

Mothers' perceptions of factors influencing the restabilization of homeless families

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Lindsey, E. W. (1996). Mothers' perceptions of factors influencing the process of restabilization among homeless families. *Families in Society*, 77(4), 203-215.

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Abstract:

Family homelessness has increased dramatically in the past decade, but little attention has been focused on the process by which homeless families become restabilized. The author presents findings from a qualitative study of the restabilization process. Four factors that affect the process are discussed: children, personal resources, external resources, and socioeconomic context. The findings indicate the significant role shelter staff and other social service providers can play in assisting mothers in both emotional and instrumental ways. Implications for direct practice with homeless mothers and their families are discussed as well as implications for policy and program development.

Article:

Family homelessness was recognized as a major social problem during the 1980s, a period when members of homeless families constituted as much as 37% of the homeless population (Burt & Cohen, 1989; U.S. Department of Housing and Urban Development, 1989). Reyes and Waxman (1989) estimated that 80% of all homeless families are headed by single parents, primarily women. With the increase in family homelessness, research has focused on how families become homeless (Bassuk, Rubin, & Lauriat, 1986; Mills & Ota, 1989; Weitzman, Knickman, & Shinn, 1990), characteristics of homeless family members (Bassuk, 1990; Bassuk & Rubin, 1987; Johnson & Kreuger, 1989), and the impact of homelessness on parents and children (Boxill & Beaty, 1990; Hall & Maza, 1990; Molnar, Rath, & Klein, 1990).

However, little attention has been focused on the process of successful restabilization of homeless families. An exception is a 1991 study in which parents drawn from 97 formerly homeless families and service providers were asked how families are able to emerge from homelessness (Dombusch, 1993, 1994). Factors cited by the parents included an increase in income, support from friends and family, and access to affordable housing. Service providers agreed with these factors but also cited personal characteristics of the parents themselves, such as knowing how to use the social service system, internal strengths, and motivation.

In an effort further to address the research gap regarding the process of restabilization among homeless families, formerly homeless mothers were interviewed to gain their perceptions of the restabilization process. The study sample was limited to mother-headed families because this family type constitutes the vast majority of homeless families in the United States.

The three-stage process of restabilization that emerged from this study has been described elsewhere (Lindsey, 1995). Each of the three stages included certain tasks that had to be achieved if the process were to be successful. The first stage, meeting immediate family needs, included locating shelter, maintaining the parental role, keeping up one's morale, and preserving aspects of stability. The second stage, creating a new home, involved managing cash flow, addressing personal and interpersonal problems, locating a new home, and furnishing the new home. The third stage, maintaining family stability, involved managing finances, managing ongoing personal and interpersonal problems that threaten family stability, and reestablishing or reaffirming family relationships, especially the parental role.

This article is based on additional findings from the same study. Factors that mothers perceived to have affected the restabilization process, for better or worse, are described. Although rhetoric and research have discussed the causes and cures of homelessness, little attention has been focused on the perceptions of homeless people themselves. Information about mothers' perceptions is valuable to shelter staff and other direct-service staff who work with homeless families as well as to program planners, administrators, and policymakers.

Methodology

This study was conducted according to a descriptive qualitative design. A purposeful sample was recruited through contacts with three homeless shelters in different areas of Georgia. The population of the three towns involved in the study ranged from a low of 66,574 to a high of 87,594. Nonmetropolitan areas were selected for the study because of paucity of research on homelessness in small communities.

Criteria for participation in the study were (1) participants had resided in a homeless shelter with at least one of their children and (2) they had been in a stable living situation for at least six months prior to the interview. Stable living situation was defined as participants not having moved in the past six months except to improve their living conditions. The criterion of redundancy (Lincoln & Guba, 1985) was used to determine the final sample of 10 participants, that is, sampling was terminated when new interviews failed to generate new information.

Data were collected through in-depth semistructured interviews lasting one and onehalf to two hours. Data analysis was conducted by means of the constant comparative method (Glaser & Strauss, 1967; Strauss & Corbin, 1990). Strategies suggested by Krefting (1991) were used to minimize threats to internal and external validity and to reliability.

The Families

Pseudonyms are used for all participants as well as for the three towns and shelters involved (the Acton shelter, the Alcove, and the Haven/Next Steps). The mothers ranged in age from 25 to 52 years; at the time of shelter stay, their children ranged in age from 1 to 16 years. Length of shelter stay for the families ranged from two weeks to eight months. At the time of the interview, five of the mothers were divorced, three were never married, one was widowed, and one was married. Three families were living in public housing, two were receiving housing subsidies, three were renting with no assistance, one was living with relatives, and one owned and lived in a trailer. Four of the mothers were working full time, one was working part time, and five were unemployed. Six African American and four White women participated in the study.

Three of the families became homeless because the mothers were drug addicts, and two mothers wanted to get the children away from fathers who were using drugs. In two other families, homelessness occurred because the fathers were either physically or emotionally abusing the mothers and/or children (drugs were involved in these situations also). Two of the families became homeless because of poverty and/or inability to negotiate the public welfare system effectively enough to avoid homelessness, and one family because of unemployment resulting from a dispute over Worker's Compensation.

Findings

Four factors that affect the process of restabilization emerged: children, personal resources, external resources, and the socioeconomic context in which the family lives. These factors may have a positive or negative effect on any of the stages of a family's restabilization process. Each of the factors has several elements as described below.

Children

Generally, mothers viewed their children as a positive factor in the restabilization process. Mothers perceived children to be (1) motivators, (2) a key to accessing resources, and (3) caretakers of the mother.

Children as motivators. The motivation that children provided for mothers was one of the more important factors in the restabilization process. In several instances, the family became homeless because the mother wanted to protect children from a dangerous or unhealthy situation. Once homeless, children provided an incentive for mothers to resettle their families.

Four women chose to leave their existing living arrangements in order to protect their children from drugs, abuse, and/or crime. Jean, for example, described why she got evicted from a housing project so she could move into a shelter and thus receive preference for a housing subsidy. She said, "I had to get Joe out of there. . . . He was being taught to break and enter, to get in second-story windows . . . and this is not what I want in his head."

After the families were in shelter, the presence of the children was the mothers' strongest motivator for getting restabilized. When asked what kept her from giving up, Katrina responded, "My children . . . Lord, yes, I don't want nothing to happen to them." Denise said, "Mike is my main goal for trying to go up every step that I can."

Children as key to resources. Several of the mothers believed that they were able to access certain resources because they had children. Both Jean and Susan noted how much easier it is for mothers to get help than it is for single women. Susan said,

If I didn't have Terry, I wouldn't have gotten on PEACH [a jobs program], I wouldn't have gotten on AFDC, I wouldn't have gotten food stamps. There's a lot of people . . . that do not have any dependent, and there's no help for them.... If I didn't have her... I don't know what would have happened.... I probably may be still homeless.

Katrina thought it might be easier for women with children to get into a homeless shelter but that it is more difficult for families to stay with friends or relatives. She said,

You get in [the shelter] quicker with children. But if [a woman] got children, make sure you have a place where you can put your children. [Single women] can go out here and stay with this and this person, but a lot of people ain't gonna let people with children stay.

Susan also noted that it is difficult for families with more than one child to get resettled after being homeless. You get people in [the shelter] with seven kids and it's hard for them to do something. And four and five kids, sometimes they can't get on PEACH because they don't have the funds. You have to wait in line. And I just don't know what is happening to them that [they] have to go on that little bit of money in AFDC and food stamps. And there's no place to rent and pay utilities, so I don't know what the option is for them.

Children as caretakers. Although none of the mothers themselves actually used the term "caretaker," this word seemed to summarize various ways in which some children had "looked out for" their mothers or otherwise took care of them during stressful times. Sissy and Kate, both of whom were recovering addicts, talked about how their children actively helped them maintain their sobriety, often intervening when they thought their mothers might be tempted to use drugs. Sissy described her children as her "overseers."

They watch over me, keep me on the right track.... They don't like for me to drink or do drugs.... They don't like for my old friends to come around. Even if they call, they don't like it. So I think they've gotten the vibes that my kids don't like them, so they stopped calling. That's how they helped me.

Beth talked about how her 10-year-old daughter cared for her while she was bedridden in a shelter after a work-related accident: Daisy was worried about me.... She cleaned my sores. My incision abscessed, and as much as I tried to wash it when I was in the shower, she'd say, "Mama, it's O.K. I'll do it." She took care of me. She put a bedpan under me when I could not move.

Susan relied on six-year-old Terry for emotional support while in the shelter. However, in contrast with the active ministrations of Beth's and Sissy's children, Terry did not take this role in an intentional way. Rather, Susan seemed to have derived a sense of emotional support simply from Terry's presence. I think probably we helped each other. Who knows where I would have been if I hadn't had her, I mean emotionally. I may never have come out of it.

Personal Resources

Personal resources of the mother, who as a single parent was solely responsible for her family's restabilization, also affected the restabilization process. This factor has two components: (1) coping skills, which refers to abilities that enabled the mothers to facilitate the process of restabilization, and (2) individual characteristics, which refers to traits rather than to skills.

Coping skills. Although participants perceived that they had various coping skills that facilitated the restabilization process, one coping strategy stood out in that 8 of the 10 women mentioned it: the ability to tap into their religious faith for strength. This strategy was not a passive "God will provide" belief, but an active coping mechanism that women said got them through the experience of homelessness. For instance, Denise said:

I don't believe that there's no way on this earth that I could have did this without Him. God played a big role in my life... I went into the closet at the shelter one evening. . . and I prayed. I asked God to give me strength. Denise, Katie, and Sissy all turned to God to help them handle their desire to use drugs. Sissy's statement is typical of these women:

I had lost faith in everything... Then I went to [the substance-abuse treatment program], and they was teaching us about a higher power. Once I claimed the higher power, then it was certain things started happening I would ask Him for certain things, you know, "Give me strength to avoid, to say no. .

Although religion played a big role in helping mothers keep their spirits up, the mothers also had other ways of coping. Ellie learned an effective technique for building up her confidence when the assistant director of the shelter suggested that she talk to herself while standing in front of a mirror. She would look in a mirror and say, "Ellie, I am somebody, you are somebody. Ellie, you can make it." And when I see myself going back now, I go in that bathroom and close that door. That's what I learned to do, and it works for me.

Susan gave the following advice to other women who have left battering situations:

Take care of yourself and pamper yourself, be good to yourself.... You have to learn again what you like to do ... You lose that when you're in that situation. You lose yourself, you lose what you're like, what you enjoy. You really don't enjoy life.... So, first thing is to get your self-respect back and find out what makes you happy. Realize that you can do things on your own.

Mothers also avoided potentially problematic situations, particularly the women who had had substance-abuse problems. For instance, Ellie talked about how she had to distance herself from one of her brothers.

He's so thoroughly on drugs until it's awful. I have let him be my downfall a lot. Even before Mama died and since my mama died, trying to help see about him because I promised my mother that I would, but when I try, I fall. So I had to learn in the [12-step] meetings that I had to cut him a loose if I was going to keep on trying to stay clean.

Other coping skills that the women mentioned included being able to manage money within a budget, knowing the system, and helping others. Kate, for example, learned how to manage money while living in the shelter: It was very hard.... It seemed like all the money that came in went towards bills instead of towards what [the children] needed... I used to let things like that worry me, but now I know to get what has to be paid first, and

they can wait. If they want to garnish on me, or whatever, they can. I have had a lot of those come up, and like I tell them, "You'll get it when I get it. I haven't forgot." But I'm not going to let it worry me. And then necessities have to be paid, like lights, gas, rent, phone bill.

Another important coping skill is the ability to "work the system" to get the family's needs met. Jean said: I know how to get a place to live, as long as I'm not out in some little country town. I know that I can work the system and go to the nearest church, and they can tell me where to go . . . where they're serving a hot meal or where they're putting up homeless people.

Some mothers knew the system well enough to realize that if they were living in a shelter, they would get preference on waiting lists for housing subsidies or public housing.

Another way mothers coped was by extending help to others. For example, Denise said, When you help one person . . . they're going to look back at you and say, "Well, look at her, she's trying to help me. Let's find out what I can do with her." They might know somebody that got a job.... That's helping that's gonna come back for you

Lorna enjoyed helping other homeless women because "it really makes you feel good. . . . When you're down and you feel bad, some people find that if you helping other people, it'll help you."

Individual characteristics. In addition to the coping skills that mothers brought to bear on their situations, they also recognized their own individual traits that helped them through difficult times. They mentioned qualities such as toughness, persistence, being motivated and willing to accept responsibility for creating changes, willingness to ask for help, confidence in their ability to handle the situation, and a sense of independence. For example, Beth described herself as "a fighter," and Denise said she was "hard as a rock," having been brought up with four brothers. Sissy said she had a "strong will."

Susan also described herself as strong, saying, "It's probably in my nature to survive. ... It's hard to come out of a situation like that. And you've just got to want to do it and be determined." Susan did not originally have much self-confidence. It was only when a staff member at the shelter pointed out that she had already been supporting her family that Susan realized that she could, in fact, do whatever was necessary to take care of Terry and herself. Mandy described herself as independent and said she did not like to depend on others. She emphasized the importance of being persistent in the face of difficulties:

I don't care where you live, you should be able to take care of yourself. I mean, be proud of who you are, don't let yourself go. And I've seen some of the people who have, it's like they have just given up. I never gave up. Ellie had never been homeless before she moved into the Acton shelter and she did not know how to go about getting back on her feet. She was, however, willing to learn and to accept responsibility for changing her situation. Ellie observed that not everyone was as motivated as she was: "It's up to the individual person . . . to take the help that is offered and work with it. Because the person can make it go faster or . . . make it go slower." Several women talked about how important it was to be willing to ask for and accept help. Denise saw a connection between accepting help and accepting responsibility for one's situation:

If you find yourself in a situation that you're homeless, go somewhere that someone's going to help you bring yourself up out of that hole because if you're in that hole, you took yourself down in there. Nobody else put you in that hole but you.

Some women also mentioned characteristics or qualities that seemed to hamper the process of restabilization, such as pride, fear, reluctance to resolve personal problems, and lack of confidence in one's abilities. Jean thought that "a lot of time people go through a lot of unnecessary stuff because they're scared and they feel alone and they feel helpless." She might have been speaking of Denise, who was so afraid of being out on her

own for the first time in her life that she almost went back to her abusive husband-"till I popped back to reality and I said, `Don't be stupid here, girl.'"

Several mothers believed that readiness to deal with problems is an important aspect of resolving personal and interpersonal problems that may have precipitated homelessness or that may threaten future family stability. Both Ellie and Sissy talked about other homeless women with substance-abuse problems who were not ready to get clean. Ellie said, I know a few mothers that have been in the shelter with their kids. They went to the outpatient clinic and they knowed what to do to stay clean, but they out here again. It's like they not ready yet. I guess I was ready.... A lot of times they just run in because they afraid they're going to lose their kids or at that time they feel like they just tired of drinking and drugging for the time. See, me, myself, I had had enough.

External Resources

The extent to which external resources are available to the family is the third factor affecting the process of restabilization. Formal resources include assistance received from agencies, institutions, and the individuals associated with those organization, whereas informal resources refer to assistance received from family and friends.

Formal resources. The significance of the help these families received from formal sources such as agencies, institutions, and individuals within those organizations cannot be overestimated. When asked to what they attributed their success in restabilizing their families, many mothers gave credit to the help they received from the shelters, the public welfare agency, and specific individuals who worked for these agencies. In addition to providing a temporary residence and food, shelter staff helped by providing concrete assistance such as furniture, household goods, clothes, transportation, help in moving into new homes, and serving as a bank where mothers could save a portion of their AFDC or payroll checks until they were ready to move out. Shelter staff made referrals to other agencies that could provide services and often wrote letters to assist the families in securing housing subsidies. Shelters also provided parenting and budgeting classes. For example, Mandy said shelter staff were primarily responsible for her family getting restabilized because they are the ones that hooked me up with the resources . . . and they're there to talk if you had a problem... They hooked me up with parenting classes because it was starting to get really stressful.

In addition to concrete assistance, shelter staff also provided emotional support and helped boost the morale of many of the mothers. Ellie said,

They helped me to put confidence in myself. They were there for me when I needed someone.... Without their encouragement and their push and . . . helping me to have confidence in myself, and the firmness, I wouldn't have ever made it... And I wind up putting my success on the help that I got from in there, and the way that they treated my kids. I could just sit back and just see how happy my kids were. And it was all coming from these people that was strangers to us. But there they was, making us so happy and giving us a new outlook on life. A new life, really a life that we had never had.

For many of these families, the relationships they developed with certain shelter staff went far beyond a professional helper-client relationship. Each of the three shelters had one person about whom the women spoke with gratitude and great personal fondness. Many of these relationships lasted long after the families moved out of the shelters. Ellie talked about her family's relationship with Bill, the assistant director at the Acton shelter:

We had long talks. . . He'd talk to me blunt. And I like that about him.... When he would see I would start doubting myself, he would get in my crap bad and say, "Get up off that pitypot. You can do it." Once we did leave, Bill continued to, we became a family.... We still communicate together. Sissy also talked about her relationship with Bill as being very special because he is a true Christian. And anytime I felt down or something I really wanted and I thought it wasn't going to go right, he would pray with me. And he was my religious figure.

Women who stayed at the shelters in Rockhill spoke similarly about the director. For instance, Susan said, "Morene, she's very good. She's a very good counselor. She's the one that told me, 'I don't know why you thought that you couldn't do anything because you've been doing it all.'" Kate said that after she left the shelter she missed Morene, who was a "mother figure" to her. Morene also took a very personal interest in Kate's children. Kate said, [She] showed them so much love. I'll never forget. Bob had took school pictures, and I didn't have the money to get them, and [Morene] bought them... I mean, she was coming out of her own pocket with it.

The public welfare agency also provided assistance to almost all of these families at one point or another. In addition to processing applications for AFDC, food stamps, and Medicaid, caseworkers linked Mandy and Susan to job-training programs that provided day care, tuition, and stipends. Katrina had an open child protective services case, and her caseworker was able to find agency funds to pay off her back rent so she could move back into public housing.

Five of the 10 women interviewed were able to move into new residences because they received housing subsidies. Five of the families lived in public housing after at least one episode of homelessness. At the time of the interview, three families were still living in public housing. Two of these mothers expressed a desire to move and either rent on the open market or purchase a home of their own; one seemed content to remain where she was.

In addition to the assistance received from shelters, welfare agencies, and housing programs, the mothers reported receiving help from churches; vocational/technical schools; drug treatment programs; 12-step programs such as Alcoholics Anonymous (AA), Cocaine Anonymous (CA), and Narcotics Anonymous (NA); community-action agencies; and other organizations.

Lack of resources made it difficult for some of these families to resettle themselves as they would have liked. For example, Denise did not want to live in public housing, but because her only income was from public assistance, she could not afford to live anywhere else unless she secured a housing subsidy. However, she said that there was a three-year waiting list for the subsidies.

Susan talked about her concern for families who came through shelters after housing subsidies became scarce in her area because the only alternative was public housing: It's impossible to pay rent, like two hundred and something dollars, and then all there is is the projects. And most people, like me, I would have hated to move in the projects with Terry.

Denise also complained about a housing authority regulation that she believed kept families in poverty rather than helping them become independent. She said that as soon as a person gets a job, the housing authority raises the rent.

I always felt that they should at least give you six months where you could maybe save money [so] you could actually move out of housing authority. They say you should use housing authority as a stepping-stone, but I don't see how you can use it as a steppingstone when they jack that rent up each time that you get a little bit more money.

Susan summed up the importance she places on the help that she received from various agencies and organizations, stating that if she had not received the help she did, she wouldn't have made it. Let's say I couldn't have got [the housing subsidy]. We would probably have ended up in the housing project, maybe. That would have been probably the only choice. If I hadn't gone to school, I'd be making \$3, \$4 an hour at the restaurant. The people at the Haven got me started in the right direction.

Informal resources. Most of these families also received help from informal sources, such as family and friends who provided storage for furniture, helped move furniture when the families finally got a place of their own,

took care of children while the mothers looked for a residence or a job, gave them small amounts of money or other things they needed, and provided moral support. For example, Denise's sister came down from Virginia and drove Denise around looking for jobs. Denise continues to receive help from her former sister-in-law, who helps her out financially with her son, Mike, and is a great source of moral support to Denise.

Sometimes a new relationship with a man seemed to be a key element in helping a mother feel that she was getting on her feet again. Mandy's friend, Jeff, whom she later married, gave her a car while she was staying in the shelter so she could drive to school. Jeff also helped her financially and emotionally throughout her shelter stay. Lorna was still living in public housing, had not completed her GED, and had only part-time work three years after she left the shelter. Yet, at the time of the interview, things seemed on the upswing, which she attributed to having met Ronald. She said,

He want us to have things. Before he came in our house, we didn't have nothing. We lived here eight months on mattresses and box springs.... I was getting to a point where it really didn't matter.. . But when he came in the house and everything, it's like you want now. He want us to have this and he want us to have that. And now, I want this, and I want for that.

Lorna and Ronald were married by the director of the Acton homeless shelter several months after the interview, and Lorna began attending classes for first-time home buyers with the hope of becoming eligible for assistance in buying a house.

Several families had been temporarily housed by relatives or friends. For example, Kate stayed with a succession of relatives and friends for three years before entering the shelter. Mandy moved in with a friend a couple times, but it did not work out.

Several of the women did not want to ask extended family and/or friends for assistance. When asked if she considered going to her friends for help, Sissy laughed and said, "Most of my friends was using . . . and that's a no no." Susan was afraid to ask her family for help because she was afraid that her husband would track her down and harass them. Mandy said she did not call on friends or family, because "I didn't have many friends that I could turn to.

. . . My family is scattered, and I didn't want to take Jim out of state [away from his father]." Later Mandy revealed that she and her siblings had been abused by their parents. She said, "See, that's why I'm not close with my immediate family, because they're just a hindrance. I've broke enough shackles, I'm ready to move on."

One of the biggest sources of informal support for some women was the relationships they formed with other shelter residents or participants in treatment programs. Denise, Katrina, Ellie, and Kate all talked about friends they made in the shelters, people they could talk to for moral support and who would help take care of their children. Kate met her friend Mavis in her treatment program and later she moved in with her. At the time of the interview, Mavis was allowing Kate to use her car because Kate's had broken down. Ellie also talked about the relationships she formed with people in the treatment center and how much she missed them.

And the treatment center, that was home. I'm lonely for those people right now. I get very lonely for them, even though I'm out here in this outside world, even though I'm over there with my father. I'm sort of close to him, but not close as me and those people were. Because, see, we was going through the same thing. We were in the same shoe. If you ain't never been in the environment, you can't never tell what it is. You got to wear the shoe first before you can know what it feels.

Socioeconomic Context

The socioeconomic context, which involved characteristics of the larger society and/ or the geographic area, is the last factor affecting the restabilization process. The three components of this category are job market, housing market, and discrimination.

Job market. Most of the mothers wanted to find employment. However, they perceived the job market as having a negative impact on their ability to restabilize their family because the jobs that were available and for which they were qualified did not pay enough for them to support their family.

When Susan left her husband and moved to a shelter in another town, she left her factory job behind. In Rockhill, she found "there weren't any jobs I could hold. . . . About the only jobs that were here were like at McDonald's and places like that, and I knew that would not work out for me." When she visited an uncle in Florida, she "thought about staying down there [but] the rent was too high, and the pay is like \$4.50 and \$5.00, even for an office job. And I knew that I couldn't make it." Even after Susan learned office technology through a job-training program, she still had difficulty finding work. She was unemployed for approximately six months after she graduated until she finally secured a series of two temporary positions. Thus, two and one-half years after completing her training program and four and one-half years after leaving her husband, Susan still did not have secure employment.

Mandy and Jean had similar experiences. Neither was able to find steady work paying a family wage, even after completing training programs sponsored by the state JOBS program. At the time of the interview, Mandy was working in a temporary secretary/typist position created especially for graduates of the JOBS program, and Jean was still unemployed.

Housing market. Even though they were living on extremely tight budgets, many of these women did not want to move into public housing because of the perceived dangers for their children. However, women who looked into the local housing market, with or without a housing subsidy, often found little available that they could afford. For example, Mandy said,

The only things that were available were like houses . . . that were like \$600, \$700 a month. Or like the really bad sections of town where it's run down. I looked at this one place, and I wouldn't let a pig live in it. And they were wanting almost \$275 a month, and holes in the walls.... I says, "We're desperate, but we ain't that desperate."

Even when mothers were able to find housing, sometimes landlords did not keep the property up, so the families had to move. For instance, Jean and Joe moved three times in four years because of unsanitary conditions.

Discrimination. Several women reported experiencing discrimination in looking for jobs and housing as well as in receiving services while they were homeless. For example, Denise, an African American woman with an associate degree in child care and more than 10 years of experience, found racial barriers to securing a job as a day-care teacher. She said, "It's fine if you're going for a teacher assistant, but [day-care centers did not want to hire black teachers] unless it's a predominantly black [day-care center]." Unfortunately for Denise, she couldn't find any openings in black day-care centers. Her experiences of discrimination discouraged her from looking for work in day care when she became homeless.

Jean believed she experienced gender-related job discrimination. Despite the good pay, past experience working in a welding shop made her reluctant to look for that type of work again when she became unemployed:

I did not want to go back into a steel shop down here in the South because, excuse me, they're all a bunch of ignorant, backward men down here that are 100 years behind. And it's bad enough to have permanent shit detail, but when you're also making \$150 a week less than the man standing beside you doing the same thing, this was my experience.

After completing school and being unable to find work in drafting, she applied for jobs at home improvement stores and lumber yards. She said,

I figured if I can wrack steel and drive a fork truck there, I can sure as hell drive a fork truck and work with lumber. But down here we're dealing with people who think a woman's [place is] in a bed, in the kitchen, and at the washing machine.

Some women reported experiencing discrimination in housing as well. Sissy, who is African American, found a three-bedroom house in good condition. However, when she went to rent the house, she was told that it had electrical problems that would require work before anyone could move in. Shortly afterward, Sissy saw someone else had moved into the house. Although Sissy indicated that this may have been racial discrimination, she also believed she was discriminated against because she was living in the shelter at the time.

After Jean moved out of the shelter, she experienced problems because her landlord refused to spray her apartment for bugs. Jean believes that this was because "I was living with a Black man at the time, and they were prejudiced, and they'd spray all the apartments in the building but mine, and then I'd get all the bugs."

Some women also experienced discrimination when trying to secure services. Jean described the reception she received at a local agency where she was referred for assistance with her bills:

The problem [was] Wilson was with me at the time. They knew he was there and Black, and so, as long as he was there, they weren't going to help me. And this, excuse my expression, this prejudiced bitch is supposed to be representing the churches in this town.... They were helping White couples that were together and Black couples that were together, but not the mixed.

Mandy talked about the stigmatizing effect of being on public assistance.

I hated it, especially with food stamps. You go to the grocery store, and people just stare at you. Or you get your welfare check and you got to try to get it cashed, and you feel like you've got this stigma, people constantly staring at you. And I hated it.

Implications of the Study

Mothers in this study spoke eloquently about factors that helped or hindered their efforts to restabilize their families. The small sample and exploratory nature of this study limit its generalizability. However, many of the findings support results from other studies and thus merit attention by shelter staff and other direct-service providers who work with homeless or at-risk families. The results also have implications for policymakers and program planners.

Implications for Direct-Service Providers

This study contradicts a deficit-focused view of homeless mothers as failures who cannot provide basic necessities for their children. These women have personal strengths and resources that have enabled them to keep their families together under dire circumstances while many other women have either lost or given up custody of their children.

Mothers in this study described themselves as independent, persistent, strong-willed, and tough. These retrospective descriptions do not necessarily reflect how they felt or perceived themselves while they were homeless. In fact, many of the women described themselves as desperate, lost, confused, and uncertain when they first became homeless. Many were not able to attend adequately to their children's needs. According to these women, shelter staff can be most effective by helping mothers keep up their morale and effectively manage their emotional reactions to their situations, recognize their strengths and resources, and figure out how to take care of themselves. As one of the mothers said, "I had to work on myself before I was able to go and work on my son. To get him stable, I had to get stable."

Many women mentioned that shelter staff helped them to realize inner strengths and abilities they had forgotten or were unaware of. Mothers need help and encouragement to express and deal with fears and lack of

confidence that can hamper their efforts to restabilize their families. Many mothers' apparent lack of readiness to make a change in their lives may well be related directly to such unresolved fears and doubts. Shelter staff and other direct-service providers would do well to adopt a strengths-based approach to working with these mothers, one that helps them recognize and appreciate strengths and resources that they may have forgotten they have.

In addition to emotional and moral support, many women also need help developing skills and abilities. For example, many mothers need to learn how to budget and manage money and to develop realistic goals and plans based on available options. For women who have no previous experience with the social service network, information and referral to other agencies is a critical service.

One of the more striking findings in this study was the impact one person can have on the lives of homeless families. In each shelter, respondents cited one person as being a "mentor," "savior," or someone they perceived as being directly responsible for their ability to get back on their feet. According to these mothers, one person can make a major difference to the restabilization process, not necessarily through the provision of concrete assistance but by helping mothers develop the confidence they need to try to escape homelessness. This finding is a testimony to the value and power of relationships in the helping process and should provide direct-service staff with a sense of the significance of interpersonal interactions with homeless families.

For most of these women, religious faith was a major source of support and strength. In many cases, shelter staff were instrumental in helping mothers rediscover or utilize their faith to cope with their situations. This finding may require that professional staff, many of whom have been trained to avoid religious issues in counseling, learn how to help mothers access and use their faith. The fact that so many shelters are operated by religious organizations (Rossi, 1994) may make it easier for some shelter staff to use such approaches in appropriate circumstances.

Several mothers cited the informal relationships they developed with other shelter residents as a major factor in coping. Not only did these relationships provide emotional support, but residents often learned how to "work the system" from one another. Shelter staff should consider ways in which self-help efforts can be fostered and encouraged. For example, shelters can encourage the formation of support groups among residents or ask residents to serve as mentors or "buddies" when new families enter the shelter. This approach can not only provide direct support and assistance for families, but can also boost the morale of residents who begin to see that they have something to contribute to others.

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The finding related to children as caretakers of mothers is potentially troublesome, as these children may be at risk of being inappropriately encouraged to take on adult roles. However, Boxill and Beaty (1990) offer an alternative explanation that emphasizes flexibility of family roles in crisis situations. In their study of parent-child interactions in an Atlanta shelter, Boxill and Beaty noted that teenage daughters often took on such parental responsibilities as bathing, feeding, and disciplining younger siblings. Although one interpretation of these behaviors is that mothers abdicated parental responsibilities, Boxill and Beaty suggest that mothers "were being soothed by the efforts of their older children. In an unkind and often assaulting world, mothers were comforted by their children's special acts of assistance and caring" (p. 59). Minuchin (1974) noted that for some poor families in extreme crisis, it may be quite functional for children to assume certain parental responsibilities if they are mature enough to handle them. In fact, such situations may help children learn valuable skills. Thus, although shelter staff should focus efforts on helping mothers fulfill their parental responsibilities, they should also keep in mind that some parental caretaking by children is not necessarily dysfunctional or harmful.

Policy and Program Implications

Although mothers needed emotional support and the opportunity to develop skills for independent living, they cited structural factors that made the process of restabilization harder. For example, several women completed government-supported job-training programs that prepared them for nonexistent jobs. None of the women reported receiving child support from their children's fathers and thus they had to rely on AFDC. For many women, the move from AFDC to reliance on a paycheck was fraught with the possibility of financial crisis, lack of medical insurance, and continued subsistence at the poverty level.

Several women attributed their successful restabilization to the housing subsidies they received but noted that the availability of such subsidies has declined in recent years. Even women who received housing subsidies had difficulty finding housing in safe neighborhoods or landlords who would accept the housing certificates. Families who moved into public housing had to contend with unsafe conditions.

These perceptions regarding socioeconomic factors affecting the restabilization process speak to the structural nature of homelessness. Even if mothers are able to keep their spirits up and develop the confidence it takes to look for work and housing, they are likely to face an environment in which lack of unskilled jobs that pay a family wage and lack of adequate low-cost housing hinder their efforts. Thus, the personal experiences of these women support the arguments of researchers like McChesney (1990) and Buckner (1991), who assert that in areas where low-income housing is scarce, where few housing subsidies are available, and where few unskilled jobs provide a family wage, intervention programs designed to prevent or ameliorate homelessness will not be successful in reducing the homeless population.

The findings of this study indicate that homeless mothers agree with many of the recommendations that have been propounded by researchers and homeless advocates for years. In order to facilitate the successful restabilization of homeless families, public policy and programs must promote development of low-income housing, encourage landlords to accept housing subsidies, and make public housing projects safe for families. In addition, job-training programs must prepare participants for jobs that exist and pay a family wage. Welfare policy must not punish parents who go to work by cutting off their housing subsidies and medical insurance before they are able to pick up these costs themselves.

It is extremely disheartening and disconcerting to note that proposed federal legislation would cut funds in exactly those areas in which homeless families need the most help. The proposed cuts in Department of Housing and Urban Development programs that fund housing subsidies and renovation of public housing will have a particularly negative impact on the ability of homeless families to become successfully rehoused. Current proposals to limit the time a family can receive AFDC and render teen parents ineligible for assistance would pose serious threats for homeless or at-risk families.

Baum and Burnes (1993) asserted that until homeless individuals have access to services that enable them to deal with the problems that precipitated their homelessness, it is unrealistic to think that they can find and maintain any sort of stability in their lives. The mothers in this study who became homeless as a result of substance abuse confirm this assertion. Substance-abuse programs must be widely and readily available to mothers whose homelessness is related to their addiction. The importance of this service was underscored by the experience of both Ellie and Kate, whose families were homeless several times before the mothers finally received treatment for their addictions. It was only when they successfully completed a treatment program that these women were able to restabilize their families.

Some researchers have suggested that public policy should support informal assistance to homeless or at-risk families by extended family and/or friends (Dornbusch, 1994; Rossi, 1994). Although such policies would no doubt help some families avoid homelessness, the experiences of the women in this study illustrate the minimal impact such policies might have. Many of the mothers were reluctant to seek assistance from family or friends for various reasons. Goodman (1991) documented high rates of sexual and physical abuse among homeless women. Among the women in this sample, several reported circumstances that made them reluctant to appeal to

their families. Women who are leaving abusive situations may be reluctant to go to their families out of fear of involving them in violence. Women who are attempting to conquer addictions may be reluctant to approach friends for help because their friends are likely to be addicts themselves.

In fact, most of the women in this study did receive some assistance from family or friends. However, these families were often so poor themselves that they were not able to do much more than provide temporary housing, occasional child care, transportation, emotional support, and very small amounts of money. These findings support those of Shinn, Knickman, and Weitzman (1991), who found that homeless families had social networks to which they could turn in times of crisis but that these social supports were not strong enough to prevent homelessness.

Public policy and programs developed to prevent and ameliorate homelessness need to take into account the fact that some families may always need some form of public assistance in order to avoid homelessness. Policies and programs that encourage families to take in at-risk members and to provide whatever support they can would be one step in facilitating restabilization. However, solutions to the structural problems of lack of low-cost housing and unavailability of jobs that pay a family wage will likely produce more dramatic and long-lasting results.

Conclusion

This exploratory study, which focused on mothers' perceptions of factors that help or hinder the process of restabilization, provides additional support for findings of other studies that emphasize the importance of policy and program initiatives in preventing and ameliorating homelessness among families. In addition, however, this study offers valuable insights into the experiences of mothers who are struggling to emerge from homelessness regarding the types of assistance they find beneficial and the ways in which lack of resources, both personal and external, can hinder the process. This study also reveals the significant impact a relationship with a supportive direct-service provider can have on the process of family restabilization.

This information can be extremely valuable to those who work directly with homeless mothers and children, especially if a strengths-based model of practice is adopted, one that enables these women to recognize and utilize both the internal and external resources they already possess as they work toward developing needed resources and skills.

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