

trauma and homelessness

trauma awareness mental health stress depression
anxiety ptsd flight flight promote safety exclusion danger
assault abuse neglect low self esteem rebuilding control
family violence promote connection physical health
disorder anger guilt social isolation focus on strengths
and resources hopelessness anger rejection finance
vulnerability drugs alcohol combat fear belief in recovery



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Sacred Heart Mission's position on trauma and homelessness

The people we serve at Sacred Heart Mission all have different stories about why they're here.

Trauma is the common thread that links these stories.

Trauma can be both a cause and consequence of homelessness.

Trauma can have long-lasting effects on all aspects of someone's life, including how someone thinks, feels and behaves. Trauma increases the chance of anxiety, depression, substance misuse, employment problems and suicide.

Recovery from trauma is entirely possible. It takes time, support, community and stable housing.

We support people regardless of where they are in their recovery journey.

In order to understand homelessness, we must understand trauma

About Sacred Heart Mission

At Sacred Heart Mission, we work with people whose capacity to participate fully in community life is affected by trauma, deep, persistent disadvantage and social exclusion.

Our vision is of an inclusive, fair and compassionate community that enables people to overcome disadvantage and realise their full potential.



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What is trauma?

No one chooses to experience trauma

Trauma is caused by a shocking, terrifying, devastating event, that is either:

- life-threatening (e.g. abuse or assault), or
- threatening to someone's physical integrity or sense of self (e.g. rape or sexual assault).

The experience can transform the way someone understands the world, feels about themselves and their behaviour.

BRUCE

I've hardly been able to sleep after the event. As soon as I close my eyes I can see someone chasing me, attacking me, out to get me. I couldn't focus at work so I got fired and I'm about to lose my apartment as I haven't been able to make rent payments.

Not all trauma is equal

Less complex trauma symptoms tend to arise from type 1 trauma exposure, such as a natural disaster, car accident, physical assault in adulthood or extreme grief or loss. These events are out of context, sudden or unexpected.

More complex symptoms tend to arise from repeated trauma exposure, especially where it interferes with a sense of self, place and identity. Type 2 trauma can result from sexual assault, childhood abuse or neglect, witnessing or experiencing repeated family violence, torture or combat.

Research shows that trauma symptoms differ according to the complexity of the trauma exposure, the support someone receives afterwards from their community and other factors.¹

It also shows that people can learn to manage the effects of even severe and complex trauma.²

However, trauma symptoms can also be difficult to manage and contribute to homelessness, particularly among people who are socially isolated.

1 Robinson, Catherine. 2014. Trauma: A cause and consequence of homelessness. In *Homelessness in Australia: An Introduction*, editors Chris Chamberlain, Guy Johnson and Catherine Robinson.

2 iBid

Trauma as a cause of homelessness

Trauma usually predates homelessness

Trauma changes the structure and function of the brain so people enter 'fight or flight' mode. This makes it difficult to regulate emotions and behaviour. Without understanding why, people may overreact to very small 'triggers'; a sound, smell, or sight may provoke an intense or disproportionate reaction. As a result, people can appear unpredictable, challenging or even self-destructive. Trauma also makes it hard to trust others, develop healthy relationships and maintain community connections. It makes it especially hard to reach out for help.

In addition, people who have experienced trauma may exhibit the following symptoms:

- Low self-esteem, self-blame, hopelessness, expectations of rejection and preoccupation with danger
- Anxiety, panic, phobias, depression, anger or aggression
- Suicidality, self-harm, binge-purge eating
- Chronic physical health conditions or physical manifestations of mental stress
- Unhealthy efforts to forget difficulty or calm down, such as misuse of alcohol and other drugs
- Post-traumatic stress symptoms such as reliving the traumatic event or feeling emotionally numb.

These symptoms can be managed, given the right support, including community connections, and a home.

However, because the symptoms of trauma aren't visible, its impact may be felt for years without even being recognised, let alone managed.

Aboriginal and Torres Strait Islander people have experienced trauma as a result of colonisation, including the associated violence and loss of culture and land, as well as subsequent policies such as the forced removal of children. This trauma may unknowingly be passed from generation to generation.

**OUR COLLABORATIVE
RESEARCH ON PEOPLE
EXPERIENCING
HOMELESSNESS
FOUND THAT:**



9 IN 10

**EXPERIENCED
CHILDHOOD
TRAUMA**



7 IN 10

**EXPERIENCED
TRAUMA BEFORE
HOMELESSNESS³**

3 O'Donnell, M., Varker, T., Cash, R., Armstrong, R., Di Censo, L., Zanatta, P., Murnane, A., Brophy, L. & Phelps, A. (2014). The Trauma and Homelessness Initiative. Report prepared by the Australian Centre for Posttraumatic Mental Health in collaboration with Sacred Heart Mission, Mind Australia, Inner South Community Health and VincentCare Victoria

Trauma as a consequence of homelessness

The lack of safe and secure accommodation increases trauma risk

Sleeping on the streets exposes people to extreme weather events such as extreme cold, heat, bush fires or floods.

The risk of being robbed, physically or sexually assaulted is also significant. In recent years there have been several high profile murders of people sleeping rough in Melbourne, including Christian Williams in a Dandenong park and Morgan Wayne “Mouse” Perry under a Melbourne railway bridge.

Marginal housing is also generally unsafe—living in a squat or an unregulated rooming house could be associated with crime or drugs including alcohol.

People sleeping rough may also enter or remain in a violent relationship to avoid homelessness, or trade sex for shelter.

Trauma recovery is also much more difficult without a place to call home.

Due to the repeated trauma exposure while homeless, people we work with have experienced much more trauma compared to the general population.

For Aboriginal and Torres Strait Islander people or others who maintain a spiritual association with land and place, the social and geographical displacement of homelessness may lead to even more mental health challenges.⁴

Rick

“Being homeless is scary because you close your eyes and you don’t know when somebody is going to come up and kick the crap out of you, you don’t know what is going to happen next.”

AGED 30

OUR COLLABORATIVE RESEARCH FOUND THAT HOMELESS PEOPLE EXPERIENCED AN AVERAGE OF

21

TRAUMATIC EVENTS

97%

EXPERIENCED MORE THAN FOUR TRAUMAS

ONLY 4% OF THE GENERAL COMMUNITY HAS LIVED THROUGH MORE THAN FOUR TRAUMAS⁵

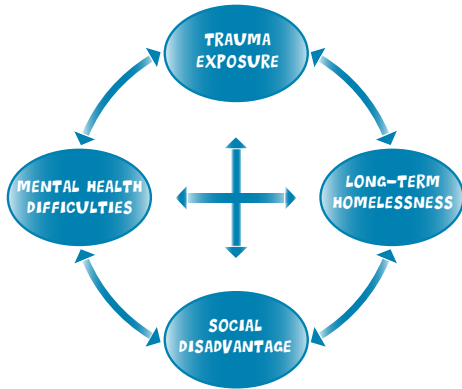
4 Memmott, Paul and Daphne Nash, 2014. Indigenous Homelessness in ‘Homelessness in Australia’

5 O’Donnell, M., Varker, T., Cash, R., Armstrong, R., Di Censo, L., Zanatta, P., Murnane, A., Brophy, L. & Phelps, A. (2014). The Trauma and Homelessness Initiative. Report prepared by the Australian Centre for Posttraumatic Mental Health in collaboration with Sacred Heart Mission, Mind Australia, Inner South Community Health and VincentCare Victoria

Trauma and long-term homelessness

There is a strong relationship between trauma exposure, mental health difficulties, social disadvantage and long-term homelessness.

Trauma symptoms can affect someone's capacity to find employment and maintain it, find housing and maintain it, as well as manage relationships and their mental health.



Explanatory maintenance model of the relationship between trauma exposure, mental health difficulties, social disadvantage, and long-term homelessness

Each element in this cycle intensifies the other, with compounding effects. Trauma may lead to anxiety and depression, which makes it hard to maintain employment and a supportive social network. If someone falls behind on their rent they may not have anyone to turn to and enter homelessness. This could create a cycle which creates more trauma.

Being trapped in this cycle creates multiple potential barriers to recovery.

Trauma drives mental health difficulties

The symptoms of trauma may include poor impulse control, anxiety, anger, depression or substance use. A trauma survivor may need the ongoing support of mental health professionals and medication.

OUR COLLABORATIVE RESEARCH ON PEOPLE EXPERIENCING HOMELESSNESS FOUND THAT:



9 IN 10

MEET THE CRITERIA FOR CURRENT DIAGNOSIS OF A MENTAL HEALTH CONDITION



7 IN 10

MEET THE CRITERIA FOR POST-TRAUMATIC STRESS DISORDER



1 IN 2

MEET THE CRITERIA FOR A LIFETIME PSYCHOTIC DISORDER⁶

⁶ O'Donnell, M., Varker, T., Cash, R., Armstrong, R., Di Censo, L., Zanatta, P., Murnane, A., Brophy, L. & Phelps, A. (2014). The Trauma and Homelessness Initiative. Report prepared by the Australian Centre for Posttraumatic Mental Health in collaboration with Sacred Heart Mission, Mind Australia, Inner South Community Health and VincentCare Victoria

Trauma drives social disadvantage

Friends and family can be an important buffer to homelessness. If someone has strong family, community, or service relationships that support in times of crisis, they may be able to avoid homelessness despite difficult trauma symptoms.

Yet exposure to trauma early in life affects our ability to develop secure relationships and trust. Chronic loneliness and social exclusion may result. It also may affect employment prospects and reduce the likelihood of support in a time of crisis.

Part of trauma recovery is learning how to trust and develop and maintain relationships with friends and the broader community.

The prevalence of trauma and the complexity of its symptoms among people experiencing homelessness means that being trauma informed is very important for homeless services.

GISELLE

Giselle has had difficulty managing money her entire life. She has many unpaid fines. She gets extreme anxiety around the bank and has not set up an account, so she only uses cash. She has asked Centrelink to deposit her payments directly to a boyfriend's account.

At around 40 years old she realized her aversion to managing finances may be a trauma reaction or trigger.

She was raised in a single parent home and her mother was employed in sex work. She remembers hearing her mother regularly get into violent arguments over money with men.

Once she realized that her anxiety around money was a normal reaction to her past, she learned to manage her reactions. With support, she has set up her own bank account. While banking is still stressful, she has proven able to manage that stress and take control of her life.



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Trauma-informed services

Being trauma informed means that every interaction with our services supports a person's recovery from trauma. This includes interaction with staff, the delivery and type of services offered, and the physical environment.

To some extent trauma-informed practice is about changing the way we perceive the people we serve. Trauma-informed care does not focus on people's problems; instead we aim to meet people where they are at, understanding that something may have happened in their past.

Employing trauma informed practice at Sacred Heart Mission means adhering to the following principles:

- **TRAUMA AWARENESS**

Staff and volunteers are all required to undertake one of three levels of trauma-informed training appropriate to their position in order to recognise trauma symptoms and respond appropriately.

- **PROMOTE SAFETY**

As trauma survivors often feel at risk of further trauma, a sense of both physical and emotional safety are important to recovery.

- **REBUILDING CONTROL**

Trauma is disempowering, as is homelessness. Trauma informed services offer a predictable environment to allow people to rebuild a sense of efficacy and control over their lives. Predictable and reliable relationships with workers also reinforce healthy boundaries and help-seeking behaviour.

- **PROMOTE CONNECTION**

Social networks play a critical role in promoting resilience and recovery. Ideally, trauma survivors will develop healthy connections with friends, family and significant others.

- **FOCUS ON STRENGTHS AND RESOURCES**

We support people to identify their own strengths and develop or enhance their personal coping skills. While we acknowledge the challenges people have experienced, we support people to articulate and work toward their hopes for the future.

- **MAINTAINING A BELIEF IN RECOVERY**

This principle reminds us that people can and do recover from trauma. Conveying hope emphatically requires us to understand the barriers to recovery including lack of financial resources or living in unsafe or chaotic environments.

Great care must also be taken to ensure that when we support people we maintain a 'do no harm' approach, where we do not re-traumatise or blame the victim. If trauma survivors experience services as unsafe, disempowering and/or invalidating they may withdraw from seeking support.

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More details on our trauma-informed practise may be found in Sacred Heart Mission's Practice Framework and Case Management Framework.

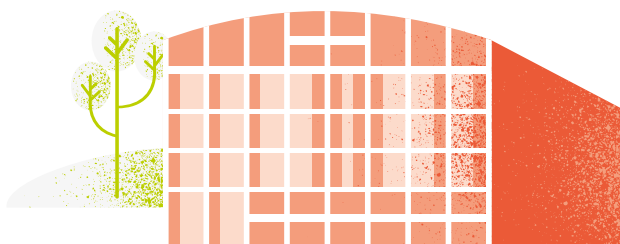
Our service model allows staff to slowly develop trust with service users through our engagement hubs by welcoming people in for a meal and offering a safe and supportive place.

From our engagement hubs, we link clients into other supports including housing access support, case management support, GP clinic, and links to specialist services like legal, alcohol and other drug support and mental health. Our wellbeing program also offer trauma recovery pathways through working with the physical body, including through yoga, swimming, exercise and sports.

Volunteers at our Hands on Health clinic also offer a range of services including counselling, massage, physiotherapy, hairdressing and dental checks.

We try to make the physical environment of our services feel simple and safe, without objects that are likely to trigger trauma responses.

More information can be found in our Service Model document.



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Conclusion

Trauma is the common thread that links a diverse group of people experiencing homelessness.

No one chooses to experience trauma. Yet it can have long-lasting effects on all aspects of a person's life, including how they think, feel and behave. This is why some people at Sacred Heart Mission may appear unpredictable or challenging.

Research has shown it is possible to recover from complex trauma. With support, community and a home we have seen people make amazing changes in their lives.

We hope raising awareness about trauma will help us realise our vision of an inclusive, fair and compassionate community that enables people to overcome disadvantage and realise their full potential.



Contact us

For further information please contact Brittany Dupree, our Communication and Advocacy Manager at bdupree@sacredheartmission.org



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