A vacation for the homeless: evaluating a collaborative community respite programme in Canada through clients’ perspectives

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Abstract
This study assesses the Urban Breakaway Project, a collaborative project offering a structured vacation in the countryside of the province of Quebec intended for homeless (or street) youths. The objective of this study was to document participants’ perspectives regarding this project by examining their satisfaction, intention to change following their stay and perceived improvement with respect to their life situation. Another goal of this research was to investigate the relationship between satisfaction level and perceived improvement of participants. One hundred and seven individuals participated in the study, during Urban Breakaway’s first year of operation. Satisfaction with the project, assessed with the global Client Satisfaction Questionnaire-3 score, revealed a positive relationship with global scores of perceived improvement, as measured by the Perceived Improvement Questionnaire (PIQ; r = 0.37 (67), 95% CI (0.15; 0.56)). Regarding intention to change, the data indicated that 95% of participants had moderate-to-definite intentions to do something to change their lives. Participants reported an improvement for most items covered by the PIQ. They experienced the greatest changes in relation to mood, leisure, appetite, physical condition and self-esteem. Results indicate that the Urban Breakaway Project reaches not only street youths but also an older homeless population. Participants, regardless of their age, were found to be very satisfied with services obtained, and their satisfaction was significantly correlated with the perceived improvement in their situation. Qualitative data indicate that characteristics of the programme, such as the countryside setting, the focus on basic needs, the climate and the opportunity for socialisation, peer support (or belonging) and personal growth were appreciated.

Keywords: homeless services, homeless youths, perceived improvement, positive development, satisfaction, service evaluation

Introduction
Homeless adults and youths constitute a significant and vulnerable population. The number of street youths has been estimated between 500,000 and 2.8 million in the United States (Cooper 2006), between 45,000 and 150,000 in Canada (Canadian Paediatric Society 1998, De Matteo et al. 1999) and close to 100 million worldwide (Ensign & Gittelsohn 1998, United Nations Educational, Scientific and Cultural Organization 2007). Estimations for Montreal should be considered minimal since they are more than 10 years old. A study conducted in 1996–1997 identified more than 28,000 homeless people in the center of Montreal, with 12,666 having been homeless in the last 12 months (Chevalier & Four-
Homeless youths are often exposed to risk factors that can affect both their physical and psychological well-being (De Rosa et al. 1999, Woods et al. 2002, Feldmann & Middleman 2003, Haley et al. 2004, Boivin et al. 2005). Poverty, unstable and inadequate living conditions, malnutrition, risky sexual behaviours and lack of social support often contribute to their vulnerability (Roy et al. 1999, Ochnio et al. 2001, Boivin et al. 2005, Nyamathi et al. 2005, Thompson et al. 2006). Moreover, addictions and various types of victimisation are also frequent among homeless youths, further amplifying the risks for their physical and mental health (Baron et al. 2001, Stewart et al. 2004, Baron 2008, Werb et al. 2008). The same is true for adults, as homeless individuals in general have higher rates of substance abuse, mental and physical health problems, legal and employment difficulties (Buchholz et al. 2010). In the province of Quebec, it was reported that approximately 80% of homeless people had substance abuse and dependence problems (Assemblée Nationale du Québec 2009). According to Morrell-Bellai et al. (2000, p. 581), people become and stay homeless due to ‘macro-level factors (poverty, lack of employment, low welfare wages, lack of affordable housing) and personal vulnerability (childhood abuse or neglect, mental health symptoms, impoverished support networks, and substance abuse’.

Youths and adults living in the streets remain largely out of reach for social and health care programmes. Homeless youths are particularly reluctant to use health and social services, although they experience difficult living conditions and elevated levels of health risks (Kipke et al. 1993, De Rosa et al. 1999, Brooks et al. 2004, Thompson et al. 2006, Slesnick et al. 2009). Regarding the homeless population in general, several authors have found that service users feel workers lack training, provide services that are not compatible with their needs, display prejudicial attitudes and only offer short-term solutions (McCabe et al. 2001, Bhui et al. 2006, Kryda & Compton 2009).

Barriers to their utilisation of services which have emerged include unsuitable and unsafe environments, disrespectful staff members, rigid rules and service providers having unrealistic expectations (Thompson et al. 2006). Adapting services to the needs of street youths, as well as providing frequent contact with service providers, might thus be necessary to develop a relationship of trust between both parties (Zerger 2002).

Given the difficulty for health and social service providers to reach homeless individuals, it is important to take into account their point of view regarding the services that are designed for them. The evaluation of clients’ perspectives also favours the understanding of their subjective experience and their adaptation to services (Fitzpatrick 1984). In terms of the user’s perspective, satisfaction has become an increasingly important dimension to be considered when assessing the quality of health and psychosocial services (World Health Organization (WHO), United Nation International Drug Control Program (UNDCP), European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) 2000a,b). Client satisfaction with programmes is also a good indicator of the effectiveness of these services in attaining their established objectives (Chan et al. 1997, Ford et al. 1997, Pérez de los Cobos et al. 2002, 2004, Pérez de Los Cobos et al. 2005).


Further understanding of the perspectives of homeless persons can shed light on factors that may facilitate or hinder the utilisation of services (Haber & Toro 2004, Hoffman & Coffey 2008). While several studies have explored service needs for homeless youths (De Rosa et al. 1999, Reid & Klee 1999, Lindsey et al. 2000, Ensign & Panke 2002, de Winter & Noom 2003, Aviles & Helfrich 2004), few have examined their perceptions of the services they have received (Acosta & Toro 2000, Slesnick et al. 2009). Recent qualitative studies indicate that youths respond favourably to appropriate agency structure, safety, relationship quality, opportunities for belonging and empowerment, positive social norms, and family/school integration opportunities (Heinze et al. 2010).

Regarding older homeless populations, abstinence from drugs and alcohol during treatment increases if adapted services are proposed, such as daily psychoeducation groups, weekly meetings with support workers and access to employment and housing (Milby et al. 1996).

Carr et al. (1998) found similar results in a study of former transitional housing residents in St. Louis, Missouri, who stated that certain services were useful and appreciated, including housing, an adequate amount of structure, help with financial management, parenting courses, bolstering self-esteem and help to remain in the recovery programme. A major priority was greater flexibility with rules or fewer rules. Also important were better relationships with staff, the need for supplementary services, individual programming, availability of classes and flexibility regarding the length of stay.

Although young homeless people are concerned with securing basic needs and appreciate services addressing them (Peterson et al. 2006, Thompson et al. 2006), homeless youths’ overall experience of services is driven more by climate, positive social interactions and opportunities to take into account their point of view regarding the services that are designed for them. The evaluation of clients’ perspectives also favours the understanding of their subjective experience and their adaptation to services (Fitzpatrick 1984). In terms of the user’s perspective, satisfaction has become an increasingly important dimension to be considered when assessing the quality of health and psychosocial services (World Health Organization (WHO), United Nation International Drug Control Program (UNDCP), European Monitoring Centre for Drugs and Drug Addiction (EMCDDA) 2000a,b). Client satisfaction with programmes is also a good indicator of the effectiveness of these services in attaining their established objectives (Chan et al. 1997, Ford et al. 1997, Pérez de los Cobos et al. 2002, 2004, Pérez de Los Cobos et al. 2005).


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Although young homeless people are concerned with securing basic needs and appreciate services addressing them (Peterson et al. 2006, Thompson et al. 2006), homeless youths’ overall experience of services is driven more by climate, positive social interactions and opportunities to
for personal growth than by material goods, services or other resources provided by the agency (Heinze et al. 2010). This may be somewhat different from the adult homeless population who would like to receive support, vocational, housing, psychosocial and rehabilitation services.

However, no matter the age group, satisfaction with services is increased when providers offer respectful, empathetic, supportive services that foster a sense of autonomy (Greenwood et al. 2005, Thompson et al. 2006, Sosin et al. 2012). Interventions that focus on emotional support are appreciated, and face-to-face assistance that is accessible, flexible, participatory and long-term is also recommended (Stewart et al. 2009).

The studies by Thompson et al. (2006) and Stewart et al. (2009) are consistent with previous research demonstrating that marginalised youths undergoing positive development are more likely to have staff–youth relationships characterised by communication, mutual trust, respect and opportunities for responsibility and identity development (Green & Ellis 2007, Kortsch et al. 2008, Lewis et al. 2008). In light of the pressing needs of homeless youths and of their underutilisation of services, it seems particularly important to take into account studies documenting their perspective to offer more appropriate services.

The Urban Breakaway Project

The Urban Breakaway Project offers homeless persons in the province of Quebec an original programme: a structured respite in a natural environment. The programme provides services to resources working with the homeless, and provides them with the opportunity to accommodate their own groups. The project thus builds on a specific collaboration model with partner resources and counsellors who have already developed a relationship with the homeless individuals, and who will accompany them throughout their visit. The Urban Breakaway Project is based on the model of ‘Camp Deer Run’, a holiday camp led by the Dianova Community Outreach Programme in the United States, which offers a 6-day structured vacation to individuals struggling with drug problems.

During their stay at Urban Breakaway, participants and their counsellors are invited to take part in various activities geared towards the development of personal skills, self-esteem, anger management and problem resolution, with a focus on strength development. The retreat also involves interactive and educational workshops that encourage participants to become aware of the impact of drugs and alcohol on their health, and to reflect on their basic needs, such as security issues in the street, nutrition and sexuality. Furthermore, the camp offers a series of sport activities including volleyball, canoeing and snow-shoeing. This respite from the streets is intended to provide an organised and safe space where participants can gain positive experiences without drugs, and where they can develop various social and personal skills.

Studies assessing the relevance of such unique programmes and the perspective of their participants are important, and yet to be conducted. In fact, few interventions with homeless youth have been formally evaluated and careful programme evaluation of services is needed (Robertson 1999). The goal of the current research was to assess the perspective of Urban Breakaway clients by examining their satisfaction, perceived improvement and intention to change following their participation in the project. A secondary goal of the study was to investigate the relationship between client satisfaction and perceived improvement.

Methods

Procedures

Upon their arrival in the Urban Breakaway Project, participants were informed of the research by the programme counsellors. The confidential and voluntary nature of their participation in the research portion of the project was emphasised. On the final day of their stay, participants were invited by their counsellors to fill in a self-administered evaluation questionnaire, which took approximately 10 minutes to complete. Staff members were available to answer any questions or to provide assistance to participants if needed. Among the 107 participants who completed the initial questionnaire, 83 completed every question of the PIQ, and 80 completed the Client Satisfaction Questionnaire (CSQ) in its entirety. Of these respondents, 106 provided information on their gender, and 94 provided information on their age. A descriptive form was filled in by the leading counsellor to describe each group participating in the Urban Breakaway programme. The form included information on the number of participants, their gender and age, the length of their stay and cases of expulsion from the group, if applicable. Data collection took place within the project’s first year of operation, during the period from October 18th, 2005 to October 17th, 2006. The research protocols for this study received ethical approval from the Douglas Mental Health University Institute.

For the assessment of participants’ perspectives, statistical analyses were conducted with regard to satisfaction, using the CSQ-3, perceived improvement, using the PIQ, and intention to change. Content analysis was conducted based on the open-ended questions. To assess the relationship between satisfaction, participants’ characteristics and perceived improvement, a T-test, one-way ANOVAs and correlations were conducted. The P value was set at
<0.05, except for the correlation between the CSQ-3 score and individual items of the PIQ, where the *P* value was set to <0.005 as a large number of correlations were executed. SPSS Version 18.0 was used for the analyses and revisions were performed using SPSS Version 20.0 (IBM Corporation, Armonk, New York, United States).

**Quantitative measures**

**Client satisfaction**

Participants filled in the CSQ-3 assessing client satisfaction with services. The form was composed of three items evaluating the degree to which the project answered the respondents’ needs, the degree to which they felt generally satisfied and the degree to which they felt they would return to the programme. These three items have been shown to be good proxies, tightly correlated with the overall CSQ-8 scores (Larsen et al. 1979).

**Perceived improvement**

An abridged version of the Perceived Improvement Questionnaire (PIQ) was used to measure clients’ perceptions of improvement following their stay in Urban Breakaway. The PIQ is a standardised, adapted 13-item version of a questionnaire evaluating clients’ perceived improvement while receiving outpatient psychiatric services (Perreault et al. 2003). Respondents were asked to indicate to which extent each statement applied to them from the time of their arrival at Urban Breakaway on a 4-point rating scale, with ratings ranging from ‘Worse than before’ to ‘Much better than before’ for the items evaluating perceived change in domains such as mood, leisure, appetite, physical condition and self-esteem.

**Intention to change following participation in the programme**

Intentions to modify behaviour in the future were self-rated on a trichotomised scale. Participants had to indicate whether they totally disagreed, moderately agreed or totally agreed with a statement regarding a change of behaviour for (i) eating habits, (ii) sex, alcohol and drug habits and (iii) other practical life changes.

**Relationship between satisfaction and perceived improvement**

Correlation analyses between satisfaction (CSQ-3) and perceived improvement measures were conducted to identify relationships between global and specific dimensions of perceived improvement.

**Qualitative measures**

Participants were asked to answer two open-ended questions to document their perceptions of Urban Breakaway: ‘What do you like best about the project?’ and ‘What do you think could be improved?’ (Perreault et al. 2006). These questions have frequently been used to assess client satisfaction with services (Perreault et al. 1992, 1999b, 2006, Tempier et al. 2002) and have a greater capacity to identify specific sources of satisfaction and dissatisfaction than standardised scales such as the CSQ (Perreault et al. 1993). Transcribed responses were divided into ‘recording units’, which consisted of groupings of words or sentences corresponding to one category (L’Écuyer 1988). They were then coded according to a content grid developed by the authors (see Weber 1986, Deslauriers 1988, Perreault et al. 1993).

**Results**

**Group composition, participants and sample characteristics**

During its first year of operation, Urban Breakaway provided services to the nine main partner organisations involved with the homeless from the regions of Montreal and Toronto. In total, 145 homeless persons, accompanied by 25 psychosocial workers have participated in 17 groups held at Urban Breakaway. The majority of the groups were from Montreal, while two groups involved Toronto-based resources. Most groups were mixed in terms of gender (*n* = 8 groups), while others were exclusively composed of men (*n* = 5 groups) or of women (*n* = 2). Groups consisted of four to twelve participants, with an average of approximately nine (8.5) individuals per group. The majority of these participants (80%) were male, and their ages ranged from 18 to 67 years, with an average age of 30.3 years (SD = 12.6). Three of these groups were composed of older participants, who were on average between 41 and 49 years of age (see Table 1).

Of the 145 participants, 107 completed the evaluation questionnaire at the end of their stay and the remainder (38 participants) did not complete the questionnaire. Among the 38 participants who did not complete the questionnaire at the end of their stay, 21 were identified as being male and gender information was missing for 17 participants. Quantitative and qualitative results on participant perspectives are presented below:

**Client satisfaction**

Participants filled in the CSQ-3 questionnaire assessing client satisfaction with services based on 3 items. On a scale from 0 to 12, global satisfaction scores for participants on the CSQ-3 ranged from 3 to 12, with a mean of 10.7 (SD = 1.77; *N* = 80). The distribution was positively skewed. More specifically, 93.8% reported they were ‘very satisfied’ or ‘sufficiently satisfied’ with services
received. Ninety-five percent (95%) of participants responded that ‘all’ or ‘almost all’ of their needs had been satisfied by the project, and when asked if they would come back to Urban Breakaway, 85.9% reported that they ‘thought they would’ or ‘definitely would’ return.

Perceived improvement

Participants reported an improvement for most items covered by the abridged PIQ. Participants experienced the greatest changes in relation to mood, leisure, appetite, physical condition and self-esteem. On the other hand, 70.5% of participants considered their financial situation to be ‘unchanged’ or ‘worsened’, and 64.6% judged that their sexual drive was ‘unchanged’ or ‘worsened’ (see Table 2).

Intention to change

Regarding intention to change, the data indicate that 95% (N = 80) of participants had ‘moderate-to-definite intentions to do something to change their lives’, 92% (N = 79) had ‘moderate-to-definite intentions to improve their eating habits’ and 85% (N = 78) had ‘moderate-to-definite intentions to try some advice from workshops on sexuality, alcohol and drugs’.

Factors influencing satisfaction and perceived improvement

To examine whether satisfaction and perceived improvement were related to various characteristics of participants and of their groups, a series of statistical analyses were executed (see Table 3). T-tests revealed no significant difference in the mean scores between gender and participant satisfaction [Mmale: 10.5 (1.6) 95% CI (10.1; 10.9), Mfemale: 11.2 (2.2) 95% CI (10.3; 12.2); Mdiff: −0.8 95% CI (−1.6; 0.2)] [t(77) = −1.71, P = 0.09] or perceived improvement [Mmale: 2.7 (0.43) 95% CI (2.6; 2.9), Mfemale: 2.8 (0.57) 95% CI (2.6; 3.1); Mdiff: −0.09 95% CI (−0.3; 0.1)], [t(81) = −0.73, P = 0.47]. Correlation analyses revealed that individually, the age of participants was not significantly related to satisfaction [r = 0.17 (69), 95% CI (−0.07; 0.39)] or to perceived improvement [r = 0.12 (81), 95% CI (−0.09; 0.33)]. On the other hand, the examination of the subsamples of younger and older groups (mean age of the group below and above 30) revealed a significant difference for satisfaction [M30−: 10.3 (1.9) 95% CI (9.7; 10.9)

Table 1 Group characteristics from period of data collection*

<table>
<thead>
<tr>
<th>Group</th>
<th>Size</th>
<th>M_age (SD)</th>
<th>Gender (% male)</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>9</td>
<td>–</td>
<td>100.0</td>
</tr>
<tr>
<td>2</td>
<td>5</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>3</td>
<td>10</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>4</td>
<td>12</td>
<td>–</td>
<td>100.0</td>
</tr>
<tr>
<td>5</td>
<td>9</td>
<td>–</td>
<td>–</td>
</tr>
<tr>
<td>6</td>
<td>7</td>
<td>–</td>
<td>83.3</td>
</tr>
<tr>
<td>7</td>
<td>6</td>
<td>23.4 (1.1)</td>
<td>0.0</td>
</tr>
<tr>
<td>8</td>
<td>6</td>
<td>22.5 (2.5)</td>
<td>83.3</td>
</tr>
<tr>
<td>9</td>
<td>4</td>
<td>26.7 (2.9)</td>
<td>100.0</td>
</tr>
<tr>
<td>10</td>
<td>10</td>
<td>21.6 (2.2)</td>
<td>90.0</td>
</tr>
<tr>
<td>11</td>
<td>9</td>
<td>21.2 (3.0)</td>
<td>77.8</td>
</tr>
<tr>
<td>12</td>
<td>11</td>
<td>49.0 (10.2)</td>
<td>90.9</td>
</tr>
<tr>
<td>13</td>
<td>10</td>
<td>22.3 (2.1)</td>
<td>90.0</td>
</tr>
<tr>
<td>14</td>
<td>9</td>
<td>41.3 (13.8)</td>
<td>0.0</td>
</tr>
<tr>
<td>15</td>
<td>11</td>
<td>46.0 (6.6)</td>
<td>100.0</td>
</tr>
<tr>
<td>16</td>
<td>11</td>
<td>22.7 (2.1)</td>
<td>90.9</td>
</tr>
<tr>
<td>17</td>
<td>6</td>
<td>24.0 (5.2)</td>
<td>83.3</td>
</tr>
<tr>
<td>Total</td>
<td>145</td>
<td>30.3 (12.6)</td>
<td>75.5</td>
</tr>
</tbody>
</table>

*Data collection took place from October 18th, 2005 to October 17th, 2006.

Table 2 Participants’ perceived improvement (n = 83*)

<table>
<thead>
<tr>
<th>Item content</th>
<th>Worse than before %</th>
<th>The same as before %</th>
<th>Better or much better than before %</th>
<th>Total %</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>My personal difficulties</td>
<td>1.2</td>
<td>32.1</td>
<td>66.7</td>
</tr>
<tr>
<td>2</td>
<td>My mood</td>
<td>3.7</td>
<td>15.9</td>
<td>80.5</td>
</tr>
<tr>
<td>3</td>
<td>My emotional stability</td>
<td>2.5</td>
<td>31.3</td>
<td>66.3</td>
</tr>
<tr>
<td>4</td>
<td>My self-esteem</td>
<td>2.5</td>
<td>30.9</td>
<td>66.7</td>
</tr>
<tr>
<td>5</td>
<td>My resistance to stress</td>
<td>1.2</td>
<td>36.6</td>
<td>62.2</td>
</tr>
<tr>
<td>6</td>
<td>My appetite</td>
<td>1.3</td>
<td>30.0</td>
<td>68.8</td>
</tr>
<tr>
<td>7</td>
<td>My sleep</td>
<td>3.7</td>
<td>40.7</td>
<td>55.6</td>
</tr>
<tr>
<td>8</td>
<td>My physical condition</td>
<td>2.5</td>
<td>39.5</td>
<td>58.0</td>
</tr>
<tr>
<td>9</td>
<td>My sexual interest</td>
<td>0.0</td>
<td>64.6</td>
<td>35.4</td>
</tr>
<tr>
<td>10</td>
<td>My relationships with people in general</td>
<td>1.2</td>
<td>33.3</td>
<td>65.4</td>
</tr>
<tr>
<td>11</td>
<td>My interest towards work</td>
<td>2.5</td>
<td>43.8</td>
<td>53.8</td>
</tr>
<tr>
<td>12</td>
<td>My activities and hobbies</td>
<td>0.0</td>
<td>26.3</td>
<td>73.8</td>
</tr>
<tr>
<td>13</td>
<td>My financial situation</td>
<td>5.1</td>
<td>65.4</td>
<td>29.5</td>
</tr>
</tbody>
</table>

*Missing values = 24

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Correlation analyses between satisfaction and perceived improvement measures revealed moderate-to-strong significant relationships. Satisfaction with the project, assessed with the global CSQ-3 score, revealed a positive relationship with global scores of perceived improvement \( \rho = 0.37 (67), 95\% \ CI (0.15; 0.56) \). More specifically, satisfaction significantly increased according to clients’ perceived improvement of ‘physical condition’ \( \rho = 0.41 (66), 95\% \ CI (0.19; 0.59) \), ‘relationships with people in general’ \( \rho = 0.38 (66), 95\% \ CI (0.16; 0.57) \), ‘mood’ \( \rho = 0.35 (66), 95\% \ CI (0.12; 0.54) \); ‘self-esteem’ \( \rho = 0.35 (66), 95\% \ CI (0.12; 0.54) \); and ‘personal difficulties’ \( \rho = 0.34 (65), 95\% \ CI (0.11; 0.54) \).

**Qualitative measures of participants’ perspectives of the project**

Of the 107 participants, 92 filled in the evaluation questionnaire (85.9%), answering the questions ‘What do you like best at Urban Breakaway?’ and ‘What do you think could be improved at Urban Breakaway?’ (see Table 4). A total of 317 comments were documented with reference to satisfaction or dissatisfaction (Mean = 3.4 comments per participant). The vast majority (79%) of comments expressed satisfaction with Urban Breakaway’s programme and 21% expressed wishes for improvement. With the coding of emerging factors, 10 categories were established: global comments, programme content, programme organisation (structure, rules, length), staff, countryside environment, basic needs, climate, socialisation, opportunity for growth (learning about oneself and opportunities for involvement) and fun.

**Programme content and characteristics**

Programme content, such as activities and workshops, was the most-cited dimension of the project, and was generally appreciated (58 comments). Participants exhibited excitement for activities they might not practice while in the city, but activities were also appreciated as a way to engage with other respectful adults, to have fun without drugs, to face one’s fears and for self-discovery. For instance, some participants wrote:

I liked horseback riding, the plane, and the meetings where I could bring and share my experience; What I preferred was the time to reflect and interact with the people that...
were very inspiring. And the activities; All the activities brought me a lot, and the workshops were very interesting (…).

One participant highlighted the importance of having fun with one another while being sober. A particularity of this programme, the naturalistic, countryside setting, was also appreciated by participants. The contact with nature and the general climate of the location were often mentioned as positive elements of the project. Being within close proximity to a lake and the woods and enjoying the ‘panorama’, the calmness and the peacefulness were all appreciated: What I liked best was the atmosphere of the place, the tranquility, and the peace from the city.

**Attention to basic needs**

Attention to basic needs constituted the second major theme of participants’ comments and satisfaction (40 comments). Having three meals a day was appreciated, as well as the feeling of security, being able to rest, and feeling healthy:

I would have to say that the food was a plus; I like the rest…the privacy, the food, (…), the way we are able to feel free in a public place.

**Staff attitude**

Characteristics of the staff such as friendliness, respect and availability were also identified as sources of satisfaction. A total of 19 comments were produced on this dimension:

What I liked the best was all the counsellors; we were treated as humans no matter what problems we each had. I had an excellent time; What I preferred was the team of workers, for their great respect and availability.

**Opportunity for socialisation, peer support and personal growth**

Eight comments pertained to the general quality of social interactions, which were deemed both respectful and friendly: I liked the people and their kindness, the good energy. Positive social dimensions of the programme were addressed through comments on the spirit of solidarity, the possibility to meet, share stories and be acknowledged, as well as the feeling of belonging. Personal growth opportunities, such as self-discovery and the ability to take responsibility, were also appreciated:

The programme gave me the opportunity to put things into perspective; What I liked best was having the possibility to be involved in activities; Everything in the programme brought me something. I discovered myself.

**Participants’ wishes for improvement**

Most wishes for improvement concerned the organisation of the programme (21 comments) and its content (16 comments). Participants expressed a desire to have more choices and more time for activities. Suggestions for activities included better planning or ensuring that the group was open enough to discuss certain topics. Respondents also wished that the programme were more flexible, left them more independence, and imposed fewer rules. A few participants also wished to be more involved in the organisation of the stay itself:

What could be improved is having more say, and being more involved in the planning of activities, in advance,
and having more choice; having the freedom to walk alone; more freedom, less structure; let people be more free during the first days if they are tired.

A number of participants also wished that the stay were longer. Another 14 comments for improvement concerned attention to basic needs. The infrastructure, the quality of the water and food, as well as the attention paid to specific nutritional restrictions, were addressed. Lastly, staff and participants’ characteristics were mentioned through two comments of dissatisfaction. Some pointed out that participants should be chosen more carefully and that collective life was not easy for everyone.

Discussion

The main goal of this study was to evaluate the perceptions of the first participants from the Urban Breakaway Project using measures of satisfaction, perceived improvement and intention to change.

Although the project was initially intended for street youths of 18–30 years of age, the project also reached older participants. This might be explained by the lack of resources for homeless adults and underlines the need to provide services to this population (Roy et al. 2001). Effective interventions with homeless youths require attention to age and developmental needs in terms of opportunities and strength building (Heinze et al. 2010). Age was not found to be related to satisfaction for the Urban Breakaway Project, which could be explained by the fact that all participants were over 18, or by the fact that counsellors were able to adapt to the mean age of the group. Offering services to groups presenting an important diversity in terms of age could, however, be a challenge.

The programme involves a break from street life, while building on the continuity of the partner resources’ services and relationships with participants. The very structured dimension of the intervention – disciplined schedules; 24-hour contact between participants and staff; abstinence from drug or alcohol, participants’ responsibilities – is unusual for services to this particular population. Although temporarily removing these people from their usual environment and way of life might raise some ethical concerns, as youths and adults are taken away from their usual environment, there is an important form of continuity through the relationships with their counsellors and the partner organisations. Also, Urban Breakaway does not offer services directly to street youths, but does so to other organisations offering services to this population. Removing participants from the streets serves a good purpose, and the intensive programme allows participants and counsellors to get to know each other better, which is an important and positive element of the intervention, as it strengthens therapeutic alliance, according to counsellors (Perreault et al. 2008). When the group returns to its usual urban environment, interventions and relationships are viewed as being strengthened by these experiences, according to the counsellors. Moreover, the change in everyday life is considered as an important part of the experience, as a certain degree of rupture and distance from street life might be constructive and necessary. The ethical reasoning behind the programme is based on the evidence that building strength, rather than focusing solely on deficits and problematic behaviours, can have a positive impact on youths and adults. Promoting well-being by fostering positive experiences and providing opportunities for social bonding and leadership can have a positive influence on youths and adults. Such positive experiences are more easily orchestrated in a structured, safe and peaceful environment such as a camp in the countryside rather than out in the streets.

Thus, some of the original features of the programme include a break from street life, strengthening previous relationships between counsellors and participants, the intensity of the intervention, the global approach for the person and the time allotted for positive experience, including play and leisure.

Satisfaction, intention to change and perceived improvement

Youths and older homeless participants in the study scored very high in terms of satisfaction with the project. These results are surprising and promising, particularly considering the fact that this population is difficult to reach through formal services (Haley et al. 2004, Thompson et al. 2006). While the ceiling effect often observed with standardised satisfaction scales might have influenced the satisfaction scores (Perreault et al. 1993, 2006), the qualitative results support the finding that participants are indeed highly satisfied with the project. Furthermore, it is interesting to note that although participants were used to living in a less rigid and planned environment, they mostly provided positive evaluations for the programme’s high level of structure through the qualitative measures. This seems to reflect the literature as it pertains to adults and youth, which indicates a preference for structure, but not so much that one is constrained by excessive rules or rigidity (Carr et al. 1998, Bloom 2007). Also of interest is the statistically significant positive correlation between satisfaction and perceived improvement. These results show much potential, considering the difficulty to reach street youths and to ensure service utilisation, and emphasise the importance of taking into account homeless youths’ perspectives on the services that they receive.
Qualitative data revealed interesting insights into satisfaction and dissatisfaction, supporting the literature on positive development in youths (Heinze 2010). The young people in this study, although rightfully concerned with securing their basic needs, also sought resources where they could build relationships based on trust and develop in a positive way. Consequently, significant programme dimensions for youths included the opportunity for socialisation, peer support, personal growth and positive experiences, as well as a setting that could strike the right balance of structure, involvement and autonomy.

Offering youths the opportunity to grow and experience alternative ways of enjoying themselves is promising for multiple reasons. Sport activities and workshops favour the development of social bonds and peer support, which may in turn have a positive effect on health behaviours (including drug and alcohol use), mental well-being, coping skills and self-efficacy (Stewart et al. 2009). This finding supports the literature advocating the strengthening of youth’s capabilities (Acosta & Toro 2000, Lerner & Castellino 2002, Haber & Toro 2004). It also highlights the fact that adults equally benefitted from the programme, reflecting the overall need for positive social relationships suggested by the literature (Milby et al. 1996, Carr et al. 1998, Bloom 2007, Jost et al. 2010).

Study limitations

This study evaluated the perceptions of participants from the Urban Breakaway Project. The assessment was conducted immediately after the intervention; however, this perspective of the project, namely with regard to perceived improvement and intention to change, may diminish after the conclusion of their stay, as participants return to their daily routine. More distal follow-up evaluation is needed to examine the long-term impact of the programme. Qualitative data emerging from the two open-ended questions provided interesting insights into more specific sources of satisfaction and dissatisfaction for the project. However, the paper-and-pencil format used to collect participant responses does not favour lengthy and detailed comments. This format may have also limited the number of questionnaires that were completed, particularly among participants with low levels of literacy. In-depth interviews or focus groups with participants may provide more information for future studies (Perreault et al. 2006). This would contribute to the improvement of our understanding of homeless youths’ perspective on services.

Conclusion

Participants reported high levels of satisfaction with the services received at Urban Breakaway. Furthermore, satisfaction and perceived improvement were found to be correlated. Qualitative findings suggest that the project’s original characteristics and focus on strength development were appreciated by participants. More flexibility and involvement in the organisation of activities were suggested by participants. Globally, these results support the literature that emphasises the need to conceive programmes that build the strengths of homeless people (Acosta & Toro 2000, Lerner & Castellino 2002, Haber & Toro 2004, Heinze 2010). Further research assessing homeless people’s perceptions as well as short-term and long-term needs will contribute to the provision of better-suited services for them and may consequently facilitate their reinsertion into society.

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Conflict of interest

The authors report no conflict of interest. The authors alone are responsible for the content and writing of the paper.

References


