

**Policy Interventions for Homeless Families**

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Homelessness is an ongoing concern in the United States. Homeless individuals, specifically families, are at a substantial risk for mental, physical, and emotional illnesses. The most generic form of homelessness is chronic homelessness, those that experience chronic homelessness have a higher rate of substance use and a low economic status. Homelessness typically affects individuals and families because of potential risk factors like demographic economic, familial, personal, and situational (Hanson et al., 2020). There are interventions set in place for homelessness, but often those interventions are short-term. For example, there is subsidized housing for homeless individuals, but the housing options are temporary and do not fix the problem (Bassuk et al., 2010). Families experiencing homelessness typically face lack of affordable housing, a lack of resources, trauma, and the unemployment rate (O'Shaughnessy, 2020). Many systems fail homeless individuals, but the most repeated system failing homeless individuals is health services. Persons who are homeless find it challenging to seek help from health services because of complex health needs, financial barriers, limited availability, and stigma and discrimination within the health services (Brown, 2022).

Homeless individuals are a part of vulnerable populations in the U.S. and intervention planning is often overlooked. Being homeless is one of the most stigmatized and judged populations, due to assumed stereotypes. Studying homelessness is important to policy making, so that the policy advocates have an idea of the causes of homelessness and then weighing the strengths and shortcomings of interventions, this may mean adding to certain interventions, like housing to make it more accessible and for longer periods of time. Policy advocates must familiarize themselves with social problems and assist the interventions in place and how policy advocates can improve those interventions (Jansson, 2018). In the case of homelessness

happening because of domestic violence, trauma of war, or physical or emotional challenges, families have lost more than just their homes (Bassuk et al., 2010). Homeless families have lost their safety, well-being, and the ability to support themselves. For homeless individuals to build a life in the community, they need permanent housing combined with individualized service and support. To stop homelessness, there needs to be more support put in place to help these families, besides giving them a temporary home (Bassuk et al., 2010).

Policy advocates must weigh their options and programs to best understand the interventions in place to help families who are experiencing homelessness. The policy advocates must weigh programs such as the Family Care Curriculum (FCC) and Permanent supportive housing (PSH), by comparing these two interventions and weighing pros and cons of each, policy advocates must then decide which is the best intervention to propose. The purpose of this is to find the best program to help families experiencing homelessness, by restoring their self-identity, well-being, safety, and the capacity to support themselves. After the policy is chosen, community leaders will need to support the program, and the last step to finding support for intervention is presenting it to stakeholders.

There have been studies done that promote training opportunities for families that are experiencing economic hardships. These programs are imbedded in the homeless shelters, the programs and training focused on behavior-oriented skills and often left the parents feeling stigmatized and judged (Biddle et al., 2018). The Family Care Curriculum (FCC) is an evidence-based parenting support program that is designed to help families who are experiencing homelessness. The FCC is a program that focuses on building supportive, safe community spaces and relationships, increasing parental understanding of attachment, and promoting deeper levels of parental self-awareness and positive identity (Biddle et al., 2018). There are five theoretical

frameworks embedded within the training, building reflective capacities, cultural sensitivity, social-learning theory, trauma theory, and self-care (Biddle et al., 2018). It is important for policy advocates to remember that parents do not intend to put their children in positions like this, so the FCC is meant to promote their self-awareness and help them out of poverty and homelessness. During the training, the parents are asked to identify times they feel triggered by, misread, or have not met their children's developmental needs. After the parents reflect on this question, they are encouraged to practice new responses and report back to the group to reinforce learning (Biddle et al., 2018).

There are many strengths embedded in the FCC program, the biggest being allowing families the opportunity to restore their connection. Another pro of this program is allowing parents to reflect on their emotions, attachment, and developmental needs for their children, they can understand and maintain empathic and nurturing parenting responses while experiencing cumulative chronic stress (Biddle et al., 2018). This program focuses on cultural sensitivity as well, there are a disproportionately amount of African American families in homeless shelters. FCC focuses on discussions of racism, classism, oppression, and other environmental factors. This allows people of color to feel seen and receive the help they deserve (Biddle et al., 2018). Other strengths of this program consist of offering trauma-informed care and teaching family's self-care and prioritizing themselves and their children.

Although the FCC has strengths implemented into the program, there are also shortcomings within this program. One of the biggest shortcomings is finding funding for program development and the capacity of the building (Biddle et al., 2018). Another shortcoming of this program is reaching each homeless shelter to provide the training and discussions.

Although FCC is placed in shelter to provide parents and families opportunities, the program itself needs evaluation, specifically the funding of the program (Biddle et al., 2018).

Permanent supportive housing (PSH) can be defined as subsidized housing that is matched with ongoing supportive services. PSH housing consists of 2-year housing with a retention rate above eighty percent, focusing on reductions of chronically homeless individuals and families (Byrne et al., 2014). Most subsidized housing views substance abuse, mental health disorders, and other obstacles be addressed for them to be placed in the shelter. Individuals using PSH shelters are not considered to be homeless anymore (Byrne et al., 2014). The point of this program is for policy makers to study the relationship between community level homelessness and PSH. Most PSH programs only focus on individual homelessness rather than community homelessness (Byrne et al., 2014).

The strengths of this shelter and program are that PSH sheltering does not focus on if the individual or families have mental health disorders, using substances, or the other obstacles that put individuals and families homeless. This program has more shortcomings than it does strengths, one big shortcoming of this program is the lack of expansion. PSH cannot expand due to the funding and seriousness of chronic homelessness (Byrne et al., 2014). Another shortcoming of PSH housing is due to limited sampling, most sheltering focuses on individuals who are homeless and not the whole community of homelessness. (Byrne et al., 2014).

There are existing policies in place for families who are homeless, but not each policy is always effective. The typical policy in place for homeless families is temporary housing, this is not effective by itself, as they typically only stay 6-8 months in each shelter. The FCC is an evidence-based policy training that is implemented into homeless shelters. There needs to be more aggressive prevention strategies involved with homeless families. Allowing families to get

access to a training like the Family Care Curriculum, will improve their self-awareness, allow parents to gain back their emotional attachment to their children, and engage in self-care by prioritizing themselves and their children (Biddle et al., 2018). The FCC not only focuses on individual families but allows peer support to the families as well. Each family is allowed to join in on peer support, which will overall decrease social isolation and the sense of being stigmatized, as well as providing validation to each parent. So, combining peer support, sheltering, and FCC within the sheltering will allow families to gain the support they need back and potentially be a solution for homelessness. It is important for each family member to feel seen and empowered. Mandating that each homeless shelter requires FCC training for all individuals in the shelter, will allow the families opportunities at gaining their life back.

When seeking support for this proposal, it will be useful to consider the affected homeless families' population as well as the individual homeless population. These shelters and training need to focus primarily on families who are homeless, as the FCC is training to encourage parents. This means separating housing that involves individuals who are homeless vs sheltering for families who are homeless. Typically housing for individuals who are homeless consists of substance abuse support and mental health support. Allowing specific sheltering to be just for families while offering substance abuse support, mental health support, and parenting support, will allow the families to be helped. Not all shelters need to be split up, but if the shelter focuses on just individuals, then it is hard to support those families as well.

**Reaching out to homeless assistance programs** to receive funding would make the FCC more effective. Homeless assistance programs in VA give a certain amount of funding to each shelter every year, once the Homeless assistance programs provide funding to each shelter, the FCC can get ready to start. Another agency that provides housing for homeless families is an

agency called Doorways. Doorways allows children and families to live in their housing, so gaining support from an agency that already values families who are homeless would be a major step at gaining funding for the FCC. The outreach for this policy will start in Richmond VA, as there is a need for homeless assistance, and the population is bigger and more diverse, therefore the training will reach more people. Allowing community members to help in fundraising and getting volunteers will help run the shelters and training.

Taking it a step further this policy it will need funding from governmental supporters as well. Considering the FCC there needs to be **mandated training** in each shelter for families who are homeless. Reaching out **to delegate Jeff Bourne** would be the first governmental step for this policy. Jeff Bourne supports things such as affordable housing, criminal justice reform, safer stronger schools, etc. Bourne would be the perfect individual to support and help the Family Care Curriculum. Bourne has similar concerns as this policy has, by gaining support of the Delegate, the policy then can be represented to legislators, to reach the full limit of funding and support. For this policy to work it will need the support and funding from the homeless assistance program, doorways, delegate Bourne, and the legislators. The purpose of the policy will be allowing homeless families to stay in a shelter that provides families training, emotional support, and better their overall well-being.

Stakeholders can be defined as “key persons, groups, and institutions with an interest in a particular policy issue” (Jansson, pg. 248, 2018). The stakeholders first need to be recognized, a few stakeholders in this proposal are social workers, the community, legislators, and case managers. So, when making a presentation to key stakeholders, the first step is to include detailed facts relating to families who are homeless. The next step is to highlight existing strengths and weaknesses of other intervention policies and programs. It is essential to give

credit to the policies in place already, but important to note improvements within each policy. Allowing the stakeholders to hear the full proposal, will have a greater chance of the proposal being passed. The stakeholders should know that the Family Care Curriculum teaming up with shelters that are specifically for families who are homeless, will greater the chance at parents and children gaining a trusting relationship and allow their emotions to be heard without stigma or judgement. By using persuasion methods, specifically friendly communications may help persuade stakeholders to support the proposal (Jansson, 2018). Persuaders often use certain tactics to get stakeholders on board, in this example giving lived experiences, showing statistics, and the positive effects of FCC, the stakeholders are more likely to support the policy. The presentation should be done in a respectful way as there is an abundance of families who are homeless and deserve to receive useful resources.



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