Homelessness and Trauma

Defining the scope of homelessness has proven controversial since the issue first gained broad public attention during the 1980s. Public debate has revolved around how widely to view the scope of “residential instability” and how to target scarce resources to address it. In general, the U.S. Department of Housing and Urban Development (HUD) divides “residential instability” into two broad categories: “literally homeless” and “precariously housed” (HUD, 2007):

- Literally homeless. This includes people who for various reasons have found it necessary to live in emergency shelters or transitional housing for some period of time. This category also includes people who sleep in places not meant for human habitation (for example, streets, parks, abandoned buildings, and subway tunnels). People who are “street homeless” may also use shelters on an intermittent basis.

- Precariously housed. This includes people on the brink of homelessness. They may be doubled up with friends and relatives or paying extremely high proportions of their resources for rent. They are often characterized as being at imminent risk of becoming homeless.

HUD’s definition of a person who is “chronically homeless” is an unaccompanied homeless individual with a disabling condition who has either been continuously homeless for a year or more, or has at least four episodes of homelessness in the past three years. In order to be considered chronically homeless, a person must have been sleeping in a place not meant for human habitation – e.g., living on the streets – or in an emergency homeless shelter (National Alliance to End Homelessness, 2007).

According to estimates by the 2007 Annual Homeless Assessment Report to Congress (HUD, 2007), the number of people who were living in shelters or were unsheltered in January 2005 totaled 754,147. Of those, an estimated 338,781 were living on the streets, in cars, or in other areas not meant for human habitation. These figures do not include those who are “precariously housed.”

The role of trauma in homelessness

Homelessness can be a direct result of trauma:

- Among cities surveyed by the U.S. Conference of Mayors in 2003, 44 percent identified domestic violence as a primary cause of homelessness (National Network to End Domestic Violence, 2004).

- One study found that 92% of homeless women have experienced severe physical or sexual abuse at some point in their lives. Of all women and children who are homeless,
60 percent have been abused by age 12, and 63 percent have been victims of intimate partner violence as adults (National Network to End Domestic Violence, 2004).

- Significant numbers of people who are homeless have been exposed to neglect, psychological abuse, physical abuse, and sexual abuse during childhood; community violence; combat-related traumas; domestic violence; sexual assault; and accidents or disasters (Barrow et. al., 2009).

- Research also shows that severe mental illness and chronic substance use disorder are risk factors for homelessness (HUD, 2007). The Annual Homeless Assessment Report sample data suggests that 25 percent of all adults living in homeless shelters are people with disabilities. An estimated 5.4 million adults have co-occurring mental health and addiction disorders. Of adults using homeless services, 31 percent report having a combination of these conditions (NAMI, 2007).

Homelessness itself is a traumatic experience. Individuals and families who are homeless are under constant stress, often unsure of where they will sleep at night or where they will get their next meal (Barrow et. al., 2009).

Homelessness, like poverty, disproportionately affects people of color (HUD, 2007). About 59 percent of people who were homeless and living in shelters in 2007 were people of color, compared with only 31 percent of the total U.S. population. African-Americans constitute 12 percent of the total U.S. population but 45 percent of people who are homeless.

**Barriers to service**

People who are homeless face a number of barriers when seeking services:

- **Stigma.** People who are homeless may have confronted attitudes from the public or the media asserting that most homeless people are homeless by choice. They may have heard repeated suggestions that they are lazy and need to pull themselves up by the bootstraps, or that their homelessness is caused by poor decisions, bad behavior or lack of moral character.

- **No telephone or permanent address.** With no phone number or address to put on forms, people may find it impossible to apply for benefits such as public aid. Potential landlords, or employers who want to schedule a job interview, can’t make contact. Employers may not want to hire, and landlords may not want to rent to, people with no permanent address because they appear “unstable.” And social service agencies may have difficulty staying in contact for the purpose of providing services. Erin Patterson-Sexson, Lead Advocate/Direct Services Coordinator at S.T.A.R. in Anchorage, AK, says:

  “I’m going to have a very difficult time maintaining communication if they are not able to maintain a phone, if they are not able to maintain a residency. If they are
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Victims of violence or abuse who are homeless may find it difficult to implement any kind of meaningful safety planning.

- Despite the fact that many people become homeless as a direct result of fleeing domestic violence, some domestic violence shelters have refused services to individuals who are “only” homeless. Because of this, people may be reluctant to disclose to advocates that they are homeless, which in turn would allow them to get referrals for needed services.

- Experiences of sexual harassment and sexual assault are common for women living on the street or in homeless shelters. Homelessness is a much more dangerous condition for women (Lenon, 2000).

- Women’s homelessness is often “invisible” because women may rely on their domestic and sexual roles as a strategy to avoid shelters, such as taking up temporary residence in short-term sexual relationships (Lenon, 2000).

- People living in subsidized housing may be afraid to disclose abuse because of fear that they will be evicted if authorities discover they have a partner staying in the home. Seattle-based behavioral health specialist Karen Foley (2010) relates:

  “I had someone in a housing program who was trying to get clean and sober. She had a year in recovery, and her partner found her. When he found her, he holed himself up in her son’s bedroom and was using drugs. She was so excited because she wasn’t using, and she was really upset and scared to tell her housing provider that he was there, because the consequences were so severe. Even though she didn’t give out her address, her family did. The police wouldn’t do anything to get rid of him, because his belongings were there and they considered that he lived there. Here was somebody who was well on her way to recovery and safety, and she ended up homeless again because her perpetrator found her.”

Do not let a person’s homeless status discourage you from safety planning (Obtinario, 2010). In fact, safety planning becomes even more imperative due to the increased vulnerability homelessness creates. Discuss:

- What are some of the places the abuser frequents?

- Are there other resources available where the individual will be less likely to encounter the abuser?
couch-hopping and I can’t track them down, then that’s a huge barrier” (Patterson-Sexson, 2010).

- **Restrictions on length of shelter stays.** The average stay at an emergency shelter is 60 days, while the average length of time it takes for a homeless family to secure housing is 6-10 months. Many domestic violence shelters are unable to house families longer than 30 days to allow space for individuals in immediate danger (National Network to End Domestic Violence, 2004).

- **Confusion over how to access services.** One study found that people who are homeless and have a psychiatric condition are often confused over how to access and use available services. The more severe the psychiatric symptoms, the greater the level of confusion (Rosenheck & Lam, 1997).

- **Inaccessibility of services.** Other barriers identified in the Rosenheck & Lam study (1997) included not knowing where to go for services, inability to afford services, and too much of a hassle or too long a wait for services. There are not enough federal housing rent vouchers available to accommodate the number of people in need. Some people remain on a waiting list for years, while some lists are closed (National Network to End Domestic Violence, 2004).

Shirley Moses, Shelter Manager at the Alaska Native Women’s Coalition in Fairbanks, AK, says individuals from rural or remote areas face especially difficult challenges:

“They are homeless. They come in from a village and they don’t have money to go home. Or they don’t feel safe going home. They haven’t gotten access to public housing and they don’t have money for first and last month’s rent and utilities. They don’t have the financial stability where they have established credit needed for housing. They haven’t had to rent, so they don’t have the landlord history. Or they’ve had assault charges and they are not eligible for low-income housing. Or when a potential landlord pulls their name up, three or four criminal violations pop up. It’s usually domestic violence or something related where they’ve been charged, and landlords will refuse to rent to them. Or if they come here and have enough money for four or five months – they’ve gotten their dividend to pay initially – they end up going home because they haven’t been able to find a job. They might have worked at the tribal office but they can’t tie their skills into working in a secretarial setting or other job in an urban job setting” (Moses, 2010).

**Empowering people who are homeless**

Here are some ways to empower people who are homeless:

- Recognize that stable housing is key to escaping violence. Helping victims of domestic violence to access and maintain transitional and permanent housing allows them to attain
safety and self-sufficiency. Transitional housing resources and services provide an essential continuum between emergency shelter provision and independent living. In one study, a majority of women in transitional housing programs stated that had these programs not existed, they would have likely gone back to their abusers (National Network to End Domestic Violence, 2004).

- Improve community outreach efforts. Taking services to homeless individuals – either on the streets or at meal sites or other places where homeless people congregate – often works better than waiting for them to come to you. Sustained community outreach efforts can facilitate access to services and help overcome barriers, especially if homelessness is accompanied by psychiatric issues (Rosenheck & Lam, 1997).

Working with other providers

When working with other providers:

- Join consortiums or continuum of care organizations. Take advantage of opportunities to participate in “continuum of care” organizations made up of community agencies that address homelessness issues. This not only allows advocates and other providers to keep abreast of new services that become available, but also makes other agencies aware of your services and the needs of the people you serve. Participation in these organizations can also be invaluable for accessing grants and other funding.

- Increase advocacy at the systemic level. If housing were inexpensive, or people could earn enough to afford housing, very few individuals would face homelessness. But housing costs have risen steadily across the country and skyrocketed in many areas. At the same time, people with little education or job training find it increasingly difficult to earn enough money to raise their incomes above the poverty level, even if they are employed full-time and work overtime. Only jobs that pay a living wage and policies that expand the availability of affordable housing to people with below-poverty incomes will ensure stable homes for these individuals (Burt, 2001).

Shirley Moses, at the Alaska Native Women’s Coalition, discusses efforts to connect with other organizations to reduce homelessness for women from rural and remote areas:

“If they come into shelter, we have several employers who have given us the opportunity to have them shadow, to give them work-study supported employment opportunities. We work with them to get Pell grants or other grants if they want to stay in town and go to school, and financial aid so they can have that opportunity and get stable housing.” (Moses, 2010).
References


Foley, K., Triple Play Connections, Seattle, WA. Personal interview with Debi Edmund, July 2010.


