

Positive approaches

An introduction

About

Explaining the different positive approaches to supporting people experiencing homelessness, what the differences are and why they are important.

What are positive approaches?

There are lots of different types of positive approaches in the homelessness sector. They include:

- Psychologically Informed Environments (PIE)
- Strengths-based practice
- Trauma Informed Care (TIC)
- Housing First

Why do we use them?

There is growing awareness that ‘people with problems’ have had adverse experiences in their past and for those with more complex needs, that adversity probably started in childhood. A reaction to adversity can be trauma, and those living with trauma are more likely to come into contact with services. This is the why; we cannot effectively support people if we don’t understand their present in relation to their past.

The creators of Psychologically Informed Environments (PIE) realised that many people experiencing homelessness have long histories of adversity resulting in ‘complex trauma’. Yet the homelessness sector had historically been more focussed on practical steps to independence rather than the psychological wellbeing of those they support. Staff are often not aware of, and equally not supported to deal with, the consequences of unresolved trauma in their clients.

Out of a desire to ‘fix’, the sector has also been disproportionately interested in people’s weaknesses, creating a focus on negatives that can become a hindrance to someone’s progress. Strengths-based practice is about transforming relationships between staff and the people they work with. It addresses the power imbalance, which can otherwise compound their trauma, and encourages staff to realise that they are not the resource-holder or the decider of the destination, instead facilitating the building of a collaborative relationship where both parties share their knowledge and skills.

Let’s end homelessness together

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What are they?

The PIE framework was developed as a guide to help organisations identify what they need to do to ensure their services effectively meet the psychological needs of those accessing and working in them. Starting with adopting a psychological approach, which provides a shared understanding across the service, those adopting PIE use this to improve relationships, environments, to train their staff and keep learning, as an organisation, to see what really works for those they support.

The psychological approach, adopted by organisations to guide development, helps staff to understand why. Many PIE services adopt a specific psychological approach, such as those based on Attachment Theory; focussing on why and how people relate to others and the world, in addition to how an individual understands and manages their own inner world.

Trauma Informed Care (TIC) is a form of PIE that uses trauma theory and research as the psychological approach so that every element of the service delivery is designed through a 'lens of trauma'. It is popular because it explicitly explains the why; raising awareness of the impact of trauma and ensuring that the likelihood of re-traumatisation in services is minimised.

Strengths-based practice builds on staff's new-found awareness; shifting the perspective from looking at risks to looking at coping mechanisms. The philosophy teaches that people are inherently able to grow; and that we all have resources, strengths and skills, which are often developed as a result of the adverse experiences we have faced.

How can we apply them?

So, then we get to the question of how services and organisations go about making changes and, as relationships are seen as the 'key tool for change', staff training, and support is vital to ensuring that practices and procedures are improved. Staff should have training on the psychological approach/framework being adopted in addition to numerous other learning opportunities to build their 'toolbox'. Training may focus on improving knowledge (e.g. trauma awareness), changing attitude (e.g. strengths-based working) and increasing skills (e.g. motivational interviewing).

Policies and procedures are also considered, in line with the psychological approach adopted, in order to determine which need to change to better meet the emotional and psychological needs of individuals accessing and working in the service. Members of staff are encouraged to be reflective in their work and should have access to reflective practice sessions and may also have access to clinical supervision.

Who?

Ideally, anyone coming into contact with the clients or involved in deciding how services are designed or delivered should be aware of the psychological approach being adopted. This ensures that it is embedded at all levels and reduces the possibility for conflicting values and expectations.

Another area of practice emerging is co-production; involving people with lived experience in developing and providing services. Considering this from a psychological perspective, it is important to empower people who have been disempowered through adversity; working with them, not to or for them, and building their resilience and esteem. Having support from someone that has had similar experiences is also important in promoting recovery and brings hope through showing the potential for change.

Where can we use them?

Most of these new approaches can be applied to any service model. PIE is often considered as an intentional model within a hostel setting for example, yet all services can be improved by adopting a psychologically-informed approach; from outreach and tenancy support to high support or emergency access hostels and semi-independent supported housing. We need a range of different models to suit different people, but they must all effectively meet their emotional and psychological needs.

Housing First services can also be improved by intentionally adopting a psychological approach. However, this model is underpinned by a set of principles which ensure that the service is provided in a way which meets the psychological needs of people; it is a relational model provided in independent tenancies. Housing First works for people affected by trauma because it provides stability, flexibility and stickability even if staff aren't trained in trauma or a specific psychological approach.

When do you use positive approaches?

Don't let confusion, or fear of making mistakes, prevent you from change. Think of these approaches as layers which can build on each other to ensure that your service becomes the best it can be. They all complement each other and there are many overlaps e.g. strengths-based practice being a key component of both Housing First and Trauma Informed Care and adopted in many Psychologically Informed services – either deliberately or (often) quite intuitively.

We are all learning together and as such, adopting these new approaches is a journey rather than a destination for all of us. Creating a culture of internal challenge and reflection to keep one another motivated and on track is really important. Learn from others and join in this wonderful revolution that is improving services everywhere.



What we do

Homeless Link is the national membership charity for frontline homelessness agencies and the wider housing with health, care and support sector. We work to improve services through evidence and learning, and to promote policy change that will ensure everyone has a place to call home and the support they need to keep it.

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