

Examining and Conceptualizing the Lived Experience of Resilience for Homelessness: A Life-Course Perspective

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FUNDERS



PARTNERS



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Resilience

- Differentially defined based on the population under study and adversity context
- The ability to 'bounce back' following hardship
- More than just survive in the face of adverse and traumatic life experiences—they thrive
- 'Post-traumatic growth'
- Multifaceted and fluid

Resilience Contested

- Psychology/Psychiatry: individual-level factors and personality characteristics
- Individuals exist within broader environments and socio-cultural structures
- Varying contexts and resources contribute to (or detract from) situational and relational resiliency



Late Life Resilience

- General older adult populations are resilient when confronted with late life challenges and losses
- Experience new adversities in later life
- Enter late life with past experiences of trauma, childhood abuse, or lifelong poverty

Resources for Resilience



Internal

Individual factors (e.g., memories, sense of self, resourcefulness, and lived experience)



External

Interpersonal, socio-structural, and socio-cultural factors (e.g., social support, living environments, health services, and cultural resources)

Disparities in Resilience



Resilience Among Persons Experiencing Homelessness





Resilience Among Older Persons Experiencing Homelessness

- Hope, spirituality, and faith
- Wisdom
- Identity management (reject labels)
- Self-identify as caring and nurturing

Study Aim

To identify conceptualizations of resilience for research, policy, and practice in existing literature and integrate with findings from a community-engaged research project on health supports needed for persons experiencing homelessness upon hospital discharge.

Theoretical Underpinnings

Life Course Perspective

- Human agency fluctuates according to micro-, meso-, exo-, and macro-systems over time; and that such dynamic interactions between the agency and the systems collectively inform experiences and trajectories of resilience
- Potential for the development of resilience as a consequence of cumulative adversity

Methods

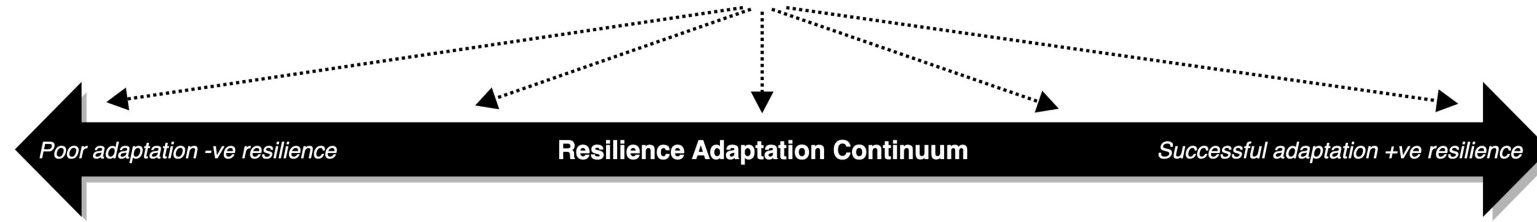
Literature review of existing conceptualizations of resilience and cumulative adaptive capability across the life course



Secondary analysis of in-depth interviews with 10 shelter/housing providers, 10 hospital-based social workers, and 20 persons with lived experience of homelessness in Vancouver, BC (Oct 2017-Jan 2018)

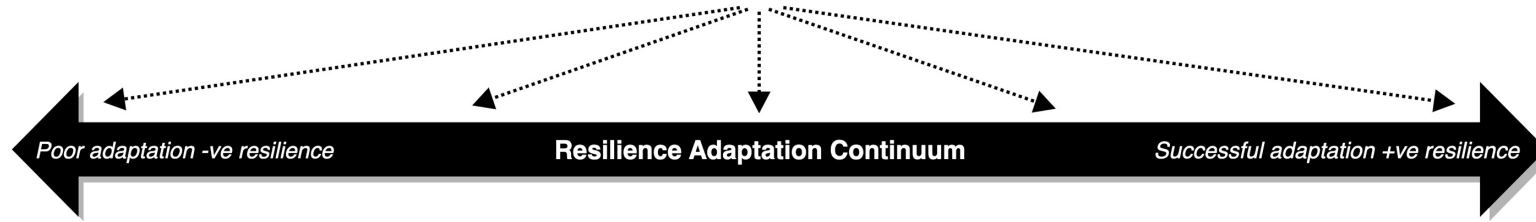
CONCEPTUAL MODEL OF RESILIENCE

Macro-, Meso-, Exo- & Micro-level Resilience Factors

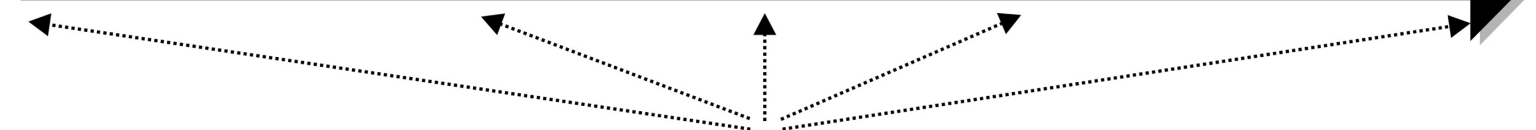


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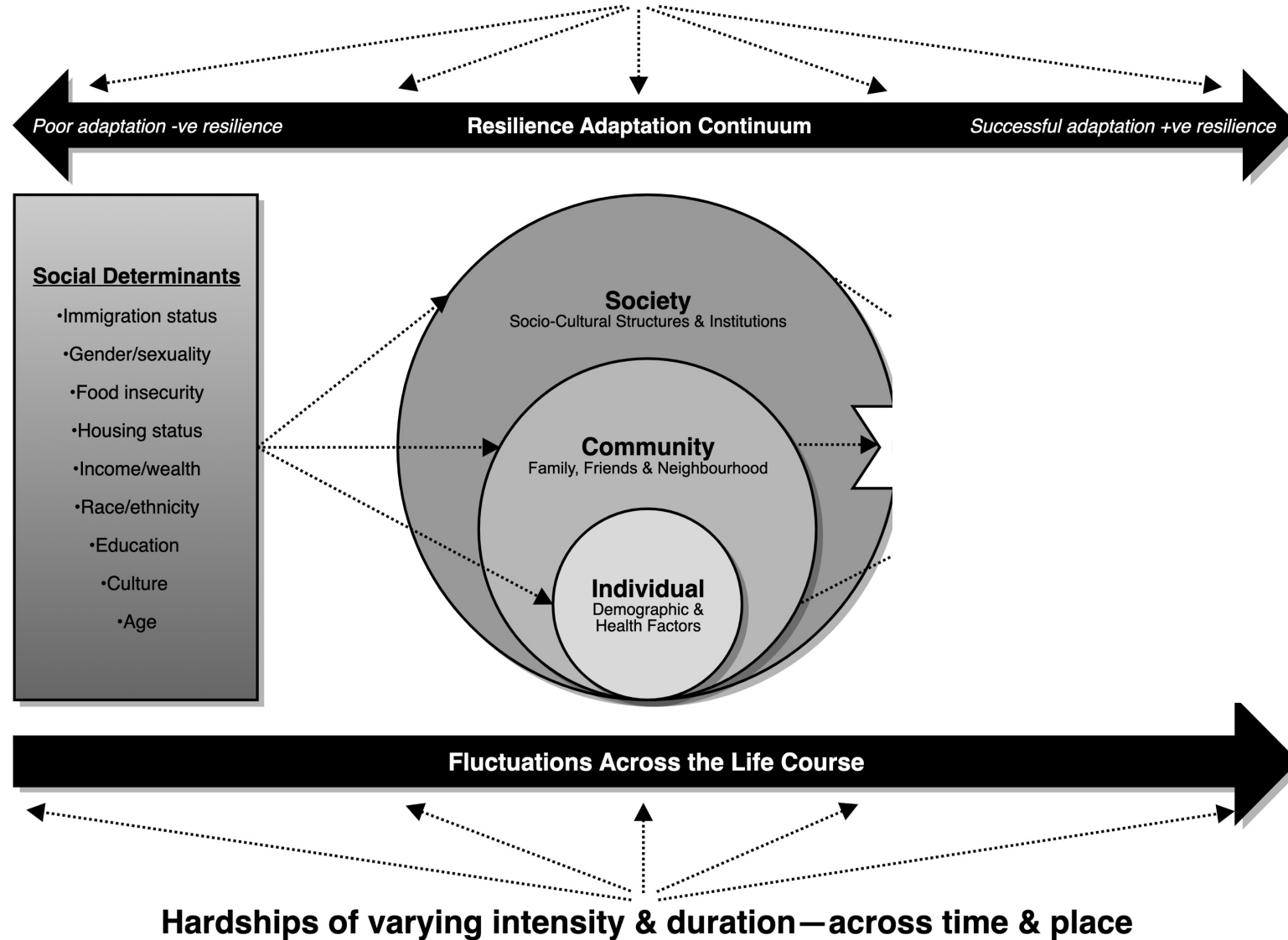


Hardships of varying intensity & duration—across time & place



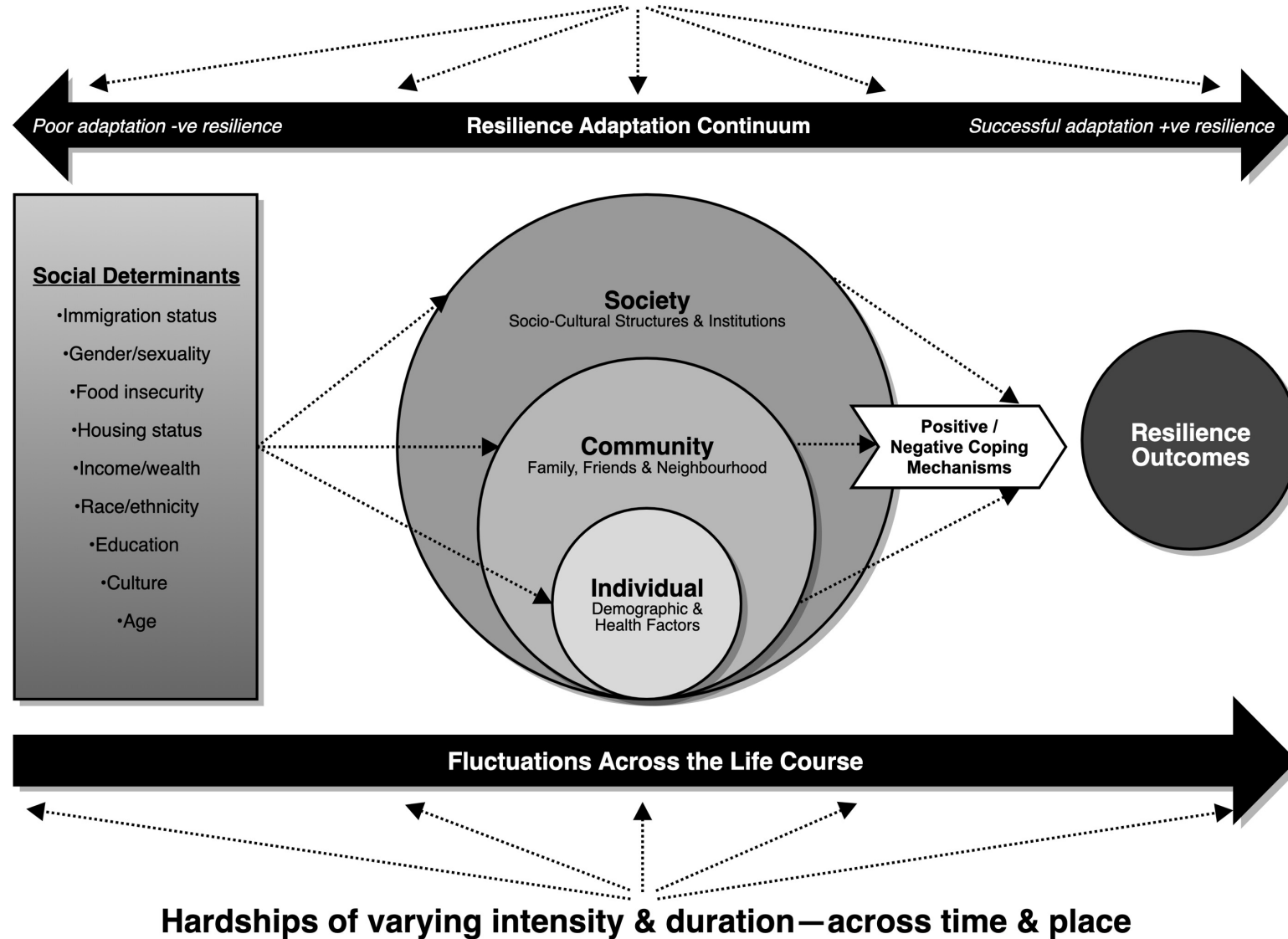
CONCEPTUAL MODEL OF RESILIENCE

Macro-, Meso-, Exo- & Micro-level Resilience Factors



CONCEPTUAL MODEL OF RESILIENCE

Macro-, Meso-, Exo- & Micro-level Resilience Factors



Micro-System: Individual-Level Resilience Factors



"INNER STRENGTH"



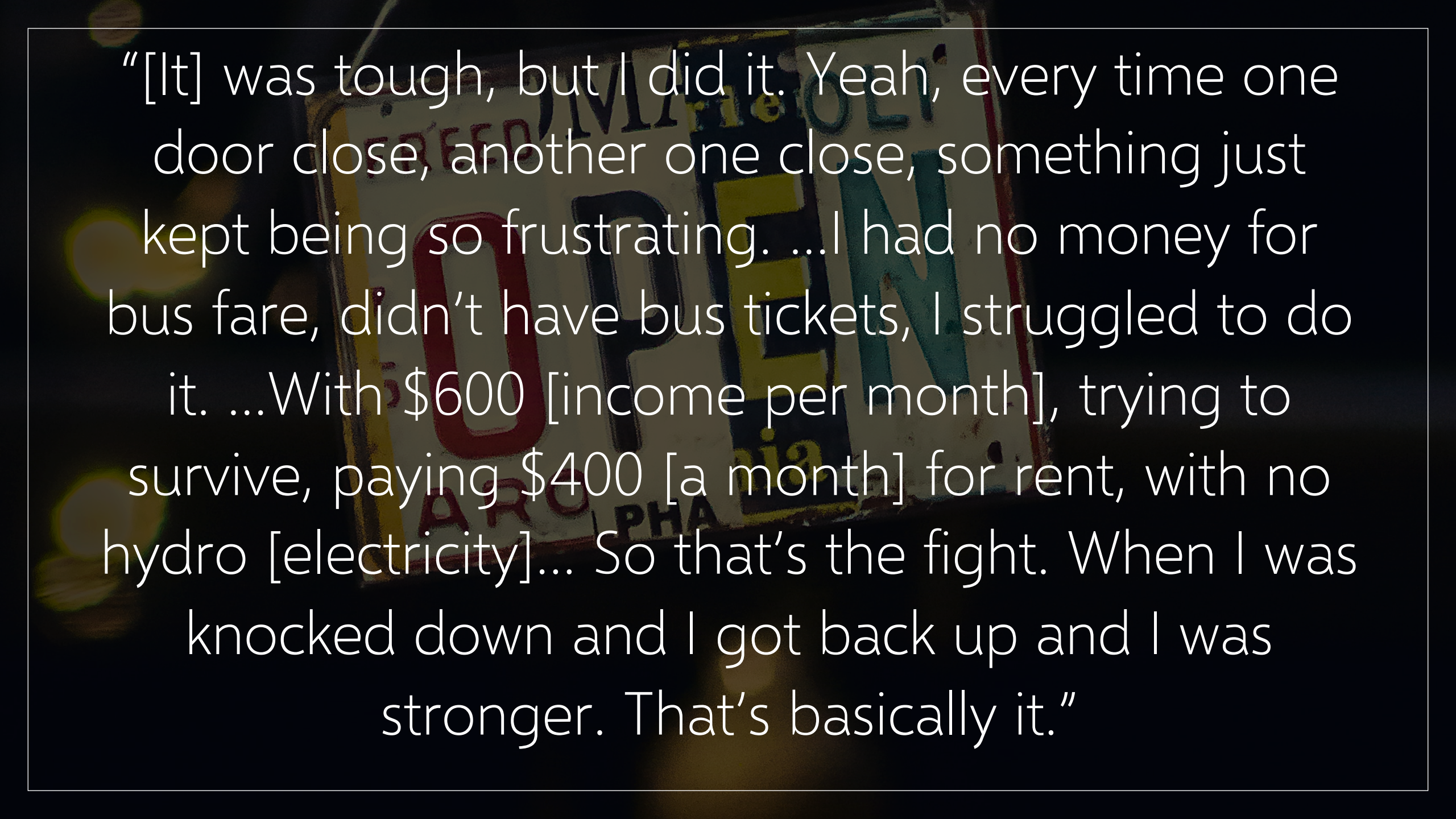
MOTIVATION FOR AND
ATTITUDE TOWARDS
TREATMENT ADHERENCE



SELF-DIRECTION AND
DETERMINATION

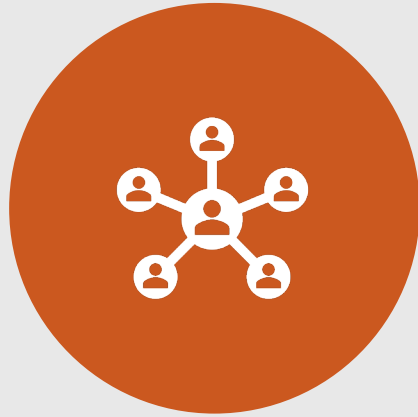


INCLUSIVE DECISION-
MAKING PROCESS
(ENGAGE/EMPOWER
HOMELESS OLDER
ADULTS)

The background of the image is a dark, textured surface. In the center, there is a rectangular sign with the words "DO NOT OPEN" in large, bold, capital letters. The "DO" is in red, "NOT" is in black, and "OPEN" is in blue. Above the sign, there is some faint, illegible text. To the left of the sign, there is a red handle or lever. The overall image has a gritty, industrial feel.

“[It] was tough, but I did it. Yeah, every time one door close, another one close, something just kept being so frustrating. ...I had no money for bus fare, didn’t have bus tickets, I struggled to do it. ...With \$600 [income per month], trying to survive, paying \$400 [a month] for rent, with no hydro [electricity]... So that’s the fight. When I was knocked down and I got back up and I was stronger. That’s basically it.”

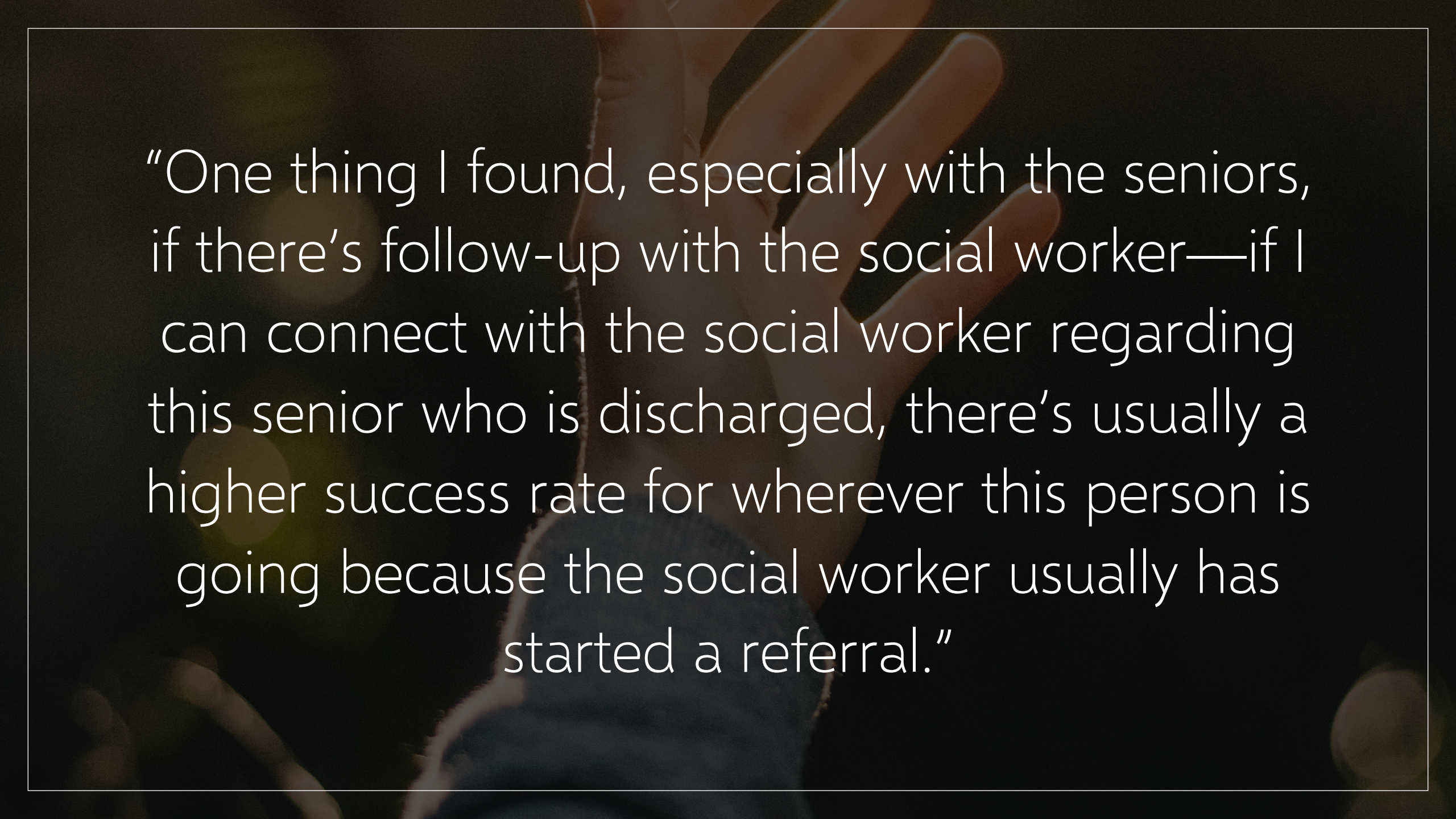
Meso-System: Interpersonal-Level Resilience Factors



HARNESSING FORMAL SUPPORTS FROM TRUSTED SERVICE PROVIDERS (I.E., SOCIAL WORKERS, HOSPITAL STAFF, TRANSPORTATION PROGRAMS, NATIVE COUNSELORS) AND INFORMAL SUPPORT NETWORKS (I.E., CHILDREN, NEIGHBORS, HOMELESS PEERS)



SUPPORTIVE HOUSING AND IN-HOME SERVICES (E.G., HOUSEKEEPING AND MEAL PREP)

A close-up photograph of a hand reaching out, with fingers slightly spread, set against a dark, blurred background. The hand appears to be wearing a blue sleeve. The lighting is soft, highlighting the texture of the skin and the fabric.

“One thing I found, especially with the seniors, if there’s follow-up with the social worker—if I can connect with the social worker regarding this senior who is discharged, there’s usually a higher success rate for wherever this person is going because the social worker usually has started a referral.”

Exo-System: Socio-Structural Resilience Factors



SHELTER
ENVIRONMENT
ACCESSIBLE FOR
THOSE WITH
MOBILITY
CHALLENGES



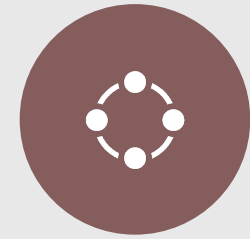
AVAILABLE,
AFFORDABLE, AND
APPROPRIATE
HOUSING




LIVING
ENVIRONMENT
OFFERS
AUTONOMY,
DIGNITY, SECURITY,
AND PRIVACY



CONTINUITY OF
COMMUNITY
RESOURCES THAT
MEET COMPLEX
HEALTH NEEDS
(AVAILABILITY OF
AND ACCESS TO)



OPERATIONAL
POLICIES (E.G.,
OPEN HOURS,
HARM REDUCTION)

A photograph of a shelter room, likely a dormitory or temporary housing. The room features black metal bunk beds with white bedding. On the lower bunk, there are folded white towels, a small black card, and a bunch of bananas. A window in the background shows a view of a city street with buildings and trees. A black fan is visible in the bottom left corner. The text is overlaid on the image in a white, sans-serif font.

“The most challenging part is they go from a hospital—somewhere that everything is provided for them—into the shelter...There’s minimal support within the shelter setting because of the large number of clients that we do have and the limited services we can provide.”

Macro-System: Socio-Cultural Resilience Factors



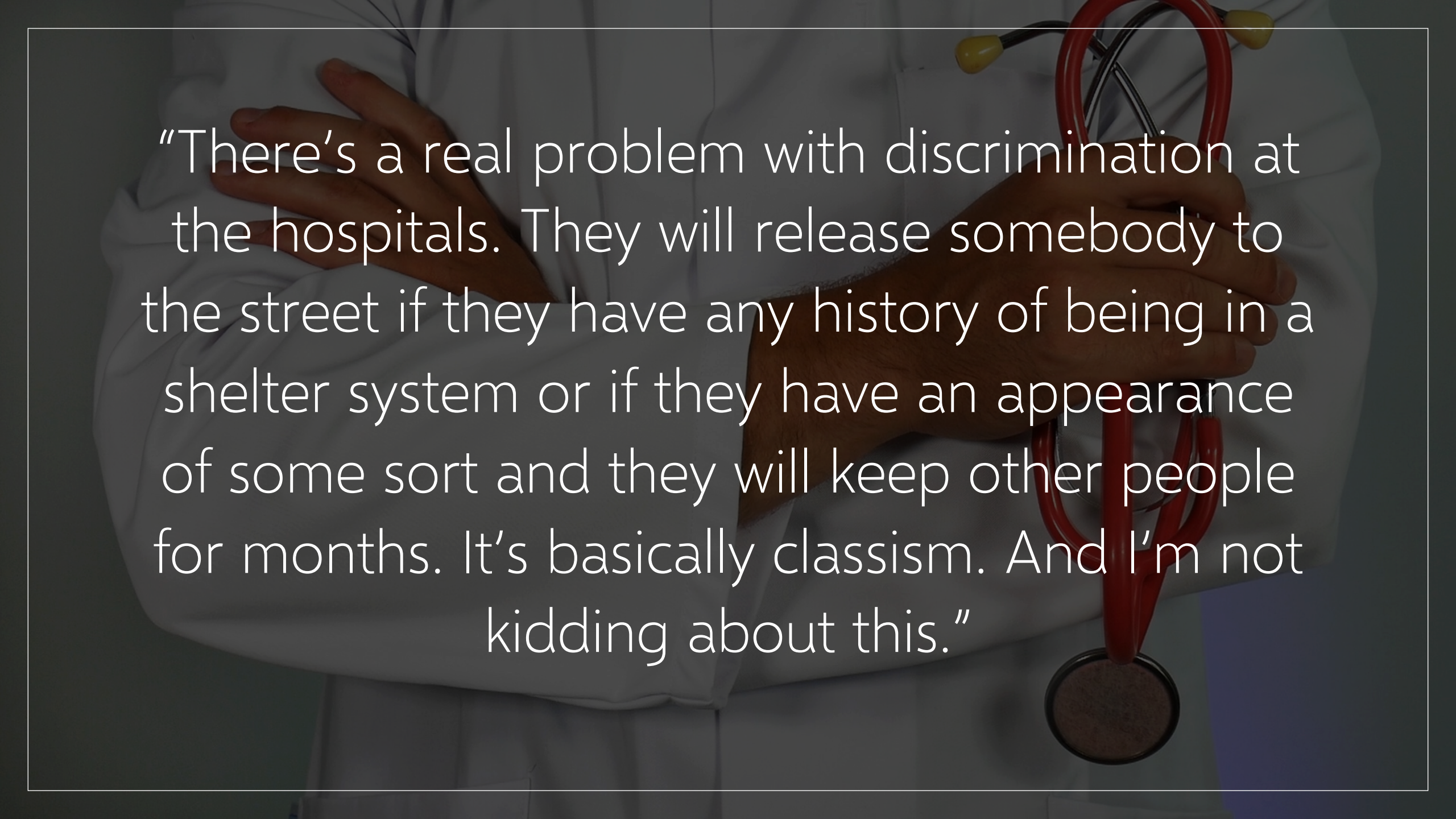
SOCIAL PERCEPTIONS OF
HOMELESSNESS, MENTAL HEALTH,
SUBSTANCE USE, AND POVERTY



TRAUMA-INFORMED PRACTICE



STRENGTHS-BASED CARE

A background image showing a doctor in a white coat with a red stethoscope around their neck. The doctor's hands are visible, one holding a patient's arm. The image is dimmed to serve as a background for the text.

“There’s a real problem with discrimination at the hospitals. They will release somebody to the street if they have any history of being in a shelter system or if they have an appearance of some sort and they will keep other people for months. It’s basically classism. And I’m not kidding about this.”

Future Research

Explore positive coping (joining a support group) and negative (hoarding) coping strategies of homeless older adults and how these are associated with resilience

Implications for Policy and Practice

Physical

Shelter/housing
locations
should offer
services and
supports

Social

Support and
facilitate peer
networks

Cultural

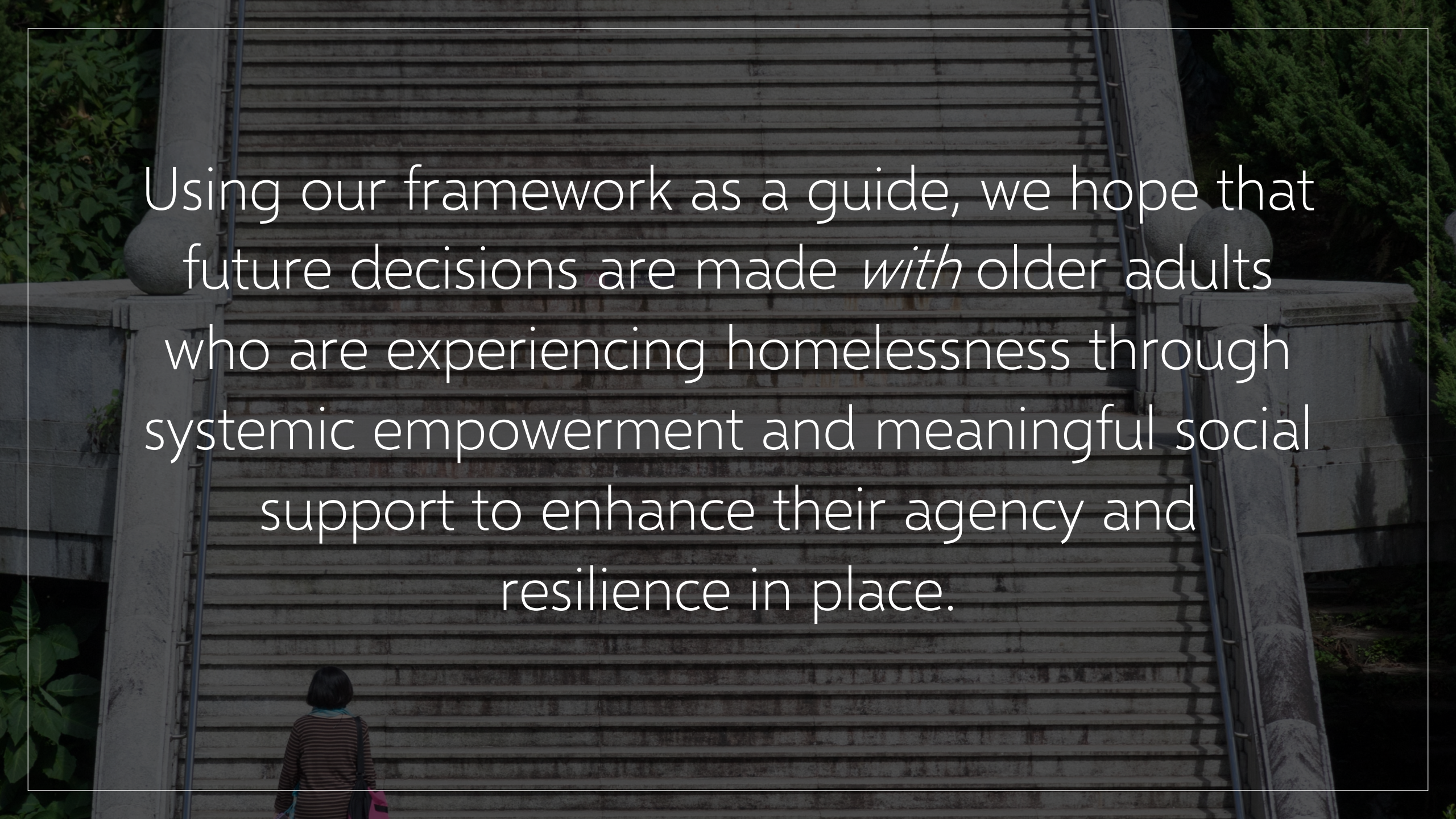
Embed cultural
safety in service
considerations

Systemic

Remove
procedural
barriers to
accessing
services

Institutional

Eliminate
structural
stigma

A person with short dark hair, wearing a striped shirt and carrying a bag, stands at the bottom of a long, wide stone staircase. The person is looking up the stairs. The text is overlaid on the image in a white, sans-serif font.

Using our framework as a guide, we hope that future decisions are made *with* older adults who are experiencing homelessness through systemic empowerment and meaningful social support to enhance their agency and resilience in place.



Thank You!

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