

Tip Sheet

Working with Homeless Couples



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Introduction

Homelessness has long been associated with single men and, to a lesser extent, single females. However, the face of the homeless has now shifted to include women with children and a growing number of couples with and without children; married and unmarried. Many have attributed this shift in the composition of homelessness to the great recession, which began in 2007. Among married couples, homelessness is a stressor that threatens the relationship. The purpose of this tip sheet is to increase awareness of the complex challenges faced by homeless individuals and families as well as offer tips to assist safety-net service providers as they provide the necessary supports to families working toward self-sufficiency.

The Problem

Based on “point in time” (PIT) estimates, on a single night in January 2009 there were approximately 650,000 sheltered or unsheltered homeless people across the United States. According to the 2010 *Annual Homeless Assessment Report to Congress*, “A total of 79,446 family households, including 241,951 persons in families, were homeless on the night of the 2010 PIT count. Since 2009, the number of homeless families increased 1.2%, and the number of homeless persons in families increased 1.6%. Nearly 80% of homeless persons in families were sheltered on the night of the PIT count, and 21% were unsheltered.” The one-year estimates indicated that over 1.5 million persons used a shelter or transitional housing during the year. The proportion of families that were sheltered at some time during

2009 was a 30% increase over the estimates in 2007.¹

Overall, adult men make up the largest demographic group of the sheltered homeless population (63.7%). Conversely, sheltered homeless families tend to be overwhelmingly females with young children. In fact, it is only adults with children that are considered families for these purposes. As the 2010 report indicates, multi-adult households without children are counted as individuals. Homeless families are defined as households with at least one adult and one child.² As such, data on adult couples without children present is largely unavailable. The lack of data does not, of course, indicate that such couples do not exist, but that the typologies used to categorize the homeless largely do not include such units. It is also likely that because many family shelters do not accept men, couples are forced to separate when they become homeless.³ Similarly, unmarried couples are also not housed together in some shelters. Nevertheless, the factors that have been associated with homelessness among families (those household units with at least one adult and one child) may be useful in understanding this problem for adult couples with no children present.

As noted by Fertig and Reingold, events that lead to homelessness are typically cast as “individual versus structural explanations.”⁴ Among the micro level individual explanations are characteristics such as physical or mental health, substance abuse, domestic violence, and educational attainment. Structural issues typically include lack of affordable housing,

weak labor markets, and barriers to educational opportunities. It is likely that the factors accounting for homelessness among females with children are similar to those factors accounting for adult couples without children (with the possible exception of domestic violence). This similarity of factors stems from the likelihood that adult couples with children who become homeless often place their children with relatives or friends or find their children placed in foster care.⁵



Problems facing homeless families are varied and differ from family to family, but there are some common barriers and needs that characterize a large proportion of such families. According to an article by K.J. Swick, *Helping Homeless Families Overcome Barriers to Successful Functioning*, one of the greatest barriers facing homeless families is isolation from “needed supports and resources.”⁶ A second major barrier identified by Swick in the article is the loss of a sense of control over one’s life that comes with homelessness. This loss of control tends to be reinforced through the “controlling” nature of many social service agencies and professional helpers.⁷

Other barriers include concerns related to physical safety and psychological security, reduced access to social and educational experiences, low wages, lack of low or moderate cost housing, and a general lack of enabling resources available to the homeless that might allow for these families’ empowerment. For Swick, “(t)he most insidious

barrier that homeless families experience is the destructive macro-system policies and perspectives they must relate to in attempting to gain a sense of power.”⁸

Additionally, the homeless tend to experience a high rate of HIV infection, other sexually transmitted diseases, tuberculosis, and untreated chronic diseases. Typically, they are under-educated, unemployed and have minimal legitimate work histories. Many of the women have children and cannot expose them to positive experiences. This list of stressors is compounded by the state of homelessness and places the family unit at extreme risk. However, there are strategies that can help these couples and families.

Solutions

A study conducted by the Rollins School of Public Health at Emory University of a couples shelter in Atlanta found that transitional housing services are a major benefit to homeless couples. Transitional housing services are an intervention approach designed to address the problem of family homelessness through a multifaceted provision of services and case management.⁹

Case management is extremely critical because: many in the homeless population grew up in a single-parent home and/or lived in foster care or in a group home for part of their childhood; many, especially the women, grew up in families where drugs or alcohol were abused, and experienced physical and/or sexual abuse; and many are depressed and suffer from various forms of mental illness.

Healthy marriage and relationship skills education has also been found to enhance the success of homeless couples in the reestablishment of their households. Healthy marriage and relationship education works well in conjunction with other programs such as

Strategies for Increased Success:

- **Connect the population to agencies that teach life skills to empower them to end their own homelessness**
- **Steer clients to agencies (e.g., governmental, NGOs) that teach financial literacy and management skills**
- **Provide case management for high levels of accountability and effectiveness**
- **Increase employability and entrepreneurial skills**
- **Refer clients to counseling for ways to minimize the stress and depression associated with the homeless state**
- **Provide adequate follow-up-care**

financial literacy. Such programs focus particular attention on encouraging couples to work together as a unit to achieve their goals toward employment and permanent housing. Most homeless couples come into programs with no exposure to the rules of effective communication, decision making or anger management. Those that have been exposed have not been held to a high level of accountability.

Healthy marriage and relationship education helps couples develop skills that foster effective relationships and helps couples come to grips with the realities of whether or not they are compatible.

Some healthy marriage and education program participants observe improved behaviors in each other and may make a step toward marriage.

Conclusion

Current interventions do not—and cannot—respond effectively to the problems that homeless couples face. Even community-based homeless service interventions typically focus on just temporary shelter and, in a limited number of programs, on monitoring and reporting, urinalysis, drug treatment, and referral to employment. These are not adequate strategies when dealing with a majority of the homeless. To lead a productive and meaningful life, many of the homeless will probably require the assistance of a large number of our public systems: public assistance, homelessness services, family court, child care, public education, drug treatment, health and mental health (thus managed care), to name a few. Most importantly, they will also need support from community-based programs to navigate their involvement with the various public entities that can move them toward wellness and becoming a productive citizen.

Below are quotes from couples who participated in a marriage education class at a couples shelter in Atlanta:

“Even though my mate struggles with mental issues, this class has helped me to be more open, understanding, and supportive.”

“It allows you to think outside of the box and really re-evaluate your thinking.”

“It gives me a better insight about myself as well as my spouse.”

Work Consulted

Burt, M. R. (2006). *Characteristics of transitional housing for homeless families: Final report*. Washington, DC: Urban Institute.

Notes

- ¹ U.S. Department of Housing and Urban Development, Office of Community Planning and Development. (2010). *Annual homeless assessment report to Congress*. Washington, DC: Author.
- ² Ibid., 3.
- ³ The National Center on Family Homelessness. (2011). *The characteristics and needs of families experiencing homelessness*. Needham, MA: Author.
- ⁴ Fertig, A. R., & Reingold, D. A. (2008, September). Homelessness among at risk families with children in twenty American cities. *Social Service Review* 82(3), 485-510.
- ⁵ Rog, D. J., & Buckner, J. C. (2007, March). *Homeless families and children*. Paper presented at the National Symposium on Homelessness Research, Washington, DC.
- ⁶ Swick, K. J. (2005). Helping homeless families overcome barriers to successful functioning. *Early Childhood Education Journal*, 33(3):195.
- ⁷ Ibid., 196.
- ⁸ Ibid., 198.
- ⁹ Shi, Y., Patel, A. (2010). *Evaluation of the Zaban Couples Center*. Rollins School of Public Health, Emory University. Atlanta, GA.

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