

Executive Summary:

Adverse Childhood Experiences (ACE) and Breaking the Cycle of Homelessness

A service model developed in California by the Committee on the Shelterless (COTS) is designed to break intergenerational cycles of homelessness and offers a comprehensive approach to addressing adverse childhood experiences (ACEs). The ACE Study conducted by the Centers for Disease Control and Kaiser Permanente demonstrates the relationship of childhood trauma to adult health and social problems (Felitti, 2002). There is a compelling relationship between ACEs and the risk behaviors leading to homelessness (Burt, 2001).

Resiliency research, which focuses on human strengths that help fend off depression, substance use, and other health related problems (Henderson, 2003), is useful in designing ACE response. Individual and community qualities work together to empower a person to move forward in life with a sense of capability, mastery, and expectation (Smith & Carlson, 1997; Henderson, 2003; Daining & DePanfilis 2007). Drawing upon sound theory and research, COTS mobilizes resilience and recovery through carefully designed programming geared to break the cycle of homelessness, saving the cost of future ACE outcomes for the next generation.

COTS distinguishes itself from “trauma-informed” agencies in that COTS has specifically incorporated ACE trauma into program design, while simultaneously mobilizing resiliency and supporting recovery. The no use drug and alcohol policy is key to COTS’ transformative culture, which extends into the community, by prioritizing health and safety and allowing for the safe welcoming environment that has been created. Thus, people are both supported and held accountable for their behaviors.

Each COTS program addresses ACEs, offering supports and skill-building from distinct angles. Kids First, Support Groups, Case Management, Anger Management, and the Four Agreements Seminars are programs that were adapted in light of the ACE research. Other programs were initiated as ACE research was incorporated into program design: ACE Awareness Education Presentations, Emotional Hijacking Coping Strategies Seminars, Somatic Experiencing, At Home Within classes, Gentle Yoga, Stress and Coping classes, Relationship Skills classes, and Domestic Violence awareness classes were introduced to further support people recovering from ACE and ACE outcomes. This has led to a dramatic increase in COTS' ability to house homeless and chronically homeless adults. In 2004 – 2005, COTS housed 8 of 646 clients with conventional case management techniques, fewer programs, and the same number of full-time program staff. In 2008 – 2009, 283 of 590 unduplicated individuals were successfully housed in transitional or permanent housing. COTS has demonstrated the ability to effectively break the cycle of homelessness -- these accomplishments indicate the value of thorough evaluation research to further understand the effectiveness of the COTS model.

With family homelessness on the rise, children are at a higher risk for ACEs and associated later life outcomes, potentially contributing to a vicious cycle of homelessness and related social problems. COTS' high impact programs are implemented in a cost-effective way through community involvement, relationship-building and advocacy, and a strong volunteer network. COTS' programs are worthy of replication and rigorous evaluation.