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Homeless Young People’s Experiences of Caregiver Rejection

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Abstract

This paper explores the dynamics of caregiver rejection experienced by 40 homeless young adults 19–21 years of age. Using qualitative interviews, our findings reveal that nearly all of the youth reported at least one type of familial rejection that was intertwined with wider household conflict, and several youth experienced multiple types of rejection. Many young people reported “feeling like an outsider,” as they felt marginalized by family members and perceived a sense of outsidership within their family networks. Some youth cited rejection when they were “betrayed by a primary caregiver for a significant other.” These intimate partners, such as a boyfriend, girlfriend, or stepparent, often abused the young person, which exacerbated their experiences with caregiver rejection. Numerous youth were “pushed into institutional living,” such as foster care or group homes, at the behest of their primary caregivers, which stemmed from familial discord and behavioral issues on the part of the young person. In the most explicit form of rejection, youth were “kicked out by a caregiver” and subsequently entered into street life when they had nowhere else to go. Implications of these experiences are discussed, which can impact homeless young people’s future life chances as they attempt to exit the street.

Keywords: homeless, young adults, caregiver rejection, family conflict, instability

Introduction

The plight of homeless young people symbolizes a distinct aspect of a growing social problem with more than 1.6 million adolescents experiencing homelessness on a yearly basis.
(National Center on Family Homelessness 2011). The limited life chances of homeless youth, which are exacerbated by their disadvantaged material well-being, physical and mental health, and personal safety, underscore the extreme deprivation of this population (Lee et al. 2010; Mayock et al. 2013). In particular, the demographic of homeless young adults, which includes individuals 19–25 years of age (Tyler and Whitbeck 2004), is often at increased risk for a number of negative outcomes.

Studies found that youth who are homeless often reported elevated levels of family conflict as precipitating their entrances into homelessness (Mallett et al. 2005; Tyler and Whitbeck 2004). Relatedly, homeless young people are at risk for dropping out of high school (Hyman et al. 2011), and these educational deficits are cumulative as they lead to disadvantage in adulthood. Based on their unstable living situations, homeless young people are exposed to higher rates of violence and victimization (Tyler et al. 2004; Thrane et al. 2006) and often experience greater substance use (Rhule-Louie et al. 2008; Thompson et al. 2010) and higher levels of depression and suicidal ideation (Kidd and Carroll 2007; Slesnick et al. 2007) compared to their consistently housed counterparts. Young people experiencing homelessness may also face future issues such as employment instability and a cycle of homelessness (Auerswald and Eyre 2002). This myriad of social obstacles highlights the extreme inequality suffered by homeless young people and their likelihood of diminished future life chances.

Additional family processes such as parental rejection may also create distinctive experiences for homeless young people. Homeless youth who experience greater parental rejection are at increased risk of running away from home numerous times (Whitbeck and Hoyt 1999). This may involve implicit caregiver rejection through repeated verbal or emotional abuse (Whitbeck and Hoyt 1999), or more explicit modes of rejection such as a caregiver pushing out or banishing a young person from his or her home (Tyler and Bersani 2008). However, there is a lack of research that has examined this population’s experiences of different types of caregiver rejection and their conflicted family dynamics. This gap is significant given that the family of origin is where many problems begin for homeless young people and family conflict is often a precursor for youth leaving home (Mallett and Rosenthal 2009; Tyler and Whitbeck 2004).

Early life experiences, such as caregiver rejection, play an important role in contributing to homelessness among young people. Though many young people living on the street share similar family backgrounds, social characteristics and mental health issues, homeless youth cannot be generalized as a monolithic social group (Lee et al. 2010). While the literature generally considers running away as being episodic whereas homelessness is more long term, the two groups often overlap (Greene et al. 1997; Rotheram-Borus 1991). Therefore, much of the literature combines both runaways and homeless youth into a single sample and oftentimes, and the terms “homeless” and “runaway” are used interchangeably in research studies. This practice demonstrates the fluid and complex nature of youth homelessness (Wright 2009) as well as the different terminology used to describe runaway and homeless young people (National Conference of State Legislatures 2013). As prominent homelessness scholar James D. Wright has stated, “homelessness is not and cannot be a precisely defined condition” (2009, p. 46). Relatedly, homeless young adults typically
undergo diverse experiences of caregiver rejection that cannot be subsumed into a single definition.

The term “caregiver” can be broadly defined to include biological or adoptive parents, foster parents or other relatives acting as the primary provider(s) who raised the young person prior to the youth’s leaving home. Broadly speaking, parenting, or caregiving, practices have a strong impact on the socialization and development of children, which can vary along a continuum from nurturance to rejection (Rohner et al. 2005). These bonds are developed through the instrumental and expressive actions performed by parents toward their children, including hugs (physical warmth/affection—acceptance) and physical abuse (hostility/aggression—rejection; Rohner et al. 2005). Young people’s experiences of rejection from primary caregivers can consist of a combination of both real and perceived interpretations of parental behavior. In this way, children’s lived experiences of caregiver acceptance and rejection are very symbolic as they are grounded in interpretations of meaning. While Rohner et al. (2005) suggest to consider cultural context and social location in understanding children’s perceptions of rejection, a meta-analysis conducted by Khaleque and Rohner (2002, p. 62) points to a “universal association between perceived rejection and psychological maladjustment” that appears to supersede social differences.

Research on adolescents in the general population has established that parental rejection is often connected to a variety of adverse developmental outcomes (Rohner et al. 2005), including depressive symptoms among adolescents (Magaro and Weisz 2006; Nolan et al. 2003). Studies also underscore more visible effects of parental rejection on young people, including displays of externalized aggression (Akse et al. 2004; Hale et al. 2008) and delinquency (Scholte et al. 2001). In addition to depression and aggression, adolescents who have perceived rejection from a caregiver are at greater risk of internalizing feelings of shame regarding their own behavior (Stuewig and McCloskey 2005), which could exacerbate mental health issues. These experiences in the general population tend to revolve more around perceptions of caregiver rejection and the resultant detriments to mental health, while homeless youth often undergo more tangible rejection from caregivers, thus highlighting striking demographic differences in this family process.

Rejection experienced by homeless youth can be conceptualized as more concrete instances of repudiation that lead to economic, physical, and emotional strain stemming from family conflict. In general, familial conflict involves processes that alienate a young person from their family of origin. The majority of homeless young people reported running away to escape a conflicted home life (Ferguson 2009; Mallett and Rosenthal 2009; Thompson et al. 2010; Tyler 2006), rather than to seek adventure or freedom (Tyler and Whitbeck 2004). Other research cited that homeless youth cited many instances of caregiver abandonment in their reports of family conflict, in both the physical form of being kicked out and through emotional detachment (Ferguson 2009). Additionally, some young people experienced pressure to enter into street life as a means of developing alternative, supportive social networks to fill the void left by estranged or conflicted familial relations (Smith 2008). Homeless youths’ families often lack vital resources of support (i.e., emotional, financial) from which the young people can draw, which can also prompt them to leave home (Barker 2012).
Family structures such as mixed, or blended families that include stepparents, extended family members, and non-blood-related kin have been shown to place youth at higher risk for leaving home by increasing household stress levels as family members adapt to each other (Mallett and Rosenthal 2009; Tyler 2006). Relatedly, low levels of parental monitoring combined with heightened levels of conflict between a child and his or her caregiver may increase the risk of running away (Whitbeck and Hoyt 1999), which could be especially salient in family structures where only a single primary caregiver is present. Young people living in institutionalized settings such as foster care and group homes are also more likely to experience homelessness at some point in their lives compared to their counterparts living with a nuclear family in a domiciled environment (Mallett et al. 2005; Thompson et al. 2010). Foster care experiences may also lead to more adverse outcomes among homeless youth, such as delinquency and victimization (Tyler and Melander 2010).

Given the complex dynamics of the caregiver-child relationship and because family conflict is a major reason many young people run away or leave home in the first place (Fergusson 2009), the current study fills a significant gap in the literature by expanding on the paucity of research that has examined homeless young people’s experiences of caregiver rejection. The present study specifically focuses on homeless young adults so as to explore the period where this at-risk group is transitioning into adulthood. To more fully understand homeless young people’s experiences with caregiver rejection, the following research question will be addressed: How do homeless young people experience caregiver rejection and how do family dynamics shape these experiences? This question guided our data analysis to inductively develop our major themes.

Method

Participants
The qualitative data were obtained from semi-structured interviews with 40 homeless young adults (16 males; 24 females), ages 19–21 years, in the Midwest using a purposive sampling strategy (Miles and Huberman 1994). Employed interviewers, who had over 2 years of experience working with this population, were instructed to approach shelter residents and locate eligible respondents in different areas of the cities where youth hang out. Interviewers offered agency services or referrals to all youth regardless of their decision to participate. This was done to ensure youth were familiar with available services and could access them if needed. Study eligibility required young people to be between 19 and 21 years of age and homeless. This age range highlights the developmental period of emerging adulthood (Arnett 2000), which was the broader focus of this study. “Homeless” refers to spending the previous night with a stranger, in a shelter or public place, on the street, in a hotel room, with friends (with no other place to go), or other places not intended as a residence domicile. This classification of homelessness is consistent with federal definitions (The National Center for Homeless Education 2010) used extensively in the literature. Study procedures were explained and informed consent was obtained from young adults.

Our sample included 24 females (60%) and 16 males (40%). Thirty-four young adults (85%) self-identified as heterosexual, three as gay or lesbian (7.5%), and three as bisexual
Ages ranged from 19 to 21 years ($M = 20.17$ years). The average age at which participants ran away or left home for the first time was approximately 13 years of age, whereas the median was 13 and 15 years of age. Twenty-seven respondents were White (67.5%), eight African American (20%), one Hispanic (2.5%) and four biracial or multiracial (10%).

**Procedure**

Based on interviewer reports, 95% of young adults who were approached for an interview and who met study criteria agreed to participate. Participants were asked a series of open-ended questions in all interviews, which lasted approximately 1 h. Interviews were audio-taped and subsequently transcribed verbatim. Pseudonyms are used to preserve participant confidentiality. Participants were paid $25 for their participation in an interview. The university IRB approved this study.

To gain an understanding of young people’s experiences with caregiver rejection, participants were queried about their family backgrounds and relationships growing up to the present day. The following interview guide questions reflect the general line of inquiry pursued in the interviews: Why did you run away or leave home for the first time? What prompted you to leave home? What was your family life like growing up? How would you describe your family relationships? Relevant probing questions were used as needed by interviews to establish clarity in respondents’ answers or to garner more detail about their experiences.

**Measures**

Our measures include the overarching concept of family rejection as recounted subjectively by the homeless young adults, as well as its more specific manifestations. Specifically, the more nuanced measures of caregiver rejection include “Feeling Like an Outsider,” “Being Betrayed by a Primary Caregiver for a Significant Other,” “Being Pushed into Institutional Living,” or “Being Kicked Out by a Caregiver.” Taken together, these measures provide a more refined picture of homeless young adults’ diverse experiences of rejection in their families of origin.

**Data Analyses**

Preliminary analysis involved rereading each interview transcript to gain a deeper sense of the data as a whole. Because we were interested in young people’s experiences of caregiver rejection, we focused on the transcription sections related to interview questions on family dynamics. The themes that emerged were allowed to evolve naturally (Charmaz 1995). After the interviews were transcribed, each interview was carefully read through to get a sense of the data as a whole. Subsequently, examples of caregiver rejection (e.g., feeling like an outsider) were identified using open-ended coding techniques (Neuman 2011). After the broad theme of caregiver rejection and its subthemes were identified, we began the process of focused coding (Charmaz 1995), where we examined all of the interview transcriptions and extracted quotes and grouped them according to the four subthemes.
We assessed validity by triangulating the data through building evidence for a code or theme from several individuals (Creswell and Plano Clark 2011). For intercoder agreement, we used a predetermined coding scheme, including family dynamics such as conflict and abuse, and identified whether the authors assigned the same or different codes between text passages (Miles and Huberman 1994). Both authors coded all interviews, and in cases in which the intercoder agreement between the authors was low or discrepancies existed (less than 5% of the time), we obtained consensus through deliberation and reevaluating our coding and themes. Percentage agreement was used to assess interrater reliability based on the small number of subthemes that were coded for the “presence/absence” of the theme (i.e., “feeling like an outsider”; Boyatzis 1998). We have exceptionally strong reliability in this study given that our 95% level of agreement in coding is much higher than the 70% or greater score that is recommended for qualitative research (Boyatzis 1998).

Results

Rejection from One’s Family

Problematic family relations characterized all of the young people’s early life experiences. Family discord related to domestic violence, criminal activity and substance use characterized the majority of these young people’s families, which was often discussed as occurring prior to their leaving home. The overarching theme of “Rejection from One’s Family” and subsequent subthemes focus broadly on the interpersonal relationships shared between family members and the young adult. Specifically, we highlight experiences of rejection that place the youth on the margins of the family unit. Issues of caregiver abuse and trauma experienced by the young person are so closely intertwined that it is difficult to disentangle one from the other. In these experiences, all forms of caregiver rejection were voluntary in the sense that the caregivers themselves deliberately initiated the disownment.

Nearly all of the youth (n = 36; 90%) reported at least one type of familial rejection, and these youths’ experiences are outlined below. As such, the majority of young people cited at least one instance of “Feeling Like an Outsider,” “Being Betrayed by a Primary Caregiver for a Significant Other,” “Being Pushed into Institutional Living,” or “Being Kicked Out by a Caregiver” prior to leaving home. These multiple, negative experiences with caregivers were often discussed in tandem with the reasons why these young people decided to leave home. Though 36 youth experienced at least one form of caregiver rejection, a total of 50 separate instances of caregiver rejection were reported among all of these participants (see Table 1).
Table 1. Frequencies of caregiver rejection and subtypes

<table>
<thead>
<tr>
<th>Rejection from one's family</th>
<th>N</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Caregiver rejection</td>
<td>36</td>
<td>100</td>
</tr>
<tr>
<td>Feeling like an outsider</td>
<td>16</td>
<td>44</td>
</tr>
<tr>
<td>Betrayed by a primary caregiver</td>
<td>9</td>
<td>25</td>
</tr>
<tr>
<td>Pushed into institutional living</td>
<td>18</td>
<td>50</td>
</tr>
<tr>
<td>Kicked out by a caregiver</td>
<td>7</td>
<td>19</td>
</tr>
<tr>
<td>Total</td>
<td>50</td>
<td>138</td>
</tr>
</tbody>
</table>

a. Numbers here are based on the 36 youth who experienced caregiver rejection.
b. Percentages do not add up to 100% because some youth reported experiencing multiple types of caregiver rejection.

Feeling Like an Outsider

Of those who experienced familial rejection, 16 (44%) reported feeling a sense of outsider-ness within their own family unit. Many of these youth felt marginalized by both nuclear and extended family members because they were shuffled between these multiple family forms and internalized perceptions of familial alienation or they felt that their family members failed to understand them. Lack of caregiver support through alienation or marginalization was especially salient for these homeless young people.

Feeling like an outsider in one’s family revolved around numerous characteristics ranging from interpersonal conflict to social traits. Vanessa, an African American young woman, for example, reported difficulties fitting in with her adoptive family as a precursor to her running away. She described her familial situation in the following way: “They just treated me different than their own [biological] daughter. They like distanced themselves from me.” After being placed in a home for troubled youth by her adoptive parents, Vanessa grew to resent them. According to her, “I was angry . . . I was real bitter because I didn’t think I needed help. I was just growing up and it was tough being a black teenager growing up with a white family.” In Vanessa’s experience, racial differences between her and her adoptive parents became a strong point of contention and Vanessa was resentful of how she was treated. This type of racially fueled caregiver rejection could potentially prompt a young person to leave home in search of an alternative form of social acceptance.

Similarly, Mandy, a white female, reported experiencing a sense of alienation from her family that prompted her to run away from home. When asked why she left home, Mandy recounted the following: “Cause my parents didn’t understand me . . . I just felt like they didn’t try to understand me. . . . I just didn’t get along with them very much.” According to Mandy, she felt detached and rejected by her family. Moreover, these feelings were made worse by the fact that both of her parents abused substances on a regular basis and habitually physically abused Mandy. Overall, Mandy’s experiences of conflict and abuse with her parents coupled with their substance abuse issues were important precursors in her decision to leave home.

Five males also reported feeling disconnected and alienated from kin networks. These male respondents appeared to take a more active role in fracturing family relationships.
Scott, a white young man, made it a point to disengage from any kin connection by rejecting familial support after his mother passed away when he was only thirteen. He described his estranged kin relations as follows: “I’m like really way too distant with my sister anymore. . . . I don’t have any family anymore. I like pretty much told every one of them to piss off at one point in time . . . family was really weird.” After experiencing the major disruption of his mother’s death, Scott cut ties with his family and adopted an independent identity that resulted in his departure from home and entrance into street life. Relatedly, Tom, an African American young man, reported that his parents were always “just treating me like I was a stepchild or something” and that after the first time he ran away “there was no coming back . . . it was in my head not to come back.” Traumatic life experiences and perceptions of alienation may prompt young people to engage in rebellious independence, such as cutting ties with family or running away, rather than expressing their emotions and seeking solace in social support. All the youth described above experienced cumulative rejection from their families over time, which was closely linked to the reasons young people provided for running away.

**Betrayed by a Primary Caregiver for a Significant Other**

Nine youth (25%) who cited rejection from their families reported experiences that involved their primary caregiver and the caregiver’s significant other. Examples of this form of rejection involved the primary caregiver (e.g., the mother, father, or other family member), choosing to honor the relationship with a significant other over the needs of the child. In this way, caregivers often openly told the young person that the significant-other relationship was superior to that shared with the child. These experiences had damaging effects on the young people’s self-concepts as well as the relationship they shared with the rejecting caregiver, which is evident in the anecdotes below.

Abuse from a caregiver’s significant other was instrumental in leading to a fractured relationship between a youth and her or his primary caregiver. These abusive experiences were exacerbated when the caregiver failed to protect the young person from victimization. Especially for females, the inclusion of a mother’s boyfriend in the household may increase both their risk of maltreatment at the hands of the new significant other and the stress of coping with changes in household structure. This issue is best exemplified by Jolene’s experience of sexual abuse from her mother’s new boyfriend and the resulting maternal rejection. When asked about her relationship with her mother’s boyfriend, Jolene, a biracial young woman, recounted the following:

He’s more like a type of person that wants to keep her [Jolene’s mother] to his self. . . . He tried to have sex with me one night . . . and she [my mother] didn’t believe me because she said if it did happen he was drunk and he doesn’t [drink] . . . he stopped drinking . . . he apologized to my mom if it did happen because he said he didn’t remember anything so she forgave him and told me that she didn’t believe me . . .

Jolene not only experienced sexual abuse from her mother’s boyfriend, but then her own mother repudiated her claims, which served to further amplify the negative effects of the
actual abuse by combining it with maternal rejection. Lack of commitment from a parental figure may destroy the sense of trust a child has in his or her caregiver, which could then prompt them to run away as a means of escape.

Sara, a white young woman, recounted an experience similar to Jolene’s in that she was forced to fend off the sexual advances of her stepfather. One night, when Sara arrived home late, her stepfather was drunk and sexually assaulted her: “He told me that to make the big money I could be a dancer down in [large city] and then he tried kissing me.” To make matters worse, Sara’s mother called her a liar and did not take her claims seriously, thereby siding with Sara’s stepfather and increasing this young adult’s experience with caregiver rejection. The rejection of Sara by her mother could also have been impacted by the widespread instability Sara underwent as she claimed, “I’m currently on my seventh stepdad.” In this way, caregiver rejection coupled with residential instability created a conflicted home life for Sara. The experiences of Jolene and Sara also underscore the gendered nature of sexual abuse at the hands of a caregiver’s significant other, which can create further family conflict, especially when a caregiver repudiates the young person’s claims.

For both males and females, rejection from the maternal caregiver as a result of conflict with the boyfriend or stepfather was often recounted as the most devastating form of familial disconnection. Shane, a white young man, for example, was the victim of multiple instances of physical abuse at the hands of his stepfather. According to Shane, he ran away for the first time because he “got tired of my stepdad’s bullshit” and felt that leaving home was the only way to escape his abusive stepfather. In describing this abuse, Shane stated that his stepfather, “Grabbed the chain that I had around my neck for a necklace and about suffocated me with it.” Following this altercation, Shane’s mother placed him in a children’s home where he was subsequently heavily medicated. While this form of maternal rejection may have damaged Shane’s relationship with his mother, it is also possible that his mother felt her decision was in the best interest of her son’s safety if she was unwilling to ask Shane’s stepfather to leave.

Female youth also reported experiences of multiple types of abuse at the hands of a stepparent. In Mary’s case, mental and physical abuse from her stepmother characterized her life for approximately 1 year before she ran away. Mary, an African American young woman, described her stepmother’s abuse, which was tempered by chronic drug use, in the following way: “If she [stepmother] was upset, I got it all taken out on me . . . it was like a few times a week I was getting hit.” When the physical abuse reached a climax on Christmas morning, Mary’s father refused to acknowledge it: “My face is all messed up . . . he [father] didn’t say anything to me at all.” Her father’s failure to acknowledge the physical evidence of Mary’s abuse at the hands of her stepmother was construed as a blatant form of caregiver rejection by Mary. At this point, Mary ran away from home and at the time of her interview reported limited contact with her family. As evidenced by these youths’ stories, unstable relationships with primary caregivers and perceptions of their rejection characterized several of these youths’ lives before they left home.

**Pushed into Institutional Living**

Many youth who suffered rejection experienced transitions into multiple institutional living facilities at the behest of their primary caregivers ($n = 18; 50\%$). These transitions were
typically the outcome of severe familial discord that stemmed from the behavioral issues of the youth and the caregiver's inability or perhaps unwillingness to manage them. For example, youth explained being placed in institutions as a result of aggression, psychological disorders or delinquency, and these settings ranged from foster care to treatment centers. Transitioning into institutional settings based on caregivers' decisions increased the instability experienced by these young people.

Danielle, a white young woman, described the beginning of her stays in different alternative living arrangements in the following account: “I got put in foster care at [age] 12 because of skipping school and my mom couldn’t handle me.” Furthermore, Danielle described strained family relationships, such as “not seeing my parents very much cuz they were always out.” Once in foster care, however, Danielle continued to experience caregiver rejection: “The foster mom said that I was out of control . . . too hard for her to handle me.” Eventually, Danielle went to a detention center for a few months and a group home for several years, but soon was placed in another foster care home. It is possible that multiple instances of caregiver rejection resulting from behavioral issues may have led Danielle and other youth like her to run away in order to end the cycle of institutional transitions. Danielle’s history stemmed from multiple different caregivers, including her biological parents and foster parents, resulting in a series of marginalizing experiences. Lacking a solid foundation of housing stability or healthy social support from primary caregivers, some youth may view street life as a feasible option.

Other youth reported experiencing caregiver rejection stemming from their own substance use behavior. John, a white young man, experimented with substances at a very young age and was transferred to foster care soon after his adoptive parents became aware of his behavior. In recounting his institutional transitions, John stated, “I went to a foster home when I was 10 because I wasn’t real good, my mom and dad couldn’t handle it. I was doing drugs and alcohol.” While John was shuffled between different foster homes, he had little contact with his adoptive family, which further solidified his feelings of familial rejection. Residential instability also intensified John’s experiences of caregiver rejection, as his biological parents, his adoptive parents and numerous foster parents displaced him over the course of his childhood and adolescence. Foster care transitions eventually transformed into homelessness, as John lived in a homeless shelter at age 17 after having moved out of his last foster home. These multiple foster care placements created instability for John and Danielle, which eventually led to shelter living and/or living on the street.

While foster care was the dominant institutional setting for these youth, others were placed in centers aimed at behavior modification. Ryan’s story is another example of institutional transitions initiated by a youth’s caregiver, but one that was characterized by behavioral treatment centers. According to Ryan, a white young man, “I was being very negative . . . my parents ended up sending me to a treatment facility . . . my parents couldn’t handle my behavior . . . so they sent me away.” Because of behavioral issues that included “stealing” and “lying,” Ryan’s adolescent years from age 15 to 17 involved continuous transitions into and out of treatment facilities. Though Ryan’s family may have indeed believed that institutionalized treatment was the best course of action for their son, they still failed to provide adequate support for him throughout his stays. Ryan remembered
graduating from one of the treatment programs: “I hated my graduation because my parents didn’t have the courage to come up and visit.”

Michael, a white young man, had a similar experience to Ryan’s in that he “was in and out of psych wards” because “my mom said that she couldn’t control me.” Michael’s early family history was also characterized by parental abuse, witnessing domestic violence, and parental substance use. Ultimately, Michael concluded that “I had too much trauma happen to me, she [mother] just really couldn’t deal with it.” As such, Michael experienced a series of instances of caregiver abuse, as both recipient and witness, which culminated in his mother placing him in a group home and subsequent behavioral treatment centers. Michael not only had to deal with a conflicted home life on multiple levels, but then he was forced to cope with numerous institutional transitions as well. These youths’ stories highlight the troubled family dynamics that are often interwoven with caregiver rejection. Additionally, these young people’s experiences are characterized by the sense that caregivers lacked the emotional resources to manage their children’s behavior.

**Kicked Out by a Caregiver**

Possibly the most blatant display of familial rejection was experienced by youth who were kicked out of their homes by primary caregivers ($n = 7; 19\%$). This form of expulsion often left the youth with little recourse but to turn to the street if they did not have friends or other family members to turn to for support. In most cases, some form of familial conflict typically preceded a youth’s banishment from his or her home. A caregiver kicking out a young person could be more of a process that occurred over multiple times, or a young person could be kicked out a single time and never allowed to return home.

In some young people’s experiences, being kicked out by a caregiver created a revolving door effect where the youth was pushed out of his or her home, returned home at some point, only to later be kicked out again. Denise’s pattern of getting kicked out by her mother began when she was only fourteen, and was preceded by chronic physical abuse from her mother. According to Denise, an African American female, “I never actually ran away from home. My mom would put me out.” In this instance, Denise does not consider herself a typical runaway because it was not of her own choosing to leave home, but rather she was forced out by her mother. Therefore, being kicked out by a primary caregiver can also markedly fracture a youth’s relationship with that person, which could extend into future relationships through the development of trust issues. When asked about the daily struggles she faces, Denise replied, “I just wonder if I’m ever going to have a mother-daughter relationship with my mom. That’s all I ever wonder about.” Denise’s words demonstrate the lack of a supportive, stable maternal relationship that could potentially hinder her future development.

Other situations of being kicked out by a caregiver occurred as a process in which a young person was kicked out multiple times. Carol, a white female, experienced this as she remembered first running away from home: “I found out my dad who I thought was my dad wasn’t my real dad and I ran away.” After a time where Carol was “not really listening and doing my own thing,” she recounted that eventually she was kicked out after running away: “I came back a few times but then they put me out after that. . . . I stayed out I was gone for the weekend and whenever I came back all my stuff was packed.”
Carol’s story highlights the dynamic nature of caregiver rejection in that it can be a progressive process occurring over time, rather than the result of a single instance. For many youth here, family conflict was not a static reality, but it was the accumulation of multiple issues, namely caregiver rejection.

For many youth kicked out of their homes, the youth’s problem behavior, whether perceived or actual, was cited as the cause. One such example is Greg, a white young man, who was kicked out by his parents because of enduring conflict between him and his father. In Greg’s words: “I didn’t run away from home. I got kicked out. . . . My dad and I do not get along . . . he’s an evil bastard . . . [I’ve] been kicked out a lot of times, probably over six or seven.” Paternal conflict thus led Greg to leave home and become imbedded in street life and the revolving door of homelessness and further engage in criminal activity as a survival tactic. As Greg stated, “I don’t think any of my brothers and I could probably like function if we tried to do everything legal. Just wouldn’t work.” This behavior may have incited some of the familial discord Greg experienced, as a young person’s deviant behavior may lead a caregiver to kick them out if they are unable or unwilling to manage the youth’s troubles.

Kurt, an African American young man, had a similar encounter with maternal rejection concerning his deviance, however in this case Kurt was blamed for the actions of another. Growing up, Kurt lived with his mother and an aunt and remembered the following incident: “My auntie would steal money from us . . . because she [mother] was sick and she can’t do much . . . one time she [auntie] stole all the money and she [mother] thought I did it and she put me out.” Following this, Kurt entered into street life as he stated, “I didn’t ever go back.” The dynamic process of Kurt’s detachment from his mother started at an early age, as he remembered an instance of rejection from when he was 10 years old: “My mother got real sick and we kind of had a little argument and she made me go stay with my father.” Kurt’s experience with maternal rejection ended tragically when his mother died of cancer when he was only 12 years old. In this way, parental rejection through being kicked out prevented Kurt from reestablishing a relationship with his mother due to her passing. Overall, being disowned by a primary caregiver can result in lasting adverse effects for young people through their experience with family conflict.

The theme of familial rejection that emerged from the youths’ interviews clearly demonstrates the importance of caregiver relationships within a young person’s life. Further, the exploration of young people’s own perspectives describing their encounters with caregiver rejection provides valuable insight into their conflicted family lives. Examining youths’ lives prior to their leaving home allows for researchers to explore the dynamic experiences of young people, and how their early life experiences shape their trajectories in unique ways.

**Discussion**

Homeless young adults identified numerous issues that they experienced in their family of origin prior to leaving home, many of which could be characterized as caregiver rejection. Young people underwent familial rejection by feeling like an outsider, being betrayed by a caregiver, being placed in institutional facilities or getting kicked out. Severed family
ties in the form of familial rejection were often traumatic and experiences of caregiver rejection can limit a young person’s access to social supports, including both instrumental and expressive resources. Being institutionalized by caregivers could lead to greater alienation from family networks if the young people then severed ties with rejecting family members. Other youth suffered from rejection that involved a maternal figure favoring the relationship of a significant other over that of the young person, which could hinder the development of a healthy maternal relationship. Moreover, because perceptions of parental rejection have been found to lead to both depression and aggressive behavior for young people (Akse et al. 2004; Khaleque and Rohner 2002), it is possible that some youth may eventually be kicked out of their home due to their development of aggression and/or delinquent behavior (Whitbeck and Hoyt 1999) brought on by the rejection.

Experiences of caregiver rejection present very real challenges for youth as they age and are expected to fulfill the normative roles associated with adulthood. The combined obstacles of caregiver rejection and street experiences can severely limit homeless young people’s access to upward social mobility as they enter into these roles. The absence of familial social capital acts as a major detriment to the young person’s future life chances, especially in their ability to exit street life (Barker 2012). Lacking a steady residence and kinship networks could prevent homeless youth from securing a stable, well-paying job as well as government assistance for which they are eligible. As such, some young people may enter into deviant forms of subsistence such as stealing or dealing drugs if they perceive no viable alternatives (Gwadz et al. 2009).

Homelessness coupled with economic insecurity further exacerbates the social stigma youth face as they navigate the path to adulthood (Kidd 2007). As most employers equate residential stability with employee competence, numerous addresses listed as prior residences could be labeled as a red flag and eliminate a homeless youth for further consideration for employment. Research has shown that the longer a young person resides on the street and whether they were currently living on the streets represented barriers to market employment (Ferguson et al. 2012). Most homeless youth may also lack prior work experience in the formal economy while they are preoccupied with everyday survival such as obtaining food and shelter.

Youth rejected by family members may become entrenched in the revolving door of homelessness and face additional risks while living on the street. Specifically, homeless youth may become involved in street gangs as a means of survival, which further increases their involvement in violent and criminal behavior that can lead to jail or prison time (Yoder et al. 2003). Homeless young people are typically monitored and policed at a greater intensity than their housed counterparts, and homeless youths’ behaviors are increasingly labeled as deviant in mainstream conceptualizations (Miles and Okamoto 2008). Involvement in the informal economy can further expose homeless youth to criminal victimization if they are socially excluded from normative employment on a societal level (Gaetz 2004), and cannot draw from family resources as a means of support because of caregiver rejection.

Youth who are shuffled from one living arrangement to the next, such as detention centers, treatment facilities, or foster care often lack a positive role model from whom they
could model healthy behavior. The institutional placement of some youth by their caregivers relates to caregivers’ pathologization of problem behavior and whether the caregiver deems professional care necessary (Brestan et al. 2003). This residential instability and lack of quality family ties may prevent some homeless youth from drawing from familial resources that can be vital to their well-being (La Haye et al. 2012). For example, the perceived absence of social support among homeless individuals’ has been tied to decreased levels of overall health and an increased risk of street victimization (Hwang et al. 2009). Furthermore, among homeless youth in particular, feeling socially disconnected and lonely can inhibit a young person’s ability to establish a sense of resiliency in the face of adversity that is common to life on the street (Rew et al. 2001). Experiences of caregiver rejection can greatly hinder homeless youths’ capacity for coping if they cannot utilize the social resources of support that are often found within the family.

Specifically, rejection from a parental figure may harm a young person’s ability to form healthy relationships as they enter into adulthood, as rejection is linked to both depression and aggression (Akse et al. 2004; Hale et al. 2008). Many youth reported violence in their family of origin, which was closely discussed with their detachment from their caregivers, most notably mothers. Household violence could enhance a young person’s experience of caregiver rejection as psychological stress associated with domestic violence has been shown to indirectly diminish maternal attachment to a child (Levendosky et al. 2003). Being disowned by a trusted caregiver can foster a sense of interpersonal mistrust for others within young people, thereby placing them at greater risk for abusive relationships as well as social isolation (Paradise and Cauce 2002). A lack of social support not only makes it difficult for youth to cope with the stressors of everyday life (Kidd and Davidson 2007) but it also may prevent them from ultimately exiting the revolving door of homelessness. Reliance on conflicted family relationships can create barriers to a young person’s transition out of street life if they do not have access to stable sources of guidance (Milburn et al. 2009). Forced to function without the social support that can be derived from families and stable housing, homeless young people’s well-being suffers socially, economically, and psychologically (Kidd 2003).

Further exemplifying the complexity of these young people’s family dynamics, the type of parental rejection experienced by a youth may uniquely impact young people. Several youth reported being rejected when a caregiver betrayed them for an intimate partner. Bearing witness to an abusive caregiver relationship may cue youth to view unhealthy interpersonal interactions as normative, thus increasing their likelihood of experiencing partner violence in future relationships (Hendy et al. 2003) and lower levels of well-being. Losing affection from a caregiver could also lead a young person to seek alternative support from street families, which could include unhealthy relationships that are sexually coercive (Smith 2008). Furthermore, this betrayal often occurred by a maternal caregiver, which could be particularly salient for young people as they develop into adults and cannot draw from maternal advice and counseling (Kennedy et al. 2010; Mallett and Rosenthal 2009).

Along with being rejected by a caregiver, several youth also reported being abused by their caregiver’s intimate partner, and child abuse has been linked to greater risk of experiencing partner violence among homeless young people (Slesnick et al. 2010; Tyler et al.
Other youth experienced rejection by caregivers on the grounds of behavioral issues, which most often leads to the young person being kicked out (MacLean et al. 1999; Tyler and Bersani 2008). This form of rejection could lead to resentment and self-fulfilling prophecies for young people, causing them to engage in further deviant behavior.

However, the role of the young person in experiences of caregiver rejection must also be examined. As possessing a sense of control can buffer the impact of caregiver rejection on depression (Magaro and Weisz 2006), it is important to acknowledge homeless young people’s enactment of agency in their lives. In this way, caregiver rejection may not necessarily lead to adverse outcomes. Though most research focuses on risk factors and the obstacles homeless youth face, emergent studies have featured the resilience of these young people and their enactment of agency in shaping their lives (Kidd and Davidson 2007). Relatedly, homeless youth who are rejected by caregivers may be able to transform those experiences into something positive from which they can grow.

Findings also underscore the growing need for early intervention and prevention programs tailored for young people who have experienced caregiver rejection and detachment. Specifically, the majority of intervention programs designed for homeless youth, such as shelter and drop-in services, focus only on youth who have already transitioned into or have become embedded into street life (Slesnick et al. 2009). Early intervention programs would do well to focus on the young people in the context of their family networks to understand the dynamics that could be pushing the young person toward homelessness (Chamberlain and MacKenzie 2008; Kennedy et al. 2010). Therefore, it is crucial that service providers and policymakers consider the unique family backgrounds of homeless youth, specifically concerning their parental and caregiver relationships, when addressing the needs of this marginalized population.

Despite these distinctive findings, this study has some limitations, including retrospective accounts of the young people’s early life experiences which may be flawed by lapses in memory, the chronology of events and the exaggeration or minimization of life experiences (Hardt and Rutter 2004). In turn, this study is constrained by only having access to the youths’ perspectives and the possibility that they misreported past events. For example, while a young man pushed into institutional living may feel rejected, his caregiver may report that they had no other choice in light of the young man’s deviant behavior. One solution may be for future research to gather data from both homeless young people and their primary caregivers to construct a more complete picture of the revolving door. However, given that many of these young people have fled abusive homes, this type of multiple reporting may be difficult to safely implement.

Future research must acknowledge limitations in contemporary work on homeless youth and their experiences with street life. The socioeconomic status of a young person’s family of origin should also be explored as it could create varying contexts for familial and caregiver rejection. Therefore, researchers should make it a priority to enhance the demographic variation of their samples. Furthermore, more research is needed to fully understand young people’s complex backgrounds and experiences that may thrust them into homelessness, such as caregiver rejection. Further exploratory studies such as the one described here are first needed to pinpoint areas of demographic difference and familial variance before these lines of inquiry can be executed in a large-scale quantitative study.
Though homeless youth detailed various accounts of caregiver rejection, these experiences may not be representative given the dynamic role of family in young people’s lives. For example, it is very possible that the family relationships of homeless young people may shift over time as individuals move in and out of the household, and these shifts may change current relationships. The present study is limited by its use of cross-sectional data collected at one point in time. Homeless young people’s family relationships and their dynamics may change over time and fluctuate between varying levels of rejection as well as support. Qualitative longitudinal studies on homeless youth can uniquely explore their changing lives over time (Mallett et al. 2009).

While the homeless youth only reported negative experiences with their caregivers, young people’s families can also act as vital sources of support. For example, positive family relationships can increase a young person’s chances of exiting homelessness (Milburn et al. 2009; Mayock et al. 2011). Some young people may also express a strong desire to develop caregiver relationships in the midst of conflicted family dynamics, thus illustrating the resilience of kin (Wilson et al. 2012). Future research would do well to explore the potential support provided by healthy family relationships among homeless youth, especially within the context of caregiver rejection.

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References


