During December 1-4, 2015, the Coalition for the Homeless of Houston/Harris County held three focus groups comprised of women staying at emergency shelters specifically designated for those who have experienced domestic violence (DV). The purpose of these focus groups was to obtain clients’ input regarding their experiences in emergency housing and their perceived needs in order to get into and stay in permanent housing.

Focus groups were held in English at the Houston Area Women’s Center (HAWC), Bay Area Turning Point in Webster (BATP), and the Bridge in Pasadena. Participants (all female) were asked to fill out an anonymous, short demographic survey before the interviews began. Results are shown in the table below:

<table>
<thead>
<tr>
<th>Facility</th>
<th>HAWC</th>
<th>BATP</th>
<th>Bridge</th>
<th>Total group</th>
</tr>
</thead>
<tbody>
<tr>
<td>No. participating</td>
<td>9</td>
<td>12</td>
<td>11</td>
<td>32</td>
</tr>
<tr>
<td>Age range (yrs.)</td>
<td>25-50</td>
<td>28-59</td>
<td>31-57</td>
<td>25-59</td>
</tr>
<tr>
<td>Race/ethnicity</td>
<td>56% African-American; 22% Caucasian</td>
<td>92% African-American; 8% Hispanic</td>
<td>18% African-American; 27% Caucasian; 36% Hispanic; 18% mixed race</td>
<td>56% African-American; 16% Caucasian; 19% Hispanic; 9% mixed race</td>
</tr>
<tr>
<td>Length of stay in facility (range)</td>
<td>9 days to 3 years</td>
<td>4 days to 12 months</td>
<td>4 days to 6 years</td>
<td>4 days to 6 years</td>
</tr>
<tr>
<td>% with children</td>
<td>88%</td>
<td>73%</td>
<td>91%</td>
<td>84%</td>
</tr>
<tr>
<td>% have their children living with them</td>
<td>63%</td>
<td>75%</td>
<td>60%</td>
<td>65%</td>
</tr>
<tr>
<td>Number and age range of children living with moms</td>
<td>1-5 children; 1-19 years</td>
<td>1-3 children; 9 mos to 19 years</td>
<td>1-2 children; 7-20 years</td>
<td>1-5 children; 9 mos to 20 years</td>
</tr>
<tr>
<td>Education level</td>
<td>11% some high school; 22% high school or GED; 33% some college; 22% college graduate</td>
<td>17% some high school; 50% high school or GED; 33% some college; 17% college graduate</td>
<td>9% some high school; 36% high school or GED; 45% some college; 9% college graduate</td>
<td>9% some high school; 38% high school or GED; 41% some college; 13% college graduate</td>
</tr>
<tr>
<td>Currently employed</td>
<td>25%</td>
<td>25%</td>
<td>45%</td>
<td>31%</td>
</tr>
</tbody>
</table>
General Impressions:

Consumers in the focus groups were in general eager to talk about their experiences. One client at the Bridge left the room after 15 minutes without contributing to the discussion. One client at HAWC stayed for the entire period but did not contribute. All other participants contribute freely and honestly to the discussion. Several clients from all three shelters approached the interviewer following the focus group to express their appreciation with the ability to express their thoughts and wished that such meetings were held with staff of the DV shelters.

Experiences with homelessness

Approximately half of the participants were experiencing homelessness for the first time. For those for whom it was not the first time, many had stayed previously at other domestic violence shelters. A few had been on the streets, in abandoned houses, or living in their car. One consumer had come to Houston from Dallas, one from Laredo, and one from New York City; one had been escorted from Portland, fleeing her abuser who is a cop. Comments included that some homeless shelters treat you worse than being on the streets. Specific shelters mentioned were Star of Hope (you have to sleep on a map and staff are rude), the Door in Humble (felt judged) and Mission of Yahweh (rudeness and insensitivity to needs).

Few of the participants had stayed at non-DV shelters. Two consumers had stayed at church shelters (Texas and California) while another had stayed at a Salvation Army shelter where everyone was grouped together and they had to vacate the building by 6 am so she did not feel safe. One client said she felt unsafe at a non-DV shelter because staff were “militant”.

Most participants said they would not feel safe at a non-DV shelter, although it depended on their personal situations regarding their abuser. Staying in a city away from their abuser and having staff trained in the needs of those who have experienced DV would help them feel safer. One consumer asked “how can you get service properly if staff are not specific to abused population?” and another staying at the HAWC commented that “DV offers specialized and secure services“ and liked the presence of security cameras throughout the campus. A consumer at BATP said that she “saw other families in the same predicament and realized you were not alone” while another commented that a non-DV shelter must be safe for kids.

Asked about the reasons for their homelessness, most attributed fleeing domestic violence and the income loss that caused although other reasons mentioned included hospital discharge, medical situation (sometimes due to the abuse) making it difficult to work, not enough income to pay rent, not having a job or losing a job (in one case due to harassment by abuser). One participant became homeless when she aged out of the foster care system.
Participants were asked if they had had any negative experiences with services or shelters. A prominent theme was staff issues. Many talked about verbal abuse, insensitivity, feeling judged, and too many rules. They were afraid to go to staff with problems because of fear of being kicked out of the shelter. If they come to staff with issues, they feel like it gets “swept under the rug.” One said she felt like she was “walking on eggshells” all the time because a rules violation could get you kicked out. One client said she was “here for fleeing violence and expect the staff to have an understanding attitude”. She wasn’t here because of a job loss and did not have long standing homelessness and felt she shouldn’t be judged. It was mentioned that some staff at each site are more helpful than others. Other staff-related concerns were that clients didn’t like staff complaining about their jobs and felt that was unprofessional. One said she didn’t like being on a time schedule all day and another mentioned the curfew – felt like they were being treated as children.

Another prominent theme expressed was that of relationships. Living in shelter prompted feelings of loneliness which reminded the client of her condition in the abusive situation. A client at BATP said that roommates are moved around too much and that because of this, established relationships are lost. Aspects of community living frequently came up including hygiene issues and different personalities that may not get along. One client said she misses her church and her former life.

Concern for their children was another theme. One said staff felt it was ok to “treat children violently” and one told stories of her child with anxiety disorder who was mistreated at a shelter. Several consumers said they felt that their children were “regressing” at the shelter. One client felt her children were safer staying with a friend than in the shelter.

Personal safety also was a worry with clients mentioning theft at the shelters and a lack of privacy. They didn’t like other people having access to their rooms. Temptations as an addict when other residents use drugs or alcohol are also a problem. There was a feeling that some in the shelter were not abused but were using DV system because they are in addiction.

Specific situations were mentioned. A client had a negative experience at The Door, filed a complaint and felt she was mistreated and judged. She also felt she and her biracial child had been discriminated against and mistreated, including a conflict over homeschooling. One client fled domestic violence in another city and was brought to Mission of Yahweh – she did not feel welcome there and left for another DV shelter. Another client called the Montgomery County Women’s Shelter and had to keep telling her story over and over again without any offer of help.

Family situation

Over 80% of the consumers had children and two-thirds of those with children had their children staying with them. Of those who did not have their children with them, the children of some were in CPS
custody, some had children staying with the father/abuser, and one had children staying with her abuser’s parents (although she felt they were safe there). Other children were staying with friends. Concern was expressed that the DV shelter was not a good environment for children, especially those with special needs and that children regressed at the shelter.

Some of the clients with school-age children interacted with their school homeless liaison and felt they were helpful while others were not aware of this support. Concerns expressed were difficulty in transportation to school from the shelter and while they receive some assistance with clothing at the beginning of the school year there may be needs later in the school year but no way to receive that help. One client was not aware of this potential support and was informed about how to seek this assistance for her children.

When asked who else besides their children living with them relied on them for support, family members such as disabled uncle and an adult child in college were mentioned as needing financial assistance. One client said her grown children rely on her and she wishes they would “let me take care of me”. Other support needs mentioned were other clients or roommates in the shelter who rely on each other for emotional support. One client spoke of her service dog, Bam-Bam.

**Challenges in obtaining permanent housing or a more stable situation:**

There were many challenges and barriers mentioned in seeking permanent housing. Not surprisingly, financial challenges were the most common. Several consumers pointed out that their abuser did not suffer at all but they were forced, through no fault of their own, to leave the situation without any resources except the clothes on their back. Security deposits required to start renting an apartment is a big barrier and even once an apartment is obtained, there is a need for furniture and other household goods that were left behind. Three consumers were told that to qualify for rapid rehousing, you must have a savings account or income from work. One participant stated that The Bridge policy requires the client have a savings account before enrolling in rapid rehousing.

Several consumers had recent disabling conditions and were waiting on obtaining disability status which can take a long time. Some of them could work part-time but that would disqualify them from receiving disability payments.

Consumers need an income to pay for gas and travel expenses and money to buy things for their children that weren’t available at the shelter. One consumer commented that “SSI is not enough” to cover expenses and another that a minimum wage job doesn’t pay enough to cover expenses, particularly if you have children. This is a particular problem for those who are disabled and can’t hold a full time job.
With all these financial needs, concern was expressed about the limited monetary resources available to help those who have experienced domestic violence. Even when funds are available, they are often restricted to specific situations.

Other challenges included obtaining identification due to fear about releasing their social security number and other personal information in order to stay “underground” (particularly when abuser was a cop) and child care needs so the client could job hunt and/or work, job training, and educational support.

A different type of challenge brought up by one client was not being able to trust anyone due to their history of domestic violence. This leads to another kind of isolation following the isolation of domestic violence and a different kind of “battering.” Another client echoed the same theme saying that you need people you can trust and a safe place to cure this isolation.

**Services that would assist getting into or staying in permanent housing:**

Consumer had many suggestions for services that would be helpful in being able to leave the shelter and get into permanent housing. The top suggestions revolved around financial resources. Many of these involved job training and placement. There was a lot of discussion about needing permanent job assistance. Clients expressed that more job training and educational resources (e.g., GED) would help them obtain a job. Also mentioned were better workforce services and more information about requirements (e.g., those needed to use workforce assistance programs). Resources to help prepare resumes would be useful. There were concerns about filling out applications with the address of a DV shelter and resulting stigma. Other financial concerns included:

- Rental assistance and a clear explanation of rental assistance programs. Six to 12 months of free rent would help them get back on their feet. More affordable housing also was mentioned.
- Furniture and household good supplies. Paying security deposits often depleted funds so that these items could not be purchased.
- Ride card for cabs for employed clients
- Income assistance for disabled persons on SSI
- Medical/dental services – particularly important to be able to work
- Clothing (mostly plus sizes as donated clothing is often in smaller sizes)
- Food assistance

Safety was another theme. A major concern was the need for safer housing situations. Several clients at The Bridge who were in rapid rehousing at Destiny Village felt that the situation was potentially unsafe as there are no security or gates. Some places have security cameras but they don’t work. There also were worries about gang violence and drug use, particularly when children are present.
Participants at The Bridge were very vocal about the limited time period that they were allowed to stay in DV shelters. They felt that 90 days was not enough to “heal”. While some clients were allowed to extend their stay, it wasn’t clear when this was going to be allowed in individual cases. There should be an extension for those who have an intervening emergency circumstance at the end of their stay. Consumers at HAWC also expressed this theme as well stating that they needed non-time limited or longer term housing.

Another theme expressed during the focus groups was the need for more counselors who are educated in domestic violence and homelessness and ongoing training in these areas for all staff. More time with the counselor for both parent and children was mentioned. A consumer at The Bridge did feel that the staff was highly professional and helpful. One client expanded the need for training to include better community awareness about domestic violence and homelessness to increase understanding of their situations.

Needs of their children was another theme. Childcare was frequently mentioned as was the need for good school situations that were accessible, supportive, and safe. For older children, a college program for children would be useful. As mentioned above, safety of their children in housing that had gang and drug violence was a concern.

Another theme mentioned was that of legal help. A recurring theme was the need for a second chance program to overcome convictions or evictions and assistance with CPS cases. One client said that legal aid wants clients to represent themselves and several said there is a gap for those who need help with family law. There was a recurring theme that children need to be shielded from the abuser. Some children were still with the abuser because the abuser has income and the mother does not. Also helpful would be assistance obtaining identification.

Transportation, particularly at The Bridge which not near a bus route, was listed as a major need. Other resources listed by those staying at HAWC that would be useful are longer hours at the computer lab, Wi-Fi, and access to a microwave for food preparation when meals are missed.

Several of the consumers were not aware of resources available and felt that they needed better education about resources and navigation to and through those resources. Clients needed SOAR but were not aware of the program.

**Services received**

There was some overlap with services received and those needed. Most clients received case management and support services with mixed reviews. Some clients said they had very good case managers while others did not – it depended on the particular counselor assigned. One consumer said
her counselor didn’t make recommendations or address issues. Other services included psychotherapy, anger management, suicide prevention, and DV and addiction support groups which clients on the whole felt useful. Parenting and self-esteem classes were also specifically mentioned as useful.

Some clients had received legal assistance but as mentioned above there is a gap for family law and custody. One client specifically mentioned her gratitude to the BEACON for providing shelter so that she didn’t have to sleep outside and also said that BEACON law assistance was helpful. A client at The Bridge said she had taken a class in IT at San Jacinto College which resulted in a job. Another client received legal help from the Beacon to expunge a criminal record. Other services received were clothing (Catholic Charities and United Way were specifically mentioned), food support, dental services, and resource guides.

Participants who had not sought help from public or non-profit agencies were asked why they had not. Security was mentioned as a reason and concern about staying “underground”. There was also anxiety and the need to keep telling your story over and over again which prompted reliving the abusive situation. Other reasons for not seeking assistance were the number of strict rules, getting the “runaround” which directed you to the same places over and over again, and being “cooped up” with many people.

Other items mentioned:

There was a major theme of feeling judged by staff and by society. Several clients mentioned that they were at the shelter through no fault of their own and had to leave everything in their former life behind while in many cases, the abuser was free and had suffered no change in lifestyle. Clients wanted to hear more about the continuum of care and what resources are available. They said they needed advocates and showed an interest in self-advocacy. One client said she feels stupid because she graduated from a DV program but went back to an abusive relationship and ended up in another DV shelter.

Although personality differences and problems of communal living were mentioned as problems, a great deal of caring was shown by those in the focus groups. They frequently affirmed each other verbally and in many cases, physically, with hugs and back-patting. Clients frequently shared information they had about resources with others in the group.

Recommendations:

There are many services that could help women who have experienced domestic violence. Prevention is, of course, the best strategy and community evidence-based programs to limit instances of intimate partner violence should be implemented. Awareness and understanding of the issue should be more
widespread. Once abuse has occurred, however, there are several recommendations that women staying in DV shelter made that could improve their situation and get them into permanent housing. DV staff training was a major theme of the focus groups. Staff need to be specifically trained in domestic violence issues and there needs to be a sufficient number of therapists and case managers so that clients (and children) can get the attention and help they need. Cultural diversity and sensitivity training for staff also would be beneficial. Women need to feel safe and respected in the shelters and anything that can be done to increase privacy and self-determination would be useful. Special programs for children would help the women feel more assured about having their children with them in the shelters.

Financial needs of the women in DV shelters are great and job training and educational programs are needed in order for them to obtain work and the income they require to acquire and stay in permanent housing. Childcare and transportation are needs as well, both while looking for work and when employed. If a client does have a car, she needs money for gas. If not, cab vouchers would be helpful. Clothing in plus sizes is needed since many women left their abuser with just the clothes they were wearing.

A frequently expressed need was that clients should be able to stay longer in DV shelters in order to get back on their feet. Their circumstances are complex and there is anxiety about being kicked out of DV shelters either because of timing out or because of rules violation. Affordable apartments in areas with good schools and no gang or drug use in evidence are needed for those getting back on their feet. Safety is a particular concern of this population and security guards and gates in the permanent housing are required. A “second chance” program for women who have convictions or have been evicted would be beneficial and rental assistance or full-payment for up to 12 months were stated as something needed to stay in permanent housing.

There are other needs as well. Legal assistance, particularly family specialists, to help women get custody of their children, obtain identification, and disability status, was a major theme. Medical and dental care is needed as well as awareness of resources that are already in place for those who have experienced domestic violence.

Those who have suffered intimate partner violence are a unique population among those experiencing homelessness. The women interviewed had some of the same problems but also particular barriers and needs for obtaining housing and returning to a stable life. Security is one major issue and the anxiety caused by the fear of being found by the abuser is always present. One woman said that she felt like “her life was in someone else’s hands”. Focus group participants expressed that it takes a long time to get back on your feet and you need a “stable environment” to learn to live “outside of the abusive relationship”. Most had children and so concerns about their welfare, whether with them physically or not, were always present. Discussions with staff, perhaps mediated by an outside person, would be
helpful to air concerns while staying in the domestic violence shelters. Other needs as outlined above will help these women get on with their lives.