



RESEARCH PAPER

**From Streets to Shelter: Challenges of Homeless Children in CPWB,
Lahore**

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ABSTRACT

This study was led to seek out the Challenges and problems faced by homeless children in the Child Protection and Welfare Bureau CPWB, Lahore. For the present study, in-depth interviews were conducted by the researcher to examine the challenges faced by homeless children of the Child Protection and Welfare Bureau CPWB and the management of CPWB regarding accommodation, education and health of homeless children in CPWB. The sample of the research was comprised of 10 children of CPWB 5 males and 5 females. According to this study, most of the youngsters in the bureau had been dropped by their families. They leave their family due to their extremely vulnerable condition. The study recommended that the shelter services should extend to rural areas as well psychosocial services including therapeutic services should be given to children in order to cope traumatic experiences.

KEYWORDS Children, Parental unemployment, Homeless, vulnerable condition, Family, education, Welfare

Introduction

Homelessness is a severe form of poverty characterised by the insecurity of housing and insufficient income, health care support and social support. The term "homeless" is not simple. Many different definitions have been offered. Some define those who sleep on a friend's couch or those who live in severely ruined houses as homeless (NCH, 2006)

Homelessness is a transitory situation, with less than one-third of the total population considered to be constantly homeless (Wright, 2008).

More generally, a homeless person is defined as an individual without temporary housing who may live on the footpaths in open places, stay in a shelter, mission, single-room facility dumped building or vehicle, or in any other unstable or temporary situation (Henry, Cortes & Morris 2013, p. 2).

Homelessness is a situation of scarcity that occurs when people lack access to safe, stable, and appropriate housing. A homeless individual has no security, assurance, respectability, or freedom. Homelessness can have substantial and long-term consequences on one's personal growth, health, and well-being. In areas of the world impacted by catastrophes, conflicts, or starvation, chronic homelessness can exist in the absence of disability. One of the most extreme expressions of poverty is homelessness (Flatau, Lester, Callis, Hartley, Barnes, Griffin 2022)

It may be difficult to believe, but homelessness is a significant issue even in developed countries. Canada, one of the wealthiest economies, has 35,000 people experiencing homelessness on any given night. Over 235,000 individuals face homelessness over the course of a year. While 180,000 are able to find space in emergency

shelters, 5,000 Canadians remain without shelter. Many readers in Pakistan might find these statistics hard to grasp, as their perception of the prosperous West—often shaped by media portrayals—clashes with the economic difficulties and mental health challenges that contribute to homelessness. (Fowler,2019)

In developing countries like Pakistan, a very large portion of the population is either homeless or housed in temporary housing; Pakistan is believed to have over 20 million homeless people. That equates to about 9% of the overall population. The majority among themselves are dwelling in shelters, slums, or on the streets. In reality, slums house more than 40% of Karachi, Pakistan's capital urban centre. This equates to around 5.9 million people. Furthermore, it is estimated that 200,000 people sleep on the streets. At the same time, a very large number of those who are sheltered in structurally sound housing units face overcrowding. (Noor,2020)

The reality of homelessness is evident in developing countries, where the very poor and needy often lack even basic shelter. Their numbers reach into the millions, with many sleeping on sidewalks, under bridges, or in other makeshift locations. Larger groups often settle as squatters, forming slums in urban areas.

Today's Pakistani population is believed to be 220 million people. Nation-wide living circumstances and housing are under threat due to enormous growth. The gap between homeless people and those who live well in cities seems to be growing. It has been calculated that over 20 million people in Pakistan do not have adequate housing. According to statistics, 35% of the population is poor, with numerous living in slums and short-term housing. Homelessness hurts women and children in Pakistan because of starvation, a shortage of medical services, and a deficiency of education opportunities. The transformation has collaborated with over 30 organisations from 20 countries to raise the voices of people facing homelessness through the Worldwide Homelessness Campaign. The primary answer for homeless people is affordable and readily available housing, as well as social assistance to aid people in addressing other challenges. To prevent homelessness across the country, our government must considerably raise funding to be spent on making housing accessible for low-income people.

Several welfare foundations in Pakistan aim to safeguard, help, and enable the most vulnerable and impoverished people. In this way, many other everlasting shelter programmes are running to shield the most vulnerable and desperately poor families, namely women-headed households, chronic patients, the elderly, and families with children. This method is consistent with the Pakistani government's current aim of offering low-cost homes to the lower-income division. These programmes are intended to offer long-term refuge for families living in abandoned conditions. Another welfare and shelter programme actively participates by giving its beneficiaries a lovely and well-built one-room home at their origin. The goal is not to transfer deserving families and provide them with a safe place to live in their previous neighbourhood. Pakistan's Prime Minister, Imran Khan, has indicated that his government will prioritise the needs of the poor and vulnerable. The government is currently focusing on a new scheme to assist Pakistan's impoverished, needy, and homeless citizens. Prime Minister Imran Khan has stated that the initiative will provide refuge for vulnerable individuals who have no choice but to sleep on highways and footpaths. The initial initiative would be begun and established on state land in Lahore, and he commented that it would be a temporary shelter with two meals supplied. In Lahore, effective initiatives have been taken by the Government for the homeless as Lahore has a population of 11.13 million people, and there are around 185,000 homeless individuals in the city alone..

In Pakistan, many NGOs are actively working against homelessness. The objective of the organisations is to enhance the standard of life and results for children in shelters and to guarantee that each kid, regardless of circumstance, has the opportunity to reach

his or her full potential. Before donating to clients, our workers analyse all of the core data about the family's income, job, and other issues they are experiencing. Once gathering all the information, they examine it all and seek more trustworthy individuals for such a gift. We search for families whose male members have passed away in tragic events and who have no other source of income. Each month, Shelter NGO gives them a comprehensive food package. For pupils who are unwilling to afford their tuition, the Shelter for Homeless People offers the "Shelter Higher Education Support Program." They are getting submissions from students throughout colleges and universities who cannot continue their education because of the excessive cost of their tuition and are missing courses.

Shelter health care, or shelter for homeless persons, provides financial assistance to desperate and destitute patients who cannot afford hospital costs. We have received submissions from patients' families who cannot continue their treatment sessions due to insufficient funds. The Shelter Organization has also launched a free ambulance service called "RIKSHAW AMBULANCE SERVICE." Many individuals die because ambulance vans are unable to reach backward or underdeveloped areas due to small streets in critical circumstances. The organisation recognised the necessity for a painless situation and began a rickshaw service for ambulance service, for which patients are not compensated.

Shelter for the Homeless was founded as an old-age home, but it needed to be shuttered because of a shortage of finances. It is reopening the "Shelter Care Center" for defenceless, resource-limited, and neglected elderly widows. Shelter Care Center for ORPHAN CHILDREN would accept widows and provide free living, food, health care, and services with respect and honour. Its goal is to offer orphan children who have been separated from their biological parents an atmosphere that is as near to a healthy familial setting as feasible.

Homelessness is a worldwide issue. According to the United Nations Human Settlements Program, approximately 1.6 billion individuals belong to substandard housing, and the most accurate existing figures indicate that more than 100 million people have no housing at all. Homelessness is increasing in numerous parts of the world, takes place in nearly every nation, and has significant adverse effects for both people and society.

The Institute of Global Homelessness (IGH) drives an international campaign to abolish street homelessness. It aims for everybody to have a home that provides protection, security, liberty, and prosperity. IGH, which was established in 2014, is the first foundation to focus on homelessness as a worldwide event, with a special focus on those living on the streets or in refugee camps. It is a collaboration between DePaul University (Chicago, USA) and DePaul International (London, UK) that offers primary help for homeless persons in the UK, Ireland, Ukraine, Slovakia, Croatia, the United States, and France.

Homelessness is a multifaceted issue that involves societal wellness, accessibility to housing, violence at home, mental illness, growing populations, bias based on race or gender, systems, and unemployment. The interaction among these aspects manifests itself in various manners based on the circumstance. Homelessness proportions get up and down in response to movements in and changes to any of the components.

Poverty is one of the major core causes of homelessness on an international basis. Income slowing down, unemployment and expensive housing and medical expenditures contribute to poverty. To be unwilling to meet the costs of necessities such as shelter, sustenance, schooling, and other necessities puts an individual or family in danger. To efficiently alleviate homelessness, governments and organisations must tackle poverty. It has proved indisputably demonstrated that poverty and homelessness are inextricably linked, with income loss being a primary cause connected with homelessness. The public's view and government decisions on the dynamics and roots of poverty are likely to swing

back and forth between two extremes. First, poverty is frequently viewed as a failure of people unwilling (or unable) to do what is necessary to live a decent life. According to this viewpoint, poverty is frequently a form of ethical weakness. One of the primary causes of homelessness is poverty. Poverty and homelessness are serious socioeconomic challenges in practically every corner of the entire globe. Poverty can be characterised as lacking appropriate resources to meet one's requirements (Moiz,2022).

Unemployment additionally serves as a key impact. The causes of unemployment are distinct, and certain countries have greater percentages than others. When a person remains unemployed for an extended period, they are more likely to become homeless. According to the study, the majority of homeless persons want to find employment but meet barriers such as a lack of a stable place to live. Unemployment occurs due to the absence of skilled labour or fierce competition in the job industry. Though unemployment does not always lead to homelessness, there is a significant link between the two. Most people who are unemployed are homeless as a result of an absence of income to meet their housing demands (Moiz,2023).

A rising and diverse homeless population experiences massive societal duties and institutional hurdles to health treatment, all of which lead to significant death and morbidity rates. Furthermore, the homeless population is growing increasingly multicultural, with a growing proportion of teenagers, women, families, seniors, refugees, and those who are classified as tribal, marginalised by race, or LGBT+. Homeless people experience interconnecting psychological, physiological, and social pressures that significantly contribute to deaths and morbidity compared to the normal population. In Toronto, the overall death rate of homeless men aged 18-64 years was 2-8 times greater than that of non-homeless men; still, it is 50% lower than in a few US cities, which could be caused by health care for all and fewer suicide cases in Canada, indicating the significant impact of social organisations on the well-being of homeless people. High levels of poverty, terrible living conditions, traumatic events, and institutional challenges to medical services are all major reasons for ill health in the homeless population (Liu, Hwang 2021).

The link between psychological well-being, addiction, and homelessness is transparent. Approximately thirty per cent of "chronically homeless" individuals throughout the United States suffer from psychological issues. According to the National Coalition for the Homeless, 38% of homeless people rely on alcohol. Additional elements are consumed by 26% of the population. A psychological illness or addiction makes a person more susceptible to homelessness as well as finding a long-term place to live (Wang,2019).

A considerable number of women are victims of violence, and data constantly show that domestic violence against women is far more common than violence toward men. Domestic violence against women additionally elevated dramatically throughout the COVID-19 epidemic. Violence and homelessness have a close relationship among women, causing the Covid-related rise in violence all particularly worrying. As a result, women's encounters with homelessness differ from men's and are frequently affected by gender-based violence (Bimpson, Green, Reeve 2021). Domestic violence also restricts academic institutions and can interrupt kid's learning events and the results (Lloyd, 2018). The 2015 US domestic violence shelter programme's yearly 24-hour survey stated that 31,500 adolescents and children escaped domestic violence and discovered asylum in a domestic violence emergency shelter or temporary housing programme (National Network to End Domestic Violence, 2016

Literature Review

Understanding the effects of homelessness on health should be combined with an understanding of how to eliminate homelessness, especially for those who are homeless

and have complicated healthcare requirements. (Aubry et al., 2019). A substantial amount of data shows that permanent affordable housing models with connected health and social assistance can give long-term remedies for homelessness. (Rog, 2004). Besides the health and economic repercussions of COVID-19 (Vandoros, 2020), the pandemic has had a major effect on homelessness measures. Homelessness has been declared a public health emergency, and governments have responded by allocating enormous sums of extra funding for homelessness initiatives. In the past, epidemiological problematisation of homelessness did not receive the same level of support that was observed during COVID-19; yet these programs, too, emphasised the risk of specific individuals or groups falling into homelessness (Farrugia & Gerrard, 2016; Somerville, 2013), rather than on the harms caused by homelessness to society as a whole.

The world has achieved significant progress in many spheres of life in recent years. The world's population is estimated to be over 7 billion people. Children account for roughly one-third of the world's population. Every night, around 925 million people go to sleep hungry, and approximately a billion are homeless. Poverty has been a serious social, physical, and psychological problem for generations. For many Americans, rising levels of homelessness and food insecurity/hunger are deeply interconnected, and these challenges especially impact children. The COVID pandemic's unexpected and serious financial consequences have led to a significant increase in poverty in the United States and around the world. It has been calculated that 150 million individuals, or around 2% of the world's population, are homeless. On the other hand, around 1.6 billion people, or more than 20% of the world's population, maybe without suitable housing. People of various ages, genders, and races are affected by homelessness. We frequently associate homelessness with poverty, a shortage of residence or government assistance, and financial challenges such as bringing a child on their own; however, homelessness can also be caused by physical, sexual, and mental trauma, including violence against women or trauma caused by disasters. (Tsai,2020)

Homelessness is a widespread issue associated with poverty that is increasing in economically developed countries and has serious health consequences. (Fazel et al.,Lancet, 384: 1529–1540, 2014). Whereas food safety has been studied about poverty and low income, this study focuses on the challenges of food safety before and after homelessness. The Canadian Observatory on Homelessness defines homelessness as "the condition of a person, family, or society lacking a secure, long-lasting, adequate housing, as well as a quick chance of securing it" (Gaetz et al., 2017, p. 1). Homeless people's limited consumption of food contributes to malnutrition, as evidenced by excessive levels of fat and cholesterol, low fruit and vegetable consumption, and lack of vitamins, even being residents of a wealthy nation. (Seale et al., 2016). whereas homelessness is caused by poverty, the difficulties and concerns associated with being homeless bring specific challenges beyond poverty. As research emphasises households that are food insecure and highlights the necessity for improved and scientifically proven solutions, studies on food shortages have not particularly considered those who suffer from homelessness. (Tarasuk et al., 2014)

Homelessness is a worldwide phenomenon with limited measurable data (Busch-Geertsema et al., 2016), but it has major and, in some cases, long-term health consequences. Homelessness, with its related gaps and physical and psychological dangers, is being identified as a social component of well-being and as a major contributor to poor health throughout psychological, physical, emotional, psychosocial, and sexual health domains (Nichols & Mays, 2021). The adverse effects of homelessness on an individual's well-being can put them at a higher risk of having chronic diseases that may predispose them to various cancers (Nanjo et al., 2020). (Tu et al., 2018). Testing, early identification, and proper treatment are critical elements of decreasing cancer mortality (World Health Organization, 2021) and can result in lower costs, disability, and death from other chronic illnesses. (Fragala et al.,2019).

The research was carried out in El Paso, Texas, which is situated on the United States-Mexico border and has a total population of 865,657 people (U.S. Census Bureau, 2019) and is home to several thousand people who relocated or are in stages of migrating from Mexico, Central and South America, as well as other parts of the United States and the world. (World Population Review, 2021). Participants came from seven different shelters. Twenty-six (35.13%) were at the welcome centre, 18 (24.32%) at the emergency shelters, ten (13.51%) at the overflow hotel, eight (10.81%) at an elder living centre, seven (9.45%) at an older women's living centre, and five (6.75%) at a veterans' centre. Their duration of stay ranged from less than a week for 10 (13.51%), 1-4 weeks for 11 (14.86%), 1-3 months for 15 (20.27%), 3-5 months for 7 (9.45%), 6-12 months for 19 (25.67%), more than 5 years for 2 (2.70%).

Individuals who are homeless (PEH) are especially susceptible to malnutrition due to a combination of health and social problems. Homelessness can refer to a variety of living situations, such as a shortage of habitation, living hard, residing in short-term shelters, or having unstable or unsuitable housing. Malnutrition is distributed unfairly across communities, and poverty increases the risk of malnutrition. Those with limited resources and significant food shortages are more likely to consume energy-dense foods heavy in fat and sugar, which are frequently less costly and more easily accessible in high-income countries than healthy meals. On the other hand, nutrient-dense foods, such as fruits and vegetables, low-fat milk, and wholemeal items, are less common in the nutrition of persons living in poverty (Samzelius,2020).

People (e.g., addictions, disabilities, mental disorders), social (e.g., family conflicts, relationship problems, domestic abuse), institutional (leaving institutions), and societal variables are the most prevalent roots of homelessness. (Poverty, unemployment, housing problems). Societal benefits, particularly welfare, are the primary source of income for the homeless [1]. In Poland, the Commune Model of Getting Out of Homelessness (GSWB) originated in 2014, highlighting homelessness prevention, intervention, and integration actions. The new research sought to analyse the nutritional status of homeless adults in Poland. Many of those involved in the study had BMI-based weights within normal ranges (51% and 52.9% in females and males, respectively), with a low prevalence of underweight (2% and 4% in females and males, respectively). Obesity (F: 19.6%, M: 13.8%) and concurrent overweight (F: 27.5%, M: 29.3%) were a common concern in the analysed population. Dietary education's involvement in homeless shelters is thoroughly addressed in the literature. Both the homeless and canteen workers ought to be educated. Inadequate financing and food donations are limiting good increases in the quality of food. Meals offered at homeless shelters are high in fat and sugar, with little in the way of vegetables. While being underweight among the homeless is unusual, the issue of quantitative malnutrition should not be overlooked. (Fowle,2022)

Since 2016, San Francisco has used standardised procedures to monitor deaths among homeless individuals. From the very beginning of the COVID-19 pandemic, there was worry about the possibility of high rates of COVID-19 transmission and mortality among homeless persons.² To lessen this danger, San Francisco accommodated a few thousand homeless persons at high risk of serious COVID-19 problems in shelter-in-place hotel rooms, reduced the number of people in shelters, and offered mitigation methods in both sheltered and unsheltered settings. Data from the San Francisco Office of the Chief Medical Examiner were analysed in this longitudinal investigation to determine the rate of deaths associated with people experiencing homelessness in San Francisco, California. (OCME). Deaths amongst homeless persons in San Francisco rose more than double to 331 during the first year of the COVID-19 pandemic, primarily due to an increase in overdose deaths. No deaths in our data set were caused by COVID-19, which may indicate the accomplishment of San Francisco's attempts to reduce the virus's transmission among vulnerable populations (Sullivan,2023).

Material and Methods

This study employed a qualitative research approach, utilizing a phenomenological research design to explore the lived experiences of children living in CPWB in Lahore. Phenomenology, which focuses on understanding individuals' lived experiences, was chosen because the aim of this study was to examine the experiences of children in CPWB and the challenges they faced. A purposive sampling technique was used for data collection. Due to the sensitive nature of the topic, in-depth interviews were conducted for data collection, and thematic analysis was employed to identify five key themes from the data. 10 children of CPWB (5 male and 5 female) participants were interviewed. Informed consent was used to obtain respondents' permission and voluntary interview participation. Questions in the interview were avoided that could be or may be against the dignity of the respondents. The identity of the respondents was assured to be kept confidential.

Results and Discussion

This study focuses on children's homelessness, and we discuss how CPWB manages them. Today, many people are homeless; some people are, by birth, homeless, but some will leave their houses and go somewhere else (Lee, 2021).

The number of homeless persons has increased since the Great Depression and the 2008 collapse. Fortunately, an indicator of homelessness has recently dropped. Yet, homelessness continues to have a significant impact on the economy through accommodation and shelter programmes, as well as medical difficulties. This is expensive and has a detrimental impact on the economy. (Katz, 2017)

Homelessness in the United States grew for the very first time in seven years. Homelessness is cost-effective to society because homeless persons usually demand the most very costly publicly-funded services and institutions. Homelessness is additionally expensive as a result of the detrimental effects it has on people's lives, health, and production. (Julia, 2018)

According to this study, we focus on the children who are homeless and living in the bureau. Bureau is the best place for children to live. We see some points in the bureau and discuss them in our study. Many people left their children in the bureau because of economic and personal issues. Some children leave their homes as they are abused by parents or any of the family members. Many people face many issues in their families and leave the house. The study supports the theory of social exclusion theory.

The social exclusion theory says that homelessness is related to social exclusion because its characteristics are related to homelessness, like lack of housing, financial debt and lack of social support. Our results show that people have limited resources or lack social support, so they leave their children in the bureau. Most children living in the bureau are abandoned by their families. They abandoned their family because they were poor, their parents could not afford them, and their parents did not work regularly. The children are forced to bed on the road and have no proper house. They are living as nomads from one place to another.

Most are not provided with medical treatments in hospitals when they get ill. Not provided by seasonal clothes and appropriate age toys. These are why the children left their houses and got places in CPWB. The majority of the children's parents are divorced, and their fathers are married to another woman, which forces them to leave their houses. Many of the children are maltreated by stepmothers and stepfathers. They face domestic violence and abusive behaviours in the house. They are also forced to marry at a young age. Moreover, the most important drug addiction of their father forces them to leave their

houses and get a place in CPWB. Many children run away from their houses. A significant shortage of cheap, secure and reliable housing ultimately leads to homelessness. Thousands of Canadian residents are at threat of homelessness because they are in "core need" (spend the majority of over fifty per cent of their income on housing), as do families and those that consume under thirty per cent of their money on housing (Gaetz, 2016). Moreover, there is an apparent link between domestic violence and homelessness. Domestic assault, which is projected to impact 336 persons per 100,000 (Statistics Canada, 2021), can lead people and their loved ones to quit their homes abruptly and without adequate assistance in place. This is especially problematic for children and women (Redman, 2016).

Prospects for growth and realise academic goals are frequently disrupted for the 4.2 million teenagers and young adults who encounter a degree of homelessness. "Missed Potential: Higher Education Amongst Juvenile and Teens Experiencing Homelessness in America" focuses on studies on the relationship connecting youth being homeless and academic interruption. It is discovered that young individuals who have experienced familial turmoil and trauma are more likely to have insecure housing circumstances and disrupted academic accomplishments. Children who drop out of school earlier in graduating are far more inclined to become homeless (Kull, 2019).

Our study shows that children of broken families come to CPWB. If we look at things as facilities, they facilitate every child, whether male or female. Children living there are happy. CPWB gave them every basic necessity of life. The vocational school is also inside, where females learn stitching and knitting and different household courses for a better life. CPWB is also bound to do a marriage of the children who are at that age. The study shows that every medical facility is also given to the children.

Shelter care of children entering foster care is widely used as a temporary first placement. The article's system variables across the Child's ecology specifically are Microsystems, mesosystems, and ecosystems. They are associated with increased emergency shelter utilisation for older people, women, and children. Emergency shelter care utilisation may be determined by a complex interaction of variables across the child ecology policy programmatic attention to some of these factors. (Johnson, 2018).

The majority of women enter shelter homes and bring children there. They often use and require specialised programs. Domestic violence has affected them, so they move to shelter homes. Barriers are also found in their lives. Although there is a paucity of research on their indenting children, it shows promises for breaking the cycle of violence. (La Cruz, 2020).

Conclusion

Most of the youngsters in the bureau had been dropped by their families. They leave their family due to their extremely vulnerable condition, and their parents are unable to support them as their parents do not work consistently. The children were unwillingly asked to sleep on the road and had no suitable shelter; they survived like nomads, moving and wandering from place to place. When they became unwell, most did not receive medical treatment in hospitals. Seasonal clothing and suitable age toys did not suffice. These are why the children left their homes and came to CPWB.

A good portion of the children's parents were separated, and their father remarried, forcing them to leave their homes. Plenty of them, the children were abused by their stepmother and stepfather. Domestic violence and abusive behaviours were common in their home. They were also pressured to marry at an early age. Furthermore, their father's most serious drug addiction forced them to leave their homes and get enrolled in CPWB.

Recommendations

- The shelter services should extend to rural areas as well so that homeless children could access services.
- Psychosocial services including therapeutic services should be given to children in order to cope traumatic experiences.
- Shelter home should provide technical trainings.
- Shelter home should also play role in assimilation of children in society.
- Government of Pakistan and warmly participating Non Governmental Organisations NGOs like WHO, UNO, USAID, UNESCO, UNICEF and many other to actively participate and fund more and more to organisations like Child Protection and welfare Bureau CPWB which are working day and night for the elimination of the severe social problems like homelessness from the society.
- Social media and news channels should also take active part in this campaign and to convey the message through electronic media to those who are unaware of the vulnerable conditions of the homeless children

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