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I, Sue Schlembach, hereby submit this original work as part of the requirements for the degree of Doctor of Philosophy in Educational Studies.

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Play in the Lives of Young Children Experiencing Homelessness: An Exploratory Case Study

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PLAY IN THE LIVES OF YOUNG CHILDREN EXPERIENCING HOMELESSNESS:

AN EXPLORATORY CASE STUDY

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by

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Abstract

Of the approximate 2.5 million homeless children in the United States in 2014, over half were under the age of 6 (America’s Youngest Outcasts: A Report Card on Child Homelessness, 2014). Adversities associated with homelessness are risks to early developmental trajectories. Play is a primary medium for early learning and serves as a protective mechanism for children facing cumulative risk factors associated with homelessness. Homeless shelters often lack supportive environments critical to eliciting stimulating healthy play interactions. The purpose of this exploratory case study was to uncover mothers’ perceptions of young children’s play in the context of a Midwestern urban core residential homeless shelter for women and children through interviews, observations and field notes, and photo elicitation. The research question to be answered was: How is play perceived by mothers experiencing homelessness in the context of a residential homeless shelter for women and children? Data analysis indicated mothers perceived that play fostered children's healthy growth and development, play was viewed as a time of respite for mothers, and play afforded children opportunities to be free from adult problems. Additionally, findings indicated the contextual nature of the shelter constrained rather than facilitated children's play, thereby compounding family stress. Six themes that emerged from the study and implications for policy, practice, and future research are presented and discussed.

Keywords: Homelessness, children, mothers, development, play, qualitative research
Dedication

This work is dedicated to my family: Mark, Chelsey, Audrey, and my parents. Each of you supported me with expressions of unconditional love and great heaping mounds of encouragement, even when, nearing the end of my dissertation journey I jokingly referred to myself as, “the worst spouse, mom, and daughter” ever.

To Mark, my lifelong companion and greatest source of support.

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To my parents, who taught me how to be compassionate, inquisitive, persistent, and strong in body and in spirit.
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PLAY AND HOMELESSNESS

PLAY IN THE LIVES OF YOUNG CHILDREN EXPERIENCING HOMELESSNESS:
AN EXPLORATORY CASE STUDY

Chapter 1
Introduction to the Study

The national economic downturn, coupled with systemic racial and ethnic disparities, contributed to an estimated 2.5 million children in the United States experiencing homelessness in 2014. Fifty-one percent of those children were under the age of 6 (*America’s Youngest Outcasts: A Report Card on Child Homelessness*, 2014). Unique factors associated with family homelessness compound the negative impacts of poverty, placing a child’s developmental trajectory and thus future outcomes at risk.

Beginning in 2007, the United States has seen an increase in the number of families and children experiencing homelessness (Institute for Children, Poverty and Homelessness, 2013). Over 67,000 families were recorded as homeless during the annual “point in time count” in January of 2014 (National Alliance to End Homelessness, 2015). Family homelessness has been described as a set of circumstances severely restricting parents’ capacity to obtain basic necessities and adequately support children’s cognitive, social, emotional and physical needs (Swick, 2009).

Due to adversities associated with homelessness, young children often face limited opportunities for quality play experiences. Play has long been established as the primary medium for early childhood learning (Bodrova & Leong, 1996; Gray, 2011; Piaget, 1968; Vygotsky, 1978). Play is not only a vehicle for optimal early learning; quality play interactions also promote the development of non-academic competencies including trust, empathy, agency, and resilience (Erikson, 1963; Piaget, 1962; Sutton-Smith, 1997; Vygotsky, 1978). The link between
the quality of play experiences and early development and overall life outcomes is often misunderstood by the general public and among the very systems responsible for educating and caring for families and children (Elkind, 1981, 1987; Nwokah, Hsu, & Gulker, 2013; National Research Council and Institute of Medicine, 2000). A lack of supportive stimulating play experiences early in life can manifest to deprive children of opportunities to learn and develop. In other words, children’s capacity for gaining new knowledge and building fundamental skills associated with future outcomes is undermined when deprived of nurturing play environments (Brown, 2005; Fisher, 1992; Milteer & Ginsburg, 2012).

There is scant literature on the contextual nature of homeless shelters serving families with young children birth to 5 years old. Specifically, studies focused on the contextual nature and dynamics of young children’s play in homeless shelters were not found in a thorough review of the literature. This discovery clearly illuminated a gap in the research. Homeless shelters vary widely in available resources and capacity to appropriately meet the complex needs of families with young children. Consequently, it can be surmised that opportunities for play are undermined or supported depending on ecological factors inherent in shelters serving families experiencing homelessness. An exploratory case study of mothers’ perceptions of young children’s play in the context of a homeless shelter can reveal details of families’ lived realities as they pertain to play supports and barriers. Findings from this dissertation research can be used as a catalyst for discussions of policy and practice initiatives to facilitate improvements in the support and care of families with young children experiencing homelessness at the programmatic and organizational levels within the homeless services delivery systems.

The scope of literature on family homelessness has historically focused on physiological, psychological, and academic effects of homelessness on school age children (Masten, 1991;
Masten, Miliotis, Graham-Bermann, Ramirez, & Neemann, 1993). Over time, researchers in the field of homelessness broadened their focus to include studies of infants, toddlers and preschool children (Buckner, 2008; Fantuzzo, LoBoeuf, Brumley, & Perlman, 2013; Hinton & Cassel, 2013; Kilmer, Cook, Crusto, Strater, & Haber, 2012; Swick, 2010). Findings from these recent studies provided implications for more in-depth investigations into the lived experiences of homeless families and children. The extended literature concerning homelessness, play and child development provides scant information with regard to the nature of children’s play experiences in the context of homeless shelters.

Brief mention of play can be found within scholarly literature of the effects of homelessness on aspects of children’s daily lives (Buckner, 2008; Hinton & Cassel, 2013; Swick, 2010). Results from an investigation of the impacts of homelessness on young children and families suggested that shelter “conditions are probably an especially important factor in moderating the impact of homelessness for a child” (Buckner, 2008, p. 73). In light of this understanding, scholars actively pursued research on the nature of child homelessness. For example, Kilmer, et al., (2012) and Fantuzzo et al., (2013) called for efforts to more fully comprehend the varied contextualized factors related to early childhood homelessness. Kilmer et al., (2012) suggested a need for more family focused services, and recommended further research of specific factors associated with parent-child relationships during episodes of homelessness. Hinton and Cassel (2013) investigated families’ needs and detailed implications for educators to serve as liaisons for families requiring specific services. The authors suggested providing children with opportunities to engage in literacy activities, and play with stimulating natural materials such as “water and sand” (p. 461).
In their 2013 article, Fantuzzo, et al., drew attention to the important role of early intervention services for young children and families experiencing homelessness. Investigations of play and homelessness from the field of play therapy were also found during the literature review. Studies of therapeutic play intervention approaches were conducted to explore possible ameliorating effects of play therapy on young children and families experiencing homelessness (Baggerly, 2009; Carter, 2015; Cosgrove & Norris-Shortle, 2015). One study explicitly focused on the play of unaccompanied street children. The investigation was an exploration of Columbian street children’s play (Tyler, Holiday, Tyler, Echeverry, & Zea 1987). The research centered on the role of play in children’s daily lives on the streets of Bogota, Columbia—yet again the research was not directly related to the study of young children’s play in a shelter setting. In spite of the published research on the topic of child and family homelessness, the state of scholarly literature of young children and play in the context of homeless shelters continues to be absent. This omission causes potential implications for effectively meeting the needs of families with young children experiencing homelessness.

Researchers have studied particular factors related to family homelessness, such as academic outcomes, child wellbeing, and therapeutic play, however the dynamics and the contextual nature of young children’s play in homeless shelters has been overlooked. Study findings pointed to a lack of effective resources and services capable of supporting the complex needs of families and young children experiencing trauma and stress associated with homelessness. To understand the lived experiences of and to improve services for women and young children experiencing homelessness, research of the dynamic and contextualized nature of play in homeless shelters deserves consideration.
In light of the dearth of information currently available, this dissertation research focused on the nature of young children’s play in a homeless shelter. The purpose of this investigation was to gain a more explicit understanding of young children’s play experiences in the context of a homeless shelter for women and children experiencing homelessness. A qualitative methodology was chosen so that rich descriptive details of the contextualized nature of the lived experiences of mothers and children experiencing homelessness could be gathered. To obtain information explicitly regarding play in homeless shelters, this qualitative case study informed by Yin (2003), and grounded in social constructivist theory (Vygotsky, 1978), sought to explore how play was perceived by mothers experiencing homelessness within the context of a homeless shelter for women and children. To begin the process of piecing together a comprehensive understanding of young children’s play in homeless shelters, the research question asked was, How is play perceived by mothers experiencing homelessness in the context of a residential homeless shelter for women and children?

Findings from case study research have been used to depict the unique and complex circumstances of families living in poverty and homelessness. In one such study, Nunez (2001) described a stark portrait of homeless families in New York City; detailing strategies capable of alleviating the most urgent needs uncovered in the investigation. Hinton and Cassel (2013) investigated the experiences of eight families with young children experiencing homelessness. Findings indicated the need for shelters to provide more developmentally appropriate resources. Authors discussed implications for early childhood education programs serving families experiencing homelessness.

This exploratory single-case study gathered rich descriptions of the phenomenon of young children’s play. The purpose of the study was to examine mothers’ perceptions of young
children’s play in a homeless shelter serving women and children. Study findings can be utilized as a catalyst for initiatives at the homeless services program and systems levels, towards improvements in policies and practices for caring for families experiencing homelessness. Positive play experiences not only foster skills necessary for later academic success, but act as a pathway toward healing from adversity and trauma. Nurturing play environments offer parents and children opportunities for respite from stress, strengthening healthy relationships, thus fostering optimal neurobiological development and overall outcomes for young children and families experiencing homelessness.

**Rationale for Research Approach**

The research design was rooted in a social constructivist theoretical paradigm (Vygotsky, 1978). Through this lens the researcher was able to effectively investigate participant perceptions of daily reality by gathering the constructed meanings participants assigned to their lived experiences. To more fully understand how mothers experiencing homelessness perceived play in a homeless shelter, an exploratory single-case study design (Yin, 2003) was selected to answer the research question: *How is play perceived by mothers experiencing homelessness in the context of a residential homeless shelter for women and children?*

**Philosophical Foundation.** This research was grounded in a social constructivist paradigm (Vygotsky, 1978). According to Vygotsky (1978) experiences occur in socially constituted contexts; and individual constructions of reality stem from interactions within the environment. In other words, mental constructs (schemas) are formulated through experiences and interactions taking place in daily life. Children’s play experiences and mothers’ perceptions of the nature of children’s play within the context of a homeless shelter are influenced by varying micro and macro factors within a socially constructed environment. For example, individual
characteristics of the parents, child, shelter administration, staff and volunteers; community resources (outreach programs, health providers etc.); and the larger cultural and historical variables affect the quality of the experiences children have in the context of a homeless shelter (Swick, 2006). Using the framework of Yin’s case study design (2009), the researcher employed exploratory single-case study methodology to obtain an understanding of the constructed meanings mothers’ ascribed to play in the context of a homeless shelter. Focusing on mothers’ perceptions of play, the researcher was able to gather distinctive and nuanced details of the dynamic and contextual factors acting as opportunities or barriers to play as it was experienced by families residing in the shelter.

**Theoretical Framework.** This research was grounded in a social constructivist paradigm (Vygotsky, 1978). Working from a social constructivist approach, it was understood that individuals act within “…socially constituted environments and these interactions form the basis of their experiences” (Freeman & Mathison, 2009). Children’s play in the context of a homeless shelter is influenced by multiple micro and macro factors working in concert within the child’s environment. For example, the individual characteristics of the parents, child, shelter administration, staff and volunteers; community resources (outreach programs, health providers etc.); and the larger cultural variables directly or indirectly affect children’s play experiences in homeless shelters (Swick, 2006). In order to begin to understand variables that support and constrain children’s play in homeless shelters, the researcher interviewed mothers and observed young children residing in a local homeless shelter. By collecting mothers’ perceptions of play, the researcher was able to gather details of the phenomenon of play in a homeless shelter.

The dissertation includes the following chapters: The introduction, literature review, methodology, findings, and conclusion. The introduction is an overview of the research
investigation. Chapter 2, the literature review, is divided into three sections. The first section provides a summary of the topic of family homelessness and children’s play in the United States. The second section is a detailed discussion of the unique characteristics related to child homelessness. The third section consists of a descriptive overview of play and the vital role it serves in young children’s healthy growth and development. Chapter 3 covers the research methodology, and provides a discussion of the theoretical and substantive frameworks, and case study methodology and data collection methods. Case study methodology informed by Yin (2009) was utilized to guide the design of the investigation from data collection through the analysis phase. Chapter 4 details the study findings, and includes narrative reports and tables and figures depicting results from data analysis. The fifth and final chapter consists of a synthesis of case study findings, a discussion of study limitations related to scope and trustworthiness, implications of findings to inform positive changes at the homeless services program level, and recommendations for future research aimed at systemic level improvements across homeless services organizations.

Definitions of Key Terms

The following are terms operationally defined as they were used in the study:

*Emergency shelter* in this study referred to a facility designed to house people experiencing homelessness. People residing in emergency shelters have nowhere to live, and would literally be living on the streets if it were not for the spaces provided at a facility. The 2010 Census defined emergency and transitional shelters (i.e., shelters with sleeping facilities) as places where people experiencing homelessness stay overnight (Symens Smith, A., Holmberg, C., & Jones-Puthof, M., 2012).
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*Homeless(ness).* Individuals without a fixed, regular and adequate nighttime residence are considered to be homeless, and include individuals living in shelters, and those sharing housing with others (doubled-up) due to lack of economic resources (McKinney-Vento Act, 2000).

*Play.* Play is a complex phenomenon and difficult to precisely define, however there are five key characteristics generally accepted within the field of study. The primary characteristics of the play process include: culturally framed, “intrinsically motivated, freely chosen, pleasurable, nonliteral, and actively engaged” (Hughes, 2010, p.4-5; Children’s Play Information Service, 2009).

*Stably housed peers.* Individuals with consistent, permanent housing, of similar socio-economic status as individuals experiencing homelessness. (Institute for Children, Poverty and Homelessness, 2013).

Chapter 2

Literature Review

The population of homeless in the U. S. is primarily composed of veterans, families with young children, single adults, seniors, and unaccompanied youth. Periods of homelessness include short-term, long-term, and chronic. Social perception of homelessness has not kept pace with the changing nature of the fundamental characteristics of the condition over time. The image of a single, adult male homeless due to poor choices, disability, addiction and mental illness is the default of popular belief. This image has become the “visible” face of homelessness in the eyes of U.S. (Medcalf, 2008). Societal perceptions of homeless rarely include families and children. However, current demographic accounts of U.S. homeless increasingly involve single mothers with young children, and include the working poor.
Within the last 30 years the United States has witnessed two “surges” in the incidence of family homelessness; one occurring in the 1980’s, the second beginning in 2007 (Masten, 2012; Medcalf, 2008; Oberg, 2011). Repercussions from the 2007 economic crisis, also referred to as the “Great Recession”, launched the most recent surge in family homelessness—where high rates of unemployment and underemployment, a housing market crisis, and decreases in supports of social safety networks prevailed (Masten, 2012; Oberg, 2011). As a result of the national economic downturn, coupled with existing racial and ethnic disparities, homelessness has become a reality for more than one million children in the United States each year (National Center on Family Homelessness, 2010).

Family homelessness has been described as an indicator of extreme poverty and is a risk factor for healthy growth and academic outcomes (Masten, 1993). Stress and adversity associated with homelessness severely restricts parents’ ability to access basic necessities and adequately support children’s cognitive, physical, social and emotional needs (Swick, 2009).

According to findings from Masten, Herbers, Desjardins, Cutuli, McCormick, Sapinza, et al. (2012) cumulative risk factors associated with poverty and homelessness may include: residential instability/high mobility; food insecurity; malnutrition; family and community violence; health issues; loss of parent (i.e., separation, death); and social isolation. Children residing in homeless shelters often have few opportunities to engage in developmentally appropriate stimulating play activities (Buckner, 2008; Swick, 2009).

Resources available for play (i.e., appropriate spaces and quality materials, adult guidance) in shelter settings tend to be limited in variety and level of complexity, and thereby insufficient in meeting the vast cognitive, social, emotional, and physical needs of young children. Diminished availability of play resources in the environment, coupled with the stress
and demands associated with homelessness, make it difficult if not impossible for mothers to initiate and sustain nurturing, supportive play interactions. It is through positive interactions, such as those found in nurturing caregiver-child play experiences, where healthy bonding takes place and becomes strengthened.

Healthy mother-child attachments beginning early in a child’s life facilitate the development of functionally adaptive skills such as positive sense of self, emotional regulation, and resiliency in young children (Erikson, 1950; Milteer & Ginsburg, 2012; Swick, 2008). Mother-child relationships are strengthened during daily interactions in safe, nurturing environments supported by caring adults. Contexts with few opportunities for quality mother-child play interactions serve to hinder the development of positive mother-child relationships and bonding—affecting the trajectory for healthy cognitive, social, emotional and physical growth (Milteer & Ginsburg, 2012).

Through play experiences children begin to build foundational knowledge and practice skills which facilitate the growth of healthy adaptive functioning (Bodrova and Leong, 1996; Singer, Golinkoff, and Hirsh-Pasek, 2006). Young children cultivate skills and knowledge of “collaboration, content, communication, creative innovation, and confidence” through child-directed free-play and adult guided playful learning experiences in rich diverse environments. It is from skills and knowledge gained during the early childhood period that children develop the capacity for constructing and utilizing strategies facilitating problem-solving and negotiation of future academic and social experiences (Bodrova and Leong, 1996; Gonzalez, Moll and Amanti, 2005; Singer, Golinkoff, and Hirsh-Pasek, 2006; Vygotsky, 1978).

This literature review is composed of 3 main sections. Together, they form a comprehensive view of contemporary family homelessness in the United States. The review includes an
overview of research based evidence to support why the medium of play matters so much in the lives of young children experiencing homelessness. The first section of the literature review provides an overview of family homelessness in the United States. The second section details the unique characteristics of child homelessness. A description of the concept of play and the importance of its role in early childhood development is presented in the final section.

**Family Homelessness**

The United States has encountered a significant increase in the number of young families with children who are homeless, particularly families of racial and ethnic minority backgrounds (Child Trends, 2012; Institute for Children, Poverty, and Homelessness, 2011). According to The National Center on Family Homelessness (2011) there are several common demographic characteristics shared by families experiencing homelessness today. Families typically include young, single, female headed households, with limited education and income, and two children; generally one child is under the age of 6.

Repercussions from the 2007 economic crisis, also referred to as the “Great Recession”, launched the most recent surge in family homelessness—where high rates of unemployment and underemployment, a housing market crisis, and decreases in supports of social safety networks prevailed (Masten, 2012; Oberg, 2011). The national economic downturn, coupled with existing racial and ethnic disparities, has made homelessness a reality for more than a million children in the United States each year (National Center on Family Homelessness, 2014). According to *America’s Youngest Outcasts: A Report Card on Child Homelessness*, 2014) there were over 2 million children experiencing homelessness in 2013—51% were under the age of 6.
Unique Characteristics of Child Homelessness

Children experiencing homelessness are part of a distinctly vulnerable group of children living in poverty (Buckner, 2008; Masten, 1992; Masten, et al., 2012; Oberg, 2011; Swick, 2004). This population of children faces similar economic and social adversities as housed peers in families of comparable economic status, and therefore faces similar impacts to growth and development. However homelessness can compound negative influences stemming from poverty, and often manifests as higher incidences of poorer health, academic, social, and life outcomes than more stably housed impoverished children (Buckner, 2008). As Oberg (2011) declared in his commentary article on the status of children during the recession, “[h]omelessness represents the quintessential state of impoverishment” (p. 554).

In her 1992 review article, Masten declared the United States to be a “nation at risk” due to the number of children experiencing homelessness. Masten called for collaborative efforts to investigate the unique and complex needs of child homelessness. Findings from the 2012 Masten et al. study of executive function (EF) skills indicated “predictive significance” for EF and academic outcomes of 138 kindergarten and first grade students experiencing homelessness (p. 375). In their report Masten et al., stated children and families experiencing homelessness are by no means a homogeneous group, rather individual families and children have multiple overlapping characteristics that form various degrees of cumulative risk factors. The authors suggested risk factors, such as residential mobility, food insecurity, familial and/or community violence, and social isolation, act in concert to facilitate or impair children’s EF development (Masten, et al., 2012). Swick (2004; 2008) discussed impacts of homelessness on parent-child relationships. Obstacles, associated with the distinctive nature of family homelessness, act as “psycho-social barriers” to healthy parent-child interactions and nurturing relationships (p.151).
These barriers undermine parent-child relationships vital to children’s mental health and overall well-being.

**Homelessness and brain development.** Research findings suggested young children who experience homelessness often begin school months behind stably housed peers, and that this disparity typically increases over time (Buckner, 2008; Masten, 2012; Nunez, 2000; Obradovic’ et al., 2009; Swick, 2005). Young children living in extreme cases of poverty, such as in situations of homelessness, are most at risk of negative impacts to brain growth and developmental trajectories (Milteer & Ginsburg, 2012). Adverse effects of poverty on areas of the brain associated with key academic and life skills such as self-regulation, language, attention, planning, and problem-solving have been indicated in brain development and deprivation studies. These risks are related to the expansive amount of brain development that occurs during the period of early childhood (American Academy of Pediatrics Council on Early Brain and Child Development, 2014; National Research Council and Institute of Medicine, 2000; National Scientific Council on the Developing Child, 2004; Shonkoff & Garner, 2011). Structural and functional characteristics of the developing brain are influenced not only by genetics but by dimensions of the child’s environment. Lack of resources and adversities associated with living in poverty can impair the developing brain’s capacity to create and maintain strong neural pathways associated with foundational academic skills (Lipina & Farah, 2011; Tomalski, Moore, Ribeiro, Axelsson, Murphy, Karmiloff-Smith, Johnson, & Kushnerenko, 2011).

Early brain development is elicited by a child’s active engagement in stimulating supportive environments. Play environments are composed of two interacting factors, the physical space and the dynamics of the social relationships within the space. Developmentally supportive play environments are purposefully created spaces, maintained by caring adults who
understand the importance of building trusting respectful relationships with children. In stimulating supportive environments children are able to freely explore, follow their sense of curiosity, and cultivate skills of imagination and creativity. Supportive environments include interesting, challenging materials and activities appropriate for the child’s developmental level. Rich stimulating play environments offer access to affordances that spark children’s imagination and creativity and evoke critical thinking and problem-solving. The adult’s role in supportive stimulating play environments is one of facilitator; in other words the adult is available to interact with and also act to guide interactions and strong emotions of children within the environment. When access to such environments is limited, neural growth and thus overall brain development can be negatively affected (National Research Council and Institute of Medicine, 2000).

Findings from research conducted by Hair, Hanson, Wolfe, and Pollak (2013) suggested that academic and cognitive scores in 4 to 22 year olds were positively related to income. The researchers indicated that brain structures associated with attention, problem solving, and memory in children from low-income families were at risk from negative environmental factors. More specifically, Fantuzzo, LeBoeuf, Brumley, and Perlman (2013) suggested that the timing of homelessness impacts the degree of effects on later academic skills. In their findings, Fantuzzo et al. (2013), found poorer academic outcomes in children experiencing homelessness during early childhood compared to those experiencing homelessness in later childhood. What is important to understand from research on brain development is that during early childhood, children’s brains are developing at a rapid rate. The neural connections in a child’s brain govern specific adaptive functions such as memory, planning, and emotional control and are strengthened or diminished depending on the child’s interactions with people and stimuli in the environment (National
Research Council and Institute of Medicine, 2000). In other words, when a child’s environment lacks fundamental resources (e.g., space to play freely, stimulating play materials) and supports (e.g., positive adult guidance to assist in regulating the child’s strong emotions, such as anger and fear, stemming from stress), neural “wiring” of the brain can be negatively impacted—thus potentially impairing a child’s developmental trajectory. What research findings indicated is that a supportive environment is an important factor in a child’s healthy growth and development, and is particularly crucial to consider for children and families experiencing homelessness.

Imaging data from neuroimaging studies have shown correlations between poverty and brain development (Lipina & Farah, 2011; Luby, Belden, Botteron, Marrus, Harms, Babb, et al., 2013; Hair, Hanson, Wolfe, & Pollak, 2013; Noble et al., 2012). In their brief on child poverty and cognitive neuroscience, Lipina & Farah (2011) cite research pointing to correlations between environmental deprivation and impacts to the “ongoing developmental process” in early childhood. Adverse effects of poverty on areas of the brain associated with key academic and life skills such as self-regulation, language, attention, and problem-solving have been indicated in brain development and deprivation studies. In a neuroimaging study of the effects of poverty on neurobiological development, results demonstrated a positive correlation between child poverty and smaller brain volumes in white and grey brain matter as well as hippocampal and amygdala areas (Luby et al., 2013). These brain regions are associated with language and self-regulation ability (Dinez Can, Richards, & Kuhl, 2013; Lipinia & Farah, 2011; Luby et al., 2013). Study findings from Hair, et al., (2013) and Noble et al., (2012) indicated a positive association between children living in poverty and smaller hippocampal size. These research findings point to correlations in the structural differences of the brains of children living in poverty and the brains of their middle and upper class peers. This has direct implications for children living in
situations of deprivation and homelessness and calls for the need to study the contextual nature of homeless shelters serving young children and families.

To summarize, children living in situations of poverty and deprivation, such as in episodes of homelessness, face negative impacts to overall development. Factors—such as diminished access to supportive stimulating environments for play—associated with early child homelessness may alter developmental trajectories through impairments to neural pathways associated with learning, emotion regulation, and mental health. When fundamental resources and adult supports for healthy play are absent in the child’s environment, structural and functional characteristics of the brain can be impaired, hence affecting overall development and life outcomes.

**Homelessness and repercussions to child mental health.** The foundations of mental health are formed in the early years of life. Nurturing environments and secure parent-child attachment are critical to early mental well-being. Emotional and cognitive demands associated with trauma and stress act to decrease parents’ capacity to support children’s healthy growth and development, particularly the development of social-emotional skills (Bassuk, Richard, and Tsertsvadze, 2015; Masten, 1993; Masten, Herbers, Desjardins, Cutuli, McCormick, Sapenza, Long, & Zelazo 2012).

mental health and behavioral issues were more prevalent in preschool and school-age children experiencing homelessness than in stably-housed peers.

Masten (1993) offered explanations of homelessness’ adverse relationship with psychosocial health. In her 1993 study, Masten discussed correlations between early childhood homelessness and mental health issues. Findings from the study indicated that homeless children were more likely to experience problem behavior issues than stably housed peers in families of similar income. Behavioral issues were also found to be associated with poorer academic outcomes in children experiencing poverty and homelessness (Masten, Herbers, Desjardins, Cutuli, McCormick, Sapenza, Long, & Zelazo 2012). Research findings point to the increased propensity for children who were formerly homeless to present with more psychosocial issues when compared to stably housed peers of matched socioeconomic status. Study findings from Gewirtz, Hart-Shego, and Medhanie (2008) indicated a significant relationship between parent mental health and child behavior and emotional status. Gewritz et al. (2008) also reported findings suggesting an increase in number of risk exposures predicted amount of reported psychosocial concerns while controlling for child’s age. Beyond brain development and mental health, aspects of poor physical health from lack of access to quality healthcare and nutrition are other factors mediating overall health and development of children experiencing homelessness.

**Physical health outcomes and homelessness.** Physical health is generally poorer in homeless children than in their stably housed peers. Children who are homeless tend to have limited medical and dental care access, exhibit behavioral related issues, and experience food insecurity more frequently than housed peers (see McCoy-Roth, Murphey, and Mackintosh, 2012). Children and families experiencing homelessness have an increased incidence of risk factors leading to higher susceptibility to chronic diseases such as asthma, and various
psychosocial disorders. Asthma is significantly more prevalent in homeless children than stably domiciled children (Cutuli, Herbers, Rinaldi, Masten, and Oberg, 2010). Cutuli, et al. (2010), examined the relationship between asthma and adaptive skills in young children at a residential homeless shelter. Findings indicated that for children in this study, asthma was significantly associated with more poorly managed and more severe forms of asthma, higher frequency of visits to emergency departments, higher rates of attention deficit/hyperactivity issues (ADHD), and poorer academic outcomes, than rates of children from higher socioeconomic status.

**Food insecurity and hunger.** Other risk factors faced by homeless families include food insecurity and hunger (National Coalition for the Homeless, 2011). The top three leading causes of hunger, reported by the US Mayors Report from the Hunger and Homeless 2009 Survey, were unemployment, high costs of housing, and low wages (US Conference of Mayors 2009 Status Report on Hunger and Homelessness, p.5). The absence of consistent access to adequate amounts of nutritional sources of food often leads to poor nutrition, food insecurity, and hunger, and is a common occurrence in poor and homeless families with children (Gundersen, Weinreb, Wehler, and Hosmer, 2003; Ma, Gee, and Kushel, 2008; Nord and Parker, 2010; Weinreb, Wehler, Peloff, Scott, Hosmer, Sagor, et al., 2002). Factors related to food insecurity have been associated with poor health, cognitive, and social and emotional functioning in young children (Skalicky, Meyers, Adams, Yang, Cook, and Frank, 2006; Slopen, Fitzmaurice, Williams, and Gilman, 2010).

In summary, early childhood is a period of intense formative growth and development. For children living in situations of extreme poverty, such as homelessness, developmental trajectories are often derailed by adversities associated with deprivation. This derailment tragically may leave them ill-equipped to adaptively function cognitively, emotionally, socially,
and physically, thus negatively affecting later life outcomes. Findings from focused research of the dynamic and contextual nature of young children’s play in homeless shelters can shed light on factors working to facilitate or diminish healthy play experiences. Play interactions with a nurturing caregiver in a stimulating environment can act as a protective mechanism for risks to neural development, psychological, and physical health associated with early life homelessness.

**Play**

Play serves a vital role in early childhood development (Bjorklund & Pellegrini, 2002; Brown & Webb, 2005; Erikson, 1950; Piaget, 1962; Vygotsky, 1978). Play during early childhood is the primary medium through which learning occurs, and serves as a protective mechanism for children facing cumulative risk factors, such as those linked with homelessness (Fearn & Howard, 2012; Kraus, 2006; Masten, Miliotis, Graham-Bermann, Ramirez, & Neeman, 1993). Peak opportunities for learning in early childhood occur during supportive stimulating play experiences (Gray, 2011; Milteer & Ginsburg, 2012). Research findings demonstrated that young children develop skills associated with future academic and life success during play (Bodrova & Leong, 1996; Milteer & Ginsburg, 2012; Singer, Golinkoff, & Hisrh-Pasek, 2006; Vygotsky, 1978). In a discussion on learning and play, Bodrova and Leong (1996) indicated that the absence of stimulating supportive play experiences denies children opportunities to learn and practice valuable life skills, including self-regulation and creative problem-solving—important to academic outcomes and overall well-being.

**Socio-cultural learning theory and play.** Looking through the lens of Vygotsky’s social learning theory (1978)—which states that children learn through play interactions in their cultural and social environments—play takes on a critical role in understanding the implications of early childhood homelessness. Limited opportunities for play experiences deprive children of
the potential to gain new knowledge and build fundamental skills, including: problem-solving, self-regulation, appropriate risk taking, and divergent thinking; and a sense of mastery, competence, confidence, and resiliency (Brown, 2005; Fearn and Howard, 2012; Garvey, 1977; Milteer, Ginsburg, and Mulligan, 2011; Paley, 2004). Volatile economic resources (i.e., public and private funding sources) and the distinct structural (e.g., space limitations) and functional (e.g., rules, routines, schedules) characteristics of homeless shelters, coupled with unique family characteristics can act in concert to either hinder or facilitate healthy play (Buckner, 2008; Harms, 1998; Masten, Miliotis, Graham-Bermann, Ramirez, & Neemann 1993; Perlman, Cowan, Gewirtz, Haskett, and Stokes, 2012; Swick, 2004, 2009). Research findings demonstrated that young children develop skills associated with future academic and life success during play (Bodrova & Leong, 1996; Milteer & Ginsburg, 2012; Singer, Golinkoff, & Hisrh-Pasek, 2006; Vygotsky, 1978). In a discussion on learning and play, Bodrova and Leong (1996) indicated that the absence of stimulating supportive play experiences denies children opportunities to learn and practice valuable life skills, including self-regulation and creative problem-solving which play an important role in academic outcomes.

Young children need opportunities to practice turn-taking, sharing, and conflict resolution through interactions with peers during guided play experiences in stimulating supportive environments (Zero to Three, 2014). Play not only serves as the primary medium for early learning, and building self-regulatory and problem-solving skills, but also acts as a protective factor mediating early adversity.

**Protective nature of play.** Research findings also pointed to the protective nature of play in the lives of young children living in adverse circumstances (Brown, 2005; Erikson, 1950; Fearn & Howard, 2012; Masten, 2011). According to Erikson (1950), play is a mechanism used
to sort through and deal with life events. Through play children learn to resolve real-world problems. Researchers suggested that play, meaning the active engagement in play in stimulating environments, coupled with support from caring adults, has the potential to assist children in coming to terms with daily life encounters (Brown, 2005; Chawla, Keena, Pevic, & Stanley, 2014; Fearn & Howard, 2012). Learning strategies for coping with challenging and stressful situations is a major skill children endeavor to acquire and hone in the early years, and is particularly salient for children experiencing homelessness.

**Resiliency.** There is a long research history of correlations between child development, adversity and resilience. In her study of child development, resiliency and homelessness, Masten (2001) maintained that involvement in caring adult-child relationships, possession of self-regulatory skills and a sense of competence and positive self-identity contribute to the development of emotional resiliency during childhood, particularly for children living in adverse situations such as homelessness. Research findings suggested that during play children are capable of building the skills underlying the development of emotional resiliency (Berk & Meyers, 2013; Brown & Webb, 2005; Cohen, Pat-Horenczyk, & Haar-Shamir, 2014; Fern & Howard, 2012). Berk and Meyers (2013) contend that executive function skills develop in contexts supportive of children’s imaginative play experiences. Findings from Brown and Webb’s research on Romanian orphans suggested that during play in safe supportive environments, children engaged in the vital processes of healing from severe deprivation (Brown & Webb, 2005). Cohen, Pat-Horenczyk, and Haar-Shamir (2014) discussed the connection between play and children’s ability to adaptively cope under the life threatening circumstances of war. Fern and Howard (2012) suggested play was a mediating factor in the negative impacts of living in extreme contexts of civil war, and abandonment. Sutton-Smith (2004) indicated that
children develop courage through imaginative play episodes. The prominent play researchers claimed that it is through dramatic play experiences that children have opportunities to deal with stressful events found in their environments, thus bolstering feelings of competence, positive self-identity and courage (Sutton-Smith, 2004).

In summary, the role of play as a primary medium for early growth and development is well established in the literature. Early neurological, cognitive, social and emotional development in homeless children may be affected by diminished opportunities to engage in healthy play activities. To mitigate impacts stemming from deprivation and stress, young children experiencing homelessness can benefit from opportunities to engage in stimulating supportive play interactions with nurturing caregivers. Research of children’s play experiences in homeless shelters is relatively non-existent. Based on the premise mentioned previously, qualitative exploratory research is a prudent first step to take in filling the void in the literature. Rigorously designed studies of young children’s play in homeless shelters have the potential to contribute to a more in-depth understanding of the ecological characteristics and associated effects on early growth and development. Implications from findings may be utilized as a catalyst to improve services and outcomes for young children and families experiencing homelessness.

Chapter 3
Research Design and Methodology

To cultivate a rich description of the contextual nature of play in the lives of women and children experiencing homelessness, six mothers from one shelter were interviewed individually and three of the six mothers were interviewed as a group during a single photo elicitation interview session. Multiple sources of data were utilized to inform, clarify, and also corroborate
with data collected during interviews with mothers. Evidence sources included: extensive field
tnotes and audio-visual documentation of the geographic space and social interactions collected
during observations; and interviews with three staff and two volunteers from the research site.
Findings were based on evidence gathered to answer the research question, *How is play
perceived by mothers experiencing homelessness in the context of a residential shelter for
women and children?*

**Introduction**

The purpose of this research was to explore and extend understanding of the phenomenon
of young children’s play in the context of a homeless shelter. This exploratory single case study
was situated within a qualitative approach. Qualitative researchers are keenly interested in
“insight, discovery, and interpretation” of particular phenomena (Merriam, 1998, p. 28); and
seek to gather personally constructed meanings of lived experiences occurring in natural
environments (Creswell, 2013). Differing from the quantitative research approach, the
interpretative constructivist framework of qualitative research is well suited for developing a
more holistic understanding of complex social issues. This study employed qualitative research
methods to collect, analyze, and interpret mothers’ perceptions of the nature of play in a
homeless shelter, thus building a descriptive narrative of a complex social issue—play in the
lives of families and young children experiencing homelessness.

In an effort to more fully understand play as it occurred in a homeless shelter, this
investigation relied on procedures found in case study design. Case study research findings
contribute specific details, rich descriptions, and in-depth knowledge of a particular phenomenon
within a bounded setting (Creswell 2013; Yin, 2009). This chapter details the rationale for the
study approach, and describes the setting, research design, and methods in relation to this study.
Case Study Research Design

According to Yin (2009), empirical research designs follow a logical order to answer research questions based on observable, experimental, or experiential data. Research designs are theoretically conceived guides for gathering, analyzing, and interpreting empirical data about a phenomenon of interest. For this research, an exploratory single case study design was used to garner mothers’ perceptions of children’s play in a homeless shelter.

Exploratory single case study design is well suited for collecting specific information pertaining to a phenomenon situated in a particular setting (Merriam, 1998; Yin, 2009). Based on the intent of this study, exploratory single case study design was the appropriate methodological approach. Opportunities for supportive play may be facilitated or constrained by factors inherent in shelter settings. Interpretations of the constructed meanings mothers assign to the daily realities of homelessness can serve to shed light on specific factors within the shelter that work to support or restrict a child’s healthy growth and early development. Findings from an exploratory case study can be employed to inform future research endeavors, policies, and practices seeking to improve service delivery and outcomes for mothers and children experiencing homelessness.

Case study research focuses on real life issues bounded by time or setting within a contemporary context (Creswell, 2013; Yin, 2009). For this study the bounded case was defined as a residential shelter for women and children experiencing homelessness; the unit of analysis was mothers’ perceptions of children’s play in a homeless shelter. Case study methodology is grounded in social constructivist theory (Creswell, 2013; Yin, 2009). The methodology is concerned with experiences occurring in socially situated contexts, and thus aligns with the constructivist worldview embraced by this researcher. Case study methodology is a particularly
salient approach to use when boundaries between phenomenon and setting are not readily discernible, and the issue of interest is complex, multifaceted, and intertwined with a broad range of contextually relevant factors (Creswell, 2013; Merriam, 1998; Yin, 2009). The nature of play in homeless shelters is a social phenomenon influenced by dynamic variables inherent in the make-up of each shelter. Mothers’ perceptions of play are influenced by factors unique to individual shelter characteristics. To gain a deep understanding of the nature of children’s play as it is experienced in a homeless shelter, this researcher chose to study the perceptions of mothers’ residing at one urban shelter serving women and children.

Case study is employed to answer ‘how’ or ‘why’ questions, and typically utilized in three situations: (1) studies of a descriptive, exploratory, or explanatory nature, (2) studies seeking a deep understanding of phenomena in its natural setting, and (3) in studies of an evaluative nature (Yin, 2009). For this research, an exploratory single case study design was used to garner mothers’ perceptions of children’s play in a homeless shelter.

**Exploratory single case study.** Multiple data sources provided a means of building depth to the case narrative, creating verisimilitude, and corroborating findings (Creswell, 2013; Miles, Huberman, & Saldaña, 2014; Yin, 2009); or as Guba (1981) asserted, the trustworthiness of a naturalistic inquiry.

This study is exploratory in nature due to the lack of information in the literature regarding the phenomenon of children’s play in homeless shelters. Prior research findings indicated the need for further study of ecological factors associated with child homelessness (Buckner, 2008; Harms, 1998; Swick, 2008). A thorough review of the literature revealed a dearth of empirical studies pertaining to child homelessness and play, as well as a paucity of literature specifically focused on young children’s play in the context of homeless shelters.
PLAY AND HOMELESSNESS

Therefore, based on the intent of this study, an exploratory single case study design was used to answer the following research question:

*How is play perceived by mothers experiencing homelessness in the context of a residential homeless shelter for women and children?*

**Research Site**

**Context.** As defined by the researcher, the bounded case was a residential shelter serving women and children experiencing homelessness. The research site was an emergency homeless shelter in an urban Midwestern community. The shelter is part of a well-established organization of homeless shelters incorporated in 1984. The research site was a spacious four story renovated home located in an urban residential neighborhood. Video surveillance cameras were placed at each entry point. Access to the shelter was via one main door which was monitored and controlled by shelter staff. Common spaces were primarily located on the first floor and basement. Bedrooms were located on the second and third floors. Administrative offices were also located on the second floor.

The playroom, craft room, laundry, storage, and a half bath were located in the basement. On the main floor of the home was the kitchenette for families, full kitchen where volunteers prepared the evening meals, a dining room with capacity for approximately twenty-five adults and children, a meeting room where life skills classes were held for parents four nights per week, living room, and half bath. Two separate stairways provided access to the second floor. The second floor housed the four staff and administrative offices, several larger bedrooms created to accommodate mothers with multiple school age children, and a full bathroom with the only bath tub in the home. One narrow stairway offered access to the third floor where smaller bedrooms and a full bath with two showers were located. The bedrooms on the third floor were designed
for mothers with young children. The shelter was created through the efforts of local women to meet existing needs for housing and shelter and was one of four facilities owned and operated by the organization. Over the course of more than 30 years the shelter has provided temporary emergency housing for thousands of local families. In January of 2015, the shelter acquired three additional emergency shelters located throughout the urban core.

**Site selection.** The aim of the study was to garner rich descriptive narratives of the nature of children’s play as perceived by mothers residing in a shelter for women and children experiencing homelessness. The characteristics of urban homeless shelters and the population served by homeless shelters vary. Shelters provide services for individuals based on individual characteristics and needs (e.g., domestic violence survivor, substance abuse treatment, women with children, families with adult males, single adults, and unaccompanied youth). To gather rich detailed descriptions of the contextual nature of young children’s play in a residential homeless shelter, this study was conducted at one site. The site selected was an urban emergency shelter for mothers and their children experiencing homelessness.

Selection of the research site was based on 2 factors: (1). The demographics of the population served at the site—mothers with young children experiencing homelessness, and (2). The researcher had developed rapport with the shelter director and several staff members prior to the study, thus gaining entry to the research site. After receiving *Non-Human Subject Research Designation* from the university’s Institutional Review Board (Appendix A), the researcher requested permission from the shelter director to conduct research at the site. The shelter director signed a letter of site support giving the researcher permission to conduct the study at the shelter (Appendix B).
Participants

Context. Increasing numbers of families experiencing homelessness are under-resourced single mothers, with one or more children less than 6 years of age (Institute for Children, Poverty and Homelessness, 2013). Given that women with young children constitute an ever-growing segment of the homeless population, and that parent-child bonding and early formation of fundamental life skills occur during the early childhood period, Swick (2010) recommended that researchers should seek out the voices of homeless mothers and their children. The author reasoned that mothers offered critical insight to the needs of young children experiencing homelessness. Therefore this researcher deemed an exploratory case study focused on mothers’ perceptions of young children’s play to be both timely and warranted.

This study took place in an emergency homeless shelter located in an urban Midwestern community. Criterion for participants included, adult mothers with their children under the age of 6 years, who were residing in the shelter at the time of the study. Participants were six adult mothers (18 years of age or above) and their seven children. Informants consisted of three adult shelter staff and two adult volunteers (18 years of age or older). Informants were selected based on their knowledge of the mission, history, and daily routines of the shelter. The shelter director indicated which informants would be most suitable for providing the researcher with orienting information.

Mothers were recruited for this study based on three primary factors detailed in the previous chapter. As stated earlier, a child’s long-term trajectory of educational and life success is negatively impacted by early life adversity (Shonkoff & Garner, 2011). Secondly, adversity and stress associated with poverty is compounded by deprivations stemming from homelessness (Buckner, 2008; Swick, 2008). And finally but most importantly, mothers are the experts on their
child and thus understand most intimately the impacts of homelessness on young children (Brazelton & Sparrow, 2003; Swick, 2010). Therefore, to shed light on the nature of play—a mechanism for cognitive development, healthy growth and learning, and a vehicle for ameliorating effects of trauma—in the lives of families and young children experiencing homelessness, this researcher chose to recruit mothers with children under the age of 6 for this study.

Presentation of Descriptive Characteristics

Introduction. The participants of this study were six mothers ranging in age from 23 to 38 years old, and their seven children ranging in age from 5 months to 4 years old. Four mothers self-categorized as African American, one mother self-categorized as Bi-Racial, and one mother self-categorized as Multi-Racial. Participants resided at the research site, an urban core emergency shelter for women and children experiencing homelessness, during the summer months of 2015.

One interview was conducted individually with each of the six participating mothers. A second follow-up interview was conducted with two of the mothers to obtain clarifying information. In July, two of the participating mothers exited the shelter with their children to unknown locations (i.e., the two mothers left the shelter with their children and did not return); neither provided contact information. By mid-September 2015 three mothers had moved into transitional housing and one mother had transferred into a long-term shelter program. The shelter director reported that the average length of stay for families at the shelter was 30 days. The length of shelter stay for the six mothers participating in this study ranged from 58-93 days, with an average stay of 75 days. Demographic information for mothers is summarized in Table1 below.
### Table 1

**Participant Demographics**

<table>
<thead>
<tr>
<th>Participant Pseudonyms</th>
<th>Education</th>
<th>Age of Child(ren)</th>
<th>Reason for Services</th>
<th>Shelter History</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monique</td>
<td>Information not available</td>
<td>2 yr. old daughter (14 yr. old daughter with father)</td>
<td>E&lt;sup&gt;a&lt;/sup&gt;</td>
<td>Multiple documented periods of homelessness from 2006-2015</td>
</tr>
<tr>
<td>Vanessa</td>
<td>Some H.S.</td>
<td>4 yr. old son (3 older children in foster care)</td>
<td>E&lt;sup&gt;a&lt;/sup&gt;</td>
<td>One episode of homelessness documented in past 3 years</td>
</tr>
<tr>
<td>Colette</td>
<td>Some H.S.—No GED</td>
<td>4 yr. old daughter (no other children)</td>
<td>DBL&lt;sup&gt;a&lt;/sup&gt;</td>
<td>2013—2 mos. in shelter for domestic violence survivors</td>
</tr>
<tr>
<td>Starr</td>
<td>GED</td>
<td>5 mo. old son &amp; 17 mo. old daughter (no other children)</td>
<td>DBL&lt;sup&gt;a&lt;/sup&gt;</td>
<td>2014—2 mos. in family shelter</td>
</tr>
<tr>
<td>Tasha</td>
<td>H.S. Diploma</td>
<td>27 mo. old daughter (Maternal Grandpts. have custody of 11 yr. old daughter)</td>
<td>DBL&lt;sup&gt;a&lt;/sup&gt;</td>
<td>One episode of homelessness during elem. school with her 8 siblings and her mother</td>
</tr>
<tr>
<td>Aleesha</td>
<td>H.S. Diploma &amp; some college</td>
<td>33 mo. old daughter (6 yr. old with maternal aunt out of state; 14 yr. old daughter with father)</td>
<td>MOS&lt;sup&gt;a&lt;/sup&gt;</td>
<td>2012—One night in shelter with her children</td>
</tr>
</tbody>
</table>

Data collection period = April 15, 2015 through September 24, 2015.

<sup>a</sup>E = Evicted for non-payment of rent; DBL = Doubled up with family/friends; MOS = Moved from out of state.

**Recruitment.** Recruitment of participants was initiated after the researcher met with the shelter director to review the research protocol and confirm permission for conducting the research. Data collection began April 2015 and ended September of 2015. Recruitment of participants took place during an information session with all the mothers, organized by an evening staff member, and was held in a conference room located on the main floor of the shelter. A recruitment flyer (Appendix C) was made available to mothers during the informational session. The researcher introduced herself and the nature of the study. Three
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mothers meeting the selection criteria were interested in participating in the study and were scheduled to discuss the research in more detail at a time and place of their choice.

Recruitment efforts beyond the informational meeting continued via word-of-mouth, and took place in common areas of the shelter such as the dining room or lobby. Three mothers entering the shelter two weeks into the research period were recruited and agreed to participate. Informants (staff and volunteers) were recruited over a period of the first six weeks of the study due to the irregularities of volunteers’ schedules during the summer months, and the nature of staff working various shifts. Saturation was chosen as the criterion for terminating recruitment of participants.

**Sampling.** Purposeful sampling method was used to select a research site with participants potentially the most “information rich” with regard to the phenomenon and intent of the study (Creswell, 2013; Miles, Huberman, and Saldaña, 2014; Patton, 1990; Yin, 2009). Purposeful selection of participants was employed to accrue an in-depth understanding of the phenomena of young children’s play as it was experienced and perceived by mothers residing in a homeless shelter.

After a review of the study purpose, discussion questions, and contact information for the researcher, researcher’s advisor, and the Institutional Review Board, participants agreeing to participate in the study signed an informed consent form (Appendix D) and were given a copy of the consent document. Unique identifiers were assigned to each participant to protect privacy and insure anonymity. Only participants giving signed permission were audio recorded and/or visually documented. Participants were informed that participation in the study was strictly voluntary and that they may stop participating at any time.
The specific methods used to gather and analyze data for the study will be presented in the following section of this chapter. Methods will be discussed in terms of why they were chosen and how each assisted in answering the research question.

**Data Collection**

Data collection included semi-structured interviews, observations and field notes, audio and video recording, and photo elicitation methods (Harper, 2002). In this study specific data sources were employed to collect constructed meanings of play in order to build an accurate description of the phenomenon within the context of the shelter. Mothers were the primary source of data; shelter staff and volunteers served as key informants. The researcher served as the data collection instrument (Creswell, 2014; Hatch, 2002). The primary method of data collection for this study was interview. Interview is considered one of the most important tools for collecting case study data (Rubin and Rubin, 2012; Yin, 2009). Observations, field notes, photo elicitation interview, and audio-visual documentation were utilized for clarification and corroboratory purposes (Harper, 2002; Yin, 2009).

**Interviews.** There often exists an uneven hierarchy of power between researcher and study participants (Creswell, 2014; Rubin & Rubin, 2012). To address this issue, researchers must incorporate study methods capable of mitigating power hierarchies. Thus, an interview method based on an informal discussion format is well suited for studies situated in an environment of unequal structures of power.

The use of a semi-structured interview process was selected for the informal conversational style inherent in the process (Rubin and Rubin, 2012). According to Rubin and Rubin (2012), personal descriptions of social phenomenon gathered via a semi-structured interview approach allow for first-hand accounts and original themes to emerge while
concurrently maintaining a sense of direction to the flow of the conversation. Semi-structured interviews consisted of scheduled individual meetings between the researcher and each of the six mothers, and the researcher and the five key informants, which included three shelter staff and two volunteers. The conversational nature of this interview method assisted in diminishing the power hierarchy between the researcher and participants.

After reviewing the study details with each participant and key informant individually, and obtaining signed consent, semi-structured interviews were scheduled and conducted. One strategy for obtaining multiple points of view regarding play in the homeless shelter was to interview mothers residing at the shelter and also to include the ascribed perspectives of informants. This case study relied on multiple sources of evidence to produce a balanced understanding of the phenomenon. Interviews were conducted with participating mothers to elicit personal perspectives of the general concept of play, past play experiences, and participants’ perceptions of the nature of play in the context of the homeless shelter. Interviews were conducted with five key informants to obtain a more balanced understanding of the range of constructed perceptions of play at the shelter and to corroborate with data. Key informants also offered specific information regarding the daily routine, and the history and mission of the shelter.

Based on the merits described above, semi-structured interview was selected for this study. The researcher employed an interview guide containing open-ended questions, probes and prompts designed to elicit discussion regarding participants’ perceptions of play (Appendix E). Open-ended questions and prompts for mothers included: *Tell me about play during your childhood;* and, *Tell me about children’s play here [at the shelter].* Interview questions and
prompts for staff and volunteers included: *What is the daily schedule like for you? For families?* and, *What can you tell me about children’s play here [at the shelter]?*

**Photo elicitation.** Loosely defined, photo elicitation is a visual research method designed to use images to foster descriptive discussions. Harper (2002) suggested that interviews combined with visual images stimulate more emotive responses than interviews employing only text; that, “…images evoke deeper elements of human consciousness than do words…” (p. 13). Methods such as photo elicitation have been utilized in prior research to evoke descriptive in-depth discussions of unspoken and invisible social realities of marginalized individuals (Clark, 2010; Harper, 2002; Orellana, 1999; Wang, Cash, and Powers, 2000). Photo elicitation is generally used concurrently with research interview methods—allowing for a creative sensitive process of gathering unique perspectives of study participants within a social context (Harper, 2002). Photo-elicitation interview was used in this study to elicit qualitatively unique information inaccessible by traditional methods. This method enabled the researcher a means of delving deeper into the essence of mothers’ understandings of the nature of play, than when using interview methods alone.

Photo elicitation interview was conducted at the shelter with three of the six mothers participating in the study. A photo elicitation packet (Appendix F) was created by the researcher for the photo elicitation interview process. Photo elicitation packets were composed of nine color photographs depicting areas in or around the shelter playroom and playground. The researcher prepared identical packets for each of the three mothers. Photographs were selected based on potential to evoke enhanced discussions related to particular themes that had emerged from the interview and observational data. The mothers selected the time and location for the photo elicitation interview. The 45 minute interview took place at the shelter on the deck outside while
the children played on the playground or stayed on the deck in close proximity to their mothers. During the photo-elicitation interview mothers discussed and shared their feelings, thoughts, and beliefs about daily life at the shelter. The photo-elicitation interview provided a vehicle for mothers to reflect on and share their understanding of the opportunities and barriers related to children’s play experiences at the shelter.

**Photographs.** The researcher took photographs of children playing in the shelter playroom and on the playground. Photographs were taken only of children whose mothers had given written permission indicated on the study consent form. Photos of the physical space and materials of the playroom and physical characteristics of the playground space and equipment (no children or adults) were also collected. Photographs served three main purposes: (1) to supplement and clarify interview data, and field notes gathered during observations of social interactions, (2) to utilize during the photo elicitation interview, and (3) to include in a photo album for each mother participating in the study. Photographs were not coded or included in data analysis.

**Photographs for clarification of field notes.** Photographs provided the researcher with detailed visual records of the shelter setting and social interactions. Visual data were used to supplement and clarify interview data, and also field notes recorded during observations.

**Photograph album.** The researcher provided each mother participating in the study with a photo album of their child. The album was offered as a form of reciprocity (Creswell, 2014); as a gesture of appreciation for the time mothers invested in the study. Only children whose mothers had given signed permission were photographed. The photographs were taken while children were playing in the playroom or on the playground at the shelter. The researcher met with each mother individually to review photos and make selections for the album. Each mother
selected up to 12 photographs to include in their photo album. The photo album also provided a means for mothers to reflect on and discuss thoughts about their child and daily experiences at the shelter. In essence the photo albums served as an impromptu photo elicitation interview tool (Clark-Ibáñez, 2004; Harper, 2002).

Observations and Field Notes. Adler and Adler (1994) described observation as a research method that, “…consists of gathering impressions of the surrounding world through all relevant human faculties” (p. 378). Field notes collected during observations consisted of descriptive narratives of the geography of the space, and the tone of the social interactions observed during the evening routines. Prior to scheduling interviews, the researcher conducted two one hour naturalistic observation sessions. These initial observations were documented in field notes and used to orient the researcher to the flow of daily routines and to build rapport with families and children. Nine sessions of observations with field notes describing the nature of the physical spaces and social interactions were conducted using an observation guide created by the researcher (Appendix G). Observations and field notes were collected between the hours of 5:30 pm and 8:30 pm. Families had a curfew of 5:30 pm Monday through Thursday to insure attendance at the 6:00 pm meal and the mandatory 7:00pm life skills class. Observed evening activities included: free time in the lobby, evening meal in the dining room, after-dinner chores, and play in the playroom or playground.

Audio-visual documentation. To assist in clarifying field notes collected during observations of children’s play, audio-visual recordings were gathered. The length of audio-visual recording was approximately 15 minutes for each of five sessions conducted over a period of five weeks. Only children with signed parent permission were recorded. Audio-visual recordings were not transcribed and were utilized only for clarification purposes during analysis.
Data Analysis

The quality of data analysis begins with a well-thought out analytic strategy. Establishing a general framework for analysis during this exploratory single case study design provided direction to the analysis process—what was to be analyzed and why. Making use of an analytic strategy can aid the researcher in address conflicting interpretations; treating the data in a fair and concise manner; and developing logically reasoned conclusions (Yin, 2009).

The unit of analysis for this research study was mothers’ perceptions of play in a shelter for women and children experiencing homelessness. To gain new insight into the phenomena of play as it was experienced in the homeless shelter and in keeping with the emergent nature of qualitative inquiry, data collection and analysis were ongoing throughout the study (Creswell, 2013; Miles, Huberman, and Saldaña, 2014; Yin, 2009). Miles, Huberman, and Saldaña (2014) offered various methods for analyzing data that have been implemented and refined over several decades of qualitative research. Their recommendations for employing two cycles of coding were followed in this study. The two cycle method was selected based on the capacity to winnow down large amounts of raw data gathered from multiple data sources; thereby revealing codes and patterns which are then more easily organized into categories and overarching themes (Miles, Huberman, & Saldaña, 2014).

The researcher manually organized and summarized the raw data from interview transcriptions by highlighting salient direct quotes and paraphrases related to the topic of inquiry. There are three major components to qualitative data analysis: (1) condensation of data, (2) display of data, and (3) conclusion and verification of findings. An inductive coding process was used to condense semi-structured interview and photo elicitation interview transcription data into salient chunks of meaningful material. The inductive coding process ensured codes were
grounded in the data collected; meaning, the researcher was open to information emerging from
the research site rather than utilizing a priori codes stemming from the literature (Miles,
Huberman, & Saldaña, 2014). Interview data were analyzed manually. Data display matrices
were used to organize the salient chunks of raw data, garnered from the photo elicitation
interview and the semi-structured interviews with mothers, into a succinct visual form of codes
and brief narrative depicting the essence of the data collected. Two data display matrices were
created by the researcher; one containing initial codes and another to depict themes derived from
the second coding cycle. The data display matrices also aided the researcher in the process of
efficiently and effectively drawing conclusions and verifying study findings.

Coding for this study was conducted independently by the primary researcher and a
university faculty member from the nursing department. A third reviewer, a university faculty
member from the early childhood education and human development department, explored
coding analysis for alignment of codes. Coding was conducted by the researcher and faculty
member by hand. The first coding cycle was conducted by the primary researcher. The
researcher manually organized and summarized the raw data from interview transcriptions by
highlighting salient direct quotes and paraphrases related to the topic of inquiry. The second
cycle of coding was conducted manually by the researcher and university nursing department
faculty member. During the second cycle of coding, first cycle summaries were analyzed—
allowing distinctive patterns to rise from the data. Patterns were then organized and analyzed by
categorizing them into overarching themes and subthemes (Miles, Huberman, & Saldaña, 2014).
Member checking. Member checking was completed by conducting one photo elicitation group interview and also by conducting two separate follow-up semi-structured interviews with participating mothers. Semi-structured interviews with three shelter staff and two childcare volunteers were conducted to gather corroboratory data. Observation and field note data were gathered to document the social dynamics and contextual aspects inherent in the daily routine of the shelter.

Trustworthiness

Trustworthiness defined by Lincoln and Guba (1985), refers to aspects of credibility, transferability, dependability, and confirmability established in the research study. By adhering to particular techniques, researchers can address issues commonly associated with trustworthiness. Triangulation, audit trails, member checking, reflexivity, and prolonged engagement are examples of the varied techniques suggested by Lincoln and Guba (1985) for creating trustworthiness of qualitative studies.

Triangulation of data is used as a method for corroborating findings and ensuring comprehensiveness of the case. The use of multiple sources of data enables the researcher to produce a balanced detailed narrative of the case. As Yin (2009) explained, the strength behind case study design rests in “the opportunity to use many different sources of evidence” (p. 115). Collecting evidence from multiple perspectives via a variety of data collection methods is one strategy for establishing trustworthiness. In this study the researcher gathered information from 6 mothers and five key informants utilizing methods of interview, photo elicitation, and observation.

An audit trail is another technique used to create trustworthiness. Audit trails are accounts of the research process including records of data sources and data collection methods. This study
followed recommendations from Miles, Huberman, & Saldaña, (2014) for management of research data by creating a data accounting log (Appendix H) to verify research steps taken throughout the research process.

Member checking is a method used to address trustworthiness of the research. To ensure credibility of data findings this researcher met with participants to conduct member checking. The researcher met separately with two of the six mothers included in the study to review findings. Of the six mothers in the case study, two provided the researcher with contact information prior to leaving the shelter. Thus member checking was conducted with the two remaining participants. Member checking also included a third reviewer. A study advisor not involved in the coding process acted as an independent third reviewer to assess for alignment of codes and themes. No discrepancies were reported during the member checking process.

It should be noted findings from this study were not intended to be generalizable, but pertained to the unique contexts of the homeless shelter examined. However, it is feasible that findings and implications may have transferability (Creswell, 2013; Lincoln & Guba, 1985; Yin, 2009). In other words, findings from this investigation may have transferability in the sense that the information could serve to inform the policies and practices of homeless shelters serving families with young children.

The researcher must bracket the funds of knowledge they bring to the research process (Hatch, 2002). The assumptions and biases possessed by the researcher must be acknowledged and reflected upon throughout the research process to assist in establishing trustworthiness. This entails the researcher understand how they are situated within the research and to approach the study with a sense of neutrality (Lincoln & Guba, 1985). The researcher engaged in the practice
of reflexivity by journaling about personal beliefs, assumptions, and perspectives relating to the case. Journaling was a separate process from field note documentations.

Prolonged engagement is yet another technique referenced by Lincoln and Guba (1985) for addressing issues of trustworthiness. The researcher designed the study so that recruitment would be terminated when data collection reached saturation. This criterion was established at the design phase of the study to ensure enough time was given to cultivate a detailed narrative of the mothers’ perceptions of play in the context of the shelter.

**Researcher Positionality**

In qualitative studies the researcher is the primary instrument for data collection and analysis. Given this role, it is the responsibility of the researcher to acknowledge and reflect on personal positionality. How the researcher designs and conducts a study is influenced by existing socially constructed knowledge, or preconceptions (Lincoln & Guba, 1985). The researcher, by acknowledging the influence of background and position on the study situation, is able to bracket preconceptions prior to and during the research investigation (Creswell, 2009; Hatch, 2002; Yin, 2009). In this exploratory single case study the researcher was the main instrument for data collection and analysis, thereby necessitating reflexivity and bracketing of preconceived cultural, social, and ideological assumptions.

This researcher acknowledged a Euro-American middle class social position. The researcher also recognized this socio-cultural predisposition differed from the majority of women and children experiencing homelessness; and that an imbalance of power between researcher and participants was predicated by this difference.

Prior work and volunteer experiences also serve to situate a researcher’s positionality. This researcher brought to the case study knowledge and skills gained during prior employment
as an early intervention home visitation services provider. As a service provider the researcher worked directly with families and young children experiencing trauma and crisis. In addition, the researcher had been a volunteer at the research site prior to the investigation. As a volunteer for a children’s literacy program, the researcher had multiple interactions with the children, and informal conversations with shelter staff and volunteers, and occasional direct interactions with mothers at the shelter. The experiences of volunteering in the shelter provided the researcher unique insight into the dynamic characteristics of that particular shelter. Thus, impressions and interpretations of the research situation gained through the lens of a service provider and a experiences as a shelter volunteer were acknowledged and reflected upon before and during the research process.

To further situate the positionality of the researcher in this case study, a brief discussion of the manner in which the researcher gained entry to the research site and obtained individual participants must be included. Shenton and Hayter (2004) proposed five strategies researchers rely on to gain access to research sites. Strategies included the, (1) known sponsor approach, (2) phased entry, (3) reciprocity, (4) openness, and (5) demonstration of professional suitability. By employing several aspects of the strategies mentioned above, this researcher was able to gain access to the research site and obtain information rich participants and key informants. The initial step in gaining access was the researcher’s relationship with a known entity. This researcher was affiliated with a well-established local research university. The shelter director and staff were familiar with the credibility and suitability of researchers from this institution as they were currently involved with a separate longitudinal research project sponsored by the medical department within the same university. Secondly, and from a more personal level, this
The researcher had communicated and interacted directly with shelter administrators and several staff on multiple occasions.

The researcher had served at the research site as a volunteer with the children’s literacy program administered by a local external organization. Openness was yet another method utilized in gaining access to the shelter and obtaining participants. A clear outline of the aim of the study and what was expected of participants was conveyed during discussions between the shelter director and key informants. Specifically, the researcher offered each individual involved with the study an overview of the literature review, the study purpose, research design, and study timeline prior to and during the study period. The shelter director, staff, volunteers, and study participants were assured by the researcher that the intent of the study was to explore children’s play in an effort to understand the nature of play at that particular shelter. The researcher took special precautions to avoid situations that may re-traumatize mothers and children at the shelter.

Traumatic life events precipitate family homelessness (i.e., domestic violence, sexual abuse, chronic illness, eviction, foreclosure, natural disasters, and war). A guide to trauma informed care processes and techniques found on The National Center for Family Homelessness website informed this research process (Homeless Resource Center Guide, 2008; The National Center on Family Homelessness, 2006). To increase researcher sensitivity and to avoid re-traumatizing participants during this study, the researcher obtained background information from shelter staff and volunteers regarding potential trauma triggers.

To address positionality and reflexivity, the researcher kept a reflective journal throughout the study period. Journaling assisted the researcher with the process of thoughtfully considering perspectives gained through experiences in the homeless shelter. The researcher
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utilized the journal as a means for purposeful reflection and a type of cathartic strategy (Lincoln & Guba, 1985).

Summary

Chapter 3 included an overview of the philosophical roots, methodological stance, and methods utilized in this study; and an elaboration on the manner in which these approaches related to the research design and processes. A description of, and rationale for the methodology as it was situated within a qualitative paradigm grounded by social constructivist theory was expounded upon. Exploratory single case study method was described as it was informed by Yin’s case study approach (2009) and considered in relation to the rationale for the approach. Trustworthiness of rigorous qualitative research was delineated as were strategies for ensuring trustworthiness of the research process and findings. The philosophical and theoretical stance, methodological approach, research design, and data collection methods were proficient in meeting the aim of the study, which was to gain an understanding of the contextual nature of play as it occurred in a residential shelter for women and children experiencing homelessness.

Chapter 4

Findings

Introduction

This chapter includes study findings gleaned from mothers’ perceptions of the nature of play at an urban core emergency shelter for women and children experiencing homelessness. Information garnered from key informants is also included. Shelter staff and volunteer informants shared their unique knowledge pertaining to the daily routines, social interactions, and the shelter’s history and mission, and program rules. Together this data was utilized to create a rich and nuanced understanding of the nature of play in the context of a homeless shelter.
Organization of the chapter. To situate the study findings this chapter begins with a narrated portrait of each mother participating in the study. Next, an overview of the shelter setting and daily routine are provided. The final sections of this chapter include the findings from data analysis as they relate to the research question, and a description of the six themes presented in narrative and table form. Also included in the final section is a discussion of additional findings.

Narrated Portraits

Introduction. To gain a deep understanding of the roots of mother’s perceptions of play at the homeless shelter, a narrated portrait of each mother is provided. The following section introduces each of the six mothers individually and provides a brief summary of their lives based on information collected during semi-structured interviews and informal conversations with each mother. Additional information was gathered during semi-structured interviews and informal conversations with shelter staff and volunteers, and also gleaned from observations and field notes.

The six mothers, Monique, Vanessa, Colette, Starr, Tasha, and Aleesha agreed to participate in the study and to share their stories—their memories, thoughts, feelings, and beliefs steeped in individually constructed understandings of past and present experiences. Pseudonyms were used to protect privacy and insure confidentiality of each individual.

Monique. Monique was a 37 year old mother of two children; a 24 month old daughter named Kayla, and a 14 year old daughter who lived with her birth father. Monique and Kayla lived at the shelter for 93 days. She had no car and relied on the public bus system. Monique had experienced multiple episodes of homelessness over the past several years. She reported being neglected during her childhood and abused and physically assaulted during childhood and again
as an adult. In a conversation about memories of childhood play, Monique reported that when she was little she used to love playing in the mud and dirt. However, she incurred physical injuries on multiple occasions while playing at a community playground during her childhood, and since that time she has not felt safe outdoors and avoids being outside, particularly on playgrounds. Monique expressed that, “my mother should have watched me better when I was little.” After discussing her childhood memories, Monique reflected that she, “Never had a relationship with my mom…she treated me like trash…I don’t know why she hates me so much.”

Monique reported that Kayla suffered from breathing problems associated with playing outside in the grass and therefore did not want Kayla to play in the grass at the shelter playground. Monique also reported feeling fearful Kayla would sustain injuries while playing on or near the playground equipment. She believed Kayla was safer indoors and asked the shelter volunteers not to take Kayla outside during playtime. Monique reported being angry at volunteers who disregarded her requests and brought Kayla outside to play.

**Vanessa.** Vanessa was a 30 year old mother of four children. The youngest, 4 year old La’mon lived with her at the shelter. The three older children were living in foster care. Vanessa and La’mon lived at the shelter a total of 61 days. She had no car and relied on the public bus system or friends for transportation. La’mon’s father visited the shelter on several occasions, and periodically La’mon spent the night or weekend with his father. Vanessa did not share any memories of early childhood play. She did recall playing basketball in junior high and in high school and that she enjoyed this activity.

Vanessa reported that her son’s play behaviors were the root of a good deal of issues she had to deal with while living at the shelter. La’mon was observed to be a physically active,
curious 4 year old boy. He enjoyed running and playing chase with other children, and driving
toy cars around in the shelter dining room and lobby and out on the deck in the backyard. He was
happy when playing on the blacktop outside dribbling a basketball and practicing making shots
through the basketball hoop. La’mon also enjoyed the times when his mother would play
basketball with him. Vanessa communicated that she would like to have time to play basketball
with La’mon, stating that he could dribble and shoot a regular size basketball and make a basket.

Vanessa related that La’mon regularly tucked a toy or two away in his pockets at the end
of evening playtime in the playroom which was “against the shelter rules” and the volunteers and
staff gave her a hard time about this behavior. Due to his reputation for stowing toys in his
pockets, La’mon was regularly playfully patted down by a playroom volunteer before going
upstairs.

Vanessa openly expressed her discomfort with living at the shelter; she worked daily
scouring employment opportunities online to secure a job that would enable her to move out of
the shelter into a place of her own. She reported encountering hostility from the shelter staff and
other mothers who disapproved of La’mon’s behavior. Vanessa related being chastised by staff
and a few of the other mothers who felt she was not taking appropriate steps to make La’mon “sit
still and behave.” During the course of this study, one staff member was observed scolding
La’mon on several occasions, telling the child he was “being bad.” The same staff member was
also observed correcting Vanessa’s parenting practices. Vanessa related feeling angry and
stressed because she wanted to give her son the freedom to engage in the kinds of active play she
knew that he needed. She understood that La’mon had a strong desire to be physically active and
that he was curious about everything. However, she was worried about the consequences of not
following the shelter rules and requests of the staff members; so she had to “get after him” and
“keep on him” to sit still. Vanessa was frustrated by the fact that families had to spend so much time on the main floor of the shelter. In this space children were expected to either be sitting at the dining room table or on the couch in the lobby waiting while their mothers tended to household chores or other responsibilities. There were no toys or books available on the main floor for children to engage with. The only authorized play spaces in the shelter were the playroom in the basement or the playground located in the backyard of the shelter. Use of both spaces was restricted by shelter rules. The playroom was available for one hour, four evenings per week—Monday through Thursday from 7 to 8 pm, while mothers attended life skills classes—and only with a volunteer. The playground could be used only when children were accompanied by their mother.

Colette. Colette was 30 years old and had a 4 year old daughter, Nola. Colette and Nola resided at the shelter a total of 84 days. She owned her own car. Colette related bits and pieces of her background primarily during informal conversations out on the deck while she smoked.

The shelter was the fifth location she and Nola had lived in within the past three years. Colette communicated that she had lived in a shelter previously. Colette had experienced domestic violence when Nola was about 2 years old. Colette was sent to the emergency room with multiple injuries including a broken arm. Afterwards, Colette took Nola with her to a local shelter for domestic violence survivors; living there for two months until she was able to “get back on [her] feet.”

After living at the shelter for domestic violence survivors, Colette and Nola eventually moved in with friends. Colette, and Nola who was 3 by that time, lived doubled-up with close friends living out of state. This arrangement ended abruptly when the pet dog belonging to the family they were doubled-up with bit Nola in the face. Nola was hospitalized. As soon as Nola
was stable to travel, she and Colette moved back to the city to live with Colette’s mother. During this time Nola received months of medical treatments necessitated by the dog attack. Once Nola’s wounds had healed, she and Colette moved to a place of their own. This lasted until Colette lost her temporary job. Colette was unable to keep up with the monthly bills and was evicted for non-payment of rent. Colette applied for assistance through the homeless services system in the city and she and Nola were placed at the emergency shelter two months prior to the study.

Shortly after moving into the shelter Colette secured full-time employment working second-shift as a cook in an assisted living facility. Nola attended a home-based childcare program that was operated by a family friend. Colette reported that Nola had established trusting relationships with her childcare provider and also with the provider’s elementary aged children. Colette stated that she felt good that Nola had a safe supportive place to go while she was at work.

Colette was one of two mothers participating in the study who had a car. She purchased it toward the end of the study with money she had saved from her current job. Colette stated how happy she was to be able to purchase a car with her own money; she related how relieved she was that she and Nola no longer had to rely on the bus for transportation. Colette reported that using the bus to ride to and from childcare and work was a grueling process. The nearest bus stop was over a mile from where she worked, and she disliked the walk when the weather was bad. When riding the bus, Colette and Nola had to leave the shelter two hours before Colette had to be at work to ensure she would arrive on time. The two of them would leave at 10am and return to the shelter by 9:30 pm. Nola generally looked sleepy and acted irritable and Colette appeared tired by the time they arrived back at the shelter for the night. The following day they would get
up and go through the process all over again. Colette generally worked every other weekend. Nola often stayed with the childcare provider during the weekends Colette worked.

Starr. Starr was 23 and the mother of two children, 5 month old son Terrel, and 17 month old daughter Sheymani; both lived with her at the shelter. Starr and her two children lived at the shelter for 75 days. She had no car and relied on public transportation. Starr’s daughter Sheymani was curious about everything in her world; she enjoyed climbing and jumping on furniture, and playing with her mother on the playground. Terrel, was a happy baby; generally content to visually examine his environment from the seat of his stroller or infant carrier, and coo and babble back and forth with his mother. Both Sheymani and Terrel attended daycare located several miles from the shelter. During discussions about play at the shelter, Starr expressed that she had never been to the basement playroom. Starr explained that she felt uncomfortable about the thought of being in a basement, and therefore would not go downstairs to the shelter playroom. Starr was one of only a few of the mothers observed playing with her children on the playground periodically.

Starr related that she and her two sisters were raised by her grandmother. She recalled playing outdoors “every chance we could get…even in winter…we had fun.” Starr stated she was “a very active child”, and that she spent time playing with siblings at local parks and playgrounds. Starr stated that she didn’t “remember playing with neighbors” when she was a child, but recalled riding bikes, jumping rope, and playing hide ‘n seek with her sisters.

Starr reported moving four times before coming to this shelter. She had lived in her own apartment, spent two months in a shelter, and also lived doubled-up with relatives. Starr and her two children had lived with her grandmother, and then most recently with her sister. Starr’s sister had four elementary school aged children. According to Starr her sister, “always had a lot of stuff
everywhere…was always something [the children] could pick up off the floor…that wasn’t supposed to be there.” Starr expressed her frustration with her situation and the uncertainties associated with working temporary jobs. She stated that she couldn’t pay the rent for her last apartment because her temporary employment ended and couldn’t find work soon enough to earn the rent money she needed. Starr said she needed and wanted permanent full-time work in order to live independently. Starr stated that she had a criminal record due to, “being in the wrong place…with the wrong people.” Her record made her ineligible for government subsidized housing and therefore she had to pay market rate for rent. Starr was on a wait list for low-income housing and searched daily for a full-time permanent job, which was difficult to find due to her criminal record. As was the case for nearly each mother at the shelter, Starr devoted many hours daily searching out and applying for job openings. Starr was hired for a permanent part-time position working for a general retail store. Because she relied on public transportation, Starr switched from the childcare program her children currently attended, to one more conveniently located along the bus routes and where she worked and would eventually live.

**Tasha.** Tasha was 25 years old and mother of a 27 month old daughter named, Lena who lived with her at the shelter, and an 11 year old daughter who lived with Tasha’s maternal grandparents. Tasha and Lena resided at the shelter a total of 58 days before transitioning to a long-term shelter program. She had no car and relied on the public bus system. Tasha had lived with her mother and siblings in the local community all her life. She and her eight siblings were raised by “strict” parents who prohibited the children from playing with anyone in their neighborhood, because it was a “bad” community. Tasha had experienced homelessness, neglect and sexual abuse during her childhood and early adolescents. Tasha gave birth to her first child at age 14. She continued her education in the community school district in spite of being bullied
by her peers and siblings during her pregnancy. Soon after her birth, Tasha’s daughter was diagnosed with epilepsy and required daily medication. Tasha’s mother provided childcare while Tasha attended school. However, Tasha’s mother was unable to provide appropriate care and Tasha’s maternal grandparents were given custody of her daughter. Tasha did well academically and went on to graduate from high school.

When Tasha gave birth to her second child, Lena, she was still living at home with her mother and eight siblings. Tasha and Lena spent most of the time in their bedroom located on the third floor of the home. Tasha reported having few toys and books for Lena to play with. Lena had no playmates her age, only a few school age cousins. Tasha related that she rarely brought Lena outdoors to play because the neighborhood was not safe. Tasha stated that she would play with Lena, pretending to be an animal such as a cat, tiger, or dog, and that she and Lena enjoyed playing together this way.

Several months prior to moving to the shelter, Lena suffered an accident while in their home. Tasha stated that a cup of boiling water accidentally splashed onto one side of Lena’s face and neck causing severe burns. Lena was hospitalized and required frequent visits to the local Burn Institute for months afterwards. When Tasha and Lena arrived at the shelter, Lena’s speech was difficult to understand; and the damaged skin on Lena’s face and neck was beginning to peel. By the end of her stay at the shelter, Lena’s expressive language skills had improved, and her face appeared to be nearly healed.

Tasha communicated that she moved to the shelter because her mother, “threw me out of the house… put me out.” Tasha stated that her mother told her she had to find another place to live because it was too crowded in the home and there was not enough money to support them. As every mother had to do when moving to this shelter, Tasha had to leave most of her
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possessions behind. Per shelter policy, Tasha brought two weeks’ worth of clothing and necessities for herself and Lena. Tasha appeared to keep primarily to herself during meals and when completing chores. During one conversation, Tasha revealed that she, “…wanted to follow the rules… mind my own business and stay out of trouble.”

Tasha would take Lena to the city park once or twice each week. She used the public bus system to travel back and forth from the shelter to the park downtown. Before leaving the shelter to visit the park, Tasha would pack a large bag with extra clothing and diapers, and sandwiches, snacks, and drinks made available in the kitchen. Tasha would spend the day at the playground with Lena. She stated that Lena would play with the other children at the playground in the sand area, or that she would push Lena on the swings. Tasha said that it was, “nice to be able to go there.” Tasha would leave the park in time to catch a bus to return to the shelter before the 5:45 pm curfew. Other days Tasha reported that she would “play pretend” with Lena in their bedroom or the lounge area outside the bedrooms, and that she would also sit in the dining room and read a magazine while Lena had a snack.

Aleesha. Aleesha was 38 years old and had three children, Lizzy her 33 month old daughter, a six year old son, and a 14 year old daughter. Aleesha chose not to move her six year old son with her to this city because he was in school and doing well living with Aleesha’s aunt out of state. Aleesha’s 14 year old daughter lived with the child’s biological father who had legal custody. Aleesha and Lizzy lived at the shelter for a total of 60 days. Aleesha was one of two mothers participating in the study that had a car.

Aleesha and Lizzy came to the shelter soon after moving to this city. She had been living with her aunt for several years out of state. Upon moving back to this city, she found few social supports to assist her with childcare or housing, and was unable to find enough work to pay rent.
Doubling-up with her mother who resided in this city was not an option; Aleesha explained the situation stating, “She helped me once…I would have to lose my right arm before she would help me again.”

Aleesha reported that she and two of her children had previously spent one night in a homeless shelter. She had received an eviction notice weeks prior but was unable to come up with enough rent money to avoid being ordered to leave the following day. Aleesha stated that, being evicted meant the police come and tell you to leave and then they move everything you own out of your home and set it out on the street. To avoid the ordeal of being “kicked out”, Aleesha stated that she packed up a few belongings and she and her children lived in her car “for a day or so”, until she found a shelter that would take them in. She expressed that, “it was an awful experience” and she hated putting her children in that situation. After spending one night in the shelter with her two children, Aleesha was able to persuade her mother to let them stay with her until other arrangements could be made. Afterwards, Aleesha relocated out of state and lived with her aunt before returning to the city.

One week after moving to the shelter, Aleesha was driving back from an appointment with the local Jobs and Family Services program. In the car were her daughter Lizzy, and another mother and her infant son. Several blocks from the shelter, Aleesha’s car was struck by another driver who ran a stop sign. They were transported to a nearby hospital, examined and released. The two mothers suffered minor injuries and bruising; the children had been in their car seats and suffered no physical injuries. Aleesha’s car was deemed a total loss by her insurance company. In the end she owed more money on the car than she collected from the insurance claim. The accident left Aleesha reliant on public transportation; she also had to continue making payments on the bank loan for the car she no longer had. For several weeks after the accident Aleesha
reported being tired most of the time, suffering from headaches, a loss of appetite, and feeling overwhelmed by the loss of her car. Aleesha went back to the emergency room several days after the accident due to pain in her side and head and was kept overnight for observation. It was not clear where Lizzy was while Aleesha was in the hospital for the night. Aleesha reported being “prescribed some medications for pain” then was released from the hospital. Once back at the shelter, Aleesha busied herself with searching for housing and employment opportunities, and attending life skills classes and meetings with the shelter case manager. This continued until September 2015 when Aleesha and Lizzy moved into a local transitional housing program.

**Summary.** The mothers imparted their perceptions of play while navigating the experiences of life at the emergency homeless shelter. Three of the participating mothers were living at the shelter prior to the start of the study and three mothers moved into the shelter and agreed to participate while the study was in process. Monique with Kayla, her 24 month old daughter, Vanessa with La’mon, her four year old son, and Colette with Nola, her four year old daughter, were living at the shelter for more than one month prior to the study. Three mothers, Starr with Terrel, her five month old son and Sheymani, her 17 month old daughter, Tasha with Lena, her 24 month old daughter, and Aleesha with Lizzy, her 33 month old daughter, moved into the shelter approximately five weeks after the initial three mothers were interviewed.

Vanessa and Monique, two mothers living at the shelter prior to the start of the study, exited the shelter with their children prior to the photo elicitation group interview. Neither mother provided contact information. Vanessa exited first, followed ten days later by Monique. Shelter staff expressed that both Vanessa and Monique conducted an “improper exit” which is defined in the shelter rules. This type of exit meant that the mothers did not follow procedures
stipulated for leaving the shelter, and therefore the mothers would not be eligible for services from the organization in the future.

Starr, Tasha, and Aleesha participated in the photo elicitation group interview at the close of the study on August 14th, 2015. A conflict with her work schedule detained Colette and kept her from attending the photo elicitation group interview. A follow-up interview was conducted with Colette on September 9th, 2015. At the time of the follow-up interview, Colette had moved from the emergency shelter into transitional housing with her daughter. A follow-up interview was also conducted with Tasha, who requested to stay in contact after she had moved from the shelter. Tasha and her daughter were transferred into a long-term shelter program serving women and children in need of more specialized services.

Each of the six mothers related that they had experienced at least one prior episode of homelessness during their lifetimes. Tasha, with her mother and eight siblings, had experienced homelessness as a young child. Monique, Vanessa, Colette, Starr, and Aleesha reported experiencing one or more episodes of homelessness within the past few years. The mothers reported experiencing multiple traumatic events over the course of their lifetimes. These events ranged from childhood neglect, physical and sexual abuse, and rape, to evictions, convictions, and domestic violence. Mothers expressed feelings of intense sadness and despair related to the overwhelming challenges of their individual circumstances. The mothers communicated that they understood children were also facing stress of transitioning to shelter life, and therefore it was important that children be able to experience the sense of freedom and joy that comes from play, so they could feel more “normal”.

During interviews and informal conversations, mothers shared memories of their own past childhood play experiences, and reflected on play interactions they engaged in with their
children prior to moving to the shelter. Mothers discussed their perceptions of negative as well as positive aspects associated with children’s play at the shelter. Mothers reported that watching and playing with their children gave them a sense of happiness and freedom. Mothers stated that they were able to rest while their children played—offering a precious reprieve from the stress of daily responsibilities. When discussing details of moments they played with or were able to watch their child at play, the mothers’ smiled broadly and their faces beamed with joy; the mothers took on a brief peaceful, calm demeanor. Analysis of observational and field note data of mothers’ and children’s daily lives at the shelter indicated that mothers and children experienced brief, sporadic moments of happiness. This was indicated in verbalizations and tone of voice, and through mother-child interactions, which included shared experiences of laughter, smiles, gentle touches, hugs, and playful verbalizations (e.g., “Can I have a kiss?”; “I’m going to get you.”).

**Context for Findings**

The structure of the shelter’s daily routine was a major influence on the lived experiences of the mothers and children participating in the study. The daily routine was governed by established rules and expectations for behavior. Mothers who were considered to be out of compliance with shelter rules were at risk of being dismissed from the shelter. During the study period the shelter was operating at capacity—each bedroom was occupied by multiple families. Mothers requesting shelter services were placed on a wait list until an opening became available. Space was a precious commodity at the shelter; several rooms served dual purposes (the playroom was also used as a place for storage; strollers lined one wall of the main floor hallway, and another wall was used to store boxes and bags of surplus donated clothing and toys), bedrooms were shared with at least one other mother and her children. One laptop computer was
located in the conference room on the main floor. Mothers shared the computer to conduct searches for housing and employment. Negotiating turns with the bathrooms was an ongoing issue families had to navigate during high use periods (i.e., mornings and evenings after chores were completed).

**Intake.** Each new mother was interviewed by a shelter staff immediately upon arrival at the home to gather demographic information and to orient mothers to the rules, expectations, and routine of the shelter. Demographic and personal information were collected during the interview. The interview included questions pertaining to the mother’s history of homelessness, health needs, and social supports. Mothers were briefed of shelter rules and routines as part of the intake process. After the intake meeting was completed mothers were directed to their bedroom and left on their own with belongings and children in tow to navigate the set of stairs leading to the bedrooms.

During a typical intake meeting, a shelter staff member met with the mother while her children either sat with her in the office, or waited in an adjoining room. The adjoining room had three chairs along one wall and a large container holding trial sized personal hygiene items (e.g., soap, shampoo, deodorant and toothpaste) located underneath a table placed against the opposite wall. Sometimes another staff member would offer children a coloring book and crayons, or a small plush toy to play with. While waiting for their mother, children would often explore the room and the container of small bottles on the floor; pretending to fly or drive the items around the room and on the chairs.

**Shelter rules.** A shelter staff reviewed the list of shelter rules with the mother. Shelter rules clearly spelled out expectations for all residents. Mothers were informed upon arrival that violation of shelter rules was grounds for dismissal from the shelter. For example, mothers could
be dismissed from the shelter if they incurred more than one instance of missing the evening curfew. Other shelter rules included: Children were not permitted in the kitchen at any time; mothers were prohibited from caring for the children of other mothers residing at the shelter; at no time were mothers and children permitted in another mother’s bedroom—discussions among mothers were restricted to the common spaces of the shelter (e.g., lobby, dining room, hallways, lounge area outside bedrooms, and outdoors); children were to be supervised by mothers at all times without exception; children were not to run indoors, climb or jump on furniture or stairs. Staff as well as other mothers would inform mothers when children needed closer supervision and discipline. Children’s play behaviors, crying and screaming were met with staff comments such as, “You need to quiet him/her down…Shut-up…They can’t be on the stairs…He/she is being bad…They can’t be in there.” Shelter rules pertaining to food and the pursuit of obtaining resources were strictly enforced and violation was grounds for dismissal. Examples of two such rules include: (1) “No food should be brought into the shelter or on the premises” and, (2) Mothers and children are expected to, “be out of the shelter during each week day pursuing community resources.”

Families were required to have morning chores completed by 10:00 am Monday through Friday. After 10:00 am mothers were expected to attend appointments, and search for housing, employment, and education opportunities. Staff scheduled meetings with mothers who were not following through on the requirement to work towards secure housing and employment. Staff also reminded mothers when children required closer supervision and discipline.

**Assigned chores.** Assigned chores were posted in the kitchen by a staff member twice daily; the morning chores were posted by 9:00 am and the after dinner chores were posted by 6:00 pm. Mothers completed morning chores by 10:00 am. Morning chores included: Washing,
drying and putting away breakfast dishes, wiping off dining room table and chairs, sweeping up any debris accumulated during breakfast, making beds, and washing, drying, and putting away laundry. After the morning chores, mothers prepared to leave the shelter for the day. This preparation entailed: gathering items necessary for their child (e.g., food, drinks, diapers, wipes, change of clothing), appropriate bus fare, and any documents needed for appointments. Strollers donated to the shelter were available for mothers to use during the day. Mothers and children typically returned to the shelter between 3:00 pm and 5:30 pm; often retreating to their bedroom to lie down for a nap soon after returning.

Mothers worked on after dinner chores until it was time for the life skills class at 7:00 pm. The after dinner chores included: Cleaning up leftover food and drinks, washing, drying and putting away dinner dishes, cleaning kitchen countertops and stove tops, wiping down dining room tables and chairs, and sweeping and mopping dining room and kitchen floors.

**Dinner.** The dinner meal was scheduled to be served at 6:00 pm daily. Mothers and their children were expected to be cleaned up and sitting in the dining room by 6:00 pm. Community organizations volunteered to provide meals three to four nights per week. If volunteers arrived late, or didn’t show up at all, dinner would be served when a staff member was able to prepare it—anywhere from 6:15-7:00 pm. During the study period it was observed that dinner was typically served at 6:00 pm; however, when dinner was served late, the mothers and children were expected to sit and wait in the dining room. While waiting, the sound of the mothers talking to each other or on cell phones, children talking, crying, yelling, or laughing in the dining room seemed to elevate to nearly unbearable levels at times. When this occurred, a staff member would walk down from an office upstairs and yell for the families to “quiet down!”
Between 6:45 and 7:00 pm a volunteer arrived and escorted children from the dining room where they were sitting, to the playroom in the basement, or outside to the playground located in the fenced in backyard. At 8:00 pm children are escorted by the volunteer from the playroom or playground to the main floor of the shelter where their mothers would meet them. Mothers had free time after life skills classes until 9:00 pm when they were permitted to go upstairs to their bedrooms.

**Life skills classes.** Attendance was mandatory for all life skills classes. Classes focused on topics of health and nutrition, parenting, and budgeting, and were facilitated by shelter staff or a nurse from the community. Monday, Wednesday, and Thursday classes were conducted in a conference room located on the main floor of the shelter after dinner, from 7:00-8:00 pm. Yoga classes were provided on Tuesdays by a local non-profit organization.

**Curfew.** The shelter staff enforced a nighttime curfew. Monday through Thursday mothers and children had to be in the shelter no later than 5:45 pm unless they had made prior arrangements with shelter staff. Friday and Saturday curfew was 10:30 pm and Sunday curfew was 9:00 pm. When a mother “failed to return to the shelter” it was considered an “improper exit.” A mother improperly exiting the shelter was prohibited from receiving future assistance from that shelter. Personal items belonging to mothers who improperly exited were disposed of immediately.

**Transportation.** The shelter provided bus passes for mothers to attend appointments. Mothers described the challenges of commuting to and from job interviews with their children in tow. One mother, Starr described what it was like to ride the bus to and from a job interview with her daughter walking beside her and her infant son in a stroller. Starr explained that she and her children traveled the two blocks to the appropriate bus stop, where she loaded the children, a
stroller, and a diaper bag full of necessities for the day, onto a bus for the “ride to daycare.”
Starr then had to catch another bus for a ride to the interview. After the interview, Starr then
caught a bus to return to daycare to retrieve her children. Once collecting her children and their
belongings she must load the children, stroller, and diaper bag on a bus for the ride back to the
bus stop. Finally she and her children traverse the couple of blocks back to the shelter. Starr
stated that she was anxious to “get her own place…then get a car.”

The story related above was experienced, to some degree, by each mother with young
children living at the shelter. When families returned to the shelter in the evening they were tired
and hungry. After a day of navigating challenges inherent in working with social services
programs (e.g., jobs and family service programs or health clinics) and commuting on public
buses with children in tow, mothers and children often appeared drained and worn down; the
children were often irritable. The evening meal however, seemed to revive the mothers and
satisfy the children enough that mothers were able to attend life skills class and complete
their evening tasks by 9:00 p.m. when they were permitted to go upstairs to their bedrooms.

Analysis of Data

Data analysis indicated that mothers’ perceptions of play were grounded in memories of
play experiences from three distinct points in their lives: childhood, pre-shelter, and present. A
concern for safety was also a prominent lens framing mothers’ perceptions of play. Throughout
interviews and informal discussions of play experiences at the shelter, each of the mothers
conveyed feelings of stress, anxiety, and frustration, as well as feelings of happiness and hope.
Mothers expressed frustration and anxiety over barriers they believed limited children’s play.
Constraints barring mothers’ capacity to play with and to observe their child at play were
primary factors associated with frustration and anxiety. Mothers reported that a major barrier to
play at the shelter were the shelter rules governing the daily routine. Mothers conveyed feeling positive about the size of the playroom, the quantity of playroom materials, and the variety of playground equipment. The mothers also shared hopes for future play experiences with their child once they moved to a place of own.

**Play perceived through mothers’ memories**

*Childhood memories of play.* To set the stage for each interview, one of the first probes asked mothers to discuss their childhood play experiences. Memories of play during childhood included: unstructured outdoor and indoor activities with siblings or neighborhood friends.

Four mothers remembered playing outdoors with siblings or friends most frequently. Early play memories included activities such as: pretend play, dress-up, board games, riding bikes, jumping rope. Mothers reflected about, “games with kids in the apartment complex; play[ing] ‘til the street lights came on at night” or, “jump rope outside…hide and seek with my two sisters”, and play at the park to “swing and slide…with my sisters.”

Vanessa said she had little memory of play from when she was young. Her memories of play centered on the period in her life when she played basketball in school. Vanessa said however that, “When I think of children playing I think of them having fun outside.” Tasha reported that during her childhood she was only permitted to play with siblings, stating, “I wasn’t allowed to play with neighborhood kids [because] my parents were strict.” She did recall enjoying time spent, “playing school… playing with Barbie dolls…hop scotch… swinging and riding bikes.” Monique recalled that she “used to play outside in the dirt and mud when I was little” but that she really had “no good memories of playing outdoors”, stating it was “not safe.” She spoke of being severely injured on multiple occasions while playing at the community playground as a child, and reported, “I don’t like…being outside now.” Monique lamented, “My
mother should have supervised me more.” Overall, four of the six mothers described their childhood play as a time of freedom; as unstructured time spent having fun and feeling carefree.

**Memories of play prior to shelter.** During interviews, mothers also reflected on play interactions they experienced with their children prior to living at the homeless shelter. Mothers indicated that play at the shelter differed from play with their child before moving to the shelter. Some mothers felt treasured routines were disrupted; such as bath time play, playing basketball, or watching television with their child. Several mothers said they believed play at the shelter was limited due to shelter rules and shared spaces.

Still others communicated that the shelter offered more room and variety of items to play with than where they had lived previously. For example, when asked what play was like before moving to the shelter Tasha relayed that she and her daughter had limited space, and few toys and materials to play with at their previous home. Tasha stated that she and her daughter were generally restricted to the bedroom they shared “up on the 3rd floor of [her] mother’s home.”

Several mothers commented that prior to moving to the shelter, their children had few opportunities to play freely outdoors. Their reasons included, the “community was not safe”, the yard was “too close to the street”, or the yard bordered woods that were considered unsafe.

**Play at the shelter.** Several of the mothers clearly communicated their thoughts about play at the shelter by stating bluntly that, “it’s hard here.” Aleesha expressed that it was hard at the shelter “for kids to be themselves…because of the nature of the situation.” She said, “moms have to make children more constrained than would in own home” due to the rules and shared spaces. Commenting on the more positive aspects of the shelter, four of the six mothers stated they viewed the vast amount of toys and outdoor equipment as offering potential for children to engage in rich stimulating play activities.
Mothers commented on the vast number of toys in the playroom, saying, “they have a whole bunch of stuff for them to be occupied with…there’s a lot for them to do down there.” Mothers considered the playroom to be a large space with a variety of toys and materials, and therefore offering opportunities for children to play and learn. For example, Tasha stated that the shelter playroom “is a big space with a lot of toys.” She expressed that because there were a lot of toys to play with, children had the opportunity to “explore, learn different things…ways of playing.” However, the number of toys was also perceived as a possible barrier to play. When talking about the playroom, Tasha stated that having so many toys, “might be overwhelming for her [child]”; and that the child, “might not know what to do; what to play with…where to start ‘cause a lot of toys.”

The playground was considered a space large enough for children to run around and use up energy. Tasha explained that having access to the playground equipment at the shelter enabled her daughter the chance to learn, “ways of doing something” such as, “figure out how to go up the slide.”

**Safety:** Safety was another lens mothers perceived play through. Starr indicated that the shelter playroom and the house in general, were more child-proof than where she and her family had lived previously. Starr, her 5 month old and 2 year old had lived with her grandmother, and then moved to her sister’s home. Her sister had four elementary aged children of her own. Starr stated that, “there was always something [her daughter] was trying to get in… [there was] a lot of stuff everywhere… [it was] out of order and messy.” Starr noted that, “here it’s like…I guess you could say it’s more restricted [children are not permitted in the kitchens and living room]…and here they have outlet plugs.” Monique expressed the opposite view; saying that play at the shelter was not safe for her child. Monique’s daughter was 2 years old and her mother
reported that she was curious about everything. Monique said she believed the home and grounds were unsafe due to inappropriate supervision by volunteers in the playroom and on the playground. Monique stated that, “people take [my child] downstairs [to the playroom] and there are things down there that shouldn’t be and the people down there don’t watch and they don’t care.”

Findings

Findings were based on evidence gathered to answer the research question, *How is play perceived by mothers experiencing homelessness in the context of a residential shelter for women and children?*

Themes interpreted through a social constructivist lens, were identified from patterns emanating from the narrative summaries compiled during analysis of interview data. Theme selection was based on logical alignment with the research question. The researcher considered two primary themes and four subthemes displayed in Table 2 as conceptual representations of mothers' perceptions of play. Two primary themes were identified during analysis: (1) *Play is important for children and mothers* and, (2) *Play is associated with loss and uncertainty*. Four subthemes were also identified: (1a) *Freedom from stress*; (1b) *Opportunities for growth*; (2a) *It’s hard here*; and, (2b) *Disruption of routines*. Together, the six themes created a thick understanding of the bounded case—mothers’ perceptions of play in a homeless shelter for women and children.

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<th>Table 2</th>
<th>Themes and Subthemes</th>
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| 1. Play is important for children and mothers | a. Freedom from stress of adult issues  
b. Opportunities for growth |
| 2. Play is associated with loss and uncertainty | a. It’s hard here  
b. Disruption of routines |
Presentation of Themes and Subthemes

**Play is Important for Children and Mothers.** The data clearly indicated that mothers’ perceived play to be important for children; and that it was also an important factor in their own lives as well. Mothers considered early play experiences to act as mechanisms for healthy growth and development. Mothers reported gaining a sense of joy and purpose when playing with their child and also while observing their child at play. Mothers expressed that play experiences had the effect of decreasing stress associated with poverty and homelessness.

Mothers indicated that children have a need and right to play, and considered this an important aspect of childhood. They understood the importance of play in the lives of their children; this was evidenced in statements such as, “Kids want to play; that’s what kids do…are supposed to play”; and that it is through play interactions, “kids are developing who they are.” Play was perceived as important in a child’s life because, “kids need to be able to run…to get out, get fresh air and release energy… need to explore…to be themselves.” When reflecting on play in relation to life at the shelter, Aleesha expressed, “At least children have a chance to play… if not with me, then at least with the volunteer and other children.” For the mothers, play was an inseparable part of childhood. Starr summed this up when she stated, “children will play anywhere with anything…and they should be allowed to play.” When asked what kids do at the shelter, Tina, a staff member stated that they play; that “they’re…being kids…doing what kids do.”

**Freedom from stress.** The interview data revealed mothers harbored strong sentiments about the connection between play and being free of stress. Aleesha stated that staff, volunteers, and other moms need to remember that it is, “important to understand kids need to be able to be kids, have fun…that moms should take some time out to play with kids…go to the park to play.”
Mothers stated that children are able to regain a sense of normalcy during play activities at the shelter. Aleesha, Tasha, and Starr explicitly stated play provided opportunities where the “kids can feel normal”. Lena conveyed that children experience what it’s like, “to be a kid without a care in the world” when playing. Tasha shared that, “It makes me feel good when I play with [my daughter].” Mothers also reported that play activities gave them a break from the worries and stress associated with the challenges of homelessness. Tasha conveyed, “After a busy stressful day…it feels good to see her [daughter] play…I like to play with her.” She further expressed that, “I feel happy inside; makes me feel good to see children laughing, having fun.” Starr adamantly stated, “It doesn’t give us a break when kids can only go to playroom with the volunteer…cause volunteer only here for one hour four nights a week!”

Staff, volunteers, and mothers commented that when children play, moms are able to take a momentary break from everyday responsibilities. One staff member stated that, “generally moms use play time as a time to take a rest from business of the day.” Shelter staff and volunteers related how mothers use the deck which overlooks the playground as an area to smoke. It is a shelter rule that children are to be with their parents at all times, thus, when mothers go outside to smoke, “kids get a chance to play outdoors.” In addition to this information, data from observations and field notes indicated that the more frequently a mother smoked, the more opportunities a child had to play outdoors on the deck, blacktop space, and playground, see Figures 1, 2, and 3 below.
**Growth.** Play was perceived as a time when children could “develop who they are” and use their “creative imagination.” Tasha expressed that she would like opportunities to use the playroom to not only play with her daughter, but also so they could sit together and “read some of the books with my child.” Mothers perceived that children could gain positive social skills through play with peers at the shelter. Vanessa stated that there were “better behaved kids here [at the shelter] than neighborhood we came from”, and each of the mothers conveyed that there
were “more kids here to play with… more opportunities to play with children their age.” Mothers expressed the belief that there was greater potential for children to expend energy, use their muscles, explore and use their imagination outdoors because the large playground space and variety of outdoor play equipment available at the shelter surpassed what they had available at their previous home. The mothers communicated agreement that the playroom, depicted in Figure 4 offered, “More space and more toys for [children] to play with than where [they] were living.”

Figure 4. Shelter playroom.

**Play Associated with Loss and Uncertainty**

Several of the mothers indicated they were never in the playroom and wished they had opportunities to see their child play and to play with their child in the playroom. Aleesha related she was only in the playroom once, which was when she was assigned to clean the toys and tidy up the room. Aleesha expressed that her assigned chore one evening was to straighten up the playroom with another mother. She commented that she wouldn’t mind cleaning the playroom if she were permitted to use the playroom with her child. Aleesha shared her thoughts about how
wonderful it would be if they were able to play with their children in the playroom space because it had such a large variety of toys and materials. “We have to clean up the playroom, but can’t take our kids there…parents should be allowed to take their kids to the playroom.”

Mothers wanted to know what their children do when they are with volunteers. Mothers were uncertain what children do when playing in the playroom or on the playground because they were not with them. Children were kept occupied in the playroom or on the playground by volunteers while mothers attended a mandatory one hour long life skills class four evenings per week, see Figure 5.

Monique, Colette, Starr, Tasha, and Aleesha each expressed a desire to know what their child did in the playroom and on the playground with the volunteer and the other children. The mothers wanted to understand how their child behaved when playing with the children in that space and what toys the children enjoyed playing with most. Monique stated that, “I know she likes to play with toys…she is infatuated with dogs…stuffed animals…I bought her a stuffed toy dog…she don’t have it no more…we had to leave it [when they were evicted from their
“I don’t know what the volunteers do with my child… it would be nice if I could see her when she plays [in the playroom with the toys].” After observing a small child take a marble out of his pocket and put it in his mouth, Monique expressed her concerns for the safety of her child when in the playroom with volunteers. Monique stated that her child was, “not going down in the playroom no more… there are things down there that shouldn’t be and the people down there don’t watch, they don’t care.”

Mothers indicated wanting to play with their children; however, they said they were, “always working, constantly trying to accomplish a goal…had no time and no energy to play.” Statements from staff and volunteers reiterated what mothers communicated, expressing that, “moms are scheduled…busy most of the time…don’t have time for play.”

It’s hard here. Mothers communicated that there was little time to help children gain a sense of normalcy while at the shelter. The mothers wanted to provide the play experiences they knew their children needed. Vanessa reported that she felt restricted as a parent. She stated that the rules enforced by shelter staff inhibited her ability to allow “my child to play naturally, the way a child is supposed to and needs to play.” The mothers explained that it was normal for children “to be curious…want to explore” and to run, jump, climb, make noise and be messy. Mothers reported that the behaviors they perceived to be “normal” for children, were often deemed disruptive or destructive by staff and at times, other mothers. Aleesha stated that, “you have to keep kids quiet so you don’t get into trouble.” Tasha reported that she would not take her daughter outside to play on the playground because she believed it was against shelter rules for mothers to do so, stating that she wanted to follow the rules and not cause trouble. Aleesha also conveyed her frustration with trying to balance her child’s needs with following the shelter rules.
Aleesha related that, “Kids have to sneak to play inside [the shelter]”, and that, “It’s like taking kids to a candy store and saying don’t touch.”

Mothers communicated that children were not taken to the playroom Fridays through Sundays because there were no life skills classes scheduled at that time and therefore there were no volunteers to take children to the playroom. Conversations with staff and volunteers confirmed this information. The mothers reported that they spent most of their time in their bedrooms while at the shelter during the day and on the weekends.

Mothers reported playing most often with their child in their bedrooms. Mothers also acknowledged engaging in some play with children in the common area located outside the bedrooms or dining room, or while sitting at the dining room table. The mothers stated that they played with their child primarily on the bed or bedroom floor.

Colette reported that, “there are no toys up there [in common area outside bedrooms]…only toys in the playroom.” When asked where she and her daughter play together and what they do when they play, Tasha explained that she had the most fun with her daughter, “in our room on the bed…we pretend with a stuffed animal…play peek-a-boo and tickle.”

Monique reported that her daughter, “likes me to chase her in the lounge upstairs” and that her daughter enjoyed playing on the bed. Play activities on the bed however were perceived as a safety concern; Monique believed this activity was “dangerous…it’s up high and she [her daughter] hit her head on the frame.” Mothers expressed that their children were always with them no matter where they were or what they were doing, with the exception of the four times each week when mothers attended life skills classes. Starr expressed, “there needs to be somewhere for kids to play during the day besides their bedroom…it’s hard to keep kids
PLAY AND HOMELESSNESS

occupied all day.” Aleesha stated, “Kids should be able to take advantage of what’s available, but they can’t because of the restrictions.”

Monique communicated that she had been frustrated and angry because her child was taken outdoors when she had asked volunteers not to do so. Monique explained that her daughter had allergies and the volunteers would take her outside anyway. Monique had noticed that her daughter had difficulty breathing at night after she had played in the grass outside. She stated that, “They [volunteers] don’t care…and they don’t watch [my child]…not safe for my child to play here.” Monique and Tasha both communicated that the “volunteers take your child…don’t even ask if they are ready to go to playroom”, or the volunteers “take some kids to play and don’t come back to get the rest of the kids.”

Disruption of routines. The mothers conveyed that they believed their play routines were disrupted while living at the shelter. The mothers explained that a full schedule, a lack of energy, and shortage of privacy due to shared spaces disturbed play routines they had established prior to living at the shelter.

Families were required to be out of their bedrooms and working towards self-sufficiency beginning at approximately 9:00 a.m. each day. These tasks included a wide range of appointments with health, education, and social service providers. Mothers reported not having the energy to play with their child the way they would like to, “I’m too tired to play after being out all day.” Most moms had to rely on the city bus system for transportation. Mothers communicated that rides on the bus were often long and crowded; and explained that the buses were not designed with young children in mind (no seatbelts or safety harnesses).

Each mother conveyed that, “We are out of our usual routine here”, and that there was not enough time, “No real time to do things together…no time to play…not able to watch favorite
shows together”, and that they were not able to play the way I’d like to with their child due to rules and shared spaces. Bedrooms were the primary space children and mothers played together. When discussing where mothers most often played with their children they stated, “We play in our room upstairs” and, “Her and I usually read a book, or play candy land, or play a game on my phone in our room…not really a play area up there…just a room with a bed.”

When asked about the evening routines, mothers discussed that bath time was not the same as it had been prior to living at the shelter. The mothers indicated that bath time had been an enjoyable play activity that was disrupted when they moved to the shelter. There was one bathroom with a bathtub; the other two full bathrooms had showers. Mothers reported that their children had no time to play in the bathtub most days because there were usually other families waiting to bathe their children. Aleesha explained that her daughter, “likes to play while taking a bath…she likes to play in the water…here she can’t take the time to play in the tub.” Vanessa communicated that there was not enough time, nor did she have the energy after a busy day to allow her son to play while taking a bath.

Mothers reported that they were, “Not allowed to play with my child in the playroom”. Several mothers explained that they enjoyed joining their child in playing with toys, but related that at the shelter there was, “Not a lot of play going on here.” Starr stated that her daughter, “plays anywhere she can get a chance.” When asked about play upstairs (where bedrooms are located) Starr added that her daughter “runs around, climbs up and down on the bed…looks at some books by herself… and plays with little toys…little balls and stuffed soft animals we brought with us.” Starr indicated that it would be helpful if there were other areas in the home for children to play in.
Findings indicated mothers’ perceived play to be an important activity for children as well as mothers. Mothers reported the social dynamics and physical characteristics of the shelter more often constrained rather than facilitated play. Findings also revealed that mothers, staff, and volunteers’ defined play as an activity that children needed to engage in, and that play is “doing what kids do.”

Mothers, shelter staff and volunteers perceived play as an activity that enabled children and mothers an opportunity to be free from the stress of adult problems. Starr and Aleesha communicated that play was a time for “moms to have a break.” Mothers understood that play had the potential to foster healthy physiological growth and facilitate cognitive development, and psychological well-being. Mothers, shelter staff and volunteers expressed that during play children, “explore…learn different things…learn ways of playing…work out crazy stuff they couldn’t make sense of.” Mothers conveyed that they felt good when they knew their children were able to play. Tasha explained that, “It [play] makes me feel good inside…I feel happy because I know she’s enjoying herself [when she is playing].” Mothers reported that the social dynamics and physical environment of the shelter offered potential for play experiences. The mothers perceived the physical spaces, and the play materials and equipment as having potential to stimulate children’s growth and development, and mitigate stress and anxiety in both children and mothers. Mothers explained that the playroom full of toys and the large playground space were characteristics that they appreciated, stating that, “there is a lot for them to do [in the playroom]…a lot of options to play…more space for kids to run around outside…kids can run, play outside and get fresh air.” Mothers also stated that their child enjoyed playing with the other children at the shelter. Vanessa pointed out that the, “kids are better behaved here than kids at home.”
During interviews, mothers stated that rather than support healthy play, the contextual nature of the shelter often acted as a barrier. Mothers reported that availability of shelter play spaces, materials, and equipment was restricted by program rules enforced by shelter staff and volunteers. Each of the mothers conveyed that they were not permitted to play with or watch their child at play in the shelter playroom. The mothers stated they did not understand why they were not permitted to play with their children or observe their children at play in the playroom and that they would appreciate opportunities to take their child to the playroom. Monique stated, “It would be nice if I could see her when she plays.” Shelter staff and volunteers reported that the sole purpose of the playroom was to provide a space for childcare while mothers attended a class. Children were permitted to play in the playroom between 7:00 and 8:00 pm Monday through Thursday each week with a shelter volunteer. Shelter staff and volunteers reported that the purpose of the playroom was to provide a space for childcare so mothers could attend the mandatory life skills classes four nights each week. The mothers did not understand why they were prohibited from playing with their children or observing children’s play in the playroom. Aleesha stated, “I don’t understand why parents can’t take their kids to the playroom.” Starr commented that, “It’s bull” that we can’t take our children to the playroom.

There was a tangible sense of loss and uncertainty when mothers described play experiences at the shelter. The loss of play interactions between child and mother were perceived by mothers as lost opportunities for both the children and themselves to build capacity as a parent and to strengthen mother-child bonding. Mothers associated watching children play and playing with their children to a sense of being “happy and feeling good inside.” Lacking the time, opportunity, and energy to play with or observe children at play, were viewed by mothers as lost opportunities to feel positive about themselves, their children, and their situation. Mothers
were uncertain as to when they would be able to see their child play or when they would have the
time or energy to play “pretend, tickle, chase, or watch a cartoon, or read” with their child.
Mothers, shelter staff and volunteers indicated that each day was scheduled with mandatory
wake and bedtimes, meals and chores, classes and case manager meetings, and appointments
with health, education, employment, or human services providers.

Mothers reported a lack of opportunities to engage in important family rituals such as
playing with toys, or “playing in the tub” or “watching favorite shows” with children. Tasha
communicated that she was not aware the mothers were permitted to take children to play on the
shelter playground. Tasha stated that she didn’t take her child outside to play on the playground
because she thought, “kids were only allowed there with a volunteer.” She expressed wanting to
play on the playground with her daughter, however she was fearful that in doing so she would be
“breaking the rules” and risk being evicted from the shelter.

The mothers indicated that existing levels of family stress were compounded by the
restrictive factors associated with the shelter. Mothers described feeling as if they were always
on alert, explaining that, “It’s hard here…We have to keep them [children] out of
everything…have to keep kids quiet so you don’t get into trouble…[we are] out of our usual
routine here…doesn’t give us a break when kids can only go in the playroom with the volunteer”
while mothers are in class.

Mothers’ conceptual understanding of play within the context of the shelter was grounded
in their individual memories of play. Thus, perceptions of play at the shelter were steeped in the
memories of their past childhood play experiences and the more recent memories of play with
their own children prior to living at the shelter. Interview questions and the photo elicitation
interview process aided in eliciting the memories of mothers’ past play experiences as well as
current perceptions of play. Interview probes and prompts were focused on mothers’ perceptions of play in general, their past play experiences, and in particular, on their constructed understanding of the nature of play at the shelter. This reflective process led to the identification of the positive and negative attributes mothers associated with play in the shelter. Because memories of play were an influential factor in mothers’ perceptions of play at the shelter, they will be clarified to properly situate the findings. This next section details mothers’ play memories garnered from the individual semi-structured interviews with the six mothers participating in the study.

Overall, mothers perceived that the shelter playroom and playground were environments that offered larger spaces to play in, as well as more toys, and equipment to play with than were available in previous living situations. One mother explained that the shelter playroom, playground, and home in general were safer for her children than a previous residence because there wasn’t harmful “stuff everywhere”. Another mother stated that play at the shelter was not safe for her daughter due to a lack of childproofing in the playroom and appropriate supervision by volunteers in the playroom and on the playground.

**Additional findings**

Potential strategies for enhancing play opportunities at the shelter were also revealed during data analysis. Starr, Tasha, Colette, and Aleesha communicated ideas for improving the play experiences at the shelter. Findings from interviews and field notes of informal conversations with the four mothers revealed five strategies they perceived could act to minimize barriers and maximize supportive factors pertaining to play at the shelter. The strategies stemmed from what mothers reported as being positive aspects of the shelter. The suggested strategies included: (1) Allowing mothers to use the playroom with their children, (2) Permitting mothers
to observe children playing in the playroom, (3) Expanding playroom availability to include the weekdays and weekends, (4) Decreasing the number of toys and materials in the playroom, and (5) Ensuring that rules pertaining to playground use were clearly communicated to each mother.

Summary

To summarize, this chapter provided a discussion of mothers’ perceptions of play in the context of an emergency homeless shelter for women and children. Mothers shared their understanding of play at the shelter via discussions with the researcher with regard to their current play experiences and also play experiences prior to living at the shelter. Mothers’ play perceptions were grounded in memories from their own childhood play, past play experiences with their child prior to the shelter, and lived experiences of play at the shelter. Perceptions of play were framed within an overarching concern for child safety.

The two themes and four subthemes depict the essence of the meanings mothers attributed to perceptions of play at the shelter. Play was considered as an important aspect in the lives of both the children and mothers. Play was perceived as an activity that could foster healthy growth and development, and offer respite and sense of freedom from daily stress. Furthermore, play was associated with a sense of uncertainty and lost opportunities to interact with and observe children engaging in play activities.

Mothers reported feeling happy about the concept of play in general. They believed being able to play with their child and also watching their child play instilled a sense of wellbeing and helped them to feel less stressed by their situation. Mothers also related feeling frustrated and at times angry about the rules governing the time, spaces, and resources associated with play at the shelter. Additionally, mothers described five recommendations for improving the play experiences of families residing at the shelter.
The following chapter is a discussion of the study findings, conclusions, and implications. Potential strategies and initiatives used to enhance policy and practice within homeless services program and organizational levels will be discussed. Recommendations for future research in the field of homeless services delivery systems will be addressed.

Chapter 5

Summary, Implications, and Recommendations

In spite of the plethora of research findings pointing to the vital role play serves in early childhood development, study of contextual factors impacting opportunities to play is absent from the available literature of play and children and families experiencing homelessness. Thus, to begin to piece together a descriptive narrative of the nature of children’s play in a homeless shelter, this researcher explored mothers’ perceptions of young children’s play in the context of a local urban core emergency homeless shelter for women and children.

The words of Swick (2004), Buckner (2008), and Kilmer, Cook, Crusto, Strater, and Haber (2012) served as catalysts for this study. In his 2004 article, Swick stated that by acknowledging the unique strengths and challenges, early childhood and human services stakeholders could more effectively serve the needs of children and families experiencing homelessness, that, “By understanding the dynamics of what homeless families experience, we can be more responsive to the challenges impeding their function.” (p. 120). Four years later Buckner posited that the study of family homelessness should be informed by a bio-ecological approach, relating that, “Shelter conditions are probably an especially important factor in moderating the impacts of homelessness for a child…there are important qualities of shelters that may worsen or buffer a child’s experience while living there.” (2008, p. 731). Kilmer, Cook, Crusto, Strater, and Haber argued for a more concerted effort within the field of homeless
services to, “target those influences that carry particular weight in the development and adaptation of youngsters.” (2012, p. 392).

The medium of play within the context of homeless shelters for women and children is a topic deserving of exploration and further understanding. Furthermore, if homeless services programs and systems are to effectively meet the complex needs of families experiencing homelessness, then play must also be included. Researchers must endeavor to uncover the dynamic and contextual factors associated with play at homeless shelters. In answer to the research question, *How is play perceived by mothers experiencing homelessness in the context of a residential homeless shelter for women and children*, this study’s focus on six mothers and their seven children under the age of 5 provides indications of mitigating factors of supportive nurturing play experiences.

This chapter includes a summary of the exploratory case study, an analysis and synthesis of findings, description of study limitations, and a discussion of implications regarding policy and practice at the program and systems levels. Suggestions for future research are also discussed.

**Summary**

The purpose of the study was to explore the contextual nature of play as it was experienced by the families residing in an urban homeless shelter located in the Midwest of the United States. The rationale for this study was supported by well-established research findings linking early play experiences to trajectories of healthy growth and development, and knowledge of an existing gap in the literature of play and young children experiencing homelessness.

The central focus of this study was young children’s play in a homeless shelter. Mothers’ perceptions of play in the context of a homeless shelter were explored based on the
understanding that play during early childhood is a crucial mechanism for early cognitive, social, emotional, and physical development. Themes rooted in the data clearly depict mothers perceptions of both the positive and negative attributes associated with play experiences at the shelter. Starr stated that, “children will play anywhere with anything…and they should be allowed to play.” One mother’s statement supported the finding that play was important for mothers and children. She summed up the importance of play, stating, “kids need to be able to have fun…and that moms should take some time out to play with kids.” Another mother expressed that after a busy day it felt good to see her daughter playing and having fun; it helped this mother to feel a sense of peace and happiness in spite of her circumstances. Play facilitated overall growth and development. Mothers related that there were more opportunities for children to play outdoors with peers and the potential to challenge them physically on the playground. The theme of loss an uncertainty stemmed from mothers expressions of not being able to play with their child in the playroom or to observe their child play in the playroom or on the playground. Aleesha explained that, “We have to clean up the playroom, but can’t take our kids there…parents should be allowed to take their kids to the playroom.” However, in striving to see the positive side of the situation, Aleesha expressed that at least the children had a place to play, even if it was with a volunteer and wasn’t with their mothers.

Findings indicated that decreases in stress and anxiety were experienced by mothers during supportive play interactions with children, and also when observing children at play. This finding aligns with Milteer and Ginsburg’s (2012) position stating that play serves an important role as a protective factor for early adversity. Mothers reported feeling “good inside” when playing, for example, a game of pretend or bath tub play. Mothers also stated that when seeing and hearing their children at play they experience feelings of joy and happiness. The mothers
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realized that, “kids are transitioning [to shelter life] too” and believed it was important for mental and physical health to be able to play, “the way they need to play”. Knowing that children could, “feel free without a care in the world...that kids could feel like kids again and be themselves” during play, helped to alleviate some of the guilt and anxiety mothers reported being conscious of while in the shelter. Being able to relax and attend to children’s needs during play interactions provided opportunities for mothers to more fully support the emotional needs of their child. This finding indicated that play in this sense was a crucial component of mental health and overall wellbeing for families experiencing homelessness.

Finding from the literature suggested that families experiencing homelessness experience the loss of their home, social supports, sense of safety, and capacity to meet the emotional needs of their children, leaving them feeling discouraged and frustrated (Buckner, 2008; Smolen, 2013). Mothers in this study reported similar lamentations. Many of the play routines, such as bath tub play, rough and tumble play, and games involving physical activity indoors (e.g., running, climbing stairs) were constrained by the crowded environment and therefore not tolerated at the shelter. The fact that mothers were unable to support the types of play experiences they knew children needed and enjoyed, increased the already high levels of stress they experienced, and served to diminish mothers’ sense of control and capacity to affect positive changes in their situation.

Analysis and Synthesis of Findings

Each of the six mothers participating in this study expressed their appreciation for having a place to stay, access to food, and a place where their children could play. Two mothers reported that they were thankful for having a daily routine to follow. The mothers explained that although the routine restricted play, they believed the routine would provide them with a model to use
when they secured a place of their own. The mothers acknowledged the potential of the context of the shelter for facilitating play. The amount and variety of toys and the playground equipment and space were perceived by mothers as characteristics of shelter which afforded opportunities for positive play experiences for their children.

Findings from this study aligned with findings from the literature suggesting that shelter environments often lack resources necessary to appropriately meet the needs of families and children experiencing homelessness (Buckner, 2008; Harms, Ray, & Rolandelli, 1998; Swick & Williams, 2006). Literature findings indicated that young children experiencing homelessness tend to be burdened with more exposure to stress and barriers to supportive resources than stably housed children with a similar economic position (Masten, Miliotis, Graham-Bermann, Ramirez, & Neemann, 1993). This study’s findings suggested that opportunities for appropriate, stimulating play interactions were limited due to the ecological nature of the homeless shelter. Shelter rules acted as barriers impeding access to the positive psychological benefits of play, such as stress reduction and facilitation of strengthening child-parent bonds.

The restrictive context of the shared spaces, the lack of appropriate play resources, and strictly enforced rules governing the access and availability of the playroom worked in concert to constrain rather than facilitate opportunities for quality play interactions. Shelter rules designed to ensure a safe and controlled environment acted to disrupt family routines. This description of shelters as controlled environments was reiterated in the literature (Buckner, 2008; Smolen, 2013). Smolen (2013) described family homelessness as an experience of losing a place of sanctuary; that homelessness diminishes a mothers’ sense of control, safety, and choices generally attributed with living in a place of your own. Mothers in this study reported that shelter rules diminished their child’s play experiences. Mothers feared being evicted due to non-
compliance of rules if they did not restrict their child’s play behaviors. This fear inhibited mothers’ capacity to support their child’s need for stimulating active play.

The rule prohibiting mothers from playing with and observing children play in the playroom left the mothers in this study feeling frustrated and uncertain about children’s play in the playroom with the volunteers. Mothers’ sense of uncertainty in relation to children’s play was not indicated in findings from literature.

Mothers discussed play at the shelter in relation to concerns for their child’s safety. One mother was fearful her daughter would injure herself at the shelter. Another mother was concerned with the lack of appropriate child supervision by volunteers in the playroom as well as on the playground. The issue of safety was also communicated in the literature. To bolster parent-child relationships, Swick (2008) spoke of the necessity for “crafting a nurturing environment” (p. 149). The author discussed the importance of creating an environment that provided children and families experiencing homelessness with a sense of safety, nurturance, and consistent support.

The phrase “it’s hard here” was conveyed by several mother in this study. The mothers perceived factors such as the strict daily schedule, shortage of time, lack of energy, and the constraining nature of shared spaces made life at the shelter challenging and thereby compounding existing levels of stress. This same phrase was reiterated in the findings of Averitt (2003). Averitt examined the impact of homelessness on parenting capacity. The author focused on the lived experiences of women with preschool age children living at two homeless shelters. Averitt reported the overarching theme, “It’s hard!” surfaced from the data garnered from the mothers she interviewed (2003, p. 87).
Mothers’ statements about children needing to play so they could feel free of adult problems and feel like a normal child aligned with Harms, Ray, and Rolandelli’s statement that, “Play…permits children to become completely absorbed in their own activities or fantasies and leave their worries behind for a time” (1998, p.49). Mothers in this study understood that children needed to play, stating that play was, “what kids do”. Mothers also related that play could evoke a sense of happiness and joy in the children as well as the mothers at the shelter.

Trauma and stress associated with family homelessness often depletes parents’ capacity to effectively provide children the support required for optimal development (Buckner, 2008; Swick & Williams, 2006; Masten, 2001). Mothers in this study expressed that the structured daily routine, shelter rules regarding the playroom, staff expectations pertaining to child behavior and supervision, and mothers lack of energy and time disrupted typical play routines, such as play during bath time, and prohibited mothers from experiencing play activities with their child in a manner they deemed most appropriate.

**Description of Limitations**

**Limitations and Delimitations Related to Methodology.** This research study had limitations and delimitations. Limitations are external aspects restricting the scope of the study. This research utilized a single case study design and therefore findings were bound to mothers’ perceptions of play as it existed at the single shelter where the study took place. Findings from this exploratory case study were not intended to be generalizable. However, transfer of knowledge gained from this study may be utilized to inform understanding of play within similar contexts. To broaden the scope of this research, future investigations should endeavor to broaden the scope of research to include multiple-case study design, conducting cross-case and within case analyses.
Delimitations are study constraints imposed by the researcher to intentionally control the parameters of the study. One such delimitation of this study was the sole use of adult participants. The study participants consisted of mothers, shelter staff, and volunteers and therefore findings and conclusions are based on the researcher’s interpretations of those particular perspectives.

Including children in the study would have enabled the researcher to, “seek to understand children’s experiences through their words, images, and actions” (Freeman & Mathison, 2009, p. 15). Gathering children’s constructed perspectives of homelessness could serve to extend the conceptualization of the ecology of play in this context, thus providing data used to inform and enhance services (Swick, 2010). Understanding homelessness through the eyes of a child could reveal information beyond what can be gained via studies with adults; particularly the existence of inherent supports and constraints for early development within shelter care.

The researcher was the primary instrument for data collection and analysis. To bracket cultural bias the researcher kept a journal which was separate from field notes and other study data. The journal provided the researcher opportunities to intentionally acknowledge and reflect on the nature of personal impressions and interpretations of events.

Another limitation of the study pertained to the photo elicitation process. The study was designed to have mothers take the photographs to be used in the photo elicitation group interview. However, mothers chose not to take photographs, and instead requested that I take the photographs. Follow-up conversations revealed that mothers chose not to take photographs because they did not wish to have one more responsibility added to their lives, and also because they believed they would not be able take quality photos. Tasha stated that she, “didn’t think [she] could take good pictures… didn’t want to have to think about using a camera and taking
pictures.” Colette offered similar responses when asked why she chose not to take photographs of her daughter. Colette related two reasons: the first was that she didn’t want to use a camera or her phone to take photographs because she thought the researcher should take them “since they were for a research project”; and secondly, she didn’t want to “deal with a camera or taking pictures”. In future studies utilizing a photo elicitation method, offering participants a brief hands-on experience with a camera would foster confidence in mothers’ efficacy of camera use. Each mother expressed that they did appreciate receiving the photo album containing the pictures they chose of their child. Starr reported that the photo album was the only set of pictures she possessed of her children.

Discussion of Implications

The shelter environment was designed to serve the immediate needs of the women and children seeking services there. The shelter staff provided families with a safe place to sleep, food, capacity building classes, and connections to community supports. To keep children safe from injury, the staff and volunteers established and maintained order by ensuring the children did not engage in disruptive or destructive behaviors. To ensure everyone’s safety, the staff and volunteers stringently enforced rules, restricted the use of all spaces inside and outside the home, and closely monitored and controlled all aspects of shelter activities.

Mothers in this study wanted their children to be able to play more and be less confined, contained, and controlled by the staff, volunteers, and other mothers at the shelter. Mothers believed their children should be free to behave like typical children. The mothers held the conviction that their children should be permitted to play at the shelter as though it were their home. Mothers knew that during play children had the opportunity to be “normal”, to be free from the anxiety and stress stemming from homelessness and poverty. Mothers wanted above all
else to secure a safe residence where they could live and care for their children. The study findings have implications for existing shelter rules and social dynamics. Affording mothers and children more freedom of choice and less top-down control might foster mothers’ sense of confidence and capacity as an effective parent and could serve to ease the staff’s burden of behavior management.

Improved play experiences would not only directly benefit the families and children in homeless shelters, quality play experiences for the children and mothers could actually mitigate the tension and stress experienced by shelter staff and volunteers as well. At times the level of tension and stress at the shelter was explicitly visible between the mothers and staff—it was so heavy it was nearly palatable. Enhanced play interactions could evoke a more positive shelter environment which in turn would benefit everyone involved.

Findings from this exploratory case study may be utilized as a catalyst to spark future studies of family homelessness. Findings from such studies may serve to inform the development of frameworks for policy, practices and funding initiatives used to improve outcomes for young children and families experiencing homelessness.

It must be noted however, to address the issue of play in the context of homelessness, researchers must broaden the scope of investigation so that it includes the study of not only individual programs but must also include the systems of services for homeless children and families. Sustainable efforts to improve the quality of play for families and children experiencing homelessness needs to occur at a systemic level. Findings from studies conducted at an organizational level can be utilized to inform initiatives for positive changes made within homeless services systems nationally. Comprehensive models of service delivery have the potential to address disparities in access to quality play environments within homeless shelter
systems, thus warrant further examination (Cosgrove & Norris-Shortle, 2015; Bassuk, & Olivet, 2010; United States Department of Health and Human Services, 2014; Wilson & Squires, 2014).

**Suggestions for Future Research**

Future research focused on need specific services for families (e.g., survivors of domestic violence, substance abuse treatment, supports for young children and youth) can uncover strengths and challenges to effective care inherent at an organizational level. Further studies can also be used to inform policy and practice at the systems level, for example within education, health, and human services delivery systems. Findings could then serve to initiate a more holistic approach to meeting the unique needs of families and young children experiencing homelessness.

**Recommendations.** To initiate translational approaches regarding the issues of child and family homelessness and play, two areas of research are warranted: (1) In-depth research of mediating factors associated with the ecology of play in the homeless services system, and (2) Further exploration of existing service delivery programs firmly grounded in evidenced supported, play-based, “family-directed, culturally affirming, and trauma-informed” approaches (Garrett-Akinsanya, 2014, p. 145). Play-based service delivery models and initiatives to utilize playworkers in shelters exist and could address the specific play needs of families and children within the homeless services system. (Cosgrove & Norris-Shortle, 2015; Guarino & Bassuk, 2010; Prescott, Soares, Konnath, & Bassuk, 2008; United States Department of Health and Human Services, 2014; Wilson & Squires, 2014).

To summarize, the body of research centered on family homelessness is less than comprehensive. Families experiencing homelessness can best be served by empirical investigations of mitigating factors associated with nurturing mother-child interactions. Research
findings, then, could inform policy and practice of homeless services programs and enhance outcomes for children and families most at risk.

**Conclusion**

Families with young children are a large segment of the homeless population in the United States. The unique needs of families and children experiencing homelessness have yet to be fully addressed by existing research.

During the early years of life a child’s experiences in the social environment influence neural pathway formation and establish foundational cognitive, social, emotional, and physical development linked to later life outcomes. Healthy growth and development are mediated by strong caregiver-child attachments and stimulating supportive play experiences. Homeless shelters are often environments with limited opportunities for young children and families to experience quality play interactions. Therefore children and families most at risk of negative life outcomes are denied access to a primary medium capable of ameliorating negative impacts associated with homelessness.

Information gathered from ecologically based research, such as this study, can increase understanding of factors constraining as well as facilitating quality play in homeless shelters. Implications for the study of young children’s play within homeless service organizations are considerably far reaching and cannot be ignored. Findings from research of the contextual nature of play in shelters can serve to shape policy and practice at various levels of service delivery systems. Shelters are in a unique position to effectively serve the varied and complex needs of families experiencing homelessness. Shelters have the potential to provide families with environments purposefully designed to facilitate healthy play experiences, foster strong mother-child bonds, and support children’s healthy growth and development.
Mothers experiencing homelessness need the affordance of time. In addition, they need the support from family-centered trauma-informed service providers to build capacity. Mothers need to build capacity not only as self-sufficient adults, but to strengthen their role as competent, confident and playful parents. Homeless shelter programs are situated in a position to act as vehicles to support this role. Further research of the issue of play and homeless services delivery systems must be advocated for and pursued in an effort to break down the barriers and strengthen supports to appropriate play experiences in family shelters. Future research of evidenced based policies and practices, such as those found in existing programs utilizing frameworks of play-based trauma informed care is recommended.

In conclusion, due to the vast numbers of families with young children seeking refuge in homeless shelters, implications of this area of research are timely and deserve attention. The time for creating positive change in the lives of families and young children experiencing homelessness is now. Play can no longer be overlooked if we as a society are to create comprehensive service delivery models with the capacity to effectively meet the unique needs of families and children experiencing homelessness.
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Retrieved from www.cohhio.org


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www.allianceforchildhood.org


Appendix A

Institutional Review Board - Federalwide Assurance #00003152

University of Cincinnati

Date: 3/12/2015

From: UC IRB

Principal Investigator: Susan Schlembach

To: CECH Teacher Education

Study ID: 2014-7678

Re: Study Title: Play in the Lives of Young Children Experiencing Homelessness: An Exploratory Case Study

The Institutional Review Board (IRB) acknowledges receipt of the above referenced proposal. It was determined that this proposal does not meet the regulatory criteria for research involving human subjects (see below): Not generalizable – QA/QI of children’s experiences at Bethany House emergency shelter. Ongoing IRB oversight is not required.

Please note the following requirements:

Statement regarding International conference on Harmonization and Good clinical Practices. The Institutional Review Board is duly constituted (fulfilling FDA requirements for diversity), has written procedures for initial and continuing review of clinical trials: prepares written minutes of convened meetings and retains records pertaining to the review and approval process; all in compliance with requirements defined in 21 CFR Parts 50, 56 and 312
Code of Federal Regulations. This institution is in compliance with the ICH GCP as adopted by FDA/DHHS.

Thank you for your cooperation during the review process.

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45 CRF § 46.102(d): Research means a systematic investigation, including research development, testing and evaluation, designed to develop or contribute to generalizable knowledge.

45 CRF § 46.102(f): Human subject means a living individual about whom an investigator (whether professional or student) conducting research obtains:

- data through intervention or interaction with the individual, or
- identifiable private information.

**Intervention** includes both physical procedures by which data are gathered (for example, venipuncture) and manipulations of the subject or the subject's environment that are performed for research purposes.

**Interaction** includes communication or interpersonal contact between investigator and subject.

**Private information** includes information about behavior that occurs in a context in which an individual can reasonably expect that no observation or recording is taking place, and information which has been provided for specific purposes by an individual and which the individual can reasonably expect will not be made public (for example, a medical record). Private information must be individually identifiable (i.e., the identity of the subject...
is or may readily be ascertained by the investigator or associated with the information) in
order for obtaining the information to constitute research involving human subjects.

**FDA regulations** apply whenever an individual is or becomes a participant in research, either
as a recipient of a FDA-regulated product or as a control, and as directed by a research
protocol and not by medical practice. FDA-regulated activities involve individuals,
specimens, or data, as patients or healthy controls, in any of the following:
any use of a drug or biologic, other than the use of an approved drug or biologic in the course
of medical practice
any use of a device (medical or other devices, approved or investigational) to test the safety or
effectiveness of the device
any use of dietary supplements to cure, treat, or prevent a disease or bear a nutrient content
claim or other health claim
the collection of data or other results from individuals that will be submitted to, or held for
inspection by, the FDA as part of an application for a research or marketing permit (including
foods, infant formulas, food and color additives, drugs for human use, medical devices for
human use, biological products for human use, and electronic products.)
activities where specimens (of any type) from individuals, regardless of whether specimens
are identifiable, are used to test the safety or effectiveness of any device (medical or other
devices, approved or investigational) and the information is being submitted to, or held for
inspection by, the FDA.
Appendix B
Letter of Site Support

The purpose of this Site Support Letter is to document that Sue Schlembach, Principal Investigator (PI), has permission to recruit participants and conduct a research project at xxx, located at xxx.

This research project involves the study of mothers’ perspectives of young children’s play at xxx. With the director’s and participants’ permission, the PI will meet with families, staff, and volunteers; photograph and video record children’s play; and conduct interviews with mothers, staff and volunteers. The project will occur over a period of approximately 4-8 weeks.

A copy of the research project protocol has been received and reviewed by xxx, xxx Director_____________(initial here). The Director has been informed that participation in the research project is completely voluntary, participants may opt out at any time, and that any questions should be directed to Sue Schlembach, PI, via email schlemse@mail.uc.edu or phone 513-317-4948, or Victoria Carr, Co-PI at carrvw@ucmail.uc.edu phone 513-556-3805, or Rebecca Lee, Co-PI at lee2rc@ucmail.uc.edu phone 513-556-5498, or Lisa Vaughn, Co-PI at lisa.vaughn@cchmc.org phone 513-636-9424.

I, xxx, Director of xxx, give permission for Sue Schlembach, PI, to recruit participants and conduct a research project of children’s play at xxx. This permission is
valid for one year from date of signature, or until otherwise revoked in writing by Director.

Signature______________________________________Date____________.

Contact Information_______________________________________________.
Appendix C
Recruitment Flyer

Would you like to help with a research study of children’s play in shelters for mothers and children experiencing homelessness?

This research study will include:

- One 15-30 minute interview at a time/place convenient for you.
- Parents taking photographs of their child(ren)’s play.

This study is being done as part of a dissertation research project for Sue Schlembach, University of Cincinnati doctoral candidate of education studies.

For more information, or to volunteer, please contact Sue Schlembach, University of Cincinnati doctoral candidate, at 513-556-3820 or schlemse@mail.uc.edu for more information.

Thank you for your time.
Appendix D

Consent Forms
ID#____________

Parent Consent and Parental Permission for Participation in Research

University of Cincinnati

Department: Early Childhood Education and Human Development

Principal Investigator: Sue Schlembach, MA
Faculty Advisor: Victoria Carr, EdD

Title of Study: Play in the Lives of Young Children Experiencing Homelessness: An Exploratory Case Study

Introduction:
You are being asked to take part in a research study. Please read this paper carefully and ask questions about anything that you do not understand.

Who is doing this research study?
The person in charge of this research study is Sue Schlembach of the University of Cincinnati (UC) Department of Early Childhood Education and Human Development. She is being guided in this research by Victoria Carr, EdD.

What is the purpose of this research study?
The purpose of this research study is to gather information from parents, and shelter staff and volunteers, about young child(ren)’s play in homeless shelters.

Who will be in this research study?
About 1-8 adults (18 years and older) and up to 10 of their child will take part in this study. You may be in this study if you are a parent (18 years and older) with a child or children between the ages of 2-5 and you reside in a shelter for people experiencing homelessness, or you are an adult (18 years or older) shelter staff or volunteer.

What will you be asked to do in this research study, and how long will it take?
You will be asked to participate in 1-2 audio recorded interviews, to take photographs of play at the shelter using a digital camera, and to take a few minutes to write down your thoughts about what play means to you in your life and your child(ren)’s.

All participants will be interviewed once. You may be asked to participate in a second follow-up interview if needed. Interviews will take about 30 minutes each. Photographs will take a few minutes of your time. Your child(ren) will not be asked to do anything other than follow their normal daily routine. The research will take place in the shelter; interviews will take place at a time convenient for you.
ID#____________

**Are there any risks to being in this research study?** It is not expected that you and your child(ren) will be exposed to more than minimal risk by being in this research study. Minimal risk means: The risk is not expected to be more than you and your child(ren) would have in current daily life.

**Are there any benefits from being in this research study?** You and your child(ren) will probably not get any benefit from taking part in this research study. But, being in this research study may help provide information to those responsible for the care and education of young children experiencing homelessness.

**What will you get because of being in this research study?** You and your child(ren) will not be paid or be given anything to take part in the research study.

**Do you have choices about taking part in this research study?**
You have a choice whether or not your interview will be audio recorded. There is a place at the end of this paper to mark your choice.

**How will your research information be kept confidential?**
Information about you and your child(ren) will be kept private by making sure no personally identifying information is attached to any information collected about you and your child(ren). Photographs will not contain personally identifying information.

Photographs will be kept locked in a file cabinet drawer in the Co-PI’s office. All other information will be stored electronically on a password protected file only the PI and Co-PI will use. Information will be kept for three years. After that time it will be destroyed by deleting electronically stored information and shredding paper documents and photographs.

Agents of the University of Cincinnati may inspect study records for audit or quality assurance purposes.

**What are your legal rights in this research study?**
Nothing in this consent form waives any legal rights you and your child(ren) may have. This consent form also does not release the investigator, the institution, or its agents from liability for negligence.

**What if you have questions about this research study?**
If you have any questions or concerns about this research study, you should contact Sue Schlembach, PI at 513-556-3820 or schlemse@mail.uc.edu. Or, you may contact Co-PI’s: Victoria Carr at 513-556-3805 or carrvw@ucmail.uc.edu; Lisa Vaughn, at 513-636-9424 or lisa.vaughn@cchmc.org; or Rebecca Lee, at lee2rc@ucmail.uc.edu.
The UC Institutional Review Board reviews all research projects that involve human participants to be sure the rights and welfare of participants are protected.

If you have questions about your rights as a participant or complaints about the study, you may contact the UC IRB at (513) 558-5259. Or, you may call the UC Research Compliance Hotline at (800) 889-1547, or write to the IRB, 300 University Hall, ML 0567, 51 Goodman Drive, Cincinnati, OH 45221-0567, or email the IRB office at irb@ucmail.uc.edu.

Do you HAVE to take part in this research study?
No one has to be in this research study. Refusing to take part will NOT cause any penalty or loss of benefits that you would otherwise have. You and your child(ren) will not be treated any differently if you choose not to participate in this study. You may start and then change your mind and stop at any time. To stop being in the study, you should tell Sue Schlembach, PI by contacting her at 513-556-3820 or schlemse@mail.uc.edu

I give my permission to be audio recorded during my interview. Yes / No

Agreement:
I have read this information and have received answers to any questions I asked. I give my consent to participate in this research study. I also give my permission for my child(ren) to participate in this research study. I will receive a copy of this signed and dated Parent Consent and Parental Permission form to keep.

(Please Print)
Your Child's Name ____________________________ Date Of Birth (Month/Day/Year)__________

Your Child's Name ____________________________ Date Of Birth (Month/Day/Year)__________

Your Child's Name ____________________________ Date Of Birth (Month/Day/Year)__________

Your Child's Name ____________________________ Date Of Birth (Month/Day/Year)__________

Parent/Legal Guardian's Signature ____________________________ Date ______

Signature of Person Obtaining Permission ____________________________ Date ______
Adult Consent Form for Research

University of Cincinnati

Department: School of Education-Early Childhood Education and Human Development
Principal Investigator: Sue Schlembach, MA
Faculty Advisor: Victoria Carr, EdD

Title of Study: Play in the Lives of Young Children Experiencing Homelessness: An Exploratory Case Study

Introduction:
You are being asked to take part in a research study. Please read this paper carefully and ask questions about anything that you do not understand.

Who is doing this research study?
The person in charge of this research study is Sue Schlembach of the University of Cincinnati (UC) Department of Early Childhood Education and Human Development. She is being guided in this research by Victoria Carr, EdD.

What is the purpose of this research study?
The purpose of this research study is to gather information from parents and shelter staff and volunteers, about young child(ren)’s play in homeless shelters.

Who will be in this research study?
About 1-8 adults (18 years and older) and up to 10 of their child will take part in this study. You may be in this study if you are a parent (18 years and older) with a child or children between the ages of 2-5 and you reside in a shelter for people experiencing homelessness, or you are an adult (18 years or older) shelter staff or volunteer.

What will you be asked to do in this research study, and how long will it take?
You will be asked to participate in 1-2 audio recorded interviews. All participants will be interviewed once. You may be asked to participate in a second follow-up interview if needed. The research will take place in the shelter; interviews will take place at a time convenient for you and take about 30 minutes.

Are there any risks to being in this research study?
It is not expected that you will be exposed to more than minimal risk by being in this research study. Minimal risk means: The risk is not expected to be more than you would have in current daily life.
Are there any benefits from being in this research study?
You will probably not get any benefit from taking part in this research study. But, being in this research study may help provide information to those responsible for the care and education of young children experiencing homelessness.

What will you get because of being in this research study?
You will not be paid or be given anything to take part in the research study.

Do you have choices about taking part in this research study?
You have a choice whether or not your interview will be audio-video recorded. There is a place at the end of this paper to mark your choice.

How will your research information be kept confidential?
Information about you will be kept private by making sure no personal identifying information is attached to any information collected about you.

Information will be stored electronically on a password protected file only the PI and Co-PI will use. Information will be kept for three years. After that time it will be destroyed by deleting electronically stored information and shredding paper documents and photographs.

Agents of the University of Cincinnati may inspect study records for audit or quality assurance purposes.

What are your legal rights in this research study?
Nothing in this consent form waives any legal rights you may have. This consent form also does not release the investigator, the institution, or its agents from liability for negligence.

What if you have questions about this research study?
If you have any questions or concerns about this research study, you should contact Sue Schlembach, PI at 513-556-3820 or schlemse@mail.uc.edu. Or, you may contact Co-PI’s: Victoria Carr at 513-556-3805 or carrvw@ucmail.uc.edu; Lisa Vaughn, at 513-636-9424 or lisa.vaughn@cchmc.org; or Rebecca Lee, at lee2rc@ucmail.uc.edu

The UC Institutional Review Board reviews all research projects that involve human participants to be sure the rights and welfare of participants are protected.

If you have questions about your rights as a participant or complaints about the study, you may contact the UC IRB at (513) 558-5259. Or, you may call the UC Research Compliance Hotline Appendix D (cont.)

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Do you HAVE to take part in this research study?

No one has to be in this research study. Refusing to take part will NOT cause any penalty or loss of benefits that you would otherwise have. You will not be treated any differently if you choose not to participate in this study. You may start and then change your mind and stop at any time. To stop being in the study, you should tell Sue Schlembach, PI by contacting her at 513-556-3820 or schlemse@mail.uc.edu

I give my permission to be audio recorded during my interview. Yes / No

Agreement:
I have read this information and have received answers to any questions I asked. I give my consent to participate in this research study. I will receive a copy of this signed and dated consent form to keep.

Participant Name (please print) ____________________________________________

Participant Signature _____________________________________ Date _________

Signature of Person Obtaining Consent _________________________ Date _________
Appendix E

Interview Protocols
Semi-Structured Interview Protocol

University of Cincinnati

Department: School of Education - Early Childhood Education and Human Development

Principal Investigator: Sue Schlembach, MA

Faculty Advisor: Victoria Carr, EdD

Interviewer: Sue Schlembach

Interviewee:

Date: Time: Place:

Research Question: How is play perceived by mothers experiencing homelessness within the context of a residential shelter for women and children?

Greet and review with interviewee: Hello, thank you for volunteering for the interview. The interview should last approximately 15 to 30 minutes. Just a reminder that during the interview I will be taking notes as well as using an audio recorder to document this interview session. Do I have your consent to audio record this interview? Do you have any questions before we begin?

Intro Discussion: This research study is about young children’s play in homeless shelters. I am a student at the University of Cincinnati and am trying to gather information about children and families play experiences while they are residing at homeless shelters.

- *(Parent) First of all, what would you like to know about me?
- Would you please share a bit about yourself?
  - Date of Birth.
  - Age of child(ren).
  - How long here at B.H.?
  - Would you describe yourself as:
    - Af. Am., Cauc., Latino, Asian/Pacific Islander, or Other?

- Please tell me what play was like for you when you were a young child.

- Describe to me what you think about children’s play in general?

NOTE:
Since I am studying mothers and young children experiencing homelessness, for the questions that follow, please keep young children (approx. 3-5 years old) in mind when responding.

**Spaces, Materials, Activities**

At the shelter….

- Describe places where 3-5 year old children play.
  - Where do children play? What areas of building?

- Talk to me about the adults that children may play with.
  - Who typically plays with children?
  - Are they primarily parents, staff, volunteers, or others? What is this person’s primary role here at the shelter?
  - Who do they play with most frequently? (Alone, sibling(s), peers, parents, others [relationship to child] etc.)

- Tell me what you think about the areas/spaces where children play.
  - What do you think about the amount of space available?
  - What are your thoughts on the availability of the space for children’s play?

- Talk to me about what the children play with.
  - Describe the types of toys, materials etc.

- What do you think about the amount, variety, and/or condition of the items, materials available for children to play with?

- What do you notice children spending most of their time doing while playing?
  - Pretend/imaginative play?
  - Rough and tumble play?
  - Object, toy play?
  - Shared play with peers?
  - Back and forth communication with peers, adults?

- Tell me about any opportunities for children to learn and develop social and emotional skills while playing indoors here? Can you tell me about times you have seen your child playing inside the shelter with other children?
Shifting to OUTDOOR AREAS—Remember to keep in mind 3-5 year olds.

In thinking about outdoor play areas:

- What features, characteristics do you believe are important for children’s play outside?
- What do you think is important to have in an outdoor space for young children?
- What is your image of an ideal outdoor play area for young children?

- Describe the outdoor areas available at the shelter for young children’s play.
- Tell me about any opportunities for children to learn and develop social and emotional skills while playing outdoors here? Can you tell me about times you have seen your child playing outside with other children outside?

- Is there anything that you think could be changed, added, removed to make children’s play better (a more positive experience) here?

- Tell me what you think might make children’s play better here at the shelter.

Closure:
What else would you like to tell me about?

Do you have any questions/comments?

Thank you very much for your time today. I appreciated hearing your thoughts about this topic. May I have your permission to follow-up with you if I need to ask questions for clarification?
Semi-Structured Staff/Volunteer Interview Protocol

University of Cincinnati

Department: School of Education-Early Childhood Education and Human Development

Principal Investigator: Sue Schlembach, MA

Faculty Advisor: Victoria Carr, PhD

Interviewer: Sue Schlembach

Interviewee:

Date:  
Time:  
Place:

Research Question: How is play perceived by mothers experiencing homelessness within the context of a residential shelter for women and children?

Greet and review with interviewee: Hello, thank you for volunteering for the interview. The interview should last approximately 15 to 30 minutes. Just a reminder that during the interview I will be taking notes as well as using an audio recorder to document this interview session. Do I have your consent to audio record this interview? Do you have any questions before we begin?

Intro Discussion: This research study is about young children’s play in homeless shelters. During our conversation we will discuss your perceptions of children’s indoor and outdoor play at this shelter for homeless women and children.

I am a student at the University of Cincinnati and gathering information about children and families play experiences while residing at homeless shelters.

- First of all, would you tell me a bit about yourself?
  - What is your title?
  - What is your role here at the shelter?
  - How long have you worked/volunteered here?
  - Describe what you do at the shelter.
  - Ed. Level: HS/GED, Some College, 2 yr. College Degree, 4 yr. College Degree?
  - Would you describe yourself as:
    --African American, Cauc., Latino, Asian/Pacific Islander, or Other?

Indoor Spaces, Materials, Interactions

Thinking about indoor spaces at the shelter:

- Would you describe the indoor places where children play?
  - Where do children play? What areas of building?
• Tell me what you think about the indoor areas where children play.
  o What do you think about the amount of space available?

• Talk to me about what the children play with.
  o Describe the types of toys, materials etc.
  o What do you think about the amount, variety, and/or condition of the items, materials available for children to play with?

• What do you notice children spending most of their time doing while playing?
  o Pretend/imaginative play?
  o Rough and tumble play?
  o Object, toy play?
  o Shared play with peers?
  o Back and forth communication with peers, adults?

• Who do children play with? Tell me about the children, adults they may play with.
  o Who do they play with most frequently? (Alone, sibling(s), peers, parents, others [relationship to child] etc.)

• What adults interact/play with children (parents, staff, volunteers, others)? What is their role here at the shelter?
  o About how often (how many times per day, per week; for how long a period each time) do you interact with the children in the indoor play spaces here? Outdoor spaces?

Outdoor Spaces, Materials, Interactions

In thinking about outdoor play areas:

• Describe any outdoor areas available for play at the shelter.
• Tell me what you think about the outdoor areas where children play.
  o What do you think about the amount of space available?

• Talk to me about what the children play with--
  o Describe the types of equipment, materials etc.

• What do you think about the amount, variety, and/or condition of the grounds, equipment, & materials available for children to play with?
PLAY AND HOMELESSNESS

- About how often is the outdoor place space used? (Weather permitting: Daily, Weekly? etc.)

- What do you notice children spending most of their time doing while playing outdoors?
  - Pretend/imaginative play?
  - Rough and tumble play?
  - Object, toy play?
  - Shared play with peers?
  - Back and forth communication with peers, adults?
  - Playing alone?

- Who do children play with? Tell me about the children, adults they may play with.
  - Who do they play with most frequently? (Alone, sibling(s), peers, parents, others [relationship to child] etc.)

- What adults interact/play with children (parents, staff, volunteers, others)? What is their role here at the shelter?

**Play in General**

- Describe to me what you think about children’s play in general?

- Tell me about your thoughts on children’s play here at the shelter compared to the play of children not experiencing homelessness.

- What are your perspectives on the benefits of the play spaces here at the shelter for children?
  - How does play at the shelter benefit the children—in what ways is it beneficial for them?

- Talk about any barriers you perceive that may limit/restrict children and families’ play experiences here.

- What opportunities do you believe are available for children to learn and develop cognitive, physical, social and emotional skills during play here? (Few; Many?)
  - Examples?

**Thoughts for Change**

- Is there anything you think could be changed, added, or removed etc. to make children’s play better (a more positive experience) here? Any thoughts on what may be needed to improve children’s play experiences?
  - Tell me what you think might help enhance children’s play here at the shelter.
Closure:
What else would you like to tell me about?

Do you have any questions/comments?

Thank you very much for your time today. I appreciated hearing your thoughts about this topic. May I have your permission to follow-up with you if I need to ask questions for clarification?
Appendix F

Photo Elicitation Guide

Date:
Interviewer: Sue Schlembach
Interviewees:
Prompts:
1). Look at each photo and discuss what you see in the picture.
2). What does the photo mean to you? What does it mean for your child(ren)?

Playroom
Appendix F (cont.)

Playground
Appendix G

Play Observation Guide

University of Cincinnati

Department: School of Education-Early Childhood Education and Human Development

Principal Investigator: Sue Schlembach, MA

Faculty Advisor: Victoria Carr, EdD

Play in the Lives of Young Children Experiencing Homelessness: An Exploratory Case Study

Observer: Sue Schlembach

Date: Time: Place:

Weather:

CONTEXT/SETTING—
1). Location in regards to the building/facility:
   Basement, main floor, upstairs/downstairs, next to building?
   Multi-purpose room (serves as playroom and also has other uses), or is a single purpose room (used as play room only)?

2). Child appropriate furniture, materials, supplies, equipment:
   Items for various age/developmental levels?
   Child size furniture play equipment?

3). Manipulatives:
   Creative, imaginative play, literacy, math, language?

4). Symbolic Play Materials:

5). Natural affordances:
   Variety and accessability--Plant life, topography, water, loose parts?

6). Appearance:
   Floor, toys, equipment, furniture, walls, windows, supplies, grounds, fencing, gates?

7). Level of wear of materials, supplies, equipment--maintanence:
Heavy, moderate, light?

8). Aesthetics:

Paint, wall decorations, window dressing, floor covering, children’s art work displayed; fencing, gates, structures?

9). Primary focus of the area:
Physical exercise, creativity, imagination, exploring and engaging with nature/natural affordances?

**General Play Observations—**
What are children doing?

Who are they playing with?

What are they playing with?

Language/Communication?

**Categories of Play:**
Exploratory
Relational
Functional
Symbolic

**Types of Play:**
Play Gross-motor
Small-motor
Rules-based
Mastery
Construction
Symbolic
Make-Believe
Rough-Tumble
Risk-Taking

NOTES:
### Appendix H

#### Data Accounting Log

Sue Schlembach  
Play in the Lives of Young Children Experiencing Homelessness: An Exploratory Case Study  
IRB # 2014-7678  
Spring-Summer 2015

<table>
<thead>
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<th>Data Types</th>
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<tr>
<td>Interview</td>
<td>4/15/15 In-person 25 mins.</td>
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<tr>
<td>Observation &amp; Field Notes</td>
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<td>Video Documentation</td>
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<td>Photo Elicitation</td>
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<td>Transcripts</td>
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## PLAY AND HOMELESSNESS

### Participants-Mothers

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<td>Initial Interview</td>
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<td>Transcripts</td>
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