Children’s Perceptions of Homelessness

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The purpose of this study was to describe what it is like to be homeless from the school-age child’s unique perspective. A convenience sample of 14 school-aged children currently living in a shelter was interviewed about their experiences with homelessness. The children described their experiences openly with vivid details, and five themes were identified in the data: (a) I am not homeless, (b) I like living in a shelter sometimes, (c) living in a shelter is hard, (d) stop the violence, and (e) I need approval. Data are presented to support how the themes were labeled. Understanding the perspectives of children who live in shelters can be an important aspect in providing care to them and their families when they are treated by nurses in hospitals, schools, and communities.

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The fastest growing group of the homeless population is families with children (Arrigo, 1998; U.S. National Coalition for the Homeless, 1996). The U.S. Conference of Mayors (1994) found in a survey of 30 U.S. cities that families with children account for 39% of the homeless population, and children comprise just over one fourth of the overall homeless group. Children are at the highest risk among those who are homeless. They are often exposed to violence, crowding, and other stresses that can have a great impact on their well-being. Understanding the perspectives of children who live in shelters can be an important aspect in providing physical care to them and their families.

Review of Relevant Literature

Beginning in the late 1960s, the increase in homelessness among women and children was recognized, and the issues associated with this trend were addressed in the literature. Many of the early studies, however, were concerned with the effects of homelessness on the physical health of the children (Miller & Lin, 1988; Murata, Mace, Strehlow, & Shuler, 1992; Wright, 1990). Later studies relied on psychological tests, the interpretations of experts, and the perceptions of parents with regard to the effect of homelessness on their emotional and mental health of the children (Bassuk & Rubin, 1987; Kemsley & Hunter, 1993; Rescorla, Parker, & Stolley, 1991; Timberlake, 1994; Wagner & Menke, 1991; Wood, Valdez, Hayashi, & Shen, 1990; Ziesemer, Marcoux, & Marwell, 1994).

Previous studies indicated that children were fearful of peers learning that they lived in a shelter because of the ridicule the homeless child might receive. In addition, children who were homeless sought out accepting caring relationships with peers and teachers (Boxill & Beaty, 1990; Percy, 1995; Rafferty, 1998). Further findings of some studies suggested that school-aged children who are homeless found school to be an important constant in their lives (Boxill & Beaty, 1990; Coffman, 1994; Heusel, 1990; Percy, 1995; Rafferty, 1998).

While the recent literature reveals a greater emphasis on the meaning of homelessness for the school-age child, the focus frequently remains on the parent’s or professional’s perspective rather than the child’s own perspective of the experience. Few data based reports exist that provide insights about the experience of homelessness from the child’s perspective. The few studies that have been conducted found that the school-aged child was able to provide vivid descriptions of their experiences. Children between the ages of 7 and 12 were able to provide more details and accurate descriptions of their situations than children who were 3 and 6 years old (Coffman, 1994; Herth, 1998; Heusel, 1990).

If nurses are to offer meaningful interventions, they must first understand a person’s experiences in his or her own terms (Benner & Wrubel, 1989). Understanding children’s perceptions of their experiences provides nurses the knowledge needed to intervene in a meaningful way when providing health care.

Purpose

The purpose of this study was to describe what it is like to be homeless from the school-age child’s unique description of his or her lived experience. By gaining an understanding of children’s experiences, as they perceive them, nurses in hospitals, schools, and community health settings will be able to design health care interventions sensitive to their needs.

Method

The goal of this study was to describe the child’s unique experience. We assumed that children are the experts of their own experiences. We also assumed that school-age children can articulate and describe their experiences and needs. Therefore, a research method focused on inter-
Table 1. Interview Questions

1. What are some things you like to do?
2. What are some things you don’t like to do?
3. What grade in school are you? What do you like about school? What don’t you like about school?
4. What do you like to eat? What did you eat yesterday?
5. Tell me about where you and the rest of your family have been living?
6. How do you feel about where you have been living?
7. What has been most difficult for you about where you have been staying?
8. Can you tell me where you lived before?
9. Has anything changed for you since you and your family have not had a permanent place to stay? What kind of things? Tell me what it’s like for a kid who doesn’t have a regular place to live?
10. What happens that makes you feel sad, be nervous, or worry?
11. What do you do when something bothers or upsets you?
12. Can you talk to anyone about your worries? If so, who is it?
13. What kinds of things do you dream about?
14. If you had three wishes, what would they be?
15. What does health mean to you? Do you think you are healthy? What should you do to be healthy?


All interviews with the children were conducted without their mothers present in a quiet space provided by the shelters. At the first shelter, a total of six group interviews were conducted with six children who participated in all interviews and completed in 6 weeks. During the group interviews, there were times when the children became unruly and the interviewer had to stop the interview to provide some degree of order. After a moment of disciplining, the group interview continued. Because of the disruption and the need for discipline, the research team decided to change to individual interviews at the second shelter. From the second shelter, individual interviews were conducted with a total of eight children were completed within 2 months. Questions designed by Wagner and Menke (1991) were used to guide the interviews (see Table 1). All interviews were audio taped and transcribed verbatim.

Data analysis. Because the group interviews were completed prior to the individual interviews, group interviews were examined first. Interviews were typically three to six typed, single-spaced pages. Because of the brevity of the interviews, the traditional method of cutting and pasting was used for data management. All interviews were interpreted using the same procedure. Each interview was summarized to gain a perspective of the whole. Key phrases were extracted from the interviews to label recurring topics or stories within the interviews. Common meanings were then compared across interviews. Stories were kept intact to maintain the context. Key phrases and common threads from the group interviews were then compared to those found in the individual interviews. When researchers differed about the interpretation, disagreements were resolved by returning to the texts.

Findings

A total of 14 school-aged children with the mean age of 10 years participated in the study. Participants were in the second through the sixth grade. According to data from the mothers, six children (43%) were below their expected grade level in school. Twelve of the children were African American, one was Caucasian, and one was Biracial. The children in the sample had lived in the shelter between 2 weeks and 6 months. Three children had previous experience living in a shelter. Seven of the children had previously lived with viewing children and revealing their experiences was needed. Phenomenology is a research method and philosophical framework developed around the following beliefs: (a) human meaning can be found in the day-to-day experiences of the person; (b) each person has his or her own unique perspective, yet people do share some common meanings; and (c) each individual knows about his or her own experiences more than anyone else (van Manen, 1990). With these tenets in mind, phenomenology was chosen as the best method for this study.

Setting. Participants for this study were recruited from two night shelters for women and children who are homeless in a metropolitan area in the southeast. One shelter had a communal living arrangement with mothers and children assigned to certain bunks or beds within a large community room. Bathroom facilities were located down the hall. The second shelter was arranged into separate family rooms to which all members of a family were assigned with a shared bathroom between two families.

Procedure. The richness of the data in the phenomenological study depends upon whether the participants trust the researchers; therefore, the background of the researcher becomes an important part of the procedure. In this study, the research team consisted of four middle-class women, all Caucasian and all registered nurses. Two of the researchers were seeking Masters degrees in nursing at the time of the study, and the remaining two were nursing faculty. Each researcher provided health care to families who are homeless and have some understanding of the challenge of responding to their complex needs.

After Institutional Review Board approval was obtained, consent for the study was obtained from the administrative staff at each night shelter. Mothers and children identified by the shelter staff as potential participants were then approached by a member of the research team. A researcher and member of the shelter staff then briefly explained the study to the mother to assess her interest in having her child participate. If the mother indicated interest, the mother and child were provided with a detailed description of the study by the shelter. All questions or concerns were addressed with the participants at that time. Prior to beginning the interviews, written informed consent from the mother and assent from the child was obtained. The mothers then provided the demographic information in response to specific interview questions.

School-age children between the ages of 7 and 12 years of age were sought to participate. There were no restrictions with regard to race/ethnicity, gender, socioeconomic status, or length of time that the child had been without a permanent home.
relatives, one had lived in a hotel and with relatives, and 4 had lived with a friend of his or her mother. One child could not remember ever living in his own place. Two of the children participating were sisters from a family of three children, and another two were brothers from a family of eight children. One of the remaining 10 children was an only child while the other 9 had from 1 to 7 siblings.

The children described their experiences openly and with vivid details in the interviews. From the experiences described by the children five themes were identified: (a) I'm not homeless, (b) I like living in a shelter sometimes, (c) living in a shelter is hard, (d) stop the violence, and (e) I need approval.

Children living in shelters often reported similar experiences to children with permanent places to live. They had typical favorite foods, liked playing outdoors, and participating in sports. They went to school, enjoyed going to movies and fun places to eat, and attended after-school programs and other activities such as Girl Scouts. The children generally reported feeling safe in the shelter, and this is reflected in the theme "I like living in the shelter sometimes." Living in a shelter gave them a sense of security whereby they perceived themselves as not being homeless, as described in the theme "I'm not homeless." Shelter living was also associated with tremendous stigma.

Other difficulties children reported about shelter living were depicted in the themes "living in a shelter is hard" and "stop the violence." The children in this study had a strong need for recognition and approval from those in authority as reflected in the theme "I need approval." Prior to beginning the interviews, each child chose a name that would represent them in the written report, so the names used in this report are pseudonyms used to maintain anonymity. Each of the themes will be discussed with examples from the children to clarify the choice of the label.

**Themes.**

**I'm not homeless.** When asked about homelessness, children described people who had absolutely no resources. The children were clear that they had many more resources than people who were homeless did. Dedra described how people who were homeless appeared from her perspective. "The homeless, they sleep out with no cover, and some people don't have no clothes. They have no food. They have to eat out'a the trash cans." Cassandra confirmed that she was not homeless. "I got a place to stay" [indicating the night shelter]. The children did not want to be associated with being homeless. Jack described a situation that differentiated him and his family from people who are homeless. "One day, me and mama and my sister had come out'a the store. There was a lady sittin' down, and she was homeless. After we come out'a the store, we gave her a dollar." One reason that the children may have felt that they were not homeless is that they had the shelter to live in and a mother who cared for them. The children viewed homeless people as someone without any resources. Another interpretation of these comments might be that even school-aged children understand how the dominant culture considers homelessness as repellent. Society views homelessness as the person's fault and not a series of unfortunate circumstances. Because people are blamed rather than circumstances, the state of homelessness is viewed as the person's fault rather than a difficult situation (Dobash, McConell, Gerstel, & Swartz, 1990). Therefore, the social stigma of homelessness might be another explanation why the children viewed themselves as not homeless.

In addition to "not being homeless," the children expressed a strong fear of being ridiculed if their peers learned that they lived in a shelter. Sam, a 7-year-old boy, was afraid his sister would tell the secret of them living in the shelter. "When I go to school, I think about my little sister. If her teacher asks her who she stays, she probably say 'in a shelter.'" This young boy was worried about his friends finding out about him living in the shelter from his sister or his sister's friends. Another child, Melka, also kept her living arrangements hidden from her peers and teacher at school. "They don't know I stay here. My teacher don't even know I stay here." Keeping where they lived a secret was very important to these youngsters, and various methods were used to keep the secret. T-yon contained the possibility of having the other children at school find out that he lived in a shelter by limiting the friendships that he made. As he described it, "I don't have no friends at school. Just the ones who stay in the shelter with me. That's the only ones." Not only did the children feel that they needed to keep their living arrangements a secret, they even limited the friends they made to keep the secret.

When one young girl, Rochelle, was asked what might happen if classmates found that she lived in a shelter, she replied, "They all have houses or apartments. And if I told one person they would tell everybody. Then I would get teased. 'Nah, nah, you live in a shelter.'" Another child, Sam, described how he thought he might be humiliated. "You so poor, you can't even afford a pair of tennis shoes." Another child, Bill, described how he thought the shame of living in a shelter would follow him into the future even if he moved to another school. He talked about how his new peers would tease him. "They would make you wanna fight 'em and then one day, you may transfer to the same school you go to and then spread it around again. You would want to run away." As Bill indicated, even running and hiding could not take away the shame of living in a shelter. When the children in the group interviews were asked where their classmates think they lived, they replied with other relatives or mentioned apartments in other areas of the city. The fear of being stigmatized as poor and living in a shelter is consistent with findings from other studies (Percy, 1995) and considered one of the major difficulties for children who become homeless (Rafferty, 1998; Sullivan, 1994).

**I like living in a shelter sometimes.** The children in this study described having mixed feelings about living in a shelter. When asked what it was like to live in a shelter, Bill summed it up by saying, "Kind of good, kind of bad." Bill continued as he described the good part, "We're eatin', we're sleepin' in a bed." According to the children, the good part of living in a shelter was that you at least had a place to eat and sleep. Bill continued, "Sometimes I'm happy because it's our only choice, and sad, sometimes sad." Thinking of the shelter as the only choice was a sad prospect.

In addition to having a place to eat and sleep, shelter life provided children with an opportunity to develop friendships. The children described the relationships as fun, and it influenced them in their responsibility of looking out for one another. Jack stated, "I like playing with my friends. I like playing with Sam. He teaches me to play my games so I can win." Lester echoed this with, "I like to play with my friends." The friendships described seemed very important to the children, and Bill noted how strong he felt his friendships were. Bill replied, "Nobody can make you lose a friendship. Even if you move, they'll still be your friends, even if you can't see them. If you're with your friend and someone tries to take him away, you'll..."
run and try to help, to get someone to help him." For Bill, friendships lasted even across distances, and friends were responsible to help protect each other. Helping and protecting each other seems particularly important when one considers the violence that most of these children have experienced. Efforts to keep the secret of shelter living may have strengthened the bond of friendship and limited the friendships that children made. T-yon indicated that the children from the shelter were his only friends. He said, "That's the only friends I have." Because peers are so important to the development of school-age children, friendships were particularly meaningful to the children who participated in this study (Sarnoff, 1976). The children who participated in this study developed special relationships with other children who had common interests and primarily peers from the same shelter. These findings were consistent with reports from other studies of children who were homeless (Percy, 1995).

Another positive aspect to shelter living was the relative safety provided. For example, Hannah liked staying in the shelter better than her previous living quarters where she had experienced being hit. She reported, "I like it here. It's better. Nobody hits me or stuff like that." While Hannah was the only child in this study who indicated that she perceived the shelter as safer than her previous house, other scholars have found that children may view shelter living as preferable to previous living arrangements, especially if they experienced violence in the previous household (Percy, 1995).

Even though children described positive aspects of shelter life, when asked what they enjoyed doing, the children talked about going out to the movies and restaurants. At one of the shelters the families received tokens that allowed them to use the rapid transit system, which allowed them to "get away" from the shelter. Bill described how he and his family used the tokens. "We go to school, and on weekends we go to the movies or to our friends house or something like that." The tokens gave the children a means of transportation and some freedom away from the life in the shelter. When Cassandra was asked what things she liked to do, she replied "Go to the movies" and "Go out to the restaurant." Enjoying movies and restaurants is something common to many, especially school-aged children. The difference between these children and other children was that they described seeking these activities out to get away from the shelter. Shelter life can give children some security and meet some of their basic needs, but generally they felt a need to escape and be entertained.

Living in a shelter is hard. Despite the positive aspects of living in a shelter, the children described many negative aspects. There are many rules accompanying living in a shelter that the children felt were restrictive. In the night shelter, the families were admitted no earlier than 4:00 p.m. and required to leave by 7:00 a.m. the next morning. If the family then went to the day shelter located across town, they were admitted around 9:00 a.m. and were required to leave by 3:00 p.m. Several of the children described having to get up very early in order to have breakfast and be out for the day. Sam stated, "It's very hard cause you gotta wake up early. You can't get your real sleep." Victor and Jared both discussed the difficulty of traveling to pick up their little sisters, then having to wait until a certain time to get into the shelter in the evening. Victor reiterated having to "...wake up early in the morning. Then we gotta travel over here and travel over there. We have to stay out until 6:00 and sometimes catch cold." Waiting for the shelter to open meant waiting outside in the weather and walking up and down the sidewalk. Jared agreed traveling was hard and having to wait to get into the shelter at a certain time was very difficult. He reported, "We pick up my two little sisters from the nursery, and then we come over here and have to wait until they open the door." Having to move from the night shelter to the day shelter seemed difficult, especially for a mother with several children who was seeking employment or beginning a new job. Maddie's mother had difficulty coping with these stresses and many of the other stresses in her life. Maddie described the situation, "My mother's out of control, and we've got to wake up early in the morning, and we've got to take showers at night and wash up in the morning." Maddie had difficulty with the stress of her mother being "out of control" plus the rules and regulations of the shelter.

There were other rules that resulted in the children feeling more restricted than they had been in previous living arrangements. They described these rules as being "hard." For example, Bill described the rules that annoyed him. "You can't go outside like you want to. You can't go to your friend's house like you want to, like when you had your own house." Lillie felt restricted too. She said, "I can't go in the refrigerator. They won't let me be in the kitchen. My mama has to get my food." Rochelle explained, "I can't go outside and do whatever I want." Jared noted, "I can't bring my bike." And Victor added, "It's hard, you can't do what you want to do." Other rules that the children found difficult were the ones associated with bathroom usage. Because of the limited facilities, use of the bathroom was restricted, and shelter residents were asked to sign in each time they used the bathroom. Strict time limitations were placed on use of the bathroom. T-yon described the situation, "If you stay in too long, then they [the shelter staff] will not let us take a bath." Rochelle described her fear of breaking the rules. "You could wake up in the middle of the night, and you could go to the bathroom without signing and get into trouble." The children perceived that being restricted from freedoms usually afforded children was frustrating and difficult for them. School-aged children typically develop the ability to decide where and when to play within limits. Living with what children viewed as unnecessary rules was especially difficult. Between 7 and 12 years of age, children develop the ability to make decisions within limits. Living in a shelter with a multitude of rules would make it difficult for children to engage in experiences that allow them to develop skills in making these choices (Wiley & Ballard, 1993).

Breaking the rules resulted in consequences stressful for everyone in the shelter. This distress was evident one evening during the group interviews when the children had difficulty focusing on the interview session. The children related the story to the interviewers that one of the mothers had been told she and her children would have to leave the shelter since she had not followed the rules, and all of their belongings sat piled by the door. In the end she and her children were able to stay at the shelter, but this was a stressful incident for all the children. The children's distress is demonstrated in their inability to focus and by physically fighting with each other. The fear of being asked to leave the shelter because of breaking rules must be especially difficult when the rules seem unreasonable. The children perceived the rules as hard. These findings were consistent with the findings of Heusel (1990), who found that experiencing homelessness thwarted the children's independence by the
requirements of new rules (Percy, 1995).

Another aspect of shelter living children reported as difficult was the lack of privacy associated with shelter life. Hannah described how she felt. "It's just that I get kind'a nervous, cause I'm naked with people." When asked what shelter life was like, Lillie stated, "People be hiding in the bathroom." Privacy is particularly important to school-aged-children that are nearing puberty or to younger children who may have experienced abuse in previous living arrangements. A lack of privacy in either situation suggested that some of the children felt unsafe.

In addition to the lack of privacy, some of the children felt that their belongings were stolen. Maddie and Tyron both related incidences in which they had their belongings stolen. The perception of living in a place where your possessions may be stolen provides another suggestion of an unsafe environment. Therefore, these statements were grouped with "living in a shelter is hard."

Stop the violence. Violence and inner conflict was a theme these children described living with day to day. They seemed accustomed to a life where violence was assumed. In describing a neighborhood in which he recently lived, Lester said, "They be shooting out there." Maddie described feeling unsafe and afraid she might get hurt. This is consistent with the findings in Timberlake’s (1994) study in which the children noted that no place was safe and that often people got shot, cut, or killed. Heusel (1990) also found that the children in her study feared gang fights and worried about harm coming to them or their family when they walked the streets.

When asked what they would wish for, all the children in the group interviews expressed "stop the violence" as one of their wishes. Jim, a child whose father was shot at a pay phone, wished "for everyone to come back alive and stop the violence and stuff." He was expressing his desire for his father to return as well as ending violence.

Although the children wished for there to be no violence, they did not seem to have alternate modes of expressing anger and conflict. Sam expressed the inner conflict when asked what he did when something bothered him by stating, "Sometimes I put on my boxing gloves and box. Sometimes when I get angry, I try to hold it, but sometimes I have to fight." Bill also expressed how he wanted the violence to stop; yet, how there was a need to learn how to defend yourself. Bill wished for an education so he could provide for his future family, but would "teach 'em how to fight just in case someone would try and beat 'em up." These statements indicated that violence permeated every aspect of life for these children. However undesirable fighting back was, fighting seemed to be the only way to defend yourself from others. When Cassandra was asked what made her feel bad, she responded, "Somebody hit me and that make me mad." Although Cassandra indicated she wanted to fight back, she described how she did nothing in return. Comments such as Cassandra’s suggested that fighting was less frequent among the girls. During the group interviews, the investigator frequently stopped the tape and reminded the children to stop hitting or pushing one another. This behavior is consistent with the findings in studies by other researchers who found a high incidence of acting out and aggressive behavior among children who lived in a shelter (Rescorla, Parker, & Stolley, 1991; Wood, Valdez, Hayashi, & Shen, 1990). Children who participated in this study expressed a desire to stop aggressive behavior, but did not seem to know how to express their anger and frustration in constructive ways.

I need approval. While the need for approval is normally evident in school-age children, it seemed more pronounced for children in this study. When asked what he liked about school, Jared described how he received approval for assisting the teacher. Jared said he liked "picking up papers, sometime she [the teacher] gives me stars for picking up papers." Lester described how he received positive reinforcement for submitting his assignments. When he was asked what he liked about school, Lester responded, "I like to do my homework." While some children might not dislike homework, few would answer the question "What do you like about school?" with a declaration for liking homework. For most children homework is unappealing. Tyron indicated he enjoyed getting his report card, which is also not a typical response from a school-aged child. Bill expressed the importance of listening to the teacher: "I like to do my work, listen to the teacher." The children described how they received approval from the teacher by working on assignments and listening appropriately. Sam, who had been working with a counselor, relayed that "I used to act up, I used to get suspended a lot and now I'm improving." This comment along with his nonverbal behavior indicated pride in his improvement.

When asked what they disliked about school, several of the children responded with descriptions of behaviors that would elicit the teacher’s disapproval, such as "I don't like to be bad" and "I don't like to get in trouble." These atypical responses suggested that the children were seeking approval from their classroom experiences even more than other school-aged children might. These findings are consistent with other scholars who indicated that school provides a sense of security and a positive environment otherwise absent from children who live in a shelter (Coffman, 1994; Rafferty, 1998). Therefore, the approval from teachers was perceived as very important to the children.

Discussion

The findings of this study cannot be generalized to the entire population of school-age children living in shelters, because the sample was small and from only one section of the country, the southeast. A larger sample from the southeast and children from other sections of the country may report a different perspective. The data gathered and the background of the researchers also influenced the interpretation, as is the case with all qualitative investigations. For example, because the researchers were Caucasian women from a different socioeconomic group, the children may have either tried to please by providing "acceptable" comments or withheld meaningful descriptions. While this study does provide insights and meanings that add to our understanding of children's perspectives, the findings from this study should be viewed as incomplete until further investigations either confirm or challenge them.

The results do support the notion that children know and are able to relate their feelings and needs. Probably the most important finding of this study is how health providers might support children who live in a shelter.

The stigma associated with the label "homelessness" or with the notion of living in a shelter was frightening to the children who participated in this study. Clearly the children felt they were not homeless, and the term "shelter kid" was extremely distasteful. A school district in Indiana was able to reduce the insults encountered by children who boarded the school bus in front of the shelter by altering...
### Table 2. Resourceful Internet Sites*

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<thead>
<tr>
<th>Web Address</th>
<th>Organization</th>
<th>Contents</th>
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<tbody>
<tr>
<td><a href="http://www.acf.dhhs.gov">www.acf.dhhs.gov</a></td>
<td>The Administration for Children and Family Services: The Department of Health and Human Services</td>
<td>Provides information on government programs to assist children and families in need.</td>
</tr>
<tr>
<td>nch.ari.net</td>
<td>National Coalition for the Homeless</td>
<td>Contains an online library, directory of contacts, and a bimonthly newsletter.</td>
</tr>
<tr>
<td><a href="http://www.wmpenn.edu/PennWebb/LTP/D">www.wmpenn.edu/PennWebb/LTP/D</a> OEMat/</td>
<td>Office for the Education of Homeless Children and Youth: Iowa State Department of Education</td>
<td>Contains the full text of the pamphlet <em>Educating Homeless Children and Youth: Problems and Solutions</em>.</td>
</tr>
<tr>
<td><a href="http://www.4children.org">www.4children.org</a></td>
<td>Action Alliance for Children</td>
<td>Provides up-to-date information concerning trends and policies affecting children.</td>
</tr>
<tr>
<td><a href="http://www.nlch.org">www.nlch.org</a></td>
<td>Child Welfare League of America</td>
<td>Contains information about programs, services, current activities, fact sheets, briefing papers, and related materials.</td>
</tr>
<tr>
<td><a href="http://www.cwla.org">www.cwla.org</a></td>
<td>Child Welfare League of America</td>
<td>Contains information about programs, services, current activities, fact sheets, briefing papers, and related materials.</td>
</tr>
<tr>
<td><a href="http://www.homesforthehomeless.htm">www.homesforthehomeless.htm</a></td>
<td>Homes for the Homeless &amp; the Institute of Children and Poverty</td>
<td>Contains information about research programs, events, and training of homeless.</td>
</tr>
<tr>
<td><a href="http://www.serv.org/nche">www.serv.org/nche</a></td>
<td>National Center for Homeless Education at Serve</td>
<td>Provides information and links to help educators, service providers, and families ensure that homeless children and youth have access to education. Less children and youth have access to education.</td>
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* Note: By Tammy Hedspeth, student, Virginia Commonwealth University.

the bus route. By making the shelter the first stop in the morning and the last in the afternoon, students were not identified as "shelter kids" (Nunez & Collignon, 1997).

School nurses might act as a catalyst in school systems working with educators developing educational strategies to influence attitudes about homelessness and other differences associated with the stigma. Providing information through storytelling about specific situations regarding how a fictitious family loses their home might be one method to improve understanding. Providing children with the beginning of a story about a family losing their home and having students complete the story individually might also be helpful, especially if the fictitious stories are followed by discussions (Holland, 1998). Understanding specific struggles endured by a character in a story may serve to reduce the stigma associated with homelessness.

Nurse educators are also in an ideal position to collaborate with schools about reducing the stigma associated with homelessness. Providing guest lectures to future educators and opening doors for future collaboration would be helpful. For example, nursing students and education students working together with teachers designing classroom activities focused on changing attitudes is one specific approach. This particular strategy provides positive learning outcomes by educating current educators and their pupils, as well as future students in nursing and education. By learning about the needs of homeless children and learning collaborative approaches, individuals may be able to influence the stigma felt by children who are homeless (Nunez & Collignon, 1997; Rafferty, 1997).
The themes of “stop the violence” and “living in a shelter is hard” suggest the children felt somewhat unsafe. Approximately 90% of children who are homeless have experienced physical or sexual violence in a previous home, so the feelings are probably grounded in personal experiences (Homeless Children, 1999).

Although the theme of “stop the violence” was expressed by the children, they continued to talk about how they would “beat up” others. In the group interviews, children acted out in aggressive ways by pushing, hitting, and calling each other names. The children did not seem to know how to express their anger in constructive ways or resolve conflicts. Although conflict is a part of everyday life, children can learn how to express anger and frustration in nonviolent ways (Banks, 1997; Schwartz, 1994; Schwartz, 1997). The Forum on Children and Violence launched a comprehensive training program for students, parents, teachers, and others in the community in the spring of 1997 entitled, Towards a Non-Violent Society: Checkpoints for Schools. This program and many others that are aimed at reducing violence among children are accessible through the Internet. See Table 2 for more resources.

The need for positive recognition was disclosed when the children were asked what they liked about school; it was labeled “I need approval.” These children reported seeking approval from educators, yet school nurses, community nurses, social workers, and other professionals have the opportunity to establish positive support relationships with children who are homeless. Genuine praise for appropriate behavior or achievements can support children in developing self-esteem. Herth (1998) found that children who were homeless associated “feeling cared about, being listened to, and valued” with feelings of hope (p. 1060). Working with children one-to-one, listening to them, being respectful, and engendering hope may be far more meaningful to an individual child than any other strategy proposed.

Conclusions

Fourteen children provided descriptions of their personal experiences of living in a homeless shelter. From their descriptions, five themes were identified: (a) I’m not homeless, (b) I like living in a shelter sometimes, (c) living in a shelter is hard, (d) stop the violence, and (e) I need approval.

While the descriptions may be unique to only a segment of children in similar situations, the ideas provided some understanding of how they live day-to-day. The understanding gained from children who live in shelters can assist nurses in providing direct care in hospitals, schools, and community health programs and advocating for this vulnerable population.

References


