



Commentary: A Consumer Perspective on Parenting While Homeless

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It was never a goal of mine to be homeless, but it happened. I prided myself on taking all the necessary steps to ensure my children's safety and provide them with a nice, loving place to call home. I was able to do this for my first, now deceased, child and planned to do the same and better for my second child. Unfortunately, domestic violence and broken systems of care prevented me from accomplishing this. Instead, my daughter and I endured homelessness for two years.

Homelessness and the services and programs we were forced to rely upon affected the quality of care I was able to provide for my child. There is nothing normal about raising a child in this environment. I did my best, but it wasn't easy. Today, I try not to think about the precious time we lost when we were homeless. It really hurts that my family and I missed out on enjoying so much of her infancy.

Less than a year after my older daughter's death, I met and married a man I barely knew. I realize now that I was clearly not in a frame of mind to have made such a critical decision. My family and friends warned me not to go through with the marriage, at least not so soon. I did not know the marriage would be the major cause of the years of homelessness that my daughter and I would face.

Abuse plagued my marriage and our home. When I finally had enough, I filed charges against my husband for domestic violence. He was arrested right after he left my house. His trial was lengthy, and I was the prosecutor's main witness. While he was in jail, I continued to work but had to take off many days to be in court.

At that time, I was living in affordable housing. I followed the rules and regulations and had been in good standing with the housing authority for 13 years. Because my husband would not give me his pay stubs, the housing authority withdrew my voucher for affordable housing. Without a voucher, I had to pay market rent for months. I was not able to pay the rent without the subsidy of about \$200 to \$300. I found myself alone with a young baby and no place to call home. With few options, I moved in with my family to save money.

I tried relentlessly to find a home where my daughter and I would be safe. In an attempt to secure housing, I enrolled in a domestic violence program. During the initial telephone interview, the intake operator verified that I met the criteria for a domestic violence shelter. She then told me that it was protocol to remove me from the area. I took a leave of absence from my job of seven years because the shelter was so far away. Because I did not have paid leave, I had to apply for cash benefits through welfare. I had hoped I would never have to enroll in welfare as long as I was able to work. That dream was now broken too.

Many things about this experience were difficult. The interview process was very dehumanizing. The pain of everything that had happened to me was like an open wound. Retelling my story day after day is very upsetting. Yet this is the intake process you have to go through in order to be accepted into shelter. Once an interviewer told me, "she did not believe my story" and that my intake interview was over.

The next obstacle was the domestic violence protocol that did not allow me to be anywhere near my family or my workplace. They believed it was necessary to remove us from any familiar places or any area where friends, relatives, or acquaintances lived. I repeatedly tried to explain that my husband had left the area. I no longer was afraid that he would hurt me, but I was concerned about him taking my baby daughter. If I answered "yes" to ever having known someone in a particular city or town, I could not go to a shelter in that area. I have lived in many parts of the state. Because I come from a large family, I know or am acquainted with many people, so I would answer "yes" to questions about who I knew that lived in a specific area. Some of these people were from my past or were just acquaintances or people I knew from work. Some knew my family, but didn't know me. Even providers of care were considered a potential danger. My second daughter was born prematurely, and I wanted to remain connected to her primary care doctor. My requests to stay close to supportive friends and family fell on deaf ears. If I wanted shelter, rules were rules. My family and coworkers were a good support system for us, but were helpless because of the distance. All familiar and supportive people in our lives were no longer accessible.

The only thing that could have prepared me for shelter living would have been spending time in jail. I compare life in a shelter to life in jail because as an adult, I had to follow rules and regulations as if I had committed a crime. You have to listen and obey rules that you otherwise would not face living on your own. As an adult parent living in shelter, I had staff younger than me telling me what to do.

We no longer had the physical space for my daughter to even crawl and develop in other ways. We were limited to a confined, small, cold room. I remember sneaking a heating pad into our bed because the heating system was broken. Electrical or other heating devices were against house rules even though it was in the dead of winter. My daughter had a few toys and baby equipment, mostly to try to enhance her development. They also helped to occupy our time and provide us with some normal activities.

My daughter's life was nowhere near normal. She needed familiar people around her—people who she could play with and would hold her—instead of strangers in the shelter. We needed family and a home surrounded with love, not fear. It would have been so much better to care for my child with the support of my family. However, I was too far away, and they were not allowed to know where we were. I was sinking fast into depression. I knew

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this could be even more damaging to us both. I needed to be in the presence of the safety and security of loved ones.

I eventually found a transitional housing program that was close enough for me to return to work and for my daughter to return to daycare. We had finally come closer to a normal lifestyle and a break from feeling emotionally beaten down. Yet, we still lived in the company of many other families and had to obey strict rules in the housing program.

When you are homeless, shelter programs mandate many things that you have to do. Although we were only home during the evenings, we were required to attend house meetings. I found this difficult because I had no choice but to leave my child in the care of the organization's volunteers. This did not sit well with me. As a parent, you are supposed to be able to choose who cares for your child. In shelters, this becomes the choice of the program staff.

The meetings usually lasted for an hour or two, about twice a week. They pertained to issues in the house or topics that the director thought would be useful to us as parents. I did enjoy some, but it was not my choice to attend. Yet I went, because they were mandatory—although there were times when neither my child nor I felt well. Many of the women complained and tried to get out of the meetings. Required attendance at the meetings often depended on their status with the staff and whether or not they were favored. Many of us were afraid to speak out or complain. We did not want to give any reason to receive a violation or lose the only place we had to call home.

As we made our way in and out of temporary housing programs, it became clear that fights among children were the biggest cause of conflict among parents. This could easily result in having to leave the program. I witnessed mothers and their children leaving and I tried hard not to let it happen to us. However, I eventually faced conflict with a parent about my child. Regardless of our efforts to follow the rules and participate in the program, we were told to leave.

Realizing that we had nowhere to go, I became very ill. Respiratory attacks can sometimes occur because of emotional stress. My breathing was so bad that I had to go to the hospital. Unfortunately, it was on a weekend and the staff would not call my doctor or the social worker, both of whom knew my housing and medical situation. The medicine I was taking for my asthma had many side effects. One had to know my history to understand and treat the symptoms.

While I was hospitalized, my daughter went into foster care until my family could be located. I recall the hospital staff snatching my daughter from my arms and then everything went blank. My family had to go to court to get my daughter as I lay in the hospital in a coma. I found out weeks later what happened to her. I still have no idea where she was for one whole weekend during that time. When I got better, I had to prove to the Department of Social Services that I was a worthy parent in order to have the case closed. I really would like to forget this part of my life. It really is too painful.

My daughter and I are currently on the road to recovery. We were fortunate to have met some compassionate social workers, service providers who went above and beyond, my caring family doctor, and others in the field who respected my drive to achieve and move past the trauma I experienced. They helped me turn my tragedies into empowerment and healing.

I gained respect and felt supported when I chose to return to school. I also felt supported to do all that I could at home to ensure my daughter's education. It took quite a bit of effort to find schools that focused on her strengths and not on her homelessness. Homelessness has a very negative impact on children. However, surviving means that we beat the odds and successfully moved on. We overcame many obstacles, and I do not want to be criticized or stigmatized because I faced them. My experience is one that I will share to show my child and others that all things are possible if you can make it through the rough times.

I have found a new passion. I graduated with a Human Service degree in May 2008 and plan to work diligently to change policies related to homelessness. I want to help prevent senseless family homelessness, especially when prevention is possible and much less costly.

I would like to see programs move away from "one size fits all" service models. Parents who face homelessness have a wide range of strengths and needs. Programs need to create individualized services plans to support parents, children, and families. To do this well, it is critical to involve consumers as partners in their own treatment planning and recovery.

Homeless service programs would benefit by moving away from dehumanizing language. Labels like "case manager" or "client" are not helpful because they set up a hierarchy. The labels assume that "clients" are passive recipients of services, and that "case managers" or other clinicians know what is best for them. Anyone seeking services for their families would want to contribute to treatment planning for their children and themselves. People who are homeless are no different.

Labels can also hurt children when they are in school. As an involved parent in my child's education, I have witnessed discrimination. Not only have I seen separation of children who are or have been homeless, but my child was a target of such discrimination. Once a child's past or present homelessness is discovered, some school personnel expect your child to perform below average. They assume the parent is under educated as well, and the cycle of broken systems continues as these children are left behind.

Perhaps with fewer labels, more people would recognize that homelessness is a situation, not a personality trait. It does not make a person any more ignorant or any less human. It does not make a child any less able to learn or succeed. Most importantly, it does not make a person any less capable of being a loving parent.

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