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THE INTERSECTION OF SPIRITUALITY/RELIGION IN THE LIVES OF THE HOMELESS

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A review of the literature was conducted to determine the extent to which spirituality and religion have been studied and determined to be relevant factors in the lives of homeless populations. The review focused on articles retrieved from various academic databases (e.g., Social Services Abstracts, Social Sciences Citation Index, Scopus) as well as the Internet. The references have been subdivided into several categories: those that are general in nature, those that are focused on specific target groups (veterans, youth/children), and those that are caregiver-focused.

General

Acquaviva, K. D. (2000). A qualitative study of the sexuality of women in a homeless shelter. *Dissertation Abstracts International*, 61(3), 1186A.

Abstract: The purposes of this research--to discover the ways in which women living in a homeless shelter understand and experience their sexuality, and to produce a theory explaining the ways in which women living in a homeless shelter's cultural meanings and beliefs regarding sex and sexuality might inform their sexual behavior--were achieved through six months of ethnographic research spent in residence at a homeless shelter, and the subsequent analysis of the data. The cultural meanings ascribed to sex and sexuality by women living in a homeless shelter may affect their risk of acquiring Human Immunodeficiency Virus (HIV) and other Sexually Transmitted Infections (STI's) because they: (1) believe trust (and **faith** in God) protects them from sexually transmitted infections, (2) are afraid of seeking information about HIV/AIDS out of a fear they will be stigmatized as having the disease, (3) are reluctant to ask a man to use a condom, (4) believe they can tell if a man has HIV by his skin (clear vs. broken out), (5) use sex to get cash, though they do not frame this as "prostitution," (6) seem to have a high rate of nonconsensual sex, (7) often engage in unsafe sexual behavior while under the influence of drugs/alcohol, and (8) believe that HIV/AIDS was transmissible through sharing a cigarette, drinking from the same glass, etc, so they believe protecting themselves during sex is futile. The Acquaviva Theory of Psycho-Sexual Fatalism posits that a connection may exist between negative sexual and emotional experiences and the development of fatalism and the ultimate abdication of personal responsibility for the future, thus placing women living in a homeless shelter at additional risk of HIV/STI's and unplanned pregnancy.

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Anderson, R., & Hutchinson, E. B. (1992). Save a soul or save a body: Dilemmas in serving the urban homeless. *New England Journal of Human Services*, 11(2), 23-28.

Abstract: An economic analysis & data from private shelters for the homeless in Chattanooga, Tenn, are used to consider the US policy of relying on private shelters to care for the homeless. Data were gathered from observation & fieldwork at missions, as well as interviews with 13 homeless people, conducted in 1987. The absence of common focus or link between different shelters' objectives is highlighted. Also noted is the conflict posed by a **religion**-free government & its reliance on organizations preaching a **religion** to provide for the homeless.

Anhorn, M. R. (2006). Spirituality and planning in a diverse world. *Planning Theory & Practice*, 7(1), 68-80. Available online at: <http://www.informaworld.com/smpp/content?content=10.1080/14649350500497471>

Abstract: N/A.

Bahr, H. M. & Houts, K. C. (1971). Can you trust a homeless man? A comparison of official records and interview responses by bowery men. *The Public Opinion Quarterly*, 35(3), 374-382.

Abstract: An analysis of response validity & reliability among skidrow men is presented. The study is conceived as a contribution to the general problem of validity of data obtained by survey, although it focuses on a specific impoverished pop. In the spring of 1966 interviews were conducted with 203 Bowery men & 199 clients at Camp LaGuardia. For details of sampling & interviewing procedures see SA 2147/D9845. Responses elicited by interview were compared with R's' records from the files of city agencies. Discrepancy rates were calculated by various types of responses. The highest discrepancy rates (almost 70%) were for questions where the R had to remember a specific data. Lowest discrepancy rates were for 'lifetime identity' items such as **religious** preference (6-12%) or whether the R had ever been married (7 or 8%). Comparisons with rates reported in other studies do not indicate that skid-row men are more likely than other pop's to give discrepant information. Discrepancy rates ranging from 20 to 40% or more are common. Effects of recency, item-complexity, soc desirability, & interview rapport are noted. It is concluded that homeless men who consent to be interviewed are no more likely to be consciously untruthful in replying to interviewers' questions than are members of most other disadvantaged pop's. However, because they tend to be an aged & somewhat disoriented pop, with unusually high rates of both physical & mental illness, their capacity to provide accurate responses seems esp sensitive to variations in the complexity of the information sought & the recency of the situation being recalled. As other R's, skid-row R's are influenced by soc desirability considerations.

Belcher, J. R. (2003). Helping the homeless: What about the spirit of God? *Pastoral Psychology*, 51(3), 179-188.

Abstract: This paper argues that the Holy Spirit is missing from services for the homeless. **Spirituality** is reviewed as a concept, and it is argued that the transforming Spirit that Paul

described is not often present in discussions. Instead, the Social Gospel and Modernism have replaced the role of the Holy Spirit, and people who are homeless are being provided with very limited options to transform their lives and escape the desperation they so often feel.

Brush, B. L., & McGee, E. M. (1999). The Expanded Care for Healthy Outcomes (ECHO) Project: Addressing the **spiritual** care needs of homeless men in recovery. *Clinical Excellence for Nurse Practitioners*, 3(2), 116-22.

Abstract: As the nation's homeless population continues to rise, new practice models will need to address the specific health care needs of the homeless while providing cost-effective wellness-oriented quality care. This article describes the early development of one such model. The Expanded Care for Healthy Outcomes (ECHO) Project is an interdisciplinary curriculum/practice model that explores the vital intersection of spiritual and primary care in promoting health among homeless guests at the Pine Street Inn Nurses Clinics in Boston, Massachusetts. The authors describe the incorporation of **spiritual** assessment and care in clinical practice with homeless men to maximize patients' physical, psychosocial, and **spiritual** wellness.

Brush, B. L., & McGee, E. M. (2000). Evaluating the **spiritual** perspectives of homeless men in recovery. *Applied Nursing Research*, 13(4), 181-186.

Abstract: The purpose of this study was to describe the self-reported spiritual perspectives of 100 homeless male residents living in a communal shelter. The residents, in recovery from substance addiction, were asked to complete Reed's 10-item Spiritual Perspective Scale (SPS) as part of their initial health database. Their responses were described within the context of their participation in 12-Step recovery programs, demographic characteristics, and perceived health status. Findings suggest that **spirituality** is an important health component for this population.

Burger, S. (1996, September-October). Arise, take up thy mat, and walk. *Policy Review*, 22-27.

Abstract: How the International Union of Gospel Ministries seeks to change the motivation of homeless people by reinforcing ethical and **religious** goals and rebuilding social relationships.

Corrigan, P., McCorkle, B., Schell, B., & Kidder, K. (2003). **Religion** and **spirituality** in the lives of people with serious mental illness. *Community Mental Health Journal*, 39(6), 487-499.

Abstract: Although there is a fair sized literature documenting the relationship of **religiousness** and **spirituality** with health and well-being, far fewer studies have examined this phenomenon for people with serious mental illness. In this research, religiousness is defined as participation in an institutionalized doctrine while spirituality is framed as an individual pursuit of meaning outside the world of immediate experience. In this study, 1,824 people with serious mental illness completed self-report measures of **religiousness** and **spirituality**. They also completed measures of three health outcome domains: self-perceived well-being, psychiatric symptoms, and

life goal achievement. Results showed that both **religiousness** and **spirituality** were significantly associated with proxies of well being and symptoms, but not of goal achievement. Implications of these findings for enhancing the lives of people with psychiatric disability are discussed.

Curtis-Boles, H., & Jenkins-Monroe, V. (2000). Substance abuse in African American women. *The Journal of Black Psychology*, 26(4), 450-469.

Abstract: Limited attention to ethnicity in research on substance abuse & women has resulted in assumptions that may not fit the experience of women of color. This study employed a combined quantitative & qualitative design to investigate substance abuse in African American women ages 21 to 48. Life experiences of women with histories of chemical dependence were compared with women who were maintaining a nonabusing lifestyle. Variables examined were history of parental substance abuse & child abuse, exposure to racism & traumatic events, & social support & **spirituality**. The substance abusing & nonabusing women were distinguished from each other in the areas of **spirituality** & family connectedness. Although all participants reported high violence exposure & personal losses, significantly more substance abusing women reported being battered, experiencing homelessness, & more traumatic events. Participants described multiple experiences with racism, though their descriptions of their responses to these experiences suggested different styles of coping. Findings have significant implications for prevention of substance abuse, particularly in the areas of **religious** involvement, family support, & the development of active problem-solving strategies.

DeLashmutt, M. B. (2000). Spiritual needs of mothers raising children while homeless. *Dissertation Abstracts International*, 61, 03B.

Abstract: Families are the fastest growing subpopulation of America's homeless. The breadth and extreme poverty of these families, usually headed by single, young mothers with dependent children is a new phenomenon. Most social programs of the "shelter industry" fail to address the spiritual needs of this population. Meeting the needs of mothers who are homeless may empower them to overcome their homelessness despite the curtailment of welfare entitlement programs. Little is known about the **spiritual** needs of mothers who are homeless; therefore, the purpose of this qualitative study was to identify **spiritual** needs of mothers raising children while homeless. Viktor Frankl's theory about finding a purpose for living amidst suffering framed this study. Mothers who are homeless are assailed by many adverse factors that they are powerless to change. They suffer and this suffering becomes meaningful as the mothers adapt to the reality confronting them in order to make life better for their children-the beings who bring meaning to their lives. Study participants were volunteers from four sites: a large city shelter, a **faith**-based facility located in a small town (serving a large metropolitan area); a progressive, large town shelter and transitional housing unit; and a small shelter in a small rural city. The variation of shelter capacity, location, services provided, and residential mix were chosen to create a heterogeneous sample and to generate varied responses to the research questions. Four research questions were asked of all participants: "Try to describe your spiritual needs"; "In what way has being homeless affected your **spiritual** needs?"; "What should be done to meet your **spiritual**

needs?"; "In your expert opinion, what should the public know about the **spiritual** needs of mothers raising children while homeless?". A consistent pattern emerging from the data analysis prompted the researcher to ask two additional questions: "Which **spiritual** needs predominated at which shelter?" and "How this need dominance varied from shelter to shelter?". Data were generated by observational field notes, focus groups, and essays written by the participants. **Spiritual** behaviors/needs (connectedness, **faith**, forgiveness, hope, prayer/meditation, esteem, and trust) identified in the theoretical framework and the literature review were identified in the data generated at each site. Text units coded for the **spiritual** behaviors were identified and analyzed by data collection site. Mothers did find meaning in their suffering to overcome homelessness; they struggled for their children. The clients' needs for connectedness, trust, and esteem dominated the data findings at each research site.

Erickson, M. (Ed.). (2005). *Translations From Theory to Practice*, 13(2).

Abstract: The feature article of this issue of *Translations*: "Educational Reform and Its Connection to Art Instruction: Art and Writing" (James Blasingame) presents the history and purposes of art education. This purpose falls within the broadly stated "Art for Life's Sake." The editors chose articles that "promote research on how people grapple with life circumstances through the arts and arts education" (Blandy & Kellman, 2004, p. 1). The authors considered this grappling in relation to inclusion, incarceration, social work, exceptionality, folk art, homelessness, and **spirituality**.

Fallot, R. D. (1997). **Spirituality** in trauma recovery. In M. Harris & C. L. Landis (Eds.), *Sexual abuse in the lives of women diagnosed with serious mental illness* (pp. 337-356). Amsterdam: Harwood Academic Publishers.

Abstract: This chapter will describe some of the positive roles **spirituality** may play in the lives of people with trauma histories and severe mental disorders. This is not meant to imply that **spirituality** always functions in a way which facilitates recovery and growth but that for many people **spirituality** and religion can and do offer unique resources central to the healing process. For people with many overlapping and thoroughly interconnected problems, recovery in one sphere may well foster the possibility of recovery in another. Abstinence from drugs, for example, may set the stage for greater involvement in and more effective use of other therapeutic relationships. Or conversely, addressing a trauma survivor's need for self-soothing and exploring ways to comfort oneself may enhance the likelihood of abstinence. While I will focus mostly on the place of **spirituality** in recovery from trauma, it is important to recall that, because of the tightly interwoven nature of this set of problems, **spirituality's** contributions to recovery in any one domain are likely to be reflected in another. In work describing the potentially positive roles religion may play in relation to mental health, little attention has been given to the specific concerns of people with mental disorders and trauma/abuse histories. The following discussion and its major themes are drawn from individual interviews, focus groups, and clinical discussions at Community Corrections. Virtually all of the participants have reported histories of sexual and/or physical abuse in childhood, adulthood, or both. Most have also experienced substance abuse or dependence problems and significant periods of homelessness. All have been diagnosed with a major mental disorder. This complex set of highly correlated and recurring experiences forms the backdrop against which their **spiritual** lives have taken shape.

Fitzpatrick, K., & LaGory, M. (2000). *Unhealthy places: The ecology of risk in the urban landscape*. New York: Routledge.

Abstract: "Unhealthy Places" focuses on issues of health in today's cities. By arguing that "place matters" in relation to the population's health, Kevin Fitzpatrick and Mark LaGory make a convincing argument about the general unhealthiness of urban environments and, thus, of the urban dweller. The authors offer a place-oriented approach to health and cover such topics as the ecology of everyday urban life, the sociology of health, needs and risks of the socially disadvantaged, needs and risks of children and the elderly in cities, and strategies for better health services in urban environments.

Gabbard, W. J. (2005). **Spirituality** and **religiosity** of homeless individuals: Implications for psychosocial rehabilitation and mental health intervention. *Dissertation Abstracts International*, 65(12), 4721A.

Abstract: A number of research studies with diverse client populations have established positive linkages between various dimensions of **religiosity** and/or **spirituality** and psychiatric and physical functioning. Despite these findings, these variables have been virtually ignored in research on homeless individuals, known to suffer from high rates of psychiatric and physical disorders. The primary purpose of this exploratory study was to help fill this knowledge gap by measuring the multidimensional **spiritual** and/or **religious** beliefs and attitudes of a sample of homeless individuals in Birmingham, Alabama. Utilizing quota sampling, a cross sectional survey of 100 homeless men and women was achieved, using a 54-item quantitative questionnaire consisting of demographic, social support, psychological distress, and **religious/spiritual** items. Study findings revealed **spirituality** and **religiosity** were highly prevalent and salient factors in the lives of study participants, regardless of their race, mental health status, gender, or living conditions. **Faith** in God or the **transpersonal** also appeared to buffer the negative ramifications of life on the streets by affording homeless respondents a vital source of hope and strength. These findings inform assessments and treatment plans by revealing pertinent **spiritual** and **religious** beliefs impacting homeless clients' psychological functioning, schemas, support systems, and subjective well-being. Future studies should assess more comprehensively the substantive impact of these **religious** and **spiritual** factors on the physical and mental health of clients in this highly vulnerable population.

Graham, J. B., Brush, B. L., & Andrew, R. M. (2003). **Spiritual**-care process and content: Lessons learned from the ECHO Project. *Journal of the American Academy of Nurse Practitioners*, 15(10), 473-478.

Abstract: The purpose was to describe the process and content of **spiritual** caregiving delivered by a minister to 18 homeless male addicts in recovery and to determine whether and how advanced practice nurses can integrate similar counseling into practice. Notes from the minister's clinical sessions with individuals in the study sample were analyzed to identify the procedures used in **spiritual** counseling and the overall content of the interactions. Results were then reviewed in light of the literature on the nurse's role in **spiritual** caregiving to determine realistic implications for practice. Advanced practice nurses are currently mandated to integrate **spiritual**

care into clinical practice as part of their holistic-practice model. Although theoretically sound, in practice, the time-dependent and specialized nature of **spiritual** caregiving may be more appropriately and effectively delivered by ministers as part of the primary care team when time, personal, and other constraints exist.

Greene, J. A., Ball, K., Belcher, J. R., & McAlpine, C. (2003). Substance abuse, homelessness, developmental decision-making and **spirituality**: A women's health issue. *Journal of Social Work Practice in the Addictions*, 3(1), 39-56.

Abstract: A qualitative methodology was used to examine the relationship between homeless women's **spirituality**, substance abuse, moral reasoning, & developmental decision making. Findings indicated that a lack of development in **spirituality** & the ability to make decisions in childhood is related to homeless, addicted women's inability to maintain abstinence & achieve social independence. **Spirituality** impacted decisions to abstain from substance abuse & increased the women's social independence. Findings suggest that treatment needs to incorporate **spirituality**, family of origin, & the development of skills for independent decision-making. The authors propose that childhood maltreatment, homelessness, & substance abuse impede **spiritual** development. Therefore, substance abuse treatment needs to include a focus on **spirituality** & moral reasoning in the recovery process.

Hatch, S. L. (2002). Pathways to drug use among inner city women. *Dissertation Abstracts International*, 63(6), 2378A.

Abstract: Drawing data from a larger-scale study of selected Atlanta communities, this analysis seeks to identify the conditions associated with the channeling of women into drug use. The central question to be addressed is as follows: What are the social and experiential circumstances that potentially contribute to drug use among women? The origins of drug use are found at multiple levels of social, situational, and personal life. It is a goal of this analysis to explicate how and why certain conditions of women's lives contribute to drug use. The factors that contribute to drug use also potentially contribute to other illicit behaviors and social problems. The goals of this study will be pursued through secondary analyses of a highly detailed data set. The data used in this analysis are drawn from a larger study that focused on the generational transmission of behaviors between mothers and daughters. The study involved the recruitment of a sample of women from the streets of Atlanta between August 1997 and August 2000. The analytic sample utilized in the present research consists of 122 women, ages 18-47. The analysis was guided by three distinct pathways: economic resources and life stressors, institutional integration, and proximal and contextual experiences. The major findings suggest general life strains increase the likelihood of having ever used drugs; as protective mechanisms, the three institutional integration indicators reduce the odds of having ever used drugs, specifically participation in organized **religion**; and the more proximal and contextual indicators are better predictors of current drug use in comparison to having ever used drugs. The contributions made through this research will ultimately provide information that may be useful in the development of effective prevention and intervention programs for "hidden" populations. This dissertation distinctly demonstrates a need for greater differentiation in conceptualizing outcomes and building research on the assumption that the social and economic conditions of individuals' lives are of the utmost importance in gaining a clearer understanding of social problems.

Hayden, J. J. et al. (1993, August). **Religious** and affective variables of dually diagnosed homeless. Paper presented at the Annual Convention of the American Psychological Association, Toronto, Ontario, Canada.

Abstract: This study investigates the interaction of religious and quasi-religious variables through measures of psychopathology and alcohol and drug abuse in a sample of homeless subjects. Participants included 25 males and 14 females with potential dual diagnoses who lacked, or were in danger of being without, appropriate housing. Researchers administered a battery of instruments to assess subjects' demographics, substance abuse history, **religious** thinking, psychopathology, attitudes toward life and death, and behavioral and personality issues. Findings demonstrated the utility of **religious** and **quasi-religious** instruments as indicators of psychopathology in the mentally ill and homeless. Subjects were highly prone to alcoholism and expressed little enthusiasm for living. The study exercise caution in evaluating the homeless individual's expressions of **religiosity** or lack thereof. It appears that traditional rehabilitative efforts based upon the **spiritual** approach of Alcoholics Anonymous are likely to experience a lower success rate among the mentally-ill homeless due to the latter's alienation from **religious** beliefs. Further research questions are suggested. Also included are four tables which offer correlations and mean scores of findings.

Heslin, K. C., Andersen, R. M., & Gelberg, L. (2003). Use of **faith**-based social service providers in a representative sample of urban homeless women. *Journal of Urban Health-Bulletin of the New York Academy of Medicine*, 80(3), 371-382.

Abstract: There are few quantitative studies on the characteristics of homeless persons who use **faith**-based social service providers. To help address the lack of information in this area, we analyzed survey data on 974 participants in the University of California at Los Angeles (UCLA) Homeless Women's Health Study, a representative sample of homeless women at shelters and meal programs in Los Angeles County. The primary objective of this analysis was to estimate the association of **religious** affiliation, race/ethnicity, income, and other client characteristics with the use of faith-based programs. In interviews at 78 homeless shelters and meal programs, study respondents provided information about their **religious** affiliation and other social and demographic characteristics. The names of the organizations were examined, and those with names that referenced specific religions or contained words connoting **religiosity** were designated as "**faith** based." At the time they were selected for study participation, 52 % of respondents were using the services of **faith**-based providers. In multivariate logistic regression analysis, lower odds of using these providers were estimated for participants with no **religious** affiliation (compared with Christian respondents) and for African Americans and Latinas (compared with whites). There is evidence of systematic differences between the clients of **faith**-based and secular social service providers. The benefits of increased funding through a federal **faith**-based policy initiative may accrue primarily to subgroups of clients already using **faith**-based programs.

Johnson, S. P. (2006). Child welfare and domestic abuse: The intersection of safety and accountability. *Dissertation Abstracts International*, 67(5), 1947.

Abstract: For victims of domestic abuse who are also mothers, social system interaction can have unintended and counter-productive consequences. Antiquated policies and practices based on patriarchal norms may hold her hostage within the relationship and further endanger those involved. According to the literature, society assumes that victims: (1) Can escape if they choose, (2) Are attracted to dangerous men, (3) Choose their batterer over their children, (4) Do not choose to protect or love their children, (5) Are not successful in protecting their children, (6) Are better off if they leave the relationship, (7) Systems and resources are readily available to assist victims in leaving, and (8) Children should be removed from their mothers in these cases. These assumptions are presumed to affect the policies and practices of the Child Protection Services as well as other systems with which survivors of abuse come into contact. The overall purpose of the study was to explore the meaning domestic abuse survivors assigned to their interaction with societal and other systems. The study also examined environments in which those interactions occurred, the consequences of those interactions; what was helpful and not helpful to survivors, and how those factors shaped their decisions. The research questions were: (1) How does the intersection of victim safety goals and perpetrator accountability expectations influence the consequences for women subject to domestic violence? and (2) How do ecosystem factors in the environments of women subject to such violence affect the outcomes for those women? Limited documentation of their lived experience exists within the literature. Ten black and ten white women were interviewed in-depth, using the frameworks of Phenomenology, Neo-feminism and Human Ecology. Women in the study experienced a wide range of abuse, as did their children. In this study, although some participants received the help they needed, most did not. Systems as a whole denied, ignored, or minimized the abuse, failed to protect the victims, held them responsible for the violence and the exposure of the children to it, and often gave visitation and custody rights to abusive fathers. Many women in the study were sanctioned with extensive parenting plans, had charges filed against them, and received little help post-separation. Many participants, unable to stop the abuse, were held responsible for it. Fear, lack of resources, family and **religious** pressures, a 'Mr. Perfect' seduction into the relationship, and isolation were found to be key factors in their inability to leave. Most women in the study were homeless upon leaving the relationship. Study participants offer specific suggestions in regard to what workers can do to effectively engage with abused women who are also mothers. The author proposes changes within and across systems that may begin to address the complexity and devastation of domestic abuse. It is hoped the study will inform policy, educate workers, identify alternative practices that help rather than hurt, and gives voice to the women as to their lived experience.

Kennard, K. A. (2002). Renewal of the spirit: Exploring the **religious** and **spiritual** coping strategies of the homeless. *Dissertation Abstracts International*, 62(12), 4332A.

Abstract: In recent years, there has been a renewed interest of the social work profession in **spirituality** and **religion**. **Religion** and **spirituality** in their different forms can alleviate stress and be significant sources of emotional support for individuals during a crisis, or with common

aspects of everyday living. The trauma of homelessness is well documented in the literature as a stressful experience. How individuals react to the stress of homelessness is contingent upon their personal characteristics, and the resources that are available to them. In particular, minimal information is known about the qualities and characteristics of homeless individuals that use **religion** or **spirituality** to cope, and the value of this approach is largely unknown. This qualitative study investigates the **religious** and **spiritual** coping strategies of single homeless adults in public emergency shelters. The study seeks to identify a uniform practice model in social work that integrates **religion** and **spirituality**; strives to inform service-providers and policy-makers about the **religious** and **spiritual** coping strategies, strengths, adaptability, and resilience of single homeless adults; and explores the organizational approach in the delivery of **spiritually**-sensitive social work practice. A mixed methodological approach was used to enhance the research design. Multiple sources of data were collected throughout the course of this study: information, based on open-ended semi-structured interviews with 26 clients and 5 staff, and informal conversations. The findings from this study of **spirituality** point to the tremendous significance that **religious** and **spiritual** coping supports played in the lives of the women in assisting them to survive the aftermath of homelessness in this demanding and harsh locale. Results also replicate previous conclusions with the aged and terminally ill that **religious** and **spiritual** buffers contribute to more positive outcomes. Nonetheless, the salient themes that were identified merit further investigation. Implications of the findings are included for social work education, clinical practice, program planning and development, policy, and future research. Research has found that the **religious** and **spiritual** needs of the homeless have not yet been met.

Klitzing, S. W. (2003). Coping with chronic stress: Leisure and women who are homeless. *Leisure Sciences*, 25(2-3), 163-181.

Abstract: The present study explored if women who are homeless face chronic stress and how the women cope with living in a shelter, which could be chronic stress or part of ongoing chronic stress. The study demonstrated that women who are homeless experienced chronic stress. When the women discussed how they coped with stress, various strategies were identified with a primary strategy of being with others. The women also noted that they engaged in diversionary leisure activities to help them relax. Although diversionary activities helped the women relax, they were not identified when the women discussed coping. It could be that diversionary activities have become so much a part of the women's lifestyles that these activities unconsciously assist with coping. Thus, diversionary leisure activities are critical to coping with chronic stress, but not recognized as coping strategies. The present study suggests that researchers working in the area of stress and coping must be cognizant of the differences between event stress, traumatic stress, and chronic stress, and the various conscious and unconscious ways that people cope with chronic stress.

LaGory, M., Fitzpatrick, K., & Ritchey, F. (2001). Life chances and choices: Assessing quality of life among the homeless. *Sociological Quarterly*, 42(4), 633-651.

Abstract: A Weberian lifestyles approach is employed to examine differences in quality of life among the homeless. Using a systematic random sample of 161 homeless people in a mid-sized, Southern metropolitan area. the study focuses on the impact of life chances and social choices on

aspects of quality of life in this severely challenged population. Regression results show that a number of life chance and social choice variables affect general and domain-specific well-being. While chances and choices both contribute to these aspects of quality of life, there is only modest evidence of a mediating effect. With the exception of depressive symptoms, life chances appear to play a more important role in quality of life differences than life choices. The specific life chance and choice factors influencing aspects of quality of life vary with each separate well-being outcome. The implications of these findings for general sociology and homeless social policy are explored.

Littrell, J. & Beck, E. (1999). Perceiving oppression: Relationships with resilience, self-esteem, depressive symptoms, and reliance on God in African-American homeless men. *Journal of Sociology and Social Welfare*, 26(4), 137-158.

Abstract: Reports on two studies (N = 91 subjects [Ss] each) that sought to determine the impact that recognition of oppression has on a disadvantaged individual's self-esteem; level of depressive symptoms; resilience, which includes a sense of mastery & optimism; anger; & reliance on God. Ss were African American men seeking services at a soup-kitchen ministry in GA. Perceptions of racial discrimination were marginally associated with attenuated levels of depressive symptoms. There was no evidence that perception of oppression influenced anger or self-esteem. However, belief in a just world was associated with some aspects of resilience & stronger reliance on God. Attributions to individual causes of homelessness were marginally associated with greater optimism. Practitioners endeavoring to empower the disadvantaged should be careful not to impair their clients' belief in a just world or undermine their sense of personal control over events.

Lobo, S. & Vaughan, M. M. (2003). Substance dependency among homeless American Indians. *Journal of Psychoactive Drugs*, 35(1), 63-70.

Abstract: Extensive qualitative research in the San Francisco Bay Area in California and in Tucson, Arizona, indicates strong associations between substance abuse and homelessness among American Indians. This article takes a comparative approach to describe and analyze precipitating factors and survival patterns of those who are both homeless and who suffer from substance dependency. Possible precipitating factors presented through case studies consider the complex interaction of childhood fostering or adoption into non-Native families, different types of involuntary institutionalization during youth, and the personal impact of accident, trauma and loss. Coping strategies and keys to survival are examined, including the role of the extended family and close friendships, American Indian and mainstream organizations that offer formal and informal services, the existence of anchor or key households, the helping relationships and sobriety groups among homeless individuals, **spirituality**, and cultural resiliency.

MacKnee, C. M., & Mervyn, J. (2002). Critical incidents that facilitate homeless people's transition off the streets. *Journal of Social Distress and the Homeless*, 11(4), 293-306.

Abstract: Employing Flanagan's critical incident methodology (J. C. Flanagan, 1954), self-reports from 17 participants who successfully exited from the street lifestyle to mainstream society revealed 314 incidents that helped or hindered their transition. The incidents were sorted

into 19 facilitating categories and 4 hindering categories. Results were discussed in light of the following themes: (1) establishing supportive relationships, (2) discovering some measure of self-esteem, (3) accepting personal responsibility, (4) accomplishing mainstream lifestyle goals, and (5) changing perceptions. The implications of the “categorical map” depicting this transition are discussed in relation to research and to those who assist in this passage.

Martinez Celorrio, X. (1992, September-December). Marginalidad cautiva y pobreza despreciable: carreras de deculturación de jóvenes sin hogar [Captive marginality and despicable poverty: Careers of deculturation among homeless youth]. *Revista Internacional de Sociología*, 3, 113-139.

Abstract: Reports on ethnographic research of homeless youth, involving interviews with 28 agency persons assisting homeless youth in Barcelona, Spain, surveys of 51 homeless youth, & life histories of 4 youth found in Las Ramblas, La Placa Reial, a **religious** shelter, & a public shelter. Analysis of the social trajectories of these youth reveals that most had previous labor force experience, & their families of origin still played a role in their lives. It was conditions in family & social life together with personal, emotional circumstances that led to the modification of their lifestyle. The reasons for homelessness were varied, & did not match previous hypotheses that homelessness among Barcelona youth is caused by heroin addiction or a contracultural lifestyle, or that these youth come primarily from marginal families in "Chinese ghettos" in Barcelona. It appears that the irreversibility of their marginal status depends on their inability to provide alternatives within their restricted social space.

Meadows-Oliver, M. (2006). Homeless adolescent mothers: A metasynthesis of their life experiences. *Journal of Pediatric Nursing*, 21(5), 340-349.

Abstract: The purpose of this article was to synthesize the findings of six qualitative studies on homeless adolescent mothers. Metasynthesis was conducted using the meta-ethnographic approach of Noblit and Hare [Noblit, G., & Hare, R. (1988). *Meta-ethnography: Synthesizing qualitative studies*. Newbury Park, CA: Sage Publications]. Six reciprocal translations illuminating the experiences of homeless adolescent mothers emerged: being homeless, enduring abuse, lamenting lost years, searching for support, recreating self, and seeking a better life. The findings may be used by nurses working with this population as the basis for a framework of intervention strategies directed toward helping these mothers cope with their dual transitions into motherhood and adulthood while simultaneously being homeless.

Mihelich, J. & Gatzke, J. (2007, Spring). **Spiritual** quest and and popular culture: Reflexive **spirituality** in the text of *Northern Exposure*. *Journal of Religion and Popular Culture*, 15. Available online at: <http://www.usask.ca/relst/jrpc/art15-spiritualquest.html>

Abstract: Through an analysis of the text of *Northern Exposure*, this paper discusses its **spiritual** narrative and argues that it resonates with broader emerging patterns of **spiritual** questing in the United States. Drawing from key characters and spiritual themes from several episodes, we delineate four alternative modes of “reflexive **spirituality**” and various ways individuals and **spiritual** communities reconcile **spiritual** meaning with the challenges of modernity.” The

analysis both reveals the role of popular culture in portraying and encoding religious meaning and patterns of **religiosity** and enhances the broader understanding of reflexive **spirituality**.

Mongelluzzo, N. D. (2006). *Street stories of Mexico: a comparative case study of elderly women beggars*. Doctoral Dissertation. Saybrook Graduate School and Research Center.

Abstract: Beggars have occupied a place in history since recorded time. At times beggars have been described as homeless, vagrants, street people, God's innocents, or jobless. At other times they are described as con artists and thieves. Begging is first recorded as having appeared in Mexico following the Spanish conquest led by Hernan Cortes on August 13th, 1521. This study concerns one type of Mexican beggar known as the "verdaderos pobres" or "true beggars". A true beggar is elderly, disabled, or unable to work. This is an exploratory comparative case study. There are no known case studies on the "verdaderos pobres". Multiple levels of analysis including detailed description, categorical aggregation, direct interpretation, pattern analysis, naturalistic generalization, diagnostic assessment, collaborative contacts, analysis of life events, and an extensive literature review were used to understand the phenomenon of begging. These multiple levels of analysis illuminate the biological, psychological, social, **religious**, cultural, and political components that come to define the lived experience of begging. In addition, the discussion section of this study explores rites of passage, the "kindling effect" as applied to PTSD, and the culture-bound syndrome of "susto". The primary research questions are: How do the elderly women beggars of San Miguel experience the phenomenon of begging? What is the primary reason for begging? Is there **spiritual** meaning derived from the experience of begging? Is begging a consequence of traumatization? Do the participants suffer from PTSD or from the culture-bound syndrome known as "susto"? The primary reason for begging is a combination of monetary need coupled with the need to escape victimization and seek social affiliation. All participants discussed their **spiritual** beliefs and linked begging and their abuse and trauma histories to God. Begging appeared to be related to traumatization either in terms of deaths of children or combinations of physical abuse, family neglect, and alcoholism in their household. All participants suffered from both PTSD and "susto". The results of this study form a platform for future research in terms of understanding the many layers of influence that come to bear on the phenomenon of begging.

Montgomery, C. (1994). *Swimming upstream: The strengths of women who survive homelessness*. *Advances in Nursing Science*, 17(2), vi-vii.

Abstract: A study of the strengths and personal resources of women who had overcome homelessness revealed that the experience of homelessness for these women was a temporary state of disruption resulting from an effort to free themselves from conditions associated with despair, such as abuse or addictions, and to search for a better life. Personal, interpersonal, and **transpersonal** categories of strengths were identified that enabled these women to move in a positive direction toward health and self-actualization. The synthesizing metaphor 'swimming upstream' describes the stoic determination required to go against the overwhelming negative forces of their environment.

Murray, R. B. (1993). **Spiritual** care of homeless men--what helps? What hinders? *Journal of Christian Nursing*, 10(2), 30-34, 46.

Abstract: The objective of the study was to determine the characteristics and **spiritual** coping strategies of homeless men. The setting was a day shelter in St. Louis, MO, operated by the

Catholic Archdiocese. The population group included 150 homeless men who were either in situational crisis, chronically mentally ill, or alcohol/drug dependent. Private, personal interviews were conducted to gather information about the experience of being homeless, and any perceived coping strategies. Data analysis consisted of descriptive statistics. The study found that to be isolated and alone, without consistent social support, and relying completely on oneself, are key components of the homeless experience. Homeless men reported fewer illnesses than expected, and most were not taking any medication or receiving any treatment. Prayer, hope, and **religious** beliefs were perceived to be effective coping strategies for situational crisis and alcohol/drug dependent clients. Reading the Bible or other devotional material, attending church, and talking to **religious** workers were not perceived to be effective for any of the homeless men. Nurses must engage in activities to promote advocacy and provide **spiritual** support for homeless men. This study should be replicated to allow generalizability of results, with adaptive methods observed in addition to conducting the interviews.

Murray, R. B. (1996). Stressors and coping strategies of homeless men. *Journal of Psychosocial Nursing & Mental Health Services*, 34(8), 16-22.

Abstract: Major stressors commonly encountered by homeless men are violence to self, theft of belongings, inability to meet basic needs, inconsistent enforcement of rules by shelter staff, and other people's dehumanization or humiliation caused by behavior toward the men. Cognitive, sociocultural, and **spiritual** coping strategies were frequently used and found to be effective in coping with stressors by homeless men who were either in crisis or alcohol/drug dependent. Severely and persistently mentally ill men had lower mean scores for both use and effectiveness of coping strategies in physical, cognitive, psychological, sociocultural, and **spiritual** strategies. The longer the duration of homelessness, the lower the mean scores for frequency and effectiveness of use of coping strategies in any of the dimensions.

Nyamathi, A., & Vasquez, R. (1989). Impact of poverty, homelessness, and drugs on Hispanic women at risk for HIV infection. *Hispanic Journal of Behavioral Sciences*, 11(4), 299-314.

Abstract: In view of the higher incidence of AIDS (acquired immune deficiency syndrome) among Hispanic women than in the female population at large, a study was initiated to determine what kinds of AIDS-related concerns are felt by Hispanic women, how they cope with these concerns, how their self-esteem is affected, & what kinds of emotional distress they experience. Interviews were conducted at 2 drug rehabilitation centers & 2 homeless shelters with 43 Hispanic clients, including some who were intravenous drug users or sexual partners of users, infected with sexually transmitted diseases, prostitutes, or homeless. The threat to their ability to care for their children was their primary concern, followed by fear of drug addiction, lack of social support, loss of health, ignorance about AIDS, & poverty. Loss of control, poor self-esteem, & feelings of helplessness were commonly experienced. Emotion-focused methods of coping, eg, drugs, self-delusion, & **religion**, were utilized far more frequently than were health care, family planning, & pediatric services. Implications for providing AIDS education to such

women are discussed, & a culturally relevant approach involving individual training via Hispanic health care professionals & well-trained lay personnel is recommended.

O'Brien, M. E. (2003). *Spirituality in Nursing: Standing on holy ground* (2nd ed.). Toronto, ON: Jones & Bartlett.

Abstract: This invaluable resource explores the relationship between **spirituality** and the practice of nursing from a variety of perspectives, including the nursing assessment of a patient's **spiritual** needs.

Owen, S., & Khalil, E. (2007). Addressing diversity in mental health care: A review of guidance documents. *International Journal of Nursing Studies*, 44(3), 467-478.

Abstract: Discriminated against and marginalised groups of people within our communities continue to be over represented within mental health services and frequently their particular needs are not met. Challenging discrimination and working towards more equitable services are a vital part of anyone's role working within mental health services. This paper provides a review of guidance documents on diversity issues with a particular focus on ethnicity, gender, sexuality, learning disability, **spirituality**, homelessness and age. The review concludes with a summary of the range of approaches that are currently being advocated for translating guidelines and recommendations into improved and equitable mental health services that meet the needs of service users from a wide range of diverse groups.

Ravenell, J. E., Johnson, W. E., & Whitaker, E. E. (2006). African-American men's perceptions of health: A focus group study. *Journal of the National Medical Association*, 98(4), 544-550.

Abstract: African-American men are disproportionately affected by preventable medical conditions, yet they underutilize primary care health services. Because healthcare utilization is strongly dependent on health beliefs, the purpose of this qualitative study was to identify and explore African-American men's perceptions of health and health influences. We conducted eight focus group interviews with select subgroups of African-American men, including adolescents, trauma survivors, HIV-positive men, homeless men, men who have sex with men, substance abusers, church-affiliated men and a mixed sample (N=71). Definitions of health, beliefs about health maintenance and influences on health were elicited. Participants' definitions of health went beyond the traditional "absence of disease" definition and included physical, mental, emotional, economic and **spiritual** well-being. Being healthy also included fulfilling social roles, such as having a job and providing for one's family. Health maintenance strategies included **spirituality** and self-empowerment. Stress was cited as a dominant negative influence on health, attributed to lack of income, racism, "unhealthy" neighborhoods and conflict in relationships. Positive influences included a supportive social network and feeling valued by loved ones. This study provides insight into African-American men's general health perceptions and may have implications for future efforts to improve healthcare utilization in this population.

Rio, R. (2005). Adults in recovery: A year with members of the Choirhouse. *Nordic Journal of Music Therapy*, 14(2), 107-119.

Abstract: This article presents a qualitative investigation of the therapeutic process of a group of people receiving music therapy who were homeless and living in a shelter or had recently transitioned out of a homeless shelter into a private home. The purpose of this qualitative research is a systematic review and analysis of the progress of music therapy clients through the emerging thematic material presented in sessions. All participants resided in a church-based shelter in a large metropolitan area in the southwestern United States, and were involved in the church gospel choir. Members of this gospel choir agreed to participate in a music therapy treatment and research project and explored issues of homelessness, substance abuse, interpersonal relationships, music, creativity, and **spirituality**. Participants worked to become aware of factors that contributed to homelessness, and to develop greater insight into personal issues that would aid in recovery from addiction and life on the street. Themes that emerged were emotional expression, beauty/**spirituality**, relationship, story, structure, create/risk, and health. Music therapy was the context for all these emergent themes, and appeared to be a meaningful therapeutic experience for the participants. Although the shelter was able to address housing, aesthetic, and **spiritual** needs, it is apparent that an inclusive medical and mental health treatment approach with music therapy as a primary treatment modality would be the most effective method for meeting the needs of the homeless.

Runquist, J. J. & Reed, P. G. (2007). Self-transcendence and well-being in homeless adults. *Journal Of Holistic Nursing*, 25(1), 5-13.

Abstract: This study examines the relationships of **spiritually** and physically related variables to well-being among homeless adults. A convenience sample of 61 sheltered homeless persons completed the Spiritual Perspective Scale, the Self-Transcendence Scale, the Index of Well-Being, and items measuring fatigue and health status. The data were subjected to correlational and multiple regression analysis. Positive, significant correlations were found among **spiritual** perspective, self-transcendence, health status, and well-being. Fatigue was inversely correlated with health status and well-being. Self-transcendence and health status together explained 59% of the variance in well-being. The findings support Reed's theory of self-transcendence, in which there is the basic assumption that human beings have the potential to integrate difficult life situations. This study contributes to the growing body of evidence that conceptualizes homeless persons as having **spiritual**, emotional, and physical capacities that can be used by health care professionals to promote well-being in this vulnerable population.

Sager, R. & Stephens, L. S. (2005). Serving up sermons: Clients' reactions to religious elements at congregation-run feeding establishments. *Nonprofit and Voluntary Sector Quarterly*, 34(3), 297-315.

Abstract: The authors use participant observation and interviews with homeless individuals to investigate two questions: How are **religious** elements that occur in congregation-based food programs integrated into service delivery? How are those elements, especially sermons, perceived by those who eat there? The authors find that regardless of their **religious** beliefs, two thirds of the homeless respondents reacted negatively to the sermons they heard at congregation-based food programs, characterizing them as coercive, hypocritical, condescending, and conflicting with their own beliefs. Observations at these programs shed light on the source of

these negative reactions: The sermons tend to ignore the local knowledge and experience of clients, and they assume that the homeless individuals are responsible for their own troubles.

Shuler, P. A., Gelberg, L., & Brown, M. (1994). The effects of **spiritual/religious** practices on psychological well-being among inner city homeless women. *Nurse Practitioner Forum*, 5(2), 106-113.

Abstract: As part of a larger, retrospective investigation of homeless women's wholistic family planning needs, we examined **spiritual/religious** practices in relationship to mental health status and substance use. Ninety-two percent of our sample reported one or more **spiritual/religious** practices, such as praying, attending worship services, or reading **religious** materials. Forty-eight percent of the women reported the use of prayer as significantly related to less use of alcohol and/or street drugs, fewer perceived worries, and fewer depressive symptoms.

Song, J., Ratner, E. R., Bartels, D. M., Alderton, L., Hudson, B., & Ahluwalia, J. S. (2007). Experiences with and attitudes toward death and dying among homeless persons. *Journal of General Internal Medicine*, 22(4), 427-434.

Abstract: Homeless persons face many barriers to health care, have few resources, and experience high death rates. They live lives of disenfranchisement and neglect. Few studies have explored their experiences and attitudes toward death and dying. Unfortunately, studies done in other populations may not apply to homeless persons. Exploring these experiences and attitudes may provide insight into life, health care, and end-of-life (EOL) concerns of this population. The purpose was to explore the experiences and attitudes toward death and dying among homeless persons. Qualitative study utilizing focus groups were used. Fifty-three homeless persons were recruited from homeless service agencies. In-depth interviews were conducted, which were audiotaped and transcribed. We present seven themes, some of which are previously unreported. Homeless persons described many significant experiences with death and dying, and many participants suffered losses while very young. These encounters influenced participants' attitudes toward risks and risky behavior: e.g., for some, these experiences provided justification for high-risk behaviors and influenced their behaviors while living on the streets. For others, they may be associated with their homelessness. Finally, these experiences informed their attitudes toward death and dying as well as EOL care; homeless persons believe that care will be poor at the EOL. Findings from this study have implications for addressing social services, health promotion, prevention, and EOL care for homeless persons, as well as for others who are poor and disenfranchised.

Sterk, C. E., Klein, H., & Elifson, K. W. (2004). Self-esteem and "at risk" women: Determinants and relevance to sexual and HIV-related risk behaviors. *Women & Health*, 40(4), 75-92.

Abstract: In this study, we describe the relationship between self-esteem and HIV-related risk behaviors, and explore what factors predict self-esteem levels of "at risk" women. Interviews were conducted with 250 (predominantly African American) women living in the Atlanta, Georgia metropolitan area between August 1997 and August 2000. A community identification process was used to identify potential study participants, with further expansion of the sample

via targeted and theoretical sampling and ethnographic mapping procedures. Self-esteem was related to the number of times having oral sex, the number of times having sex with paying partners, the frequency of sexual risk-taking (all during the 90 days prior to interview), the number of different HIV risk behaviors practiced during the previous year, and condom use attitudes and self-efficacy. Greater involvement HIV risk behaviors was associated with lower self-esteem. Multivariate analyses revealed five significant predictors of women's self-esteem levels: race, **religiosity**, childhood experiences with emotional neglect, the number of money-related problems experienced, and the number of drug-related problems experienced. The findings indicate that self-esteem is highly relevant to "at risk" women's HIV risk behavior practices, and this has important implications for HIV intervention programs.

Tan, P. P., & Ryan, E. (2001). Homeless Hispanic and non-Hispanic adults on the Texas-Mexico border. *Hispanic Journal of Behavioral Sciences*, 23(2), 239-249.

Abstract: This article contrasts the demographics, familial relationships, vocational backgrounds, and personal experiences of homeless Hispanic adults with non-Hispanic adults living in the southwest border region of the United States. Using the "point in time" technique, data were collected from 280 homeless adults (198 Hispanics and 82 non-Hispanics) in El Paso, Texas, in 1998. The data revealed that the Hispanic and non-Hispanic groups differed regarding their gender composition, language spoken, **religious** affiliation, educational experiences, and domiciles. The probability of individuals from the two groups who were married, had children, had relatives in the area, and had a medical problem differed. Similarly, the ratios of individuals who were migrant workers, and who worked at jobs that required skills also differed. In addition, the Hispanic and non-Hispanic groups were distinguishable by their reasons for being homeless, what they considered the most important service provided by shelters, and what gave them hope during difficult times. By outlining the uniqueness of homeless Hispanics and contrasting them to their non-Hispanic counterparts, this study provides a better insight into the characteristics of homeless persons who live in the southwest border region of the United States.

Tarzian, A. J., Neal, M. T., & O'Neil, J. A. (2005). Attitudes, experiences, and beliefs affecting end-of-life decision-making among homeless individuals. *Journal of Palliative Medicine*, 8(1), 36-48.

Individuals who are homeless may encounter various barriers to obtaining quality end-of-life (EOL) care, including access barriers, multiple sources of discrimination, and lack of knowledge among health care providers (HCPs) of their preferences and decision-making practices. Planning for death with individuals who have spent so much energy surviving requires an understanding of their experiences and preferences. This study sought to increase HCPs' awareness and understanding of homeless or similarly marginalized individuals' EOL experiences and treatment preferences. Focus groups were conducted with homeless individuals using a semi-structured interview guide to elicit participants' EOL experiences, decision-making practices, and personal treatment preferences. Five focus groups were conducted with 20 inner-city homeless individuals (4 per group) at a free urban health care clinic for homeless individuals in the United States. Sixteen of the 20 participants were African American; 4 were Caucasian. None were actively psychotic. All had experienced multiple losses and drug addiction. Five main themes emerged: valuing an individual's wishes; acknowledging emotions; the primacy of

religious beliefs and **spiritual** experience; seeking relationship-centered care; and reframing advance care planning. The narrative process of this qualitative study uncovered an approach to EOL decision-making in which participants' reasoning was influenced by emotions, **religious** beliefs, and **spiritual** experience. Relationship-centered care, characterized by compassion and respectful, two-way communication, was obvious by its described absence--reasons for this are discussed. Recommendations for reframing advance care planning include ways for HCPs to transform advance care planning from that of a legal document to a process of goal-setting that is grounded in human connection, respect, and understanding.

Trask, H.-K. (1983). The Office of Hawaiian Affairs: Self-determination or state dependency? *Social Process in Hawaii*, 30, 104-112.

Abstract: Critiques the ability of the Office of Hawaiian Affairs to address & alleviate Native Hawaiian problems, especially land loss due to development. The effects of land alienation on Hawaiian culture -- destructon of community & ohana (family), severed relationships between the aina (land) & people, homelessness, **spiritual** devastation, & cultural mourning -- are explored. Factors in land loss & development include HI's popularity with tourists, an influx of foreign & mainland capital, the pressures of government & developers on small communities, & state policy encouraging tourism. The Office of Hawaiian Affairs lacks the legal jurisdiction, political power, & financial resources to stop land development. Property rights retained by Native Hawaiians, through Queen Liliuokalani's 1893 cession of land titles to the US government, have not been honored. Abuse of the Hawaiian Homes & other trusts have left Native Hawaiians as wards of the state. To achieve self-determination, a land base should first be achieved by litigating the state's violation of its trust responsibilities. Various sovereignty models of the American Indians, Maoris, Tongans, Samoans, & Tahitians may offer direction. Organizations dedicated to reclaiming sovereignty deserve Native Hawaiian support. It is concluded that the Office of Hawaiian Affairs is an obstacle to self-determination & will further the subjugation of the Hawaiian people.

Tryssenaar, J., Jones, E. J., & Lee, D. (1999). Occupational performance needs of a shelter population. *Canadian Journal of Occupational Therapy*, 66(4), 188-196.

Abstract: Practice in shelters for people who are homeless is an exciting and challenging opportunity for occupational therapists. However, there is a paucity of knowledge about the occupational performance needs of this population. In the present study, 25 persons at a shelter were interviewed using the Canadian Occupational Performance Measure (COPM). Data were analyzed using both qualitative and quantitative methods. Several major themes emerged including **spirituality**, "we want what everyone wants", choosing satisfaction, diverse health concerns, power of relationships, the importance of environment to well-being, and poverty. Altruism in the midst of adversity and individuality were minor themes. Instrumental activities of daily living, such as access to employment, financial management, housing, and recreation, were reported as more important than basic activities of daily living. Participants and interviewers also responded to general questions regarding the use of the COPM in the assessment process. The COPM was found to be useful for assessing the occupational performance needs of this population, but should be augmented by inquiry about environmental concerns, relationships, housing, and spirituality.

Tsemberis, S. & Stefancic, A. (2000). The role of an espiritista in the treatment of a homeless, mentally ill Hispanic man. *Psychiatric Services*, 51(12), 1572-1574.

Abstract: This paper presents a case study from an emergency psychiatric outreach team that serves homeless and mentally ill persons in New York City. Mr. V was homeless and believed that he was possessed by evil spirits who were causing his physical and mental problems. He was hospitalized involuntarily twice for medical reasons, but he refused to cooperate in his treatment and returned to the streets after his first hospitalization. After one visit by a **spiritual** healer during his second hospitalization, Mr. V began to participate in his treatment. He was discharged to a nursing home, and after three years he had not returned to the streets.

Vandergriff-Avery, A. M. (2002). Rural families speak: A qualitative investigation of stress protective and crisis recovery strategies utilized by rural low-income women and their families. *Dissertation Abstracts International*, 62(12), 4350A-4351A.

Abstract: The purpose of this research project was to examine both the challenges faced by and the strengths of rural low-income families. More specifically, the study explored: (1) family stressors; (2) family protective factors; (3) family crises; and (4) family recovery factors. Differences and similarities between cultural/community contexts were also investigated. Qualitative analyses of 34 in-depth interviews revealed that project participants and their families experienced ten types of life stressors. These were: (1) parenting hardships/worries; (2) relationship problems; (3) single parenthood; (4) health related problems; (5) financial problems; (6) non-supportive interactions; (7) housing/transportation; (8) job/work related; (9) childcare; and (10) **religious** concerns. Although most types of stressors were found in both counties, there were slight differences emphasized in the stressors associated with single parenthood. Participants described twelve major types of protective factors that help them combat stress and prevent crisis. These were (1) accord; (2) communication; (3) hardiness; (4) support network; (5) time and routines; (6) financial management; (7) parental love; (8) family pride; (9) co-parenting; (10) parental strength; (11) avoidance; and (12) **spiritual faith/religion**. With the exception of the **spiritual faith/religion** and parental strength categories, all protective factor categories contained similar data from both counties. Five types of family crises were found. These included: (1) family violence; (2) homelessness; (3) substance abuse; (4) unexpected death; and (5) incarceration. Participants in both counties described family crisis events involving family violence and substance abuse. All other crisis events were reported in only one of the counties. Although strategies used to recover from the various crises experienced vary from crisis to crisis, the seven recovery factors reported were (1) social support; (2) family openness/communication; (3) personal mastery; (4) event reinterpretation; (5) avoidance; (6) protection of family members; and (7) use of the legal system. With the exception of the event reinterpretation recovery factor for substance abuse, no differences were found between the two counties. Identifying and understanding the challenges faced by and the strengths of rural low-income women and their families has implications for research, practice, and policy. These implications, and the lessons learned while conducting this research project, are discussed.

Vandsburger, E., Schneller, D. P., & Murphy-Norris, C. (2007). **Spirituality** and **religiosity** of homeless individuals: Implications for social work practice. *Arete: Special Issue on Spirituality and Social Work*.

Abstract: N/A

Willott, J., & Stevenson, J. (2006). An analysis of gendered attitudes and responses to employability training. *Journal of Vocational Education & Training*, 58(4), 441-453.

Abstract: Training programmes for unemployed people are often designed to meet the identified vocational skill needs of businesses. We describe research across a number of projects in Leeds (United Kingdom) providing training to unemployed and marginalised adults. The focus was on those with multiple barriers to accessing and sustaining training and employment (including disability, mental illness, homelessness, substance abuse, refugee or immigration status, language, **religion** and culture). We found substantial gender differences in attitudes towards (un)employment, training and education, including "employability" skills training. Women in our study were more likely to explain their unemployment in terms of "self" or intrinsic failures: inadequacy, weakness or lack of requisite skills. For men, unemployment was seen as a consequence of extrinsic circumstances: bad luck, the failure of others or lack of support. Women were more likely to cite their barriers to training as social, personal or attitudinal, compared with men who saw them predominantly as structural and practical. Men most valued the acquisition of "hard" skills, while women valued gains in confidence, reflective learning and teamwork. These results have implications for the design and delivery of employability training, particularly the need to support women to develop the requisite self-competencies that create individual autonomy.

Wilson, M. (2005). Health-promoting behaviors of sheltered homeless women. *Family & Community Health*, 28(1), 51-63.

Abstract: To expand the body of knowledge and provide further insight into the complex area of homelessness and health, health practices of sheltered homeless women were investigated using a cross-sectional, descriptive, and non-experimental design using Pender's Health Promotion Model as the theoretical framework. The sample (n = 137) was well educated, mostly unemployed, primarily single, and homeless due to relationship problems/conflict per self-report. Homeless women were noted to practice health-promoting behaviors in all areas but scored the lowest on physical activity and nutrition. Significant findings reflected women's personal strengths and resources in the areas of **spiritual** growth and interpersonal relations.

Zevin, B. (2006, March). A bio-psycho-social-**spiritual** approach to HIV and homelessness. *Focus: A Guide to AIDS Research*, 21(3), 1-5.

Abstract: N/A

Zufferey, C., & Kerr, L. (2004). Identity and everyday experiences of homelessness: Some implications for social work. *Australian Social Work*, 57(4), 343-353.

Abstract: It is important for the complexities of homelessness to be considered when constructing policy or practice relating to people who are without safe and stable accommodation. These complexities can be loosely categorised around the definitions, causes and experiences of homelessness. While definitions and causes are topics of current debates, study of the lived-experiences of homelessness remains an area that is largely under-researched. This paper explores some of the implications for social work and social workers when the individual's understanding and experience of her/his identity as a 'homeless person' and consequent relationships with service providers are not factored into policy and practice. This article draws on the findings of a study of homeless adults in inner city Adelaide to illustrate the author's arguments. It outlines the importance of listening to service users' perspectives in order to assess whether dominant constructions of social work, homelessness and 'homeless people' are meeting the needs of and improving outcomes for individual clients. More broadly, it is hoped that making these perspectives visible will assist in the development of 'client-focused' practice and policy.

Veterans

Benda, B. B. (2001). Predictors of rehospitalization of military veterans who abuse substances. *Social Work Research*, 25(4), 199-212.

Abstract: The study reported in this article is of a systematic random sample of 600 homeless Vietnam veterans, ages 46 to 65, who abuse substances, many of whom are comorbid with psychological afflictions. All of these veterans were in a Midwestern residential program for homeless substance abusers at the time of the interview. Cox's proportional-hazards model was used to estimate the relative rate of rehospitalization (hazard function) across the follow-up interval of two years by the predictors. The ecological predictors include, but are not limited to, demographic characteristics, history of drug and psychiatric treatment, psychological afflictions, abuse before 18 years of age, inner strengths, social support, **religiosity** and direct combat experience in Vietnam. The range of ecological factors investigated presents more comprehensive findings for future conceptual models and for more thorough social work intervention.

Benda, B. B. (2003). Discriminators of suicide thoughts and attempts among homeless veterans who abuse substances. *Suicide and Life-Threatening Behavior*, 33(4), 430-442 .

Abstract: Six hundred homeless military veterans who abused substances were examined to determine what factors discriminate between nonsuicidal veterans, those who had suicidal thoughts, and persons who had attempted suicide. Several factors were considered based on attachment theory, including caregiver attachment, sexual abuse, physical abuse, resilience, self-efficacy, and self-esteem. Suicide attempters were discriminated from others by psychiatric comorbidity, early abuse, severity of substance abuse, and longevity of drug use. In contrast, the discriminators between nonsuicidal homeless substance abusers and others were elements of

attachment and commitments such as marriage, employment, and **religiosity**. Some implications of the findings for intervention are discussed.

Benda, B. B. (2004). Life-course theory of readmission of substance abusers among homeless veterans. *Psychiatric Services, 55*(11), 1308-1310.

Abstract: This study examined outcomes of 310 female and 315 male homeless veterans who were admitted to a Department of Veterans Affairs inpatient program for dual diagnoses of a substance use disorder and another mental illness. Participants were surveyed to determine gender differences for types of transforming experiences and for types of abuse as predictors of readmission within two years. Predictors were selected primarily from life-course theory and were analyzed with Cox's proportional hazards model. Transforming experiences, such as enhanced ego identity and **spiritual** well-being, attenuated the effects of childhood abuses, combat exposure, and depression for both genders. Transforming experiences also reduced the risk of readmission that was associated with aggression for men and abuse that occurred either in the military or recently for women.

Benda, B. B., & Belcher, J. R. (2006). Alcohol and other drug problems among homeless veterans: A life-course theory of forgiveness. *Alcoholism Treatment Quarterly, 24*(1-2), 147-170.

Abstract: This study of 310 women & 315 men is one of the first investigations of a theoretical model of alcohol & other drug abuse among homeless veterans. The sample consists of inpatients in a Domiciliary program at Veterans Affairs Medical Center. Using structural equation modeling, it is observed that forgiveness amplifies the inverse relationships of caregiver attachment & **spiritual** well-being to alcohol & other drug abuse. In contrast, forgiveness reduces the relationships of abuse, distress, & depression to alcohol & other drug abuse.

Benda, B. B., DiBlasio, F. A., & Pope, S. K. (2006). **Spiritual** well-being, relationships, and work satisfaction in the treatment of homeless veterans with alcohol/other drug problems. *Alcoholism Treatment Quarterly, 24*(1-2), 109-124.

Abstract: This study examined a random sample of 600 homeless male veterans, aged 46 to 65, who served in the military during the Vietnam War. The purpose of the study was to identify predictors of re-admission to an inpatient treatment program for alcohol & drug abuse in a 2-year follow-up. Among the strongest predictors were comorbidity, suicidal thoughts, memory loss, & childhood sexual & physical abuse.

Plant, F. J. (1994). Homeless Vietnam veterans: Developing an effective ministry for the New York City Department of Veterans Affairs chaplains. *Dissertation Abstracts International, 54*(11), 4147.

Abstract: This project identifies the historical, biblical, and theological foundations of ministering to veterans. The background of the Vietnam War and Vietnam veterans were researched to determine the sociodemographic characteristics of Vietnam veterans; why some Vietnam veterans have problems and some do not; and delineated some of the common threads between homeless and non-homeless Vietnam veterans. The role of religion in the life of

homeless Vietnam veterans was also investigated. There are approximately 250,000 to 2.2 million homeless persons living in America. A lack of affordable housing, combined with cuts in the federal housing budget, minimum-wage jobs, unemployment, and expiration of unemployment benefits have caused an enormous increase in the homeless population. Other contributing causes are physical and mental health issues, lack of community-based mental health services, substance abuse, alcoholism, and veteran-related PTSD. Vietnam veterans comprise about 40 to 60% of the homeless in the United States. As estimated 25,000 homeless Vietnam veterans live on the dangerous streets of New York City daily. Some of these veterans have wives and children. Many homeless Vietnam veterans are severely socially and vocationally dysfunctional. Many believe that the Vietnam War was the most complex and divisive conflict since the bloody and devastating Civil War. The Vietnam War is over for America. Nevertheless, casualties, personal, historic, and social legacies continue for America, and the Vietnamese. While attempting to bridge the gap between a seemingly sacrilegious war and **religious** tenets, Vietnam veterans seek personal and **spiritual** resolutions to their problems. Through an effective ministry, the Department of Veterans Affairs Medical Center chaplains can assist the often forgotten and unappreciated homeless Vietnam veterans work through moral, ethical, and **spiritual** issues. Special attention from the chaplains could help minimize some of the **spiritual** problems homeless Vietnam veterans face. 10 homeless and 10 non-homeless Vietnam veterans were used as subjects for this project study. A Pilot Project **Spiritual** Group was designed and implemented using homeless veterans who are registered in the Department of Veterans Affairs Regional Office Program for Homeless Veterans on Seventh Avenue in New York City.

Youth and Children

Alderfer, W. H. (2003). Street children of Delhi, India: Their lives today, their hopes for tomorrow. *Dissertation Abstracts International*, 63(8), 3002A.

Abstract: The researcher noted that there are at least 10 million street and working children (SWC) in India, of which more than 500,000 live in the capital city of Delhi. Through an exhaustive investigation of existing literature, the researcher observed that less than 40 case studies have been published of SWCs in Delhi, and that none of those document the impact of a social action project on their lives. Based on this need, the researcher posed the question: What are the psycho-social-**spiritual** aspects of the lives of SWCs living in urban slum conditions in Delhi, India, and how would their lives be impacted by a social action project? The researcher designed and implemented a social action project for SWCs in Delhi, documenting the impact of the project on the lives of 14 SWCs. The major findings and conclusions of the study found that: (1) Basic requirements of food, shelter, health, education, employment and psycho-social support of the children in the study were not being met prior to participating in the social action project. (2) A Child Development Measurement Tool (CDMT), tested on the 14 case studies, produced reliable, verifiable and measurable results, documenting how a child progresses in twenty-two areas of growth and development. (3) The health component of the project had the greatest and most immediate impact on the lives of the children, as rated by the CDMT, interview records, and an external evaluation of the project. (4) Research on SWCs in Delhi and elsewhere in India is sorely lacking, requiring expanded efforts by the public and private sector to bring attention to the plight of SWCs and the need to provide them with better life options. In conclusion, the health, education, opportunities for employment and psycho-social well-being of all the children

who participated actively in the social action project over the nine-month period of the study increased dramatically, demonstrating that well-conceived, holistic interventions over relatively short periods of time with street children in Delhi can change their lives and open doors to a brighter future.

Ferguson, K. M., Dabir, N., Dortzbach, K., Dyrness, G., & Spruijt-Metz, D. (2006). Comparative analysis of **faith**-based programs serving homeless and street-living youth in Los Angeles, Mumbai and Nairobi. *Children and Youth Services Review*, 28(12), 1512-1527.

Abstract: This study sought to determine which faith elements exist in faith-based programs for homeless and street-living youth in Los Angeles, Mumbai and Nairobi and how these concepts are defined according to staff and youth clients. Descriptions of client outcomes across programs are also explored. Quantitative surveys and qualitative interviews were conducted with 22 staff and 11 clients from 11 **faith**-based programs for homeless youth in Los Angeles. In Mumbai and Nairobi, 6 staff and 12 youth were interviewed from 3 faith-based programs in each city. Findings reveal similarities across cities in services, **faith** components and client outcomes. Differences are noted in the influence of the socio-political context on service provision. Recommendations are offered to guide **faith**-based organizations in designing and improving services for homeless and street-living youth.

Ferguson, K. M., Wu, Q., Dyrness, G., & Spruijt-Metz, D. (2007). Perceptions of **faith** and outcomes in **faith**-based programs for homeless youth: A grounded theory approach. *Journal of Social Service Research*, 33(4), 25-44.

Abstract: This study sought to determine which "**faith**" elements exist in **faith**-based programs for homeless youth and how these concepts are defined according to staff and youth clients. Descriptions of client outcomes across programs are also explored. Quantitative surveys and qualitative interviews were conducted with 22 staff and 11 clients from 11 **faith**-based programs for homeless youth in Los Angeles. Common themes that emerged include using **faith** to instill hope in clients, non-church-related **religious** practices and **spiritual** growth in clients. Grounded theory is used to interpret findings and develop hypotheses to inform future research on **faith** and outcomes. Implications for social work are offered to guide practitioners and researchers in designing, implementing and evaluating effective **faith**-based practices for homeless youth.

Garbarino, J., & Bedard, C. (1996). **Spiritual** challenges to children facing violent trauma. *Childhood: A Global Journal of Child Research*, 3(4), 467-478.

Abstract: Reviews research dealing with the intersection of the developmental psychology of trauma and **spirituality**. Examines the role of **religion** in **spiritual** development and asserts the need to study life paths of violent youth to see role of **spirituality** in preventing social problems. Uses research with street children and children in war zones.

Gilfoyle, T. J. (2004). Street-rats and gutter-snipes: Child pickpockets and street culture in New York City, 1850-1900. *Journal of Social History*, 37(4), 853-882.

Abstract: For over half a century, the street child was an inescapable fixture of the 19th-century industrial city. Lacking formal education, adult supervision, & sometimes even a home, such youths were derided as "rats," "gamins," "Arabs," "urchins," & "gutter-snipes." In a country that identified geographic mobility & physical movement as freedom, the street kid represented the logical nightmare -- the replacement of community, familial, & even **spiritual** bonds with the rootless individualism of the nomad. Street children by necessity developed a confrontational & oppositional subculture relative to adult authority, while simultaneously adopting certain entrepreneurial behaviors as a survival strategy. Struggling to negotiate a terrain between personal autonomy & adult authority, between self-sufficiency & economic dependence, child pickpockets thus cultivated their own conception of freedom & independence.

Huff, D., & Johnson, D. (1988, July). The new vagabonds? Homelessness outside the megalopolis. Paper presented at the Annual Meeting of the National Institute on Social Work and Human Services in Rural Areas, Fort Collins, Colorado.

Abstract: This paper reports results of a survey of 47 homeless adults, interviewed in Ada County, Idaho. Most respondents were male, white, currently single, with no **religious** preference. The mean number of years of formal education was 11.6. Seventeen percent of the sample were American Indians. Ninety-three percent were unemployed. Twenty-five percent of respondents' income went to purchase alcohol, although almost 40% spent no money on alcohol. One-third reported a physical handicap, one in six had spent time in a mental hospital, almost half had been in a detoxification center, and 75% had served time in jail. Thirty-nine percent reported using illegal drugs, particularly marijuana. Two-thirds of respondents seldom or never see members of their family of origin; most never saw their this population was more transient, had a higher unemployment rate, contained a high proportion of American Indians, and had more difficulty with the criminal justice system. This report concludes that this sample of homeless people seems to represent individuals with relatively normal values and backgrounds who have experienced abnormally high emotional stress without social connections or mental stability to help them cope with such stress.

Kidd, S. A. (2003). Street youth: Coping and interventions. *Child and Adolescent Social Work Journal*, 20(4), 235-261.

Abstract: A literature review of research into interventions among street youth is presented along with the results of a qualitative analysis of interviews with 80 street youth on the topic of coping. Themes arising from the qualitative analysis include street youths' negative & positive experiences with social support; & attitudes & beliefs such as self-worth, decreased reactivity to other's opinions, hope for the future, pride in self-reliance, anger/nonconformity, & **spirituality**. Recommendations of this study include the need for outcome research & program evaluation, inclusion of sociocultural factors as variables, & accessing the experiences of street youth.

Lindsey, E. W., Kurtz, P. D., Jarvis, S., Williams, N. R., & Nackerud, L. (2000). How runaway and homeless youth navigate troubled waters: Personal strengths and resources. *Child & Adolescent Social Work Journal, 17*(2), 115-140.

Reports partial findings from an exploratory study of the research question, "How do formerly runaway & homeless adolescents navigate the troubled waters of leaving home, living in high-risk environments, & engaging in dangerous behaviors, to make successful developmental transitions into young adulthood?" Qualitative data from interviews with 12 formerly runaway or homeless youths in the southeastern US were analyzed using the constant comparative method. Reported here are findings related to the personal strengths & resources that enable such youths to make successful transitions: learning new attitudes & behaviors, personal attributes, & **spirituality**. Recommendations for program development & intervention with homeless or at-risk youth are discussed.

Rew, L. (1996). Health risks of homeless adolescents: Implications for holistic nursing. *Journal of Holistic Nursing, 14*(4), 348-359.

Abstract: Although the exact number of homeless adolescents is unknown, it is estimated that this population may exceed 2 million. Literally living on the streets, homeless youth are at risk for a variety of physical, psychosocial, and **spiritual** health problems. Many engage in "survival sex," exchanging sexual favors for necessities of food, clothing, and shelter. Such risky sexual behaviors make them vulnerable to sexually transmitted diseases, including human immunodeficiency virus (HIV) and acquired immunodeficiency syndrome (AIDS), and unintended pregnancies. Many have serious, diagnosable mental health problems, whereas others suffer various consequences of substance abuse. There is a need for comprehensive and holistic health care services, for which the majority of homeless youth have very limited access. Holistic nursing can provide creative interventions for this vulnerable population.

Saewyc, E. M. (2003). Influential life contexts and environments for out-of-home pregnant adolescents. *Journal of Holistic Nursing, 21*(4), 343-367.

Abstract: This focused ethnography explored influential life experiences and environmental contexts associated with pregnancy among "out-of-home" pregnant adolescent women in Seattle (i.e., not living in stable settings or with parents). Methods adapted from feminist anthropology guided ethnographic interviewing and participant observation. Key informants (N = 8) included 5 White, 1 American Indian, and 2 African American women 17-19 years, plus expectant fathers and street friends. Narrative and domain analysis focused on life events and current experiences that participants linked to their pregnancy decisions. Participants organized their narratives primarily around relationships: conflict-laden family relationships, violence and sexual abuse in childhood, mental health and substance abuse problems, and life-long patterns of housing instability. Economic challenges, disconnection to school, and **spiritual** change were important in their current circumstances. For most, out-of-home status preceded pregnancy, and during pregnancy, housing options improved slightly. For others, pregnancy occurred within a relationship that offered them relatively more stable housing arrangements.

Solarz, A. (1985, November). Social supports among the homeless. Paper presented at the Annual Meeting of the American Public Health Association, Washington, DC.

Abstract: The homeless have long been considered a disaffiliated and socially isolated group. Research has indicated that most of the homeless are single and have no family relationships or friends to provide support. A study was conducted to gather information on both objective and subjective measures of social support from 125 individuals residing at a temporary shelter in a large midwestern city. Objective measures included marital status, **church attendance**, the number of good friends and the frequency of contact with them, and the presence of relatives and the frequency of contact with them. Subjective measures of social support were made to assess how the respondents felt about the quantity and quality of support received. While the results are generally supportive of the contention respondents had significant resources available to them for social support. In particular, participants were able to identify family members as providers of social support. Shelter users can be assumed to be willing to accept certain types of social support, simply by virtue of the fact that they are accepting shelter services. The homeless who remain on the street may be more likely to rely on alternatives which do not involve social interactions. Future research should examine social support among this more difficult street population.

Ungar, M. (In press). Resilience across cultures. *British Journal of Social Work*.

Abstract: Findings from a 14 site mixed methods study of over 1500 youth globally support four propositions that underlie a more culturally and contextually embedded understanding of resilience: 1) there are global, as well as culturally and contextually specific aspects to young people's lives that contribute to their resilience; 2) aspects of resilience exert differing amounts of influence on a child's life depending on the specific culture and context in which resilience is realized; 3) aspects of children's lives that contribute to resilience are related to one another in patterns that reflect a child's culture and context; 4) tensions between individuals and their cultures and contexts are resolved in ways that reflect highly specific relationships between aspects of resilience. The implications of this cultural and contextual understanding of resilience to interventions with at-risk populations are discussed.

Williams, N. R. (2004). **Spirituality** and **religion** in the lives of runaway and homeless youth: Coping with adversity. *Journal of Religion & Spirituality in Social Work*, 23(4), 47-66.

Abstract: This qualitative study, part of a larger study of resiliency, explores the impact of **spirituality** on runaway &/or homeless youth. Interviews with 19 former runaway & homeless youth were analyzed to explore their experience of **spirituality** as they coped with the adversity in their lives. Five themes related to **spirituality** emerged: a belief in divine intervention; having a personal relationship with a nonjudgmental higher power; use of prayer; participation in traditional & nontraditional **religious** practices; & finding meaning & purpose in life, including a desire to "give back" to their community. Implications for social work practice & research are addressed.

Williams, N. R., & Lindsey, E. (2005). Spirituality and religion in the lives of runaway and homeless youth: Coping with adversity. *Journal of Religion & Spirituality in Social Work*, 24(4), 19-38.

Abstract: This qualitative study, part of a larger study of resiliency, explores the impact of **spirituality** on runaway &/or homeless youth. Interviews with 19 former runaway & homeless youth were analyzed to explore their experience of **spirituality** as they coped with the adversity in their lives. Five themes related to **spirituality** emerged: a belief in divine intervention; having a personal relationship with a nonjudgmental higher power; use of prayer; participation in traditional & nontraditional **religious** practices; & finding meaning & purpose in life, including a desire to "give back" to their community. Implications for social work practice & research are addressed.

Williams, N. R., Lindsey, E. W., Kurtz, P. D., & Jarvis, S. (2001). From trauma to resiliency: Lessons from former runaway and homeless youth. *Journal of Youth Studies*, 4(2), 233-253.

Abstract: This exploratory study presents findings on resiliency development in five former runaway & homeless youth. Subjected to chronic trauma, this unique population lacked the protective factors other studies have associated with resiliency development. Five young women were compared & contrasted in relation to the following questions: what factors promote resiliency in runaway & homeless youth & how are resilient youth differentiated from their peers who continue to exhibit high risk behaviors? A multiple case study design was used to explore themes that emerged from in-depth interviews with an original sample of 22 former runaway & homeless youth. These themes included determination, meaning & purpose in life, self-care, & readiness to accept help.

Caregiver-Focused

Allahyari, R. A. (2001). The felt politics of charity: Serving "the ambassadors of God" and saving "the sinking classes." In J. Goodwin, J. M. Jasper, & F. Polletta (Eds.), *Passionate politics: Emotions and social movements* (pp. 195-211). Chicago: University of Chicago Press.

Abstract: Data obtained during 1991-1994 fieldwork at 2 large charitable organizations -- Loaves & Fishes, & the Salvation Army -- in Sacramento, CA, supplemented by a content analysis of organizational publications & local news reports, are drawn on to explore the emotional characteristics of volunteer workers & their interactions with their clients, in this case, homeless persons receiving food services. Focus is on the process of "moral selving" -- the creation of oneself as a more moral, virtuous, & **spiritual** person -- & its role in the decision to do volunteer work in these particular organizations. The function of moral selving in promoting other types of social movement activism, political action, or outreach work is also examined, & its emotional components are discussed. The "felt politics" of the "emotional culture" created within these volunteer settings are also explored, describing program staff as "moral entrepreneurs" in the formation of "conscience constituencies."

Cnaan, R. A., & Handy, F. (2000). Comparing neighbors: Social service provision by **religious** congregations in Ontario and the United States. *American Review of Canadian Studies*, 30(4), 521-543.

Abstract: **Religious** congregations in the US are compared with such groups in Ontario to determine the extent to which provision of social services may be unique to the former. Mitigating differences in governmental donation of services, respective populist needs, & taxation are considered. Figures on Canadian & US congregations' contributions to overall charity revenues are given. Delineation of **religious** affiliation compares numbers of Protestants, Catholics, & other denominations. There are results of surveys regarding social & **religious** involvement, beliefs, & volunteer participation. Congregations' demographics are explained. Measurement of services reported by at least 25% of congregations in Ontario or the US includes programs for family counseling, seniors, mourning, education, children & youth, homeless & poor people, prisoners, health, refugees, community policing, economic development, art, community organizing, social issues including civil & women's rights, & housing. There is assessment of averaged monetary monthly value per social program & per congregation. Differences in the services offered in the US & Ontario are elucidated.

DeLashmutt, M. B. (2007). Students' experience of nursing presence with poor mothers. *Journal of Obstetric, Gynecologic and Neonatal Nursing*, 36(2), 183-189.

Abstract: An awareness of the health impact of poverty is core to effective nursing practice. Consequently, a clinical course for nursing students, the focus of which was the impact of poverty upon mental, physical, and spiritual health, was developed and implemented. As the students' understanding of poverty developed, they appreciated that a nurse's **spirituality** and nursing presence can empower poor and marginalized mothers. Nursing presence can provide a vital form of support for poor childbearing women that may reduce risk of poor birth outcomes.

Hill, R. P. (2006). Distributive justice and Catholic **faith-in-action**: Lessons from consumer ethnographies. *Urban Anthropology*, 35(2-3), 183-201.

Abstract: This paper utilizes the results from three different ethnographic projects that examine the impact on distributive justice of Catholic **faith-in-action**. The contexts include interactions between the Catholic faithful and homeless women and their children, incarcerated juvenile felons, and Appalachian women seeking healthcare services. The research purpose of this analysis is to advance our understanding of the tension between the provision of material goods and services and Catholic **religious** orthodoxy from the perspectives of the providers and the recipients. Following a brief introduction, the manuscript presents a theoretical grounding followed by descriptions of the settings and results. The paper closes with a discussion of changes to the treatment of the poor by **faith**-based organizations based upon secular considerations of social capital.

Morgan, M. M., Goddard, H. W., & Givens, S. N. (1997). Factors that influence willingness to help the homeless. *Journal of Social Distress and the Homeless*, 6(1), 45-56.

Abstract: Homelessness is an ongoing challenge for many families and individuals. Many struggle to meet their basic needs for food, clothing and shelter: Unfortunately, we know very little about the people who directly help homeless people meet these needs. The present study examines the relationships between empathy, **religion**, household income, political orientation, gender; race, and people's expressed willingness to assist the homeless. Results demonstrate a strong and consistent link between empathy and willingness to help. Moderately consistent associations are found for **religion** and race. Limitations, suggestions for further research, and for practical application are discussed.

Rankin, E. A. & DeLashmutt, M. B. (2006). Finding **spirituality** and nursing presence: The student's challenge. *Journal of Holistic Nursing*, 24(4), 282-288.

Abstract: The concepts of **spirituality** and nursing presence are difficult for nursing students to comprehend, identify, and apply. Yet holistic nursing practice obligates nurse educators to teach students about these abstract concepts. The purpose of this article is to describe a nursing faculty's approach to encourage baccalaureate students to explore and develop an understanding of the concepts of **spirituality** and nursing presence in light of their clinical practice. A clinical placement in a **faith**-based community crisis center for the poor and homeless is part of a semester-long, psychiatric/mental health clinical course. At the crisis-center day shelter, students ($N = 188$) develop an interactive advocacy relationship with the clients and witness both **spiritual** care and nursing presence. Seminar-driven, topic-focused discussions foster reflective thinking application of these difficult concepts. Without exception, the students affirm that this is an experience of self-discovery and maturation in understanding **spirituality** and nursing presence in nursing practice.

Soukup, P. A. (1996, November). Inviting others to take the helm: Service-learning and the margined community. Paper presented at the Annual Meeting of the Speech Communication Association, San Diego, California.

Abstract: Experiential education, and more specifically service-learning, connects students with a different kind of education. Moreover, service-learning provides the opportunity for students to listen to voices seldom heard in academia. Experiential learning and service-learning have taken on an important role in contemporary schooling and are being adopted as a regular part of the curriculum to provide education for citizenship, an experience of community, practical applications for theoretical material, and an educational process more appealing to adult learners. By providing interaction with the marginalized community--the immigrant, the poor, the sick, the homeless, the aged--the service-learning program at Santa Clara University in California promotes a wider discourse in the responsibility for their own learning. Begun in an effort to connect the university more closely to its local community, and arising from the **religious** mission of the school, the program design included student contact with the local community through projects including, among others, documentary videos and studies of interpersonal interactions.

Vosburgh, W. W. (1988). Voluntary associations, the homeless and hard-to-serve populations: Perspectives from organizational theory. *Nonprofit and Voluntary Sector Quarterly*, 17(1), 10-23.

Abstract: In order to assess the role volunteers play and might be expected to play in provision for the homeless and other populations which resist involvement and providing personal information as features of being helped, selected perspectives from organizational literature are used to: (1) pose the dilemma presented to service providers and programs by these populations; and (2) seek organizational models which might prove appropriate for serving them. Seeking "solutions" in conventional, large-scale programming runs into the dilemma that detailed information flows from the client are necessary to assure accountability, undergird evaluative efforts or even to provide professional service on the one hand, and that unwillingness to provide such information or to comply with routines is a common characteristic of many components of the homeless population on the other. Because the homeless are composed of a number of unlike subpopulations, a typology is suggested to arrange them according to characteristics relevant to the kinds of service organization which might prove effective. The typology is based on whether the service system can provide needed services and whether the client can accept them as provided. Also, general organizational types for conventional service delivery are drawn from Mintzberg and Hasenfeld and English. The idea of mediating institutions which serve to bring the activities of large-scale institutions to a human scale for individuals and to insulate them from undesired involvement with the general society is explored. Forms of organizational experience which might provide models for dealing with the hard-to-serve are sought in classical charities, counterculture organizations and providers of emergency services. Hard-to-serve populations emerge as an especially important arena for the efforts of volunteers for a number of reasons: (1) the needs of the clients are concrete and essential and detailed training is not necessary to help them; (2) help is essential to immediate physical survival and must go on whatever the fortunes of more abstract program or policy efforts, making them attractive to those volunteers who prefer direct contact with people helped; (3) because the organizations involved tend to be small, heterogeneous and localized, activity within them presents a broad range of auspices and work appealing to a number of motivations; (4) there is often a direct connection to **religious** and other institutional areas of the volunteer's life; and (5) because the organizations are small and the activities direct, results are immediately perceptible.