LOTUS HOUSE PROGRAM FOR WOMEN ONLY

What Research Tells Us About The Most Effective Strategies To Serve Women

Research indicates that different strategies need to be employed in providing services and treatment because the male and female experience of homelessness is very different.[i] This is especially true in terms of engagement of the most disaffiliated women.[ii] Traumatic events in the lives of women and children feed into a sense of economic and emotional powerlessness and economic dependence. A matrix of poverty, victimization, early physical and sexual abuse, substance abuse and mental illness experienced by homeless women is mirrored in the literature by evidence of depression, low self-esteem, mal-adaptation, health problems and social disaffiliation.[iii] [iv] [v]

Since the 1980's, studies have indicated that gender-specific programming is critical to effective outcomes for women. Rather than designing programs on a 'one size fits all basis' with research based on studies of the male homeless population, a more gender specific focus is now being recognized as appropriate to address the special needs of women. Programs that adopt a non-institutional approach to homeless services have been found to be the most successful in reaching, engaging and changing the lives of homeless women. They focus on the importance of a warm, casual, non-institutional environment to engage the homeless into services.[vi] They rely on self-help and self-empowerment.[vii] They often use a strengths approach with an emphasis on engaging and mobilizing women's strengths while empowering them.[viii] They aim to ameliorate the pervasive social isolation of homelessness, to promote the learning of social skills, and to build self-efficacy and self-esteem. A supportive environment, caring staff, and

flexible structure is crucial to engaging women who have a more complex history with victimization, fear and distrust of others and mental health problems into social service programs.[ix] This type of environment encourages community and involvement and fosters respect in showing that the staff and volunteers value the client's opinions, feelings, and desires. Comprehensive services and treatment must be based on understanding the context and needs of women's daily lives. Such services:

- Identify and build on women's strengths
- Avoid confrontational approaches
- Teach coping strategies, based on women's experiences, with a willingness to explore women's individual appraisals of stressful situations
- Arrange for the daily needs of women, such as childcare
- Have a strong female presence on staff
- Promote bonding among women[x]

The Report on Women and Homelessness, March 1, 2011, Crossroads, Rhode Island[xi], found that the female homeless population is growing, and that we need to pay more attention to their unique needs. Trauma-informed care is essential to meeting the needs of the large percentage of women who have suffered trauma from family separation, violence and abuse. Increased focus on intensive female-centered case management, counseling, and support services is necessary to help homeless women develop work skills. Additionally, today's economy mandates that we provide ample opportunities including affordable housing, job-training, and comprehensive services for women seeking a better future.

Research shows it is possible to break the cycle of childhood abuse, domestic violence, and homelessness with life changing support, tools, education, and resources that heal broken bodies, minds and spirits,[xii] [xiii] [xiv] and Lotus House is committed to helping homeless women achieve those outcomes for

a better way of life. Our approach emphasizes trauma-informed, evidence based and informed therapies, psychosocial education, and comprehensive support services in a nurturing environment that addresses the special needs of women with understanding, wisdom and compassion.

Lotus House Evidence Informed Program Design

Learning from the homeless women and female youth we serve, Lotus House has adopted enriched programming incorporating evidence-based and informed mental health services focused on trauma resolution, individual and group therapy, and psychosocial education to address the impact of past experiences of violence and trauma during the window of opportunity presented while women and youth are with us.

The mental health goals of the Safe Haven Program are to:

- Increase trauma resolution and the development of resiliency, and
- Reduce chronic and revolving-door homelessness of the women we serve.

Committed to achieving these goals and outcomes to fostering the resilience of homeless women, Lotus House is utilizing a prevention and intervention framework which works to resolve trauma and mental health issues in mothers, avoid traumatic experiences in the lives of homeless women, and promote healthy healing via trauma resolution, intensive individual and group therapy and facilitation of the development of resilience in women and youth. This level of mental health treatment, prevention and promotion is typically not available to low income/homeless women on a timely basis or at all. Lotus House affords women a unique window of opportunity to heal, resolve

trauma, create nurturing, healthy attachments so critical to their healing, resilience and building the foundation for long term stability.

Lotus House has selected evidenced-based and informed focused therapy modalities, assessment tools and supportive services that have been shown to be effective interventions with and appropriate for homeless women and youth. We have used national homeless organizations and the U.S. HHS SAMHSA Homeless Resource Center as sources for researching appropriate evidence-based programs and measurement tools for trauma-based program development.[xv] Utilizing evidence-based programs is the most effective way of using their time with us.

To promote trauma resolution, life skills building, and empowerment of homeless women, the Safe Haven Program includes:

- Early Screenings of each woman's mental health and well-being, arranging more comprehensive mental health assessments where issues are identified and assistance with medications
- Weekly evidence-based individual counseling to address each woman's needs and concerns. We utilize Cognitive Behavioral Therapy (CBT) as a therapeutic modality.
- Resource coordination to connect each woman to needed support services, tools and resources at Lotus House and within the community
- Personalized Action Plan and individualized service planning with a full continuum of support services for each woman to address her needs, including: medical and mental health issues and treatment; social service advocacy and benefits; educational, vocational and employment steps and goals; life skills building;

- and long term housing objectives; as well as regular assessments of progress toward identified goals
- Seeking Safety, an evidence-based present-focused treatment for persons with a history of trauma and substance abuse. Seeking Safety focuses on coping skills and psychoeducation and incorporates four key principles: 1) safety as the overarching goal (helping women attain safety in their relationships, thinking, behavior and emotions); 2) integrated treatment (working on both PTSD and substance abuse); 3) a focus on ideals to counteract the loss of ideals in both PTSD and substance abuse; and 4) four content areas: cognitive, behavioral, interpersonal, and case management; This counseling framework helps women build protective factors to moderate the impact of past and future trauma experiences and increase coping skills.
- Say It Straight, an evidence based communication training program, designed to help youth and women develop empowering communication skills and behaviors and increase self-awareness, self-efficacy and personal and social responsibility – while reducing risky behaviors such as substance abuse, bullying violence, precocious sexual behavior and behaviors that can result in HIV infection. SIS emphasizes values such as resiliency, courage, compassion and integrity, and builds protective factors.

Pre and Post-Testing to gauge the effectiveness of and improve our services. Pre- and post-testing assessment is conducted using the PTSD Checklist Civilian version. (PCL-C). The PCL is a 17-item self-report measure reflecting DSM-IV symptoms of PTSD. The PCL has a variety of clinical and research purposes, including:

- screening individuals for PTSD
- aiding in diagnostic assessment of PTSD
- monitoring change in PTSD symptoms

The gender specific programming at Lotus House is carefully designed to assist women heal and reclaim their lives, build the foundation for a safe, secure and better way of life, and truly break the cycle of homelessness. Our approach emphasizes trauma-informed, evidence-based and informed therapies, education, and comprehensive support services in a nurturing environment that addresses the special needs of these courageous women.

Your donations make all that we do possible and are truly life changing. Thank you!

CITATIONS

- [i] BALDWIN, DANA M., "THE SUBSISTENCE ADAPTATION OF HOMELESS MENTALLY ILL WOMEN", HUMAN ORGANIZATION SUMMARY 1998, VOL 57(2), P. 190-99.
- [ii] WATKINS, KATHERINE E., SHAER, A. AND SULLIVAN, G. "THE ROLE OF GENDER IN ENGAGING DUALLY DIAGNOSED IN TREATMENT", COMMUNITY MENTAL HEALTH JOURNAL, APR. 1999, VOL 35(2), P. 115-126.
- [iii] BEEBER, LINDA S., "TESTING AN EXPLANATORY MODEL OF THE DEVELOPMENT OF DEPRESSIVE SYMPTOMS IN YOUNG WOMEN DURING A LIFE TRANSITION," <u>JOURNAL OF AMERICAN COLLEGE HEALTH</u>, VOL 45(5), P.227-34.
- [iv] JACKSON-WILSON, A. G. (1993). "DISAFFILIATION REVISITED: A COMPARISON OF HOMELESS AND NON HOMELESS WOMEN'S PERCEPTION OF FAMILY OF ORIGIN AND SOCIAL SUPPORTS". SEX ROLES: A JOURNAL OF RESEARCH. 28 (7-8), 361-378; BALDWIN, 1998.
- [v] BOES, M. (1997). "SOCIAL WORK WITH HOMELESS WOMEN IN EMERGENCY ROOMS: A STRENGTHS-FEMINIST PERSPECTIVE". <u>AFFILIA JOURNAL OF WOMEN AND SOCIAL WORK</u>, 12 (4), 408-437.
- [vi] JACKSON-WILSON, A. G. (1993).
- [vii] BROWN, K. S. & COHEN, B. (1990). "A FEMINIST APPROACH TO WORKING WITH HOMELESS WOMEN". AFFILIA JOURNAL OF WOMEN AND SOCIAL WORK. 5, 6-20.

- [viii] BRETON, M. (1984). "A DROP-IN PROGRAM FOR TRANSIENT WOMEN: PROMOTING COMPETENCE THROUGH THE ENVIRONMENT". <u>SOCIAL WORK</u>, 29, 542–546.
- [ix] BOES, 1997.
- [x] D'ERCOLE, A., & STRUENING, E. (1990). "VICTIMIZATION AMONG HOMELESS WOMEN: IMPLICATIONS FOR SERVICES DELIVERY". JOURNAL OF COMMUNITY PSYCHOLOGY, 8, 141–152.
- [xi] REPORT ON WOMEN AND HOMELESSNESS. CROSSROADS, RHODE ISLAND. MARCH 11, 2011.
- [xii] A SCIENCE BASED FRAMEWORK FOR EARLY CHILDHOOD POLICY, USING EVIDENCE TO IMPROVE OUTCOMES IN LEARNING, BEHAVIOR, AND HEALTH FOR VULNERABLE CHILDREN, NATIONAL SCIENTIFIC COUNCIL ON THE DEVELOPING CHILD. CENTER ON THE DEVELOPING CHILD AT HARVARD UNIVERSITY. 2007. HTTP://DEVELOPINGCHILD.HARVARD.EDU/RESOURCES/A-SCIENCE-BASED-FRAMEWORK-FOR-EARLY-CHILDHOOD-POLICY/.
- [xiii] THE SCIENCE OF EARLY CHILDHOOD DEVELOPMENT, NATIONAL SCIENTIFIC COUNCIL ON THE DEVELOPING CHILD. CENTER ON THE DEVELOPING CHILD AT HARVARD UNIVERSITY. THE INBRIEF SERIES. 2007. HTTP://DEVELOPINGCHILD.HARVARD.EDU/RESOURCES/INBRIEF-SCIENCE-OF-ECD/.
- [xiv] NICHOLAS D. KRISTOFF, "CUDDLE YOUR KID", THE NEW YORK TIMES, OCTOBER 20, 2012", CITING PAUL TOUGH IN HOW CHILDREN SUCCEED. HTTP://WWW.NYTIMES.COM/2012/10/21/OPINION/SUNDAY/KRISTOF-CUDDLE-YOUR-KID.HTML.
- [XV] HRC EXPERT PANEL ON EVIDENCE-BASED PRACTICES IN HOMELESS SERVICES, HOMELESS RESOURCE CENTER, U. S. DEPARTMENT OF HEALTH AND HUMAN SERVICES, SAMHSA. ROCKVILLE, MD. FEBRUARY 11, 2008.