Veteran Homelessness: Historical Context, Causality and Clinically Salient Themes

Daniel Farrell, LCSW
Vice President of Programs
HELP USA
Knowledge Development

- Complex phenomena of homelessness which cannot be explained by a single causal factor
- Dangers of thinking in Reductionist/Determinist terms
- Cascading effects of Risk/Protective factors
- Variables of an outcome is approximated and can change over time (episodic homelessness, for example)
The Problem of Homelessness is Primarily a Problem of Extreme Poverty
However, the inverse is not true...most people who are extremely poor do not become homeless
History of Homelessness in America

Similarities and Differences Across Five Major Episodes of Homelessness in U.S. History (refer to handout)

What is missing?
Why was there such minimal homelessness (Veteran and non-Veteran) post WWII?
Post-WWII

- In 1944, Congress passed the Service Readjustment Act (GI Bill). Provided for **two years** of unemployment compensation for Veterans
- Low interest loans for start-up of a business
- Cash assistance for tuition
- Took Veterans out of labor force, allowed for educational advancement which led to increased prospects for long-term employment and housing stability
Post-WWII

- Economic protective factors strongly contributed to advancement of, and into middle class
- Result was a low rate of impoverished Veterans, consequently, there was minimal homelessness

- However, only available to White Veterans...
Risk Factors for Homelessness

Time and place of economic conditions will increase incidence of homelessness:

- Low vacancy rate
- High rent burden
- Poor economic indicators (low wage jobs, few job choices, transient jobs, high inflation)
- Basic lack of available economic and social resources
Risk Factors for Homelessness

- Cascading effects that generally starts with economic conditions which include:
  - Job loss
  - High rent burden
  - Loss of social supports
  - Substance abuse
  - Symptoms of mental illness increase during times of stress
  - History of foster care, jail/prison
  - Prior incidence of homelessness (causal factor)
Veterans from the All Volunteer Force (AVF) and Homelessness

- Overrepresentation from low income and marginalized groups
- Risk factors that pre-date service in Military
Veterans from the All Volunteer Force (AVF) and Homelessness

• Increased *individual* risk factors for OEF/OIF cohort includes:
  • Social isolation
  • Being unmarried
  • Illicit drug use
  • Gambling addiction
  • Alcohol addiction
  • Personality disorder
  • Severe mental illness
Veterans from the All Volunteer Force (AVF) and Homelessness

• Protective factors *(individual)* include:
  • Social support(s)
    • Parental involvement
    • Marriage (stable)
  • Service connected
  • Family stability as child
Risk and Protective Factors for Female Veterans

Risk:
• Sexual assault in the military
• Anxiety disorder or PTSD
• Unemployment

Protective:
• College education
• Marriage (stable)
Clinically Salient Themes

Military Culture:
- Paternalistic
- Patriotism, Nationalism and Traditionalism
- Hierarchical structure (“Lock step paths”)
- Collectivism:
  - Interdependency
  - Group orientation and cohesion
  - History of misogyny and homophobia (collectivism of males)
Enduring Destructive Effects of Homelessness

There is no unifying conceptual framework that ties “homelessness” for people who experience it

However, commonalities exist
Enduring Destructive Effects of Homelessness

- Homelessness strips a person of basic liberties and equalities
- The meaning of housing is tied to a family’s economic and emotional vitality
- Living in a state of homelessness requires an adaptation to continually stressful and sometimes dangerous elements
- Chronic homelessness may indelibly change the person on many levels on social and biological levels
Clinically Salient Themes

- The development and maintenance of a solid therapeutic relationship. Healthy connectedness is the basic conceptual foundation:
  - Empathy and empathic continuity
  - Concrete services that has value (both short and long term)
  - Acknowledgement of social pathologies