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The Impact of Homelessness on Childhood Stress and Resilience

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The Impact of Homelessness on Childhood Stress and Resilience

Children are remarkable in their ability to mitigate stress and respond with resilience, but stress still comes with consequences. Homeless children are particularly vulnerable to the toxic effects of stress. Research has shown that stress is cumulative and builds up over time. Thus, a child who experiences daily hassles and small struggles may be more anxious, worried, or troubled than another child who experiences one major trauma (Berger 414). Stress is associated with high levels of cortisol, which are released by the hypothalamus of the brain. Cortisol is a response meant to help the brain and body react. Some stress can help with development, such as meeting new people or going to new places. However, in overwhelming amounts, cortisol can destroy part of the hippocampus and damage the brain permanently (Berger 251-253).

This semester, I volunteered at Restoration Urban Ministries (RUM) in an after-school program called Homework Hangout. I did this once a week, tutoring kids in elementary and middle school. RUM’s Homework Hangout is an hour long, with a half hour dedicated to homework and the other half to play. The kids are rewarded for their attendance, attitude, and effort with books, snacks, and prizes. The program has plenty of books and board games, which are fun and provide mental stimulation. The facility is clean and well-kept.

The kids in this program are from families who stay in Restoration Urban Ministries Housing. RUM is a Christian, non-profit organization which helps to provide aid to people who are struggling to get back on their feet. This includes people from all different backgrounds, including single parents or people with drug addictions. RUM provides transitional housing,
classes, workshops, and counseling, in an effort to prepare program participants to move on and gain a more stable living condition. The program also offers a food pantry, as well as clothing and goods distribution. As part of a transitional housing program, the children that I tutored were particularly vulnerable to the damaging effects of stress. The situations that led them to stay at RUM indicated that their home life is unstable or disruptive.

During my time tutoring, I found that getting to know and work with the kids seemed less like work and more like recreation. Many of them truly had positive attitudes despite the high probability of a chaotic or troublesome home life. I found that they were attracted to energy, laughter, and encouragement; while reprimands seemed to bring down the mood. Most of them were willing to do their homework and open to my suggestions on how to improve. The kids all seemed to know and be friends with each other. Many of them were siblings or went to the same school. This made the atmosphere welcoming for those who attended.

Although my experience tutoring was overall very positive, homelessness in children and families across America is a much more serious topic. According to a 2011 survey, there are more than 1.6 million homeless children in America (Haskett et al. 119). Additionally, a 2012 survey reveals that more than 6 million children in America live in poverty—about 22% (Thompson and Haskins 2). These striking numbers reveal the tremendous problem of homelessness that has been a major issue since the 1980s (Grant et al. e1).

Homelessness can have negative, long-term impacts on children in the three domains of development. These include the biological/physical, cognitive, and psychosocial domains. The first domain of development, the biological domain, is one of the most obvious, surface-level problems with homelessness. Chronic stress can cause elevated blood pressure and heart rates, which can make the immune system more vulnerable (Thompson and Haskins 3). Additionally,
severe hunger is more common in homeless children than in housed poor children (Grant et. al e4). According to Dr. Burke Harris, stress causes the release of hormones such as adrenaline and cortisol. These hormones have a physiological effect on the body. Your pupils dilate, airways open, and heart pounds. This response is helpful in a fight or flight situation. However, the system becomes harmful if it is activated nonstop, as it is in children who experience the trauma of homelessness. This can damage the brain in areas such as the prefrontal cortex, which is important in controlling emotions and impulses, as well as learning.

Children of families in poverty tend to have worse health in general, due to their decreased access to health care. This is also a consequence of living in crowded neighborhoods. These children are more likely to be exposed to physical harm as well (Thompson and Haskins 2). Children who must constantly struggle to fulfill their basic physical needs—food, safety, health—have less energy to focus on areas secondary to survival. These include academics and relationships.

During my time tutoring the kids at RUM, they seemed well-fed, thanks to RUM’s program services. However, in one instance, a middle-schooler that I tutored complained of skipping meals because she hadn’t been hungry at the time. This had a serious consequence on her motivation to complete her homework. She was also frustrated and more easily upset. This is only one example of how unmet physical needs can extend to areas such as attitude, beyond the biological domain.

The cognitive domain of development suffers alongside the biological. In a study by Haskett, et al., the researchers used a sample of 328 children between the ages of 2 months and 6 years, with about half boys and half girls (121). These children took a test to assess developmental progress in their language, motor, and cognitive skills. The results showed that
elementary school aged children scored lower on the test in all areas of functioning in comparison to the control group. Toddlers also scored lower on communication skills. In fact, 81% of these children potentially had a disability (122).

Another area of cognitive development that suffers is academic performance. According to Haskett, et al., homeless children are generally found to have poor school performance and academics. Lower intellectual functioning and developmental delays are also common. In one study of 88 sheltered children, the average IQ was 89.4, which is below the normal range of 90-110. Additionally, 60% of these children were found to have significant language delays. Verbal and language developmental delays are particularly common in homeless children. Both their expressive and receptive vocabulary suffered. Many of these children were also enrolled in special education (120).

While I was tutoring, I noticed that sometimes, the kids did not want to do their homework, particularly if it was difficult or would take a long time. In some kids, their reading level seemed below average. One middle schooler stuttered over longer words and read with a monotone expression, ignoring the importance of punctuation in speech prosody. Other middle school aged children seemed to prefer picture books or graphic novels over chapter books with longer and more complex sentences and paragraphs. These academic issues could be consequences of stressors associated with their housing situation and home life.

Lastly, homelessness can also take its toll on the psychosocial domain of development. Stress caused by homelessness can negatively affect memory, motivation, attention, and self-regulation, causing hyper-vigilance. Children may have problems with impulse and emotional control (Thompson and Haskins 3). Psychosocial problems may also be manifested in children’s relationships. To further understand this topic, I talked to Toronda McFarland, the Children’s
Program Coordinator at a local support organization that provides services to individuals who are homeless or victims of domestic violence. According to McFarland, homelessness can have different effects on relationships. Some children can become “disrespectful, aggressive, or threatening” to their parents. Others can have healthy relationships full of respect.

Similarly, Masten et al. says that homelessness increases the chances of having disrupted friendships. Homeless children are more likely to have behavior problems as well (202). At school, this could affect their relationships with peers. Families that live in poverty also tend to deal with transitions more frequently. This can include moving and finding new schools and neighborhoods to integrate into. Constantly changing, inconsistent environments cause children’s relationships with friends and peers to suffer. They are unable to find the stability that comes with staying in a home for an extended amount of time (Thompson and Haskins 2).

Friendships are important, especially in the adolescent years. Friends can help boost self-esteem and build ethnic identity, if the friends are from the same background (Berger 520). Friends also teach each other how to learn and behave. Social skills such as these are often best learned by peers instead of adults, who participate in a very different culture from children (Berger 429-430). While I was tutoring, I noticed that a benefit of the transitional housing program was that the children all seemed to know and be friends with each other. As explained, healthy peer relationships and stability are important in mitigating stressful experiences.

The psychosocial domain also extends to mental illnesses. According to Haskett, et al., homeless children are 4.1 times more likely to meet the criteria for behavior disorders (120). These researchers conducted a study in which parents filled out a social emotional questionnaire about their child’s mental health (121). They found that 24.6% of parents were significantly
concerned for their child’s mental state. These children exhibited signs above the threshold level for referral to mental health services (122).

The multitude of problems and issues correlated with homelessness are well-established. However, some children who experience housing instability demonstrate an astounding ability to perform well in areas that other children in the same situations fall short. This ability is called resilience. Resilient children are seen in studies, based on the variability in results. While homeless children on average perform poorly on academic subjects such as math or reading, some children can do very well. One study showed that out of a group of students considered homeless or highly mobile, 45% of them performed average or above average in math and reading (Masten, et al. 203). Another study on developmental functioning again demonstrated a wide range of results within the group of homeless children, indicating that some children are more competent and resilient than others (Haskett, et al. 122).

One defining characteristic of resilient children is executive function, as identified by Masten, et al. Executive function relates to cognitive abilities such as being able to effectively guide memory, attention, and behavior. Executive function skills can predict success in Kindergarten and first grade more reliably than other methods, such as the IQ test. This skill set enables children to create healthier relationships and demonstrate good behavior (Masten, et al 204). It is also an important skill in planning ahead. Being able to organize and prioritize your thoughts for better management are signs of advanced executive functioning (Berger 384). Executive function is important for children experiencing the stress of homelessness, to help them develop resilience and mature in the three developmental domains.

Resilience is also affected by a child’s personality and temperament. Some children are biologically more disposed to control their emotions and regulate stress, while others may have
difficulty with these skills (Berger 210). Resilience may rise more effortlessly from children who are more temperamentally inclined; however, I believe that resilience can be developed in all children, despite the genes they were born with.

While stress can have serious consequences, researchers have discovered that there are ways to alleviate stress and increase resilience as a healthy way to cope. One major influence on helping to prevent and mitigate stress is a child’s relationship with his/her parent. According to Masten, et al., children have greater academic success when their parents are very involved in their school (202). Additionally, parents are crucial in boosting their child’s executive function, which helps to predict resilience. Parents should respond to their children in a way that is sensitive, supportive, and positive. This promotes academic achievement and executive function over parents who are negative or critical. Parents have the power to keep their children motivated, staying on track with behaviors and attitudes. (204).

Intervention can also be much more society-focused. The implementation of services such as teaching parents how to be self-sufficient and independent are key. Other practical services are also needed. These can include programs that help homeless people find housing, get health referrals, receive job training, and find legal assistance if necessary. These practical services can help homeless families with stability and consistency in their lives. This can reduce stress on both parents and children and result in healthier parenting strategies, as well as better-adjusted children (Grant, et al. e7).

Health screenings can also help prevent toxic stress in children of homeless families. These should be much more common in shelters and transitional housing areas. Tests are not very costly, and they are easy to score. Earlier screening is better and helps to prevent problems
that may be harder to deal with later on (Haskett, et al. 123-124). Making health professionals more aware of the necessity of these screenings is also crucial (Thompson and Haskins 5).

In conclusion, my experience at RUM has provided me with an opportunity to help children dealing with adverse difficulties to develop resilience as a healthy response to stress. Although stress can have serious negative consequences in the biological, cognitive, and psychosocial realms of development, some children are able to reduce the effects of stress. These resilient children are characterized by their executive function skills. Stress produced by homelessness can be minimized through prevention and intervention. Healthy parent-child relationships, practical services, and health screenings can all create and nurture resilience in children. My role at RUM was to boost academic achievement, minimize parental pressure, and help the kids relax. While homelessness continues to be a major problem in America, effective strategies can minimize stress and maximize resilience in children.
Works Cited


