



THE FRAMEWORK
FOR AN EQUITABLE
HOMELESSNESS
RESPONSE
#HousingEquity

Healthy Parents Healthy Babies

Recommendations developed by people with **lived experience** of homelessness and extreme housing instability when pregnant focusing on how to **improve birth, health, housing, and other outcomes** for pregnant people, parents, and their children

September 21st, 2023

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<https://housingequityframework.org/healthyparents-healthybabies>



We want to know
who's in the room!



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About The Framework for an Equitable Homelessness Response

The Framework for an Equitable Homelessness Response project is guided by an unprecedented partnership of national organizations and experts and was launched to address both the public health and economic crises created by the COVID-19 pandemic and the inequitable impacts on people experiencing homelessness, Black, Latinx, and Indigenous communities, and people with disabilities and/or underlying health conditions.

For more, visit their website at:

www.housingequityframework.org

Framework Project Partners



Legacy Partner



About the Project

- Healthy Parents Healthy Babies (HPhB) was established to **document and disseminate strategies to reduce racial disparities, increase housing stability, and improve maternal health, birth outcomes, and child health associated with homelessness and extreme housing instability among women and families of color.**
- The recommendations highlight an equitable approach to working with families of color to reduce racial disparities in accessing housing, healthcare, and community support.
- The report includes:
 - **First Person Perspectives** - to share the deeper connection and understanding of the intentionality behind each policy recommendation
 - **Recommendations** – description of recommendation, what the recommendation addresses, and examples of policies and programs that exemplify and advance the recommendation
 - **Program Profiles** – examples of organizations that combine housing and healthcare resources using equitable practices



Our Aim

Our Vision

All parents are healthy and able to provide for their children, and all babies are born healthy and thrive as infants.

This report is intended for:



Policy makers at the federal, state, and local levels

Decision makers who oversee state Medicaid plans, public housing agencies, Continuums of Care, and others who finance/fund health, housing, and other services

Providers of health, housing, and services to pregnant and parenting people

What We Know

- 12 percent of the total U.S. population identifies as Black, but Black individuals accounted for 37 percent of all people experiencing homelessness and 50 percent of people experiencing homelessness as members of families with children.
- Racial disparities persist in maternal and infant health outcomes. Black women are significantly more likely to experience severe maternal morbidity and mortality
- Homelessness during pregnancy is harmful for both mother and their infants, resulting in higher rates of pregnancy complications, pre-term and low birthweight delivery, and other health complications.
- Beginning in the prenatal period and extending throughout childhood, any duration of homelessness – from the briefest experience to extended periods – is associated with adverse child physical, mental, and developmental outcome.





**Project launched
in March 2023**



**Development of
Lived Experience
Committee (LEC)**
composed of five
people with the
lived experience
of housing
instability while
pregnant

This committee was
tasked with developing
policy and practice
recommendations to
address the identified
needs and gaps that LEC
members prioritized.



**Recruitment of
experts in
maternal health
and housing
policy and
practice to serve
as Research and
Policy Advisors
(RPAs)**



**Joint session
with LEC and
RPAs during April
2023**

There were varying stages
of review and finalization
of recommendations by
June 2023.



**The LEC
retained
final
decision-
making** over
the content
of the report
and
recommenda
tions.

Our Methodology

Our Lived Experience Committee

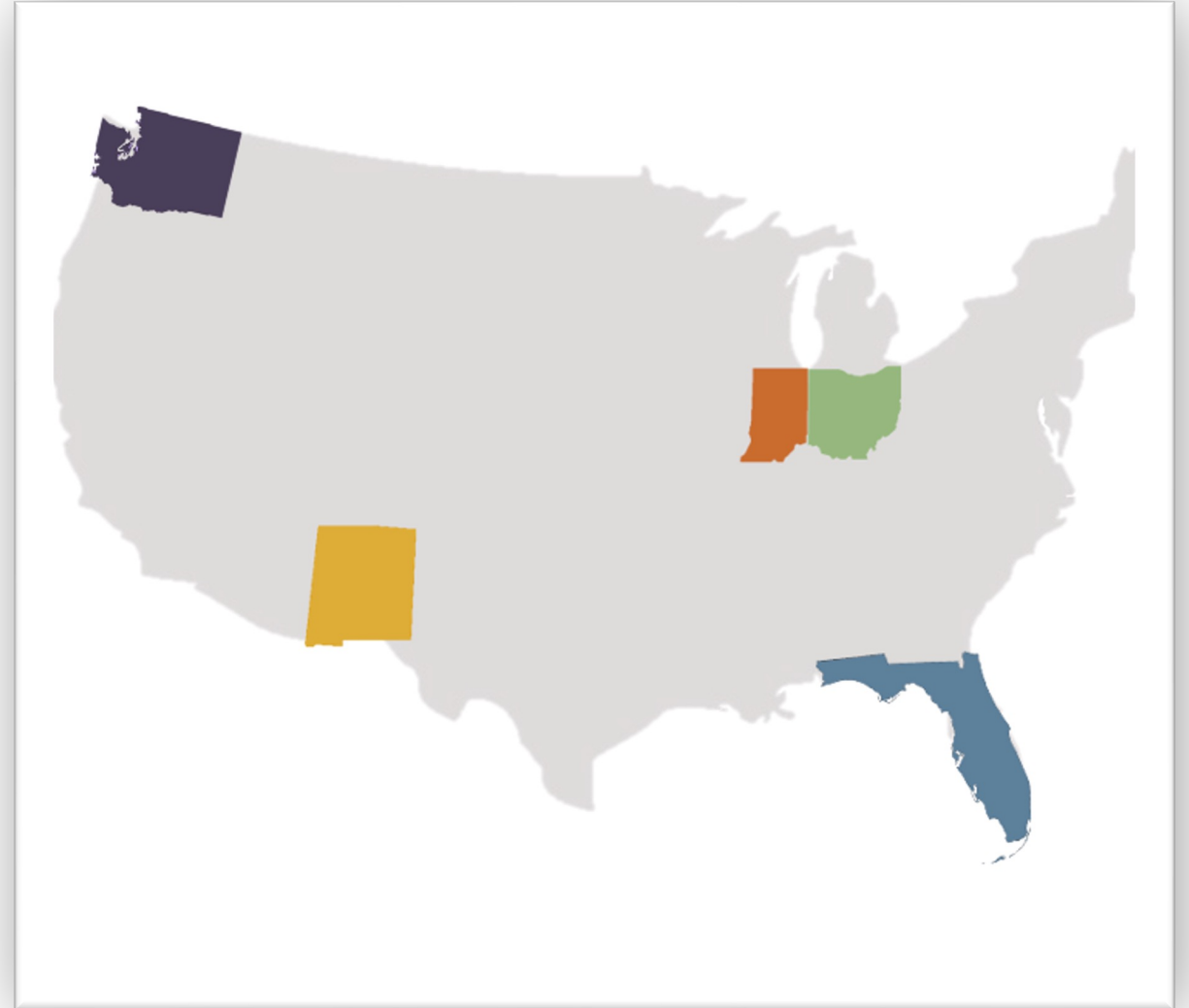
Ariana Rael,
Albuquerque,
NM

Cici Iverson,
Miami, FL

Rodrika Buckler,
Columbus, OH

Destiny,
Indianapolis, IN

Julia, Seattle,
WA



Recommendation #1:

Prevent trauma, utilize trauma-informed support, and practice harm reduction in all programs and systems.

Part 1: *Prevent trauma.*

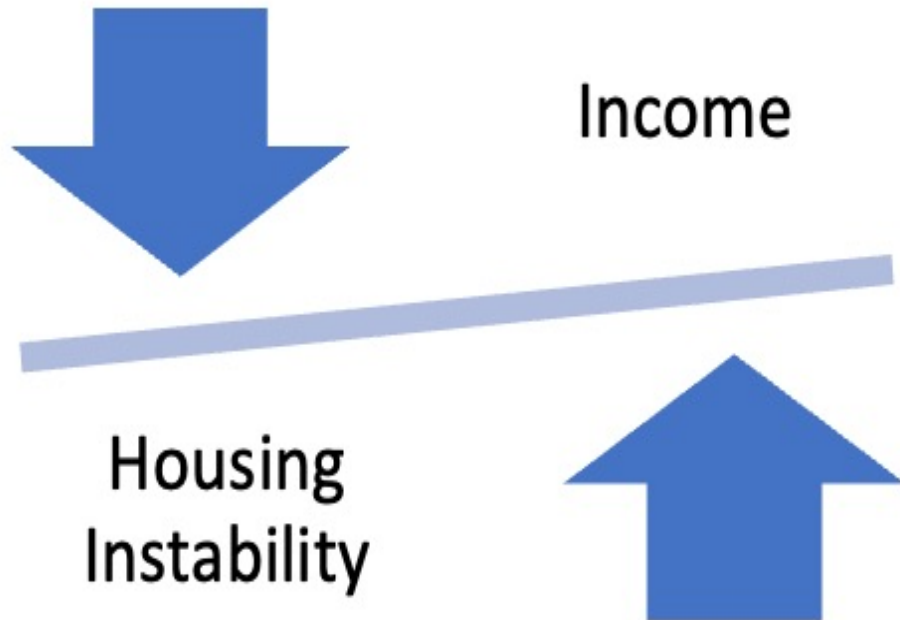
- Invest in early intervention and provide concrete support that stabilizes the pregnant person and new parents
- Ensure policies and services are implemented in a manner that supports the well-being of children and families of diverse racial and ethnic backgrounds

Part 2: *Mitigate trauma.*

- Provide extensive training to all staff in community and healthcare settings
- Validate the person's experiences and reduce the potential for implicit bias
- Raise awareness around local and national numbers (i.e., 211 and 988) that can potentially help in a crisis

Recommendation #2:

Provide housing AND income during the entire perinatal period.



- Provide financial support to pregnant and postpartum people during the transition from pregnancy to postpartum through government-paid maternity leave and rental assistance help for at least one year after birth
- Provide adequate time for the parent to locate childcare and return to work
- Ongoing rental assistance (i.e., housing vouchers)



First Person Perspective: Rodrika

Housing needs to be addressed in an equitable way that improves families' quality of lives.

- Rodrika experienced housing instability at a young age, as a vulnerable pregnant teenager. These memories remain vivid and have shaped her life experiences.
- Barriers** for Rodrika include concerns about her family's health and safety, given the condition of the housing and concerns about gang violence in the neighborhood. Past traumatic experiences around losing housing when speaking out on condition concerns is also a barrier, as are ambiguous housing rules.
- Rodrika believes that is essential that people have high quality housing that supports and protects their emotional and physical health. She also feels that housing should be in communities that are safe from violence and have spaces where kids can be kids.
- Rodrika plans to harness her heart of service, her extensive work experience, and her personal background as an advocate for her family to continue to build awareness around the need for housing equity across the country.

Rodrika identifies as Black female.



Recommendation #3:

Design quality housing with an equitable lens.

Increase investment to build and preserve quality affordable housing

Provide rental assistance at a scale that eliminates racial disparities and provides choice and autonomy for Black, American Indian, and Latinx people

Enforce fair housing and disability protections



First Person Perspective: Ariana

To survive and thrive, helpful hands and a supportive community are important.

- During Ariana's first pregnancy, she spent time living in her car then moved into a motel with a man who paid her bill but was abusive. With survival being her sole goal, she did not have time to focus on self-care or even follow standard prenatal recommendations. Ariana ultimately lost custody of her first child.
- **Barriers** for Ariana have included dealing with having a criminal background with a felony conviction that made it hard to find a landlord.
- During her second pregnancy, Ariana has had more time to focus on her baby and herself, because she finally has stable housing that she is confident that she will be able to keep.
- Like many parents-to-be, Ariana is focused on the future and giving her daughter a life full of happiness and stability. For the moment, she is happy to stay at her current restaurant job where she feels respected and valued by her bosses and co-workers.
- Ariana believes that policy changes will boost up individual women and building communities that support the most vulnerable among us.

Recommendation #4:

Create protections for renters and provide emergency rental assistance.



- Enact renter rights legislation to prevent evictions, ensure housing stability, and remove discriminatory barriers to tenancy
- Monitor landlords and enforce tenant protections
- Mitigate how property owners can use a history of eviction and/or criminal history in selecting among prospective renters
- Prohibit source of income discrimination
- Provide “just cause” tenant protections to build housing security
- Provide right-to-counsel guarantees
- Provide access to emergency rental assistance and legal representation



First Person Perspective: Destiny

Support, when needed, could make a big difference.

- Destiny, at the age of 21, was scared but resolved to navigate the challenging circumstances of being homeless with a newborn.
- Determined to provide her newborn with a safe sleeping environment, she reached her breaking point with couch-surfing after stuffing a milk crate with blankets to mimic a crib. Even after she moved to shelter, she felt trapped in a tiny room with a sobbing baby and no respite.
- Destiny also felt trapped by the system when she could not qualify for childcare help until her co-parent was placed on mandatory child support. Because of their distrust of the system this was a difficult step for them to take.
- **Barriers** for Destiny have included safe housing, affordable childcare, and lack of awareness of community resources and how to access them.
- Destiny believes all families should have 24-hour access to support. She plans to continue to be an advocate for change and to inspire her own children, breaking generational cycles.

Destiny identifies as Black female.



Recommendation #5:

Extend the timeframe for cutting off public assistance and benefits and provide more gradual intermediary step-downs.

- Provide parents with the time, support and opportunity to improve skills to achieve greater stability as they transition from postpartum through baby's first birthday
- The goal of this recommendation is to make the transition from support to independence more stable and seamless.



Recommendation #6:

Extend postpartum Medicaid and provide a more comprehensive standard of care.

- Increase the amount of time that postpartum people qualify for Medicaid
- Work with those states that have not yet adopted Medicaid expansion to do so
- Improve the standards of care during the postpartum period
 - More comprehensive and include postpartum depression screening and treatment, pediatric and maternal care coordination, and screening for unmet social needs and follow-up to ensure that those needs are met
 - Cover breast pumps, medications, postnatal vitamins, medications, special needs for babies and mothers (i.e., sensitive formula for babies), support with aftercare, postpartum doulas, transportation to and from appointments, and even childcare
 - Have medical staff ask about housing status to truly understand the safety and adequacy of their housing situation



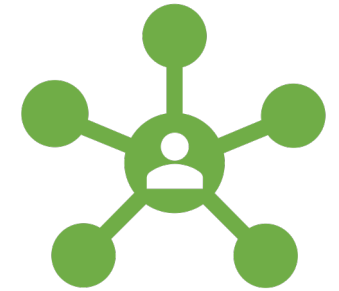
Recommendation #7:
Expand awareness and access to programs and resources among parents and pregnant people, communities, and organizations.



Invest in and publicize resources for maternal health and other supports, as well as prioritize housing support for pregnant people and families with young children



Assess the adequacy, appropriateness, timeliness, and scale of resources



Provide a continuum in conversation around existing resources for pregnant people and families with young children on a programmatic and resource usage level

First Person Perspective: Julia

Respect for autonomy and support are critical to success.

- Julia is a committed parent, who shares the desire of most parents to offer their child(ren) health, happiness, security, and the hope for a better tomorrow.
- Julia found that parenting her daughter the way that she wants in a shelter environment was difficult. The lack of privacy, noise levels, schedules, and even safe storage for breastmilk make it stressful. She wishes that her social worker had used a whole person approach to her situation, rather than making her feel like a number.
- **Barriers** for Julia have included finding a job and housing where she wants to live, juggling responsibilities, lack of control over her living environment, and dealing with anxiety.
- Julia remains optimistic about the future and focused on finding stable housing. Julia believes stable housing is not only good for individual families — providing them with a sense of security and inner peace — but it is also good for the nation, and its economy, as a whole.



Recommendation #8: ***Build 24-hour support, programs, and centers for new parents.***

- Develop and fund community-based support and programs designed and tailored to provide round-the-clock, 24-hour resources specifically to improve outcomes for postpartum people and their partners who are pregnant or are transitioning into parenthood
 - Community approach - community organizations, faith-based groups, volunteers, and peer support organizations
 - Basic needs, mental health, and connections to community resources
 - Staff included: nurses, doulas, and peer support specialists





Our Vision

All parents are healthy and able to provide for their children, and all babies are born healthy and thrive as infants.

Our Call to Action

- Enhance and better connect existing services and programs.
- Expand and create new responses that align with these recommendations.
- Listen to people with lived experience and take action.



Program Profiles

DC Community of Hope

- Community of Hope is focused on building housing stability while providing healthcare services to improve maternal, infant, and overall family health outcomes. The organization highlights the importance of systems thinking by breaking silos to provide more complete care for mothers and their babies.



Ohio Healthy Beginnings at Home

- The *Health Beginnings At Home: Housing Stabilization Program For Pregnant Women* (HBAH) study was launched mid-year 2018 in Columbus, Ohio highlighting how rental assistance and housing stabilization services may help pregnant women facing housing instability achieve better birth outcomes.





Q/A Discussion

Thank you!

If you have questions, please reach out:

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