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Generational Homelessness in New York City Family Homeless Shelters

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Walden University
2018

Abstract

Generational Homelessness in New York City Family Homeless Shelters

by

Deborah Johnson

MSW, Yeshiva University, 2006

BS, Boston University, 2000

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

Human Services

Walden University

February 2018

Abstract

Homelessness has been a problem in New York City (NYC) for decades. Part of the problem is children who grew up in the shelter system and then returned as adults, a phenomenon known as 2nd-generation homelessness. Literature indicates that no researchers have interviewed second-generation homeless adults about their experiences. The purpose of this study was to explore the experience of 2nd-generation homelessness from the perspective of homeless adults returning to the shelter system. The sample included 1 second-generation homeless adult and 10 case managers at Tier II homeless shelters. Interviews were conducted and data were analyzed using hand coding to uncover themes amongst the interviews. The themes found were: lack of information and resources, generational homelessness is passed down, people should learn from their parents' mistakes, comfort in the homeless shelter system, money, parental abuse and neglect, the role of the case manager, taking advantage of the shelter system, and mental health. The other topics that were discussed on multiple occasions but did not fit into larger categories are: education, drugs and alcohol, lack of family assistance, and activities of daily living. Findings from this study inform social change by indicating a clear need for input from homeless families and case managers when developing interventions to address second-generation homelessness. Future policymakers should include staff and clients when developing ways to address homelessness in New York City. The views and opinions expressed in this manuscript reflect the personal views of the researcher and interviewees; they do not represent the views of NYC Department of Homeless Services or its providers.

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Acknowledgements

I would first like to thank my husband, Evan Rothenberg; this has been a long journey and would not have been able to finish without his love and support. I would also like to thank my dissertation committee, Dr. Mary Bold and Dr. Lillian C. Chenoweth, as well as Dr. William Barkley.

I would like to thank the New York City Human Resources Administration for allowing me to use city shelters for my research. I would also like to thank the executive staff at my agency.

I would like to thank my family: my mother, Maxine Cohen, my mother-in-law Andrea Rothenberg, and my father-in-law Stuart Rothenberg.

I would also like to thank my co-workers who assisted with proofreading and moral support: Raschell, Jeannette, Nikeya, and Rahmeek.

Finally, I would like to thank my participants, the one homeless client and 10 staff members who gave their time, knowledge, experience, and ideas in order to help the thousands of homeless families who live in shelters on a daily basis.

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Chapter 1: Introduction to the Study

Introduction

On any given night, there can be over 60,000 people in the New York City shelter system (New York City Department of Homeless Services, 2017a). This number includes homeless individuals, families with children, and adult families. The number of homeless people in New York City has been increasing since 2009 (New York City Department of Homeless Services, 2015) and one group that continues to experience homelessness is second-generation homeless families (Grant, Gracy, Goldsmith, Shapiro, & Redlener, 2013). Second-generation homelessness occurs when someone was homeless as a child, grew up, and became homeless again as an adult.

Although second-generation homelessness has been studied, I was unable to find any studies in which the researcher asked second-generation homeless families or their case managers about their experiences and what could have helped them avoid homelessness the second time. By asking the families and case managers about their experiences we can design interventions to address second-generation homelessness and help more families stay out of the shelter system.

This chapter will discuss the background of the study, the problem statement, and the purpose of the study. I will describe the research questions and the theoretical framework of the study. I will also explore the nature of the study and define important terms. This chapter will also discuss assumptions, the scope and delimitations of the study, the limitations of the study, and the significance of the study.

Background

Shinn, Greer, Bainbridge, Kwon, and Zuiderveen (2013) found the same risk factors for shelter entry currently exist as in the 1980s and 1990s; the main risk factor for shelter entry was previous time spent in a homeless shelter. In fact, the client's self-reported homelessness was a stronger predictor for current shelter need than any other risk factors.

Risk factors for homelessness in New York City have been researched for many years. Fertig and Reingold (2008) found that the biggest risk factors for family homelessness are lack of social and institutional support. They suggested that the best way to avoid family homelessness is low-income housing assistance, which can provide both social and structural support to low-income families.

Shinn et al. (1998) compared homeless families to families receiving welfare and examined the importance of housing stability. Shin et al. found that housing subsidies and low-income housing were the best methods of avoiding shelter entry in the first place, and avoiding shelter re-entry after moving out of the shelter system.

Weitzman, Knickman, and Shinn (1992) found that past psychiatric hospitalizations, childhood sexual abuse, and adult physical abuse were risk factors for shelter use amongst low-income families. When examining risk factors for generational homelessness, these demographics can be important.

In 1990, Weitzman, Knickman, and Shinn explored the three types of families who usually request shelter: those who had long-term stable housing, those with short-term stable housing, and those who had never had stable housing. They found that the

group who had never resided in stable housing often had parents who received welfare, thus qualifying the families as those living in generational poverty. These families had never learned how to live independently outside of the welfare and shelter system.

Bassuk et al. (1997) found that childhood foster care placement and parental substance abuse were common factors for adult homelessness, while adult home stability was a large factor in avoiding homelessness. Housing stability increases a person's awareness of what services or assistance may be available in case that person needs help.

Grant, Gracy, Goldsmith, Shapiro, and Redlener (2013) reviewed literature from the past 25 years and found that, while income inequality, housing costs, and family homelessness have increased, government studies and scholarly articles have decreased. Researchers are paying less attention to family homelessness, despite the fact that the problem is getting worse.

Across the literature that I identified, which included searches on SoxIndex, PsychInfo, and PsycArticles, I did not find a report on case studies regarding second-generation homelessness. I have addressed this gap in the literature in my study.

Problem Statement

Family homelessness is an ongoing problem in New York City. On Friday, October 20, 2017, 12,954 families were housed in New York City Shelters: 17,713 adults and 23,173 children (New York City Department of Homeless Services, 2017a). Some of these adults were in the shelter system as children and have returned with their own children, an example of generational homelessness. Extensive research on risk factors for family homelessness in New York City spanned 1990 to 2013 (Shinn et al., 2013; Shinn,

1998; Weitzman et al., 1990; Wong, Culhane, & Kuhn, 1997). Researchers have conducted additional studies on generational poverty in New York City and generational homelessness in the United States (Curtis, Corman, Noonan, & Reichman, 2014; Fertig & Reingold, 2008; Gould & Williams, 2010; Koegel, Melamid, & Burnam, 1995). Well established in the literature over the past three decades, generational poverty, childhood housing stability, and abuse have all been shown to be factors in adult homelessness (Bassuk et al., 1997; Bassuk, Rubin, & Lauriat, 1986; Fertig, & Reingold, 2008; Herman, Susser, Stuening, & Link, 1997).

Purpose of the Study

The purpose of this study was to examine how second-generation homeless adults and case managers in Tier II homeless shelters define homelessness and second-generation homelessness as well as to examine what the participants identify as barriers to housing stability. By asking these questions, I utilized the participants' expertise about their own situations and the situations of their clients to learn more about the shared experience of second-generation homelessness. I used a case study approach and conducted long-form interviews with the participants. I collected data from one adult who had experienced second-generation homelessness and 10 case managers in Tier II homeless shelters; and interviews took place at locations of their choice.

Research Questions

My research questions were:

1. What is homelessness as defined by second-generation homeless adults?

2. What is generational homelessness as defined by second-generation homeless adults?

3. How do second-generation homeless adults describe barriers to housing stability?

4. How do case managers define these terms and the barriers that clients face?

Theoretical Framework of the Study

Trauma theory undergirded my study. According to Substance Abuse and Mental Health Services Administration [SAMHSA] (2014), "homelessness is traumatic. People experiencing homelessness are living with a multitude of losses. People who are homeless have lost the protection of the home and community, and are marginalized, isolated, and stigmatized within the larger society" (p. 1). Ringel and Brandell (2011) discussed key themes to trauma:

> The stressful event poses a problem which is by definition insoluble in the immediate future; the problem overtaxes the psychological resources of the family, since it is beyond their traditional problem solving methods; and the situation is perceived as a threat or danger to the life goals of the family members. (p. 4)

Nance's 2009 phenomenological study of homeless men influenced by framework. Nance studied homeless men and asked them about their homelessness. He also asked what they believed could help them obtain residential stability. I applied Nance's framework to this study on second-generation homelessness.

Nature of the Study

This was a case study involving interviews with one homeless adult and case managers in family homeless shelters. I had direct access to four family shelters in New York City. All interviews took place within the shelters. All homeless families in New York City complete intake at one central location, and then are sent to shelters throughout the city based on family size. These four shelters gave me access to a broad range of family types and sizes.

Definitions

Case manager: an employee at a Tier II homeless shelter with the title of "Case Manager" who carries a caseload of homeless families.

Child: For this study, a child is the dependent of the Head of Household. Most children in shelter are age 21 and under but may be older than 21 if they have a disability.

Family: For this study, a family is unit with children younger than 21 years of age (New York City Department of Homeless Services, 2015).

Family shelter: For this study, a family shelter is a facility for families with children operated under the auspices of the New York City Department of Homeless Services. These are also called Tier II Shelters.

Generational: For this study, generational will mean consisting of two or more households within the same family

*Head of Household***:** The Head of Household is the primary adult in a family placed in a New York City Tier II shelter.

Homeless people: Individuals and families who lack a fixed, regular, and adequate nighttime residence and includes a subset for an individual who is exiting an institution where he or she resided for 90 days or less and who resided in an emergency shelter or a place not meant for human habitation immediately before entering that institution (U.S. Department of Housing and Urban Development, 2015).

New York City: New York City consists of the five boroughs: Bronx, Brooklyn, Manhattan, Queens, and Staten Island.

Tier II Shelters: According to Coalition for the Homeless, Tier II shelters are apartment-style facilities with a cooking space and bathroom for each family.

Assumptions

The following assumptions are made in this study.

1. Second-generation homeless adults can define homelessness.

2. Second-generation homelessness adults can identify second-generation homelessness.

3. Second-generation homeless adults can identify barriers to housing stability.

Scope and Delimitations

This study drew on the experiences of one adult who is currently living in New York City family homeless shelters and 10 case managers who work at Tier II homeless shelters. The study relied on sampling from four family shelters. Sampling started within the homeless population and I sent out flyers on four occasions; upon a lack of response from homeless adults, I expanded the sample to include case managers. I continued sampling of case managers until I reached saturation. I conducted the study in

the five boroughs of New York and was limited to shelters operated under the purview of the New York City Department of Homeless Services.

Limitations

The main limitation of this study is that I was not able to interview every second-generation homeless family in New York City and was not able to hear their stories. This study was limited to one family and 10 case managers. This study was also limited to New York City.

Qualitative research is subjective and it was difficult to remove my own biases from this research. However, I overcame this limitation by acknowledging my own biases and ensured that they do not affect my research questions or data analysis.

Significance

The purpose of this qualitative study was to understand the experiences and risks of second-generation family homelessness in New York City. I was inspired to choose this topic when I worked in a family homeless shelter in New York City. The shelter had been in operation over 15 years when I started working there. Occasionally, a family would come in and the adult would say something similar to, "I was here when I was a kid." I wanted to examine what happens between when a child leaves the shelter and returns as an adult with his/her own children. By examining generational homelessness and asking both second-generation homeless adults and case managers about their experiences, we can learn more about what happens when a child grows up homeless and becomes homeless again as an adult. By utilizing the knowledge and wisdom of the participants, I hope to develop interventions that can decrease the number of second-

generation homeless families and therefore decrease the total number of homeless

families in New York City.

Summary

This was a qualitative case study of homeless adults who reside in the New York

City shelter system with their children and who were homeless as children as well as case

managers who work in Tier II homeless shelters. These adults are often classified as

Head of Household in official documentation, as they are the primary adult in the family

during shelter intake. Numerous studies have shown that childhood housing instability is

a predictor of adult homelessness. Furthermore, housing subsidies and low-income

housing have been shown to decrease homelessness recidivism. The purpose of this

study was to examine second-generation homelessness from the homeless adults' point of

view and discuss any barriers to housing stability that the families encountered. After a

lack of responses from homeless adults, I expanded the sample to include case managers.

I used trauma theory as my theoretical framework, as both homelessness and poverty

have been shown to cause trauma to both individuals and families. This was a case study

and I interviewed one head of homeless household in the New York City family homeless

shelter system and 10 case managers who work in Tier II homeless shelters. I stopped

sampling of homeless adults after a lack of response and sampling of case managers

continued until I interviewed 10 case managers. The limitation in this study was that it

was not be able to identify and interview all second-generation homeless families in the

shelter system. By utilizing the knowledge of the participants and case managers,

shelters and homeless services providers might be able to develop interventions that

could help homeless families avoid second-generation homelessness.

Chapter 2: Literature Review

Introduction

To prepare for this study I conducted a literature review to examine both current literature on homelessness as well as literature from the 1980s and 1990s to provide an historical context to New York City second-generation homelessness. I also used government studies and nonprofit analyses to examine statistical data regarding homelessness in New York City. These studies will help in showing the severity of the homeless crisis in New York City as well as possible ways to address the problem.

Literature Search Strategy

I found articles mostly using SocIndex and PsychInfo. Search topics included "homelessness," "family homelessness," "generational homelessness," "New York City homelessness," "poverty," "generational poverty," "case managers and homeless" and "trauma and homelessness." I compiled statistical data from the New York City Department of Homeless Services (DHS), the U.S. Department of Housing and Urban Development (HUD), the U.S. Substance Abuse and Mental Health Services Administration (SAMHSA) and Coalition for the Homeless, a New York City-based nonprofit advocacy group. I sorted articles into five categories, including "homelessness," family homelessness," "generational homelessness," "generational poverty," "trauma" and "case management in homeless shelters."

Theoretical Foundation

Family homelessness can be traumatic for the entire family and can have long-term consequences if not addressed properly (Sandy, 2014). According to Sandy (2014),

researchers need to examine both structural and personal reasons for homelessness, as people's lives are interconnected and intertwined with their environment; therefore, homelessness is caused by both societal and personal problems and cannot be assigned to just one cause. Furthermore, families often experience homelessness recidivism, which means families are homeless multiple times, which compounds the trauma that the family experiences (Sandy, 2014). Each entry into homelessness and each placement into a "home environment" is a psychological experience and can further exacerbate the trauma that the family is experiencing (Sandy, 2014).

As William and Hall (2009) pointed out, trauma is a biological response to stress. When a human experiences trauma, higher-level cognitive functioning shuts down and people's decision-making abilities decrease. Williams and Hall interviewed homeless mothers and found that while the level of stress from previous traumatic experiences did not influence the current traumatic stress of homeless mothers, the number of previous traumatic experiences did influence the levels of current traumatic stress that homeless mothers were experiencing. Williams and Hall also emphasized that not only to homeless mothers experience the trauma of being homeless; they also experience the trauma of not being able to provide a safe and healthy environment for their children. Many of the participants reported experiencing abuse and almost 67% met the criteria for experiencing post-traumatic stress disorder (PTSD) (Williams & Hall, 2009). Furthermore, many participants had experienced more than one type of trauma in their lives, thus increasing the current level of traumatic stress.

Goodman, Saxe, and Harvey (1991) wrote that homelessness itself is a risk factor for emotional disorders due to the trauma that homeless people experience. Goodman et al. (1991) defined three different types of trauma that homeless people experience—the loss of one's home, the conditions of shelter life, and the emotional and physical abuse that many homeless people experienced before becoming homeless. Furthermore, many homeless adults exhibit characteristics of PTSD, especially social disaffiliation and learned helplessness (Goodman et al., 1991). "Homelessness, like other traumas, may produce a psychological sense of isolation or distrust as well as the actual disruption of social bonds" (Goodman et al., 1991, p. 1220). In addition, many people lose their social roles after becoming homeless; they are no longer neighbors, they may lose their employment, and they often cannot serve as caregivers for others. Some shelters separate men from women and children, so couples may also lose their familial relationships. Homeless people often have to abide by numerous shelter rules and may lose confidence in their ability to take care of themselves. Shelters often provide clothing, food, childcare, and curfews, thus leading to learned helplessness (Goodman et al., 1991).

Literature Review by Key Concepts

I will now present the literature undergirding this study according to the following concepts: homelessness, family homelessness, generational homelessness, generational poverty, government reports, and nonprofit reports.

Homelessness

Modern homelessness has been identified as a problem since the 1980s, when the number of homeless people grew and the demographics of the homeless population

changed from older white men to younger people of color (Culhane, Metraux, Byrne, Stino, & Bainbridge, 2013).   In 2010, there were approximately 650,000 homeless people in America, and 38% of this group was living on the street or other places not meant for human habitation (Culhane et al., 2013). In 2014 this number increased to over1.48 million people staying in homeless shelters (Greer, Shinn, Kwon, & Zuiderveen, 2016). Furthermore, approximately 1.6 million people stayed in homeless shelters in 2010 and 14% of this number were families with children (Culhane et al., 2013). From 2007 to 2015, the nationwide number of people in homeless shelters fell 3%. However, during the same period, homelessness in New York City increased 50% (Greer et al., 2016).

Greer et al. (2016) found that, although extensive research had been conducted on the efficacy of housing subsidies and supportive housing, limited research had been conducted on homelessness prevention. Their goal was to assist social service providers with locating people at risk of homelessness and helping them avoid homelessness. They examined risk factors for shelter homelessness among individuals and compared them to previous studies on risk factors for family homelessness. The authors found that age, rent arrears, and previous shelter history, and community reintegration were the highest indicators for shelter entry. The authors were able to use these results to adjust the intake process for homelessness prevention programs in New York City.

Raithel, Yates, Dworsky, Schretzman, and Welshimer (2015) found that long-term transitional housing programs could help young adults avoid the shelter system and/or jail by providing supportive housing for those young adults who were aging out of

foster care or who were at risk of homelessness. The authors found that collaboration among providers was one of the key indicators of success in the program. According to the authors, 22% of youth age 16 years and older aging out of foster care entered a homeless shelter within 10 years of their exit of the foster care system. After two years, participants in the transitional housing program had lower rates of individual and family shelter stays as well as lower rates of incarceration. These results could assist other cities and/or agencies with developing similar transitional housing programs for homeless youth or youth at risk of homelessness.

In their study on age cohorts in homelessness, Culhane et al. (2013) found that among single adults, homelessness appears to be a cohort-related phenomenon. In 1990 there was an elevated risk of homelessness for people age 34-36 years, while in 2000 there was an elevated risk of homelessness for people age 37-42 years and in 2010 there was an elevated risk of homelessness for people age 49-51 years. These results seem to imply that the baby boomer generation (those born between 1946 and 1964) are at higher risk of homelessness than those born in other generations (Culhane et al., 2013).

However, there is a marked difference in the ages of heads of households for homeless families. Culhane et al. (2013) found that in 1988, heads of households for homeless families were born between 1965 and 1967, while in 1988 the average head of household was born between 1982 and 1984 (Culhane et al., 2013). This means that the age range when young mothers are most at risk of homelessness is 21-23 years old, no matter when they were born.

Byrne et al. (2013) identified several structural factors that can lead to homelessness, including housing market, economic conditions, demographic composition, safety net, climate, and transience. The most consistent housing market factor for homelessness appears to be rent level, although lack of affordable housing, housing construction, and rent stability were also identified. Poverty and unemployment rates were identified as the most common economic factors for homelessness while race (specifically African-Americans) and sex (specifically women with young children) were found to be the most common demographic factors. Byrne et al. also found that increased safety net assistance resulted in fewer instances of homelessness. Programs like Food Stamps, Temporary Assistance for Needy Families (TANF), and Supplemental Security Income (SSI) were most commonly cited as helping people avoid homelessness. Areas with higher temperatures and lower precipitation were found to have the highest number of homeless people living outside. Finally, people who have recently moved, including tourists and migrant workers, also faced an increased risk of homelessness. Byrne et al. found that in metropolitan areas, rent level, homeownership rate, the size of the Hispanic and baby-boomer populations, the proportion of single-person households, and the proportion of recently moved households were all positively associated with homelessness. However, in non-metropolitan areas, rent level and unemployment rate were positively associated, and the size of the African-American population was negatively associated with homelessness and "a 32% increase in homelessness per $100 increase in median rent and a 27% increase in homelessness per 1% increase in unemployment" (Byrne et al. 2013, pg. 618).

Israel, Toro, and Ouellette (2010) found that "estimates for the five-year prevalence of literal homelessness range from 1.8 to 3.1% of the U.S. population, with lifetime prevalence rates ranging from 6.2 to 8.1%" (pg. 49). The authors studied homelessness before and after economic expansion (or boom) and found that people most likely to benefit from increased numbers of employment opportunities during the economic expansion were less likely to be homeless at the end of the economic expansion. Furthermore, evidence exists that macroeconomic forces, which include long periods of economic gain, are important factors in community integration of homeless people.

Roll, Toro, and Ortolo (1999) studied three groups of homeless adults in Buffalo, New York, including single homeless women, single homeless men, and homeless women with children. Two-parent homeless families were excluded from the study. The authors found that the group with the least money was homeless women with children, while both groups of women experienced more psychological stress than the group of men. The women also reported more contact with family members and more experience with recent assaults, while the men were more likely to have a history of substance abuse and criminal activity. There were no discernible differences between the groups regarding race, diagnosis of mental illness, or education level. The authors determined that each group would need specific and tailored services in order to obtain and maintain permanent housing. The authors recommended that women with children receive trauma counseling, mental health counseling, domestic violence counseling, and assistance with financial planning. The children in these families will also need

counseling if they have witnessed any violence. The single men would need substance

abuse treatment and assistance obtaining and maintaining employment. The single

women would need all of the above assistance, as they had experienced the majority of

problems, including substance use, assault, and lack of meaningful employment (Roll et

al., 1999).

Similar to more recent studies, Herman et al. (1997) found that the most common

risk factors for adult homelessness include gender (specifically males), poverty, age

(between the ages of 30 and 39 years old), psychiatric disorders, substance abuse, and

ethnicity (specifically African-Americans). However, the authors sought to determine if

childhood risk factors, including physical and sexual abuse and inadequate parental care

also increased adulthood homelessness. The authors found that 16% of their subjects

experienced lack of care from a parent or parental figure, and that lack of care was

distinctly more common amongst the female participants. Seven% of the participants had

experienced childhood physical abuse and 10% of the women had experienced childhood

sexual abuse. The combination of abuse (physical or sexual) and lack of care increased

homelessness by a factor of 26 for the participants. The authors concluded that

interventions that can help reduce child abuse might help prevent critical social problems,

including homelessness (Herman et al., 1997).

Family Homelessness

According to Holtrop, McNeil, and McWey (2015), homeless families experience

more parental distress and are at higher risk for childhood problems, including

developmental, behavioral, and emotional problems. The authors studied 69 parents and

caregivers in a transitional housing program to examine the themes and stressors that homeless parents face. In 2010, more than 240,000 people in families were homeless, which made up 37% of the homeless population (Holtrop et al., 2015). In addition, from 2007 to 2010, the family homeless shelter population increased 20%, which means that 168,000 families used emergency shelter or transitional housing in 2010 (Holtrop et al., 2015). Homeless mothers experience higher rates of major depressive disorder, PTSD, and substance use disorders than nonhomeless mothers; studies have shown that these diagnoses tend to predict behavioral problems in homeless children (Holtrop et al., 2015). Homeless parents also report lower parenting confidence and higher parenting frustration. The authors found that their subjects exhibited high levels of physical punishment and inconsistent discipline and that 25% of the participants perceived child behavioral problems as clinically significant (Holtrop et al., 2015). The authors found five themes amongst the homeless parents: the importance of being a parent despite their homelessness, transitional housing is better than shelters or street homelessness, transitional housing creates a family atmosphere, parenting in a transitional housing community is a unique experience, all the participants wanted to move forward despite the hardships they had faced.

According to Curtis et al. (2014), 29% of homeless adults in the United States suffer from a debilitating mental illness. The authors studied women with postpartum depression to see if there was a causal link between this diagnosis and homelessness. The authors found that 13% of their subjects experienced postpartum depression, and that the mothers experiencing postpartum depression were more likely to experience

homelessness or be at risk for homelessness. Although these results do not definitively

prove a causal relationship between post-partum depression and homelessness, there

does seem to be a link between post-partum depression and family homelessness (Curtis

et al., 2014).

Mothers are not the only parents who experience stress during homelessness.

Fathers may also experience various kinds of stress and stressors during their periods of

homelessness. According to Barrett-Rivera, Lindstrom, and Kerewsky (2013), fathers

reported that younger children responded well to the increased interactions with their

fathers during homelessness, but the fathers' relationships with their teenagers tended to

be more strained. The subjects reported that resources were lacking for homeless single

fathers and some had to struggle just to find a shelter that would take them without a

mother with them (Barrett-Rivera et al., 2013). The fathers also reported that it was

more difficult to obtain welfare and other benefits and that people assumed that the

fathers should have jobs instead of relying on public benefits. The fathers felt that they

were seen as deadbeats instead of responsible parents (Barrett-Rivera et al., 2013).

Shinn, Greer, Bainbridge, Kwon, and Zuiderveen (2013) worked with New York

City employees to improve their homelessness prevention services. They reviewed

records for 11,105 families who had income levels of less than 200% of the poverty level

and applied for homelessness prevention services through the New York City HomeBase

program. The authors found several variables that were related to shelter entry,

including, being pregnant or having a child under two years old, frequent moves in the

past year, young age, threat of eviction, not being the lease-holder on an apartment,

current child welfare involvement, childhood adversity or disruptions, and shelter history. Self-reported shelter history or recent application for shelter services was a stronger predictor than administrative data (Shinn, Greer, Bainbridge, Kwon, & Zuiderveen, 2013). The authors also found that adolescent motherhood, self-reported bad building conditions, history of criminal just involvement, substance abuse, health problems, and indicators for mental illness did not affect shelter requests. If preventive workers and shelter workers are aware of these risk factors they can create and implement interventions that may help families avoid entering the shelter system.

Fargo, Munley, Byrne, Montgomery, and Culhane (2013) examined community-level causes for homelessness and compared and contrasted pathways to homelessness for individuals and families. They also examined homelessness in metropolitan and non-metropolitan areas to see if they differed. The authors found that in metropolitan areas, increased liquor store density, low rates of pre-natal medical care, and increased motor vehicle thefts were associated with higher levels of family homelessness. Families living in poverty also had increased rates of homelessness when they had increased rates of alcohol consumption, lower rates of single motherhood, and lack of social support. Single adult homelessness was associated with areas that had increased drug use, homicides, and car thefts. In non-metropolitan areas, religious adherence was negatively associated with homelessness, while single motherhood was positively associated with homelessness. Furthermore, family homelessness was associated with increased numbers of people paying more than 30% of their income for rent, lower unemployment rates, and increased number of housing units lacking full kitchens, while single homelessness was

strongly associated with lower household incomes, higher property values, more households paying more than 30% of their income for mortgages, and more households lacking full kitchens (Fargo, Munley, Byrne, Montgomery, & Culhane, 2013).

Gould and Williams (2010) examined the structural causes of homelessness instead of community or individual causes of homelessness. They examined homeless families in Missouri to see what structural factors may have led to their homelessness. They found that a higher unemployment rate led to increased number of people in homeless shelters. They also found that taxable sales did not affect rates of homelessness, nor did the number of fair market rental units. Gould and Williams (2010) determined that the number of available shelter beds was positively associated with families requesting shelter, but town population size was not associated with the number of people requesting shelter. Their results also showed that increased income maintenance (welfare) caused a reduction in people seeking shelter.

Expanding from Missouri, Fertig and Reingold (2008) studied families in 20 American cities. Although homeless families can be found living in cars, abandoned buildings, or doubled-up with family or friends, only 28% of homeless parents live with their children. Furthermore, 80% of children living with a homeless parent are under 11 years of age (Fertig & Reingold, 2008). Fertig and Reingold (2008) studied both homeless families and families who were doubled-up and compared them to similar families who were not homeless or doubled-up. They analyzed data from the Fragile Families and Child Wellbeing (FFCW) study, which followed almost 5,000 children born between 1998 and 2000 in US cities that had a population over 200,000 people. They

also utilized data from the U.S. Department of Labor, the U.S. Census Bureau, U.S. National Oceanic and Atmospheric Administration, and local city reports. They found that homeless mothers are less likely to be immigrants than housed mothers living in poverty, were more likely to be in fair or poor health, were more likely to have a drug problem, were more likely to suffer from depression, and were more likely to have been hurt by their child's father (Fertig & Reingold, 2008). They also found that homelessness did not appear to be related to race, age of children, ethnicity, marital status, employment, welfare benefits, or receipt of housing subsidies. Fertig and Reingold (2008) found that mothers who were doubled-up with family or friends were less likely to be African-American, were slightly younger than their homeless counterparts, and had fewer children. Mothers who were living in doubled-up situations were also more likely to be working, and fewer doubled-up participants were receiving welfare or housing subsidies. The authors found that homelessness was negatively related to the number of apartments that cost less than 30% of the median income. The authors believed that access to family support and increased subsidized housing could decrease the number of homeless families in large cities (Fertig & Reingold, 2008).

Historical Literature on Family Homelessness

Shinn, et al. (1998) specifically studied predictors for family homelessness in New York City. The authors interviewed homeless families at shelter entry and again five years later to determine predictors of residential stability. The participants had never been in a homeless shelter before the study. The authors found that African-Americans were most likely to request shelter assistance. Mothers were more likely to be pregnant

or had just given birth before requesting shelter. Apartment overcrowding and frequent

moves added to the risk of homelessness while having subsidized housing and/or one's

own apartment decreased the risk of homelessness. Marriage or living with a partner

increased homelessness, as did childhood housing disruptions and adult domestic

violence (Shinn, et al., 1998). At the time of the follow-up interviews, 79% of the

participants were in their own apartments, 4% were in shelter, and most of the rest were

doubled-up or living with family. Of those in their own apartment, 61% were determined

to be housing stable, meaning they had lived there for at least one year. Housing

subsidies were determined to be the best predictor of housing stability; odds of housing

stability were 20.6 times better for participants who receiving housing subsidies (Shinn,

et al., 1998).

Wong and Culhane (1997) studied shelter exit and shelter re-entry. Similar to

Shinn, et al. (1998), they found that housing subsidies were the best way to avoid shelter

re-entry. The authors found that families exited shelter in four different ways: 48%

moved into subsidized housing, 41% moved into unknown arrangements, 7.5% moved

into independent apartments, and 3.5% moved into other arrangements (which included

moving in with family, incarceration, or transferring to a domestic violence shelter). Of

those who moved into subsidized housing, 31% moved into apartments run by the New

York City Housing Authority (NYCHA), 31% moved into housing funded by New York

Housing Preservation and Development (HPD), and 33% moved into private subsidized

housing. The authors found that families who exited into unknown circumstances had a

high probability of returning to shelter within six months; 37% of families who exited to

unknown circumstances returned to shelter within two years. However, only 7.6% of families who exited shelter to subsidized housing returned to shelter within two years. Families who exited to independent housing had a return rate of 13% within two years and those who exited to other circumstances had a return rate of 30% within two years. Family size was also found to be a contributing factor to type of shelter exit; the more adults that were in family, the more likely the family was to move into independent housing. Pregnancy status of any family member raised the chances that the family would exit shelter to unknown circumstances. African-American and Hispanic families were more likely to exit shelter to unknown arrangements and less likely to exit to independent housing. Families who received welfare were more likely to move into subsidized housing and less likely to move into an unknown location. Many demographic factors related to shelter readmission as well. Additional adults in a family increased the likelihood of shelter readmission by 27% and additional children raised the readmission rate by 7%. The older the family was, the less likely they were to return to shelter and African-American families and Hispanic families were more likely to return to shelter. Pregnant family members increased the readmission rate by 70% and families receiving public assistance were 10% more likely to return to shelter (Wong & Culhane, 1997).

McChesney (1995) compared homeless parents and homeless individuals and found that homeless parents were less likely to have psychiatric disabilities or substance use disorders than homeless individuals. She also found that homeless individuals were more likely to have been in jail, while homeless parents had a higher income (including

public assistance). Homeless mothers also tend to be younger than homeless single women, and are more likely to have family and/or social support than homeless individuals. McChesney (1995) identified several risk factors for homelessness during her research: single motherhood, minority status, young age of the head of household, leaving housing due to physical or sexual abuse or drug abuse or eviction, pregnancy or recent birth, and lack of social support.

In 1992 Weitzman, Knickman, and Shinn studied psychiatric history, substance abuse, and victimization among homeless families. They found that families requesting shelter were younger, smaller, slightly more educated, and more likely to be pregnant or have recently given birth than housed families. They also found that African-American families requested shelter more often than other races or ethnicities. Only 4% of adults requesting assistance from a family shelter had been in a psychiatric hospital but someone with a psychiatric history was 5.2 times more likely to request shelter than someone with no previous psychiatric hospitalizations. The authors also found that 8% of shelter requestors had been to alcohol or drug detox, but only 2% of the housed population in the study. Finally, they found that childhood sexual or physical abuse doubled the chances that someone would request family shelter assistance as an adult (Weitzman, Knickman, & Shinn, 1992).

In 1988, Weitzman, Knickman, and Shinn conducted a different study looking at pathways to homelessness in New York City. They found that out of 482 families, most of the participants in their study (44%) had never had an apartment of their own, while 43% entered the shelter system from their own apartment and 13% of participants had

been living with others (Weitzman, Knickman, & Shinn, 1990). Within these three groups, there were marked differences in demographics, showing that homelessness does not just affect one group of people. The authors found that the participants who had been primary tenants had relatively stable housing for at least a year, but that this housing was quite crowded, with at least three people per bedroom. The primary tenants were also found to be older than the other groups, and had fewer reports of substance abuse or mental illness. However, 26% of this group did report issues with domestic violence. Of this group, 47% entered shelter after being evicted from their apartments, and many reported living in buildings with unsafe conditions, such as vermin or heating problems. The group that was living doubled-up also reported evictions, unsafe living conditions, and domestic violence but domestic violence was more likely to be the reasons the families left their apartments and entered the shelter system. The group that has never had their own apartments was primarily made up of younger, smaller families and many of the mothers were pregnant or had recently given birth. Most had lived with parents or other family members before entering the shelter system and many had never paid rent before. 60% of this group had parents who received public assistance, 1/3 had completed 12 years of school, and 1/4 had previous work experience. This group seemed to be stuck in the cycle of poverty and did not know other ways of living (Weitzman, Knickman & Shinn, 1990).

Bassuk, Rubin and Lauriat (1986) interviewed 80 homeless families in 14 shelters in Massachusetts. They found that the mothers ranged in age from 17-49, with a median age of 27 years old. Forty-five% of the women interviewed were single mothers and

45% of the women were divorced, separated, or widowed. Sixty% of the women reported having a high school education but only 33 % reported having a job for longer than a month. Ten of the participants had criminal backgrounds. Twenty-nine of the women reported having been in abusive relationships. Forty-four of the women reported involvement in the mental health system and 25 % were found to have an Axis I DSM III diagnosis. One-third of the participants did not know their fathers and 2/3 reported at least one major childhood disruption, including placement in foster care, running away, living with relatives, and childhood abuse (Bassuk, Rubin, & Lauriat, 1986).

Generational Homelessness

Grant, Gracy, Goldsmith, Shapiro, and Redlener (2013) reviewed 25 years of literature on child and family homelessness to see what changes had occurred and the current state of family homelessness. The authors found that family homelessness became a problem in the 1980s due to increasing rates of childhood poverty, income inequality, and lack of affordable housing. Evictions, mainly due to non-payment of rent increased 800% between 1981 and 1982 and demand for emergency shelter increased 20 % between 1985 and 1986. By 1990, the average wait for public housing was 21 months and in 1992 the Office of the Inspector General, Department of Health and Human Services found that shelters in seven of eight cities did not have enough beds to accommodate all of the people who needed shelter. The Community Service Society of New York found that poor families who did not receive housing subsidies spent, on average, 49% of their income on rent. In the 1980s researchers found that doubling-up in apartments was one of the biggest risk factors for family homelessness. Researchers in

2003 found similar results because housing instability is often a precursor for family

homelessness. Another risk factor for family homelessness is domestic violence;

researchers in the 1980s found that there was a direct link between domestic violence,

economics, and family homelessness because women often earn less than men, so if a

woman leaves a domestic relationship she may not be able to afford her own apartment.

In 1996, many women identified domestic violence as their reason for homelessness and

a 2004 study found that 34% of women in family homeless shelters in New York had

been exposed to domestic violence. The authors found that housing subsidies are one of

the most effective ways to address family homelessness and try and prevent generational

homelessness (Grant, Gracy, Goldsmith, Shapiro, & Redlener, 2013).

Bassuk, et al., (1997) studied homeless families in Worcester, Massachusetts.

They found that there are many childhood predictors of adult family homelessness.

These predictors included childhood foster care placement and parental drug use. Adult

risk factors included minority status, recent eviction, recent psychiatric hospitalization,

frequent alcohol or heroin abuse, and interpersonal conflict. The authors also found

several protective factors, including being a primary lease-holder, receiving welfare

and/or housing subsidies, completing high school, and having strong community and/or

family connections.

Koegel, Melamid, and Burnam (1995) utilized data from the Course of

Homelessness study to obtain information about 1563 homeless adults in Los Angeles.

They found that, compared to housed adults in Los Angeles, homeless adults in Los

Angeles were disproportionally African-American and were mostly between the ages of

29 and 49. Participants were also less likely to have finished high school and were more

likely to have been born in the United States. The authors found that participants had

high levels of childhood disruptions, including foster care and adoption. The majority of

respondents reported growing up in poverty and 60% received welfare, lacked food or

utilities, or had an unemployed caretaker. 17% of the respondents reporting

homeless/runaway situations as children, 17% of the respondents lived in double-up

situations, 13% lived in public housing or subsidized housing, five% had been evicted at

some point during childhood, and three% were homeless with their families. Thirty-two

percent of the respondents reported adult substance abuse in their homes, 9% reported

incarceration of an adult in their homes, and 5% reported sexual assault during childhood.

Few participants reported only one of these problems and many homeless adults had

experienced several of these problems during childhood (Koegel, Melamid, & Burnam,

1995).

Generational Poverty

Anakwenze and Zuberi (2013) wrote about urban poverty and mental illness.

According to the authors, those who live in urban areas are at a higher risk for mood

disorders, anxiety disorders, and schizophrenia. The authors feel that living in poor urban

areas leads to mental illness and mental illness leads to poverty, which means that both

problems reinforce each other. Some of the problems caused by living in poverty include

unemployment, drug use, underemployment, crime, and residential instability

(Anakwenze & Zuberi, 2013). In order to address these problems the authors advocate

for mental health services that are community-based and culturally-sensitive in order to reach as many people as possible (Anakwenze & Zuberi, 2013).

Nikulina, Widom, and Czaja (2011) studied childhood neglect and childhood poverty in predicting Posttraumatic Stress Disorder, Major Depressive Disorder, academic achievement, and crime in young adulthood. The authors found that childhood neglect and childhood family poverty often predicted PTSD and adult arrests, while Major Depressive Disorder was only predicted by childhood family poverty. The authors also found that childhood family poverty and childhood neighborhood poverty predicted academic achievement. The authors concluded that while addressing childhood neglect is extremely important, it is also important to address poverty as well (Nikulina, Widom & Czaja, 2011).

Wasson and Hill (1998) wrote about female-headed families, poverty, and homelessness. They regard family homelessness as a three-step process. First, families live on their own, then they double-up with family or friends, and then they enter the shelter system. The authors also argue that family homelessness has increased due to a decrease in affordable housing and an increase in the number of poor people in the U.S. The authors found that African-American families tended to be affected most by poverty and homelessness while Hispanic families were more likely to double-up with family or friends. Furthermore, families requesting shelter reported an average of 2.8 living locations within the past year, while housed families reported an average of 1.2 living locations, showing that homeless families tend to move around before entering the shelter system. The authors feel the best way to address this problem is to help families increase

their income so that they can afford market-rate apartments on their own (Wasson & Hill, 1998).

Case Management in Homeless Shelters

Zlotnick and Marks (2002), studied case managers at 10 federally funded sites and examined the characteristics and demographics of case management employees. They wrote that case managers, "identify the needs, devise a plan, and link the families including the children to the variety of services that they need" (Zlotnick & Marks, 2002, pg. 115). Case managers also promote continuity of care and assist client navigating complex systems, such as medical treatment, mental health treatment, and entitlements. They also pointed out that effective case management should target the entire family, not just the adults, so that every member can receive the services that he or she needs (Zlotnick & Marks, 2002).

Donlon, Lake, Pope, Shaw, & Haskett (2014) wrote programs that address the mental health and developmental needs of children who were experiencing homelessness. As they pointed out, "cumulative adverse experiences place children without homes at risk for poor mental health and developmental challenges" (Donlon, Lake, Pope, Shaw, & Haskett, 2014, pg. 163). According to the authors, 14% of babies and toddlers, 47% of 5-11 year-olds, and 67% of adolescents met the criteria for mental health treatment (Donlon, Lake, Pope, Shaw, & Haskett, 2014). However, they also found that these children often did not receive the support they needed from their mothers, stating that homeless mothers report more frustration with parenting roles than housed mothers and often had more involvement with child welfare authorities (Donlon, Lake, Pope, Shaw, &

Haskett). The authors concluded that family homeless shelters should be aware of the

mental health challenges of homeless families and should have services in place to meet

these needs.

Henwood, Padgett, and Nguyen (2011) discussed the importance of client and

case manager agreement when completing needs assessments and service plans for

homeless adults with serious mental illness. According to the authors, it is vital for

clients perceived needs to line up with the case manager's assessment of client needs.

"Agreement about consumers' needs and goals is believed to be fundamental to fully

collaborative partnerships and person-centered planning (Henwood, Padgett, & Nguyen,

2011, pg. 143). However, this may be difficult if clients and case managers have strong

disagreements about what is best for the client. Disagreements are likely to hinder

engagement and make the process of moving into permanent housing more difficult

(Henwood, Padgett, and Nguyen, 2011).

Government Reports

Each fiscal year (July-June) the New York City Department of Homeless Services

(DHS) publishes a Data Dashboard with statistical information about the number of

people who utilized the New York City shelter system. These reports only address

shelter occupancy and do not address other types of homelessness, including street

homelessness, couch-surfing, or living in motels. We may expect that these numbers will

be lower than the actual number of homeless people in New York City. The two most

recent reports are for Fiscal Year (FY) 2014 and FY 2015. In FY 2014, the number of

families in shelter ranged from 40,000 individuals to approximately 45,000 individuals.

In FY 14, 57.7% of families with children in family shelters were African-American, 36.9% were Hispanic, 3% were white, 0.6% was Asian/Pacific Islander, 0.2% was Native American, and 1.6% was unknown. Most of the families entered shelter from the Bronx and Brooklyn. In FY 2014, 7,720 families exited shelter and remained out of shelter for over 30 days, thus being considered a successful move out. In FY 2014, 18,185 individuals received homeless prevention services, which helped them avoid entering the shelter system (DHS Data Dashboard, 2015).

In FY 2015, the number of families in shelter increased from approximately 45,000 to almost 50,000. Of these families, 57.5% were African-American, 37.2% were Hispanic, and 3% were white. Once again, the majority of the families came from the Bronx and Brooklyn (DHS Data Dashboard, 2015).

The U.S. Department of Housing and Urban Development (HUD) submits an Annual Homeless Assessment Report (AHAR) to Congress. The two most recent years available are 2015 and 2016. In 2015, HUD found that 564,708 people were homeless on any given night. Of those people, 70% were in shelters or transitional housing and 30% were living on the street or some other unsheltered location. HUD also found that 22% of these people were children under the age of 18 and 37% of all homeless people were part of a homeless family. According to HUD, homelessness throughout the United States declined almost 12.8% from 2007 to 2015. However, homelessness increased 1% in cities from 2014-2015 and homelessness increased in New York 41% from 2007 to 2015.

The 2016 AHAR showed that 549.928 were homeless on a given night and 68% were living in shelters or transitional housing programs, while 32% were unsheltered or on the street. Of these, 194,716 people were in homeless families, making up 35% of the homeless population. In 2016 there approximately 10,000 homeless young parents, between the ages of 18-24.

Family homelessness in the U.S. declined 3% between 2013 and 2014. However, once again, homelessness in New York State increased, and New York State again had the biggest increase in homelessness throughout the U.S.; from 2007 to 2014, homelessness in New York State increased 29%. From 2013 to 2014, the number of chronically homeless families decreased by 8% but the number of chronically homeless families living in shelters increased 15%. In 2014, 20% homeless families in the U.S. were living in homeless shelters in New York State.

In 2013, The United States Substance Abuse and Mental Health Services Administration published research from the National Center for Family Homelessness, which is part of the American Institutes for Research. The research found that 93% of female participants had a history of trauma and that after 15 months, 63% of the families were still residentially unstable. The predictors for this housing instability included unemployment, lack of education, poor health, and low self-esteem. After 30 months, half of the families were residentially unstable, but the only predictors for residential instability were previous trauma and low self-esteem. Half of the mothers had experienced sexual abuse as children and two-thirds had experienced physical abuse at some point in their lifetime. The authors believe that the best way to address family

homelessness is to include trauma-informed care so that families can receive the treatment they need in order to obtain residential stability.

Non-Profit Advocacy Groups

Coalition for the Homeless is a New York City-based advocacy and direct-service organization (Coalition for the Homeless, 2015a). Each year Coalition for the Homeless publishes a State of the Homeless report about New York City homelessness. According to the 2014 State of the Homeless report, shelter homelessness in New York City increased 7% from 2013 to 2014 and the number of homeless children increased 8% from 2013 to 2014. The length of time that families spent in shelter also increased, from an average of 12.5 months to an average of 14.5 months.

The 2015 State of the Homeless report detailed that 2.3% of children under the age of 18 in New York City spend at least one night in a homeless shelter; this number includes 1 in 17 African-American children and 1 in 34 Hispanic children. In 2015, 79% of shelter residents were families and 42% of shelter residents were children. From 2005 to 2014, the total number of households utilizing the homeless shelter system each fiscal year rose by 21.9%. From 2014 to 2015, the shelter population increased 13% and the number of children in city shelters increased 12%. Coalition for the Homeless believes that the shelter population rose due to a decrease in affordable apartments; between 2011 and 2014, apartments with monthly rents below $1,000 fell by 12.6% and apartments with rents under $700 fell by 13.3%. Furthermore, the number of evictions in New York City rose from 21,945 in 2005 to 26,857 evictions in 2014 (Coalition for the Homeless, 2015b).

Coalition for the Homeless believes that there are several ways to address homelessness in New York City: provide long-term housing subsidies, convert cluster-site short-term housing to permanent housing, create new supportive housing units, improve access to emergency shelters, and enhance homelessness prevention programs.

Summary

This chapter provided an overview of the literature used in this study. I used literature from the 1980s through 2015 to provide both an historical context of homelessness in New York City as well as a look at the current state of homelessness in New York City. I used trauma theory to explain the relationship between trauma and homelessness, especially as it pertains to family homelessness. I conducted literature searches on SocIndex and PyschInfo and search topics included poverty, generational poverty, homelessness, family homelessness, generational homelessness, New York City homelessness, trauma and homelessness, and case management in homeless shelters. I also used reports from the New York City Department of Homeless Services, the U.S. Department of Housing and Urban Development, and the U.S. Substance Abuse and Mental Health Services Administration. I used reports from Coalition for the Homeless to provide non-governmental statistics about homelessness in New York City.

Chapter 3: Research Method

Introduction

The purpose of this qualitative study was to understand the risk factors of second-generation family homelessness in New York City. Specifically, I asked one second-generation homeless adult and 10 case managers about their experiences and what interventions might have helped them avoid adult homelessness. This was a qualitative case study of homeless adults who were homeless as children and who now reside in the New York City shelter system with their own children and a case study of their case managers. This chapter will discuss the research design and rationale as well as the role of the researcher. It will also discuss the methodology that I used along with issues of trustworthiness.

Research Design and Rationale

The following questions guided the research.

1. What is homelessness as defined by second-generation homeless adults?

2. What is generational homelessness as defined by second-generation homeless adults?

3. How do second-generation homeless adults describe barriers to housing stability?

4. How do case managers define these terms and the barriers that clients face?

This was a qualitative multiple case study of one family in a New York City homeless shelter and 10 case managers employed at Tier II homeless shelters. I used a multiple case study approach in order to ask homeless adults about their experiences as homeless children, to ask case managers about their experiences working with second-

generation homeless families, and to develop a deeper understanding of generational

homelessness. According to Yin (2014):

> [a case study] copes with the technically distinctive situation in which there will
>
> be many more variables of interest than data points, and as one result relies on
>
> multiple sources of evidence, with data needing to converge in a triangulating
>
> fashion, and as another result benefits from the prior development of theoretical
>
> propositions to guide data collection and analysis. (p. 17)

I chose a multiple case study over other methodologies because it best suited the study. I

interviewed multiple participants and long interviews were needed for the participants to

explain their experiences as second-generation homeless people or their experiences as

case managers for second-generation homeless people. The participants were not limited

to one cultural or ethnic group. While participants might have experienced the shared

phenomenon of homelessness or working with the homeless, they might also have

become homeless or started working in shelters for different reasons; the multiple case

study approach supports the variations that may emerge during the interviews. This study

took place in a few selected shelters within New York City and was time-limited.

Role of the Researcher

As the researcher, I interviewed all of the subjects and asked them questions. I

have been associated with an agency that operates homeless shelters for over 11 years,

and have worked at one of the selected shelters in the past. None of the participants was

ever a client or employee of mine, and all participants had the option to participate or not.

Participation was not a requirement on their service plan as shelter residents and there

was no penalty for not participating. Participation was not required for any employees and there was no penalty for not participating.

The homeless participant was given a $10 gift card for her participation. This incentive was to thank her for participating but was not big enough to entice anyone to lie in order to join the study. The case manager participants did not receive any incentives for participating.

I protected shelter residents by not involving shelter staff in the recruitment process. I placed flyers in all client mailboxes and clients who were interested in participating were able to contact me directly. I conducted the interviews in a location of the participants' choosing. The homeless participant chose to meet in the conference room of the shelter where she lives. The case managers chose to meet in their offices. When we met, I introduced myself and explained the purpose of my study. I gave the participant the choice to read the participation agreement or have me read it to her. I then reviewed the participation agreement and answered all of the questions the participant had. I gave the participant the option to withdraw at any time. Once the participant confirmed she understood everything in regards to the study and wanted to continue, I then asked her my interview questions while following my planned interview protocol. The participant was given time to answer the questions. The interviews were audio recorded. The homeless participant did not express any mental health concerns or stress related to the study and therefore did not need any referrals to mental health services. To recruit case managers I emailed all case managers in the shelters to ask if they would like to participate in the study. When we met, I introduced myself and explained the purpose

of my study. I gave participants the choice to read the participation agreement or have me read it to them. I then reviewed the participation agreement and answered all questions the participants had. I gave the participants the option to withdraw at any time. Once the participants confirmed they understood everything in regards to the study and want to continue, I then asked them my interview questions while following my planned interview protocol. Participants were given time to answer the questions. The interviews were tape recorded. At the end of the interview, I asked participants if they had anything they wanted to add. No Case Management participants expressed any mental health problems or stress related to the study and did not need to be referred for assistance.

Methodology

The population for this study was second-generation homeless adults in New York City homeless shelters and case managers at Tier II homeless shelters. These are adults who were homeless for any length of time as children and have returned to the shelter system as adults with their own children as well as the case managers who work with these families. The Walden University IRB approval number for this study was 01-05-17-0193714.

I tried to recruit participants from four family shelters in New York City. All Heads of Household received a flyer about the study. Flyers were distributed on four occasions, totaling 1,380 flyers distributed. Two individuals responded to the flyers and, after phone discussions about the study, one chose to complete the in-person interview and the other potential participant did not follow-up to schedule an in-person interview. Potential participants had to self-report childhood homelessness because there is no

objective way to verify the accuracy of their statements. After a lack of response from

homeless families, I expanded the sample to include case managers at Tier II homeless

shelters. I sent an initial email to 21 employees at Tier II Homeless Shelters with the title

of case manager, case manager supervisor, and associate program director, inviting them

to participate in the study. Eight of them responded and I interviewed them. I then sent a

second email, with the same information, to the 14 remaining case managers, 3 responded

and I interviewed them.

One homeless individual and 10 case managers were interviewed for this study.

This number was sufficient to explore the concepts around second-generation

homelessness and provided enough data from which to draw conclusions.

This study used a researcher-designed instrument that asked these questions of the

homeless participant:

1. How do you define homelessness?

2. How do you define generational homelessness?

3. What assistance or interventions might have helped you avoid second-generation

    homelessness?

4. Do you remember becoming homeless as a child? What was going on?

5. How did you become homeless as an adult?

6. Were there any other alternatives for your family at that time?

7. Were there any alternatives for you as an adult?

The researcher-designed instrument asked these questions of the Case Management

participants:

1. How do you define homelessness?

2. How do you define generational homelessness?

3. Have you worked with families who have experienced generational homelessness?

4. In your opinion, what assistance or interventions might help families avoid second-generation homelessness?

5. In your opinion, why do some families experience generational homelessness?

6. What are the challenges (if any) of working with families who have experienced generational homelessness?

Interviews were recorded and then transcribed. I also took detailed notes during the interviews. I transcribed the interviews myself. The transcripts will be stored in a locked desk in my home for 7 years and will then be shredded.

Because this study involved participant interviews, credibility was determined using peer debriefing. I chose a professional peer to review the transcripts, notes, and analysis. The peer provided feedback and analysis of the work to assist me with uncovering biases, assumptions, and errors.

All data were hand coded. I used hand coding to determine themes and trends within the data.

Issues of Trustworthiness

Because this study involved participant interviews, credibility was determined using peer de-briefing. A professional colleague read my notes and transcripts and looked for any issues I may have missed. I determined transferability using thick

description, which included "detailed observational evidence" (Yin, 2014, p. 19). I used an audit trail to determine dependability. I took detailed notes of the entire process of the study to ensure dependability. I used reflexivity to determine confirmability. I developed a reflexive journal, which allowed me to examine my own biases and preconceived notions, I was able to prevent them from tainting my research. It also allowed me to thoughtfully plot each portion of the study to ensure that I was not allowing any biases to change the course of the study. Because participants self-selected themselves, I did not discriminate against any adult who wanted to be in my study. To minimize moderator bias I asked open ended questions about participants' views of homelessness and generational homelessness and had a colleague read my notes and transcripts to find any biases I may have missed.

Summary

This chapter has discussed the choice of qualitative one-on-one interviews to explore second-generation homelessness in New York City. Multiple participants were used in order to obtain a well-rounded view of second generation homelessness. I recruited participants from four New York City shelters and were interviewed in a location of their choice. Participants were asked the interview questions using the interview protocol and data was coded using hand-coding. I used thick description to determine transferability and reflexivity to determine confirmability. I minimized bias by asking open-ended questions and not excluding any qualified participants. Data will be kept confidential and stored on external flash drives that will be locked in my house. Transcripts will also be locked in a secured drawer and will be shredded after 7 years.

Chapter 4: Research Findings

Introduction

The purpose of this study was to explore second-generation homelessness in New York City Tier II family homeless shelters. The research questions were:

1. What is homelessness as defined by second-generation homeless adults?

2. What is generational homelessness as defined by second-generation homeless adults?

3. How do second-generation homeless adults describe barriers to housing stability?

4. How do case managers define these terms and the barriers that clients face?

I conducted this study with one homeless adult and 10 case managers associated with Tier II homeless shelters. The research plan changed during the course of the study, as the bulk of participation changed from second-generation homeless adults to case managers at Tier II homeless shelters.

This chapter will discuss the research questions, the setting of the study, changes in the conditions of the study, the demographics of the participants, the data collected during the study, changes in the research plan, analysis of the data collected, evidence of trustworthiness, and the results of the study.

Setting

I conducted the study in Tier II family homeless shelters in New York City. Flyers were distributed on four occasions in four shelters, with a total of 1,380 flyers distributed.

I sent emails to employees at the four Tier II shelters. All case management interviews took place in the case management offices at each site.

Demographics

The one homeless participant who completed the research interview was a 38 year-old woman who self-identified as Black. She had 6 children, 2 of whom were living in the shelter with her. She became homeless as a child due to parental neglect and parental drug and alcohol abuse. As an adult, she became homeless because she could not afford her rent and was evicted. This was her second time in the shelter as an adult; she had previously qualified for a housing subsidy, but when the program was defunded she could not afford the full rent of her apartment. She has been in the shelter for 4 years and currently has a different housing subsidy, but reported that she has been unable to find an apartment that she can afford. Her voucher is valued at $1515 and qualifies her for a 2-3 bedroom apartment due to the size of her family, but she has not been able to find an apartment that costs $1,515 and is big enough for her family. At the time of the interview she did not have a high school diploma and reported that she became pregnant at a young age and started to work to support her family. She was not employed at the time of the interview. This participant was labeled as participant 1 for the data analysis.

I interviewed ten employees for this study: one associate program director, 2 case manager supervisors, and 7 case managers. Of these participants, 6 were male and 4 were female. Their length of employment ranged from a few months to almost 10 years. I labeled these participants as participants 2-11 for the data analysis.

Data Collection

I conducted in-person interviews with 11 participants: one homeless adult and 10 shelter employees. The client interview was conducted in the conference room at her shelter. The employee interviews were conducted in case management offices at the shelters. The interviews ranged in length from 20 minutes to one hour. I recorded all of the interviews on a digital recorder and I then transcribed them into a Microsoft Word document. I conducted interviews were conducted from February 2017 to July 2017.

More than 1300 flyers were distributed to the shelter mailboxes of homeless families from February 2017-May 2017. These flyers resulted in two phone calls from interested participants. One client completed the in-person interview and the other stopped responding to researcher phone calls. The decision to change from client interviews to employee interviews occurred in May 2017 and I obtained IRB approval in June 2017. In June 2017, I sent a recruitment email to 21 employees at Tier II Homeless Shelters and resulted in seven responses and seven completed interviews. I sent a second recruitment email later in June and resulted in three responses and three completed interviews.

Data Analysis

After I transcribed the data, it was printed and hand coded. I read the transcripts several times and discovered participants discussed several topics in multiple interviews. I placed these topics in an Excel spreadsheet and were then sorted to see how often each topic was discussed. Overall, 24 different topics were mentioned in at least two interviews. I then sorted the spreadsheet again to organize the topics from most discussed to least discussed. The most discussed topic was "lack of resources," which

was discussed nine times. I then color-coded the topics into themes and sub-themes. For example, anything relating to money was coded green. After sorting and color-coding, I found eight large themes and participants discussed four additional topics on multiple occasions but did not seem to fit into any of the larger themes. The themes found were: lack of information and resources, generational homelessness is passed down and people should learn from their parents' mistakes, comfort in the homeless shelter system, money, parental abuse and neglect, the role of the case manager, taking advantage of the shelter system, and mental health. The other topics that were discussed on multiple occasions but did not fit into larger categories are: education, drugs and alcohol, lack of family assistance, and activities of daily living (ADLs). Nine of the 10 case managers interviewed had worked with at least one second-generation homeless family during their time working in the shelters.

Evidence of Trustworthiness

I determined credibility using peer debriefing. A professional colleague, who also has a Masters in Social Work, reviewed my transcripts and themes and provided feedback on the themes I found. She did not find any additional themes to add to my data analysis but did provide suggestions on how to group the sub-themes into larger themes.

I determined transferability using thick description. By fully describing the phenomena of second-generation homelessness through both a discussion of existing literature and the lived experiences of the participants, I provided context for readers and other researchers.

I determined dependability by using an audit trail. I took detailed notes of my interviews and compared them with my transcripts to ensure that I fully documented what each participant was saying. I also highlighted my transcripts and wrote detailed notes on the actual transcript to find my themes and sub-themes.

I determined confirmability using reflexivity. Because I worked in the shelter system for over five years and with formerly homeless adults for another five years, it was important to examine my own biases and pre-conceived notions about families who experience generational homelessness. Much like the case managers who were interviewed, I believed that generational homelessness was partly due to comfort with the shelter system. However, much like participant 1, I also think that affordable housing and living wages are incredibly important, especially in a city as expensive as New York.

Results

The interviews were incredibly enlightening and provided several areas of discussion as well as possible suggestions on how to prevent generational homelessness. All of the participants provided a wealth of information and ideas for analysis. The following results are sorted by theme and subtheme.

Below are tables of the themes and subthemes:

Table 1
Themes and Subthemes

Theme	Lack of information & Resources	Generational Homelessness is Passed Down & People Should Learn from Their Parents' Mistakes	Comfort in the Homeless Shelter system	Money
Sub-Themes	Lack of resources	Passed down	Comfort with the system	Affordable housing

	Lack of information	Learn from mistakes	Lack of motivation	Living wage
			Harder to see a better life	Lack of funds
			Mentality	Financial management

Table 2
Themes and Subthemes 2

Theme	Parental Abuse & Neglect	The Role of the Case Manager	Taking Advantage of the Shelter System	Mental Health
Sub-Themes	Parental neglect	Harder to work with	Work the system	Mental health
	Child welfare	Build rapport	Easy to get an apartment	Trauma

Lack of resources and lack of information were two separate topics. Participants

mentioned lack of resources nine times during the interviews and discussed lack of

information five times. Participants mentioned lack of resources as a definition for

homelessness on six occasions. Many participants felt that lack of information and

resources were strong reasons for generational homelessness and that additional resources

and information would help people avoid second-generation homelessness. For example,

Participant 3 stated, "How would I define homelessness? Just loosely, not having a

comfortable place to stay where you have your resources you need to do what you need

to do every day." Also, Participant 9 told me, "Homelessness to me is you don't have a

place to live or limited resources." However, many participants mentioned resources as

responses to the research question: What assistance or interventions might help families

avoid second generation homelessness? Participants discussed information and lack of

information when answering the questions: Why do some families experience

generational homelessness?; and: What assistance or interventions might help families

avoid second generation homelessness? Participant 10 stated,

> I just feel like services should provide more information...They have or always
>
> were on public assistance and I feel like they don't inform them about certain
>
> things. They just go in and out, as long as they have their food stamps and get
>
> their cash, but there's so much out there that they should be informing their
>
> clients.

Participants discussed generational homelessness being "passed down" on seven

occasions and participants discussed the importance of learning from parental mistakes

four times. Participants mainly discussed generational homelessness being passed down

when answering: How would you define generational homelessness? For example,

Participant 2 stated: "It's kind of odd, because being homeless is not hereditary, but

homeless is a state of mind also, so it is passed down when you see generation after

generation being in the shelter system."

While participant 10 said,

> You know how they say the circle of life? It's the circle of homelessness. Like, if
>
> my mom was homeless and we went to a homeless shelter and I grow up as an
>
> adult and I become homeless and I have a baby and she grows up to experience
>
> what I experienced. It's like a never ending cycle for some people.

Learning from mistakes came up mostly when discussing why some families experience

generational homelessness and what assistance or interventions might help families avoid

second generation homelessness. As Participant 2 pointed out,

If the client is raising a child and is not raising them to the best of their ability and is not doing all the parenting duties then it's a great change for...the child to end up in the same situation as the parent. You should teach the child to learn from your mistakes, not to repeat your mistakes. And that's what I feel adds to generational homelessness.

I broke comfort with the homeless system into four sub-themes: comfort with the system, clients' lack of motivation, it is harder for generational homeless clients to see a better life, and homelessness being a mentality. Participants discussed comfort with the system by participants six times. Some case managers felt that clients who grew up in the shelter system became comfortable and did not know any other type of life or were unable to imagine a different type of life and may even lack the motivation to move out. Participant 2 mentioned,

It's almost like since they're in the system and they're practically born into the system that those are the clients that it's harder for them to see the bigger picture that this isn't the final step. There's more and you would have to want more, yearn for more, when this is all they know because this is where they were as children and this is where they are as young adults.

He further added, "It's almost like this is what they want to do and you have to snap them out of it. There's more out there, this is not just it."

Participant 3 added, "so maybe it's a mentality; maybe it's learning how to save money, all these type of things, lessons you learn from your family or people who bring you up, you're learning but you're learning them in a homeless shelter."

Participant 5 also discussed comfort,

> For those children who do experience the generational homelessness, the
> homeless shelter is all they know, is it's a safe place for some individuals. They
> kind of don't know how to live on their own because they always had the support
> of a case management team or a social work team, that they feel comfortable
> having those people around them and they're scared to kind of be on their own.

Participants mentioned money 14 different times. Several participants felt that affordable housing and a living wage would assist families with moving out of shelter and staying out of shelter. As participant 1 stated,

> The economy is rough. Housing, period, is bad. Like if you don't have a good
> life, you're not going to be alright. Growing up struggling, you're basically going
> to stay struggling. That's how I see it anyway. There's no light at the end of the
> tunnel. I just make it day by day, literally check to check. My voucher is for 2-3
> bedrooms, $1,515 and I've been looking on Craigslist...its $2,000 and up. You
> can't find nothing for those amounts.

Participant 6 echoed these thoughts: "Recently the increase of rent...I have a lot of clients who were priced out of their homes...they're like 'oh, I got evicted, I couldn't afford the rent.'" However, he added that financial education might help some families avoid homelessness,

> Financial management, that can really help. They should probably do that in high
> school. When I was in the 4th grade, my teacher showed us how to write checks
> and how to balance a checkbook...I don't think they do enough of that.

He also added,

> I think some people don't know how to handle their money, especially here. A lot
>
> of the clients we have...a major barrier for them to get a home is their credit.
>
> Their credit is usually terrible, it's usually very low, a lot of items they haven't
>
> paid off.

Participant 3 also discussed the importance of financial knowledge, "we have clients who don't know how to write checks, so just teaching them the skills and showing them how to apply those skills and even where those skills should be applied."

Several participants mentioned parental neglect and involvement with child welfare authorities, including participant 1, who stated that she became homeless as a child due to parental neglect and parental drug and alcohol abuse, "we were homeless because of our parents' neglect. Them hanging out, not paying bills...drinking and drugging, BCW at that time (BCW was the Bureau for Child Welfare, the child welfare authorities in New York City at that time)."

Three case managers also mentioned parental neglect and child welfare in their interviews. As participant 10 pointed out,

> Lately, I've seen, like their parents had them young and might not have known
>
> how to raise a child and they have...I don't want to say lose them but don't have
>
> control over situations and they let their child fend for themselves and that's a
>
> cycle because when they have a baby they do the same to their child and that's a
>
> reason why a lot of this repeats itself. There's no real guidance or structure.

Four participants discussed mental health and trauma in their interviews. Participant 9 stated,

What I've noticed is working with families like this, is something the adults, the older parents; they don't see themselves with having an issue or having a mental health problem. They're kind of in denial. If the parents are like that, then most likely if the child has some type of issue, the is a family think of mental health, then most likely that's going to be passed down to the child. And if they have some kind of issue then they may be blind to it because the parent doesn't see a problem then the child is going to learn that certain behaviors are ok. When in fact, it might be a sickness the person is dealing with but they don't see it like that.

He went on to add, "maybe they experienced some type of trauma or maybe they didn't have parents or weren't raised by their parents." Participant 2 also stated that second-generation homeless children should be screened for trauma to ensure they are receiving the services they need, "there should be a lot of servicing the child too; to make sure the child is not being traumatized by this ordeal that they are going through."

Participants discussed education in six of the interviews, starting with Participant 1, who pointed out that she does not have a high school diploma, "me personally, I don't have a high school diploma because I started having children young, so I preferred to work to support my children." Participant 3 also discussed education in his interview, stating, "For me, education is the biggest thing. It's like the saying, if you knew better, you'd do better."

Participants discussed Activities of Daily Living (ADLs) in three interviews. Participant 3 stated, "We see it here, is when people are in the shelter system, when they age out, when they become 18...they didn't learn the things to have an apartment or pay rent."

Participants cited lack of family assistance during four of the interviews. Participant 1 stated, "people say they're there to help, but when stuff hits the fan, you're on your own." Participant 7 also discussed lack of family assistance in her interview, "Some people experience generational homelessness because they probably don't have a helping hand. Maybe they don't have family or friends that can help."

Six case managers took what appeared to be a more pessimistic view and felt that some people were using the system as an easy way to get an apartment. Participant 3 stated, "It's almost like they are trying to work the system, not leave the system, and those are the ones who are more difficult to work with." Participant 5 echoed that statement, "It can be that some families are telling their kids, 'this is the easy way. You can go into the shelter and be homeless and get an apartment without having to really do too much.'"

Four case managers discussed that second-generation homeless families were harder to work with than other homeless families, mainly due to many of the concepts listed above, including comfort in the system, mental health, trauma, and lack of education and financial management. As Participant 4 mentioned: "Since they already know how the system works, they think they know more than you and wouldn't want to listen." However, many case managers also felt that it was incredibly important to build

rapport and work harder with second-generation homeless families due to the nature of their situation. Participant 2 discussed,

> they might need more extensive one-on-one care with their case manager and the housing specialist...you need to go the extra mile to get them motivated, go the extra mile to make sure they're doing what they need to do so that in 6-8 months they'll be able to move out on their own and see a brighter future...I think that case managers should know, when they look at the history, maybe I....need to work a little harder. Instead of giving them 100%, I should give 105% to this client to get them housing ready, to get them motivated, to get them to be independent individuals.

Participant 7 added, "It's just a matter of making sure you have open ears and hear what those clients or individuals have to say and make them aware that you're there to help." Participant 9 also discussed the importance of building rapport,

> Most of the difficult clients, they're more close-guarded...I think some of them want to be heard. Just listening and hearing or empathizing with the client in that situation where they are guarded leads to them to opening up or feeling that they can trust you because they see that you're there to listen, as opposed to telling them what to do.

Below is a chart of each subtheme and how many times it was mentioned by the
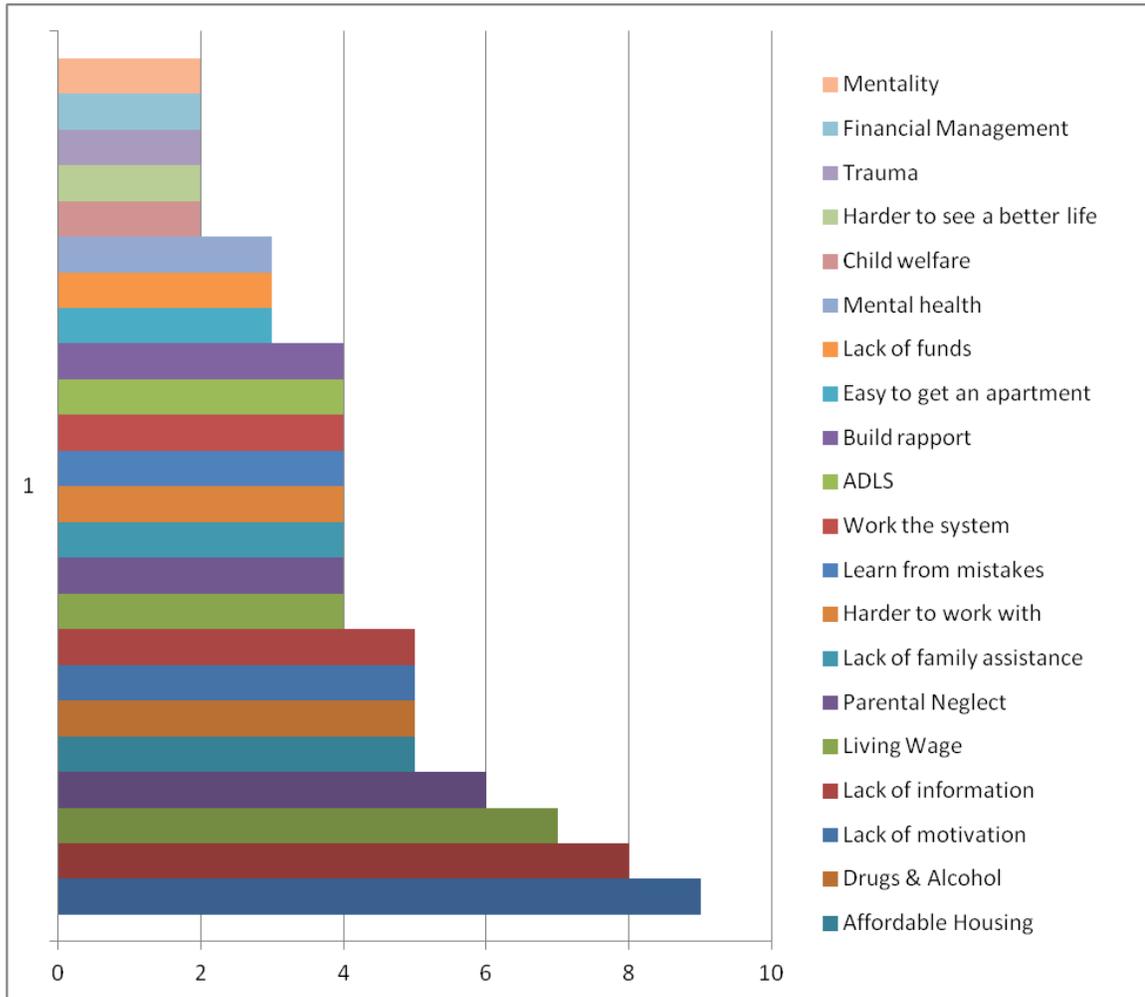
interviewees:

Figure 1. Interview subthemes.

I also reviewed themes by interview question. Below please find charts for each research question asked of the case managers:
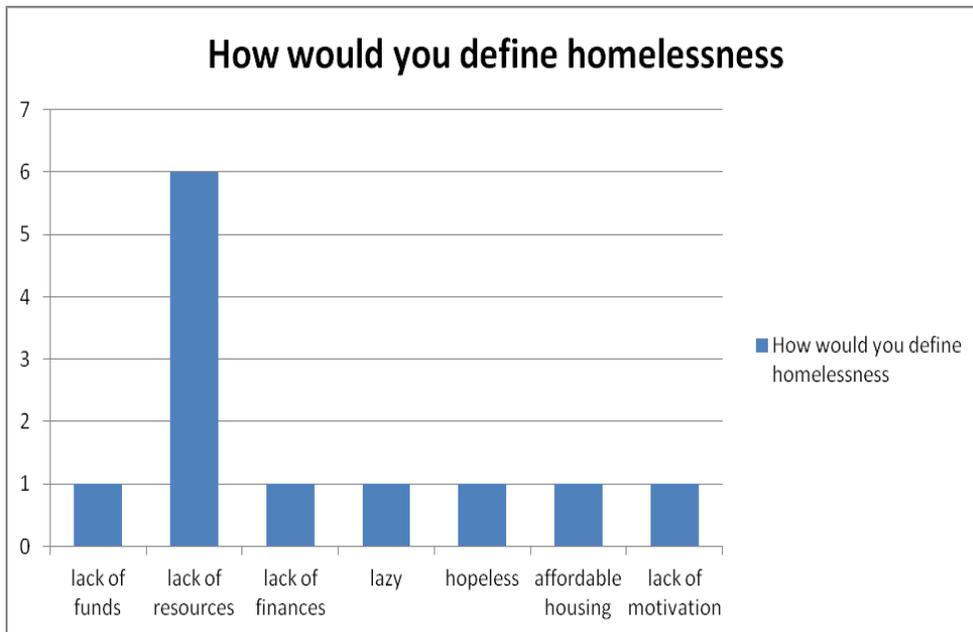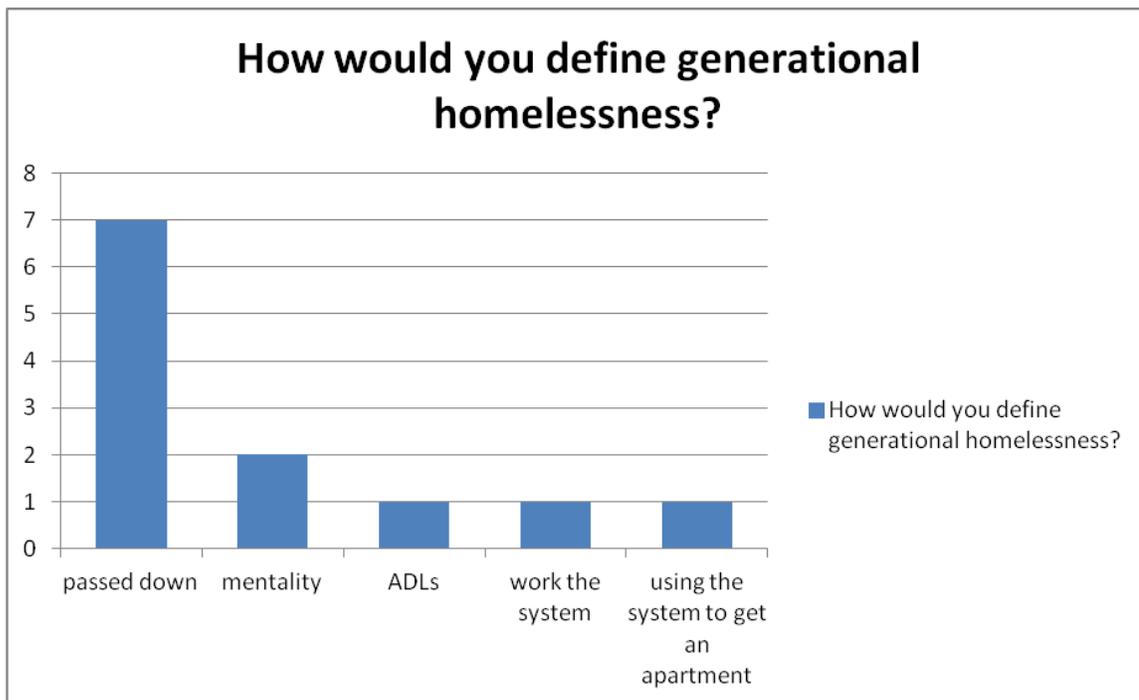

Figure 2. Definitions of homelessness

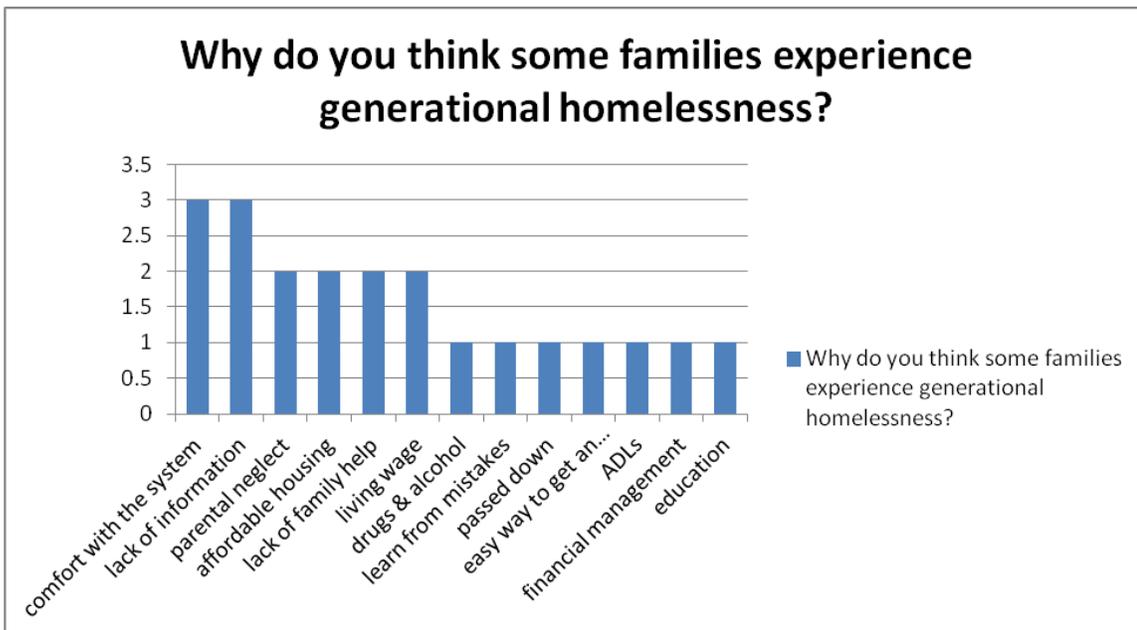*Figure 3. Definitions of Generational Homelessness*

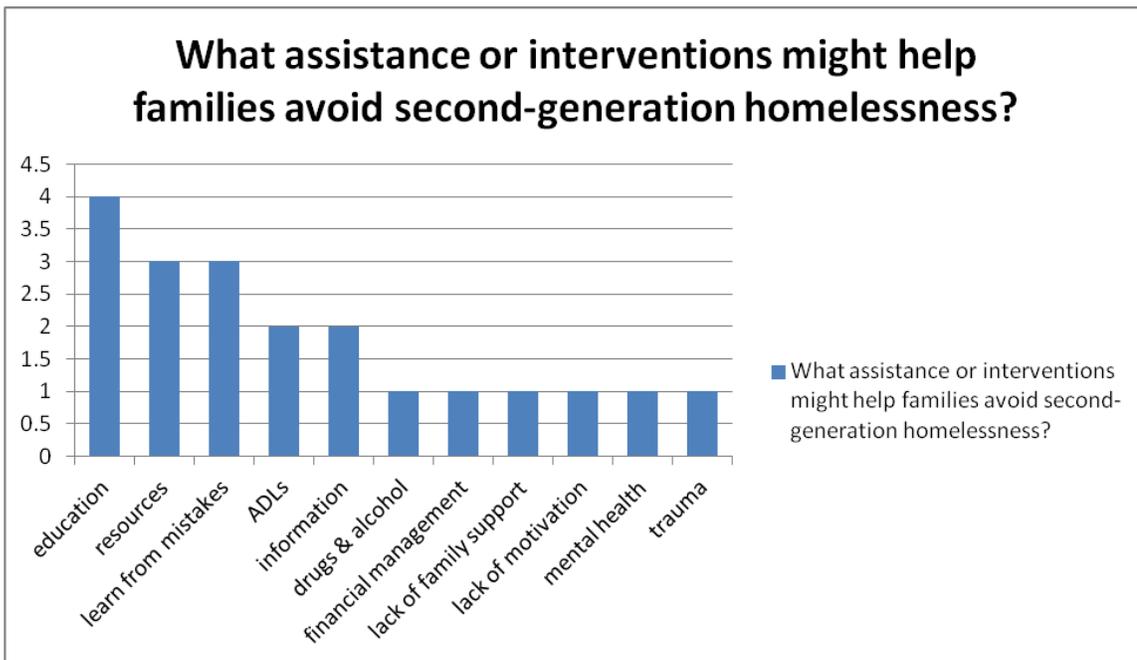*Figure 4. Reasons for Generational Homelessness*
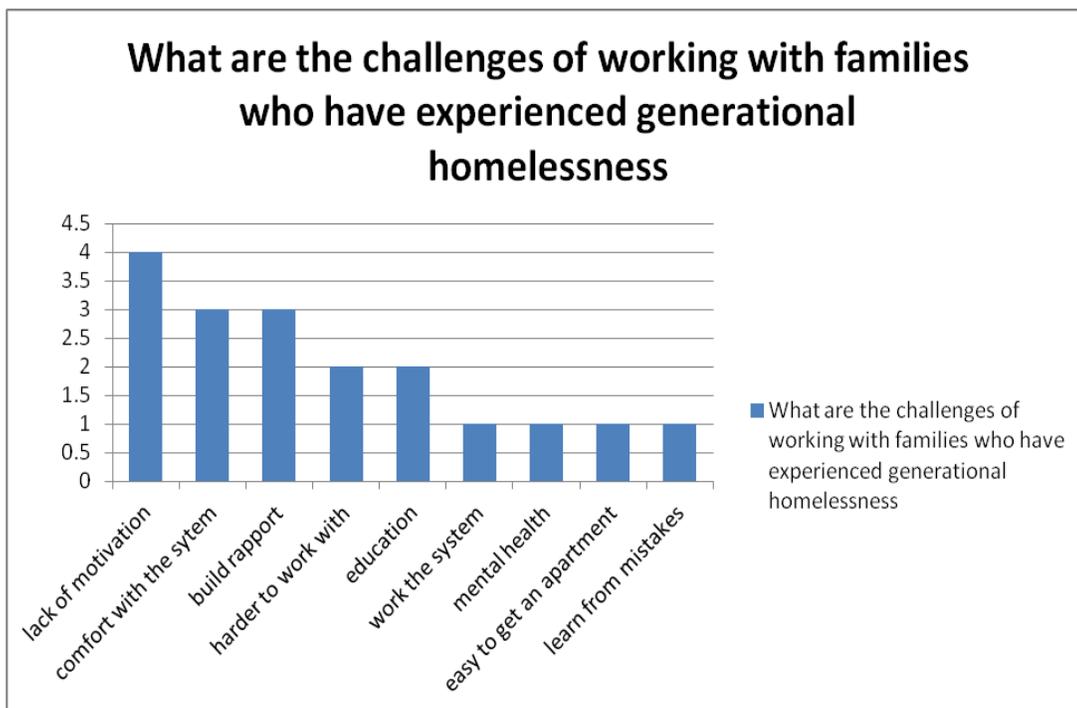

Figure 5: Assistance That Might Help
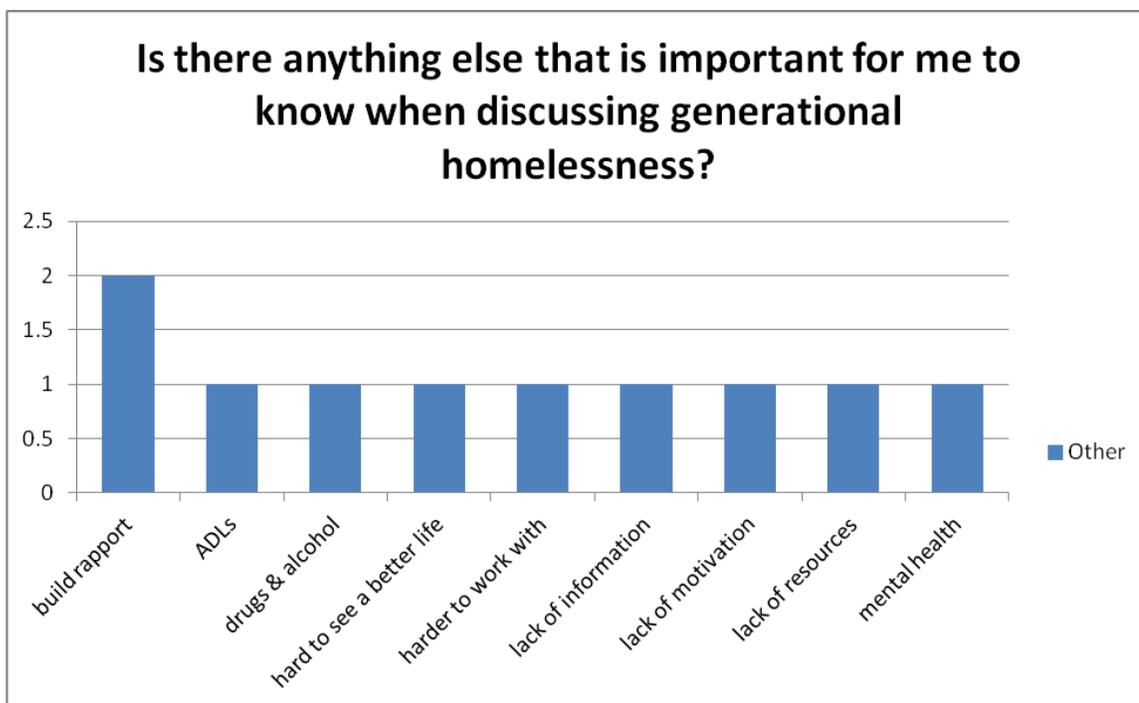
Figure 6: Challenges

Figure 7: Other Topics

My original research questions were:

1. What is homelessness as defined by second-generation homeless adults?

2. What is generational homelessness as defined by second-generation homeless adults?

3. How do second-generation homeless adults describe barriers to housing stability?

Because I only interviewed only one homeless adult, she defined homelessness as: "someone who can't provide room and board, affordable anyway, and struggling." She defined her own generational homelessness as follows, "We were homeless because of our parents' neglect. Them hanging out, not paying their bills. Now it's my generation. My issue is that I couldn't afford rent, living condition issues, and of course, housing court." She described her barriers to housing stability as a lack of affordable housing, a low housing voucher amount, lack of family assistance and support, lack of education, and a lack of living wage.

Summary

In this chapter, I reviewed the setting of the 11 interviews, the demographics of the interviewees, the method of data collection, the data analysis, evidence of trustworthiness, and the results of the study. I sorted the data by theme and subtheme and I provided graphs to help explain the data. An additional graph detailed the themes by interview question. The themes included lack of information and resources, generational homelessness is passed down and people should learn from their parents' mistakes, comfort in the homeless shelter system, money, parental abuse and neglect, the role of the case manager, taking advantage of the shelter system, and mental health. The other

topics that were discussed on multiple occasions but did not fit into larger categories are: education, drugs and alcohol, lack of family assistance, and activities of daily living (ADLs). The sub-themes included lack of resources, lack of information (lack of information & lack of resources), homelessness being passed down, learning from parental mistakes (passed down & learn from mistakes), comfort with the shelter system, lack of motivation, harder to see a better life, mentality (comfort in the shelter system), affordable housing, living wage, lack of funds, and financial management (money), parental neglect and child welfare (parental abuse), harder to work with and the importance of building a rapport (role of the case manager), working the system, easy to get an apartment (taking advantage of the shelter system), and mental health and trauma (mental health). I discussed credibility, transferability, dependability, and confirmability. I presented the results with participant quotes. I answered the research questions by using quotes from the one homeless interviewee.

Chapter 5: Summary, Conclusions, and Recommendations

Introduction

This chapter will review the purpose of the study, interpret the findings of the study, discuss the limitations of the study, make recommendations, and discuss the implications of the study. This was a study to examine the topic of second-generation homelessness in New York City. I was inspired to conduct this study by my own experiences working in a homeless shelter in New York City and my observations of families coming in who had experienced generational homelessness. Staff distributed 1,380 flyers but due to a lack of responses, I only conducted one interview with a homeless individual. I then changed the target population to case managers at Tier II homeless shelters to examine their views and opinions on generational homelessness.

Interpretation of the Findings

The findings of this study mainly reflect what has already been reviewed in the existing literature. As Sandy (2014) pointed out, researchers must look at both the structural and personal reasons for homelessness. The structural causes of homelessness that were found in this study include a lack of affordable housing in New York City, lack of living wages, and low voucher amounts, as described by the one homeless participant. Byrne, Munley, Fargo, Montgomery, and Culhane (2013) identified affordable housing and rent level as key structural causes of homelessness. Four case managers echoed this information and discussed the importance of affordable housing and a current lack of affordable housing during their interviews. As participant 11 stated,

> If they live in New York City, the housing prices are so expensive and sometimes they have no income to face the bills and higher rent, so they can't afford to get an apartment. So this can be one of the issues that may make them become homeless.

Israel, Toro, and Ouellette (2010) discussed that people who experienced an economic boom were less likely to be homeless. Three case managers also cited lack of living wage as a barrier to housing stability. In their review of 25 years of research of child and family homelessness, Grant, Grady, Goldsmith, Shapiro, and Redlener (2013) found that evictions were a key reason for homelessness across the decades and eviction was the main reason for homelessness of Participant 1.

Participants discussed personal reasons for homelessness, including lack of education, lack of financial management skills, and lack of ADLs. Some participants tied a lack of education to not being able to afford housing. Participant 8 said, "[The clients] lack education and are unable to secure a decent job." Participant 3 spoke about the importance of teaching clients appropriate skills to obtain an apartment.

> We start them at Step A and walk them through, because you take for granted what people might not know. And just making them comfortable, because...they don't feel comfortable going to speak to an apartment or speaking to an employer so they don't have the self-confidence to do that.

Participants identified other personal reasons, including parental neglect, drug and alcohol abuse, and mental health and trauma. Williams and Hall (2009) and Goodman, Saxe, and Harvey (1991), researched the traumatic effects of homelessness and the

resulting evidence of PTSD in homeless adults. Donlon, Lake, Pope, Shaw, & Haskett (2014) discussed the importance of mental health treatment for homeless children. Case managers that were interviewed in this study pointed out that mental health treatment of homeless children could possibly assist families with avoiding second-generation homelessness. Education, financial management, and ADLs were not specifically discussed in the literature that I reviewed for this study.

I used trauma theory to undergird this study. Two of the interviewees specifically mentioned trauma in their interviews. Interviewees also discussed additional causes of trauma, including parental neglect, involvement in the child welfare system, eviction, drugs, and alcohol. Furthermore, participants also discussed the effects of family trauma, such as learned helplessness in the form of the "mentality" of generational homelessness, and comfort in the shelter system. In addition, several case managers discussed the importance of building rapport with the clients and working harder with families who are experiencing generational homelessness; this can help clients overcome the trauma of generational homelessness. As participant 11 summarized,

> For me, not knowing from the beginning where they're coming from might be an issue. So I need to listen to where they are coming from and how they became homeless...For me it's more about knowing where they came from so I can dig and find out how I can help them better.

Limitations of the Study

The main limitation of this study was that I was only able to interview one person who had experienced generational homelessness. Interviewing more homeless families

would have given me a broader understanding generational homelessness from the perspective of homeless individuals. I had to change the target population to case managers due to a lack of response from homeless families. Once the population changed I would have liked to interview case managers from several Tier II homeless shelters, but case managers responded from only two sites. Case managers at different sites might have had different experiences, or, if they had similar experiences, they might have provided more insight into generational homelessness.

Another limitation was time. The study took place from February 2017-June 2017. Given more time, I may have been able to interview more homeless families instead of case managers.

<div align="center">**Recommendations**</div>

There are several recommendations for further research. The first recommendation is that I still believe there is a gap in the research regarding discussing second-generational homelessness with families who have actually experienced it. Perhaps other researchers have tried and had the same results and lack of results that I did. I believe researchers should continue reaching out to this population to obtain their views on homelessness and second-generation homelessness. One way to do this would be to expand the timeframe of the study to allow families more time to respond. Larger incentives may also help recruit participants. Involving case managers in the recruitment process could also increase the number of participants. Another way would be to conduct a long-term study over a period of decades to see how many children return to the shelter once they have become adults.

Another recommendation is to further explore the topics that came up in my interviews that I did not previously see in the research, specifically education and generational homelessness, financial management and generational homelessness, and ADLs and homelessness. Studying these topics could provide ideas for interventions or programs that could assist clients with continuing their education, increase their financial knowledge, or improve their daily living skills.

One more recommendation would be to interview agency management or DHS and HRA employees to explore their thoughts on second-generation homelessness and what may be done to address the problem.

The final recommendation is to explore the resources and information that are available to homeless families and how they are distributed. Several interviewees discussed a lack of resources and information. New York City has a vast network of assistance available to homeless families, so perhaps the information could or should be disseminated in a different way.

Implications

This study can assist case managers who are working with families who have experienced generational homelessness. They can heed the words of their colleagues and dig into the family's history to see if they have been in the shelter before or if they grew up in the shelter system. They should be aware that these families may be harder to work with, but should also give the "105%" that was mentioned by one interviewee. Staff can increase their engagement skills in order to build rapport with clients, make sure they are

appropriately empathetic, and work to really hear what their clients are saying and what their needs are.

The New York City Department of Homeless Service (DHS) and Human Resources Administration (HRA) can examine how information and resources are being disseminated. Perhaps a change is needed, or perhaps the current plan just needs to be tweaked to ensure that information is going out to as many people as possible. Perhaps DHS and/or HRA can do their own study on the efficacy of their information and advertising to see what is working and what is not.

New York City should continue to expand affordable housing options for families and should examine if current voucher amounts are appropriate based on family size. If one client is having difficulty finding an apartment of the right size for her voucher amount, then perhaps other families are having the same problem.

Other researchers should be aware that interviewing second-generation homeless adults might be difficult. Perhaps flyers in client mailboxes are not the best way to find participants for studies. One idea might be to involve case managers or other shelter staff in the recruitment process. Another possibility may be to use the DHS client management system, CARES, to find potential participants, with DHS and HRA permission. This is still an important population for further research and researchers should be creative in their recruitment methods.

Finally, I was reminded that there are some incredibly intelligent people working in Tier II homeless shelters. Managers and administrators should use the knowledge and experience of shelter staff when designing programs and interventions for clients.

Conclusion

Second-generation homeless families exist in New York City and there may be ways to help families avoid generational homelessness. These interventions could include concrete assistance, such as an increased number of affordable housing units, larger voucher amounts, or an increase in minimum wage to meet the standard of living. New York City has already started a plan to build 200,000 affordable housing units in the next 10 years. To date, 62,506 units have already received financing (New York City, A Five Borough, 10 Year Plan, 2017). New York City also has plan to steadily increase minimum wage over the next three years (New York City Department of Labor, 2017). These interventions could also include more in-depth services for homeless families, including trauma screening and mental health services for both the adults and the children. Agencies should train case managers on how to identify families experiencing generational homelessness and what services they may qualify for. However, the most important takeaway of this study is that researchers still need to speak to the families themselves, hear what they have to say, and develop additional interventions based on feedback from the families.

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Appendix A

Interview Transcripts

1. DAJ: **Basically, what I'm looking at, I'm doing a study on people who were homeless as kids and grew up and are homeless again. I kind of want to see what happened in between and my end goal is to ideally come up with ways to prevent this from happening again.**

How old are you? 38

You have two kids? No, I have six

Are all six here with you? No, I had three and now I have two.

What would you consider your race or ethnicity? Black

How would you define homelessness? Someone who can't provide room and board, affordable anyway and struggling.

How would you define generational homelessness? From my experience? We were homeless cause of our parents' neglect. Them hanging out, not paying their bills, now it's my generation. My issue is current afford rent, living condition issues, and of course, housing court.

So you were evicted? Yes

What do you think, what assistance or interventions, or anything, might have helped you avoid becoming homeless again? Um, from my experience, I had went to this program called POTS. They were located on Webster. They were supposed to help me with my rent, which was a low amount, about $2000 at the time. By the time they got paperwork, documents, me having to go around getting them paperwork, my rent became more higher, so the delay is what added to the max of what they could help with. I think if they are able to take care of eth problem fast it could take care of it. Faster action, I guess. Cause it was wasn't even that serious.

So the next question is how did you become homeless as a child. You mentioned your parents were hanging out. Drinking, drugging, yeah. Neglect. BCW at that time.

So just for the recording, BCW is Bureau of Child Welfare. Outside of New York, they're not going to know what BCW is. Yeah, the new ACS.

Question number five is how did you become homeless as an adult, which you already said. When were you evicted, were there any alternatives for you at that

time? Could you have gone with friends or family for help, or you felt this was it? No, this was the only option. People say they're there to help, but when stuff hits the fan, you're on your own. But I basically don't have any family left in New York that could assist me anyway. Like an option was, I came from Florida, was returning to Florida, and I left Florida for the same reason. And domestic violence and all that extra stuff, no room, so why would I go back to that environment?

When you were a kid, were there any alternatives for you? If you could remember, because you might not have been aware of any. No, I remember foster care that's it, being placed in foster care. We were taken away from our parents and put in foster care.

And, how old were you if you remember? I was five.
So there was no family you could have gone with? It was straight into the system? Yeah, St. Christopher Ottilie. I remember all of that like it is yesterday.

It's amazing how that stuff sticks with you. Yeah, the traumatic stuff I remember, but it's like I don't remember.

Do you have anything else you think of that you think is important for me to know about generational homelessness or being homeless as a kid? Well, um, it starts with the economy. The economy is rough. Education. My personal, I don't have a high school diploma because I started having children you so I preferred to work to support my children. But yeah, economy wise is bad. Housing period is bad, like if you don't have a good life, you're not going to be all right. Growing up struggling, you're basically going to stay struggling. That's how I see if anyway. There's no light at the end of the tunnel. I just make it day by day, literally check to check.

Do you have any questions for me? Will this help while we're in the shelter?

Honestly, I don't know. Like better assistance?

My goal is when I get the full report; I'm going to submit it to the city and my school. Like now, I have a program, a voucher, I've been here 4 years and I can't find nothing and I'm not going to just take another apartment just to end up back in the shelter. When I came from Florida, they put me in a slum apartment for the money and now I'm back here.

So you had an Advantage Voucher? Yes, I had a child advantage voucher. By the time I got my apartment, it was only good for 2 months. And after that, it was month-by-month payment. I was at Prospect Family Home at that time.

Yeah, I mean, realistically, I would like to say yes, but knowing the city, I don't know how fast they can do things. I don't want to make any promises I can't keep. My voucher is for 2-3 bedrooms, $1515 and I've been looking on Craigslist, supportive

housing, its $2000 and up. And then before that the child advantage was $1050. You couldn't find nothing for those amounts. The prices go up the vouchers should go up.

2. In your definition, how would you define homelessness? I would define it as without the means to provide from a family standpoint, because I work in a family shelter, homelessness means that you're looking for help and you're willing to be helped in order to get back on your feet and move to the next step of permanent housing.

How would you define generational homelessness? That would be a child born in the shelter, and then 20 years later, you go into CARES and now they're back in the shelter. Meaning that, and it's kind of odd, because being homeless is not hereditary, but homeless is a state of mind also, so it is passed down when you see generation after generation being in the shelter system.

Have you worked with families who have experienced generational homelessness? Yes, I have had clients who have come to me as adults and were born in the shelter system or lived in the shelter system when they were kids and you usually find that those clients are the more difficult ones to work with sometimes.

What makes you say that? It's almost like, since they're in the system and they're practically born into the system that those are the clients that it's harder for them to see the bigger picture that this isn't the final step. There's more and you would have to want more, and it's hard for them to want more, yearn for more, when this is all they know because this is where they were as children and this is where they are as young adults.

In your opinion, what assistance or interventions might help families avoid second-generation homelessness? I would say that, starting it from the beginning. When a client comes into the shelter, with a child, you also maybe something that more one-on-one with the child also. Like how you service the parent, service the child also. let him or her know that this isn't what life is supposed to be and you can always strive for more and tell them that just because this is a hiccup, as of right now, it doesn't mean you have to go through this necessarily as an adult and to learn from the mistakes that like, almost like a family intervention. The mother or father can teach the children about the mistakes they made to make sure the child doesn't go through the same thing. Also, there should be a lot of servicing the child too; to make sure the child is not being traumatized by this ordeal that they are going through and to make sure.

In your opinion, why do you think some families experience generational homelessness? I know you said it's not hereditary but they see it. Right, they see it, and sometimes there's substance abuse going on in the family, if and just, not I guess, if the client is raising a child and is not raising them to the best of their ability and is not doing all the parenting duties then it's a greater chance for the client, for the child to end up in the same situation as the parent. You should teach the child to learn from your mistakes, not to repeat your mistakes. And that's what I feel adds to generational homelessness.

What are the challenges, if any, of working with families who have experienced generational homelessness? **You said sometimes they are the hardest clients**. Sometimes they are the more difficult families because the shelter is all they know. My job as a case manager is to pretty much get you housing ready, motivated to get your own apartment, and when, sometimes, and I'm not saying all the time, the generational ones, it's almost like they are trying to work the system, not leave the system, and those are the ones that are difficult to work with. Sometimes people are just tired of being in the system; they were in the system when they were younger and now they're 20, 25 and in the shelter again but for the most part, the generational homelessness families are more difficult because it's almost like this is what they want to do and you have to snap them out of it. There's more out there, this is not just it. And also, in the generational homelessness, I see more mental health issues than with the other families that are coming into the shelter for the first time because of an accident or not paying the rent or a fire, and they need to come into the shelter. Those clients are easier to work with and you don't see that much mental health. But with the generational homelessness I see more clients in therapy and maybe that's because, they were born in the shelter system or grew up in the shelter system. But that would be another setback to getting them permanent housing.

Is there anything you would like to add that I didn't include already? maybe generational homelessness when you see these clients that were in the shelter when they were five and now they're 20 in the shelter with their own kids, from my experience, they might need more extensive one-on-one care with their case manager and the housing specialist than you have with a regular family that's working and just had an unfortunate event, might have lost their job, those clients seem to almost motivate themselves, where the generational homelessness you have to go the extra mile to get them motivated, go the extra mile to make sure they're doing what they need to do so that in 6-8 months they'll be able to move out on their own and see a brighter future because if this is what you are born into and then you come back in when you're 20, its hard for you to see that there's a brighter future, you're just going to think this is it, there is no future. I think that what case managers should know, when they look at the CARES history, the shelter history, they should take heed of that - oh, this client was born in the shelter and now they're back in the shelter. So, maybe I should, maybe I need to work a little harder. Instead of giving 100%, I should give 105% to this client to get them housing ready, to get them motivated, to get them to be independent individuals.

3. How would you define homelessness? How would I define homelessness, just loosely, not having a comfortable place to stay where you have your resources you need to do what you need to do every day.

How would you define generational homelessness? to me it's start with, I mean literally, its having family or the people who brought you up, they dealt with homelessness, so certain things you do around homelessness, so maybe it's a mentality, maybe its learning how to save money, all these type of things, lessons you might learn from your family or people who bring you up, you're learning but your learning them in a homeless situation, in a homeless shelter, so you're learning those things. When we see it here, is when people are in the shelter system, when they age out, when they become 18, a lot of times we see that the things they've learned in the system, they know how to take advantage of the system, they didn't learn the things to have an apartment, pay rent, those type of things. SO it trickles down from parent to child and so on.

Have you worked with families who have experienced generational homelessness? Yes.

In your opinion, what assistance or interventions might help families avoid second-generation homelessness? That we have in place?

Anything. If it already exists. I'm sure stuff already exists. For me, education is the biggest thing. It's like the saying, if you knew better, you'd do better. Just knowing, you know, how to apply certain skills, and being able to do that, without, you know, like they have supportive housing. So maybe being able to apply certain skills without being out on your own naked. I think that helps a lot. Education. Like we have clients who don't know how to write checks, so just teaching them skills and showing them how to apply those skills and even where those skills should be applied. Step A, staring them from letter A and walking them through, because you take for granted what people might not know. And just making them comfortable, because you know self-esteem too, they don't feel comfortable going to speak to an apartment or speaking to an employer so they don't have the self-confidence to do that.

In your opinion, why do you think some families experience generational homelessness? You kind of covered some of this, they grew up in the system, they aged out when they hit 18, there's some basic skills they don't have, like writing a check, finding an apartment, applying for benefits, anything else that you didn't mention yet? You also said some learn how to game the system or use the system. That definitely part of it. Just a comfortability with the system. This is what I Know, so I mean, it's with anything. If you grow up in a family and there's a bunch of lawyers, you might not do that, but you're going to be comfortable in that setting. So like here,

families grow up and they know how to collect these checks, that's what you see all day, that's what you're going to do.

What are the challenges, if any, of working with families who have experienced generational homelessness?   That's the ultimate challenge, right there, that's like breaking someone out of what they've grown to know. Like anybody you see, they have this thing, where you see people watch their parents, we want you guys to do better, so that's always going to be a struggle.

Is there anything you would like to add that I didn't include already? To the general person, I would say, it's not the person's fault; there are a lot of factors that go into it. You never know what their family situation was beforehand, you don't know if they dealt with drugs or alcohol, if they had a great upbringing, if they were taught certain skills. Skills are important, resources are important; sometimes you can only go as far as the resources you were provided with. For me, I was provided with certain resources. My mom was an educator, so I was provided with certain things. Like I had a better chance of going to college and doing the things, I did than someone else.

4. How would you define homelessness? A person that has no place to live, a person that has no financial stability in order to find somewhere to live. Sometimes it's caused by someone being lazy and not being able to function in a working environment. A person could be so smart and just lose hope and light. They just become homeless.

How would you define generational homelessness? Could you elaborate on that?

So the way I define it, is if someone was homeless as a kid, and grew up, and now they're back in the shelter with their own kids. So, it's basically self-explanatory on that part. They lived their life being homeless and their parents were probably able to find assistance with moving into permanent housing, so they saw that they could become homeless, go into the shelter, and get an apartment. I had a client like that.

Have you worked with families who have experienced generational homelessness? Yes.

In your opinion, what assistance or interventions might help families avoid second-generation homelessness? **If any.** A child who grew up in the shelter, or was raised in the shelter, and noticed that they were given the opportunity of permanent housing because they were sheltered, they could avoid that by looking at all the struggles their parents went through, all the stress they went through, and figuring out how they went, and they would want something better for themselves. In order for that to happen, personally, they'll go to school and go away to college instead of staying in the city. Meaning, if they stay in the city or close to home, they'll just go away to college and come back home. Going away for college is a lot better because now they're by themselves and they can actually feel and understand a way of living and knowing how to overcome the struggles in a person's life, so when they get out they're actually in a better state of mind.

In your opinion, why do you think some families experience generational homelessness? you basically already said, they learned from watching their parents, it can be an easy way to get an apartment, or it can seem to be an easy way to get an apartment, is there anything else that you haven't said yet? Not really, because basically that's what they see, they wouldn't want more for themselves, they are just comforted that their parents were helped and they received permanent housing through the shelter and they saw it was easy for them, but in the long run it was stressful. Because I've seen people here stressed and depressed and catching anxiety because of being here long.

What are the challenges, if any, of working with families who have experienced generational homelessness? The challenge? What challenges me is trying to get through to them. Since they already know how the system works, they think that they know more than you and they wouldn't want to listen to you but once you grasp them

then they'll start listening to, which in one particular moment I was able to grasp one. I told him, this person is going to school, I told him, I understand you're in the shelter and you think you know what you're going to go through since you've already been through it but now that you're in school and trying to better yourself, I counseled him that once you're done with that you won't need to be back in here again and you'll be able to transfer that to your next child and your next child will follow that step instead of the shelter step; they'll follow the school step. That will stop the generational homelessness.

5. How would you define homelessness? How would you define generational homelessness? I define homelessness as any individual or family who literally has nowhere to go, not a couch to sleep on, no roof over their head, basically.

Have you worked with families who have experienced generational homelessness? Generational homelessness I believe is families who, there's an adult and a child, and the child grows up to have her own children or child, and they're in the shelter as well. And on and on and on.

Have you worked with families who have experienced generational homelessness? Definitely. I think in the last year or so I've seen more so families who are in generational homelessness from being here about two and a half, three years ago, I've seen a lot of changes in the population itself in the homeless shelters. Before it seemed like older adults and now it's a lot more younger adults with families and you can see in the system when you compare the assessment and the intake with them and their origin date is very close to their date of birth so it shows that they were here once when they were infants or babies with their parents and now here they are in the future with their children in the shelter as well.

In your opinion, what assistance or interventions might help families avoid second-generation homelessness? **If any.**   I think it is really information. I think that if the information is from the parents. If the parents were in the shelter with their children if they let them know, you know, this might not be the route you want to take, try to do things a little different than I did. It might not be realistic but try to do things different than I did when I was a younger adult, just so that you don't fall into the same system, I guess, for lack of a better word. I think it's just a lack of information.

In your opinion, why do you think some families experience generational homelessness? I think aside from what I said before, it can be that some families are telling their kids, this is the easy way. You can go into the shelter and be homeless and get an apartment without having to really do too much because I think in the shelter system, it's not, before, back in the days, individuals were afraid of being in the shelter. They didn't want to be in the shelter, they didn't want to follow the rules and stuff like that, and now it's just like, oh, I only have to worry about curfew then no problem, as long as I don't have to pay bills, I don't need to worry about anything else than curfew and going to a couple of meetings. That's not too hard; I can do that for a while until I get my own apartment. But, I also think that it's kind of like a cycle that doesn't end. I don't know if people know how to end the cycle. Those people who for those children who do experience the generational homelessness, the homeless shelter is all they know, so it's a safe place for some individuals. They kind of don't know how to live on their own because they always had the support of a case management team or a social work team, that they feel comfortable having those people around them and they're scared to kind of be on their own.

What are the challenges, if any, of working with families who have experienced generational homelessness?   I think one of the challenges I've experienced with it is that they come in with a mindset of already knowing how everything works. Already having this idea that I should come in, in two weeks, I should be matched to an apartment and in a month, I should be gone. And it kind of to break that thought process down it's difficult to get them to understand that things may have worked like that when your mom or dad or whoever was in shelter many moons ago but it's a lot different now. I also come into challenges with individuals who have been in shelter a really long time; they have this kind of preconceived notion of the workers, of how they're going to treat you. What they're going to do with your information, so it's kind of hard to gain a rapport with certain clients because they come in already on defense, which is kind of understandable because, you know, it's a vulnerable situation to be in, so I understand why you would be on defense with your personal information but it's kind of difficult sometimes to get them to see things from a different light.

6. How would you define homelessness? Basically a person that doesn't have a room. Some people live, maybe you lose your job, or there's an increase in rent, or a tragedy happens and your house burns down. And you're basically just out in the streets.

How would you define generational homelessness? Basically homelessness that just continues.

Have you worked with families who have experienced generational homelessness? I probably have one, because the mother was actually here and she eventually moved out and then her daughter ended up here as well, but she moved out too, which is good.

In your opinion, what assistance or interventions might help families avoid second-generation homelessness? **If any.** I think education is the key. That's really important.

And what makes you say education? I think some people don't know how to handle their money, especially here, a lot of the clients we have, the problem is that they're, the major barrier for them to get a home is their credit. Their credit is usually terrible, it's usually very low, a lot of items they haven't paid off, so like we sent a couple of people to this place called financial empowerment and they're actually teaching them how to manage their money, which is very helpful.
Financial management; that can really help. I don't think they do enough of that. They should probably do that in high school, or before that. I'm thinking, when I was in the 4th grade, like, my teacher showed us how to write checks and how to balance a checkbook.

I learned that in Girl Scouts. I learned how to balance a checkbook in Girl Scouts. In your opinion, why do you think some families experience generational homelessness? I know you were talking about a lack of financial education, basically. Yeah. **Anything else, or you think that's the biggest? It's ok if that's the biggest.** That's one of them. Recently, the increase of rent; that's another factor. I have a lot of clients who were priced out of their homes. Because when I first got here, it was usually a lot of young teenage mothers, like 19-20, but now, they're usually in their 30's or 40's and they're like, "oh, I got evicted, I couldn't afford the rent" so I see a lot of that.

What are the challenges, if any, of working with families who have experienced generational homelessness? Keeping the motivation I think, because some of them feel they can't do it and this is what they're used to, this is their environment, so it's familiar. They're very comfortable here, so it's very difficult to get them motivated. I think I heard this one story where there was a client, she was born in the homeless shelter, she was probably there until her 20's I think, and every time they were trying to get her out; she would find a job, but some way, somehow, she would kind of self-sabotage. They asked her why these things were happening and she said, "I'm just scared. I'm used to the system, I've never been on my own." and she's never seen anyone do it because her

parents were in the shelter also. I think that's the toughest part of it; trying to instill confidence and motivate them.

Is there anything you would like to add that I didn't include already? I don't think so. Sometimes you need a good role model as well.

7. How would you define homelessness? My definition of homelessness is basically when you don't have anywhere to go. I know a lot of people think homelessness is when you have nothing, but a lot of people go through a lot, they get kicked out, or eviction, or a fire broke out, so I feel like homelessness is where you don't have anywhere to go or nowhere to stay.

How would you define generational homelessness? I would say, to me, generational homelessness would be something that's ongoing. When I think about generational, I Think about something that continues, like a cycle, so maybe, for example, if I was homeless, maybe my mom was homeless previously, or my great-grandmother was homeless, things like that. Something that's ongoing, a cycle, something that needs to be broken.

Have you worked with families who have experienced generational homelessness? Yes, I have.

In your opinion, what assistance or interventions might help families avoid second-generation homelessness? **If any.**   I feel like, if people do their research on it, or even have someone that they can talk to. I feel like a lot of people don't do the research, like for example, you see a lot of people on the train and they don't have nowhere to go, the ones that are legit, and are really homeless, not the ones who are fake and playing around. But a lot of people don't know that these single assessment sites for people who are with themselves, or like PATH, people don't know it exists for people to go to. I feel like if the resources are available or if someone to takes the time to go to the New York Public Library, something that's free, and asks, I feel like a lot of people are scared, so it's just a matter of asking. And the people who do have the information, giving as well. Oh, yeah, and New York just needs to find better options for people as well. It's just so crowded here, there's lots of abandoned buildings, places they had to tear down and make those things accessible as well, it's just overcrowded. That's just as sidebar.

In your opinion, why do you think some families experience generational homelessness? I feel like, I don't want to say all people, but some people experience generational homelessness because they probably don't have a helping hand. Maybe they don't have family or friends that can help, or maybe the person whose mom or father was homeless, don't know how to break that cycle or help them out. People today, if you're in the shelter now, a lot of people can tell a friend or tell someone who was going to go through that situation, they kind of prevent it by telling them other options. I think people just not taking to each other, that's one example. Because my aunt actually went into the shelter when she was having her third child, and at the time, we didn't have the space for her to stay, and she ended up going into the shelter, which was really nice, but she ended up moving back down south with her father's side of the family. It's like; a lot of people don't have that extra help. My grandma had to explain to her you can stay here for a few days but it's not going to work because of the children, and you have a baby, but you

have other options. You can go down south and stay with your family, having an open door. That's one thing I can think of.

What are the challenges, if any, of working with families who have experienced generational homelessness?   I think a challenge would be, if they feel like, I know a lot of people when they come into the shelter system, and they see someone like me or you, they automatically think we're better than them, or like we have a roof over our heads. I just think it's matter of putting them in a comfortable place and ensuring that you're there to help them. I know they probably feel, like my mom and dad or my cousin and uncle didn't help me, what makes you think that you can help me? You're not related to me. It's just a matter of making sure you have open ears and hear what those clients or individuals have to say and make them aware that you're there to help.

Is there anything you would like to add that I didn't include already? I think I said everything. Just making sure you have those referrals, and doing your own research. A lot of people get stuck in that space and they feel they can't be helped and then you have those people who really want to push and say they can't be in this situation.

8. **How would you define homelessness?** Pretty much a situation, circumstances, that arises, where a person is not able to maintain their bills.

How would you define generational homelessness? You see, in general, you have some people who don't want to be in the shelters. They would rather stay on the street, sleep on the street. For me it would have to be mental. The resources are there but for whatever reason they're choosing not to. Maybe they don't want to deal with the rules; some may feel a lot more safer on the street than actually living in the facility, because every shelter is different. Some people are not able to get into a family shelter or someplace comfortable instead of a single shelter, where you're constantly watching your back, watching your belongings.

Have you worked with families who have experienced where, maybe the parent was homeless and now the adult is homelessness with their own kid? Yes.

In your opinion, what assistance or interventions might help the new client avoid second-generation homelessness? **If any.** I would say better guidance. You know if you're growing up as a child and you see the guidance of your parents, that's what you're going to follow. And for some people, if that's all you know that's what you're going to go with. NYCHA for instance, you have parents that either leave or pass away and pass it on to their kids and you just see generation after generation, not trying to do better.

In your opinion, why do you think some families experience generational homelessness? You already talked about patterns and what you see growing up is what you're going to know, but is there anything else? Probably no motivation, lack of education. Unable to secure a decent job. Living beyond one's means, because you have people who'd rather get the latest sneakers or car before they pay their bills.

What are the challenges, if any, of working with families who have experienced generational homelessness? They're stuck in their ways. It can be hard sometimes to get them to see the other side. What's needed for you to move out of shelter so this doesn't happen again, where you're not in this situation again. Your kids would be able to experience having their own space and it won't be a cycle

Is there anything you would like to add that I didn't include already? It's like in the Tier II's we get a mixture of just anybody. Me personally, I don't really know how to do deal with mental illness. I'm not really giving that family the best services if I'm not familiar or not aware of what steps to take as far as handling the specific person that has mental illness. To me, better screenings I don't feel for the mental health person in a population where you may have people without mental health. At any given time, you don't know what they're going to do.

9. **How would you define homelessness?** Homelessness to me is you don't have a place to live, or limited resources. Just not having a stable place to live.

How would you define generational homelessness? Kind of like a repeated cycle. You know, this happens for generations, families, someone's mother or grandmother went through homelessness and it just keeps passing down. Now they're child is experiencing homelessness as well. Their child and their child and it just keeps passing down. A repeated cycle almost.

Have you worked with families who have experienced generational homelessness? Yes, of course.

In your opinion, what assistance or interventions might help the new client avoid second-generation homelessness? **If any.** I'll say pretty much knowledge to what kind of services are out there in the community. Sometimes families they just don't have the resources. Or I'll say they're used to poverty. They're used to being stuck in a certain area and there's nothing around, just drugs. Mental health too, as well. You know, so that's pretty much all they know. If you've been living around that and experiencing it for years and not getting any help or understanding what your family. What I've noticed is working with families like this, is sometimes the adults, the older parents; they don't see themselves with like a having an issue or having a mental health problem. They're kind of in denial. If the parents are like that then most likely if the child has some type of issue, this is a family thing of mental health, then most likely that's going to be passed down to the child, and if they have some kind of issue then they may be blind to it because the parent doesn't see a problem then the child is going to learn that certain behaviors are ok. When in fact, it might be a sickness the person is dealing with but they don't see it like that. And once again, it goes back to the person not having any support. Maybe they were raised without either parents, or I noticed a lot from looking back with the clients I dealt with, coming across, because I work and I see a lot of evaluations for certain clients, so when I look back at someone's childhood or history, a lot of them do have a mental health diagnosis. Maybe they experienced some type of trauma or maybe they didn't have parents or they weren't raised by parents. Maybe one parent or both parents were gone and they didn't have that full family bond or strength. I see that too as a big part of the issue. I think its key to have both parents around, first and foremost. Once you lose one parent, it's kind of tough already as is, being raised by a single mom or a single father. And I'm not saying it can't be done because I've come across and worked with single moms who are doing great but I notice that those families have a little more support in the family, whether its sisters, brothers, aunts in the family, friends. Those families that have less support or nobody else to lean on, then they're the ones that suffer the most.

In your opinion, why do you think some families experience generational homelessness? You've kind of already covered this, which a lot of people have

done. You already talked about if you grow up in poverty, that's what you're used to, they might have a mental health issue, maybe they're coming from a single parent or no parent household, lack of support, friends, so is there anything you didn't say yet that you think might cause generational homelessness? I think that's pretty much, in my experience that's the main cause. Of course, you have situations that just happened. You never know what's going to happen. We do have families that never experienced homelessness at all and something comes up, whether a fire or something like that, or just happen to be kicked out of an apartment they were sharing with someone else, but they're not used to it, this has never happened before. Which does happen.

What are the challenges, if any, of working with families who have experienced generational homelessness? It's a pattern, so I think they're kind of stuck in their ways, so you have to show them consistently. they're used to having no support or nobody to be there, so they assume, that's what it is, you're not there to help them or you don't care because they didn't have that growing up as a child, that's what they're used to. Most of the difficult clients, they're more close guarded. And I actually had success with working with some of the more difficult clients. With my success, I just think some of them want to be heard. Just listening and hearing or empathizing with the client in that situation where they are guarded leads to them opening up or feeling that they can trust you because they see that you're there to listen as opposed to telling them what to do.

Is there anything you would like to add that I didn't include already? Well, I think those are pretty much the basics. Nothing else pops up in my head right now.

10. **How would you define homelessness?** Homelessness to me is of course, not having the proper shelter to survive, but also not having the support or knowledge of proper shelter for an individual.

How would you define generational homelessness? That's like, I would call it like, you know how they say the circle of life? It's the circle of homelessness. Like if, my mom was homeless and we went to a homeless shelter and I grow up as an adult and I become homeless and I have a baby and she grows up to experience what I experienced. It's like a never-ending cycle sometimes for people.

Have you worked with families who have experienced generational homelessness? Yes

In your opinion, what assistance or interventions might help the new client avoid second-generation homelessness? **If any.** Really education, giving them the information. Cause sometimes a lot of people don't know about certain services that they can receive before homelessness is even an option. And just being very informative with your clients, just so that they know like they didn't have to become homeless in certain situations, they could have avoided becoming homeless and also teaching their kids. They have to share their knowledge and not letting them fend for themselves sometimes. Because I have witnessed that.

In your opinion, why do you think some families experience generational homelessness? Lately I've seen like their parents had them young and might have not known how to raise a child and they have kind of, I don't want to say lose them but don't have control over situations and they let their child fend for themselves and that's a cycle because when they have a baby they do the same to their child and that's a reason why a lot of this repeats itself. There's no like real guidance or structure, especially when it's a single parent home.

What are the challenges, if any, of working with families who have experienced generational homelessness? They are set in their mind. Their mind frame or their outlook on situations they can be very stubborn or they tend to listen to other homeless people, so like they feel like every situation is the same. So they'll go "well I heard this and I heard that" and it's like you kind of got to veer them from the he say she say stuff and having facts and showing them this is how you can do it and this is how it can be done. This is how you can prevent and stay out of the shelter system. So you have to kind of alter their perspective a little bit. Or just education. Just educating them.

Is there anything you would like to add that I didn't include already? I just feel like services should provide more information. And a lot of the times, they have or always were on public assistance and I feel like they don't inform them about certain things.

They just go in and out, as long as they have food stamps and get their cash but there's so much out there that they should be informing their clients.

11. How would you define homelessness? Homelessness is somebody who doesn't have anything ahead of his head, like no place to sleep overnight. And he might be on the street.

How would you define generational homelessness? I think some people whose father or mother was homeless so the children from those people might be homeless.

Have you worked with families who have experienced generational homelessness? I can say yes and no because I have some clients that I haven't dug into their past yet, so they might have been through this, but I don't have this information right now.

In your opinion, what assistance or interventions might help the new client avoid second-generation homelessness? **I know you're new, so what you've seen so far**. **If any.** Just to help them the best we can because the less homeless people we have then the less generational homeless people we have. So we can reduce the number of homeless people. If you provide parents the services now to get out of the shelter system and find permanent housing, they can avoid other people to be homeless.

In your opinion, why do you think some families experience generational homelessness? I think it depends on where they live. Like if they live in New York City, the housing prices are so expensive and sometimes they have no income to face the bills and higher rent, so they can't afford to get an apartment, so this can be one of the issues that may make them become homeless. And the second thing is having no support from any other family members. Some people just don't have anybody to help them and it could also be a lack of information. If you don't have anyone to help you and you know how to get the right information, you can go to that information and get something for yourself. I believe lack of information, low income, and **High rent?** Yes, high rent, especially in New York City, I don't know about other places. Even if you have a good salary sometimes, it's not enough.

What are the challenges, if any, of working with families who have experienced generational homelessness? **I know you're not sure if your clients have it yet, but hypothetically, what do you think some of the challenges are?** For me or for them? **Either**. For me, not knowing from the beginning where they're coming from might be an issue. So I need to listen to where they are coming from and how they became homeless then for the generations, I can say sometimes they don't really understand what's going on and they try to follow what the parent did and if the parent didn't give you a good example you can end up like them on the street. So it's a matter of who is your parent and what did they do in the past and how we can help you? This can be really challenging to people who only really see the parent in this type of situation. For me it's more about knowing where they came from so I can dig and find out how I can help them better.

Appendix B

Recruitment Email

Good afternoon,
I am currently working on my doctoral dissertation at Walden University. My topic is Second Generation Homelessness in New York City. I am looking to interview Tier II Case Managers about their experiences. The interview will take about 20 minutes and will occur at a location of your choice. The interviews are completely voluntary and are not related to your work performance or PPP. Choosing to participate or not to participate will not affect your work at.   If you have any questions or are interested in participating, please contact me at.

Thank you for your time and consideration.

Appendix C

Recruitment Flyer

ATTENTION ALL RESIDENTS!

Were you homeless as a child? If so, you may be eligible to participate in a research study on second-generation homelessness.

**If you are interested in participating or have any questions, please call
Deborah Johnson at**

All interviews will remain confidential

Participants will receive a $10 Target Gift Card
This study is part of a dissertation for Walden University