



# HER HEALTH, HER HOUSING

IMPROVING SERVICES FOR WOMEN  
EXPERIENCING HOMELESSNESS

MAR. 6-28 • [NHCHC.ORG/VIRTUAL](https://nhchc.org/virtual)

## **Forsake Me Not:**

How HCH Providers Can Deliver Better Care to  
Pregnant Women Experiencing Homelessness

March 21, 2019

Quality | Access | Justice | Community | [nhchc.org](https://nhchc.org)

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# Disclaimer

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*Moderator: **Barbara DiPietro**, Senior Director of Policy, NHCHC*

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# Learning Objectives

Participants will be able to...

- Understand why treating pregnant patients is important
- Learn how provider bias and system barriers can undermine effectiveness of care
- Identify elements of a successful care model used to treat pregnant women experiencing homelessness

# Why do Health Care for the Homeless (HCH) programs and providers need to take care of pregnant women?



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# HCH cares for woman of reproductive age.

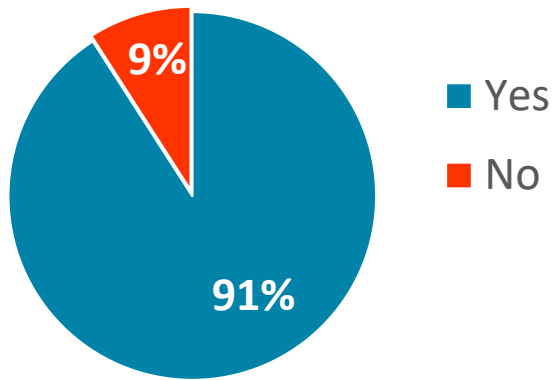
Nationally, girls/women of reproductive age (age 15-44):

- **23%** of all HCH patients
- **26%** of all Health Center patients

# HCH cares for women who have a history of pregnancy

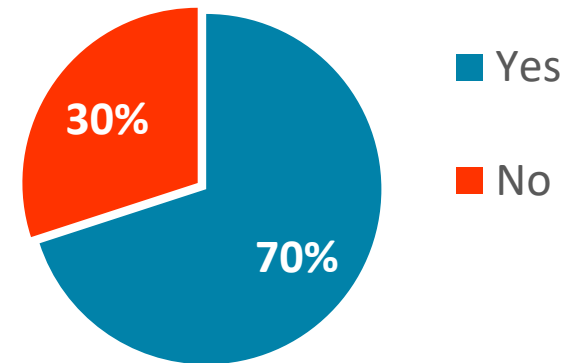
Survey cis- women living on the street and encampments

Have you ever been pregnant? (n=55)

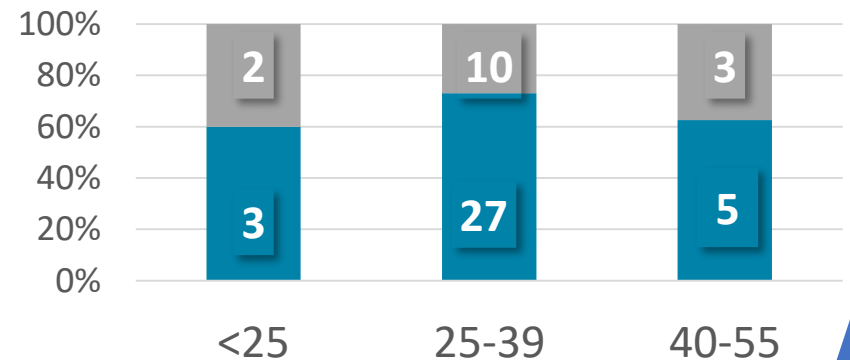
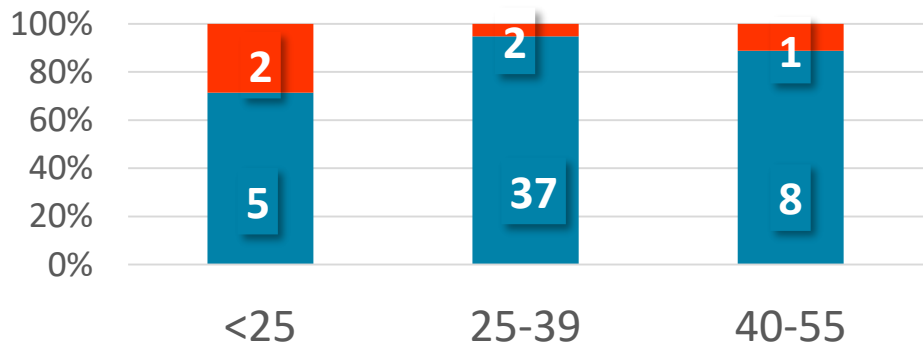


By Age Group

Have you ever given birth? (n=50)

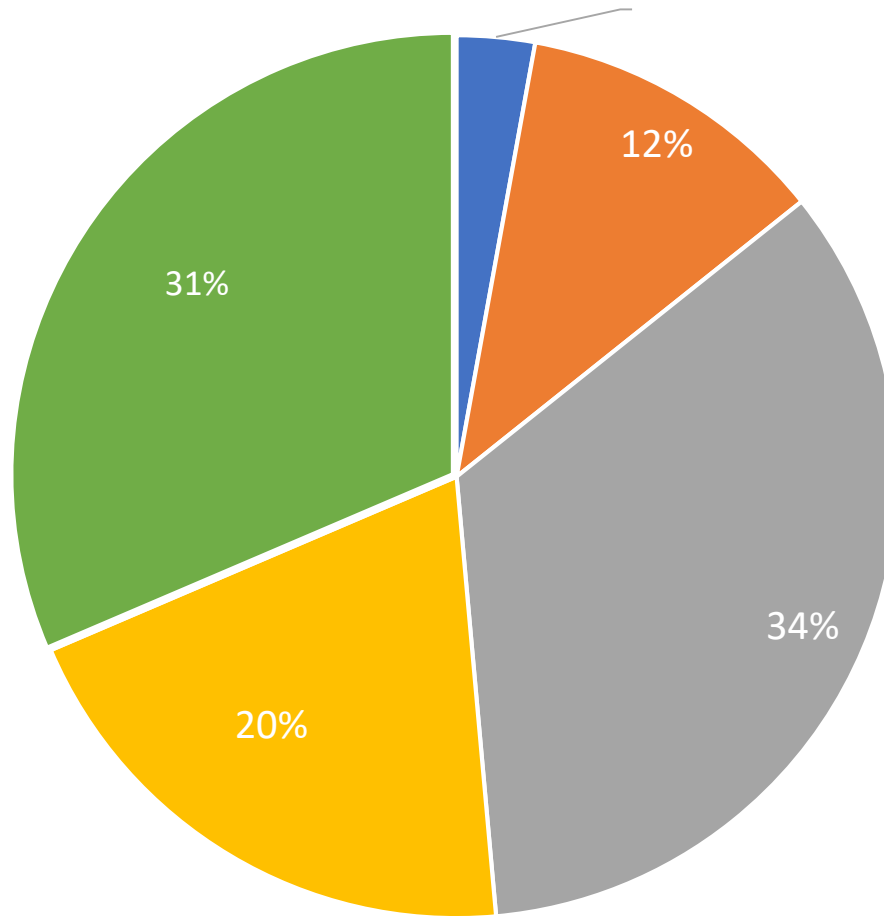


By Age Group



# Many women living on the street have had their children removed or relinquished:

Survey cis-women living on the street and encampments n=35



**In your custody**

**Adult**

**Adopted**

**In foster care**

**Other**



# If you could start any birth control today, what one would you choose?

**40%:** none

**30%:**



Birth Control Pills

**20%:**



Condom

**10%:**



IUD

Society for Family Planning Innovations  
Grant: Planning for vs. preventing pregnancy among women experiencing homelessness': Newmann S, Seidman D, Shapiro B, Borne D,

# Pregnancy Intentions

*Would you like to be pregnant in the next year?*

- 👍 **40%** staying at encampments
- 👍 **86%** at methadone clinics

*How would you feel if you found out you were pregnant today?*

- 😊 **50%** happy
- 🤔 **14%** unsure



Society for Family Planning Innovations  
Grant: Planning for vs. preventing pregnancy among women experiencing homelessness': Newmann S, Seidman D, Shapiro B, Borne D,

# The system often fails to engage women postpartum

- Cohort of pregnant women living with HIV
  - At delivery 90% of woman were virally suppressed
  - Viral suppression falls postpartum:
    - 67% viral suppression at 6 months
    - 44 % at 12 months
- Cohort of men and women living with HIV, chronic co-morbidities and homelessness
  - Women who had their children removed or relinquished had the lowest rates of viral suppression and becoming housed

# Why should HCH providers support women during pregnancy?

- HCH cares for women of reproductive age: most are pregnant, have been pregnant or want to be pregnant
- Many women do not stay in care after giving birth
- Women who have had their children removed or relinquished have experienced increased trauma and stigma
- Pregnancy is an unique opportunity to make a change in the trauma/stigma cycle
- We must take care of women at all stages of their lifecycle

# What Providers Need to Know...



From pregnant women who are homeless or experience housing insecurity...

# Learning from Community Engaged Research

- About me
- Presentation
  - Learnings from multiple community engaged research projects
  - Focus on pregnancy, low-income women of color, homelessness and housing insecurity
  - Co-lead by women with lived experience: Community Researchers

# Learning from Community Engaged Research

***Housing Insecurity, Pregnancy & Preterm Birth in San Francisco***, SF State, UCSF & CBO's, 2017

- ✓ "Mama Sharing Session"
- ✓ 56 interviews with stakeholders

***CREATE study***, UCSF, B. Chambers, PI, current

- ✓ Interviews with providers' of perceptions of pregnancy care
- ✓ Photovoice explore satisfaction with care, healthy pregnancies and births.

***SOLARS study***, UCSF, L. Jelliffe-Pawlowski, PI & B. Chambers, PI, current

- ✓ Behavioral, clinical, and psychosocial data collected during pregnancy and postpartum

# Learning: Impact on Health & Wellbeing

Pregnant women who are homeless or experience housing insecurity...

- Are under extreme amounts of stress that puts them at risk of poor health and poor birth outcomes
- May have to move often or are displaced, compromising continuity of care and social networks



# Learning: Access to Services & Housing

Pregnant women who are homeless or experience housing insecurity...

- Fall into a gap in health services and housing
- Are not prioritized for shelter or housing
- Are persistent to get services and housing
- Experience that male partners are not supported by the system to be involved

# Learning: Experience of Care

Pregnant women who are homeless or experience housing insecurity...

- Less likely to seek PNC because of provider bias and a lack of wrap around services
- Often feel that providers and care team operate with an “equality perspective” rather than an “equity perspective”

# Learning: Strength & Resilience

Pregnant women who are homeless or experience housing insecurity...

- Are strong beyond measure
- Lean on religion and social support
- Want quality care
- Are the experts in what they need



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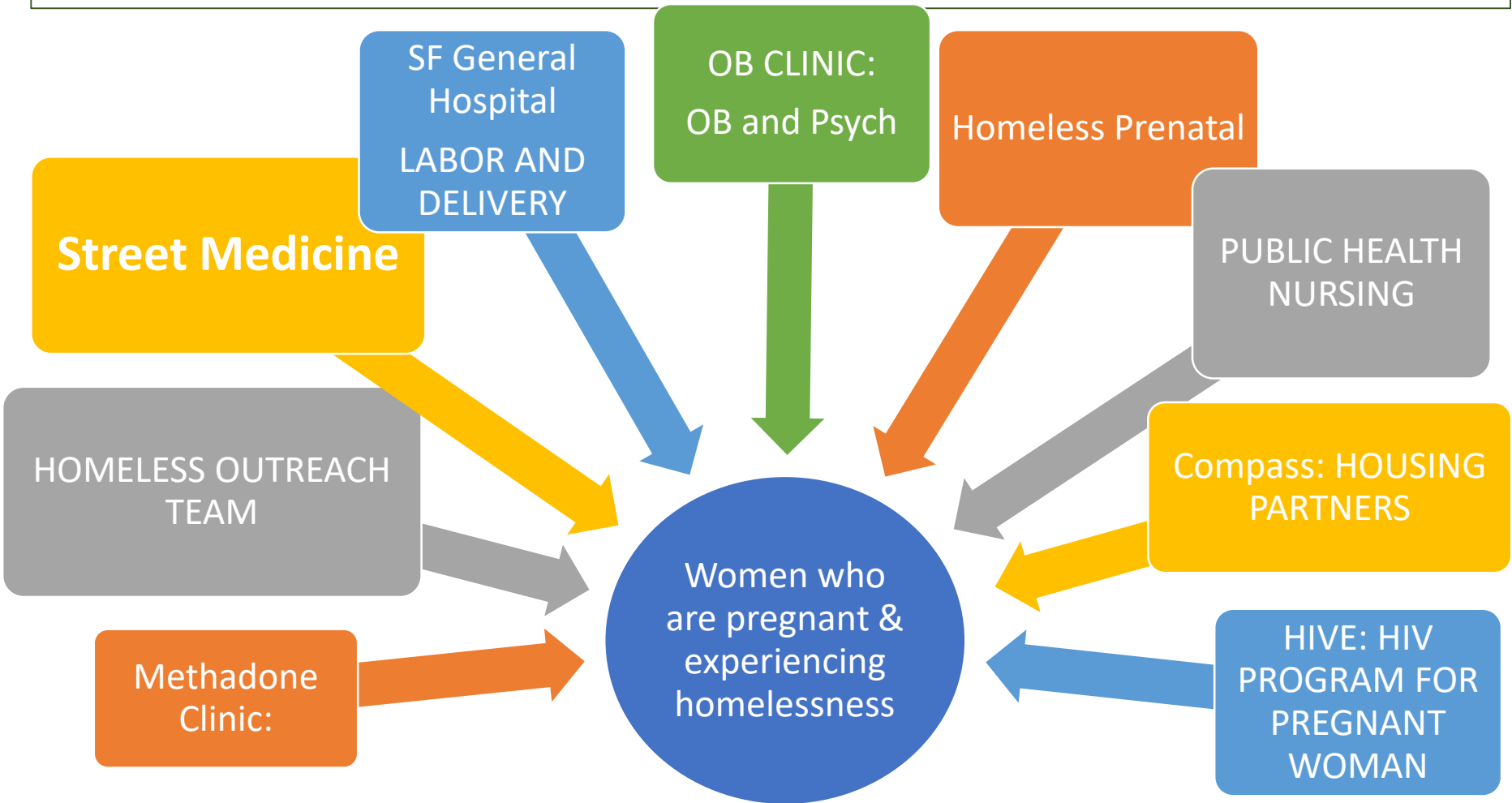
# Approaches to Care

Regardless if you  
“take care of pregnant women”

What every HCH provider can do.....



# SF Prenatal Transformation Partners

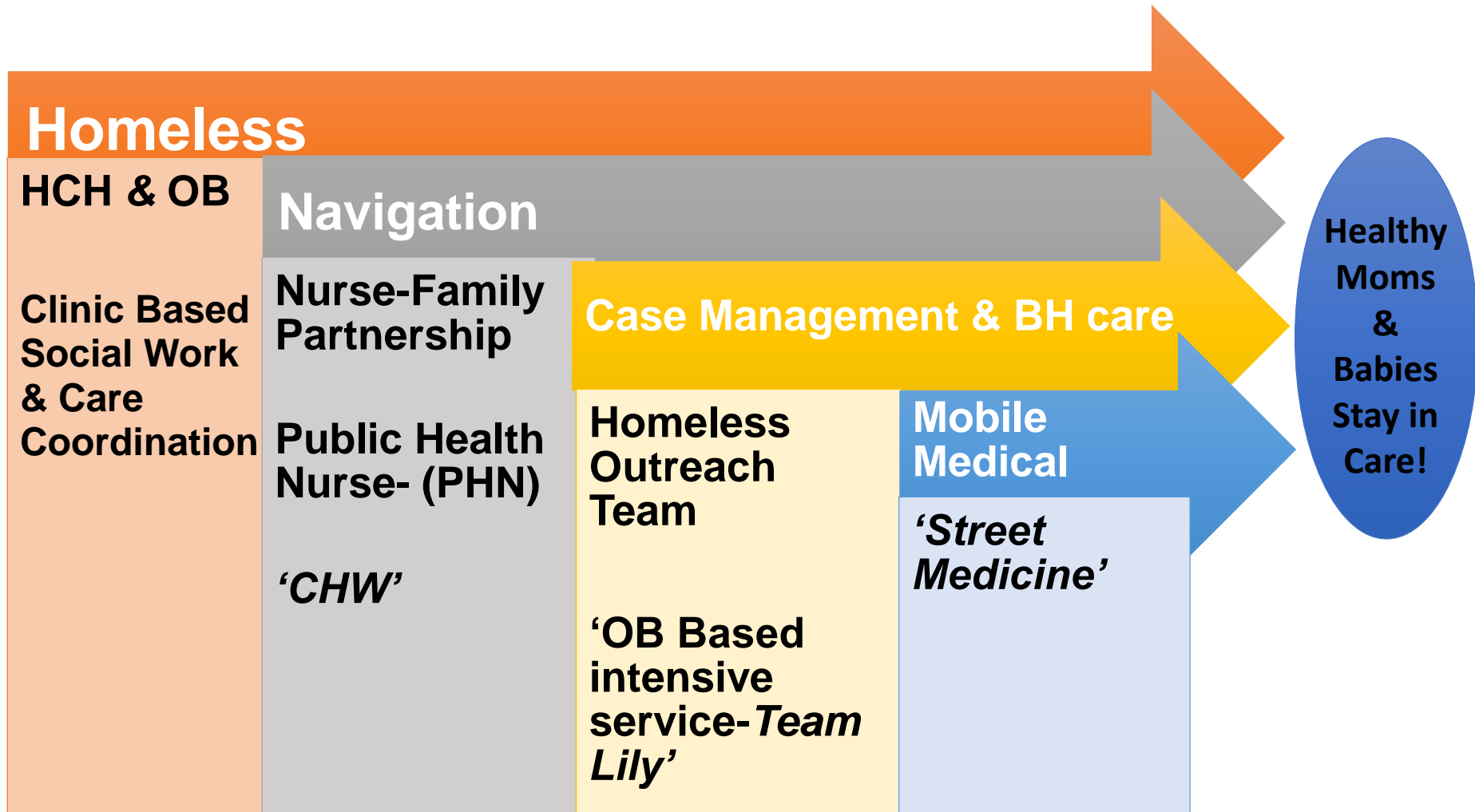







SYSTEM WRANGLERS

# Levels of Support for Pregnant Women Experiencing Homelessness







How can HCH providers  
and specialized Public  
Health Nurses collaborate  
to support pregnant  
women who experience  
homelessness?



"There is a magic window during pregnancy...it's a time when the desire to be a good mother and raise a healthy, happy child creates motivation to overcome incredible obstacles including poverty, instability or abuse with the help of a well-trained nurse."

David Olds, Ph.D.,  
Founder,  
Nurse-Family Partnership



**EXPERT:**  
Specially-trained nurses

**PROVEN:**  
Extensive and  
compelling evidence

**INTENSIVE:**  
Pregnancy through  
age 2

**TIMELY:**  
First 1,000 days

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# The First 1,000 Days

- Early experience influence the developing brain
- Toxic affects of chronic stress
- Adversity can lead to lifelong problems
- Early intervention can prevent consequences
- Stable, caring relationships essential for development

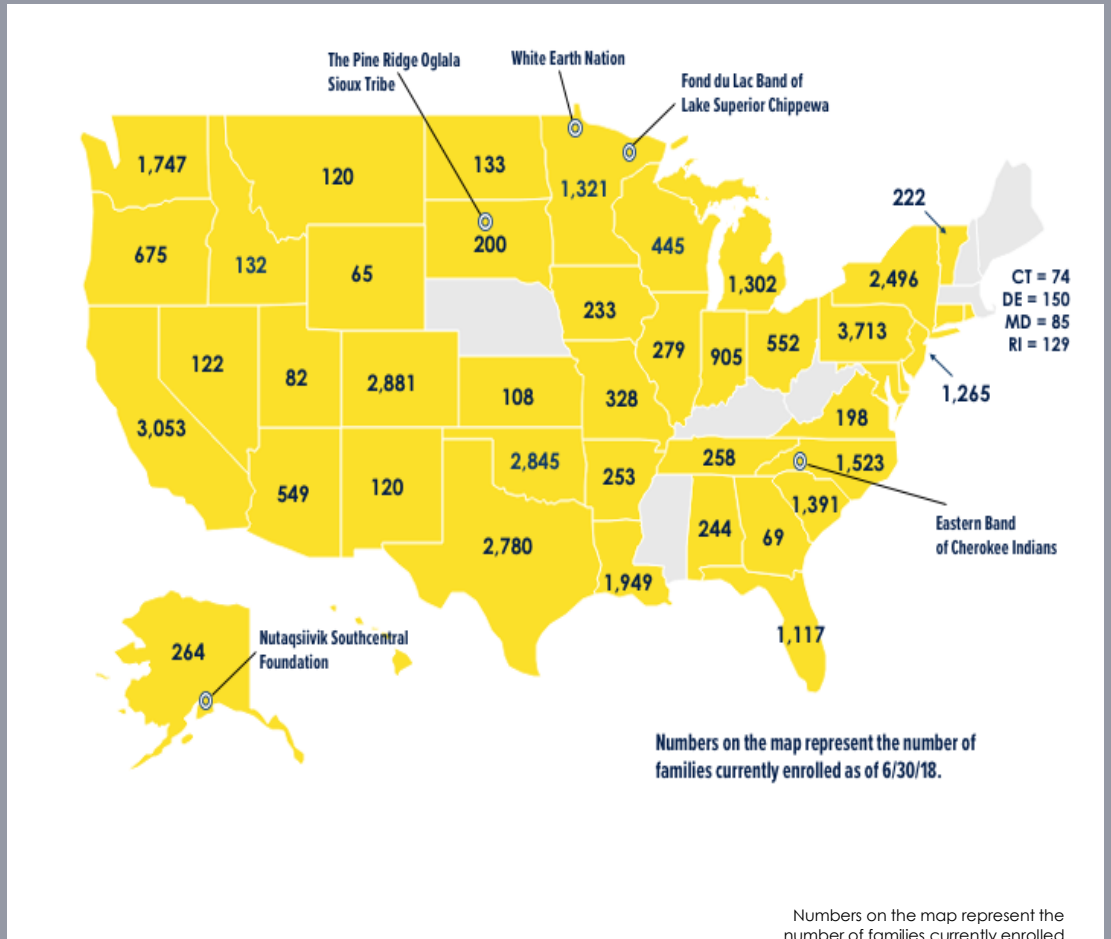
Number of families served since replication began in 1996:  
286,387

Number of families currently enrolled:  
34,405

Number of nurse home visitors:  
1,936

Number of counties where the program is serving clients:  
594

Number of states where the program is serving clients:  
42 + U.S. Virgin Islands



Data as of 6/30/18

To contact Nurse-Family Partnership call: 1-844-637-6667

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# Key Take-Aways & Next Steps:

- Women's health across the lifecycle needs to be part of the **national homelessness policy and research** agenda
- HCH providers must be trained on **reproductive autonomy and bias** about pregnancy & homelessness
- Our programs must **embody HCH values and mission** and have policies to include pregnant women in care and center their experience
- **Partner** with public health nursing, housing providers, local labor and delivery and others to serve pregnant women
- **You don't have to be a pregnancy expert—you can partner with one. You are the HCH expert!**



# Q&A



# THANK YOU!

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# Research and Resources

- National Health Care for the Homeless Council:  
<https://www.nhchc.org/>
- SAMHSA: [Homeless Programs Resources](#)
- Matthew Bennet: <https://connectingparadigms.org/>
- American Journal of Public Health:  
<https://ajph.aphapublications.org/toc/ajph/108/S7>
- Unexpected <https://www.nfb.ca/film/unexpected/>
  - This short film from the [Filmmaker-in-Residence](#) project is a provocative and transformative dialogue between homeless mothers and healthcare professionals who deliver babies.