Homelessness Prevention for Refugees: Results From an Analysis of Pathways to Shelter

Abe Oudshoorn, Sarah Benbow, Victoria Esses, Linda Baker, Bridget Annor, Isaac Coplan, Jordan Shantz and Vanisa Ezukuse

Western University, Ontario, Canada
Fanshawe College, Ontario, Canada
Western University, Ontario, Canada
Western University, Ontario, Canada
School of Nursing, Western University, Ontario, Canada
York University, Ontario, Canada
School of Nursing, Western University, Ontario, Canada
School of Nursing, Western University, Ontario, Canada

> **Abstract_** *Ending homelessness also includes effective prevention of homelessness. For families experiencing homelessness, one potential opportunity is diversion, based on the unique pathways into homelessness they experience. With growing concern regarding the increase of refugees in family shelters, this research sought to understand pathways of refugee families to shelter with a consideration of the potential for diversion, or other interventions. Using an interpretive description approach, 15 participants were interviewed from two family shelters as an opportunity to understand in detail complex journeys of migration and homelessness. Three themes are proposed from the interviews: 1) Starting with nothing; 2) Shelter as a refuge; and 3) Wading through the bureaucratic mire. It was notable for our participants that rather than diversion, best experiences came from early access into family shelters, particularly where there was expertise in working with refugee claimants. In noting the difference between our sample and those families experiencing homelessness who have citizenship, diversion does not appear to be as promising a practice for this sub-population. Rather, we*

recommend building knowledge of the refugee claimant process and resources within the homeless serving system and allowing family shelters to be a site of intervention.

> **Keywords_** *Homelessness prevention, shelters, refugees, refugee families*

Introduction

Effective systems of ending homelessness must also include the prevention of homelessness (Oudshoorn, Dej, Parsons and Gaetz, 2020). In this paper we explore what homelessness prevention might look like, focusing on refugee families in two cities in Canada. Family homelessness presents a unique opportunity for prevention, as families are more likely than single adults to call ahead to an emergency shelter versus arriving at the door (Forchuk *et al.*, 2018). As a result, shelter diversion is being enacted in family shelters to assist families to remain housed or to re-house them, rather than families having to enter the homeless-serving system. These interventions can include working with current landlords or family members to allow the family to remain in place, facilitating access to emergency funds for rehousing or assistance in accessing services to prevent violence against women (Forchuk *et al.*, 2018).

In 2016 and beyond, the demographics of family shelters in Europe, and globally, shifted rapidly in the face of the Syrian Civil War (Zisser, 2019). Some constituents in countries such as France, Greece, and Italy have noted that refugees were increasing pressure on homelessness and social service systems (European Observatory on Homelessness, 2016). This has become a focal point for contemporary debates regarding deservingness for services and the plight of newcomers (Aigner, 2019). While these discussions have captivated attention, fewer researchers have considered specific interventions at this time, including the consideration of shelter diversion for refugees. In some early research on the topic, shelter diversion appears to be working well for families (Forchuk *et al.*, 2018). Because refugees may be contributing to the increase in family shelter utilisation, a primary system focus might include diverting refugee families from emergency shelters. Conversely, if diversion is not indicated for refugee families, appropriate prevention or intervention activities must be defined.

Essential to effective shelter diversion or other forms of prevention is understanding pathways into homelessness (Main and Ledene, 2019). By knowing these pathways, the appropriate points of intervention may be determined (Gaetz and Dej, 2017). However, it is notable that refugees, particularly asylum seekers, do not necessarily

have the same pathways into homelessness as citizens (Murdie, 2008). Therefore, the purpose of this study is to understand pathways of refugee families into emergency family shelters. The ultimate goal is to determine if, and to understand how, shelter diversion might be provided to this unique population. By understanding experiences of pathways into shelter we are able to critically consider prevention alternatives to diversion if it is not proving effective.

Refugees Worldwide

Understanding refugees' experiences of homelessness requires understanding refugees more broadly. In general, the term 'refugee' refers to someone who has been displaced due to conflict or persecution, without the immediate prospect of return (UNHCR, 2020a). This can include both internally displaced persons, meaning those within the borders of their country of citizenship, or externally displaced, meaning those who have crossed international borders. The use of the term 'refugee' without the qualifier of 'internally displaced' customarily refers to those who have had to cross a border and is how the term will be used here. Another important term is 'asylum seekers', which is used to indicate those who are making a refugee claim in a new country when that claim has yet to be processed (UNHCR, 2020a). In this way, the term 'refugee' may be used to indicate all displaced persons, or particularly to indicate those who have been granted a formal refugee status, thus allowing them to temporarily or permanently remain in the new country. Where it is important to distinguish between formally recognised refugees and asylum seekers, the term 'asylum seeker' will be used to refer to those who do not have official refugee status; otherwise, the term refugee is used to refer to all persons who are internationally displaced without necessarily receiving formal immigration approval in advance.

While the statistics on refugees can shift rapidly, the United Nations maintains general statistics on the refugee situation globally. Currently, there are 29.4 million refugees worldwide with 57% of these coming from Syria, Afghanistan, and South Sudan (UNHCR, 2020b). Turkey and Germany are the countries hosting the most refugees in Europe at 4.0 and 1.5 million respectively (UNHCR 2020c), with 612 700 first time asylum applications across the European Union in the calendar year 2019 (Eurostat, 2020). Within Canada, there has been fluctuation in the number of asylum applications over the years; however, it is important to note that the number of asylum applications has tripled since 2015, with over 50 000 in 2017 (Statistics Canada, 2019).

Homelessness

Statistics on refugee homelessness are more complex, given disparities in both service responses and data collection processes from nation to nation. Some nations have well established and distinct refugee reception systems and processes and these people are frequently excluded from statistics on homelessness. Others have such systems but include these individuals in homelessness counts. Some countries have no such distinct services and refugees are a high proportion of those served within the homeless shelter system; others do not allow non-citizens to access these social services (European Observatory on Homelessness, 2016). Where asylum seekers are excluded from services, they may represent a large number of those who are rough sleeping, so whether a nation does effective street enumeration will determine if they are counted. If asylum seekers are granted refugee status, what this means in terms of housing supports again varies widely across countries. A study by the European Observatory on Homelessness (2016), released just at the heightening of the Syrian Civil War, concluded that refugees have not created increased pressure on homelessness services in most countries as they have either always been a part of these services or always excluded. This situation is now shifting as shelters that allow access to refugee families see a continual increase in this population (Sprandel, 2018).

There are several evidence-based trends globally in relation to preventing and ending homelessness. Individual services and entire systems have been shifting to a model of Housing First, where the focus is on permanent, stable, affordable housing, supported as necessary (Goering *et al.,* 2011). Housing First is a philosophy and a programmatic approach that prioritises rapid access to permanent housing without pre-conditions (Goering *et al.*, 2011). In this model, emergency shelters function as access points to housing, or successful diversion points from homelessness. Under a system wide commitment to Housing First, government resources could be diverted from shelter services to permanent housing and housing supports. Therefore, metrics used by all orders of government on the success of ending homelessness include reduced unique individuals accessing shelters and reduced lengths of stay in shelter (Gaetz, 2010). Research has demonstrated that people are more likely to remain housed in the long-term if the journey into housing is expedited and efforts are put into housing-related supports and services (Goering *et al.*, 2011). In contrast, poor health outcomes related to long-term emergency shelter stays (Frankish *et al.*, 2005) should be mitigated and overall rates of homelessness should be reduced under Housing First.

However, Housing First as it is being enacted in many contexts has some limitations. In particular, Housing First often involves intensive case management, a high level of in-home and one-on-one support that is resource intensive. In the face of resource limitations, jurisdictions are using prioritisation measures such as acuity

scales to determine who has access to these supports, such as the DESC Vulnerability Assessment Tool and VI-SPDAT (Fritsch *et al.*, 2017). These acuity measures shift Housing First from primary or secondary prevention to tertiary prevention as they screen for long-term emergency shelter users. By putting a priority on rehousing those who have already been in shelter for extended periods there is a gap for early intervention with those who score lower on the acuity scales (Oudshoorn, Dej, Parsons & Gaetz, 2020). Therefore, Housing First as a programme is only one tool within a broader homelessness prevention framework (Gaetz and Dej, 2017). Homelessness prevention includes a diversity of approaches including structural prevention, systems prevention, early intervention, eviction prevention, housing stability, and empowerment (Oudshoorn, Dej, Parsons & Gaetz, 2020). These differing modalities add opportunities for primary and secondary prevention on top of current Housing First models. For families experiencing homelessness, shelter diversion has received particular attention and is reviewed next, in the context of pathways of families into homelessness.

Pathways into homelessness are unique to each individual or family who experiences homelessness. However, there are commonalities found in the research, including: experiences of violence, relationship breakdown, job loss, mental illness, addiction, and poverty (Anderson and Christian, 2003). For families who become homeless, there are particularly high rates of experiences of violence and relationship breakdown (Buckner, 2014) as primary causes, with parental mental illness and addiction at times being background concerns (Curtis *et al.*, 2014; Wood *et al.*, 1990). Unique to families is that they are much more likely to be housed at the time of considering access to an emergency shelter and therefore are more likely to call ahead prior to entering shelter (Forchuk *et al.*, 2018). This provides a unique opportunity for diversion and early research on family diversion has proven it to be successful (Forchuk *et al.*, 2018). This involves such interventions as negotiating with a landlord, supporting families in reaching out to other opportunities for housing, or providing referrals to emergency rent or utilities support. Within a homelessness prevention approach, family shelters are uniquely positioned to optimise safe and effective diversion. However, research has not explored diversion as a prevention modality for refugees in particular.

Refugees' Pathways to Homelessness

Pathways into homelessness for refugees are, in a way, dependent on their particular status (Assefa *et al.*, 2017). Because those who have been granted legal refugee status versus those who are asylum seekers/refugee claimants have differential access to health and social services, they have different risks related to homelessness. From a statistical perspective, it is unfortunate that homeless-serving systems do not always record citizenship status in demographics, or do

not necessarily distinguish between those who have been granted formal refugee status, those awaiting a claim, and those whose claim has been denied. This makes it difficult to make clear conclusions regarding differential experiences. However, research in Canada has found that those granted refugee status are more likely to enter shelter due to family breakdown or conflict, whereas refugee claimants are more likely to enter shelter due to being directed there by formal services or informal networks (Assefa *et al.*, 2017). Whereas refugee claimants often have little to no financial resources and limited awareness of resources that could be accessed, approved refugees are more likely to have access to settlement workers who can communicate in their language personally or through interpretation, have access to government income supports, and are supported directly into rental housing (Murdie, 2008). Approved refugees should be less likely to utilise emergency shelter services but may still experience issues such as intimate partner violence that lead some individuals to access shelters (CAMH and CAS Toronto, 2014).

Ultimately, if we are to prevent homelessness for refugee families, we need much better information regarding pathways into homelessness for refugees. Interventions to prevent homelessness must be tailored to the ways through which people become homeless (Gaetz and Dej, 2017). Knowing that emergency shelters have high occupancy rates and do not provide the best long-term outcomes, it is imperative to understand how refugee families are experiencing entry into homelessness. To systematically reduce emergency shelter utilisation, with a focus on preventing refugee homelessness, the overall purpose of this paper is: To understand the complex and diverse pathways of refugee families into homelessness. Through this understanding we can begin to consider tailored possibilities for prevention.

Methods

This project is situated within a critical research perspective and a human rights approach. Within the critical perspective, value is placed on the voices and experiences of those on the margins (Weaver and Olsen, 2006), hence the focus particularly on refugee families in shelters. Within a human rights approach, housing is seen as a right for all people (Hoover, 2015). Methodologically, the study followed Thorne's interpretive description (Thorne, 2016) with a focus on finding practical meanings within the stories of refugees. Interpretive description assists researchers in generating recommendations for policy and practice directly from in-depth and often small sample studies (Thorne *et al.*, 1997). In-depth interviewing was utilised, with interviews structured in a narrative approach, inviting participants to talk about their journey from as far back in their personal history as they chose, leading into

the ultimate question of how they arrived in an emergency shelter. Narrative interviewing is a semi-structured approach that crosses cultural differences by centring storytelling (Jovchelovitch and Bauer, 2000).

The study included the purposive sampling of 15 participants from two family shelters in a mid-sized and a large city in Canada. Participants were purposefully recruited if they had refugee status, were claiming refugee status, or had been denied refugee status; participants were not required to disclose their exact status to participate, only confirm that they fit one of these categories. However, it became clear through the stories shared that the majority of our participants were currently refugee claimants. Interviews were conducted with a single family member of the family's choice, and compensation of $20 was provided per interview. Interviews were conducted by two research assistants utilizing the same interview guide and lasted between 30 and 60 minutes. An interpreter was provided as necessary, with two interviews being conducted through Arabic-English interpretation. This high proportion of fluency in oral English is likely due to recruitment materials being distributed in English and the majority of staff supporting recruitment having English as a first language. Eleven of the participants identified as male and four as female, with all participants being over the age of 16. While all participants were situated in family shelters, two of the women accessed the shelter related to experiences of violence and were not currently co-situated with their partners or children. Thirteen of the participants migrated from the African continent and two from Asia, and participants identified as African, Asian, or Arabic. Migration routes included both direct entry into Canada and journeys through one or more other countries, several having arrived through the United States. Research Ethics Board approval was obtained prior to commencing data collection.

Data analysis followed a multi-stage interpretive description analysis involving the six members of the research team. All digitally recorded interviews were transcribed verbatim. The 15 transcripts were reviewed and memoed by a research assistant and a second research assistant wrote a narrative summary for each participant. These memos and narrative summaries were reviewed by the team and preliminary key elements of meaning were identified. The transcripts were coded by these elements of meaning and the extracted quotes were then reviewed by the principal investigator to coalesce the elements of meaning into themes. The themes and associated quotes were reviewed by the full team and revised into the final thematic structure presented here.

Findings

Our findings have been structured into three themes to provide clarity to the meaning we derived from the conversations with our participants. Congruent with the interpretive descriptive approach (Thorne, 2016), the themes in and of themselves are less relevant than how they advance our thinking to guide practices. We have labelled these themes: 1) Starting with nothing; 2) Shelter as a refuge; and 3) Wading through the bureaucratic mire. Ultimately, the meaning that we propose from these findings is that for this particular population of refugee families, particularly asylum seekers, being encouraged to access family shelter might be a more appropriate approach than shelter diversion.

Starting with nothing

This theme reflects the diversity of starting points for migration and the diversity of experiences of migration shared by participants, yet the similarity of being without resources by the time they entered shelter. Motivating factors for migration ranged from risk of interpersonal violence, risk of state violence, discrimination based on sexuality, or failed settlement in another country. Similarly, pathways into the country were diverse, from use of existing visas (school, work, travel), to irregular border crossings, use of false documents, "identity loans", use of other black-market support, and accepted pre-migration claims. Locations of arrival were equally diverse with no common entry point; for example, someone making a claim while in the country on a student visa could be anywhere in the country, whereas border crossings tended to be concentrated in a few key locations. One family describes how they got caught up in the Egyptian revolution, ultimately fleeing to the United States and then crossing into Canada:

> "So what happened is that in one day [my] wife wanted to go downtown, to the city and she was using the metro there. Again, the financial and the political issues were not stable, so there was an increase in the metro ticket price. So people started to do kind of a protest and demonstration and she was there, wanting to use the service, the metro itself. So the police came and they detained her. So they detained her, they attacked her, they violently hit her. They were interrogating her in an office. They didn't put her in a jail, but they put her in an office and they violently attacked her…. The problem here in Egypt is that if you have any history with the government you will be always in danger, because they will do a background check-up and whenever any problem happens around the city they will come right away to your house, they will attack the house itself." – Participant 14

Regardless of the journey involved, what we noted was that participants were different than citizens experiencing homelessness in that they were more likely to have no resources whatsoever. This is in contrast to citizens who may be housed but facing eviction, may have access to income assistance, may have access to health services, may have children already in school or subsidised childcare, and may have a broader social network. By the time they reached shelter, participants had fully exhausted any and all financial resources they had started with, even trading goods such as clothing to cover their basic needs during migration. For example, multiple participants noted that when they were paying for visas or paying for long-distance travel between and within countries, they were spending all financial resources, and using all possessions to sell or trade to cover costs for basic necessities. As a result, they showed up to family shelters upon arrival in Canada with nothing, no money and no possessions, including no identification.

Many participants also expressed that upon arrival at the family shelter in Canada, they had no knowledge of the housing system, shelter system, health care system, or immigration system. In addition, they sometimes had little to no English language ability to help them along the way. Participants expressed relying on others' knowledge of where to go and how to navigate these new systems:

> "I have no idea how to apply for the refugee [status]… I'm really out of money… I told them that I didn't have any status because I don't have any Canadian ID here, that I have my Sudanese passport only." – Participant 12

Participants being absolutely homeless versus at risk of homelessness begins to limit the prevention and diversion opportunities.

Shelter as a refuge

In the context of traumatic experiences in one's home country, difficult migration journeys, and exhausting all resources, the analogy for the shelters was clear and consistent: shelters were a refuge.

> "But when I arrived here at first I didn't open up to them, I was scared. But when I came I saw the signs they had up, they're welcoming to everyone, so I felt at peace…. Because they're giving me care, it's like a family here." – Participant 2

For families, the contrast between the shelters and their migration journeys and traumatic experiences was profound. Arriving at a place that invited them in, that provided interpretation so they could be supported in their own language, and that offered to meet their basic needs was an incredible moment of relief.

> "Because they're [shelter staff] giving me care, it's like a family here, and because I don't know anyone here. And [shelter], like what I want to say – it's like a home for me. Because if I compare it to the other shelters, because I get some informa-

tion from my friends, and they're and like, I'm lucky to be here. Yeah, they helped to do my refugee claim, they helped me – they helped me from the start, from scratch – I didn't know anything." – Participant 2

"Before I came here I had no money, and they gave me money. I didn't have ID at that time and last week I got my ID, so this month I can get more money." – Participant 8

What we noticed is that the participants' arrival in family shelters provided them with access to a full range of services from refugee claim assistance, to healthcare, to income, to food, and beyond. Therefore, the families who had the best potential for positive long-term outcomes were the families who went into the shelters the earliest. It is worth noting that this is particularly in the context of family shelters alone, as some participants had conversely negative experiences in general emergency shelters. Participants, who were initially drifting out on their own, trying to make it, were the ones who had more crises along the way before they gained access to appropriate supports. Participants also expressed trying to survive on their own outside of the shelter system as a way to remain invisible to child welfare services and avoid potential child apprehension. For example, one family expressed that their strategy to remain invisible was for the father to go into a men's shelter while the mother and baby might walk through the evening, and then go to a library, and sleep in a library during the day. The subsequent health and social consequences of trying to live in unsheltered homelessness prior to accessing shelter were significant.

"You know people are trying to survive, but you know – some have to steal to survive, some have to go into prostitution to survive." – Participant 3

Participants did best when a family shelter was approached as a first resort rather than a last resort, as they had immediate access to food, clothing, safety, interpretation services, and an entry into the Canadian social and health systems.

These positive experiences with the family shelters were contrasted by some participants with experiences they had in first accessing general shelters. Family shelters are more likely to have self-contained units, lower exposure to interpersonal conflict, more resources geared towards children, and may have staff expertise related to migration. General emergency shelters did not necessarily have staff expertise in the refugee system and were unable to provide particular guidance. Additionally, these shelters were less likely to have translation services available. Families residing in general shelters felt they were more likely to be exposed to substance use or violence:

"Because also inside the building there were like, people were using drugs." – Participant 11

"Because at [the first shelter the participant went to] they take only maybe [people] who do drugs only because at first day I was bullied and they realised it – so they saw it on the cameras, and [staff] told me no, it isn't good to be here. Because they take drugs and… [residents] wanted to give me injections – they thought I used drugs." – Participant 2

Most concerning was that when participants were asked about any experiences of racism, two identified feeling discriminated against by staff of emergency shelters prior to coming to the family shelters. Participant 9, when asked about experiences of racism in Canada, identified a shelter staff member in a large shelter they occupied prior to the family shelter:

[Interviewer] "Yeah, and have you had any – I know it sounds like you had a pretty rough time before you left, but since you've gotten to Canada have you experienced any things like violence or anything like"

[Participant 9] "Yeah, just only one staff."

[Interviewer] "Oh okay."

[Participant 9] "Yeah, following me around, you know. Calling me refugee, telling me I'm a refugee. And I complain to [the shelter manager], [the shelter manager] still supports her that she's doing her job and everything. So I just said to her that 'I know that like maybe I'm not a White person and I'm not a Canadian so that's why she's telling me all this stuffs and you are supporting her.' So I kept complaining from the very first day that I went to the shelter, she's following me, following me, following me, you know, because she knows everything that is on my file, right? And she keeps telling everybody in the [name of shelter], you know, about my file that I'm a refugee, that I came with a fake visa, that I do that, that I do that, you know, even though I complained."

So where the family shelters were identified as a refuge from life on the street, for some participants they were also a refuge from other spaces within the homeless serving system.

Wading through the bureaucratic mire

While shelters offered a variety of supports, this did not necessarily change the broader structural challenge that participants faced in terms of the bureaucratic maze required to be navigated in order to gain citizenship and access health and social services. For the refugees in this study, gaining full access to supports was a multi-step, multi-month process. One must first apply for the first piece of ID, then for the second piece of ID, then make a refugee claim. To be successful with the claim, one must acquire the services of a lawyer, which includes getting on the waitlist for a pro-bono refugee lawyer. Getting children in school, getting access to

social assistance income, applying for affordable housing, and obtaining a card to access public health services were each separate applications to be completed in English and often requiring ID and a service fee.

> "Because I'm new to Canada I don't know anyone. How do I get a reference [for a housing application]?" – Participant 2

> "I had to cross the border illegally. So I was detained at the border. So from there I made [my claim], they took me to immigration where I had to sign some documents. From there I was taken to a shelter, then I went to the immigration board, got my paper, my identification paper. Then I applied for my work permit, I got my work permit…but I had an issue with the language, it wasn't easy for me. And then I was like okay fine I can deal with it at first. I stayed there for a while, but I didn't get a good job." – Participant 6

This bureaucratic mire is best approached with the guidance of dedicated workers in the family shelters:

> "I don't understand where to go, you know. On arriving in Canada they are talking like, 'Go to south, go to this, go to that,' but I didn't even know what that is…. So from that I came here [to the shelter], you know, they started to show me like how everything goes and everything. So then when I arrived they said to me like 'Oh, so you are a refugee? Sure, this is the way that you will do your thing and everything.'" – Participant 9

In the family shelters, the workers support all families in accessing permanent and affordable housing options. For the refugee families, the workers are aware of the steps involved in seeking official refugee status and that the process can take many months, even years if there are multiples appeals involved in obtaining legal refugee status. This leads to a different approach for shelter workers supporting refugee families that focuses on a step-wise process of gaining stability versus rapid exit into unsupported housing. The best hope of exiting homelessness into housing for these families was through the resources and system-navigation services available at the shelter.

Discussion

What was notable in the stories of participants was that there is a path to housing stability for these refugee families, but it is not a simple path and it is not a path that any of the participants were able to journey alone. It is also notable that the majority of our participants were refugee claimants, so conclusions may differ between those with official refugee status and those in the process of a claim. The meaning we propose from these findings is that, at a time where the sector

is seeking to use less shelter and have more diversion and prevention, the best outcomes for refugee claimant families may come from accessing emergency shelter. This was made possible particularly when shelter staff were provided the resources and knowledge to work with newcomers. In light of these needed supports, we note that through the process of conducting the study, we found that one of the two communities of study only had a single worker within the family shelter system who had specific expertise related to supporting refugees. This worker took on the role of a system navigator who knew all the pieces to successfully navigate the systems. This presents a problem as it means that the complex process of navigating refugee claimants through various systems is not necessarily common knowledge across the homeless serving sector. Therefore, a clear recommendation is that all communities increase training within the emergency shelter system related to the unique needs of refugee claimants, in a way paralleling the settlement services available to status refugees. In our study, it was noted by participants that some shelter workers are not familiar with immigration systems and could not provide particular guidance regarding steps for newcomers. More concerning, participants noted experiences of racism and discrimination directly from some shelter staff. Enhancing the ability of shelters to support refugee families can be improved by practical resources such as access to interpretation services and shelter resources in multiple languages. Organisations may also consider having flexible funds available to cover fees related to obtaining identification and other application fees. This starts to increase the number of access points that are the 'right door' for refugee families.

In the Canadian context as well as many other national contexts, the recommendation of facilitating rapid access into family shelters for refugee families creates a jurisdictional and funding challenge. Apart from the aforementioned issue that in some countries non-citizens have no access to social services, in countries such as Canada, refugees are considered under the shared jurisdiction of provincial and federal governments but federal governments set the bulk of policy directions on immigration. In this way, municipally delivered and provincially funded family shelters supporting refugees who are accepted in through federal policies becomes a frustration for these jurisdictions who feel they are shouldering funding needs created by the federal government. It would be a reasonable expectation that federal governments that allow entry of refugees would also provide funding to support their downstream shelter needs. This also opens a broader debate of what overall supports should be provided to refugees to prevent homelessness in the first place, which is beyond the focus of this paper.

It is important to note that these recommendations in no way negate the current focus on homelessness prevention and shelter diversion for families experiencing homelessness. What we are proposing is that while these approaches are promising

practices for families who have citizenship, for refugee families, the best outcomes may be achieved through rapidly guiding them into family shelters (apart from jurisdictions where refugees are not allowed access to such services). This is due to these families for the most part having no other resources to draw on while simultaneously facing multiple challenges such as language limitations, ID limitations, lack of knowledge of local systems, and barriers to accessing social services as non-citizens. As organizations that support multiple basic needs of individuals, emergency family shelters may be the best starting points for refugee claimant families. These findings are offered tentatively, given the small sample and the cross-sectional nature of the data collection. What we offer is that 'shelter diversion' may not be a one-size-fits-all approach to family homelessness as unique populations may have unique needs.

This study is limited in that the incredible diversity of national and regional approaches to refugees is not incorporated. For example, recommendations to support more shelter staff in becoming competent to support refugees is rendered moot in jurisdictions where individuals must prove citizenship to access a shelter. The Canadian context also includes access to social assistance income and pathways to affordable housing for those who are still in the claimant phase, increasing the services a shelter might support, which may not be relevant to many other jurisdictions. A second limitation is that the study did not follow participants longitudinally. While participants told a common narrative of improved well-being upon entry to shelter, it's unknown whether these improvements last over time. It is conceivable that there might be other negative effects of accessing shelter, such as further traumatisation or engagement of child welfare services leading to child apprehension. This could be mitigated by research that follows refugee families over a much longer trajectory, and per the preceding concern, could cover multiple jurisdictions. To ultimately address the question of diversion in the context of refugee families, future research could include particular diversion interventions. This might include direct access to permanent housing with supports, such as system navigation, geared to newcomers. Conceivably, this approach could balance the need for supports through the claimant process while also stabilising housing. Ultimately, the universal right to housing (Hoover, 2015) requires complex approaches that address the unique needs of particular populations.

> **References**

Aigner, A. (2019) Housing Entry Pathways of Refugees in Vienna, a City of Social Housing, *Housing Studies* 34(5) pp.779-803.

Anderson, I. and Christian, J. (2003) Causes of Homelessness in the UK: A Dynamic Analysis, *Journal of Community and Applied Social Psychology* 13(2) pp.105-118.

Assefa, E., Petrov, M., Radan, B. and Sonnenberg, O. (2017) *City of Toronto Shelter, Support and Housing Administration Division, Munk School of Global Affairs Capstone Project: Newcomer Youth Homelessness.* Retrieved from http://www.yws.on.ca/wp-content/uploads/2017/06/Munk_Capstone_Final-Report_Newcomer-Youth-Homelessness-2017.pdf.

Buckner, J. C. (2014) The Why and the Who of Family Homelessness, in: M.E. Haskett, S. Perlman and B.A. Cowan (Eds.) *Supporting Families Experiencing Homelessness: Current Practices and Future Directions*, pp.3–21. (New York: Springer).

CAMH and CAS Toronto (2014) *Hidden in Our Midst: Homeless Newcomer Youth in Toronto – Uncovering the Supports to Prevent and Reduce Homelessness.* Retrieved from https://www.camh.ca/en/research/news_and_publications/reports_and_books/Documents/Hidden%20in%20Our%20Midst%20Final%20Report_Nov%202014.pdf.

Curtis, M.A., Corman, H., Noonan, A. and Reichman, N.E. (2014) Maternal Depression as a Risk Factor for Family Homelessness, *American Journal of Public Health* 104(9) pp.1664-1670.

European Observatory on Homelessness (2016) *Asylum Seekers, Refugees and Homelessness: EOH Comparative Studies on Homelessness* (Brussels: Belgium).

Eurostat (2020) Asylum Statistics. Retrieved April 1, 2020 from https://ec.europa.eu/eurostat/statistics-explained/index.php/Asylum_statistics.

Forchuk, C., Richardson, J. and Russell, G. (2018) *Family Matters in London, Ontario: Understanding and Addressing Family Homelessness.* Unpublished manuscript.

Frankish, C. J., Hwang, S. W. and Quantz, D. (2005) Homelessness and Health in Canada: Research Lessons and Priorities, *Canadian Journal of Public Health/Revue Canadienne de Sante'e Publique* S23-S29.

Fritsch, A., Hiler, H., Mueller, B., Wu, M. and Wustmann, J. (2017) *The Vulnerability of Assessments, A Qualitative Analysis of Housing Professionals' Experiences with the VI-SPDAT in Minnesota and a Comparative Review of Alternative Housing Triage Assessments.* Available at: http://hdl.handle.net/11299/190794.

Gaetz, S. (2010) The Struggle to End Homelessness in Canada: How We Created the Crisis, and How We Can End It, *The Open Health Services and Policy Journal* 3(21) pp.21-26.

Gaetz, S. and Dej, E. (2017) *A New Direction: A Framework for Homelessness Prevention* (Toronto: Canadian Observatory on Homelessness Press).

Goering, P.N., Streiner, D. L., Adair, C., Aubry, T., Barker, J., Distasio, J. and Zabkiewicz, D. M. (2011) The At Home/Chez Soi Trial Protocol: A Pragmatic, Multi-Site, Randomised Controlled Trial of a Housing First Intervention for Homeless Individuals with Mental Illness in Five Canadian Cities, *BMJ open* 1(2) e000323.

Hoover, J. (2015) The Human Right to Housing and Community Empowerment: Home Occupation, Eviction Defence and Community Land Trusts, *Third World Quarterly* 36(6) pp.1092-1109.

Jovchelovitch, S. and Bauer, M.W. (2000) Narrative Interviewing, in: M.W. Bauer and G. Gaskell (Eds.) *Qualitative Researching with Text, Image and Sound: A Practical Handbook*, pp. 57-74. (London, UK: SAGE)

Main, K. and Ledene, K. (2019) Investing in Youth by Investing in Their Families and Natural Supports: Shelter Diversion Using a Family and Natural Supports Approach, *Parity* 32(8) p.49.

Murdie, R.A. (2008) Pathways to Housing: The Experiences of Sponsored Refugees and Refugee Claimants in Accessing Permanent Housing in Toronto, *Journal of International Migration and Integration/Revue de l'integration et de la migration internationale* 9(1) pp.81-101.

Oudshoorn, A., Dej, E., Parsons, C., & Gaetz, S. (2020). Evolving an evidence-based model for homelessness prevention. *Health and Social Care in the Community* 28(5) pp.1754-1763.

Sprandel, A. (2018) Housing and Integrating Refugees in Hamburg, *Field Actions Science Reports. The Journal of Field Actions (Special Issue 18)* pp.20-25.

Statistics Canada. (2019) Asylum Claimants. Retrieved April 2, 2020 from https://www150.statcan.gc.ca/n1/pub/89-28-0001/2018001/article/00013-eng.htm

Thorne, S. (2016) *Interpretive Description: Qualitative Research for Applied Practice* (New York: Routledge).

Thorne, S., Kirkham, S.R. and MacDonald-Emes, J. (1997) Interpretive Description: A Noncategorical Qualitative Alternative for Developing Nursing Knowledge, *Research in Nursing & Health* 20(2) pp.169-177.

UNHCR (2020a) Who We Help. Retrieved April 1, 2020 from https://www.unhcr.ca/what-we-do/who-we-help/.

UNHCR (2020b) Figures at a Glance. Retrieved April 1, 2020 from https://www.unhcr.org/figures-at-a-glance.html.

UNHCR (2020c) UNHCR Statistics: The World in Numbers. Retrieved 1 April, 2020 from http://popstats.unhcr.org/en/overview.

Weaver, K. and Olsen, J. (2006) Understanding Paradigms Used in Nursing Research, *Journal of Advanced Nursing* 53(4) pp.459-469.

Wood, D., Valdez, R. B., Hayashi, T. and Shen, A. (1990) Homeless and Housed Families in Los Angeles: A Study Comparing Demographic, Economic, and Family Function Characteristics, *American Journal of Public Health* 80(9) pp.1049-1052.

Zisser, E. (2019) The Syrian Refugees—Left to their Fate, *British Journal of Middle Eastern Studies* 46(2) pp.293-309.