Living with loss – A homeless perspective

Presented by Peter Kennedy

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The Landscape
Estimated 47,000 single homeless people in the hostel system at any one time

As high as 400,000 if including rough sleepers, those in refuges, B&B’s, due for discharge from institutions, and concealed housing (sofa surfers)

2,309 people slept rough in England in 2012, of which 76% in London

In 2011, around 49,000 households, (mainly families) were living in temporary accommodation
Types of projects

• Short term
  Emergency hostels

• First stage
  Vary from low to high levels of support needs

• Semi-independent
  Requiring lower levels of support

• Independent living
  Floating support

• Specialist schemes
  Accommodates people with specific support needs
First stage hostel

Mixed
Wet hostel
Houses 50 clients
Mix of mental health and substance misuse
Causes and consequences of homelessness
Causes of homelessness

- Difficult childhoods
- Poor familial relationships
- Exposure to physical / sexual / emotional trauma
- Loss of a parent or someone significant
- Leaving institutions (prison, care, armed forces)
- Marital or relationship breakdown
- Loss of home
- Mental health
- Substance misuse
- Poor social networks / isolation
- Financial difficulty (debt / loss of earnings)
Consequences of homelessness

Homeless people are more likely to present with a combination of physical and mental health problems with substance misuse—Tri-morbidity

National Health Care for the Homeless Council
St Mungos (2010), Homelessness, it makes you sick: London Pathways: Health Standards
Consequences of homelessness

Material & psychosocial effects can exacerbate:

- Smoking, drugs and alcohol consumption
- Poor and adequate nutrition
- Violence-related risks (9x more likely to commit suicide)
- Increased risk of infection and chronic disease
- Distress, anxiety, depression and a worsening of physical health
- A loss of self identity and self esteem
Consequences of homelessness

Mental health

<table>
<thead>
<tr>
<th>Condition</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Admitted to hospital with a mental illness</td>
<td>29</td>
</tr>
<tr>
<td>Had attempted suicide</td>
<td>38</td>
</tr>
<tr>
<td>Experienced anxiety &amp; depression</td>
<td>79</td>
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</tbody>
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Consequences

Mental health

42% reported PTSD, with 30% attributing this to an experience of death or grief, 20% an abusive or neglectful experience in childhood, and 11% to family breakdown.

Bonner & Luscombe, 2008. The seeds of exclusion. (N=438)
Consequences of homelessness

Psychological disorders

It's estimated that 60% of adults living in hostels in England may reach diagnostic levels for personality disorder – compared to 10% in general population

Eksellius et al, 2001
National Mental Health Development unit, Mental Health Good Guide Practice (2010)
Consequences of homelessness

Nature and cause of death

They do not commonly die as a result of exposure or other direct effects of homelessness.

They die of treatable medical problems, HIV, liver and other gastro-intestinal disease, respiratory disease, acute and chronic consequence of drug and alcohol dependence.
Consequences of homelessness

Homeless people vs. general population

7x more likely to die from alcohol related causes

20x more likely to die from drug related causes

3.5x half times more likely to commit suicide

7x times more likely to die for HIV or hepatitis

7x times more likely of dying from falls
**Consequences of homelessness**

Average age of death in the UK for single homeless people is

47 for men

43 for women

Homelessness Kills; Bethan Thomas 2012
Consequences of homelessness

St Mungo’s

Primary cause of death

Multiple organ failure 52%
Suicide / undetermined intent 20%
Cancer 9%
Other 11%
Not known 6%
Other diseases/disorders 2%

Multiple organ failure

Liver disease 47%
Circulatory disease 30%
Respiratory disease 23%

St Mungos Jan 07 – Dec 12 (n = 207)
Consequences of homelessness

Liver disease
Consequences of homelessness

Sudden deaths

• High percentage of deaths perceived as sudden, even if not unexpected

• Undetermined intent, suicide and falls make up over a third of all deaths – point of entry for end of life care

• Traumatic for staff and other residents

• Requires particular levels of bereavement support from beginning

• Largely occurs in first stage hostels
Homelessness, grief and loss
Homelessness and loss

- Childhood
- Home
- Loss of a parent or someone significant
- Education and Employment opportunities
- Health
- Self-esteem, self confidence
- Dignity
**Homelessness and loss**

“.... the loss of where they sleep, where they begin and end every day, where they store their belongings, where they socialise and interact with others, and a loss of connection with the wider community”

Reynolds (2009)
Homelessness and loss

“A home provides roots, identity, a sense of belonging and a place of emotional well-being. Homelessness is about the loss of all these things”

Crisis (2010)
Homelessness and loss

“When you don’t have a place to live, you eat a large amount of food and still feel hungry because you just eat it for the sake of the survival and you never enjoy eating it. But if you have a place to call ‘home’ you feel happy with only a loaf of bread... I am very happy and grateful to the social workers at the hostel who have provided me with a sense of belonging to call home”

Brian, resident of Bankstown Hostel, Australia NSW, 2010
Homelessness and loss

• Many had few and limited contact with family members

• 28% consider themselves to have no close friends

• More than half spent most of their time alone (with only 25% finding this unacceptable)

(N=438)
Homelessness and loss

- Role
- Identity
- Independence
- Freedom
- Safety
Homelessness and loss

Michael

“I’ve lost on the way to this journey,
I’ve lost the special thing that most of us want dignity”
It makes a difference when you’re homeless and your dying by yourself. You’re here by yourself, no one to care; and ‘me’ I just want to be remembered by somebody.

Homelessness and grief

Disenfranchised Grief

"...the grief experienced by those who incur a loss that is not, or cannot be, openly acknowledged, publicly mourned or socially supported"
Homelessness & Bereavement
Homelessness and bereavement

What we know

• Death is more likely to be unexpected and traumatic

• Bereavement consistently makes the top ten causes of homelessness

Lakeman, R 2011. How Homeless Sector Workers Deal With The Death Of Service Users
CARIS, 2010 Bereavement And Homelessness; Vulnerable People Coping and Struggling with Loss
Case study 1

Michael

Age 34

• Grew up in a non-addictive environment
• Lost his father when aged 14
• Began drinking — developed pancreatitis by aged 17
• Dependant on drugs by aged 20
• Asked to leave family home aged 22
• Slept in a car for several months
• Lived in first stage hostel for six years
• Several attempts at detox/rehab overtime
• Lived with family and friends for last eighteen months
• Reduced his drinking in last months of his life
Case study 2

Joyce

Age 45

• African-American

• Left stable job to care for her dying father

• Increase in alcohol consumption post-bereavement

• Found unconscious in the street and admitted to hospital

• Referred to homeless shelter

Dice, J. Homelessness as Trauma.
Case study 2

Joyce

“I felt hopeless and helpless. I was just watching my father waste away. Before my father passed, I called myself a social drinker. When he died, there was nothing else in life. I had given up my job of three years working with mentally handicapped adults. I had given up my apartment.

I arrived back in D.C. on inauguration day, and that night, I drank until I passed out. I woke up in Howard University Hospital. I didn’t have a dime.”

Dice, J. Homelessness as Trauma.
Case study 2

Joyce

“At first I didn’t want to talk to anyone. I just wanted to know if the programme would work. I spent time at the shelter looking around and listening. One day I heard a lady say she was hungry. She smelled. A staff member gave her a comb, a toothbrush, soap, lotion, a towel and a washcloth. Then she showed the lady where she could take a shower. When she dried off, they got her some new clothes. I looked at that transformation, and I said, I’m going to stay right here”
Homelessness and bereavement

People who are homeless

• Will inevitable experience repeated bereavements

• Many will use self-destructive methods of coping post bereavement

• Have complex needs, and struggle to access or engage with services

• More at risk of isolation, loneliness, depression, suicidal ideation

Lakeman, R 2011. How Homeless Sector Workers Deal With The Death Of Service Users
CARIS, 2010 Bereavement and Homelessness; Vulnerable People Coping and Struggling with Loss
Case study 3

Sherrie

Age 34

- Introduced to drugs at an early age
- Lost her father in her late teens
- Dependence on drugs spiralled post-bereavement
- Breakdown in relationships led to life on the street and ‘crack houses’
- Children cared for by her mother
- Referred to first stage hostel
- 13 year old daughter fatally injured in a car accident
- Self harming
- Referred to bereavement support
I was self-harming. I didn’t want to see or talk to anyone...

when I first heard about the service I didn’t want to speak to him. I was out of my mind with grief and I just thought ‘what's the point’. When I did eventually see him though, I found myself opening up to him. It was really hard at first, but he didn’t pressure me and then I just felt my emotions all coming out. I’d been holding so much in for all these years. I’d never got over my dad’s death, I’d never dealt with it and when my daughter died I didn’t think I’d be able to carry on, I didn’t want to carry on...

...I still feel terrible but I’m still here aren’t I? That’s the difference it has made. It literally saved my life
Case study 4

Margaret

Age 65

- Lost her mother when aged 15
- Placed in a number of care homes before running away
- Lost contact with her family
- Street homeless for over 20 years
- Overtime became dependant on alcohol
- Living in first stage hostels past 10 years
- Deep rooted sadness at the loss of her mother – personal artefacts stolen – huge impact
- Would like to consider visiting her mother’s grave in Scotland
Homelessness and bereavement

Staff

• Regularly exposed to the deaths of residents during the course of their work

• Carry particular hopes and aspirations for service users that are shattered when they die

• Discovering a resident’s body can be particularly traumatic

• Manage the best they can the behaviours and maladaptive coping strategies of residents

• Experience the full range of emotions

Lakeman, R 2011. How Homeless Sector Workers Deal With The Death Of Service Users
CARIS, 2010 Bereavement And Homelessness; Vulnerable People Coping and Struggling with Loss
Homelessness and bereavement

Staff

Positively framing the death of a service user enables staff to be able to continue working in their roles with service users with enthusiasm, optimism and compassion

Lakeman, R 2011. How Homeless Sector Workers Deal With The Death of Service Users
Interventions
Interventions

• Must be bespoke and individual
• Flexible and creative
• Often provided outside the more traditional mode of delivery
  This may include:
  – When and where you meet
  – Time boundaries
  – Substance misuse
  – Levels of concentration
• May require more specific focused psychological interventions
Interventions

• Trust – It can take time to build up a relationship with people

• Continuity

• Positive regard and respect

• Non-judgemental approach

• Rituals and celebrations
Bereavement

What works

• Multi-agency approach which includes
  – Co-operation and collaboration between agencies
  – Combination of approaches

• Bereavement training and support to frontline staff
Interventions

Autumn 2012 – bereavement volunteers trained by CRUSE (Kensington & Chelsea)

Feb 2013 – Launched pilot in-house bereavement service

• 1-1 & group support to staff and residents
• Assist in the planning of celebrations and memorials
• Co-facilitate training for staff and de-briefing sessions
• Initiate mixed study to support residents bereavement support needs
Homelessness and end of life care

Practical information and tools to support the needs of homeless people who are approaching the end of life, and those who are bereaved

Peter Kennedy, Christina Sarafi and Wendy Greenish
Question

• Consider one idea that you can take back to your workplace that will enable homeless people benefit more from your service. It’s important when thinking about it to consider those least likely to engage.

OR

• It might be something that you are already doing that is working well
Thank You

Further resources:

url: www.mungos.org /endoflifecare
email: endoflifecare@mungos.org