Demonstrating meaningful outcomes in a Homelessness setting

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Demonstrating meaningful outcomes in a Homelessness setting

Considering

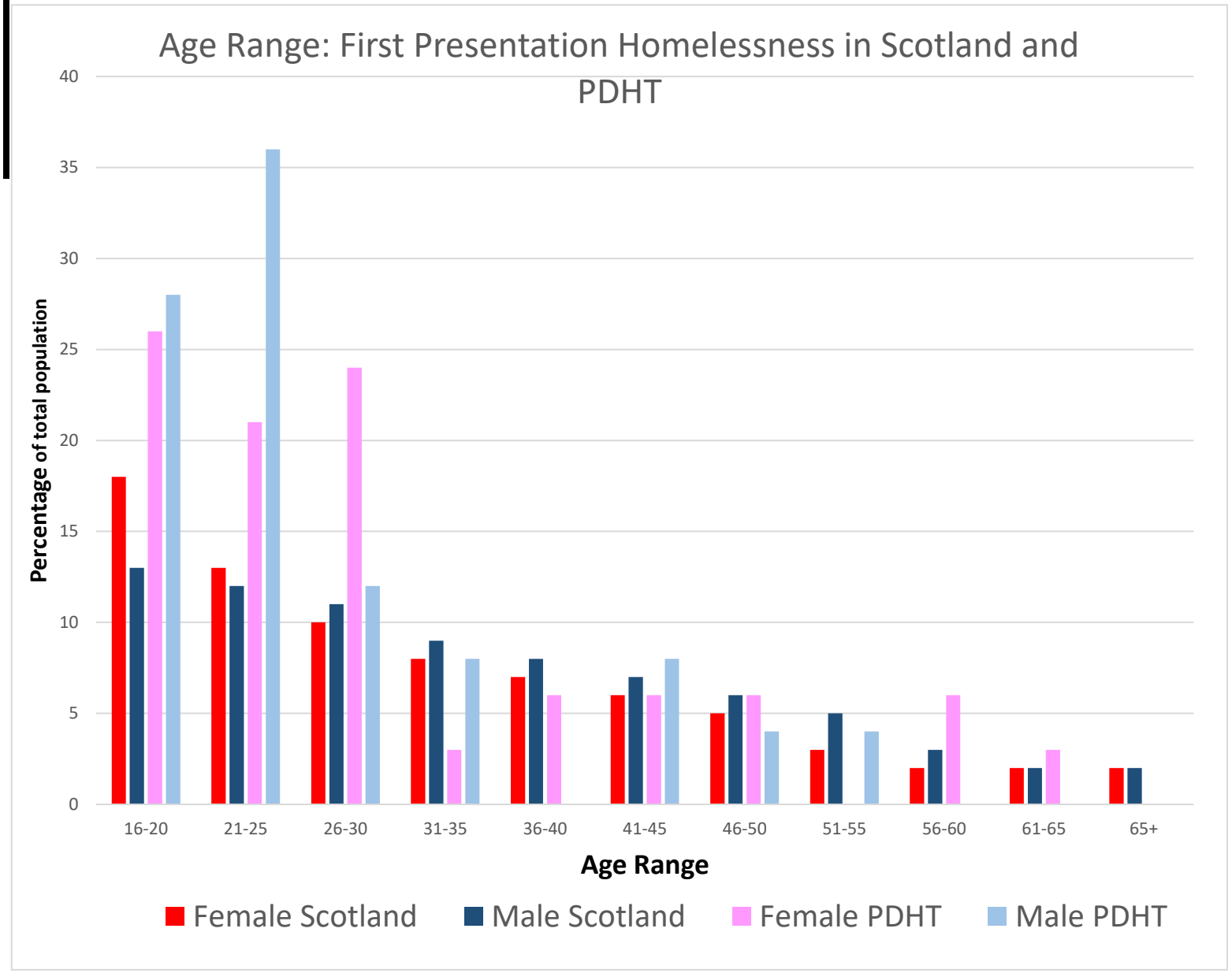
- Age
- Ethnicity
- Gender Identity
- Sexual Orientation
- Pregnancy and Maternity

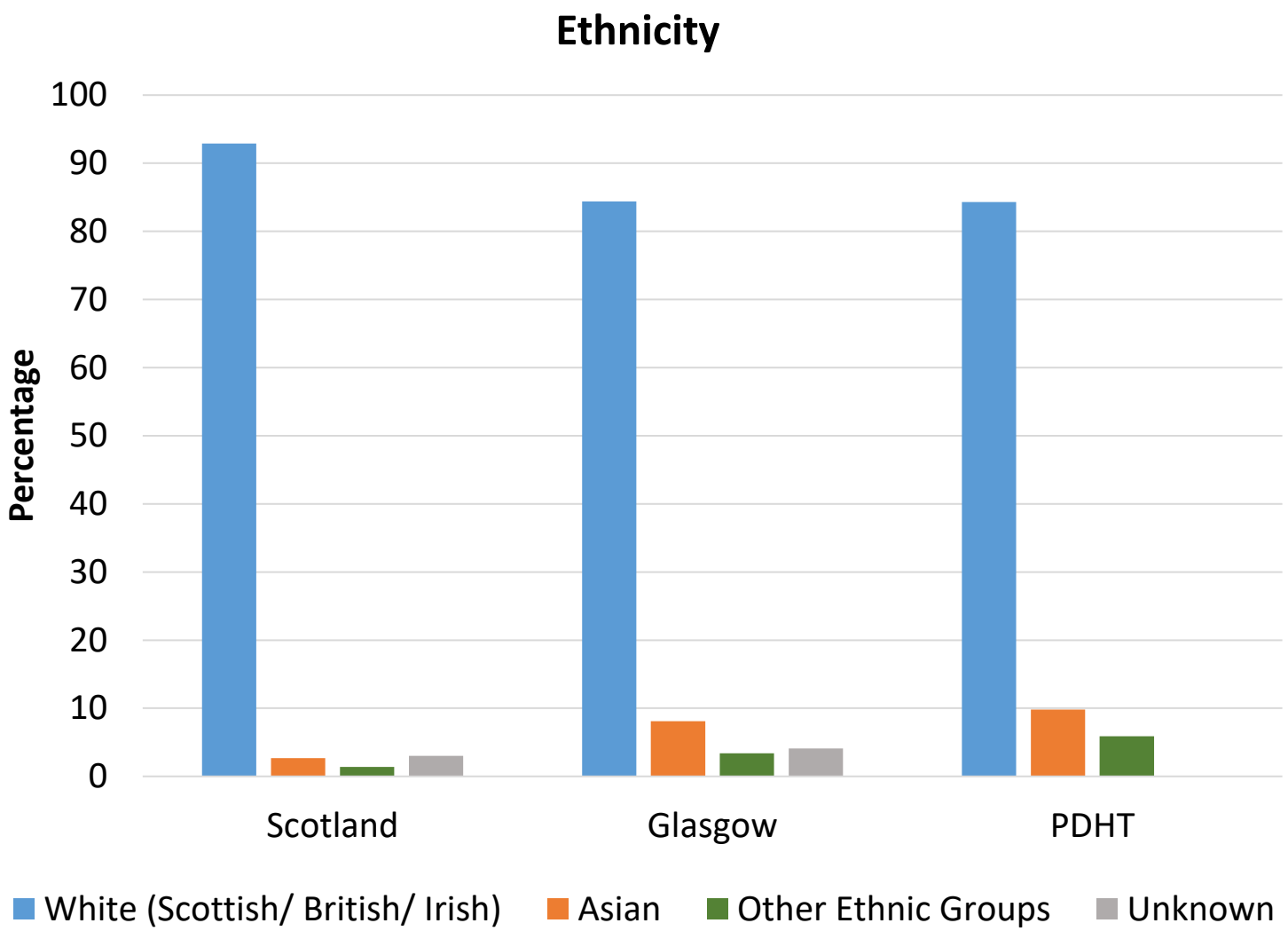
The service: PDHT

personality disorder and homelessness team

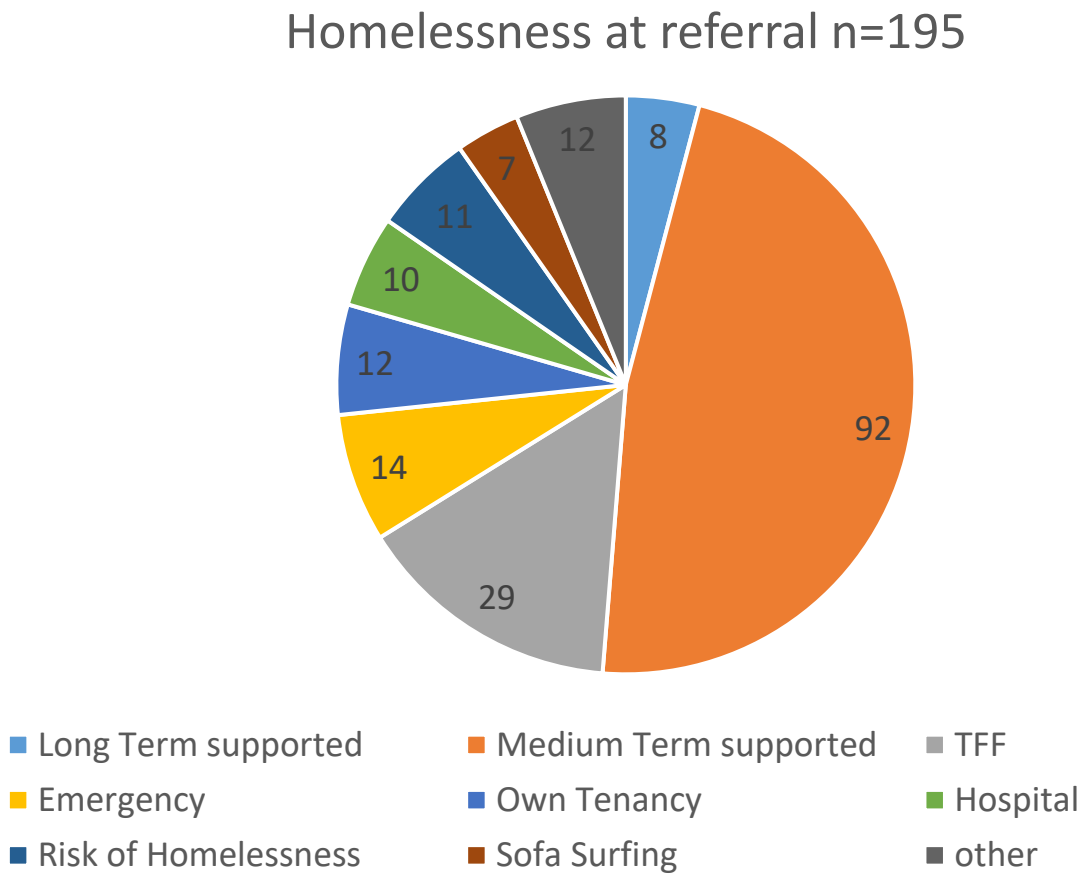
- Clinical – assessment, diagnosis, formulation and treatment; MBT
- Joint working – with NHS, housing, social work and third sector
  - Consultation
  - Reflective Practice
  - Training – personality disorder, boundaries, MBT skills

Are we reaching a representative population?


Age Range: First Presentation Homelessness in Scotland and PDHT
Percentage of total population
40
35
30
25
20
15
10
5
0
16-20
21-25
26-30
31-35
36-40
41-45
46-50
51-55
56-60
61-65
65+
Age Range
Female Scotland
Male Scotland
Female PDHT
Male PDHT


Ethnicity
Percentage
100
90
80
70
60
50
40
30
20
10
0
Scotland
Glasgow
PDHT
White (Scottish/ British/ Irish)
Asian
Other Ethnic Groups
Unknown

Homeless status at referral



ACE SCORE AND RELATION TO ADULT HOMELESSNESS

What is toxic stress?
Toxic stress is long lasting stress over which the child has very little control. Involving the chronic elevation of stress hormones and a child's stress response system, it often occurs when a child must confront stressors without a safe, supportive adult to buffer their impact. It can be caused by abuse, neglect, and poverty and other ACEs.[1]

What is an ACE?
Adverse childhood experiences (ACEs) are stressful or traumatic experiences, including abuse, neglect and a range of household dysfunction such as witnessing domestic violence, or growing up with substance abuse, mental illness, parental discord, or crime in the home. They can cause toxic stress and can lead to a variety of negative outcomes, including adult homelessness[2].

ACE Score and Relation to Adult Homelessness

Proportion of Washington residents experiencing adult homelessness (among participants in Washington's Behavioral Risk Factor Surveillance System).[3]

Created by Seattle University's Project on Family Homelessness with information from:

1. **Harvard** http://bit.ly/1jYfIH7
2. **SAMSHA** http://1.usa.gov/1ttTi65
3. Infographic adapted from "Factors Associated with Adult Homelessness in Washington State: A Secondary Analysis of Behavioral Risk Factor Surveillance System Data (Final Report)" by Cutuli, Montgomery, Evans-Chase & Culhane (University of Pennsylvania, 2013). http://bit.ly/1xbGqDW

As childhood adverse experiences accumulate, so does the likelihood of struggling with adult homelessness.

ACE Scores

All referrals	**n=54**
Mean	**7.17**
Range	3-10
Median	8
Mode	8
MBT Treatment group	**n=14**
Mean	**6.79**
Range	4-9
Median	7.5
Mode	8

Other characteristics

	Our Referrals	All Scotland	All Glasgow	All Scottish Homeless
Alcohol Misuse (AUDIT)		25% M 10% F	23% M 12% F	
Drug Misuse		1.63%	2.85%	
Alcohol OR Drug misuse	74%			19%
Looked After/ Accommodated	36% *	1.4%	2.28%	2.87%

* > 1/3 reported 4 or more placements during childhood

Scottish Govt Health and Homelessness Report 2018
Glasgow HSCP Demographics Profile 2021

Thinking about the LGBTQ+ community

	PDHT	All Glasgow City	All Scotland
Heterosexual	62.2%	90.6%	94.2%
LGBTQ+	31.1%	5.7%	2.9%
Not Known	6.7%	3.7%	2.9%

Experience of service in relation to protected characteristics: Ethnicity

I was not asked or left feeling uncomfortable about my background the focus was on me, who I am and I never felt shut down. I was born in Somalia and moved around a lot as a child and felt confused I felt that here I was listened to and people wanted to get to know me. You all would ask questions if you did not understand something.

Experience of service in relation to protected characteristics: Ethnicity

I don't think race or religion has ever been something I'm not able to discuss here. It's something I have struggled with in the past but here I find it easier to talk about. It helps that you don't get told you're wrong for thinking something, but that it can be thought about in sessions. You've never been disrespectful about it, but I know if you said something that wasn't ok I could tell you how I feel or how you've got it wrong.

Experience of service in relation to protected characteristics: LGBTQ+

This has never felt like an issue for me. I have felt I could say anything about my sexuality I feel it would be fine. Maybe the staff don't always want to talk about sex stuff haha.

I was just me and nobody ever made me feel that was wrong

Experience of service in relation to protected characteristics: LGBTQ+

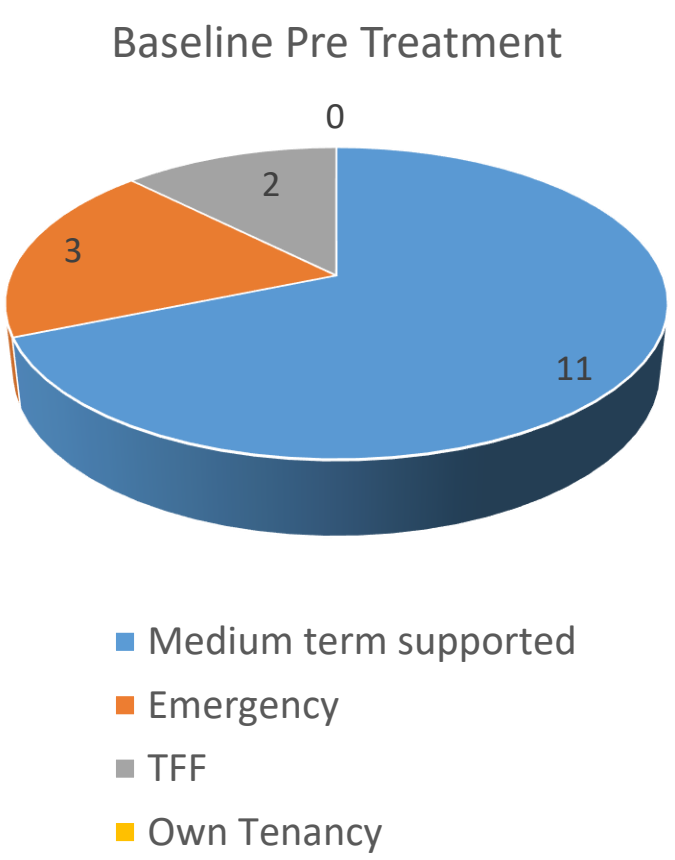
Being a mum in a relationship with another woman- I've not been treated differently by you, but If I was I wouldn't come. I don't call myself a lesbian and think that those labels can cause mess, but I don't think I'd be treated any differently here no matter who I was with. I can talk about everything here and where my all my thoughts get me to.

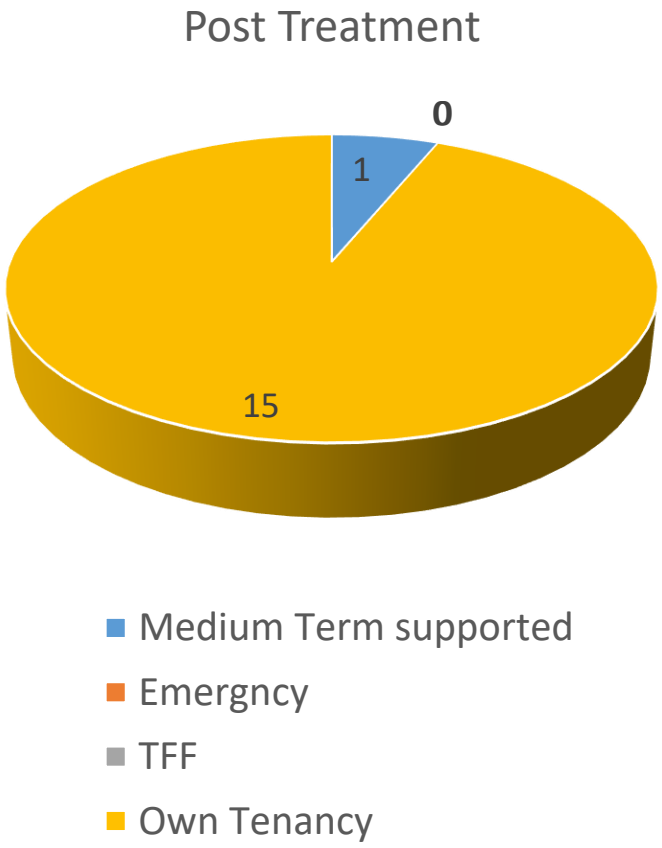
Outcomes: GAF Scores

	Min	Max	Mean	Median	SD
Baseline offered MBT n=36	36	70	**47.7**	50	8.9
Pre treatment n=17	41	61	**45.5**	43.8	5.76
Post n=17	55	78	**62.7**	62	4.6

< 50	Serious symptoms and impairment in functioning
51 – 60	Moderate symptoms and impairment in functioning
61 – 70	Mild symptoms and impairment in functioning

Accommodation outcomes: type of accommodation





Accommodation outcomes: number of moves

No. of Placements in past 6 months	Baseline:	Pre MBT-i	Post MBT
1	14	7	14
2	11	6	2
3	6	3	0
4	0	0	0
5	0	0	0
6	2	0	0
N/K	6	0	0

Focus on pregnancy and parenting

- 17 people experiencing pregnancy during treatment or existing parents
- 7 with SW involvement (3 current/ 3 historical)
- 6 with full custody of children
- 1 with joint custody
- 4 with partial/ sv contact
- 4 had 1 or more child removed

Experience of service in relation to parenting

You taught me a lot and it was helpful when I was going through the parenting assessment as they would say things that upset me and you would help me to think about what they were saying in different ways that did help make sense of what was happening. I felt it was important that someone understood what it was like for me. I think more mothers like me could benefit from this.

Experience of service in relation to parenting

I don't think I would have my ….. if I did not have the support I felt supported through the anxious times and I do feel more confident as a mum now – apart form when I do get a bit anxious, but I think that will never go away. I mentalize with my baby, never thought I would say that. Used to hate that word.

Louise *

- Late 20's British born Somali heritage
- Referred to team due to homelessness position and difficulties identified with interpersonal functioning- contact with emergency services both MH and police
- Request to assess for/ gain clarity upon Dx and consider options of therapy for Louise
- Outcome of assessment: Initially offered 6 month intervention with review- progressed to full treatment, 1:1, MBT-I and MBT G
- Became a mother during Pandemic

- *name has been changed

Experience of service in relation to parenting

Surprisingly we did not always talk about ….. The focus was on me and how I was doing. I appreciated that. She could have been a distraction. It helped having you there when the child protection happened and you were open and honest about what you would be saying and what you thought could help me. This helped as I did not feel paranoid about you.

What do we think is helping this group engage in treatment?

- MBT treatment
  - Stance – empathy, curiosity, not knowing, interest in the other's mind and perspectives
  - Open referral system – reduce barriers, flexible
  - Epistemic trust

Epistemic Trust

Definition: trust in the **authenticity** and **personal relevance** of interpersonally transmitted knowledge

(EPISTEMIC = relating to knowledge)

Epistemic mistrust - barriers

High levels of epistemic vigilance

The door is closed to learning

Rigid thinking

Hard to reach

Suspicious about our intent

Epistemic mistrust - barriers

Is it more likely that people from BME backgrounds and LGBTQ+ community are going to be at a disadvantage in terms of developing epistemic trust?

Epistemic mistrust - barriers

- We set out to be a low barrier, inclusive service and we think we are achieving some of those aims. We still have questions about some minority groups and how we are doing.
- Do we understand what are the active ingredients are that might reduce barriers?