

Understanding the Cycle of Housing Insecurity for Marginalized Survivors of Domestic and Sexual Violence

Shanti Kulkarni, PhD, University of North Carolina Charlotte
& Evelyn Hill, Certified Peer Support Specialist

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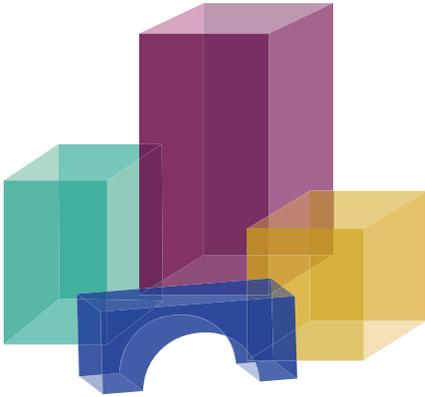
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The federal Domestic Violence and Housing Technical Assistance Consortium (the Consortium) is an innovative, collaborative approach to providing training, technical assistance, and resource development at the critical intersection of domestic and sexual violence, homelessness, and housing.

Funded and supported by an unprecedented partnership between the U.S. Department of Health and Human Services, Department of Justice, and Department of Housing and Urban Development, this multi-year Consortium brings together national, state, and local organizations with deep expertise on housing, domestic and sexual violence in order to collaboratively build and strengthen technical assistance to both housing/homelessness providers and domestic/sexual violence service providers. The Consortium aims to improve policies, identify promising practices, and strengthen collaborations necessary to improve housing options for survivors of domestic and sexual violence and their children in order to enhance safety, stability, and well-being.

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Background

Domestic violence (DV) rates in the United States are alarming with an estimated 1 in 4 women and 1 and 7 men experiencing severe physical violence by an intimate partner within their lifetime (Black, et al, 2011). Homeless people report higher rates of DV than the general population, and in fact domestic violence is among the most common reasons that women end up homeless. Domestic violence and sexual violence survivors face many barriers in finding and keeping housing due to safety concerns, trauma symptoms, limited incomes, poor credit, and more.

Continuum of Care and Coordinated Entry systems are the backbone for the service delivery systems charged with connecting people in need with safe housing. However, most communities find requests for housing assistance far exceed help available through existing programs. Thus, limited housing resources are often rationed to those deemed most vulnerable. As documented in other papers in this series, current practices fail to adequately capture survivors' risks ([see *Assessing Vulnerability, Prioritizing Risk*](#)) and by and large are not able to address their housing needs ([see *Assessing for & Appropriately Responding to the Housing Needs of Domestic & Sexual Violence Survivors*](#)). Further, these service delivery systems appear to perpetuate rather than reduce racial and economic disparities (Center for Social Innovation, 2018).



Homelessness and domestic/sexual violence do not impact all survivors equally. Survivors from marginalized communities—that is communities that have been historically and structurally excluded from social, economic, and political resources—face additional challenges weathering domestic/sexual violence and housing crises. Intersectional stigmatization results when people are members of more than one marginalized community. For example, black or Latinx survivors who identify as lesbian, gay, bisexual, or transgender (LGBT) may experience exclusion from the larger society based on their race and/or ethnicity and also be marginalized within their racial-ethnic group based on their sexual or gender orientation. As survivors become more marginalized, their access to resources decreases and their survival strategies must become more creative.

Survivors with marginalized identities too often find themselves trapped within a cycle of housing insecurity difficult to escape. People experiencing crises, such as domestic/sexual

violence and homelessness, first turn to their social networks, such as family and friends, to provide the resources they need. Unfortunately, survivors from marginalized communities typically rely on social networks that are already strained and under-resourced. Network members may not be able to offer additional resources or support to survivors when they are also struggling to meet basic needs, including finding and keeping their own housing. This network impoverishment is common for black, indigenous, and communities of color that have been denied access to resources over generations (Center for Social Innovation, 2018). Violence and trauma tax already impoverished networks making marginalized survivors' struggles even more difficult so that stable housing feels almost unattainable. In order to achieve housing equity for all survivors, we must better understand the experiences and respond to the needs of those who have been most marginalized.



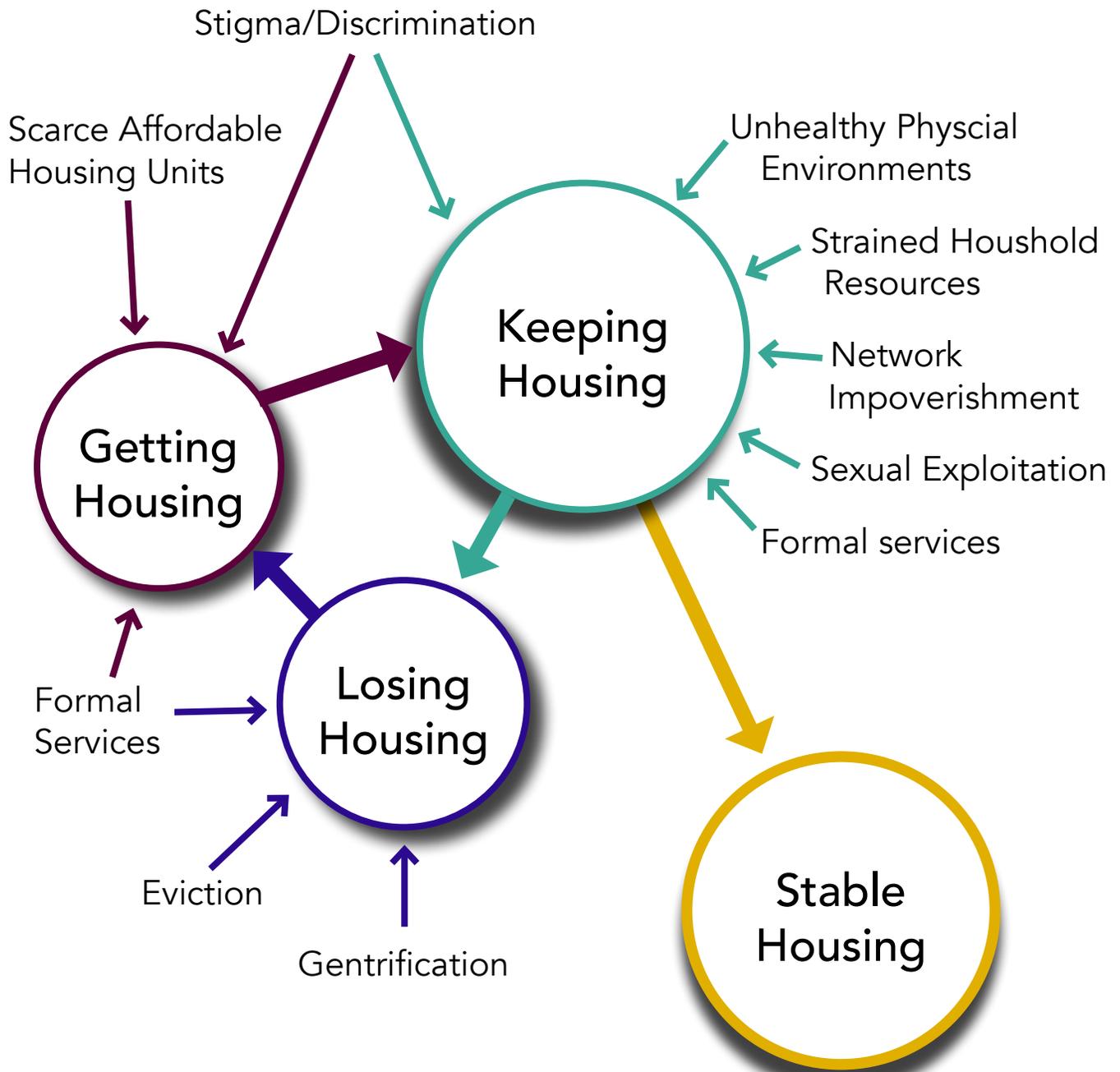
The Cycle of Housing Insecurity

This paper summarizes findings from a community-based participatory research study conducted in collaboration with survivors from marginalized communities. Between July 2019 and July 2020, our research teams held 14 listening sessions (6 primary/8 validation) with black and Latinx survivors who had intersectional identities related to their life experiences, including having a history of incarceration, being a new immigrant, living in poverty, and/or being part of the LGBT community. Survivors shared stories about finding, keeping, and losing their housing. A model of housing insecurity which incorporated survivors' experiences was developed by the research team following initial listening sessions. The team then held a series of survivor validation groups in order to refine the model and develop recommendations.

The cycle of housing insecurity model presented in this paper draws attention to survivors' barriers in getting and keeping housing. Many of these barriers remain unacknowledged and under-addressed by traditional housing and domestic violence/sexual violence/human trafficking (DV/SV/HT) services. Direct quotes* are used throughout the paper to foreground survivor voices. Recommendations are offered to counter these experiences through improved program services, policy implementation, and public awareness.

* some quotes have been edited for clarity

The Cycle of Housing Insecurity



Getting Housing

Universally, survivors shared difficulties securing appropriate housing -- even those leaving previously stable housing situations with their abusers. Amidst fierce competition for affordable housing units, landlords wielded significant power to decide who received them.

We told them [potential landlords] about the reason why I left due to domestic violence, but the lady immediately asked: "Well there's not going to be trouble here, is there?"

Survivors reported being judged more or less worthy of housing based on race, immigration status, criminal record, and domestic violence history. Frequently, survivors were assessed as undesirable tenants due to past criminal justice involvement, previous evictions, negative credit reports, family structure, and limited finances. Some survivors enter into informal living arrangements without rental agreements as their only remaining options. These situations came with their own benefits and risks.

In general, survivors expressed dissatisfaction with available housing for a myriad of reasons, including concerns about how housing affected their children's health, safety, and future opportunities.

When you are financially fit for a place, these apartments are often full of insects, like bedbugs or roaches, and this is very difficult.

You don't have money to pay for a place where you know your children have safety, that the schools are good.

While social service providers helped some survivors access housing, other survivors described a siloed service delivery system that impeded housing access. For example, one survivor repeatedly asked for housing resources and was told that her case manager could only help with substance abuse concerns.



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Keeping Housing

Most survivors ended up in housing that was unstable for various reasons. Survivors most often found themselves in substandard housing (e.g. mold, vermin, poorly maintained, overcrowded) and/or in undesirable neighborhoods (e.g. high crime, food deserts, no public transport). Even after receiving new housing, some survivors' partners continued to stalk them; while other survivors found themselves in locations isolated from their social networks or important resources.



Many survivors and their children reported increased trauma, mental health, and physical symptoms that threatened their ability to sustain housing. One survivor described how, once housed, her trauma symptoms intensified at the exact time services were being withdrawn:

So apparently, I don't have the wherewithal and it's connected to being homeless and domestic violence that's triggering that anxiety and being overwhelmed and one thing triggers another. I just feel like I relive [past traumas] and that it's a lack of love in the system. We feel the lack of love, the lack of caring.

Within unsafe environments, survivors were vulnerable to be victimized anew by sexually harassing landlords, new partners, and incidents of random community violence.

They [housing management] have apartment keys and know in which apartments single women live in. As for me, that man told me things that I had in my apartment and told me when he entered. All the women in this building are at risk.



Household finances were strained as survivors budgeted for child care, transportation, and health care expenses on limited incomes. Survivors' efforts to stabilize themselves were hampered by pervasive network impoverishment since survivors' support networks also struggled with both economic and housing insecurity. Some families doubled up in order to afford housing; however, these arrangements might introduce new risks.

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And when you are alone and with children it is very difficult to pay an apartment. You go back to live in a room with three children, two women [mother and daughter] and two men, and the social service will come and they will say "why are you living in these conditions?", so all this makes the situation difficult for a woman who has experienced domestic violence to find a dignified place where there is enough privacy for the children.

In addition, some survivors reported their family and friend relationships had been damaged by domestic violence. This was particularly true for survivors who were intentionally isolated by their abusers, had multiple episodes of leaving and returning to the abusive partner, or came from violent or dysfunctional families themselves. As a result, these survivors were that much more in need of formal social services. Unfortunately, services available to support struggling families were confusing, limited, and often demeaning to access.

You don't even want to go through to try to get the help that you need...because you don't wanna keep telling that same story over and over and over when you already did what you had to do to get through [domestic violence].

Losing Housing

I am just afraid of being homeless again if it doesn't work and the thing is that my fears are coming true.

Finally, rather than exiting into stable housing or on the pathway towards home ownership, survivors found themselves in the position of again losing housing. One participant described how survivors eager or pressured to move out of shelters may enter into leases that they could not afford, making them vulnerable to housing loss.



You save money when you're living in a shelter because there's no expenses. I'm able to move into housing, but the thing is I chose something that I can't afford--because I'm looking to get out of the shelter.

Evictions happened quickly when survivors missed rental payments and incurred late fees. Neighborhood gentrification resulted in survivors being pushed out of affordable units as their rents crept up. Survivors sometimes chose to leave housing conditions that were deteriorating, usually ending up in a different unstable housing situation, doubled up, or homeless.

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My agreement is month by month, and every six months I have had to change my house because the owner finds a better tenant.

Disrupting the Cycle of Housing Insecurity: Key Recommendations

Key recommendations for disrupting the cycle of housing insecurity were developed by the research team with feedback from survivor validation session participants and DV/SV/HT advocates and policy makers. The cycle of housing insecurity model highlights the many situational and structural factors that undermine survivor access to safe stable housing. Recommendations represent a comprehensive range of strategies to help DV/SV/HT survivors overcome unique challenges while uplifting their social networks and enriching their environments.

1. Healing and empowerment are possible, but survivors need comprehensive survivor-centered trauma-informed services



Nobody ever asks us what we need and what we want. I think that needs to start being incorporated to not just push the agenda of your organization.

Safe housing is the foundation for healing and necessary for survivors to move forward in other areas of their lives. Housing programs should adopt survivor-centered and trauma-informed models of care, such as Domestic Violence Housing First. Survivor-centered services are driven by

what individual survivors want and need. Many survivors report complex traumatic experiences associated with domestic violence, sexual violence, human trafficking, and homelessness. These survivors' needs are unique and change over time. They deserve flexible comprehensive trauma-informed services that are low-barrier, non-discriminatory, and embrace a racial equity lens to ensure services are accessible to all survivors regardless of identity, language, or other statuses. Culturally specific programs have deep expertise in responding to the needs of marginalized survivors and should be expanded.

Survivors will benefit from universal policies that provide childcare, healthcare, and living wage incomes. Education and training opportunities are important to survivors

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interested in pursuing new careers. Survivors in our study were interested in pathways towards home ownership and wealth creation.

2. Formal services can improve survivor access to housing resources through cross-sector collaborations.

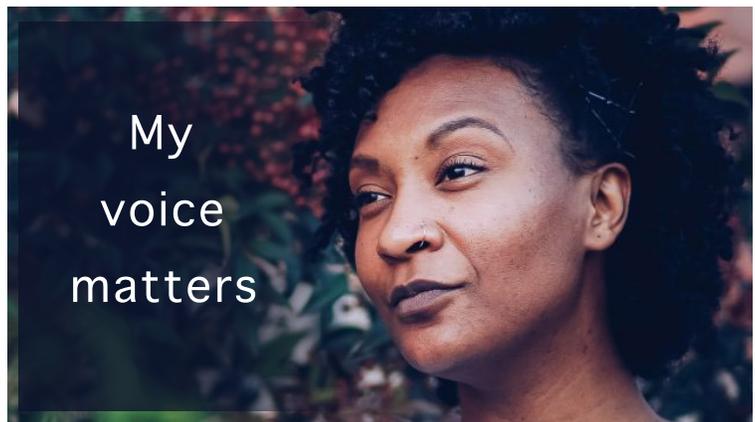
My case worker said she didn't know what to tell me (about housing) because that's not her job.

Survivors in our study interacted with different social service systems at different points in times, including domestic violence, sexual violence, crisis assistance, mental health, and criminal justice. While each of these systems has specialized expertise, these systems are not equally well-equipped to identify housing resources, overcome complex housing barriers, and move survivors towards stable housing. Cross-sector collaborations are needed to help survivors with their housing needs no matter how or where they seek formal services.

3. Survivors want to challenge negative stereotypes about domestic/sexual violence, incarceration, immigration, and race with their stories.

Prison is something that happened, it's not who I am. Domestic violence is something that happened, it is not who I am. And you're not going to define me by what you think I should be. Nobody can put me in another box.

I can work two, three jobs, and still people don't want to take that chance or even allow me the opportunity to live in a place that's conducive to being a productive member of society.



Participants in our listening sessions reminded us of the importance of using their voices. Survivors need more opportunities to leverage their experiences to create change. The stigma that survivors experience from landlords, service providers, and the general public often serves to isolate and silence. Stigma is rooted in socially accepted negative stereotypes about people and communities. Negative stereotypes serve to marginalize people from resources, justify discrimination, and reinforce social inequalities. Survivors in our study appreciated the opportunity to counter these

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stereotypes--telling their stories so they might be seen as multi-dimensional human beings. Survivors empowered in these ways are better able to rebuild social networks, restore communities, and influence policy.

4. Survivors want protections from housing discrimination and tenant exploitation.

To be able to stay there, we stopped complaining because you know you need a place and since you're paying what you are paying and you don't want them to throw you out, you ignore your needs.

Survivors are vulnerable to housing discrimination and tenant exploitation. These experiences greatly undercut efforts to find and keep housing. Local, state, and federal policy efforts can support survivors in understanding their rights, accessing protections, and collectively pursuing for policy reforms. Currently, the Violence Against Women Act (VAWA) offers protections to increase survivor access to federally assisted, safe housing and prevent survivors from suffering housing consequences associated with their partners' violent behavior. For example, VAWA requires housing providers to provide emergency transfers to safe rental units, lease bifurcations (which remove perpetrators from the leases and allow survivors to retain leases in their own names), and special consideration when leasing to survivors with negative credit and rental histories because of domestic/sexual violence, such as property damage or nuisance violations. The Fair Housing Act offers more protections from housing discrimination on the basis of "race, color, national origin, religion, sex, familial status, or disability." State and local laws may offer additional housing protections for survivors. Many survivors live under the threat of eviction and/or experience harassment from landlords, property managers, maintenance people, and other tenants. More attention and resources should be directed towards increasing public knowledge and federal and local enforcement of survivor housing protections.



5. Communities need affordable housing resources and equitable access.

I mean, it's like everybody is trying for that one house and these people know that, these landlords know that, so they'll jack the prices up because they have all these different people trying to get this one house.

In large part, survivor housing insecurity reflects the fact that in most communities there are not enough affordable housing units to meet current demand. Unfortunately, as

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communities seek to allocate scarce housing resources, they may utilize prioritization practices that limit survivor housing access. More cross-sector initiatives are needed so that survivors can access specialized assistance around housing needs even as they seek help from other systems. Localities must proactively prioritize affordable housing development that serves survivors. Additionally, federally assisted housing providers, such as public housing agencies, must have admissions preferences for survivors so that they can move more quickly to the top of waiting lists and further facilitate VAWA emergency transfers between federally subsidized units.

6. Comprehensive community investments should target the underlying causes of housing insecurity.

The neighborhoods are filled with abandoned houses or houses that aren't kept up. You have certain landlords that will rent to us, but what they want to put you in you wouldn't want to live in. Because it's not made for a family, it's not made for the kids to feel safe. I feel like it's throwing a Band-Aid on something and just say, "Here, we giving it to you, be quiet. Go away. Go sit in a corner."

Community resource investment is desperately needed to disrupt the cycle of housing insecurity that traps many survivors. Survivors in our study lived in neighborhoods that lacked access to public transportation, healthcare, good schools, and healthy foods. Survivors reported feeling unsafe in neighborhoods with high levels of gun violence and drug use. When neighborhoods are gentrified, rents are no longer affordable and survivors must find new places to live. This displacement harms individuals, families, and social networks and increases survivors' sense of isolation and hopelessness. Deep community and neighborhood investments can simultaneously uplift survivors along with their social networks.



Conclusion

The cycle of housing insecurity model illustrates the tremendous challenges DV/SV/HT survivors from marginalized communities must overcome to achieve safe stable housing. First, survivors in need of safe affordable housing units had few choices and the housing search was often demoralizing. Survivors felt stigmatized and discriminated against by landlords and even programs meant to help them. Secondly, the undesirable housing available to survivors on the margins often created new health, safety, or financial challenges. Disturbingly, DV/SV/HT survivors experienced additional trauma in the form of wide-spread sexual harassment. In the end, survivors relied on their own limited financial resources within impoverished social networks to keep housing. Thus, housing loss could occur quickly due to eviction or because of rising rents in gentrifying neighborhoods. Disrupting the cycle of housing insecurity will require:

1. Transforming service delivery systems to be more trauma-informed and survivor-centered
2. Expanding collaborations between housing experts and DV/SV/HT service providers
3. Providing opportunities for survivors to use their stories to make change
4. Educating DV/SV/HT survivors and advocates to utilize existing housing rights/protections
5. Increasing affordable housing supply and ensuring equitable access
6. Making needed community and neighborhood investments

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