

Working with Women Suffering from Psychosocial Burden – Interpretations by Workers in a Community– Based Supported Housing Unit 24.9.2021

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# Outline of the presentation

- Background
- Introduction
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# Background

- Housing First in Finland:
  - Housing options: Own independent rental apartment either in scattered housing or in a supported housing unit
- Recent developments in women's homelessness
- Women in supported housing unit



#### Introduction to our research (2019–2021)

 The focus of the study was on worker-client relationship and its diverse meanings at different stages of women's housing pathways.

• The study is part of a larger research project focusing on support work in Women's Housing Pathways.



# Research questions

- What kind of contents does women-specific support work have when it takes place with psychosocially burdened women?
- What kind of elements strengthen the well-being and professional development of workers who do women-specific work with women suffering from psychosocial burden?



# Data, methods & analysis

- One loosely thematic group interview with a team (three female practical nurses)
- Interviews with three experts on female homelessness
- Time-, setting- and encounter-specific interpretations of support work focused on encounters with marginalized women
- Data driven content analysis





# Results

# No sense of home, despite a permanent tenancy

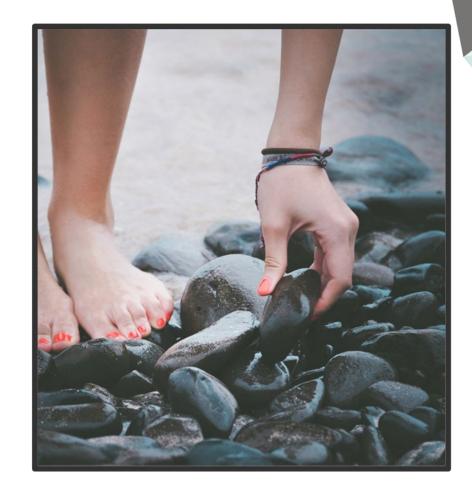
I haven't heard any one of our residents call their flat a home....They sometimes correct me if I talk about a home, they say "this is not my home".





#### Lack of Choice – Last resort

The social services have assigned this place for them. The other option is staying outside. When you take that choice away, I don't know whether it's really, whether it feels like home.





# Psychosocial burdens as part of everyday life

- Sense of home destroyed too many times
- Drug dependency, mental illness and risk of violence
- Unspoken sorrows



# Unspoken sorrows

They talk very, very little....I think they are sensitive topics and they might be ashamed. Or it might make them feel so upset that they don't want that. So, they just numb themselves with drugs or alcohol, it's kind of an endless cycle. It's somewhere inside them, but it never gets out.





## At the utmost edge of marginalisation

These are individuals with psychogeriatric issues who return here after an assessment period and the years go by....Where does that person go when they get older, I do worry about that a lot.



#### The embodiment of all the misfortunes

 Relationships are strained by untreated substance abuse and mental health issues as well as the cumulative traumatic experiences that underlie and intertwine them

 Communal living with strangers who are stigmatized with the same categories of problems may feel like objectionable, forced interaction.

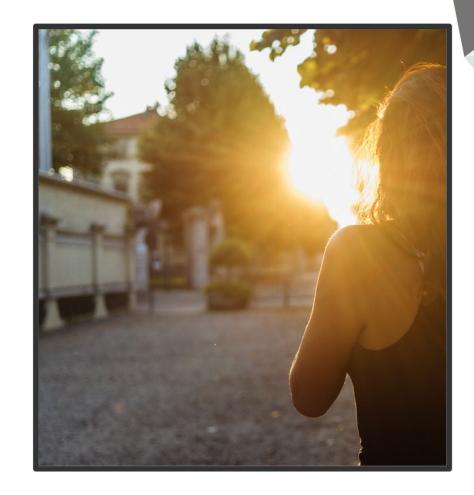


# Worker-client relationship based on mutual trust and attachment

Our residents are also able to say sorry. And it comes straight from the heart.

It can be just a small thing, and when they thank you. It doesn't have to be anything major but they are grateful for many things.

One resident called and said: "It's nice that you returned from your holidays."





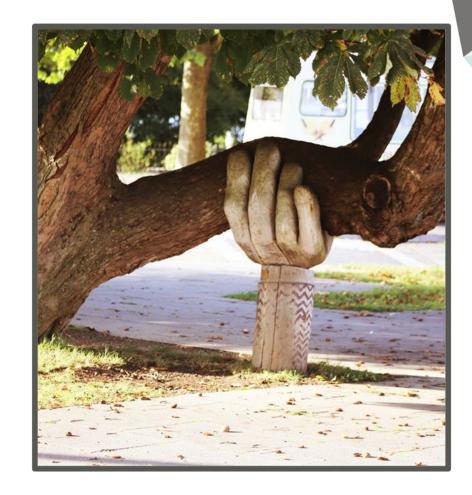
# Mutually shared space

We have a common space on the fifth floor where we have coffee together. Often at the weekends if I'm alone here, I'll just sit there for hours and talk with the women about anything and everything.



## Shared value base

Personally, the fact that the value base is the same is probably the **most important** thing for me. This is a very important thing for me personally. People who are in our service, they have been everywhere else for quite a few times and they have visited us and come back again and again, and if you don't have that value base, how can you do the job well? You have to care about these people .. Everyone has the right to their own home and a life with dignity... If you don't have that, I don't think you can do this kind of work.





#### Discussion

#### Social marginality and exclusion

- deep concern for the women whose mental and physical health was deteriorating
- the inconsistence of care pathways in substance abuse care, psychiatric hospital care as well as gerontological services.

#### Presence work

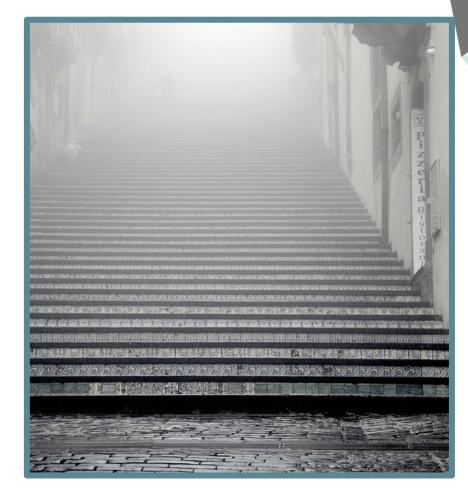
meaningful encounters based on attachment and mutual trust

Deepening the understanding of long-term female homelessness as a social and psychological phenomena



#### For further information

- Granfelt & Turunen: Women on the Border between Home and Homelessness: Analysing Worker-Client Relationship <a href="https://www.cogitatiopress.com/socialinclusion/article/view/4313">https://www.cogitatiopress.com/socialinclusion/article/view/4313</a>
- Research report on Women's Housing Pathways (End of September, in Finnish)
- Women's Experiences of Home and Homelessness: A Narrative Study of the Housing Pathways of Finnish Women, 1986– 2020 (TBA)





# Thank you! Kiitos!







