our first hypothesis—that victims of any form of violence will have increased odds of experiencing multiple episodes of homelessness—participants were asked whether they had experienced several types of victimization as children or adults. Specifically, participants indicated whether, as children, they had been a victim of physical or sexual abuse, or gang-related violence.⁷ Similarly, participants were asked whether, as adults, they had experienced nonintimate partner physical or sexual assault, IPV, or gang-related violence. Responses were coded 0 for “no” and 1 for “yes” for each type of victimization.⁸

To test our second hypothesis—that women who experienced multiple forms of victimization will have increased odds of experiencing multiple episodes of homelessness—we constructed a series of continuous variables by summing the scores for each type of victimization experienced in childhood, as adults, and altogether. Thus, participants received a score ranging from 0 to 3 for the number of forms of victimization experienced in childhood, 0 to 4 for the number of forms of victimization experienced as adults, and 0 to 7 for the number of forms of victimization experienced across the life course.

We controlled for several other factors that research has shown to be associated with homelessness. Participants were asked to self-report whether any of the following conditions may have also contributed to their homelessness: addiction, housing problems, financial problems, physical health problems, mental illness, or family dispute.⁹ Participants who responded “yes” were coded 1, and all others were coded 0. Other relevant control variables were also entered into the statistical models. To account for the possibility that the participant's location might affect their experiences of homelessness (e.g.,

Los Angeles has a higher cost of living than Detroit), we controlled for their location. In addition, we controlled for their age (in years) and the length of their current period of homelessness. The length of their current period of homelessness was often an approximation (e.g., participants indicated that they had been homeless for “two months” or “about two years”). For each participant, we recoded their length of homelessness into days, based on an assumption of 30.4167 days per month (365 days/12 months), and multiplied this by the number of months they reported being homeless (e.g., 2 months = 60.8334 days; 2 years = 730.0008 days). To ease interpretation, the number of days homeless was then transformed back into years by dividing the number of days by 365 (e.g., 2 months = 0.1667 years). Finally, we controlled for the participant’s race, which was measured based on self-reports of being White, Black, Hispanic, or Other.

Analytic Strategy

Given the dichotomous nature of our dependent variable, we used logistic regression to test our hypotheses. Data were analyzed using *Stata 14*. To begin, we estimated a series of bivariate logistic regression models for the independent and control variables with the dependent variable. Based on these analyses, two control variables were not included in further analyses. First, having been incarcerated as a purported cause of homelessness was deleted because of a lack of variance—all those who cited a custodial sentence as a reason for their homelessness had experienced multiple episodes of homelessness. Second, a nebulous “other” causes of homelessness variable was deleted because it was far from significant in bivariate models ($p = .704$). Adult physical assault, adult sexual assault, IPV victimization, the length of the current period of homelessness, addiction, financial problems, and family dispute significantly increased one’s likelihood of experiencing multiple episodes of homelessness in bivariate models ($p < .05$).¹⁰

After ensuring the data met the assumptions of logistic regression, we estimated a series of multivariate logistic regression models to test our hypotheses. Two models were used to test our first hypothesis. Model 1 is a baseline model explaining one’s odds of experiencing multiple episodes of homelessness based only on victimization experiences. Model 2 similarly includes all forms of victimization, but also controls for other relevant variables and causes of homelessness. We then estimated three parallel models to test our second hypothesis. Models 3 through 5 examine the impact of the number of forms of victimization experienced in childhood, adulthood, and childhood *and* adulthood on one’s likelihood of experiencing multiple episodes of homelessness, respectively.

Sample Description

Table 1 presents descriptive statistics for all variables. Altogether, more than half of all participants (53.16%) reported being homeless two or more times. As we expected based upon our review of the literature, violence was exceptionally common in the lives of these women. As children, about 40% of women were physically or sexually abused, and a meaningful proportion (12.64%) experienced gang-related violence. Victimization was also common in these women's adult lives: Again, nearly 40% of women were physically or sexually assaulted, and nearly 60% were victims of IPV. Throughout their lives, homeless women experienced an average of 2.33 different forms of victimization (e.g., childhood sexual abuse and IPV). Participants experienced an average of 0.92 forms of violent victimization as children, and 1.41 forms as adults.

In terms of its demographic makeup, our sample was largely drawn from Los Angeles (52.79%) and Chicago (18.96%). Participants primarily identified as Black (56.72%), White (30.60%), or Hispanic (8.21%), and the average age of participants was 40.70 years ($SD = 13.34$ years). On average, women had been homeless for about 2 years during their only or current episode ($SD = 3.40$), although some had been homeless for only a few days at the time of the interview, whereas others had been homeless for decades.

Results

In this study, we sought to understand whether violent victimization experienced in childhood and/or adulthood increases women's likelihood of experiencing multiple episodes of homelessness. We hypothesized that victims of any form of violence will have increased odds of experiencing multiple episodes of homelessness, and that victims of multiple forms of violence will have increased odds of experiencing multiple episodes of homelessness.

Table 2 shows the results of our test of our first hypothesis. Model 1 of Table 2 provides a baseline model with only the forms of violent victimization experienced included as explanatory variables. In the baseline model, no form of childhood victimization is associated with women's experiences of multiple episodes of homelessness. Conversely, all forms of victimization in adulthood, with the exception of gang-related violence, significantly increase the likelihood of experiencing multiple episodes of homelessness. Specifically, we find that women who are physically assaulted and women who are sexually assaulted are both 2.1 times more likely to report experiencing multiple episodes of homelessness. Likewise, victims of IPV are 1.9 times more likely to have had multiple episodes of homelessness.

Table 1. Sample Descriptive Statistics.

	M or %	SD (Range)
Dependent variable		
Experienced multiple homelessness	53.16	
Independent variables		
Childhood victimization		
Physical	38.66	
Sexual	40.52	
Gang related	12.64	
Adult victimization		
Physical	39.41	
Sexual	37.17	
IPV	57.25	
Gang related	7.06	
Number of forms of violence experienced (child)	0.92	0.95 (0-3)
Number of forms of violence experienced (adult)	1.41	1.17 (0-4)
Number of forms of violence experienced (total)	2.33	1.74 (0-7)
Control variables		
Location		
Los Angeles	52.79	
Chicago	18.96	
Detroit	10.04	
Manchester	7.81	
Liverpool	10.41	
Race		
White	30.60	
Black	56.72	
Hispanic	8.21	
Other	4.48	
Age (in years)	40.70	13.34 (18-71)
Length of current period of homelessness (in years)	2.05	3.40 (0.003-25)
Addiction	19.70	
Housing problems	10.04	
Financial problems	27.88	
Health problems	5.20	
Mental illness	13.01	
Family dispute	16.36	

Note. IPV = intimate partner violence.

Table 2. Full Sample Logistic Regression Testing H1: Victims of Any Form of Violence Will Have Increased Odds of Experiencing Multiple Episodes of Homelessness.

Variable	Model 1 ^a			Model 2 ^b		
	OR	SE	<i>p</i>	OR	SE	<i>p</i>
Child physical	0.796	0.250	.468	0.810	0.281	.544
Child sexual	1.133	0.345	.681	1.240	0.424	.529
Child gang related	1.545	0.664	.312	1.611	0.781	.325
Adult physical	2.111	0.656	.016	2.174	0.766	.028
Adult sexual	2.113	0.636	.013	1.839	0.614	.068
Adult IPV	1.949	0.536	.015	1.524	0.503	.202
Adult gang related	0.888	0.104	.835	0.747	0.457	.634
Location ^c						
Chicago				0.711	0.290	.403
Detroit				0.496	0.279	.213
Manchester				0.917	0.613	.897
Liverpool				0.281	0.181	.049
Race ^d						
Black				1.718	0.678	.170
Hispanic				0.950	0.603	.936
Other				2.290	1.656	.252
Age				0.983	0.013	.218
Current homelessness				1.320	0.114	.001
Addiction				1.150	0.566	.777
Housing problems				1.307	0.762	.646
Financial problems				0.658	0.288	.339
Health problems				0.441	0.300	.229
Mental illness				1.660	0.850	.322
Family dispute				0.339	0.184	.047
Constant	0.446	0.104	.001	0.739	0.619	.719

Note. OR = odds ratio; IPV = intimate partner violence.

^aNagelkerke $R^2 = .173$.

^bNagelkerke $R^2 = .335$.

^cReference category = Los Angeles.

^dReference category = White.

Model 2 of Table 2 also includes each form of violent victimization as explanatory variables, but we add relevant control variables to the model. When controlling for demographic variables and other purported causes of homelessness, physical assault in adulthood is the only form of victimization

that continues to increase women's likelihood of experiencing multiple episodes of homelessness—women who experience a physical assault as adults are 2.2 times more likely to be homeless multiple times. Although being a victim of sexual violence as an adult retains marginal significance ($p < .10$), the effect of both adult sexual violence and IPV victimization are suppressed when the control variables are entered into the models. Post hoc analyses indicate that being homeless because of a family dispute and the length of one's current period of homelessness attenuate the relationship between IPV victimization and multiple experiences of homelessness, although the length of one's current period of homelessness also moderately suppresses the impact of being physically assaulted as an adult. The effect of adult sexual victimization is only suppressed in the full model.

In addition to the forms of violence experienced, we find that three other factors influence women's likelihood of experiencing multiple episodes of homelessness. A lengthier period of current homelessness is associated with an increased likelihood of experiencing additional episodes of homelessness. In fact, for each year that a woman has been homeless in the most recent iteration, her likelihood of experiencing additional bouts of homelessness is increased by 32%. However, those who become homeless as a result of a family dispute are about 66% less likely to be homeless on multiple occasions. Likewise, Liverpool residents are 72% less likely than those residing in Los Angeles to experience multiple episodes of homelessness. This latter finding is not particularly surprising, at least when considering structural explanations—among the cities in which our participants resided, Liverpool has the median cost of living and lowest unemployment rate. Collectively, these results indicate that our first hypothesis is supported—victims of violence, especially of a physical assault as adults, are more likely to experience multiple episodes of homelessness.

Next, we examined whether the number of forms of victimization experienced as children, adults, and across the life course increases women's likelihood of experiencing multiple episodes of homelessness. These results are shown in Table 3. All models presented in Table 3 control for relevant covariates and other causes of homelessness. Model 3 measures the impact of experiencing multiple forms of victimization in childhood (e.g., physical and sexual assault) on women's likelihood of experiencing multiple episodes of homelessness in adulthood. We found that for each additional form of victimization experienced, women's likelihood of experiencing multiple episodes of homelessness increases by about 36%. As with Model 2, above, the length of the current period of homelessness (odds ratio [OR] = 1.261) is also associated with an increased likelihood of experiencing multiple episodes of homelessness, whereas being homeless because of a family dispute (OR = .231) and

Table 3. Full Sample Logistic Regression Testing H2: Victims of Multiple Forms of Violence Will Have Increased Odds of Experiencing Multiple Episodes of Homelessness.

Variable	Model 3 ^a			Model 4 ^b			Model 5 ^c			
	OR	SE	p	OR	SE	p	OR	SE	p	
No. of forms of child victimization ^d	1.355	0.206	.046							
No. of forms of adult victimization ^e				1.745	0.244	<.001				
No. of forms of victimization ^f							1.398	0.126	<.001	
Location ^g										
Chicago	0.789	0.300	.532	0.660	0.262	.295	0.737	0.287	.434	
Detroit	0.481	0.254	.166	0.494	0.269	.196	0.512	0.278	.217	
Manchester	0.789	0.510	.714	0.879	0.572	.843	0.923	0.608	.903	
Liverpool	0.288	0.173	.038	0.301	0.186	.051	0.306	0.188	.054	
Race ^h										
Black	1.568	0.588	.231	1.754	0.688	.152	1.697	0.657	.172	
Hispanic	0.880	0.530	.832	0.962	0.596	.951	0.823	0.505	.751	
Other	1.864	1.282	.365	2.248	1.601	.255	2.083	1.486	.303	
Age	0.988	0.013	.369	0.984	0.013	.235	0.987	0.013	.312	

(continued)

Table 3. (continued)

Variable	Model 3 ^a			Model 4 ^b			Model 5 ^c		
	OR	SE	p	OR	SE	p	OR	SE	p
Current homelessness	1.361	0.115	<.001	1.311	0.111	.001	1.327	0.112	.001
Addiction	1.093	0.512	.850	1.192	0.579	.718	1.127	0.544	.805
Housing problems	1.002	0.552	.997	1.262	0.720	.683	1.214	0.687	.731
Financial problems	0.478	0.193	.068	0.683	0.294	.376	0.607	0.256	.237
Health problems	0.450	0.282	.202	0.480	0.320	.271	0.446	0.292	.217
Mental illness	1.414	0.669	.464	1.751	0.881	.265	1.627	0.805	.326
Family dispute	0.231	0.118	.004	0.364	0.191	.055	0.288	0.150	.016
Constant	1.245	0.972	.779	0.710	0.583	.677	0.696	0.574	.660

Note. OR = odds ratio.

^aNagelkerke $R^2 = .270$.

^b $R^2 = .321$.

^cNagelkerke $R^2 = .312$.

^dBivariate logistic regression: OR = 1.325, SE = 0.175, $p = 0.33$.

^eBivariate logistic regression: OR = 1.945, SE = 0.237, $p < .001$.

^fBivariate logistic regression: OR = 1.468, SE = 0.103, $p < .001$.

^gReference category = Los Angeles.

^hReference category = White.

residing in Liverpool (OR = .288) decrease women's likelihood of being homeless more than once.

Model 4 measures the impact of experiencing multiple forms of victimization in adulthood. For each additional form of victimization experienced as an adult, women's likelihood of being homeless multiple times increases by about 75%. As found in other models, the length of women's current period of homelessness is also positively associated with experiences of multiple homelessness (OR = 1.311).

Finally, Model 5 examines the cumulative impact of being the victim of multiple forms of violence across the life course. For each additional form of victimization that women experience in childhood and/or adulthood, their likelihood of experiencing multiple episodes of homelessness increases by about 40%. Those who have had a longer current period of homelessness (OR = 1.327) are also more likely to be homeless multiple times, whereas those who are homeless as a result of a family dispute (OR = .288) are less likely to become homeless again. Thus, our second hypothesis is also supported—women who experience multiple forms of violence in childhood and adulthood are more likely to be homeless multiple times.

Discussion

Homeless women's lives are infused with violence, with victimization beginning well before homelessness for many women. Researchers have found that when they are asked to report the most important cause of their becoming homeless, up to half of all women point to incidents of violence in their lives (Browne & Bassuk, 1997; Jasinski et al., 2010; Tessler et al., 2001). Victimization at some point in their lives is nearly ubiquitous among homeless women (Browne & Bassuk, 1997; Fitzpatrick et al., 2013; Jasinski et al., 2010; Mayock et al., 2015). Not surprisingly, the rate of violence in homeless women's lives is far greater than that of housed women (Bassuk et al., 1996). Of the complex pathways to homelessness for women, victimization is, therefore, regarded as one of the most important.

Yet, victimization as a pathway to multiple episodes of homelessness for women is largely unacknowledged within the literature. By now, it is clear that homelessness is dynamic with many individuals entering, exiting, and reentering homelessness several times (Jones, 1999; Kuhn & Culhane, 1998; Wright, 2009). But what variables influence the reentry process? Within the sparse literature, men, those with employment prospects, and those receiving social assistance are less likely to return to homelessness (Piliavin et al., 1996; Wong et al., 1997). The role of most other factors is contested or unknown. In relation to victimization, there is some evidence to suggest that

multiply homeless mothers have higher lifetime victimization rates than the singly homeless (Bassuk et al., 2001), but whether this extends to other homeless women is unknown. IPV victimization has also been implicated in women's reentry to homelessness (Mayock et al., 2015).

Given the centrality of violent victimization to women's likelihood of becoming homeless, in this study, we sought to address whether violent victimization increases women's likelihood of experiencing multiple episodes of homelessness. We hypothesized that victims of any form of violence will have increased odds of experiencing multiple episodes of homelessness, and that victims of multiple forms of violence will have increased odds of experiencing multiple episodes of homelessness. Our first hypothesis was partially supported—victims of nonintimate partner physical assault in adulthood are more likely to experience multiple episodes of homelessness. Our second hypothesis was fully supported—those who experience multiple forms of violence in childhood, adulthood, and across the life course are more likely to be homeless multiple times as adults.

Contrary to what others have found regarding women's first experience of homelessness, we do not find that child physical, sexual, or gang-related victimization increases women's risk of experiencing multiple episodes of homelessness. It is possible that although childhood victimization is associated with first homelessness, more recent events explain reentry into homelessness. In other words, women may have experienced too many intervening traumas for childhood victimization to have an ongoing impact on repeated experiences of homelessness. Indeed, in relation to our second hypothesis, we find that child victimization has a cumulative impact, which may suggest that the strength of the traumatic experience matters. Childhood victimization may also initiate long-term cycles of violence, which are particularly difficult for homeless women to disrupt (Wesely & Wright, 2009). Still, experiencing multiple types of violence as an adult had the strongest cumulative impact on multiple episodes of homelessness.

Two additional findings related to women's likelihood of experiencing multiple episodes of homelessness were consistently noted. First, women who become homeless following a family dispute are less likely to be homeless multiple times. Whereas others have found that exiting homelessness to stable, personal housing reduces women's likelihood of becoming homeless again (Dworsky & Piliavin, 2000), our findings suggest that it is possible that family disputes can be resolved, thereby reducing the likelihood of future homelessness. This may be especially true for younger homeless women, who may have the opportunity to return to stable housing with their parents. Second, we found that women who have been homeless for a longer period of time are more likely to experience multiple episodes of homelessness. This

finding contradicts previous research by Sosin et al. (1990) who found that prior homelessness is unrelated to future homelessness, but extends research by Wong et al. (1997) who found that those who had never previously been homeless were less likely to return to homelessness. Rather than dichotomizing women into previously homeless versus not previously homeless, it seems to be the case that the length of their period of homelessness matters, even if they are homeless for the first time.

It is clear that a subset of the female homeless population is at a greater risk of experiencing multiple episodes of homelessness. Although the experience of violence is a significant predictor, violence alone does not explain episodic homelessness among homeless women. It is more likely the case that, as a result of violent victimization, these are individuals suffering the effects of untreated trauma. Previous research shows high rates of depression, anxiety, posttraumatic stress disorder, self-injurious behaviors, and substance abuse linked to physical and sexual assault victimization (D'Ercole & Struening, 1990; Huey, Broll, Hryniewicz, & Fthenos, 2014; Huey et al., 2012; Tyler, Melander, & Almazan, 2010). Among homeless populations, violence has also been linked to a worsening of preexisting psychiatric conditions as an effect of untreated trauma (D'Ercole & Struening, 1990; Goodman, Dutton, & Harris, 1995).

To facilitate treatment, particular attention should be given to those who become homeless after experiencing violence, and especially to those who have experienced multiple forms of victimization. Given both the United States's and Britain's objective of reducing or eliminating homelessness in the near term, specific attention should be directed to those who escape homelessness, but then find themselves living on the streets or in a shelter again. Unfortunately, research suggests that homeless shelter workers often do not include queries regarding women's victimization history and its effects during case management, and may, therefore, miss a crucial opportunity to support a vulnerable population (Huey et al., 2014). Chamberlain and MacKenzie (2006) argue for nuanced interventions that account for different pathways to homelessness. We identify a subgroup of women—a group who may be considered to have a “victimization homeless career” (Chamberlain & MacKenzie, 2006)—who may require ongoing supports even after they leave an initial period of homelessness. Simply put, if we want to end homelessness, we need to develop procedures and programs to adequately serve and support homeless female victims.

Notwithstanding the aforementioned results, four limitations should be considered. First, as is typical in studies of this population, our sample was selected conveniently, and is not generalizable. Nevertheless, our sample is relatively large for a study of homeless women, and our participants come from three

different parts of the United States and two different cities in Britain; thus, our sample is heterogeneous and has sufficient statistical power to have confidence in the robustness of our findings. Second, as a retrospective study, it is possible that participants forgot some events or overemphasized more recent victimization. This may explain why the childhood victimization variables were not significant on their own. Third, victimization was measured as a binary, nominal-level variable. As a result, we are unable to account for the number of occurrences of each type of victimization or their severity. Similarly, we did not ask when the incident occurred (i.e., did violence occur immediately before becoming homeless or several years prior?) or whether victimization occurred while housed or during a previous episode of homelessness. Fourth, in this study, we did not account for structural causes of homelessness, such as the effects of state and federal policies. Because our sample is drawn from only five cities across two countries, too little variation exists to meaningfully include structural covariates; however, we encourage future researchers to draw upon even more diverse, cross-national samples to further our understanding of the pathways to multiple episodes of homelessness.

Conclusion

The results of this study shed much-needed light on the role of violence in multiple entries into homelessness for women residing in the United States and Britain. It is especially important to account for violence when considering eliminating chronic homelessness among women. Moreover, the results suggest some particularly vulnerable groups who, perhaps, deserve special attention: those who are physically assaulted and those who experience multiple different forms of victimization in their lifetime.

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Notes

1. This quote comes from a statement made by one of the study's participants in response to an open-ended question.
2. In 2015, the Obama administration released an amended plan that contains a goal of "finish[ing] the job of ending chronic homelessness in 2017" (United States Interagency Council on Homelessness, 2015, p. 6).
3. In its Annual Homeless Assessment Report (AHAR) to Congress, the U.S. Department of Housing and Urban Development defines chronic homeless as either being continuously homeless for a period of at least 1 year or having four or more distinct episodes of homelessness within a 3-year period.
4. Altogether, we interviewed 270 homeless women; however, one participant was excluded from our analyses on account of her being an outlier exerting strong influence on the sample ($D_i = 2.37$).
5. A woman's ability to provide informed consent was subjectively determined based on her appearance of being sober and lucid during preinterview discussions. Those who did not meet this criterion were presented with a gift card, told the interview had to be discontinued for uncited reasons, and thanked for their time.
6. Some victims of gang violence were also gang members, but others were not. Some women, for example, lived in close proximity to gang territory and, therefore, came into regular contact with gang members. Others had partners in gangs, but were not members themselves.
7. "Homelessness" was defined by participants according to their subjective experiences.
8. Participants were given the opportunity to qualitatively elaborate on each type of victimization experienced, but for this analysis, we are focusing only on their binary quantitative responses.
9. Addiction was self-defined by participants—the authors did not request medical records or attempt to diagnose participants; however, in all instances participants referenced substance abuse disorders that they had personally experienced. Family disputes refer to disagreements or arguments with nonintimate partners.
10. Due to space limitations, these results are not presented herein; however, they are available from the first author upon request.

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