Low-Income and Homeless Individuals: An Examination of Coping Strategies and Well-Being

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General Background

Poverty

- Deprivation of economic resources that are required to meet food, shelter and clothing needs necessary for physical well-being, (Akindola, 2009)

Poverty has gone up since 2000.

- 2000 - 32 million
- 2010 - 46.2 million
- 2012 - 48.5 million

( U.S Census, 2000-2012)
Terminology

- Poverty
- Low-income
- Homelessness
- Stressors
- Coping
  - Social Support
  - Planful Problem Solving
  - Positive Appraisal
- Well-being
General Background

Population at Risk

- 13.2% of families
- 22% of children
- 27.4% of Blacks
- 26.5% of Hispanics
- 12.2% of Asians
- 9.9% of non-Hispanic Whites

(US Census, 2011)

- Children who grow up in poverty are more likely to be poor in adulthood.
- Majority of America’s poor are racial and ethnic minorities (26.6 million or 58%) compared to non-Hispanic whites.

(Hill, Hawkins, Hill & Lee, 2012)
Homeless Population

- 2 million homeless Americans
- Families with children 34% of the homeless population
  (i.e., 23% children and 11% adults)

(Allison, Fertig & Park, 2011)
Very poor families, whose incomes fall below 50% of the poverty line, have the greatest income instability.

Income loss is linked to adverse events, such as job loss, broken families and poor health. (Bloome, Sosnaud, Tach & Western, 2012)

High unemployment rates affect health and economic well-being of low-income families (Currie, Garfinkel & Pilkauskas, 2012).
Low-income and homeless individuals experience deprivation of needs that allow them to experience poor well-being (Collins, 2005).

- About 15% US households face food insecurity (Kirkpatrick & Tarasuk, 2011).

Low-income and homeless individuals can develop psychological problems.

- Feeling of depression, anxiety, hostility, and aggression
- Violent, criminal and substance dependent behavior (Kaltman Miranda & Santiago, 2012)

Small percentage of poor receive welfare (Rodgers, 2009).
Purpose of Study

- To investigate different factors that influence the promotion and preservation of well-being.
- To enable a better understanding of ways low-income and homeless individuals cope with their stressful situations.
- To examine the coping tenets influencing the well-being of low-income and homeless individuals.
Lazarus’s Transactional Model of Stress and Coping

STRESSORS
- financial insecurities
- job insecurity
- food insecurity
- mental illness
- medical issues

COPING STRATEGIES
- PROBLEM-FOCUSED COPING
  - Seeking Social Support
  - Planful Problem Solving
  - Confronting the Situation
- EMOTIVE-FOCUSED COPING
  - Positive appraisal
  - Escape Avoidance
  - Distancing
  - Self-Control
  - Accept-Responsibility

(Lazarus & Folkman, 1992)
Age

- Low-income older adults had more life regrets about financial problems, such as the inability to meet their children’s needs and poor health status (Choi and June, 2008.)

Gender

- Merzel (2010) men and women have different attitudes and perceptions of health. As a result, it was concluded that women were more likely to have public health care coverage. Men are less likely to have public health benefits and cannot afford private health insurance.

Race/ Ethnicity

- Using the MacArthur Health and Behavior Questionnaire, Boyce, Jutte, Nuru-Jeter & Sarsour (2010) assessed a study on SES-child development association in relation to race/ethnicity. Whites with higher SES were associated with school and academic functioning compared to their racial counterparts, Blacks experienced multiple hardships over a longer period of time due to economic hardships and negative life experiences.

Education

- Lee, Hill and Hawkins (2012) found that students’ low-income status did not have a significant effect on their educational aspirations and expectations.
Employment Status

- Currie, Garfinkel & Pilkasas (2012) observed that levels of material hardship, such as paying bills and utilities, increased with unemployment. However, material hardships such as food, housing and medical hardships were not as related.

Marital Status

- Women with non-marital births, especially as teens, were more dependent on welfare programs - about one third of them received food stamps. However, currently married women were more likely to receive food stamps compared to those who were not married.

Family Size

Number of children have an effect on earned income. Families with few children and families with numerous children had less income than those who had average number of children.

Veteran Status

Veterans were more likely male, older, from the Vietnam era age group, and more likely to have obtained a high school degree than non-veterans. However, there were no significant baseline differences between veterans and non-veterans on mental health diagnoses, housing, clinical status, or health services.
Seeking Social Support

- Low-income individuals who have close knit and higher network support are less likely invest time in agency-based support. (Offer, 2010).

Planful-Problem Solving

- Those who took a plan of action to be involved in healthy eating programs found it very beneficial and had positive feedback, (Amoran and Weerts, 2011)

Confronting the Situation

- Low-income women, who took the risk to apply for TANF, but were ineligible, were afraid for the possibility of not being able to provide for their children and angry with system that was not able to meet their needs. (Hildebrandt, 2006)
Positive Appraisal

- Through a semi-structured interview, Teti et al.’s study (2011) found that low-income and urban African American men had resilience, demonstrating perseverance and drawing support from spirituality and religion.

Escape/Avoidance

- Those who experienced unemployment and did not receive unemployment benefits were more likely to increase alcohol consumption and daily smoking and decrease in body weight, (Bolton & Rodriguez, 2009)

Distancing

- Through qualitative data related to self-esteem, Crayton study (2011) revealed that those who participated in a welfare-to-wellness-to-work program reported positive thinking and improved self-esteem.
Trends: well-being of low-income and homeless individuals

- Low-income and homeless individuals are more likely to have economic insecurities that lead to poor well-being compared to those who are financially stable.

Limitations: perception of poverty, well-being and coping

- These words are subjective so it is difficult to measure these terms and to generalize low-income and homeless individuals.
Research Questions

1. What is the well-being of low-income and homeless individuals?
2. What factors contribute to low income and homeless individuals’ well-being?
3. What are the stressors that contribute to low-income and homeless individuals?
4. How do low-income and homeless individuals navigate their daily challenges?
5. What are the coping methods and how do they impact their well-being?
6. How do low-income individuals and homeless preserve their well-being?
7. What are the differences between low-income and homeless individual coping strategies?
Methodology

Research Design: A Qualitative Design

- **Design**
  - Qualitative research ethnography with a cross-group comparison
  - Complete participation and participant observation

- **Procedures**
  - Site - Share Our Selves
    - A non-profit organization that serves low-income and homeless individuals
      - Medical, Dental and Social Services
  - Sample
    - Working poor, uninsured, living at or near poverty level, and homeless individuals
    - Majority Hispanic and White
    - Residents of Orange County
      - Costa Mesa, Santa Ana, Newport Beach
    - Financial – 20 people
    - Food – 200-230 food slips

- Role of Researcher:
  - Assist front desk and the food pantry, provide resources, build relationships and observe what needs are to be met.
Methodology

Site, Sample and Data Analysis

- **Data Collection**
  - Interactions and observations
  - Field notes
  - Memos
  - Unstructured and semi-structured interviews
  - Documents
  - Secondary data
  - Mappings

- **Data Analysis**
  - Themes and Quotes
  - Coding
  - Peer Validation
  - Model
  - Triangulation
Theoretical Framework

Background Variables
- Age
- Sex
- Race/Ethnicity
- Location
- Family Size
- Employment Status

Mental/Physical Health

Food Insecurity

Coping Strategies

Social Support
- Family Support
- Peer Support
- Agency Support

Positive Appraisal
- Sympathy
- Simplicity
- Religion/Spirituality

Planful Problem Solving
- Plan of Action

KEY
- Very Significant
- Mildly Significant
- Significant

Financial
Findings

Background Variables

- **Age**
  - Young adults
    - Independent
    - Looking for work
  - middle aged adults
    - social support
    - More responsibilities of taking care of family
  - Older adults
    - more physical and mental health problems
    - Harder to find employment

- **Sex**
  - Both women and men had health concerns.
  - Women had harder time coping with stress.

- **Race/ Ethnicity**
  - There were more homeless that were White than any other ethnicity.
Findings
Background Variables

- **Location**
  - Standard cost of living in Orange County is very high, making it even more difficult for residents to make a basic living. In addition, those who recently moved to California have a harder time adjusting

- **Family Size**
  - Because larger families, they have more responsibilities to take care or their families.

- **Employment Status**
  - Those who were unemployed – harder time dealing with stress
Financial Struggles

- “I cannot bring that because that (income stub) because I don’t have income. That’s why I need help paying my utilities.”
- “I’m homeless, I have no electricity, I only have the clothes I have on my back.”

Mental and Physical Health

- “I haven’t been able to get a lot of sleep these days. The first day, it’s okay. And then the second day, and then the third day.. you become crazy…”
- “Oh no… I don’t want to go near them, I think they have a mental illness…” the guy that sleeps on the grass, who knows if she has a alcohol or drug problem.”

Food Insecurity

- “No, actually, you need food first then love. You need food to survive.”
- “I think I will be okay with food from now on”
Family Support

- “I’m with family and that’s all that matters. We are here for each other. The kids are taking it hard, but we’re sticking together.”
- “Family? We are trying to keep it that way.”

Peer Support

- “I don’t come here very often, I came here to see my friend. I used to have a lot of friends when I came here everyday, see the same people.”

Agency Support

- “I had clients where I didn’t give them a single penny and just the fact that I sat with them for a few minutes and listened to vent, it helps them.”
- “Yeah.. it’s been a tough year. But I am very thankful that you guys are helping me.”
Findings
Positive Appraisal: Creating a Positive Outlook

- **Positivity**
  - “Oh well… it happens”
  - “If I can’t pay my month’s rent, my kids and I are going to live on the streets… It’s okay, I try to stay positive.”

- **Empathy**
  - “You shouldn’t judge people from what they look like from the outside….”
  - “I’ve been homeless before so I know what they are going through.”

- **Simplicity**
  - “Yeah, I like living on a boat. It’s a very simple life.”
  - “I used to have a lot. You know.. when I was with my ex-husband, I was able to get everything I wanted, but now.. I really like the simple life.”

- **Religion/Spirituality**
  - “I’m experiencing a lot of back pain and every bone in my body is aching but by the grace of God, I’m alive.”
  - “God is good! You know what he did? When I was about to pay for rent, I realized that I was short about 17 dollars, but I was going to pay with my credit card, and I swear, God paid it for me! God is so good.”
Plan of Action

“We have one client that we have seen for years. She was in case management with us for a long time. She marks on the calendar when she is eligible to come for financial aid, gas program, electric program because she depends on us to be able to make it through.”

“I just got out of jail and I need to get back on my feet. I want to talk to a counselor.”
Discussion

- **Stressors**
  - Financial Struggles ~ Strong
    - Employment status (Hildebrandt, 2006)
  - Mental and Physical Health
  - Food Insecurity

- **Coping Strategies**
  - Social Support
    - Peer support (Offer, 2010)
  - Positive Appraisal
    - Positivity (Diane and Levick, 2011)
    - Religion & Spirituality (Teti et al, 2011)
  - Planful Problem Solving
    - Plan of Action (Amoran and Weert, 2011)
Limitations

- Sampling and qualitative methods
  - Cannot be generalized to samples beyond the study

- Availability of resources
  - Very limited – made an impact

- No access to in-depth interviews with participants
  - Short conversations and phrases
Implications

- **Research**
  - More in-depth research of homeless population in Orange County.
  - Identify the different factors that cause homelessness, specifically to different regions and cities within Orange County.

- **Practice**
  - Non-profit and public welfare agencies should implement more programs that promote and maintain low-income and homeless individuals’ well-being.
  - Free counseling and therapy sessions
  - Make resources easily and readily available