

What leads to homeless shelter re-entry? An exploration of the psychosocial, health, contextual and demographic factors

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ABSTRACT

OBJECTIVES: A longer duration of homelessness is associated with poorer health outcomes. Following this logic, policies that aim to reduce repeated episodes of homelessness by addressing its root causes can result in better long-term health. This paper explores how many people return to the shelter in a Canadian context and examines factors related to returns to homelessness.

METHODS: The sample included 634 adult men who participated in transitional programming at a large homeless shelter in Montreal, Quebec between 2011 and 2014. Descriptive statistics, survival analysis and multinomial logistic regression techniques were used to examine how psychosocial elements, demographic characteristics and contextual factors were related to returns to the shelter over a one-year follow-up period.

RESULTS: Approximately 38% of the sample returned to the shelter within a year of program departure. A return was positively associated with a lack of support from friends and family ($p < 0.05$) and an imposed departure from the shelter ($p < 0.05$). Poor support was also associated with a faster time to return ($p < 0.05$) to the shelter, as was an imposed departure ($p < 0.01$).

CONCLUSIONS: Building social networks and altering programs to accommodate those at high risk of an imposed departure may lead to fewer returns to homelessness and subsequently better health outcomes.

KEY WORDS: Homelessness; returns; psychosocial; policy

La traduction du résumé se trouve à la fin de l'article.

Can J Public Health 2016;107(1):e94–e99
doi: 10.17269/CJPH.107.5271

Homeless persons are prone to poor health and a longer duration of homelessness has been associated with worse health outcomes.^{1–3} Unfortunately, repeated episodes of housing instability are common and serve to increase the overall duration of homelessness.^{4–6}

Health is influenced by a variety of social factors beyond our individual control and homeless people are especially vulnerable in this regard.⁷ For example, compared to the general population, the homeless population has higher rates of mental illness,^{2,8,9} experiences more victimization,¹⁰ and has higher rates of incarceration and legal issues,¹¹ poverty,¹² unemployment¹³ and social isolation.¹⁴

For a variety of reasons, little research has been done to rigorously analyze the relative effect of these social determinants of health on returns to homelessness. While some studies have explored factors contributing to long-term homelessness,^{15–17} few have controlled for a comprehensive list of psychosocial vulnerabilities in their analysis. Therefore the direction and the strength of the relationships between longer duration of homelessness, psychosocial vulnerability and health are unclear. This information is critical when designing interventions and preventive services. Furthermore, at the time of this writing, there has been no exploration of this kind for a Canadian population.

This study seeks to understand the relationship between psychosocial vulnerabilities, mental illness, substance abuse and repeated homeless episodes. It is guided by the following questions:

1. What is the rate of return to the shelter in a Canadian context?
2. How do demographic, psychosocial and contextual factors vary between homeless participants who return to the shelter and those who do not return?
3. To what extent do demographic, psychosocial and contextual factors measured at the time of exit predict whether or not a person will return to the shelter?
4. What demographic, psychosocial and contextual factors affect time to return to the shelter?

METHODS

Research design

This study used a longitudinal research design to follow shelter users over time. A cohort of participants was followed in a database from the time of shelter enrolment, through transitional

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Acknowledgements: The authors acknowledge Georges Ohana, Matthew Pierce, Emilie Fortier and the front-line staff at the Old Brewery Mission for their support. Many thanks as well to the McConnell Foundation and the Old Brewery Mission Foundation for providing project funding.

Conflict of Interest: None to declare.

programming, and upon re-entry to the shelter within a year of departure. The McGill University Research Ethics Board granted approval for this project (REB # 235-1210).

Setting

This study was conducted in partnership with a homeless service provider in Montreal, Canada. With a population of around 5 million, Montreal is the second-largest city in Canada and hosts over half of the emergency shelter population in the province of Quebec.¹⁸ A recent point-in-time count estimated that there are approximately 3,016 homeless persons in Montreal on any given night.¹⁹ Montreal is host to at least 5 major shelters for homeless adults.²⁰ Most shelters offer a bed, meals, clothing, and help with applying for social assistance, replacing identification, and accessing front-line medical treatment. Some shelters offer transitional housing programs with a final goal of permanent housing in the community. There is very little empirical information about the effectiveness of these homeless shelter interventions at the local level.

Participants

The study population consisted of individuals who participated in transitional programming services at a single shelter location that admits over 2,000 people each year. The transitional programs aim to provide stability while the participants prepare for independent living.

Data on participants were pulled from the shelter's administrative database between May 3, 2011 and July 11, 2014. The shelter admitted 1,696 individuals to transitional programming during the study recruitment period. We selected only new participants (those who arrived for the first time after May 3, 2011, $n = 1,087$). Individuals with incomplete information at the time of departure were excluded ($n = 174$). We then selected participants who could be followed for exactly one year after exiting the first transitional programming stint ($n = 634$).

Measurement

Dependent Variables

The first dependent variable was *return to the shelter*. This was defined as an overnight stay in the shelter within 365 days of discharge from a transitional program. Return was operationalized as a binary variable (1/0). The second dependent variable was *length of time to return to the shelter*. Time to return was measured continuously as the number of days between a departure and a return, ranging from 1 to 365 days.

Independent Variables

Several independent variables were examined. The first was type of departure. When participants left transitional programming, the type of departure was noted using 4 mutually exclusive categories. *Organized departure* occurred when the participant was ready to depart and there was a stable place for the participant to go after leaving the shelter. An *imposed departure* took place when the participant was asked to leave the program, although they were still permitted to use other shelter services. This type of departure may be the result of a multitude of factors, including refusal to pay rent, behavioural issues, and absence, among others. A *no-notice departure* was indicated when the participant did not inform any

shelter staff person of his intention to depart and left the premises without a final meeting. Last, when a participant informed shelter staff of his intention to leave the program before the scheduled departure date, the departure type was operationalized as *premature*.

Stay length was the second independent variable. Participation in transitional programs was voluntary. Participants were permitted to leave at any time. Extensions were also granted on a case-by-case basis. Because length of stay in transitional programming varied widely, participants received different amounts of service. We used length of stay in the first transitional program as a proxy for the amount of services rendered to each participant. This was operationalized as a continuous variable ranging from 1 to 329 days. The average length of stay for the whole sample was 37 days and 90% of the participants stayed in programming for under 90 days.

Psychosocial Vulnerability

We measured psychosocial vulnerability with the Arizona Self-Sufficiency Matrix (SSM). Abt. Associates Inc. developed the SSM for use in the Arizona Homeless Evaluation Project as a tool to conceptualize a person's degree of vulnerability across domains related to self-sufficiency.²¹ In this study we included 12 domains from a modified version of this instrument: education attained, income, legal issues, housing, severity of substance use, severity of mental illness, degree of support from family and/or friends, mobility, safety, community involvement, life skills and employment. A trained counsellor completed the SSM each time a participant entered or exited a transitional program. The SSM response options ranged from 1 to 5, with 5 indicating more self-sufficiency. Following recommended practices, we dichotomized each indicator based on a threshold of vulnerability, which was set at 2 out of the 5-point scale.²¹ A score that fell at or under the threshold indicated vulnerability and was given a score of 1. A score that fell above the threshold indicated absence of vulnerability and was scored 0.

Covariates

Age was recorded as a continuous measure at the time of entry to the shelter. *Banned from shelter* served as a proxy for adherence to shelter regulations. This is distinct from an *imposed departure* in that shelter users could be expelled from the premises and restricted from using any of the services for a specified period of time. Naturally, this kind of interruption in stability had the potential to affect a person's probability of returning to the shelter or the length of time that a person was able to spend in shelter following return and up to the cut-off date for the follow-up. Therefore, we used *banned* as a control variable in the analysis. We took into consideration any shelter expulsion before or on the date of program departure. This was operationalized as a binary variable (banned (1) or not banned (0)).

Analysis plan

To address the first two research questions, demographic and psychosocial variables were analyzed for the sample as a whole and across those who returned. Means and standard deviations were calculated for continuous measures, such as age, and time to return, among others. To understand whether observed group differences were due to chance or represented likely differences in

Table 1. Description of sample

Variables	All clients (n = 634)		Clients who did not return (n = 395)		Clients who returned (n = 239)		No return vs. return (p-value) [‡]
	M	SE	M	SE	M	SE	
Stay length (days)	36.95	1.69	37.30	2.37	36.35	2.20	0.01 <i>r</i>
Age at baseline	41.78	0.48	42.08	0.62	41.29	0.76	0.42 <i>t</i>
Time to return (days)	–	–	–	–	71.92	6.17	–
Banned	N (%) 25 (3.94)		N (%) 14 (3.54)		N (%) 11 (4.60)		0.51 <i>c</i>
Departure type							
Organized	384 (60.57)		267 (67.59)		117 (48.95)		0.00 <i>c</i>
Imposed	118 (18.61)		39 (9.87)		79 (33.05)		0.00 <i>c</i>
No notice	96 (15.14)		66 (16.71)		30 (12.55)		0.16 <i>c</i>
Premature	36 (5.68)		23 (5.82)		13 (5.44)		0.84 <i>c</i>
SSM subscale*† (# vulnerable)							
Education	132 (20.82)		82 (20.76)		50 (22.92)		0.96 <i>c</i>
Community	211 (33.28)		138 (34.94)		73 (30.54)		0.25 <i>c</i>
Employment	577 (91.01)		361 (91.39)		216 (90.38)		0.66 <i>c</i>
Family and friends	315 (49.68)		178 (45.06)		137 (57.32)		0.00 <i>c</i>
Housing	527 (83.12)		324 (82.03)		203 (84.94)		0.34 <i>c</i>
Income at exit	385 (60.73)		231 (58.48)		154 (64.44)		0.14 <i>c</i>
Legal issues	73 (11.51)		44 (11.14)		29 (12.13)		0.70 <i>c</i>
Life skills	203 (32.02)		121 (30.63)		82 (33.31)		0.34 <i>c</i>
Mental health	75 (11.83)		48 (12.15)		27 (11.30)		0.75 <i>c</i>
Mobility	230 (36.28)		146 (36.96)		84 (35.15)		0.64 <i>c</i>
Safety	127 (20.03)		77 (19.49)		50 (20.92)		0.66 <i>c</i>
Substance use	106 (16.72)		65 (16.46)		41 (17.15)		0.81 <i>c</i>

* For SSM scores; all clients N = 606; clients who did not return N = 399; clients who returned N = 207.
 † SSM subscales have been converted to binary scales using the threshold of vulnerability for ease of interpretation.
 ‡ *c* = χ^2 testing; *r* = Mann-Whitney rank-sum; *t* = Student's *t*-test.

the population, we tested statistical significance ($p < 0.05$) for normally distributed measures using Student's *t*-test or analysis of variance. Non-normally distributed measures, including program stay, were compared across groups using Mann-Whitney rank-sum testing or Kruskal-Wallis testing. For categorical variables, including banned, type of departure, and the binary SSM domain scores, proportions were calculated and analyzed across groups using Pearson χ^2 analysis.

To address research question three, a single multiple logistic regression model was used to predict returns to the shelter. All of the independent variables described above were entered as predictor variables. Predicted probabilities were also calculated to facilitate interpretation of the results of the regression model.

Research question four analyzed time to return, so we performed a Cox survival analysis using the Breslow method for ties. In the analysis, *origin* was the date of program departure. A *failure* was considered to be any return to the shelter in the 365 d following program exit. The variables included in the full Cox model were the same as the logistic regression model described above. All analyses were conducted using Stata 12.

RESULTS

Characteristics of homeless men

Descriptive findings of the sample are displayed in Table 1. Exactly 37.7% ($n = 239$) of participants returned to the shelter within a year of departure. The amount of time spent in programming (in days) differed slightly between those who returned ($M = 36.35$) and those who did not return ($M = 37.30$; $p < 0.05$). Neither age nor the proportion of banned individuals differed between groups (see Table 1).

Predictors of return to shelter

Next, we report the results of the logistic regression model predicting shelter return (see Table 2). Model 1 examined only the effect of age, stay length, departure type and banned on returns to shelter. Departure type was strongly associated with shelter return. Homeless men with imposed departures had between 3.8 and 5.0 times the odds of return compared to the other types of departures.* Model 2 added the SSM variables to the existing variables presented in Model 1. Family and friends vulnerability was positively associated with shelter return ($OR = 1.59$; $p < 0.05$), even after controlling for other SSM variables and programmatic variables. Other vulnerability scores that were positively related to shelter return include income, legal, and life skills; however, the relationships were not statistically significant. Importantly, the strength of relationship between departure type and return was not affected by introducing the SSM vulnerability scores.

Predicted probabilities of returns to the shelter were also calculated to simulate eight variable combinations. Consider the predicted probability of shelter return for Person A with an organized departure and non-vulnerable family and friends score was 26% (95% CI: 0.20–0.31). Contrast this with the scenario of Person B with an imposed departure and a vulnerable family and friends score where the predicted probability of shelter return was 73% (95% CI: 0.52–0.73). In other words, Person B had a 180% higher risk of return to the shelter relative to Person A (see Table 3 for additional simulation results).

* According to Table 2, compared to the imposed group, the organized and the no-notice groups have 0.2 or 1/5 the odds of returning to the shelter. Compared to the imposed group, the premature group has 0.26 or 1/3.8 the odds of returning to the shelter.

Table 2. Logistic regression: Predicting returns to the shelter

Return	Model 1 (n = 634)			Model 2 (n = 634)		
	OR	P > z	95% CI	OR	P > z	95% CI
Stay length (days)	1.00	0.68	0.99–1.00	1.00	0.70	0.99–1.00
Age at baseline	0.99	0.22	0.98–1.00	0.99	0.39	0.98–1.01
Departure type						
Organized	0.20	0.00	0.13–0.32	0.20	0.00	0.13–0.32
Imposed (ref)						
No notice	0.20	0.00	0.11–0.36	0.20	0.00	0.11–0.38
Premature	0.25	0.00	0.11–0.57	0.26	0.00	0.12–0.59
SSM subscale (# vulnerable)						
Education	–	–	–	1.00	0.99	0.65–1.54
Community	–	–	–	0.82	0.33	0.55–1.22
Employment	–	–	–	0.65	0.19	0.35–1.24
Family and friends	–	–	–	1.59	0.02	1.09–2.33
Housing	–	–	–	0.94	0.83	0.55–1.61
Income at exit	–	–	–	1.18	0.44	0.77–1.81
Legal issues	–	–	–	1.03	0.92	0.59–1.79
Life skills	–	–	–	1.13	0.56	0.75–1.69
Mental health	–	–	–	0.99	0.98	0.57–1.72
Mobility	–	–	–	0.77	0.23	0.50–1.19
Safety	–	–	–	0.89	0.63	0.54–1.45
Substance use	–	–	–	1.13	0.61	0.71–1.79
Banned	0.57	0.21	0.23–1.38	0.57	0.23	0.23–1.43
Constant	3.36	0.00	1.59–7.14	3.71	0.01	1.38–9.92

Table 3. Predictive margins of return to shelter

Variable				
Departure type	Family and friends SSM score	Predictive probability of return	P > z	95% confidence interval
Organized	Good	0.26	0.00	0.20–0.31
Organized	Vulnerable	0.35	0.00	0.29–0.42
Imposed	Good	0.63	0.00	0.52–0.73
Imposed	Vulnerable	0.73	0.00	0.64–0.81
No notice	Good	0.26	0.00	0.17–0.35
No notice	Vulnerable	0.36	0.00	0.25–0.47
Premature	Good	0.31	0.00	0.16–0.47
Premature	Vulnerable	0.42	0.00	0.24–0.59

Note: These results are based on findings from the full logistic regression model in Table 2.

Table 4. Survival analysis of the time to shelter return

Time to return	Model 1 (n = 634)			Model 2 (n = 634)		
	HR	P > z	95% CI	HR	P > z	95% CI
Stay length (days)	1.00	0.87	1.00–1.00	1.00	0.82	1.00–1.00
Age at baseline	0.99	0.19	0.98–1.00	0.99	0.36	0.98–1.01
Departure type						
Organized	0.28	0.00	0.21–0.38	0.27	0.00	0.20–0.37
Imposed (ref)						
No notice	0.28	0.00	0.18–0.43	0.28	0.00	0.18–0.44
Premature	0.36	0.00	0.20–0.65	0.35	0.00	0.19–0.65
SSM subscale (vulnerable = 1)						
Education	–	–	–	0.91	0.58	0.66–1.26
Community	–	–	–	0.87	0.37	0.64–1.18
Employment	–	–	–	0.66	0.10	0.41–1.08
Family and friends	–	–	–	1.46	0.01	1.09–1.94
Housing	–	–	–	1.00	1.00	0.66–1.50
Income at exit	–	–	–	1.16	0.38	0.84–1.60
Legal issues	–	–	–	0.93	0.73	0.62–1.40
Life skills	–	–	–	1.06	0.70	0.79–1.43
Mental health	–	–	–	1.20	0.40	0.78–1.85
Mobility	–	–	–	0.85	0.33	0.61–1.18
Safety	–	–	–	0.86	0.42	0.59–1.24
Substance use	–	–	–	1.06	0.74	0.75–1.49
Banned	0.56	0.07	0.30–1.05	0.54	0.06	0.29–1.03

Time to return

Next we examined time to return using survival analysis. As observed for shelter return, type of departure was statistically significant in the proportional hazards regression (see Table 4). Compared to those with an imposed departure, those with organized departures and no-notice departures had much lower hazard of shelter return on any given day. The hazard rate of return was also significant for those with a premature departure compared to an imposed departure. When the SSM variables were added to the model (Model 2), the coefficients for departure type were largely unchanged. Among the SSM variables, family and friends score was statistically significant in the full proportional hazards model. In other words, those with a vulnerable family and friends score returned to shelter more quickly relative to those without such vulnerability.

DISCUSSION

Homelessness is a difficult public health problem in nearly every urban setting. Little is known about how many people return to homelessness and the psychosocial and demographic characteristics and contextual factors that are related to returns. Our analysis provides insight into why and when people return, to guide public health planning and improve intervention and prevention.

The first key finding is that approximately 40% of homeless persons returned to the shelter within a year of transitional program departure. This is most likely an underestimate of repeated episodes of homelessness as people may utilize other shelter services, live on the streets, become jailed or hospitalized, or return to the shelter after the observation period.

Second, support from friends and families formed the most consistent relationship to shelter returns. Controlling for all other variables, vulnerability on the family and friends SSM score was positively associated with returns to the shelter (OR = 1.59) and returning after shorter periods of time compared to those who had good relationships (HR = 1.46). These results are consistent with past findings. It is well documented that those who receive financial and emotional support are more able to make the transition from homelessness to domicile.^{6,22–25} Furthermore, evidence suggests that the more social supports a person has, the fewer episodes of homelessness they experience.²⁶ This finding underscores the importance of family and friends in determining health and length of homelessness.

Third, participants who experienced an imposed departure had the highest rates of return to the shelter. This relationship was first observed in the bivariate results and held throughout the multivariate analysis. Furthermore, holding all other variables constant, those with imposed departures have a higher hazard of returning to the shelter more quickly than all other departure types. This suggests that imposed departures are either associated with one or more unmeasured characteristics that result in poor outcomes, or that the shelter policy that leads to imposed departures has some unintended negative consequences. Those with imposed departures could have a longer “rap-sheet” for rule breaking, and/or there are other unmeasured factors (e.g., personality disorder) that make it difficult to intervene, resulting in expulsion. Alternatively, it may be that certain program counsellors apply the shelter rules inconsistently. Some may have

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a higher tolerance for apathy, rule breaking or aggression compared to others. As a result, it may be that imposed departures depend more on the counsellors than on the program participants themselves. It could also be that the structure of the current transitional program model offered at the shelter is not appropriate for individuals prone to imposed departures. Most homeless shelters have internal policies for program expulsion. As such, many of the circumstances described above may be similar to situations elsewhere and may carry similar consequences. Although each shelter has different protocols for expulsion, it is important to note that these policies are associated with a person's shelter trajectory and, consequently, with their health.

Finally, the majority of psychosocial vulnerabilities were not strongly related to shelter return or time to return, though many of the vulnerabilities included in our models have been linked to returns to homelessness in other studies. We found that ongoing legal issues were not significantly associated with return to the shelter. However, Caton et al.¹⁵ found that a history of legal problems was associated with longer duration of homelessness. We found that severe substance use was positively associated with returns to the shelter, though the results were not statistically significant in the multivariate models. We also found that severe substance use was slightly positively associated with time to return to the shelter, but the result was also not statistically significant. This was surprising as substance use has been found to increase the time it takes to exit from homelessness in several other longitudinal studies,^{15,16,27} although this relationship is not true of all studies.⁶ In addition, we found that presence of a severe mental health problem was not associated with returns to the shelter. Mental health vulnerability was associated with a slightly higher hazard ratio of time to return to shelter, however this was not statistically significant in the Cox regression model. While some researchers have found that mental health issues increase the duration of homelessness (e.g., Kuhn and Culhane¹⁶), there are contradicting findings as to how it affects the homeless trajectory.^{15,28} Our study also found no significant association between returns to the shelter and age; others, however, have found that older individuals had more stability when domiciled compared to younger individuals after shelter exit,^{6,17} though older age has also been associated with longer duration of homelessness.¹⁵ The failure to find significant psychosocial differences between groups may reflect insufficient power.

Limitations

The sample is drawn from a single source. From this design, we may not be able to generalize to other jurisdictions. In addition, while the data are drawn from administrative sources, selection issues may be present. People who volunteer to participate in shelter programming may be different from those who do not. The use of administrative data does not allow us to follow individuals outside the shelter. Further, this study uses several self-reported tools, which are subject to all the drawbacks of these types of instruments.²⁹

Finally, we did not have access to data on affordable housing, though a few options exist in the city where this study took place. Community-housing options in Montreal range from individual scattered-site housing to larger multi-unit housing complexes. The demand for social housing often outstrips supply. For example, in

Montreal some 40,000 people would like to move into affordable housing provided by Montreal's Municipal Housing Bureau,³⁰ but only 2,000 units become available annually.³¹ The wait-time can range from several months to several years. Each individual housing provider operates under a different set of eligibility requirements and offers varying terms of stay (ranging from a few months, to an unlimited amount of time). The 2014–2017 Montreal Action Plan on Homelessness has pledged to contribute \$2.4M annually to combatting homelessness in the city.³² The plan includes the construction of 600 new social housing spots, although this will not be enough to meet growing demand for housing. This information is particularly important when interpreting the results of a study that examines returns to a homeless shelter, as studies have found that formerly homeless persons often identify housing as the main facilitator of exit from homelessness.³³ A lack of affordable housing may help to explain the relatively high rate of return to the shelter. Future analysis should seek to include measures of availability of housing as well as eligibility of participants for social housing placement.

CONCLUSIONS

Past literature has described the importance of substance use and mental health with regard to returns to homelessness. However, our study did not find a significant association among mental health, substance use and returns. This may be due to insufficient power, though it may also indicate an overemphasis on these elements in research and programming that targets homeless populations.

Social supports, broadly defined, matter.³⁴ Poor relationships with friends and family contribute to poor outcomes, but this issue may be difficult or even impossible to rectify in a shelter setting due to the relatively short time span of shelter visits. However, referrals to additional counselling services may help individuals work through interpersonal problems and build their social networks over the long term.

Finally, individuals with imposed departures spent the same amount of time in programming on average as those with organized departures, so it seems unlikely that the difference in outcomes is a result of amount of service. It may be an issue with the type and appropriateness of service provided. A logical next step for research would be to identify patterns that predict imposed departures in order to prevent them.

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Received: August 21, 2015

Accepted: December 6, 2015

RÉSUMÉ

OBJECTIFS : L'itinérance prolongée est associée à de mauvais résultats sanitaires. Suivant cette logique, les politiques qui visent à réduire les épisodes répétés d'itinérance en abordant leurs causes fondamentales peuvent mener à une meilleure santé à long terme. Notre article explore dans un contexte canadien le nombre de gens qui retournent dans les refuges et examine les facteurs liés aux retours à l'itinérance.

MÉTHODE : L'échantillon comprenait 634 hommes adultes ayant participé à des programmes de transition dans un grand refuge pour sans-abri à Montréal (Québec) entre 2011 et 2014. Nous avons employé des techniques de statistique descriptive, d'analyse de survie et de régression logistique multinomiale pour examiner en quoi les éléments psychosociaux, le profil démographique et les facteurs contextuels étaient liés aux retours au refuge sur une période de suivi d'un an.

RÉSULTATS : Environ 38 % des personnes de l'échantillon sont retournées au refuge au cours de l'année suivant leur départ du programme. Un retour était associé positivement au manque d'appui des amis et de la famille ($p < 0,05$) et au départ imposé du refuge ($p < 0,05$). Le manque d'appui était également associé à un retour plus rapide ($p < 0,05$) au refuge, tout comme le départ imposé ($p < 0,01$).

CONCLUSIONS : La création de réseaux sociaux et la modification des programmes pour tenir compte des personnes à risque élevé de se voir imposer de partir pourraient réduire le nombre de retours à l'itinérance et améliorer par la suite les résultats sanitaires.

MOTS CLÉS : itinérance; retours; psychosocial; politique