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Lifted: A thematic analysis of homeless adolescents' reflections on their lives since beginning a multifaceted, community-based intervention

Linda M. Raffaele Mendez^{a,*}, Camille A. Randle^b

- a Fairleigh Dickinson University, United States
- ^b University of South Florida, United States

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ABSTRACT

The purpose of this study was to gather in-depth information from unaccompanied homeless youth (UHY) regarding how they perceived that a wraparound intervention in which they had been involved for at least one year had impacted their lives. Towards this end, we conducted individual face-to-face interviews with nine unaccompanied homeless youth (UHY) who were receiving services from Starting Right, Now (SRN), a unique, multifaceted, grassroots initiative located in the southeastern U.S. that provides multiple services to UHY who have remained in high school. These services include housing, one-to-one mentoring, tutoring, assistance with applying to college, and specialized trainings to support academic and personal development. In each interview, participants described how their lives had changed since they entered SRN and what they had learned from the program. Using thematic analysis across participants, we identified eight themes that we saw as fitting within three broad categories: (1) constructing new models of relationships, (2) learning adaptive strategies for living, and (3) increasing hope, direction, and purpose. These three themes coalesced into an overall essence that we termed "lifted." We chose this term because the totality of participants' experiences suggested that SRN had lifted participants out of the poverty and trauma of their childhoods and, through a comprehensive approach with personalized supports, helped them get to a place where they could focus on higher-level needs like individual growth and educational attainment. Implications for providing services to UHY are described, and avenues for continuing research to support this population are highlighted.

1. Lifted: A thematic analysis of homeless adolescents' reflections on the impact of a multifaceted, community-based intervention on their lives

Among youth placed at risk due to environmental adversity, unaccompanied homeless youth (UHY) are among the most vulnerable (Rahman, Turner, & Elbedour, 2017). UHY are youth who have separated from their families and are no longer living in the custody of a parent, legal guardian, or institutional care (McKinney-Vento Homeless Assistance Act, 2002). During the 2017–2018 school year, there were approximately 1.5 million homeless children/adolescents enrolled in public schools in the U.S. [National Center for Homeless Education (NCHE, 2020)]. Of those, 129,370 were UHY (NCHE, 2020). From 2016–2017 to 2017–2018, the percentage of UHY in the U.S. grew by 16%, which is similar to the overall rate of growth in the number of homeless students (NCHE, 2020). Importantly, specialized supports for UHY are often very limited and less comprehensive than this population

requires. As such, there is a critical need for communities to develop intensive interventions for this population and to evaluate their effectiveness. Our purpose in conducting this study was to examine how one such program called *Starting Right, Now* (SRN) was perceived by UHY to have impacted their lives.

1.1. Unaccompanied homeless adolescents

There is a small body of literature exploring how UHY become unaccompanied and the risks this population faces. The extant research suggests that many UHY become homeless for reasons beyond their control (Miller, 2011). Previous research has identified common pathways to adolescent homelessness including traumatic experiences that result in ongoing psychological disorders [e.g., posttraumatic stress disorder (PTSD)], substance use problems, family dysfunction, and abuse or neglect (Martijn & Sharpe, 2006; Tyler & Schmitz, 2013). It also is common for UHY to experience frequent transitions in and out of

^{*} Corresponding author at: Fairleigh Dickinson University, School of Psychology and Counseling, 1000 River Road, T-WH1-01, Teaneck, NJ 07666, United States. E-mail address: Raffaelemend@fdu.edu (L.M. Raffaele Mendez).

their homes (Tyler & Schmitz, 2013).

Compared to housed adolescents, UHY are at increased risk for physical health problems, sexually transmitted diseases, substance use, and mental health concerns (Noell et al., 2001; Weinreb, Goldberg, Bassuk, & Perloff, 1998). Some of the most common mental health diagnoses seen among UHY include major depression, PTSD, disruptive behavior disorders, anxiety, and social phobia (Aratani, 2009; Buckner, Bassuk, Weinreb, & Brooks, 1999; Whitbeck, Hoyt, Johnson, & Chen, 2007). The risk of physical and sexual victimization and/or revictimization also is significantly higher for UHY than for housed youth (Whitbeck et al., 2007). Additionally, adolescents who have repeatedly experienced homelessness are more than twice as likely to drop out of high school compared to adolescents who have never experienced homelessness (35% compared to 16%; Aratani & Cooper, 2015).

The UHY population is at even higher risk than adolescents who are homeless within the context of a family or support system because they often have only themselves to rely on to meet basic needs. Some of these students may be living on the streets, but many "couch surf," staying with friends or extended family until they are no longer able or welcome. Some of these students have been pushed out of their homes (e.g., asked to leave due to family discord, locked out) while others choose to leave because their living conditions are so aversive. The primary difference between homeless adolescents and UHY is that homeless adolescents still live within the context of a family that is homeless; UHY are living on their own without the support of a family.

1.2. Interventions for homeless youth

Due to the high levels of risk faced by UHY, multifaceted interventions have been recommended to address all aspects of their lives and span home, school, and community environments (Ferguson, 2007). To date, however, few boundary-spanning interventions exist. Most commonly, UHY turn to agencies providing temporary emergency services including access to food, shelter, clothing, or healthcare through interventions like drop-in centers, runaway shelters, and school-based services (De Rosa et al., 1999). While these services have been found to provide short-term positive outcomes for UHY (Thompson, Pollio, Constantine, Reid, & Nebbitt, 2002), the high return rate of discharged youth (Baker, McKay, Lynn, Schlange, & Auville, 2003) indicates that these services are inadequate to meet long-term needs. Mentoring programs for UHY have shown promise in decreasing problem behaviors like substance abuse (Bartle-Haring, Slesnick, Collins, Erdem, & Buettner, 2012), although research on such interventions is quite limited.

For those UHY who continue to attend school, the McKinney-Vento Homeless Assistance Act provides certain protections to students, including allowing youth to remain in the school associated with their last place of residence and providing transportation to and from school (e.g., for students who may be staying temporarily with a friend or family member). Nonetheless, Aviles de Bradley (2011) found that although schools are legally mandated to inform homeless students of the rights and services afforded to them by the McKinney-Vento Act, many UHY report never receiving such information.

In addition to the services noted above, there are a handful of multifaceted, community-based interventions that have been developed for UHY. One such program is the Social Enterprise Intervention (SEI). SEI is an emerging model for intervention for homeless youth that seeks to reduce mental health symptoms and high-risk behaviors and increase social support and utilization of services (Ferguson, 2007). Ferguson and Xie (2008) found that after nine months of participation in SEI, homeless youth displayed significant increases in overall life satisfaction, contact with family, and peer social support, as well as a decrease in depressive symptoms.

SRN, the program from which participants in this study received services, is another newer, multi-faceted community-based intervention. SRN is a grassroots initiative designed to end the cycle of homelessness by providing wraparound services to UHY who have remained in high

school despite no longer living in the custody of a parent or guardian. Developed by Vicki Sokolik in 2009, the program is funded by private donations and grants. Youth are referred to the program through social workers at their high schools. Most youth are admitted in their junior or senior year of high school. Once referred, youth are interviewed by the program director to ascertain whether they are truly in need of SRN services and whether they seem to be a good fit for the program. Fit is based the youth's physical and mental health needs, motivation, and agreement to comply with the program's rules. Once they sign the SRN contract, students move into the SRN house (a former runaway shelter purchased by SRN), which accommodates approximately 40-50 students. They also are assigned a volunteer mentor from the community trained by SRN staff. Girls are always assigned female mentors; boys can be assigned either a male or a female mentor. Some participants are assigned a married couple as mentors. SRN students talk or text with their mentors every day. Their mentors also take them to restaurants, shopping trips, and sporting events, depending on their mutual interests. SRN participants also regularly attend social, personal, and professional development workshops. SRN also meets individual needs for medical, dental and vision care, mental health services (including hospitalization if needed), tutoring, clothing (e.g., a dress for the prom), and any other item or service that is deemed to be important to a student's academic or personal success. To remain in the program, youth must attend school on a regular basis, maintain a job for 20 h per week, contribute a portion of their earnings to household living expenses, earn grades at or above a C, be involved in one extracurricular activity per year, and attend all mandatory SRN meetings and trainings. Youth are able to remain in the program indefinitely, as needed, if they continue to meet these requirements. At the time this study was conducted, there was one SRN house in a southeastern state. There is now an additional house in the same state and plans for expansion to other cities. Each house has adult chaperones who live in the house with the students.

Students in SRN can remain in the program following high school if they choose. Some continue to live in the SRN house if they attend college locally; others move out of the house and live in college housing. Those who move out to attend college can return to the SRN house during holiday and summer breaks while they are college students.

Although SRN was not developed according to one particular theory, a logic model was developed by SRN staff to guide the work of the organization (SRN, 2020). The long-term goal of SRN is to reduce the number of young adults experiencing homeless and poverty. To realize this goal, the organization's short-term objectives include the following: (1) provide access to safe, stable, clean permanent housing, (2) provide access to resources that support physical, mental, social, and emotional health, (3) promote increased engagement in education and knowledge through a focus on academics, career readiness, financial literacy, and life skills, (4) cultivate autonomy through problem-solving skills, coping strategies, and a motivated mindset, and (5) harness local transformations and larger political capital through the development of legislation and policies focused on helping youth (SRN, 2020).

From a theoretical perspective, these short-term objectives are closely aligned with Maslow's hierarchy of needs (Maslow, 1943). Within Maslow's theory, human needs are arranged in a pyramid with lower level needs at the bottom and higher level needs at the top. The five levels of needs are: (1) physiological needs (e.g., food, water, shelter), (2) safety needs (e.g., personal security, resources), (3) love and belonging (friendship, sense of connection), (4) esteem (e.g., respect, self-esteem), and (5) self-actualization (e.g., desire to reach one's full potential). It is only when needs at the bottom of the pyramid are met that increasingly higher levels of need on the pyramid become salient for an individual. The short-term objectives of SRN aim to meet basic needs (e.g., safe and stable housing) so that higher level needs (e.g., education, career development, personal development) can be met.

There is currently no published research on outcomes for students who have participated in SRN. However, Esposito (2018) conducted a quantitative dissertation study with a small sample of SRN students (*N*

= 10) in which she examined self-perceptions of changes in well-being (i.e., life satisfaction, hope agency, and hope pathways) at baseline (program entry), 6 months, and 1 year. Using a Wilcoxin signed-rank test to examine differences between time points given the small sample size, she found significant increases in all three indicators of well-being at 6 months but no additional changes at 12 months, although only 5 participants remained in her sample at the 12-month data collection point. Contrary to her hypotheses, no changes in self-perceptions of the use of maladaptive or adaptive strategies were found at either time point. However, the small original sample size and attrition of half of the sample were major limitations that must be considered in interpreting the findings. The current study expands upon this research through interviews conducted with youth who had been in SRN for at least one year.

The goal of the current study was to examine how participants themselves perceived that their lives had been impacted through participation in SRN in their own words. We chose this specific focus because, as described above, SRN is a unique, multi-faceted program that has very minimal empirical study. To our knowledge, there are no other programs like SRN in the United States. Given this, we wanted to provide UHY who had participated in the program with the opportunity to reflect on their experiences in SRN through a largely unstructured interview where they could compare their lives prior to and after participation in SRN. In doing so, we endeavored to capture the experiences that participants saw as most salient for them and how they believed they were impacted by these experiences. Ultimately, we believe that the themes that emerged from these interviews can: (1) help others who are in a position of serving UHY understand how a multifaceted program like SRN impacts participants, and (2) guide future empirical research on SRN by identify keying program elements and processes that merit further study.

2. Method

2.1. Setting and background

This study took place in a large southeastern city of the United States where SRN was established. The researchers were from a local university where the lead researcher (the first author) was a faculty member in a school psychology training program. The other researchers, including the individual who conducted the interviews, were students in the program and members of the first author's research team. The researchers had no other involvement with SRN other than to conduct research on the program. The collaboration between the research team and SRN came about when the founder of SRN reached out to an acquaintance at the local university to see if she might help SRN investigate its outcomes. When that faculty member did not have time to work with SRN, she e-mailed others at the university who might be interested. The lead author was one of several faculty members who received that email. She then contacted the founder of SRN, and they set up a meeting to discuss working together. The research team designed the study described in this paper independent of input from anyone at SRN. Additionally, none of the other members of the research team were familiar with anyone from SRN before the study was conducted. This also is true for the interviewer who only had contact with participants during the two interviews that she conducted with them.

At the time of the interviews, none of the authors of this study had worked directly with UHY although all had worked in schools with youth placed at-risk due to environmental adversity. Both authors were aware of the supports and services received by participants in SRN through conversations with the director, but the only other contact they had with anyone from SRN was when the first author attended a fundraising luncheon for the organization. It was through reviewing the transcripts that the first and second authors became familiar with participants' experiences in the program. As such, neither held any preconceived notions about how students perceived the program or—more

broadly—how UHY might respond to a wraparound intervention like SRN.

2.2. Participants

Nine UHY who received services from SRN for at least one year participated in this study. Five of the participants were in their junior year or entering their senior year of high school, and four were in their first year or entering their second year of college at the time of the interview. All had entered SRN while they were UHY attending high school in one city within a southeastern state. Most participants signed their own informed consent because they were 18 or older. For the two participants who were 17, a parent or legal guardian provided consent. Participants' pseudonyms, genders, ages, self-identified ethnicities, and reasons for homelessness (all self-reported) are displayed in Table 1. A summary of risk and protective factors experienced by participants prior to entering SRN is also shown in Table 1. These risk and protective factors were gleaned from individual interviews with each participant conducted approximately one week prior to the interviews for the current study. The prior interviews focused on participants' lives before enrolling in SRN; results from those interviews are described in another publication (Raffaele Mendez, Dickinson, Esposito, Connolly, & Bonilla,

2.3. Measure

Participants were given the following prompt to begin the interview: "Please tell me about your life from the time you began in SRN to the present day." All participants had previously participated in an interview in which they told the story of their life experiences from birth to the point when they entered SRN. The interview for the current study typically took place within a week of the first interview. [Results from the first interview can be found in Raffaele Mendez et al. (2018)]. Because participants in this study had just recently told the same interviewer the story of their lives prior to involvement with SRN, they spontaneously tended to focus on what was different for them since beginning in SRN. The interview prompt was intentionally kept brief and open-ended so that participants could highlight what they believed was most important. All participants told their stories from the time they started in SRN to the present day in chronological order, with the interviewer periodically summarizing what was said and asking clarifying questions to ensure that their statements were understood. The interviewer was careful not to ask any leading questions or to make any assumptions about how participants perceived their experiences in the program.

2.4. Procedure

After receiving approval to conduct the study from the Institutional Review Board at the university where the research team was based, participants were recruited through a flyer displayed in the SRN office (which students regularly visited) explaining the study and offering a \$25 gift card for participation. Students regularly come to the office for tutoring, workshops, to talk to staff, etc. Those who had been in SRN for more than one year and wanted to participate after seeing the flyer emailed a member of the research team to schedule an interview. All interviews were conducted by the same interviewer, a graduate student in School Psychology with a master's degree in counseling and considerable experience interviewing youth. Pilot interviews were conducted with the first two participants to confirm whether the interview prompt was adequate to elicit the participants' stories. When the interview prompt was confirmed by the first author to be adequate, those two pilot interviews were included in the final sample. Most interviews were completed in 45-60 min. All interviews were tape-recorded with participant consent and subsequently transcribed.

No additional data was collected to supplement the student

 Table 1

 Demographic information for participants.

Pseudonym	Gender	Age	Grade at interview	Ethnicity	Reason for homelessness	Risk factors described in life stories	Protective factors described in life stories
Alison	Female	17	11th grade	Hispanic American	Escaping abuse	SA, PA, EA, HF, MC, AR, FM, FF	Н
Charlotte	Female	19	College freshman	Caribbean American	Abandonment	SA, PA, HF, MC, AR, CA, FM, FF	A, H, SF, V
Donald	Male	19	College freshman	European American	Discord with stepparent	PA, EA, HF, AR, FM	A, V
Erica	Female	19	College freshman	European American	Escaping abuse	SA, PA, EA, MIC, CSA, AR, CA (FM, FF)	(AA), SF
Isaac	Male	19	College freshman	African American	Family homelessness	PA, HF, FM, FF	AA, SF, A
Lisa	Female	20	College freshman	European American	Could not afford rent after roommate moved out	SA, PA, EA, HF, CSA, MC, AR, CA (FM)	SF, V, J
Martin	Male	17	11th grade	Caribbean American	Family homelessness	PA, HF	Н
Nathan	Male	20	College freshman	African American	Parent incarceration	PA, HF, CSA, MC, CA	AA, H, A, SF
Robert	Male	18	College freshman	European American	Told by parent to leave	PA, HF, CSA, CA	AA, J

Key: SA = Sexual abuse, PA = Physical abuse, EA = Emotional Abuse, EA

AA = Strong athletic/artistic ability, A = Strong scholastic achievement, H = Hope/optimism, SF = At least one close, supportive friend, V = Valuing of school, J = Ability to find and keep a job.

interviews. This is because the purpose of the study was to understand student perspectives.

2.5. Data analysis

Transcribed interviews were loaded into Atlas.ti, and interviews were analyzed using the six-step guidelines for thematic analysis proposed by Braun and Clarke (2006). To begin, both authors independently read through each transcript while simultaneously listening to the recording of the interview. While reading and listening, both authors highlighted what they perceived to be key points made by the participants and took notes on commonalities across transcripts. Based on these notes and highlighted text from the interviews, the second author developed an initial codebook that was added to and refined by both authors as coding progressed. The codebook included codes like "Student discusses relationship with mentor" and "Student discusses family." Interviews were then coded independently by both authors using the codebook. Final codes for each transcript were decided upon collaboratively. After coding the interviews, the authors collaboratively searched for themes to answer the research questions. Moving from codes to themes involved asking the question: "When a student is talking about a topic (e.g., relationship with mentor), what is he or she saying?" In other words, while codes were based on the subject about which the participant was speaking, themes were focused on what the participant was saying about that subject. The goal of thematizing was to identify how participants described the impact of SRN on their lives. In other words, how did they compare their lives before SRN to their lives at the time of the interview? The authors completed the thematizing did so without directly considering any particular theory. Rather, they aimed to remain close to the participants' own words, with multiple direct quotes from participants identified to represent each theme. Through the thematizing process, 27 unique codes were collapsed into 8 themes. After themes had been identified and agreed upon, the authors selected direct quotes from the participants that best represented the overall concept of each theme. They collaboratively agreed on the final themes and essence. No member checking occurred because it was difficult to arrange times for this once students had returned to college. After themes and the essence were identified, the first author reflected on the themes and noted that they could be grouped into three categories. With the agreement of the second author, a decision was made to use individual themes, broad categories, and an essence to describe the findings. Themes are the common ideas discussed by participants related to the primary research question. Categories are groupings of themes. Finally, the essence is the broad takeaway picture of the results, addressing how all of the themes coalesce into one big idea. The data analysis process concluded by considering how participants' own words mapped on to the goals of the program and Maslow's hierarchy of needs.

3. Findings

Thematic analysis revealed eight themes, each of which fit into one of three categories. In this section, we describe the three broad categories and the themes within each category. Table 2 provides definitions of the categories, individual themes, and how many students discussed the theme in their interviews. We return to the broad categories in the Discussion and integrate our findings with those previously existing in the literature.

3.1. Category 1: Constructing new models of relationships (themes 1-3)

The first three themes we identified all focused on interactions with others in SRN (i.e., staff, mentors, peers) and how these interactions had changed the way that participants viewed relationships. They described learning that adults could be trusted, which transformed how they felt about themselves, what they could/should expect in relationships, and what they could accomplish.

Theme 1: "Always there on my side." The first theme identified focused on the importance of stability that the individual mentors and other SRN staff provided to participants. Given their past experiences with neglect, abuse, minimal structure, and/or chronic poverty, participants appreciated having adults in their lives who were trustworthy and reliable. Charlotte noted, "It gives me a big sense of security. I know that I have people that I can go to when I need help, and I don't have to feel alone." Similarly, referring to her mentor and the SRN staff, Erica stated, "I can't imagine my life without them. They're kind of like a pseudofamily. They're very supportive and they're always there for you. I

Table 2Categories and theme descriptions.

Theme name (source of theme name)	Description of theme	# of participants discussing theme
Category 1 (themes 1–3): constructing	new models of relationships	
Theme 1: "Always there on my side"	Participants described the importance of their mentor and SRN staff in creating a support system that provided	9
(Alison)	emotional support, advice, accountability, and guidance.	
Theme 2: "You learn to trust" (Erica)	Participants described initially questioning the intentions of SRN staff and mentors but over time learning to	7
	trust adults again and asking for help.	
Theme 3: "Better friends" (Erica)	Participants described the development of more and better quality friendships.	8
Category 2 (themes 4-5): learning ada	ptive strategies for living	
Theme 4: "Better ways to deal"	Participants described identification of maladaptive coping patterns and learning more adaptive coping	9
(Nathan)	mechanisms and viewpoints, leading to a restoration of their mental, physical, and emotional health.	
Theme 5: "The point is getting back up"	Participants described setbacks since entering SRN, like transitioning from premature adulthood back into	7
(Alison)	adolescence but also noted the ongoing support of SRN staff and mentors along the way.	
Category 3 (themes 6-8): increased ho	pe, direction, and purpose	
Theme 6: "Didn't have to worry as	Participants described that through the provision of resources, they had to worry less about meeting their	9
much" (Lisa)	basic needs (e.g. housing, food, healthcare), giving them more time to engage in self-development, like	
	preparing for college and engaging in new experiences and activities.	
Theme 7: "Now my goals seem a lot more achievable" (Isaac)	Participants described having increased hope and direction in achieving their goals.	9
Theme 8: "Pay it Forward" (Isaac)	Participants described a desire to help others in difficult circumstances because of the help they received from SRN.	5

never had that until now."

In addition to the sense of security they gained by having a support system, many participants also noted the importance of the emotional support and accountability their mentors and SRN staff provided. Describing her mentor, Alison noted, "I know she is always there on my side. Even if I'm wrong, she'll be there on my side...Yeah, it's good to have that, like a parent." She went on to say, "When you know that you have help, [you don't get] dragged down. Somebody's actually there with you, going through it with you. It gives you more of a feeling to push through."

Although all participants noted the importance of the support system provided by SRN, we did note some gender differences in how students described their relationships with their mentors. More specifically, female participants described quickly establishing strong relationships with their mentors, whereas male participants either described difficulty bonding with their mentors initially and/or described a more distant ongoing relationship. Isaac, for example, described a slow start to his relationship with his mentor. Because he still had regular contact with his family (unlike many of the other students in the program), he noted, "My first semester...I did not start actually being really, I guess, 'one' with my mentor...I did not really utilize her to her full potential." He noted that through regular contact with his mentor, their relationship eventually evolved "to the point where I went and talked to her about anything, to where I do not make any decision without asking her about [it]."

In addition to a slow start to relationships with their mentors, most male participants described a more distant and/or instrumental bond with their mentors than did females. All but one of the male participants described the support of their mentors in the context of helping to meet specific momentary needs (instrumental support), like access to resources (e.g. transportation, jobs) or problem-solving (e.g. encounters with law enforcement and enrollment in school). For example, Donald, who was assigned a husband and wife pair as mentors, described a relatively distant relationship with them. He said, "They were there for me, but never in any sort of profound way...so I was like, well, what now?" His words suggested to us that other than seeking his mentors' assistance as needed to meet specific momentary needs, he either did not want or did not know how to further engage in a meaningful relationship with them.

Theme 2: "You learn to trust." The second theme we identified focused on the issue of participants' trust in adults. Given past experiences with adults who had frequently let them down, participants described difficulty trusting other people (i.e., their SRN mentor, other SRN staff) when they first entered SRN. For example, Charlotte shared

her experiences with trusting adults prior to SRN:

Before SRN, I didn't trust anyone because I felt that they were only looking down on me, even my family. ... I felt like everyone just wanted to break me down and they didn't want to see me do better. But it was crazy how complete strangers who I didn't know ... believed in me more than family who I grew up with my entire life.

Some participants described how prior to SRN, they felt like they could rely only on themselves. When describing first entering SRN, Lisa stated, "In the beginning I was like... these people don't want to help me, they don't know me. Why are they doing this?" Over time, SRN staff and mentors proved that they could be trusted through being consistent and expressing ongoing care despite any resistance that arose from the youth. Martin noted, "Coming here to [the SRN office] every day, getting things done, or having someone doing something for you that will help you out, you [learn that you] can trust them, knowing that they're going to get it done." As such, participants shared that through SRN they not only learned to trust SRN staff and mentors but they also began to be able to open up and trust other people again. As Isaac noted:

 \dots if I did not trust, and that trust did not begin with my mentor, then I do not know that I would have had the relationship that I have with my mom... I did not really like my household. I did not like being there. [But now] I miss every one of them.

Participants learned that adults could have their best interests at heart and actually fulfill commitments. They also learned that they did not only have to rely on themselves and that it was acceptable to ask for help. Alison noted: "It is that time and that effort that people are putting [in]. That they are adults and that I can trust them and that they are working to help me."

Theme 3: "Better friends." The third theme that emerged from interviews was the opportunity to gain better quality friendships since beginning in SRN, given the stable housing afforded through the program. Isaac noted: "More so, they helped me sustain friendships [and] relationships; something that I never had done because the whole moving thing my entire life." Additionally, some participants expressed that their engagement in SRN activities and events allowed them to meet new friends. For example, as Donald described, "I would say [SRN has] given me more friendships and that I was friends with kids in the program."

Participants also noted that they were also able to develop higher quality friendships through being more selective than they had been in the past. They tried to select friends who had similar goals and would help lead them in a positive direction. When describing friendships, Erica said:

As I grew in the program, I think I just got more confident in myself. I learned to get a lot better friends. I had a lot of 'not the nicest' friends in high school especially in the beginning of my years... I made friends with people that really didn't treat me very well because subconsciously I just didn't think I deserved any better.

It seemed that as participants experienced changes in self-confidence, self-concept, and direction through SRN, they wanted to engage with people who would allow them to meet their goals and maintain a good standing in the program.

3.2. Category 2: Learning adaptive skills for living (themes 4-5)

The next two themes we identified focused on learning adaptive skills for living. Given the challenges they had faced in their lives and the limited helpful direction they had received from adults prior to SRN, many participants were using maladaptive coping strategies (e.g., alcohol and drugs, binge eating, self-harm). Through the resources provided by SRN (both people and programs), they learned to identify the maladaptive coping strategies they were using and replace them with more adaptive coping strategies. Notably, the majority of students described setbacks during their time in the program (e.g., challenges with family members, the return of PTSD symptoms), but they also described learning that setbacks are inevitable in life and that adaptive ways of handling setbacks can be found with the support of others (i.e., mentors, SRN staff).

Theme 4: "Better ways to deal." The fourth theme focused on how SRN staff, mentors, resources and/or classes helped participants identify maladaptive coping strategies/behavioral patterns and replace them with more adaptive coping strategies. This helped to restore participants' mental and physical health. Prior to entering SRN, participants often dealt with their stress and trauma through overeating, emotional suppression, angry outbursts, worrying about situations out of their control, emotional breakdowns, negative self-thoughts, lowered expectations, isolation, and/or drugs and alcohol. For example, Alison shared that her family often teased her about being overweight, which made her overeat even more in an attempt to show them that she did not care how they perceived her. However, her mentor helped her identify and change this maladaptive way of coping. Alison stated:

My mentor helped me work through that and find out the reason why I gained like 50 lb in a year... I realized that I was going to food as a comfort and as a rebellion kind of thing. Then I was finally ready to join something to lose weight and my mentor is going with me to every single meeting. [My mentor and SRN staff have] inspired me to get fit and get healthy.

SRN staff also connected some participants to mental health professionals in order to address serious mental health concerns. Erica spoke about her battle with PTSD due to the abuse she endured in the past. She noted that before SRN, she was taught to suppress her feelings by the various adults who raised her, but through being able to turn to her mentor to talk about her problems, discuss healthy life habits, and access mental health support through SRN, she learned more adaptive coping strategies, including exercising. Erica spoke about how SRN staff went the extra mile to find help for her, including how the director of SRN identified mental health treatment for her at an inpatient mental health facility. This was the first place she met others who had experienced similar types of trauma. She stated,

[I] met a couple of women that were also raped, like me...I had never, in my life, met someone else that had gone through it...So, when I went, I had someone to talk to...someone that understood my fear, my flashbacks, what it's like to go through them, and it was a world of help. I mean... I am so grateful to the program for sending me there. I don't know where I would be without what they've

done... I probably would have succeeded in one of my (suicide) attempts I imagine.

Participants also referenced the helpfulness of trainings in changing their negative behaviors and coping patterns. Frequently mentioned were trainings like the Dale Carnegie training, Camp Anytown (diversity training), and Frameworks emotional intelligence classes. For example, Lisa described how before entering SRN she used to turn to drugs and alcohol or scream and cry when faced with life stressors. She noted:

I was really shy before SRN. I didn't really like talking to people I don't know. I probably would've cried the entire time throughout this [interview] if it wasn't for SRN. Dale Carnegie (training) really helped. We had to get up in front of each other and do stories; sometimes we had to do plays.

When asked about how SRN has helped her cope with stress, she also responded that she now talks to her mentor and her mother. Participants also credited other trainings like Frameworks emotional intelligence classes in helping change their behaviors and perspectives. For example, Nathan stated:

It affected (me) in a major way because the way I used to deal with stress is I will take my anger out on you... I kept a lot of stuff bottled up... But now when I am ever too stressed out or feeling angry, I just sit back and think or I go for a walk or something like that. I learned better ways to deal with it, you know, when it comes to letting stuff out and everything.

Participants not only changed maladaptive behaviors, but it became clear that they also changed how they viewed the world and negative situations. For example, Isaac shared:

When I was younger, last year, I put a lot of stuff that was happening to my family on me unnecessarily...And my mentor had to help me realize that I cannot help other people until I have completely helped myself... I do not take care of my sister anymore, and you know, I took that mentality, that like now I feel a lot less stressed about stuff that is out of my control.

Similarly, Nathan shared how his perceptions of the world had changed since being in the program:

...my whole outlook on life was negative. It was like me against the world. [Now, I] let them know that you don't have to be alone out there. That the world is not full of evil, everyone is not going to let you down. So I really like that about the program...When I think about it, I can't do nothing but smile...Changed my whole outlook on everything.

3.3. Theme 5: "The point is getting back up"

The fifth theme captured participants' perceptions that their journey out of homelessness was not all smooth sailing. Every participant described some sort of personal setback while in SRN. For example, some participants had difficulty transitioning away from their families when entering SRN, as Isaac stated:

Just not seeing my family every day, I mean, granted, I usually did stuff to stay away from my home just because I was not really fond of...my house...but after a while that adds up and you know you really start missing the people that you get tired of.

Another common setback described by participants was difficulty transitioning from their premature adulthood prior to SRN back into adolescence, where there were more rules, expectations, and structure than they had before. Of the participants, Donald appeared to have the most difficulty with the rules and expectations set by SRN. "Being treated as a child at the complex for instance with like 11:00 curfew or

drug tests or all sorts of things..." Nonetheless, as he explained, due to the consistent support of his mentor, SRN staff, and the resources they provided, he was able to adapt and start engaging in more prosocial behaviors. Other participant setbacks included feeling overwhelmed by having to care for family members; difficulty navigating encounters with law enforcement; dealing with family conflict; mental health concerns; problems with self-efficacy in college; and mishaps in the application process to college. These challenges often occurred while participants were away from their mentors. Robert, for example, explained the many setbacks he encountered when he quit his job to start attending college. He encountered scheduling and application issues that left him both unemployed and not starting school until the following semester. He stated:

But when [my employment] fell through, and then the schooling fell through, so I was like, 'Dang. There goes the money I was supposed to be getting, and the schooling I was supposed to start...

In describing the issues she faced when she went to college, Erica noted:

Since I was far away, I wasn't really involved much in SRN because I was a whole state away. I didn't keep in contact...But, unfortunately when I was (away), my PTSD started floating up...

Due to a suicide attempt, Erica was hospitalized while at college. However, she described how SRN staff and her mentor supported her through encouragement and access to resources like specialized inpatient care (see Erica's quote under Theme 4).

Overall, although participants described setbacks, they also described how SRN staff and mentors helped pull them through. This concept is best captured by Alison's reflection: "No matter if you screw up a few times, the point is getting back up, and there is always a way. There is always a way with my mentor and Vicki (program director)."

3.4. Category 3: Increased hope, direction, and purpose (themes 6–8)

The final broad category we identified was increased hope, direction, and purpose. As participants were relieved of some of the stresses associated with being unaccompanied and homeless through the resources provided by SRN, they described being able to focus on more age-appropriate activities (e.g., high school, applying to college) and began to see a way out of their current circumstances to a better life. In turn, their hope that they could actually achieve the goals they had set for themselves increased, and many expressed a desire to help others as a way to pay forward what SRN had done to help them.

Theme 6: "Didn't have to worry as much." The sixth theme reflected participants' sentiments that a major benefit of being involved with SRN was not having to spend as much time worrying about meeting their own basic needs (e.g. shelter, food, and healthcare) as they did before. This relieved their stress and gave them more time to engage in self-development. Donald stated, "Having an apartment and job, for what it was worth, and the food stamps, I was able to have a successful last semester. I was able to end with a high note. Pass all my AP (Advanced Placement) classes." Lisa also echoed how having resources to meet her basic needs allowed her to focus more on her education and relieved stress. She stated: "I wasn't really going to school because I worked until 11:30, midnight sometimes. I wouldn't want to wake up at six o'clock and go right back to school...I was always stressed, worried about bills and school...all different stuff." Lisa went on to describe how with her basic needs being met, she felt like she could be a "kid again" and focus on age-appropriate worries like school assignments.

All participants described support in applying to colleges or trade schools and acquiring jobs. Most students explained how prior to SRN they did not know how to approach applying for college and scholarships; however, SRN facilitated the entire process. As Robert noted:

They got me all of my scholarships...I had to tell them about stuff and write essays... but they're the ones who really got it going because I don't know how to do that. I've never done that."

Notably, every participant in the current study was accepted to a college or trade school and received a scholarship. In addition to accessing educational and employment resources, they also described exposure to experiences, events, and activities that they believed they may have never experienced without the assistance of SRN. These included studying abroad and extracurricular activities at their respective schools (e.g., sports and clubs).

Theme 7: "Now my goals seem a lot more achievable." The seventh theme focused on participants' increased feelings of hope in regard to achieving goals while participating in SRN. The majority of participants noted that they had goals before entering, but they did not know how to achieve them. For example, Alison shared that although she once had high educational aspirations, she went into "survival mode" when she became homeless. However, she stated, "Once I came to SRN, I was like ... all these dreams that had been taken away from me [were] renewed." Charlotte also described how her outlook had changed, stating: "With SRN, now I have goals and I'm working towards them... I'm just worrying about how and what I have to do to get me to become a nurse..."

Participants also spoke of how SRN staff helped to cultivate their goals through providing direction on how to achieve them. When asked about goals, Martin noted, "I can see more of a clear path," and Lisa noted, "I didn't think college was even possible for me, but I'm here now getting a degree, hopefully getting a master's..."

Theme 8: "Pay it forward." The final theme that emerged from the interviews was the idea of 'paying it forward.' Many participants noted that SRN inspired them to target career fields that are dedicated to helping other people. For example, Donald shared:

I would be much more open, even willing, to start out and work in a non-profit organization... it's about being fulfilled by something else other than profit...So in SRN, helping me in my kind of desperate situation, and my appreciation towards them, I think in the future, going forward, I'd be more prone to help other less fortunate people.

3.5. The essence: lifted

Overall, participants in this study described how SRN had positively impacted multiple facets of their lives. They spoke of having a support system (often for the first time in their lives), learning to trust adults, making better friends, acquiring adaptive coping skills, overcoming setbacks, increasing hope, attaining goals, engaging in personal and educational self-development, and desiring to help others as a way to 'pay it forward.' When reflecting on the big picture of how participants perceived their lives as having changed since entering SRN, the term "lifted" seems to best encompass the change that participants described. Lift means: "to move (something/someone) to a higher position or condition" ("Lifted," 2004). The term "lifted" in this context communicates the idea that SRN was able to meet the participants where they were, with all of their risk and protective factors, and lift them into better living conditions and to a higher personal and educational standing. It should be recognized that in order to be chosen for the program, participants must already have attributes that the director deemed as beneficial or amenable to change. Nonetheless, SRN was able to build upon participants' attributes, both good and bad, and help them move forward, allowing them to accomplish goals that had once seemed unattainable due to limited resources and support.

4. Discussion

The purpose of this study was to examine how a multi-faceted, community-based intervention for UHY was perceived by participants

to have impacted their lives. Results showed that SRN fostered many of the protective factors known to directly or indirectly build resilience among homeless youth, including problem solving and planning skills, self-esteem, social support, goal setting, decision making, and self-reliant coping (Lightfoot, Stein, Tevendale, & Preston, 2011). Taken together, our thematic analysis suggests three broad areas in which participants perceived that they had experienced change: (1) constructing new models of relationships, (2) learning adaptive strategies for living, and (3) increasing hope, direction, and purpose. It may be that these are some of the mechanisms through which SRN students in Esposito's (2018) study (which included a different cohort of SRN students) perceived a significant increase in well-being after 6 months in the program. Each of these themes is discussed in relation to Maslow's hierarchy of needs and other applicable theories.

4.1. Constructing new models of relationships

Themes 1, 2, and 3 all centered on constructing new models of relationships. Models for healthy relationships were born from participants' interactions with individual adult mentors as well as the entire SRN staff, whom they described as "always there on my side" (Theme 1). These individuals provided emotional support, advice, and accountability to participants. Through having adults in their lives who were consistently helpful and available, participants were able to learn to trust others again (Theme 2) and make friends who supported them and their aspirations (Theme 3).

This first category fits within Maslow's hierarchy of needs in that it reflects the transformation that individuals experience when needs for love and belonging are met. Through supportive interactions with others who genuinely cared about them, participants came to recognize their own self-worth and were more cognizant of seeking friendships that affirmed their value as people (Maslow's esteem needs). This first category is also very closely aligned with attachment theory (Bowlby, 1969). Importantly, participants did not just describe forming new relationships. Rather, they described conceptualizing relationships in a new way as a result of the interactions they had within SRN. Bowlby's notion of internal working models captures the idea that through their interactions with attachment figures, youth develop a prototype of what to expect in future relationships. The sentiments expressed by youth in this study suggest that their participation in SRN altered the prototype of relationships they developed during their childhoods. They transitioned from a model where the "default" mode was that people could not be trusted to recognizing that at least some people could be trusted. This shift seemed to come about over time through consistent and reliable interactions with adult mentors and SRN staff. Recognition of their own self-worth followed from these interactions, making participants more cognizant of seeking friendships that affirmed their value as people. It is notable that SRN takes great care in matching volunteer mentors to participants. Not only do mentors have to be deemed as having being suitable for this role and as having enough time available to devote to participants on a daily basis, they also are matched by the director based on personality and lifestyle.

The importance of supportive adult mentors for participants in this study extends the work of Dang and Miller (2013), who found that UHY value the emotional, informational, appraisal, and instrumental supports provided by their natural mentors (i.e., non-parental adults). Whether through an assigned or a natural mentor, having reliable and consistent social support has been found to have significant protective effects for UHY including improved self-efficacy, life satisfaction, peer support, and mental health (Ferguson & Xie, 2008).

4.2. Learning adaptive strategies for living

In addition to providing participants with opportunities to construct new models of relationships, themes 4 and 5 demonstrate that SRN "lifted" participants through helping them learn adaptive strategies for living or "better ways to deal" (Theme 4). Additionally, when they experienced setbacks, they recognized that "the point was getting back up" (Theme 5). These skills were learned in the context of mentoring relationships as well as through access to mental health professionals and training opportunities focused on topics such as leadership. With these supports, participants were able recognize the maladaptive coping strategies they were using and begin to adopt more adaptive ways of coping with challenges.

It is notable that participants in this study specifically discussed learning adaptive strategies for living when Esposito's (2018) study did not find significant differences in self-perceptions of maladaptive or adaptive coping strategies after 6 months or 1 year of program participation. This may be because Esposito's study had very limited power, meaning that it would have been difficult to find significant differences even if they existed.

From a theoretical perspective, this second category that students discussed also fits well within Maslow's hierarchy. Participants in the current study frequently spoke of how they approached challenges before and after participating in SRN. In these discussions were numerous mentions of problem-solving with their mentors or SRN staff to determine how to handle difficult situations when previously they did so mostly on their own. At the second level of Maslow's hierarchy are safety needs, including resources to help maintain one's physical and emotional health and to perceive a sense of security. In this study, these resources were found in the form of supportive adults who helped participants learn how to problem-solve informally as well as direct teaching through which participants developed adaptive skills for living through more formal means.

4.3. Increased hope, direction, and purpose

Themes 6, 7, and 8 share a common thread of increased hope, direction, and purpose. Taken together, these themes reflect how being unburdened by some of their premature adult responsibilities and lifestyles allowed participants to focus on the path to high school graduation and post high school education. Their gratitude for the help they received made several of them want to be in a similar helping role with others. Notably, many participants discussed how before SRN they had goals but believed that these goals were unobtainable because they did not have the resources they needed to achieve them. During their time in the SRN program, as they received supports and learned problemsolving skills, they experienced an increase in hope that their goals could be realized. It was apparent from participants' responses that no single resource or person had impacted their sense of hope; rather, it was likely the combination of supports that resulted in the changes observed.

This final category also fits well within Maslow's theory. As students were relieved of the burdens of struggling to meet lower level needs on Maslow's hierarchy, they were able to focus on higher-level goals and aspirations. Notably, for many students, these goals existed prior to SRN, but they did not know how they could possibly reach them. The supports provided by SRN "lifted" students higher on the pyramid of Maslow's hierarchy of needs, allowing them to focus on the higher-level needs of defining their purpose and pursuing the goals they had set for themselves.

4.4. Implications for practice

The current study has a number of implications for practice. First, findings suggest the importance of mentoring in helping UHY rebound from the stressors and burdens of their childhoods. In this study, participants described their mentors and SRN staff as playing a pivotal role in modeling healthy relationships, allowing them to trust adults again, helping them to overcome setbacks, and teaching them how to respond adaptively and problem-solve in difficult circumstances. It is important to note that SRN mentors have daily communication (via text, phone, or in person) with their mentees. Mentors were all members of the local

community who volunteered their time to work with students in SRN. They were selected based on interviews by SRN staff, who carefully screened and trained them to ensure that they had the time to commit to mentoring a student on a daily basis and would be able to form a positive relationship with a particular student (through careful matching by SRN staff). This suggests that: (a) mentoring is a critical component of helping to "lift" UHY to a place where they can focus on their goals as they move from adolescence to adulthood, and (b) individuals can be found in the community to serve in this role. Importantly, the SRN staff, including the director, also had daily involvement with the students and helped to support them in making day-to-day decisions and problem-solving when issues arose.

A second implication of our findings is that when working with homeless youth, building personal connections may be difficult in the beginning due to their past experiences, particularly for males. However, as participants noted in the current study, if adults do not waver in their support, they may become one of the first adults in that youth's life to prove worthy of trust. Results of this study show that learning to trust just one adult can help to restore the youth's ability to trust other adults and confidence in asking adults for help. Additionally, when UHY feel like they have been helped, they may be more likely to help others in need. Therefore, interventions for UHY also may want to target building a sense of community and philanthropy through having youth engage in activities like mentoring and volunteering.

Finally, our findings suggest that aside from meeting basic needs of youth like shelter and food, UHY have multidimensional needs that are best met through comprehensive services. While providing basic resources is necessary and critical to their development, many UHY do not have the opportunity to engage in areas of self-development (like planning for college) that are part of the lives of many others their age. Given the high-risk contexts in which most UHY have been raised, it might come as a surprise to some that the desire to attend college is not uncommon. Many of the UHY in this study had aspirations to continue their education beyond high school before they began receiving services from SRN, but they did not know the steps to take to move from idea (i. e., wanting to attend college) to action (e.g., how to select an appropriate college, complete the application process, and apply for scholarships). SRN provided participants with the resources to build selfconfidence, communicate effectively, and understand both themselves and other people. Findings from the current study indicate that aside from meeting basic needs, UHY also benefit from guidance in other areas of development, like leadership skills, and need explicit instruction and support in preparing college applications and obtaining funding. Participants also expressed gratitude and excitement in being able to engage in common teenage activities that they had not previously experienced, like attending sporting events with their SRN peers and eating at restaurants with their mentors. Service providers should consider the potential hidden benefits to affording UHY extracurricular activities, like increased school engagement, hope, and/or personal growth.

4.5. Implications for research

This study adds to the literature on intervention for UHY by being the first to enhance understanding of the impact of a unique, holistic, community-based intervention for this population. Prior to the current study, the closest comparable intervention to providing holistic services was the Social Enterprise Intervention (SEI), which also sought to take an alternative approach to the traditional model of service delivery. SEI provides vocational training in small business skills, clinical mentorship, and connections to health and mental health services. Participants remain in the intervention from seven to 12 months (Ferguson, 2007).

SRN differs from SEI in that the program's main focus in not transitioning youth into the job market but rather transitioning them into higher education. The unique mentoring program embedded within SRN allows youth to have an adult (or sometimes a couple) who serves in a pseudo-parenting role to give UHY tangible support and opportunities

for problem-solving on a daily basis. SRN staff, including the director, also serve participants in similar ways in addition to identifying critical needs for youth (e.g., for mental health treatment, dental care, or vision correction) and arranging for services to meet these needs. Additionally, SRN provides opportunities for youth to engage in extracurricular activities that facilitate growth. All of the aforementioned services aim to build resiliency in UHY by minimizing risk, optimizing protective factors, and helping to launch them into a post-high school life where they have the skills and tools to avoid falling back into poverty or homelessness as adults.

4.6. Limitations

There are several limitations within this study. The first is that the data in this study is limited to what participants chose to share with the interviewer. The broad-based prompt used to begin the interview (i.e., please tell me about your life from the time you began in SRN to the present day) gave participants considerable leeway in what they chose to include in telling their stories. This was a purposeful decision. The aim was for participants to provide us with insight into what they noticed in themselves and their lives. Through thematizing, commonalities in participants' perceptions were identified. Another way to gather information to address our research questions would have been to ask about life since entering SRN in terms of relationships, school, the future, etc. Asking more specific types of questions may have yielded different information. For example, participants might have simply neglected to share information about a particular topic because the interviewer did not ask about it. We believe the method we used maximized the opportunity for participants to include in their interviews whatever they saw as most important, but a limitation of our strategy is that there may be other topics participants did not discuss because we did not ask about them specifically.

Another limitation is the researchers' own biases could have impacted the ideas they perceived as important in the interviews. Although researcher interpretation is an important and necessary part of qualitative research, we sought to minimize the impact of any specific biases we may have held through multiple processes to ensure credibility of the thematic analyses. First, both authors (neither of whom served as the interviewer) contributed to the codebook and coded each transcript independently. We then met to resolve any potential discrepancies in coding. Additionally, throughout the process of coding and thematizing, we sought to stay as close as possible to the participants' words and included multiple examples and excerpts to represent the themes, providing direct evidence for their interpretations.

4.7. Future directions

Future studies are needed to explore the effectiveness of SRN on the lives of UHY. The current study may serve as a foundation for areas of further inquiry including how SRN impacts youth mental health, coping, trust, and peer networks. Further understanding of the effectiveness of SRN may aid in procuring funding for additional holistic, communitybased interventions by showing increased benefits compared to traditional interventions for UHY. Future research may also explore the replicability of an intervention like that of SRN in the public sector. Give the significant needs of UHY and their growing numbers, it is important to explore the feasibility of the development of such a program on a larger public scale. A third direction for future research is to investigate the importance of the various components of SRN in participant outcomes. Participants in this study mentioned the importance of multiple resources (e.g., mentors, training opportunities, assistance with applying to college) as being important to their academic and personal development while in the program, although further research is needed to determine which program components are most impactful and should be prioritized in service delivery. A mixed methods approach may be helpful in gathering data on specific indicators of mental health

concerns (e.g., depression, anxiety, stress) over time in combination with interviews or focus groups that help to elucidate the components of the program that made a difference in their mental health.

4.8. Summary

UHY experience commonly experience a number of risk factors during development including frequent moves, victimization, mental health concerns, and academic underachievement (Rafferty, Shinn, & Weitzman, 2004). Although many communities have some basic services in place to address the needs of this population, the complex issues associated with youth homelessness can make service delivery challenging. The current model used to serve this population often provides one-dimensional services to address the multidimensional needs of UHY. Holistic, community-based interventions, like that of SRN, attempt to provide UHY with a variety of supports and resources to meet their complex needs.

The current study contributed to the literature on interventions for UHY by examining how UHY perceived their lives as having changed since entering a unique community-based program called SRN. Results of the interviews conducted for this study generated three categories with eight themes and one essence that illustrated the overall positive impact of SRN. SRN was able to meet participants where they were at and move them to a higher personal and educational standing. In the words of one of the participants, Erica, "...without SRN I wouldn't be who I am and I wouldn't be where I am." Through the resources and support afforded through SRN, participants were able to begin to overcome some of the risk factors they had experienced and benefit from the various protective factors provided through the program, essentially allowing them to move up Maslow's hierarchy of needs. Future research should continue to explore the impact and effectiveness of SRN and other holistic interventions for this population so that these programs can positively impact as many UHY lives as possible.

CRediT authorship contribution statement

Linda M. Raffaele Mendez: Conceptualization, Formal analysis, Investigation, Methodology, Project administration, Resources, Software, Supervision, Validation, Visualization, Writing - review & editing, Writing - original draft. **Camille A. Randle:** Data curation, Formal analysis, Writing - original draft.

Declaration of Competing Interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

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