

Homelessness, Poverty and Foster Care *

The homeless and poorly housed populations in most western countries contain a large proportion of people who have spent time in foster care while children (in foster homes or families, in institutional accommodation).

Difficulties of data collection and analysis

Studying the effects of placement during childhood on housing and socio-economic outcomes in adulthood encounters difficulties of data collection. Only a small proportion of the general population experience foster care (typically less than 5% in western countries), and the possible situations at the end of a placement are multiple: return to the natural family, adoption, imprisonment, admission to a mental health or care facility, transfer to another foster institution or to a foster family, running away, death, leaving statutory care on coming of age.

When studying the effect of foster care on well-being in later life, it is extremely hard to distinguish what is attributable to placement per se and what to the circumstances that have preceded, caused or followed it. Some young people experience placement as a haven of stability in which to rebuild their lives after a distressing period in a dysfunctional family; for others it represents a painful separation from their parents.

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Additional factors include bad living conditions during placement, unsuccessful attempts to live in group homes or foster families, leading to further disruption. These different childhood living conditions (before and during a placement) can be at the origin of problems observed in adulthood.

Some figures

The high proportion of homeless people with foster care backgrounds is observed in most western countries (see Table 1). Homeless people are defined as persons sleeping in shelter, in the street or other public space. This would appear to indicate a greater social vulnerability of people who have lacked the support of their families during childhood and youth.

In some western countries, however, this phenomenon is not observed. In Spain, for example, placements are mainly with relatives and seldom in institutions (except for orphans). The reality of placement is therefore experienced differently. The result is that in Spain “being in care” is not considered a relevant category for estimating the extent of childhood disadvantage. However, an event during youth such as having lived in an orphanage (which affects 11% of homeless people in Madrid) is examined in surveys of homeless people.

Table 1. Homeless people with a foster care background: studies in western countries

<i>Study</i>	<i>Year of data collection</i>	<i>Survey site</i>	<i>Sample size</i>	<i>People with a background in care</i>
Burt <i>et al.</i> (2001) (sample of urban and rural areas)	1996	USA —including young people aged 20-24	2938 217	26% 34%
Anderson (1997) (single persons)	1993	England	1769	15%
Lussier <i>et al.</i> (2000)	1998	Montreal (Canada) young people aged 18-35	60	33%
Marpsat <i>et al.</i> (2000) (Paris and inner suburbs)	1998	Paris (France) young people aged 16-24	461	31%
Brousse <i>et al.</i> (2002) (cities over 20 000 inhabitants)	2001	France —including young people aged 16-24	4066 807	23% 35%

A complex process

Homeless young people are more likely than older homeless people to have been in care when children. Young people who have been “fostered” thus appear to have a high vulnerability at the start of adulthood, after which homelessness becomes less frequent. This interpretation is valid primarily for countries where the resort to foster care has not increased in recent decades (as in France and the Netherlands but unlike in the United States).

In France, almost one-third of homeless young people (aged 16–24) have spent time in some form of foster care, a very high proportion compared with 1% for young people in the general French population and 2% for children of manual workers. It is also higher than for homeless adults in general (23%).

The figures in the United States are similar for homeless young people aged 20-24 (34%) but reach 61% for ages 18–19, compared with 26% for

homeless adults and 3% in the general population. In contrast to the European countries referred to, the annual number of young people placed in care in the United States rose by 60% between 1980 and 1995.

The risk for young people of being placed in care is also related to the social level and poverty status of their family of origin. The effects of parents of a low social level on educational attainment, health status, etc., are well known, as is the influence on the probability of becoming homeless. The motivation for placement can be primarily economic when it is believed that removing a child from its family will protect him/her from potential dangers (such as domestic accidents, bad housing) and that the foster family or institution will offer him/her better living conditions (food, clothing, educational support). But such a placement may be traumatic for the child (who is not escaping from an abusing family) and for the family (which feels unjustly punished).

Table 2. People with a foster care background: studies in France

<i>Study</i>	<i>Survey site</i>	<i>Sample size</i>	<i>People in foster care during childhood</i>
Enquête INSEE Situations défavorisées (1987)	France (national sample of housed people)	10606	1.9%
Pré-enquête SIRS-IdF (2001)	Paris (5 deprived metropolitan area)	525	4.2%
EHESS-INED-INSERM	<i>estimate for people “at risk”</i>	407	5.2%
Enquête “Personnes en détresse” OSC-FNARS (2000-2001)	France (national sample of homeless and housed FNARS services users)	1160	19.9%

Foster care among housed people

Some studies, in France, have asked questions about out-of-home placement (see Table 2.). The first one (enquête “Situations Défavorisées” from the national institute of statistics, INSEE) oversampled poor urban areas and shew a proportion of 2% of people in foster care during childhood. When we made the test of our SIRS-Survey (“Santé Inégalité Ruptures Sociales” project) in Paris, we found more than 4% of the population in five deprived metropolitan areas (and more than 5% among those “at risk”, i.e. in France or in Western Europe during childhood). The last survey is a national sample of homeless and housed people using services form a group of non profit organizations (FNARS). They can receive sheltering, help to get a job or a home, etc. Among these very poor people (some of them fall in the category “homeless”), 20% have been in foster care during childhood. We can see this proportion increasing with the precariousness of the population.

Special vulnerability

The hypotheses put forward to explain this high level (out-of-home placement among the poorest populations) tend to be formulated in terms of vulnerability rather than of direct causality.

A history of violence or conflict can result in a lack of strong attachment during youth, with negative consequences for the young person's development and future social behaviour. Abusive or violent relationships prevent young people from acquiring the practical skills necessary to construct and manage non conflictual social relations. A childhood environment (natural or foster family) characterized by little emotional warmth and support or by strict discipline, produces lower levels of self-esteem among adolescents.

Young people who have contact with persons with criminal behaviour (when running away or staying in the same group home) are at risk of adopting delinquent or pre-delinquent behaviour through emulation or peer-group pressure. This increases the likelihood of developing "problem" behaviour, such as conflictual relationships, heavy drinking, substance abuse, all of which are obstacles to successful social integration. Institutional life (hostel or residential home) exposes young people to negative effects, including institutionalized dependence and emotional deprivation, which may leave them poorly equipped for independent living.

A causal linkage is also postulated: young people in care are at greater risk of becoming runaways (and thus of living “in the street”). In this view foster care acts as a trigger for running away, in combination with the circumstances of the placement mentioned earlier. Rates of running away for individuals who later become homeless are much higher than in the general population (though some have run away before being placed in care): 43% among young homeless people aged 18-24 in the United States, and 50% among young homeless people aged 16-24 in Paris. Running away, even for short periods, represents a form of initiation that can facilitate a subsequent decision to leave home. It is then interpreted as a risk factor, even though running away or rough sleeping may be appropriate responses from young people to traumatic or pathogenic situations (in a family or hostel).

Leaving care and entering adulthood, a critical transition

Interpretations of the connection between foster care and homelessness emphasize the difficulties that young people face when they leave care on coming of age. They receive little or no help from families that they are in conflict with or separated from, and in which they may have suffered abuse. Their disrupted lives and the experience of hostel living may have compromised development of personal friendships. This lack of support (financial, practical, relational) at the entry into adulthood is a serious obstacle in making the transition to independent living. Moreover, young people who leave the care

system when they come of age are rarely entitled to social benefits. In France, for example, although a benefit is available for young people leaving institutional care (the *jeune majeur* allowance), it is not awarded automatically but requires the young person to submit a detailed project. In the United States the Federal Government provides no direct financial support for young people leaving the foster care system, though help is available through the Independent Living Program aimed at encouraging life skills, coping with the psycho-social problems associated with leaving care, etc. Initiatives also exist at the local level, such as the Bridges to Independence program in Los Angeles county (which began in 1996).

Conclusion

Young people with a foster care background have experienced extremely varied situations as regards timing (early or late placement, during some months or several years), itinerary (a single foster placement or repeated moves between placement and family of origin, placement in a single foster family or institution or multiple placements), and the reasons for the placement (physical or sexual abuse, deprived household, etc.).

Difficulties experienced within families, or that arise from not having a family, are central to the phenomenons of youth homelessness and poverty. But this factor of vulnerability must be associated to an unfavourable economic context to explain our findings. Being placed in foster care constitutes a rupture

in young people's lives, and when added to the psycho-social problems associated with separation, residential instability, institutional living, and unhappy memories of family life, it can adversely influence their personal development by depriving them of individual and family resources. At the end of the foster placement, the young person is frequently left unsupported during the transition to independent living. This is a clear failing of foster care systems (in Western countries) which make inadequate provision for the time when the young person ceases to be its responsibility.

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