

California State University, San Bernardino

**CSUSB ScholarWorks**

---

Theses Digitization Project

John M. Pfau Library

---

1994

## **A constructivist study of the social and educational needs of homeless children**

Jo Ann Edith Becker

Follow this and additional works at: <https://scholarworks.lib.csusb.edu/etd-project>



Part of the [Social Work Commons](#)

---

### **Recommended Citation**

Becker, Jo Ann Edith, "A constructivist study of the social and educational needs of homeless children" (1994). *Theses Digitization Project*. 888.

<https://scholarworks.lib.csusb.edu/etd-project/888>

This Project is brought to you for free and open access by the John M. Pfau Library at CSUSB ScholarWorks. It has been accepted for inclusion in Theses Digitization Project by an authorized administrator of CSUSB ScholarWorks. For more information, please contact [scholarworks@csusb.edu](mailto:scholarworks@csusb.edu).

A CONSTRUCTIVIST STUDY OF THE SOCIAL AND  
EDUCATIONAL NEEDS OF HOMELESS CHILDREN

---

A Project  
Presented to the  
Faculty of  
California State University,  
San Bernardino

---

In Partial Fulfillment  
of the Requirements for the Degree  
Master of Social Work

---

by  
Jo Ann Edith Becker

June 1994

A CONSTRUCTIVIST STUDY OF THE SOCIAL AND  
EDUCATIONAL NEEDS OF HOMELESS CHILDREN


---

A Project  
Presented to the  
Faculty of  
California State University,  
San Bernardino


---

by  
Jo Ann Edith Becker  
June 1994

Approved by:

  
Teresa Morris  
Chair of Research Sequence

6/14/94  
Date

  
Teresa Morris  
Project Advisor

## ABSTRACT

This is the initial phase of an ongoing constructivist inquiry examining the social and educational needs of homeless children within the Coachella Valley. It has as its goal a better understanding of conditions faced by homeless children so that services might be strengthened in order to lessen or forestall future negative consequences.

In pursuing this goal, stakeholders representing varying perspectives regarding the needs of homeless children were interviewed and through the use of content analysis a consensus was reached. This consensus was in agreement with existing literature and held that much as in other areas of the country children within the Coachella Valley experience social and educational inconsistencies. It also found that efforts were under way to reduce these inconsistencies, but that much remained to be done. A second phase of this inquiry will further explore the needs of homeless children as well as provide an agenda for negotiating a strategy aimed at meeting those needs.

## TABLE OF CONTENTS

ABSTRACT.....	iii
LIST OF FIGURES.....	vii
INTRODUCTION.....	1
Focus of Inquiry.....	1
Statement of Purpose.....	4
METHOD.....	6
Research Paradigm.....	6
Phases.....	7
Participants.....	8
Instrumentation.....	12
Data Collection.....	12
Quality Control.....	13
FINDINGS.....	15
Data Analysis.....	15
Beginning Constructions.....	16
Homeless Characteristics.....	17
Families.....	17
Children.....	18
Scope of Service Delivery System.....	19
Shelters.....	20
Health Care Services.....	21
School Districts.....	22
Department of Public Social Services.....	24

Convergent Themes.....	25
Consensus 1 - The Inconsistent Experience.....	25
Network.....	25
Shelters.....	26
Schools.....	28
Socialization.....	30
Health Care.....	31
Mental Health Services.....	31
Conclusions.....	32
Emerging Themes.....	32
Recommendations.....	35
Network.....	36
Expanding Services.....	36
Schools.....	36
DISCUSSION.....	37
Summary.....	37
Future Research.....	38
APPENDIX A - Informed Consent.....	40
APPENDIX B - Debriefing Statement.....	42
APPENDIX C - Interview Questions.....	43
APPENDIX D - Definition of Homeless.....	44
REFERENCES.....	45

## LIST OF FIGURES

Figure 1:

Initial Hermeneutic Dialectic Circle.....9

Figure 2:

Final Hermeneutic Dialectic Circle.....10

## INTRODUCTION

### Focus of Inquiry

In 1958 only 3% of the homeless population within the United States was female. In 1991 women and children comprised between one-third and two-fifths of all homeless individuals (Johnson, 1991, p. 22). Today, however, according to the U. S. Conference of Mayor's Task Force on Hunger and Homelessness families now rival single men in percentages of the homeless population with each group representing about 43% of the urban homeless (Shogren, 1993, December 22). Consequently, among the contemporary homeless, school aged children are the fastest growing segment with estimates by the U. S. Department of Education placing their numbers at 220,000 in 1989 (Molnar, Rath & Klein, 1990; Wright, 1989).

Among school aged homeless children many attend classes at a much lower rate than do children in the system as a whole. In research examining the rates of attendance for homeless children, a New York study looked at 6,433 homeless students, and found that not only did homeless children have higher rates of non-attendance, but that attendance rates dramatically decreased as grade level increased (Molnar, Rath & Klein, 1990). Additionally, this sporadic attendance was related to



poor academic outcomes such as repeating grades and below grade level performance (Hausman & Hammen, 1993; Whitman, Accardo & Sprankel, 1992, p. 120-122; Rafferty, 1991, p. 105-115). Furthermore, an adequate education is not all that suffers as a result of this truancy. The socialization skills that are gained as a result of school attendance along with screening processes designed to identify academic, health and emotional problems are missed as well. Consequently, developmental, language as well as cognitive delays all common to homeless children are frequently left undetected and, therefore, untreated (Hausman & Hammen, 1993; Whitman, Accardo & Sprankel, 1992, p. 120-122; Rafferty, 1991, p. 123; Rafferty, & Shinn, 1991; Bassuk, 1992, p. 260; Whitman, Accardo, Boyert & Kendagor, 1990).

Additional research on children impacted by homelessness has also consistently yielded evidence of behavioral and emotional problems at higher rates than are found amongst children with homes. Among the behavioral and emotional effects of homelessness, that may also impact the educational and social experience, are such behaviors as depression, anxiety, sleep disturbances, regression, short attention span and aggression. Furthermore, certain symptoms may also be masking developmental impairments not associated with homelessness, but nevertheless blamed on homelessness,

resulting in the loss of needed treatment and support or in the implementation of inappropriate treatment (Hausman & Hammen, 1993; Rafferty & Shinn, 1991; Rescorla, Parker & Stolley, 1991; Whitman et al., 1990).

Many of these deficits are the result of not only the transient nature of homelessness, but also as a result of conditions within shelters themselves. Research examining conditions within homeless shelters has revealed that chaos commonly found in shelters coupled with a lack of privacy, frequently makes it difficult for parents to discipline children, difficult for children to prepare for school and to complete homework as well as difficult for families to interact in healthy ways (Goodman, Saxe & Harvey, 1991; Johnson & Kreuger, 1989; Rescorla, Parker & Stolley, 1991). Similarly, parental separation which is common to homeless children has been shown to increase the likelihood of later homelessness, mental illness, criminal involvement as well as addictive behaviors (Goodman, Saxe & Harvey, 1991; Fischer & Breakey, 1991; Shinn, Knickman & Weitzman, 1991). And finally, homeless children, because of the transient nature of homelessness, suffer from frequent illnesses due to poor nutrition and inconsistent medical care (Burg, 1994; Whitman, Accardo & Sprankel, 1992; p. 121; Bassuk, 1992, p. 259).

( In summary, homelessness is a growing problem for the United States with more and more families being drawn into its ranks. Furthermore, many of the conditions faced by homeless children nationwide result in negative educational and social outcomes.) Much as in other areas of the country, the Coachella Valley is being effected by growing numbers of homeless families and little has been reported regarding the conditions faced by children within these families. Therefore, the environment experienced by homeless children within the Coachella Valley is to be the focus of this inquiry.

#### **Statement of Purpose**

The Coachella Valley is comprised of several desert resort cities located in the southern tip of California. It has an average population of approximately 253,853 people with an economic base dependent on agriculture and tourism. Income levels within the valley vary from the extreme poverty of migrant farm workers to those whose economic status exceeds the highest national level. Its ethnicity make-up is as follows: White 71.9%, Black 2.7%, Hispanic 25.4% and Other 25.4%.) Although once a retirement community, in the last decade the valley has experienced a demographic shift resulting in the growth of families. With this shift, coupled with economic hard times, has come a growth in homelessness.

Although exact figures are illusive, the homeless

population within the Coachella Valley appears to be on the rise. Estimates of the number of homeless families within the valley during 1993 were as high as 1000 with one shelter reporting a 110% increase in demand for shelter space when compared to 1992 (Miller, 1994, January 30). Furthermore, services do not appear to be keeping pace with this growth and may, in fact, resemble services found in other communities which have typically been inconsistent and inadequate and have often resulted in many negative outcomes for homeless children. As social workers in Coachella Valley agencies such as schools, child protective agencies, juvenile halls, homeless shelters, mental health agencies, and family service organizations we will, not only, be heavily impacted by children suffering from the above delays and poor socialization, but we will also be in a position to create programs that will lessen or even eliminate their impact.

( It is, therefore, the purpose of this research to explore the educational as well as social needs of homeless children within) the Coachella Valley. (And it is hoped that through a greater understanding of the needs of these children, existing services may be strengthened, or new services developed, which may forestall, or even eliminate, future negative consequences.)

## METHOD

### Research Paradigm

Homelessness, by its very definition, is an illusive problem. In many ways, to be homeless is to be invisible, as moving in and out of shelter, soup kitchen and motel room leaves individuals with no real connection to society as a whole. (Furthermore, services to the homeless vary widely from county to county, city to city, and even shelter to shelter, leaving the homeless in a constant state of crisis.) Additionally, individuals are homeless for a variety of reasons which may be unique to that individual or to that shelter or geographic locale. And finally, individuals are frequently homeless in an intermittent fashion as they obtain temporary housing or part-time employment (Whitman et al., 1990; Wright, 1989).

(Consequently, the intermittent and illusive nature of homelessness makes it difficult to study, particularly, through the use of traditional paradigms which expect findings to be predictive and fully generalizable to similar populations. (Furthermore, noting that existing services to homeless populations are typically inadequate and in need of improvement), a research paradigm that not only exists to study a particular problem, but also to produce a means of solving that problem is required. Therefore, what has

been chosen for this inquiry is a constructivist approach which has as its goal the accurate understanding, as well as successful resolution, of a particular problem, in a particular place and time, as perceived by those experiencing it. Contrary to traditional approaches, the constructivist paradigm does not seek to prove or disprove objective realities imposed by distant researchers, but instead seeks to initiate change through a consensus of subjective realities jointly constructed by study participants.

### Phases

In reaching a consensus, successive phases of research are conducted which consist of rounds of stakeholder interviews with each round further refining previous constructions. Stakeholders are those agencies or individuals who have a stake in the area of interest being studied. In conducting the present study, only the initial phase of the constructivist paradigm was addressed which included a single round of interviews. A second phase of this study, to be conducted during the 1994-95 academic year, will include a second round of interviews as well as a negotiation of final constructions aimed at the resolution of any identified problems. Consequently, only general questions, exploring major themes, were focused on during this initial phase and are therefore, included in the

following discussion.

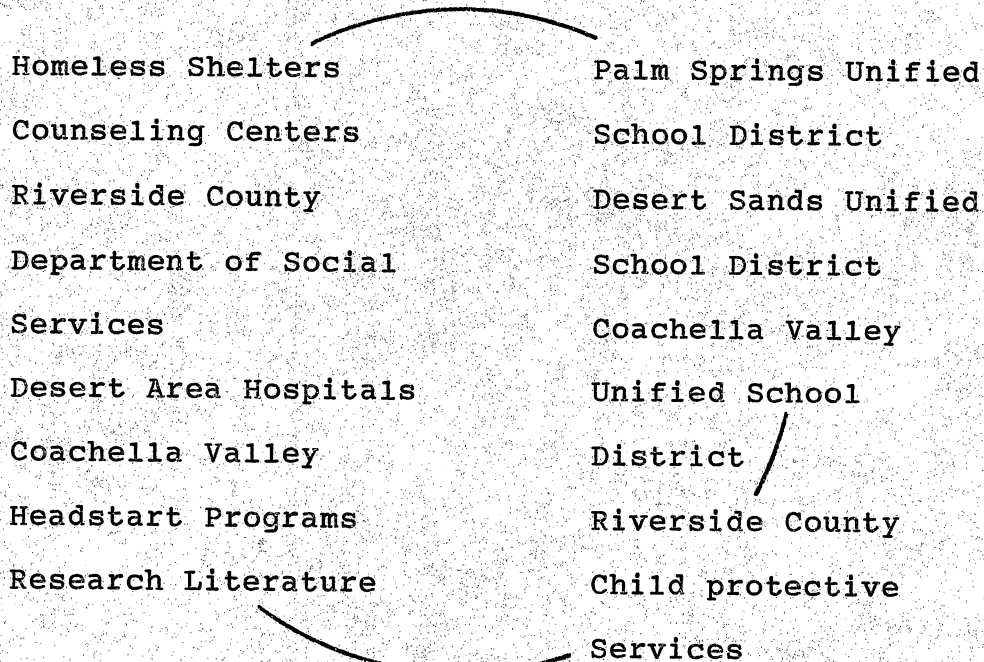
### **Participants**

In selecting participants for this study opportunistic sampling was utilized in a purposive manner. Purposive opportunistic sampling exists when participants are chosen for their purpose served within the area of research and when the researcher is free to take advantage of sampling opportunities as they arise. In so doing, a hermeneutic dialectic circle was formed which represented stakeholders in the delivery of services to homeless children within the Coachella Valley. A hermeneutic dialectic circle is a group of stakeholders representing various orientations to a research problem. It is termed hermeneutic because of its interpretive character and is considered to be dialectic because it seeks a synthesis of divergent views held by participants.

In proposing this study a preliminary hermeneutic dialectic circle included ten participant groups. Participants in this preliminary circle are listed in Figure 1.

**Figure 1**

**Initial Hermeneutic Dialectic Circle**



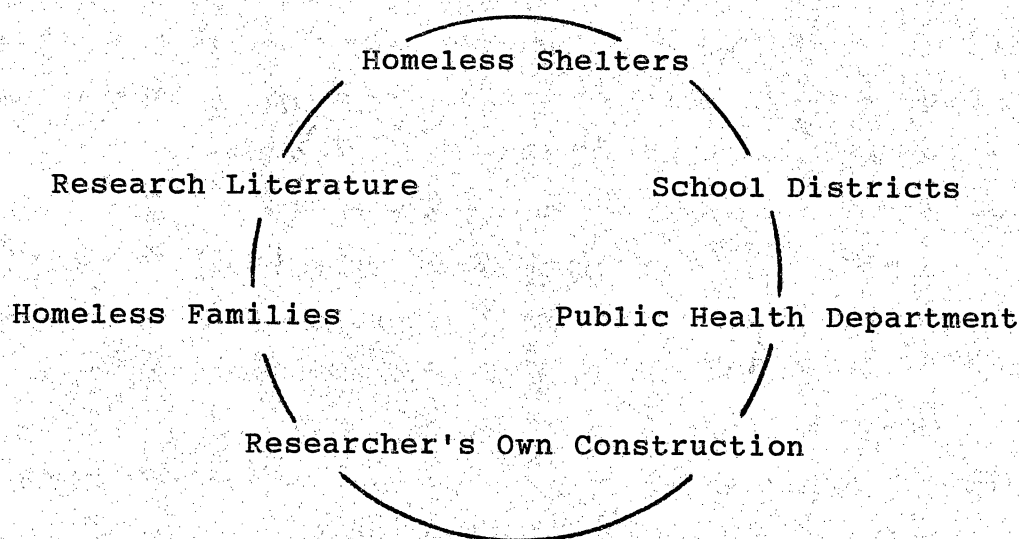
It was also initially proposed that individual participants would be nominated at the end of each successive interview, and that in light of this procedure, new respondents or stakeholders were likely to emerge, which would, in turn, alter the original hermeneutic dialectic circle. This did, in fact, take place and a modified hermeneutic dialectic circle, represented in Figure 2, was formed. The inclusion of new stakeholders into the hermeneutic dialectic circle was determined by both their availability to the researcher as well as their ability to provide new information to the ongoing analysis. Initially, it was



proposed that stakeholders would also be nominated for their ability to provide diverse perspectives through a process known as maximum variation sampling. However, at the close of the initial phase of this inquiry significantly divergent opinions have not yet emerged.

**Figure 2**

**Final Hermeneutic Dialectic Circle**



Other influences contributing to the alteration of the original hermeneutic dialectic circle consisted of eliminating those agencies that felt they had no significant contact with the homeless as well as those agencies reluctant to participate. Consequently, Coachella Valley counseling centers and headstart programs were eliminated from the original circle as well as Riverside County Department of Social Services, Riverside County Child Protective Services and

local hospitals. Additionally, issues of confidentiality resulted in the three identified school districts included in the original circle being combined into a single category labeled "school districts". And finally, new categories were added to the circle consisting of "Public Health Department" which delivers health care services to the homeless as well as the category of "Researcher's Own Constructions" which represents the knowledge gained by this researcher as a result of reviewing pertinent literature.

Between one and three respondents from each of the participating agencies were interviewed. With the exception of homeless individuals, all participants were service providers. The initial hermeneutic dialectic circle was considered complete when new information was no longer being generated, and when all of the agencies included in the original circle had been contacted.

( All participants were required to read and sign an informed consent page contained in Appendix A, detailing the purpose, methods and confidentiality of their participation. Participants were also given a debriefing statement (see Appendix B) containing the name and number of an individual at the university with whom questions regarding this research might be discussed.) And finally, all participants were made aware of their right to discontinue participation at any time during the study.

## **Instrumentation**

According to the constructivist paradigm the researcher is an integral instrument in the process of inquiry. In light of this contention, a sensitivity and understanding of the context being studied is necessary for the accurate gathering of information. In so keeping, certain preliminary activities were performed. In preparing to interview participants in this study a literature review was carried out through which initial constructions regarding the needs of homeless children were formulated. These constructions were later shared with participants and, in this way, used as a means of expanding and enriching future interviews. Additionally, in order to possess a more comprehensive understanding of the conditions experienced by homeless children and service providers, prolonged engagement was employed by visiting homeless shelters on at least one occasion prior to conducting any interviews. Similarly, persistent observation during these visits enabled this researcher to identify relevant elements of the problem being considered which, in turn, further enhanced this researcher's ability to be an active participant in the inquiry process.

## **Data Collection**

Data was collected during interviews by means of handwritten notes. Interviews were loosely structured in

an informal open-ended format which included those questions listed in Appendix C. At the onset of each interview all participants were instructed to include any additional information that was felt to be relevant, but not directly addressed by the questions listed in Appendix C. At the conclusion of each interview information produced by these questions was analyzed to identify all salient themes which were then shared anonymously with the next participant. In this way, a joint construction began to emerge which was then offered to and expanded upon by successive participants.

#### **Quality Control**

The stakeholders represented in the final hermeneutic dialectic circle represent a comprehensive range of perspectives on homeless children within the Coachella Valley. Additionally, every effort was made to include all relevant stakeholders who either wished to participate or who were nominated by other participants. However, as this was the initial phase of inquiry there undoubtedly remains additional individuals within those agencies contacted, as well as additional stakeholders, that might provide further information and or constructions.

Having only interviewed stakeholders once, the validity of the reports of constructions presented in this paper remain easily verifiable through the data

auditing trail which is described below. In addition to the data recording, a journal was also kept which contains background information on salient factors leading to any interpretations or decisions made that are not evidenced by other means. The inclusion of a colleague for the purpose of peer debriefing aided in the recording of this journal by reviewing its contents regularly in order to note any confusion in the research process. Additionally, this colleague helped in the formulation and refinement of emerging constructions as well as final consensus.

In an additional effort to insure that data was accurate, prolonged engagement and persistent observation were also utilized. As was described earlier this process involves visiting research settings prior to the actual gathering of information. Triangulation was also employed in which information such as the scope of existing services was verified by obtaining the same information from more than one respondent or source. And finally, data was verified at the end of each interview through member checks which reflected back to the participant, for his or her approval, written recordings of the interview. Member checks also consisted of telephone calls to participants prior to the writing of this report to clarify any uncertainties. This process will again be utilized when this report is distributed to

participants for their verification of constructions and for feedback regarding the second phase of this study.

## **FINDINGS**

### **Data Analysis**

Following the initial interview, notes were reviewed and categorized by highlighting each unit of information small enough to be understood by itself. This included information such as a single social or educational need, a single aspect of those needs, or a single barrier to meeting those needs. After all units had been identified, the information contained in each unit was placed onto a five by seven index card. The source of the information, the type of respondent supplying the information as well as the site represented by that respondent was then noted on the back of each card. Completed cards were then studied for their content and grouped into piles according to conceptual similarities. At the next interview, the content of these cards was shared with the participant either at the conclusion of their own responses or during relevant moments during the interview.

The above procedure was repeated after the second interview and any index cards containing conceptual similarities to those generated in the first interview were again grouped into stacks in order to further

delineate beginning categories. This tentative data was again reviewed prior to the next interview, and the process was continued after each new interview until the conclusion of this study.

Following the final interview, provisional rules were formulated that stated the conditions by which a unit of information was placed into one category as opposed to another. According to these rules artifacts such as agency brochures and handouts were also placed into these categories. Relationships between these categories were then identified by this researcher, as well as by a participating peer debriefer, in order to link these categories and, hence, create the following joint constructions.

### **Beginning Constructions**

In beginning this inquiry existing literature was reviewed regarding the conditions faced by homeless children. From this literature review a preliminary construction was formed regarding the needs of this population as well as how these needs are typically being met, or are not being met, in a variety of communities throughout the United States. The construction formulated, and hence guiding the initial stages of this inquiry, was that homeless children commonly experience instability and chaos in their lives due to inconsistent and inadequate services, chaotic shelter life, poor

health, frequent school changes and absences as well as difficult family interactions.)

### **Homeless Characteristics**

The following characteristics were constructed through a compilation of salient features reported by stakeholders participating in this study as well as this evaluator. They are, therefore, not meant to be exhaustive in nature, but are instead representative of how the homeless population as well as its service providers are perceived by participating respondents.

#### **Families**

Participants throughout the Coachella Valley described homeless families as a diverse population struggling with a variety of crisis both resulting in as well as exacerbating their present homelessness. Circumstances resulting in their homelessness were varied and included families headed by drug addicted parents, families struck by economic hard times, female headed families living on the "financial edge", migrant farm workers barely surviving on the valley's agriculture as well as families "just passing through".

Likewise, a variety of living conditions were reported for homeless families as well. Some find themselves in shelters, some are living in their cars or in parks, others are temporarily housed with overburdened friends or relatives while many more have found refuge in



the numerous old motels that once served well to do winter visitors.

Attitudes among homeless families were reported by respondents to be varied as well. Shelter participants depicted families as feeling "hopeless" about having endured a long series of crises culminating in their present homelessness. One shelter respondent described families not "opening their curtains during daylight hours" as if there was no reason to greet the day. Additionally, shelter representatives reported dealing with "problematic and uncooperative clients" who didn't want their help. School personnel described the families as "supportive" of their efforts and even "protective" of personnel when services were delivered at the child's residence, whatever that might be. Parents were often depicted by school respondents as in need of the same educational services that their children were in need of with parents frequently "taking advantage" of tutoring sessions being given to their children. And finally, parents were seen by a majority of respondents as in need of additional parenting skills and in need of simply having "someone to listen to them, someone to find out what their needs are".

### Children

A public health participant reported that a majority of homeless children seen by her department were of

school age and that this resulted in most having current immunizations. However, a shelter participant felt that many preschoolers and pregnant women were also homeless. All participants felt that school attendance, of those children who were school aged, was typically sporadic. Consequently, many were reported to be living in relative isolation and suffering from developmental and academic delays with one school respondent estimating that as many as "80% were below grade level". Respondents representing the school districts also saw children coming to school with phobias, shame, anxiety, and generally "not feeling safe". Changes in behavior were also reported as a result of becoming homeless with an increase in "clingy" behavior and in "not obeying" being reported by homeless participants. Additionally, homeless children were reported by both shelter respondents as well as public health participants to be "frequently ill" and poorly nourished with as many as "70% going without breakfast". And finally, shelter representatives as well as public health participants also felt that homeless children have a strong predisposition to drug addiction which isn't being adequately dealt with.

#### **Scope of Service Delivery System**

When describing the scope of service delivery within the Coachella Valley, respondents tended to group the

delivery of services into four categories: those services provided by shelters; services available for health care purposes; those services available through the the school districts; as well as assistance provided by the department of social services.

### Shelters

Within the Coachella Valley two shelters were identified as being able to house women and children. Additionally, respondents noted that motel vouchers are available from a third non-residential shelter, the Salvation Army as well as the Riverside County Department of Social Services. Meals are available from one of the residential shelters, the non-residential shelter in addition to a number of valley churches. Donated clothing is also available at all shelters as well as additional locations.

Although all shelters have the restriction of having to operate on extremely limited budgets in common, conditions at the shelters remained clean and pleasant. Accommodations for women and children range from a single room shared with another woman, or with one's children, and the use of a common bathroom to a single room with a private bath and kitchenette for a family. These accommodations are limited, however, with both facilities only totalling 17 rooms. Both residential shelters offered privacy and a respectful, although austere,

environment for their occupants. However, in maintaining this environment, both required residents to adhere to clearly stated house rules. For example, both shelters enforce curfews, require drug free living, expect participation in upkeep of premises, demand the respectful treatment of other residents and encourage action toward independent living.

Lengths of stay varied between shelters, with one offering a maximum of 30 nights while the other offering up to eight weeks. Additionally, one shelter served both families and singles requiring a separation of fathers from their families during their stay while the other served only families, and hence, required no such separation. When funds allow and with the help of volunteers, shelters also provided a patchwork of additional services in the form of field trips for children, referrals to community resources, assistance in dealing with county agencies, bus passes, eyeglasses, childcare, food baskets, grouptherapy, spiritual guidance, limited health care as well as after shelter follow-up.

#### Health Care Services

It was reported that health care services for homeless families are typically available through three entities within the Coachella Valley: Riverside County Department of Public Health; local emergency

emergency rooms; as well as the shelters themselves. For a variety of reasons, including a lack of medical insurance, unwillingness on the part of physicians to serve them as well as an inadequate understanding of community resources, the homeless typically do not receive adequate medical care. It was estimated by one public health respondent that as little as "10% of the homeless utilize public health services" and that the majority of health care needs of the homeless are provided for through the "inappropriate use of hospital emergency rooms".

Consequently, shelters are frequently essential in the provision of health services as they often bring the health care providers to their premises, and hence, directly to the homeless. For example, the shelter serving the east valley homeless has a physician available who volunteers his time every Saturday and Sunday afternoon. Similarly, the non-residential shelter offers the services of a physician once a month and the shelter serving the west valley offers weekly visits from a public health nurse who administers tuberculosis testing, head lice screening, general evaluations as well free childhood immunizations.

#### School Districts

School districts throughout the Coachella Valley had a variety of approaches to serving the needs of homeless

children and were at various stages of implementing these approaches. Schools were commonly viewed as having a unique opportunity for serving these children for two reasons. First, they frequently offer one of the only stable environments experienced by homeless children. Secondly, they have access to special funds, provided through the Stewart B. McKinney Homeless Assistance Act, with which to serve these children.

Of the three school districts serving the Coachella Valley, two of them are currently receiving funds from the Stewart B. McKinney Homeless Assistance Act and one is preparing to do so. Receiving these funds allows participating school districts to offer outreach services such as personal tutoring and shelter based instruction to children who fit the act's legal definition of homeless (see Appendix D). Grant amounts are based on known need which kept initial amounts small, only \$10,000 for one district and \$14,000 for another. However, it was widely felt that offering these services had brought a much larger than expected homeless population to the attention of school administrators which would, in turn, increase need, and hence, grant amounts for the coming year.

Services provided through the use of McKinney funds differed between school districts and ranged from personal tutoring designed to bring children up to the

appropriate grade level and encourage school enrollment to shelter based instruction serving children of battered women. Services are provided free of charge to all homeless students Kindergarten through twelfth grade who wish to receive them. If not residing in a shelter children in need of services are frequently identified by their addresses which are known to school personnel as those locations that typically house the homeless. The number of those identified for services within one participating school district has risen from 28 in 1991 to 70 in 1993 and is expected to reach 120 by next year. Similarly, the school district serving the battered women's shelter reports providing services to 20 children on any given school day (Dimeglio, 1994, May 29).

In addition to services made possible by the McKinney Act services available to the general student body also assist the homeless. Services such as free lunches, health care such as referrals to low or no-cost services, counseling, independent study, smaller class size, and a schedule offering fewer teacher changes may also be accessed by homeless children.

#### Department of Public Social Services

Homeless participants as well as shelter representatives described assistance from the Department of Social Services as consisting of 16 nights worth of motel vouchers, a security deposit for locating permanent

housing in addition to the occasional payment of utility deposits. These services were reported to be available once every two years.

### **Convergent Themes**

In addition to the above characteristics regarding homeless families as well as the delivery system serving those families, a persistent theme pertaining to the conditions experienced by homeless children began to emerge as a result of this inquiry. Central to this theme was the notion that homeless children within the Coachella Valley do, as the literature suggests, experience inconsistent and chaotic conditions in every facet of their existence. In agreeing on this point participants came to the following consensus.

#### **Consensus 1 - The Inconsistent Experience**

The prevailing viewpoint held by participants in this study was that the greatest challenge facing homeless children is in maintaining continuity and consistency in their ever changing lives. Without exception, respondents felt that this lack of continuity left homeless children with social, emotional, academic as well as physical deficits and that this inconsistency manifested itself in the following ways.

#### **Network**

Frequently cited as contributing to the homeless child's inconsistent experience was the inadequacy of the



service delivery network. Most respondents felt that due to the "recent increase" in the valley's homeless population, local services had not had time to fully mobilize and were, therefore, "less organized and inadequate" in their delivery of services. However, school district respondents felt that the existing network offered a good starting point from which to "strengthen ties" and "eliminate gaps and duplication of services".

Most participants also felt that these "gaps" and "duplications" added to the homeless child's inconsistent experience within the Coachella Valley and felt that many of them could be eliminated through "regular meetings of homeless agencies" and through making "service providers aware of what each other offers". It was also felt by some shelter participants that "egos needed to be removed from the politics of providing services" in order to foster cooperation instead of competition in the provision of services to the homeless. Similarly, it was felt by one shelter respondent that certain agencies offering vital services to the homeless, such as the Department of Public Social Services, had remained distant and had resisted networking efforts.

### Shelters

Also having an important impact on the inconsistency experienced by homeless children are shelters

themselves. Although she spoke highly of the Coachella Valley shelter she was staying in at the time of this interview, one homeless participant described how services were "often inconsistent from shelter to shelter". She told of her children previously experiencing "unclean, overcrowded" conditions that made it very difficult for them to "stay on any sort of schedule" such as would be required for school attendance. She also told of having to be separated from her children during a time when she felt that she could not insure their safety due to the presence of "dangerous people and circumstances" at a shelter she was staying at. And while she maintained that she had not experienced these unpredictable and inconsistent circumstances in Coachella Valley shelters she felt that the impact of these experiences remained on her children and that local services needed to address these issues. In support of this mother's concerns, both shelter and school district respondents noted that many local homeless move through a "shelter loop" between the Coachella Valley and Los Angeles in order to "keep a roof overhead".

In describing what families need in shelters in order to bring consistency to their lives, homeless as well as shelter participants mentioned "a private area of their own in which to appropriately discipline children",

a private area which was "under their own control" and a quiet "place for children to consistently do their homework". Also mentioned were more "consistent or structured services" such as ongoing educational services at the shelter in order to lessen the impact of gaps in school attendance. And finally, access to long term mental health services were seen as important by homeless, shelter as well as school district participants.

### Schools

Without exception, education was cited as being heavily impacted by the transient nature of the homeless child's existence. Frequently experiencing gaps in education due to absences and school changes, homeless children are often academically behind other students. Contributing to the lengths of these educational gaps are both the circumstances of being homeless, family characteristics as well as school policies and procedures.

According to a majority of respondents, a very weak link exists between homeless families within the Coachella Valley and local schools. And although efforts made possible through the use of McKinney funds are helping to strengthen this link, school district respondents still reported that homeless families can be "difficult to stay in touch with" and "difficult to

identify" due to the lack of a permanent address or phone number, as well as the stigma attached to being identified as homeless. Furthermore, shelter respondents felt that parents frequently "don't know the simple logistics of getting kids into school" or are "not motivated" to do so. They also reported that if one child is ill all siblings stay home increasing the incidence of school absences. Also mentioned as a barrier to consistent school attendance was the lack of reliable transportation. And finally, homeless participants pointed out that children living in cars cannot meet the structure of a school schedule or are too ashamed of their circumstances to attend school.

In the past some Coachella Valley schools have added to the plight of homeless kids by not sufficiently accommodating to their special circumstances. For example, a respondent from one participating school district mentioned that prior to about four years ago, schools within her district routinely shut homeless kids out by requiring proof of residency. She stated that "school personnel had been rigid in applying residency regulations" and had been "reluctant to admit students if they were temporary". Today, however, in addition to those identified by other means, there also exists a directive to enroll homeless kids and upon signing a statement acknowledging that the family currently has no

address children may attend the closest school to where they "stay the most" or "hang-out the most".

However, school officials and shelter administrators still feel that "current educational services are not comprehensive enough" for "keeping homeless kids from falling through gaps in our social and educational systems", gaps which leave the homeless child with an inconsistent and fragmented educational experience. Participants also felt that schools had a unique opportunity to offer "security, structure and stability to homeless kids", but were only beginning to realize this potential as well as the numbers of children effected.

### Socialization

Missing a permanent neighborhood and regular school attendance, participants from all stakeholding groups felt that homeless children experience a very fragmented and inconsistent process of socialization as well. Their transient lifestyle simply doesn't allow for the making of neighborhood friends, or childhood activities, which leaves kids distrustful and in social isolation or as one mother put it "because of living in shelters my kids don't know who to trust, so they don't trust anybody". Shelter respondents also identified common social experiences which housed kids take for granted, but are frequently missed by homeless kids. They included

activities such as going to the ocean, to the zoo, staying in a hotel or even going to a restaurant.

### Health Care

Another area of concern cited by a majority of participants in this study was the manner in which health care services are delivered to the homeless.

Inconsistency and fragmentation was the norm here as well, leaving homeless kids frequently ill as well as in need of physical evaluations and assessments. Considered by public health as well as shelter respondents to be at the heart of this inadequate service was the lack of medical insurance among the homeless population. Also mentioned as a contributing factor was the lack of physicians willing to treat this population as well as the lack of access to medical records due to frequent moves. And finally, the difficulty in obtaining medically indigent status within Riverside County as well as the reluctance of the homeless to use public health facilities were also considered by both shelter and public health participants to assist in the inconsistent delivery of health care services.

### Mental Health Services

Most participants felt that homeless children were in need of mental health services and that these services were not easily or consistently accessed creating yet another gap in the homeless child's experience.

According to pertinent literature, homeless participants in addition to shelter respondents experiences such as shelter chaos and parental substance abuse leaves these kids at risk of being mistreated and predisposed to later substance abuse themselves if the effects of these conditions go untreated. Consequently, homeless children are in critical need of mental health evaluations and assessments, but typically do not receive them for the same reasons health as well as other services are not received.

### Conclusions

It becomes clear from a review of the above responses that what participants in this study are referring to as inconsistencies in the lives of homeless children is the intermittent nature in which homeless kids access and receive services. Having no permanent place to call home leaves homeless families with a fragile link to mainstream society and to the support and advantages it offers. Adding to the fragility of this link is the often fragmented fashion with which services must be delivered. It was on this note that additional themes began to appear.

### **Emerging Themes**

Approaching consensus proportions, and to be further defined in the second phase of this inquiry, was an additional theme concerning the reasons for homelessness

and the continued lack of adequate funding in the fight against homelessness. It was widely felt among a variety of stakeholders that there were forces of a more global nature that were impacting both the prevalence of homeless families as well as the ability of service providers to assist them.

For instance, it was commonly felt that the nation did not view homelessness as a priority and that this left service providers dramatically under funded. Consequently, this limited funding has meant shelters and other agencies serving the homeless have had to limit themselves to providing only emergency services made possible through the extensive use of volunteers and private donations.

Of primary concern to a majority of respondents was the need for affordable housing and adequate employment. Participants often felt that this was such a basic concept that it was commonly not mentioned or overlooked as both a solution to, as well as a cause of, homelessness. Other concerns revolved around the lack of adequate universal childcare which hits homeless kids especially hard. One shelter representative reported non-resident children coming to the shelter during the day looking for work because they needed "...a place to be while their parents were at work". Similarly, a public health respondent felt that the laws governing the



protection of children from a variety of abuses needed to be revamped.

Also unanimously mentioned was the need for parental education. Respondents often spoke of the lack of parental education and of its impact on both keeping the family homeless as well as the value parents placed on their children's education. In other words, poorly educated parents had difficulty obtaining decent jobs and often did not see the importance of educating their children. Similarly, one school district participant felt that in order to prevent future homelessness the "cycle of women being financially dependent" needed to be broken through the provision of "education and employment skills".

Also deserving of mention is the process of receiving governmental assistance. Raised on more than one occasion was the slowness and lack of responsiveness with which assistance to the homeless is provided. One shelter respondent commenting of the slowness of the Department of Social Services noted that "a process that is supposed to take 30 days frequently takes 60". Additionally, it was felt that being homeless was often hard to prove and that social service workers, in order to be more supportive of others, needed support themselves from within their own agencies. And finally, it is also important to note that another shelter

respondent saw governmental assistance, in the form of Aid to Families with Dependent Children, as perpetuating the problem of homelessness in that it helped to create generations of dependent and financially fragile recipients.

To summarize, many respondents felt that policies and circumstances existed that were beyond their control and that the impact of these policies and circumstance both caused and exacerbated homelessness. Conditions such as the lack of affordable housing, inadequate childcare and poor parental education were reported to be frustrating and at times overwhelming. On the other hand, there were additional conditions interfering with aiding the homeless that, while still frustrating, were seen as manageable, and about which, the following recommendations were made.

### **Recommendations**

Suggestions offered by participants for improving conditions faced by homeless children addressed the service provision network, schools, shelters, the delivery of health care services, adult education as well as the child's social experience. They are preliminary recommendations based on the initial phase of study and will be both further refined in, as well as a catalyst to, this inquiry's second phase.

### Network

Regular network meetings of stakeholders in the delivery of services to the homeless should be implemented in order to coordinate services, expand available referrals in addition to improving access to existing services.

### Expanding Services

Efforts should be made at expanding the above network to include service providers from both east and west ends of the valley as well as to agencies and organizations that may be able to supply much needed volunteers, scholarships for children's activities, food items, diapers, additional health care, and shelter space, children's counseling, transportation, as well as adult education and job training. Additionally, agencies not strongly linked to the current network such as the Department of Social Services should join networking efforts.

### Schools

The inclusion of all school districts serving the Coachella Valley in receiving McKinney funds as well as the continued expansion of the programs currently being offered by districts should be sought. Also, a heightened awareness among school staff as to their potential role in the life of a homeless child should be encouraged.

## DISCUSSION

### Summary

Much as in other areas of the United States, the numbers of homeless families within the Coachella Valley appears to be on the rise. Conditions faced by these families as well as the effects of being homeless appear to be mimicking those found in the rest of the country as well. Existing conditions found in the Coachella Valley such as sporadic school attendance, missed evaluations and screenings, developmental and academic delays, intermittent opportunities to socialize in addition to inconsistent and inadequate health care are all similar to those conditions reported in the research literature.

However, not typical of those conditions reported in pertinent literature were the efforts toward dealing with homeless issues within the Coachella Valley. For example, shelters within the valley are not representative of chaotic unclean facilities depicted in homeless literature nor are the efforts being put forward by the local school districts. Shelters within the valley, although limited in number, do offer clean and structured environments and school districts are reaching out to the homeless community in an attempt at tightening their grip on mainstream society and its resultant advantages. However, there is still much to tackle and the following are recommendations for the second phase of

this inquiry.

### **Future Research**

The second phase of this study will further examine the conditions faced by homeless children within the Coachella Valley and should focus on refining the above recommendations offered by participants in addition to reaching further consensus regarding needs not yet identified as well as additional ways of meeting needs in general. In so doing, the inclusion of additional participants from those agencies contacted during the course of this inquiry as well as the inclusion of new stakeholders would appear to be beneficial.

Of those stakeholders contacted during the course of this study, the inclusion of additional homeless families as well as members of stakeholder groups representing geographical regions of the valley other than those represented in this inquiry would add to the depth of understanding surrounding the needs of the homeless. Also adding to this understanding would be new stakeholder groups such as local city governments, law enforcement, College of the Desert, as well as local hotels and physician groups whose inclusion might serve to both enhance understanding of, as well as services, to the homeless. Similarly, those organizations initially included as participants in this study, but later eliminated because of a lack of contact with homeless

children should be furnished a copy of this report and asked to reconsider their involvement. And finally, negotiations at the conclusion of this study should focus on fostering a sense of community and consistency for the valley's homeless children through the coordination, expansion and addition of services.

## APPENDIX A - Informed Consent

The study in which you are about to participate is designed to explore the social as well as educational needs of homeless children. This study is being conducted by Jo Ann Becker under the supervision of Dr. Teresa Morris, professor of Social Work. This study has been approved by the Institutional Review Board of California State University, San Bernardino.

In this study you will be asked to share your knowledge and opinions regarding the social and educational needs of homeless children, including how you believe these needs are being met, or are not being met, as well as your opinion on how they might be better met in the future. Potential benefits of participating in this interview might include improved services to homeless children while potential risks might include the surfacing of unwanted or unforeseen feelings surrounding the topic being discussed.

Please understand that any information you provide may be shared with other participants in this study. However, at no time will your identity be revealed to anyone except the researchers named above. Please, also, understand that your participation in this study is entirely voluntary and that you are free to terminate your participation, and withdraw any information contributed by you, at any time

without penalty. Additionally, at the conclusion of this study you may receive a report of its findings, if desired.

I acknowledge that I have been informed of, and understand, the nature and purpose of this study, and I freely consent to participate. I acknowledge that I am at least 18 years of age.

---

Participant's Signature

---

Date

---

Researcher's Signature

---

Date



## APPENDIX B - Debriefing Statement

California State University, San Bernardino, and the researcher conducting this study have a responsibility for insuring that participation in any research sponsored by this university causes no harm or injury to its participants. In fulfilling this responsibility, debriefing counseling will be available to any participant who, due to his or her participation in the present study, experiences psychological or emotional repercussions. If counseling should be required as a result of the above participation, either Jo Ann Becker or Dr. Teresa Morris may be contacted at 909-880-5501. Additionally, any questions or concerns regarding this research, or its findings, may also be directed to the above number.

## **APPENDIX C - Interview Questions**

1. In your opinion what are the key issues in meeting the social and educational needs of homeless children?
2. How do you think these needs are being met?
3. How do you think these needs are not being met?
4. What, in your opinion, can be done to improve meeting these needs?
5. What do you see as barriers to successfully meeting these needs?

## APPENDIX D - Definition of Homeless

Children who lack a fixed, regular, and adequate nighttime residence.

Children who have a primary nighttime residence in a supervised publicly or privately operated shelter for temporary accommodations.

Children residing in an institution that provides temporary residence for individuals who are to be institutionalized.

Children residing in a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings.

## REFERENCES

- Bassuk, E. L. (1992). Women and children without shelter: the characteristics of homeless families. In M. J. Robertson & M. Greenblatt (Eds.), Homelessness: A National Perspective. New York: Plenum Press.
- Burg, M. A. (1994). Health problems of sheltered homeless women and their dependent children. Health & Social Work, 19(2), 123-131.
- Dimeglio, S. (1994, May 29). Homework, but no home. The Desert Sun, pp. A1, A11.
- Fischer, P. J. & Breakey, W. R. (1991). The epidemiology of alcohol, drug, and mental disorders among homeless persons. American Psychologist, 46(11), 1113-1128.
- Goodman, L., Saxe, L. & Harvey, M. (1991). Homelessness as psychological trauma. American Psychologist, 46(11), 1219-1226.
- Hausman, B. & Hammen, C. (1993). Parenting in homeless families: the double crisis. American Journal of Orthopsychiatry, 63(3), 358-369.
- Johnson, A. K. & Kreuger, L. W. (1989). Toward a better understanding of homeless women. Social Work, November, 537-540.
- Johnson, J. (1991). Kids Without Homes. New York: Franklin Watts.
- Miller, B. W. (1994, January 30). On the street in paradise. The Desert Sun, pp. A1, A8-9.
- Molnar, J. M., Rath, W. R. & Klein, T. P. (1990). Constantly compromised: the impact of homelessness on children. Journal of Social Issues, 46(4), 109-124.
- Rafferty, Y. (1991). Developmental and educational consequences of homelessness on children and youth. In J. H. Kryder-Coe, L. M. Salamon & J. M. Molnar (Eds.), Homeless Children and Youth. New Brunswick: Transaction Publishers.

- Rafferty, Y. & Shinn, M. (1991). The impact of homelessness on children. American Psychologist, 46(11), 1170-1179.
- Rescorla, L., Parker, R. & Stolley, P. (1991). Ability achievement, and adjustment in homeless children. American Journal of Orthopsychiatry. p. 212-220.
- Robertson, M. J. (1991). Homeless women with children. American Psychologist. Vol. 46, No. 11, 1198-1204.
- Shinn, M., Knickman, J. R. & Weitzman, B. C. (1991). Social relationships and vulnerability to becoming homeless among poor families. American Psychologist, 46(11), 1180-1187.
- Shogren, E. (1993, December 22). Families total 43% of homeless, survey reports. Los Angeles Times, p. A16.
- Whitman, B., Accardo, P., Boyert, M. & Kendagor, R. (1990). Homelessness and cognitive performance in children: a possible link. Social Work, 3, p. 516-519.
- Whitman, B. Y., Accardo, P. & Sprankel, J. M. (1992). Homeless families and their children: health Development and educational needs. In R. L. Jahiel (Ed.), Homelessness: A Prevention Oriented Approach. Baltimore: The Johns Hopkins University Press.
- Wright, J. D. (1989). Address unknown: homelessness in contemporary America. Society, September/October, 45-53.