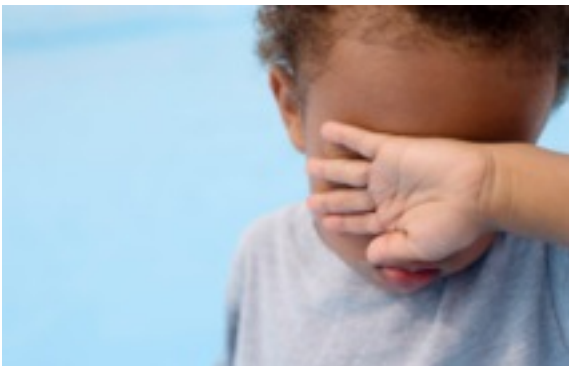


SUPPORTING THE WELL-BEING OF CHILDREN AND PARENTS WHO ARE EXPERIENCING HOMELESSNESS

*Sharon Henry-Blythe
Carol F. Siegel, PhD, LP
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Introductions

Who we are
How this series came about

Goals for today's presentation:

- * Scope of homelessness in Minnesota
- * Connections between childhood trauma, abuse, and neglect and adult homelessness
- * Goals for program development and intervention, including preventing re-traumatization and supporting problem-solving capacities



Homelessness in Minnesota



Homelessness in Minnesota

- ❑ *Overall, **10,214** homeless adults, youth, and children were counted, up 6 percent over 2009.*
- ❑ *The **6%** increase between 2009 and 2012 follows a jump of **25%** between 2006 and 2009.*
- ❑ *There was a slight increase (4%) in the total number of families experiencing homelessness, but a **22%** increase in the number of two-parent homeless families.*

Homelessness in Minnesota

Half of Minnesota homeless children are 5 or younger—including nearly 1 in 10 who are under one year old.

- (36%) are between 6 and 12 years old and 13% are between 13 and 17 years old
- Nearly three-quarters (72%) of children are in the care of their mother or a single female caregiver. Four percent are in the care of a father or male caregiver. One-quarter (24%) are in the care of two parents or caregivers.

Homeless in Minnesota

- In greater Minnesota, the number of people found outside the shelter system increased while the number in the Twin Cities area was down.
- Greater Minnesota also saw an increase in homeless families not using shelter.
- Increases in the metro area occurred almost exclusively in emergency shelters, including a 44 percent increase in the number of children in emergency shelters.



Homelessness, Trauma and Parenting

Trauma, grief and loss permeate the lives of homeless adults and often begins in childhood.

- Physical abuse as a child
- Sexual abuse as a child
- Neglect
- Domestic Violence
- Sexual assault or rape as an adult
- Chemical Dependency
- Mental Illness

Homelessness, Trauma and Parenting

“More than **90 percent** of sheltered and low-income mothers have experienced physical and sexual assault over their lifespan.”

National Child Traumatic Stress Network

When we talk about helping homeless families, we are talking about helping people who have experienced long-term, multiple traumas.

Convergence with ACES

- High risk for serious physical illness with ACE score of 4 or more:

390% increase in chronic pulmonary lung disease

240% increase in hepatitis

460% increase in depression

1,220% increase in suicide

ACES:

- Emotional abuse
- Physical abuse
- Sexual abuse
- Neglect
- Separation or loss of parent
- Witness to family violence
- Parental substance abuse
- Parental mental illness
- Parent in prison

Ongoing Impact on Children

Compared to non-homeless children, homeless children are:

- 2x more likely to be sick: 2x ear infections, 4x rate of asthma, 5x diarrhea/stomach problems
- 2x more likely to be hungry
- 2x more likely to repeat a grade
- 2x the rate of learning disabilities
- 3x the rate of emotional and behavioral problems, exposure to trauma
- 50% of school-age homeless children experience anxiety, depression, or withdrawal
- 20% of preschool children have emotional disorders but less than 1/3 receive appropriate treatment
- By age 8, 1/3 have a diagnosis of a major mental disorder

VISIBLE CHILD RESEARCH



Visible Child Research

What do we know about the impact of homelessness on young children?

- Homelessness and its Effects on Children 1999
 - Family Housing Fund
- America's Homeless Children - New Outcasts 2002
 - National Center on Family Homelessness
- Infant Toddler Discovery Project 2009
 - Family Supportive Housing Center

THE INFANT TODDLER DISCOVERY PROJECT

Participation

- Providers of supportive housing
 - 23 sites representing 17 organizations
 - 12 organizations offer site-based housing, 5 offer both site-based and scattered-site housing
- Parents of children ages 0-4 living in supportive housing
 - 185 out of 395 eligible families participated
 - 47% response rate

Infant Toddler Discovery Project

KEY LEARNING

Mothers' experiences

Feelings about pregnancy

- Despair and disappointment
- Fear and worry
- Shock and disbelief
- Happiness



Infant Toddler Discovery Project

KEY LEARNING



Weak or No Social Support Systems

- Choice to live a sober life
- Fleeing domestic violence

Help after Childbirth

- Only one-third of the women (36%) said they received family support *after* the baby was born.
- Another 36% said they had received no family support; in fact these mothers were likely to have been alone after the birth of their baby.

HOME VISITING: HOW DO WE CREATE INTERVENTIONS THAT HELP?



Two Priorities in Program Design

- Prevent further straining an already-stressed system: The psychology of scarcity
- Prevent re-traumatization of children and parents

The Psychology of Scarcity: “Bandwidth”

- Metaphor to describe the ratio of “how much one has going on” to “how many resources it will take”
 - The mental energy required to deal with something at a given time
- Understood in the business world:
“The scarcest resource in [a] company is management bandwidth. Spend it wisely.” Steven Diebold, 2012



Bandwidth

- Homeless families use tremendous amount of bandwidth for daily survival: food, money, shelter, transportation
- Little available energy to plan for future

“...the magnitude of this problem should influence the design of programs intended to help poor people, but often the bandwidth of the poor is treated like a free resource...”

Sendhil Mullainathan, 2012

The Psychology of Scarcity

“There are studies on sleep psychology...they have people pull all-nighters with literally no sleep and then they see the effect of that on IQ and bandwidth... Other studies have shown that poor farmers awaiting their harvests, short of food and stretching what little cash they have until the crops come in, experience about 3/4 of that effect. **So it's as if the poor are pulling an all-nighter every day....**”

Mullainathan, 2014

The Psychology of Scarcity

“When you have too little, your mind can only focus on that...”

“We tunnel on the urgent and forget the important...”

Mullainathan, 2014

Bandwidth and Trauma

- Brain already affected by trauma: Over-activated stress response system
- People in need of *MOST* bandwidth have less available because of chronic trauma



How Do Programs Increase Bandwidth?

- “First, do no harm”
 - Some programs have high demands to “demonstrate commitment”
- Keep interventions simple
- Focus on interventions that increase capacity: Listen, be with, join in relationship
- Lend cognitive support, i.e. “bandwidth,” when families are stressed

Prevent Re-traumatizing of Children and Parents

- Developmental needs of children: Food, sleep, safety, stability
- Exposure to trauma triggers
- Trauma not identified, masked, i.e. ADHD, delays, EBD
- “Protective shield” too taxed

Prevent Re-traumatizing of Children and Parents

- Expectations that are too hard to meet, causing them to lose their placement
- Policies that challenge boundaries, which already are challenged
- Lack of protection from fear, disruption
- Mental illness or violent behavior from other residents

Preventing Re-Traumatization

- Awareness of issue
- Provide stability, predictability, reliability
- Minimize exposure to surprise, change, unexpected people
- Protect children and parents from circumstances that could trigger traumatic memories, such as loss, chaotic interactions, threats, loud disagreements
- Thoughtfully consider changes in direct staff or client ending and how transitions will be handled

What about Home Visitors?

- If listening, joining, understanding, and lending thinking are the main strategy to increase bandwidth, then **home visitors' bandwidth must be attended to**
- Same requirements must hold: Too many program demands will use up bandwidth that could be employed elsewhere
- The urgent will take precedence over the important
- To stay effective, home visitors must be protected from overwhelming trauma and depletion of resources

Summary:

Program Objectives for Homeless Families Home-Visiting

- Keep program demands simple
- Make it worth parents' while to meet with home visitors by helping them feel heard, noticed, respected
- Help parents navigate complex systems
- Help service providers remember the importance of orderly, timely protection
- Help services/systems remember the developmental needs of children and parents
- Help systems remember the needs of staff and home visitors so they can remain effective

For More Information

- National Coalition for the Homeless, www.nationalhomeless.org
- Urban Institute, www.urban.org
- National Resource Center on Homelessness and Mental Illness, www.nrchmi.samhsa.gov
- National Law Center on Homelessness and Poverty, www.nlchp.org/
- Children's Defense Fund, www.childrensdefense.org
- National Alliance to End Homelessness, www.naeh.org
- Health Care for the Homeless Information Resource Center, www.prainc.org/hch
- National Health Care for the Homeless Council, www.nhchc.org
- National Child Traumatic Stress Network
<http://www.nctsnet.org/>

Research

Psychological First Aid for Families Experiencing Homelessness
Ambit Network

[Http://www.trauma-informed-california.org/wp-content/uploads/2012/02/PFA_Families_homelessness.pdf](http://www.trauma-informed-california.org/wp-content/uploads/2012/02/PFA_Families_homelessness.pdf)

Mothering While Homeless: A Qualitative Analysis of Access to
Child Services by Young Mothers in Hennepin County, MN

Hubert H. Humphrey School of Public Affairs

<http://purl.umn.edu/123489>

The Impact of Early Adversity on Children's Development

INBRIEF SERIES: CENTER ON THE DEVELOPING CHILD - Harvard
University

www.developingchild.harvard.edu

Research

Poor Quality Housing Is Tied to Children's Emotional And Behavioral Problems

MacArthur Foundation - How Housing Matters Policy Research Brief - 2013

<http://www.macfound.org/housingmatters>

To Thrive, Minneapolis Children Need A place to Call Home

Children's Health Watch POLICY ACTION BRIEF - 2012

www.childrenshealthwatch.org

Nurturing Resilience: Helping Homeless Children Overcome Setbacks

U of M CONNECT (College of Education and Human Development) - 2011

<http://www.cehd.umn.edu/Connect/2011Summer/Children.html>

<http://www.cgdev.org/blog/scarcity-why-having-so-little-means-so-much-interview-sendhil-mullainathan>

<http://www.nytimes.com/2013/09/22/business/the-mental-strain-of-making-do-with-less.html?pagewanted=all>

Thank You For Listening!

*We welcome your questions, comments,
and feedback!*

For More Information:

Sharon Henry-Blythe
Family Housing Fund
Director, Visible Child Initiative
612-375-9644, ext. 19
sharon@fhfund.org
www.visiblechild.org

Carol F. Siegel, PhD, LP
cfsiegel@gmail.com