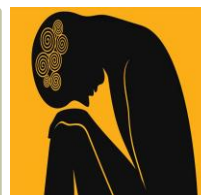
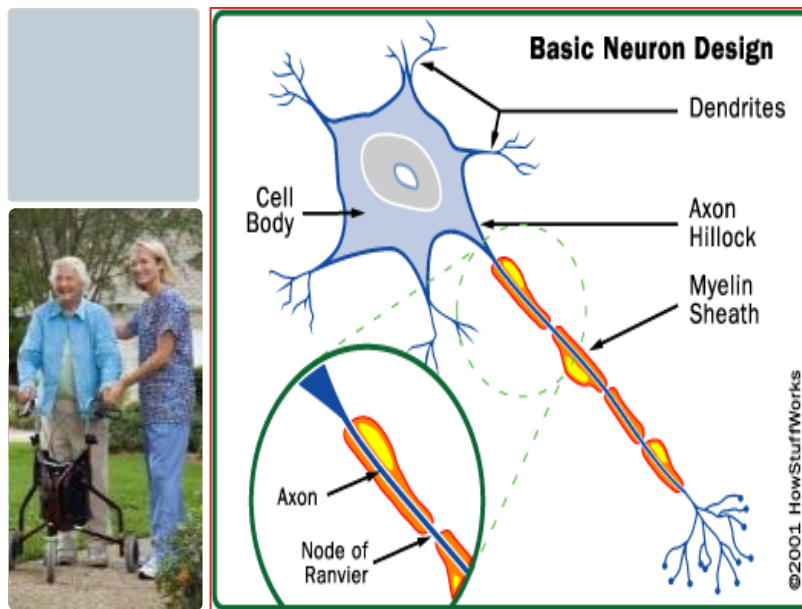




# Improving Practice With Housing First Populations: A New Perspective

Marge Wherley, Abt Associates

Housing First Partners Conference  
April, 2018



# First Encounter



## What Do You See?

- **Homeless man, age 52:** late to appointment, complaining, irritable, suspicious of your questions, argumentative, defensive, cynical, smells of liquor
- **Homeless woman, age 25:** showing sadness, helplessness, hopelessness, panic, crying, worrying
- **Homeless mother of three, age 21:** apathy, difficulty concentrating, forgetful, poor personal hygiene

What are your initial observations? Call out your first impressions

# Activity #1: YOU!



Think about a time in your life when:

- You faced a very difficult situation
- It was critically important
- You didn't feel you had much (or any) control
- The problem(s) continued for more than a month

Try to remember how you felt and acted.

# Count the number of words that describe your *thoughts and feelings* during your crisis



- Anger
- Irritability
- Anxiety
- Lack of direction
- Apathy
- Mood swings
- Cynicism/pessimism/doubt
- Nightmares
- Defensiveness
- Panic
- Depression
- Feeling of impending doom/danger
- Restlessness
- Feelings of insecurity
- Sadness
- Helplessness
- Suspiciousness
- Hopelessness
- Worthlessness

# Add the number of words that describe your crisis *behaviors*



- Angry outbursts
- Increased complaining
- Avoiding social activities
- Increased crying
- Being late
- Increased smoking
- Increased use of drugs or alcohol
- Changes in religious practices
- Change in sleep patterns
- Increased use of sick time
- Decreased interest in sex
- Inability to enjoy activities you liked
- Difficulty concentrating
- Neglecting responsibility
- Excessive worrying
- Nervous twitch or habit
- Forgetfulness
- Overeating
- Impatience
- Poor job performance
- Increased arguing
- Poor personal hygiene
- Increase in accidents or injuries
- Procrastination

# What Do These Words Have In Common?



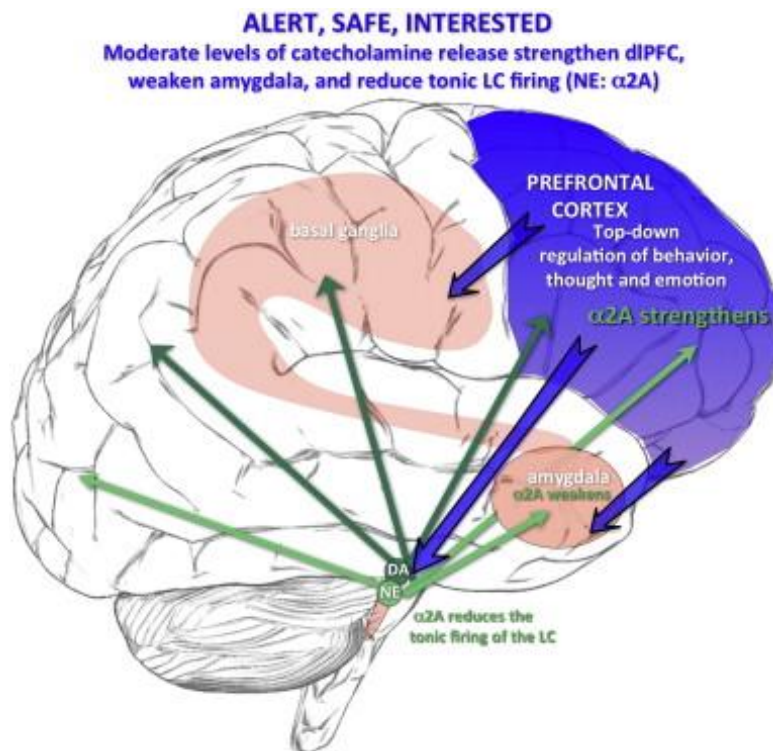
- Signs and symptoms of possible stress overload (Source: Mayo Clinic)
- Among people experiencing homelessness, these signs and symptoms ***will generally self-resolve*** –partially or completely, slowly or quickly – ***once they are safely housed***
- How long did it take before YOU were back to “normal”?

Ending the crisis allows people to recover and ***continue their lives, making their own choices*** about what to do next. But recovery takes time.

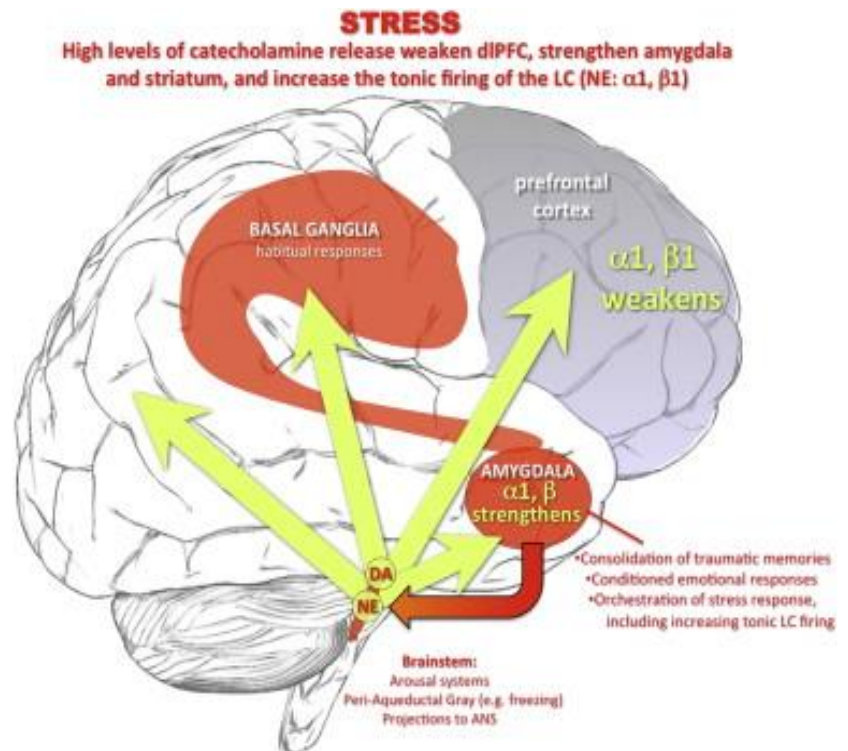
# This is Your Brain.....



## Your Brain, Feeling Good

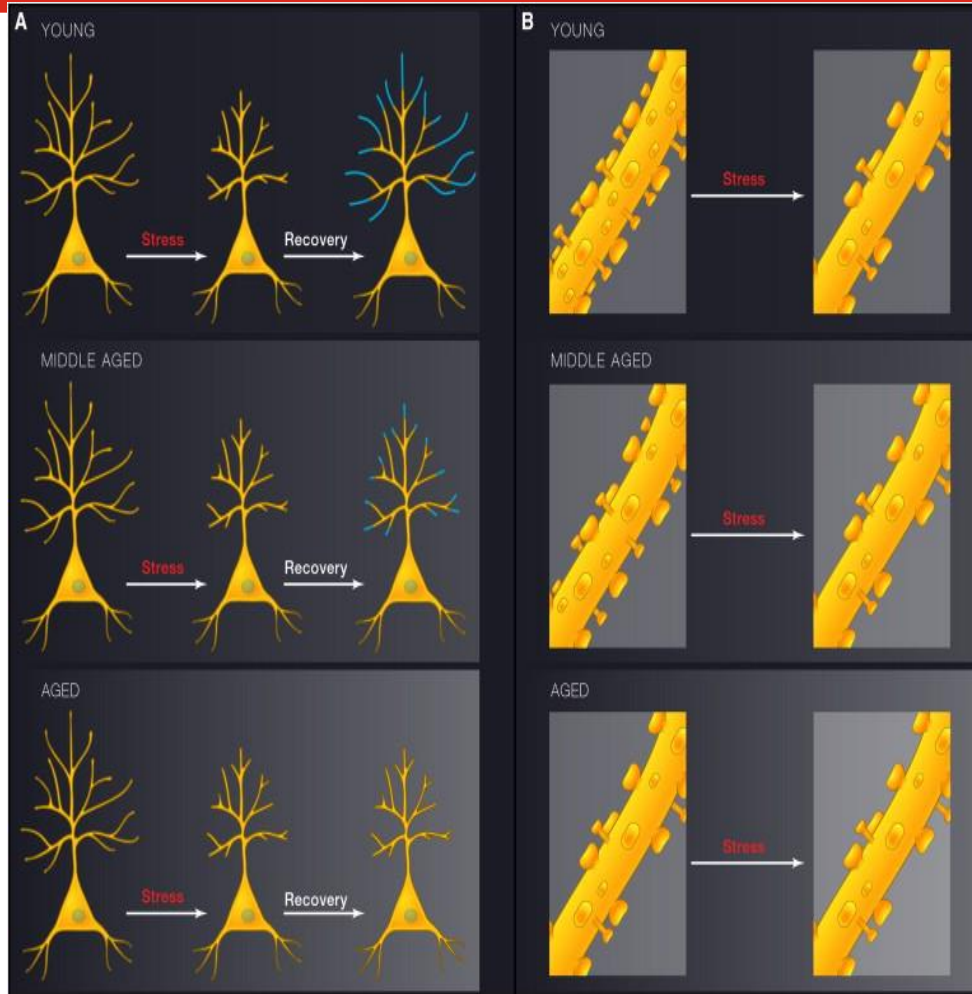


## Your Brain on Stress



Source: Effects of stress exposure on prefrontal cortex... (Arnsten, Raskin, Taylor, Connor 2014)

# Stress-Related Injury and Recovery of Neurons



Source: McEwen, B. et al (2013). "The Brain on Stress: Vulnerability and Plasticity of the Prefrontal Cortex over the Life Course," *Neuron* 79(1), 16–29.

Readers may view, browse, and/or download material for temporary copying purposes only, provided these uses are for noncommercial personal purposes. Except as provided by law, this material may not be further reproduced, distributed, transmitted, modified, adapted, performed, displayed, published, or sold in whole or in part, without prior written permission from the publisher.

# The Impacts of Stress on Executive Function



Executive function includes neurocognitive processes that enable us to:

- **Solve problems**
- **Modify behavior in response to new information**
- **Follow through with plans**
- **Override impulsive behaviors and emotions to engage in goal-directed behavior**
- **Remember and retrieve important information**

**The cognitive abilities we need to resolve a crisis are the same abilities that are diminished during that crisis!**

# Stress and Vulnerability



***Medical conditions or disabilities are often exacerbated by stress.***

You may not know about a medical concern or disability when you meet a new client. ***You do know this is a person under severe stress.*** *And housing is a huge step toward recovery from stress.*

***If you know (or suspect) that a disability is present, housing is even more critical. Stress is especially harmful for people who may have:***

A mental illness and/or substance abuse disorder

A developmental disability

A medical condition such as diabetes, HIV-AIDS

Frailty, including vulnerabilities associated with being elderly

# It's Even More Complicated!



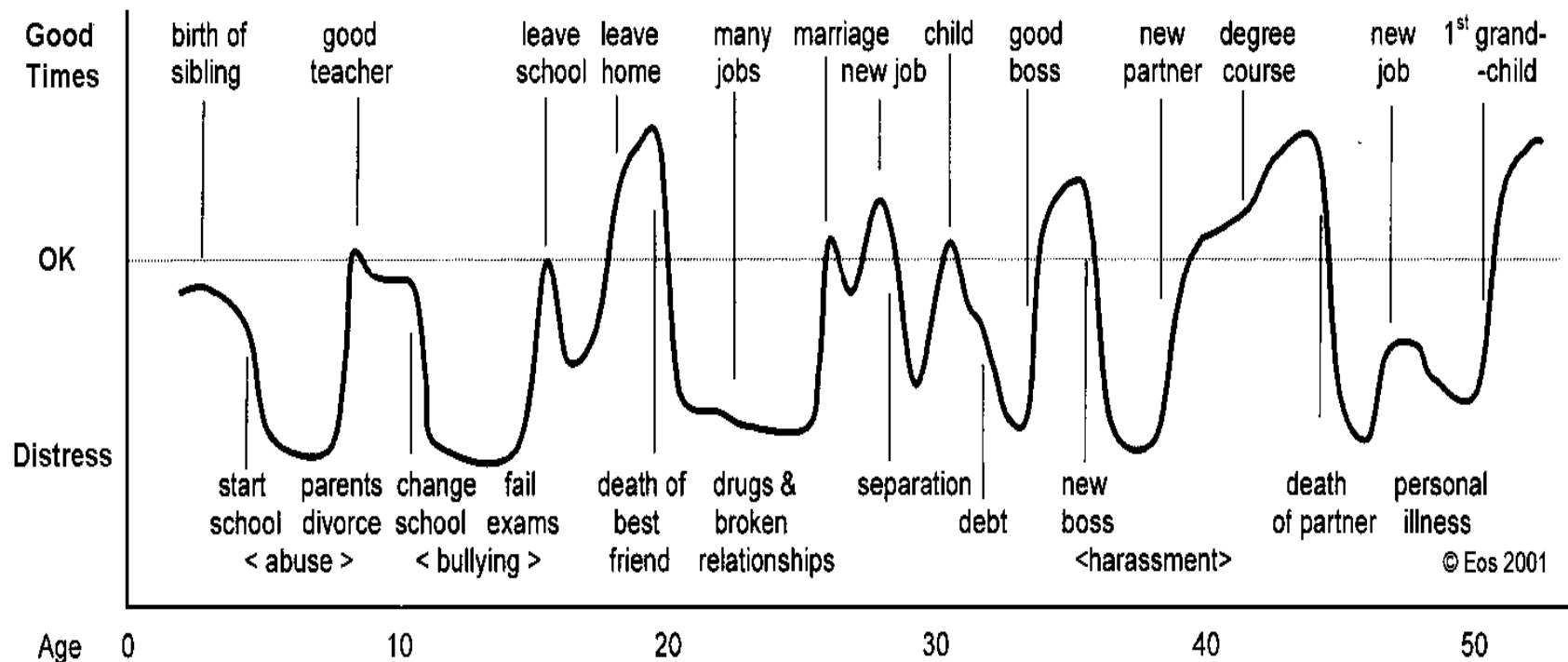
**Each person's ability to cope and recover from stress is affected by many factors:**

- Their genetic predisposition
- Their experiences – good and bad – including poverty, discrimination, single parenting, childhood caregiver
- Their health
- Their support system(s) – or lack of...
- The number, duration and severity of stressors

# No One Avoids Stressors!



Figure 3: Composite lifeline illustrating traumas, unsuccessful transitions and recovery points





## What Helps?



- Remove the stressor
- Avoid additional stresses (relax, recuperate)
- Reduce the perceived importance of the situation
- Increase perceived control over the situation
- Prioritize, plan and pace yourself; make lists, take notes
- Improve diet, exercise, sleep, breathing, relaxation, music, do something that makes you happy; be careful of overuse of alcohol, drugs

# First Encounter



Remember what you said about these three people?

- **Homeless man, age 52:** late to appointment, complaining, irritable, suspicious of your questions, argumentative, defensive, cynical, liquor on breath
- **Homeless woman, age 25:** showing sadness, helplessness, hopelessness, panic, crying, worrying
- **Homeless mother of three, age 21:** apathy, difficulty concentrating, forgetfulness, poor personal hygiene

Every one of these words is a symptom of possible stress overload. NOW WHAT DO YOU SEE?

## ACTIVITY #2: More About YOU!



How can your own style and practice in Rapid Re-Housing reduce or escalate stress overload in people experiencing a crisis? .

- **What should you DO?** What can help reduce their stress?
- **What should you NOT DO?** How can you avoid exacerbating their stress overload?

TAKE A FEW MINUTES AND WRITE DOWN YOUR IDEAS.  
Then share them with the group.

# Notes to Self



- Is my office (or interview room) calming or chaotic?
- How do I engage with a new client in ways that make her/him feel safe and relaxed?
- How can I recognize when a program participant is stressed?
- What do I say and do (or avoid) when my client expresses thoughts, feelings or emotions that may indicate stress overload?
- How do I keep track of my own stress levels?

# Checklist for Stress Overload



- ✓ Be observant—watch for signs and symptoms of stress overload. **STOP** when you see that “Deer in the Headlights” look.
- ✓ Pay attention to the person’s ability to recall, make plans, carry out plans. Start with easy assignments.
- ✓ Simplify if actions steps appear to be too ambitious.
- ✓ Write down a list of the agreed-upon action steps, next appointment, etc. and give it to them at the end of each meeting.
- ✓ Consider appointment reminder calls if the person appears overwhelmed.



**Question:**  
**What will you do differently  
next week?**



**RELAX, DE-STRESS...  
AND GO FORTH!**

