People Who Live Unsheltered: The Role of Trust In the Bond Component Of Their Working Alliances

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People Who Live Unsheltered:  
The Role of Trust in the Bond Component of  
Their Working Alliances  

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Abstract

An estimated 240,000 individuals are unsheltered, sleeping on the street, under abandoned buildings, in ditches and fields, and other locations in communities each night. Using semi-structured interviews, I sought to understand the nature of the working alliances of people living unsheltered and the role of trust in the bond component of those working alliances. Findings highlight that people who live unsheltered engage in alliances with either strangers or acquaintances to complete a simple task, which often results in the attainment of a basic item or assistance. In some but not all alliances trust plays a role. Trust alliances involve vulnerability and expectations of no ill-will. Yet in some instances, alliances can be formed with negative expectations.
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Chapter 1

Background and overview of study

Nearly 600,000 people in the United States go into the night without a permanent, safe residence (National Alliance to End Homelessness, 2014, “Frequently Asked Questions,” para. 2). People might sleep in shelters, but a growing number of individuals, about 240,000 of all people who are homeless, remain unsheltered on any given night. Despite an increase in the availability of shelters, the number of people living unsheltered has increased; and acceptance of services that are offered has continued to decrease over the past ten years (HUD, 2013; Burt, Aron, Lee, & Valente, 2001; Padgett, Struening, & Andrews, 1990). Recently, national advocacy groups have directed their research agendas towards this subpopulation because it is growing. (Homeless Research Institute, 2014).

People who live unsheltered are at a higher risk for victimization and trauma than any other group of people who are homeless, including those who live in shelters. Simply becoming homeless increases the likelihood that a person will experience victimization and trauma (Garland, Richards, & Cooney, 2010), and living unsheltered magnifies those experiences. In most cases, a person who becomes homeless is safer if he spends the night in a shelter. The distinction between people who are living sheltered or unsheltered is most significant in their experiences with victimization and trauma. Compared to others who
are homeless, people who live unsheltered are at the highest risk of attack, illness, and death (Levitt, Culhane, DeGenova, O’Quinn, & Bainbridge, 2009). Once living unsheltered becomes chronic, many individuals experience premature death resulting from undiagnosed and/or untreated health conditions (Morrison, 2009). Women in this situation are five times more likely to be physically assaulted, and three times more likely to be raped than women living in shelters are (Nyamathi, Leake, Keenan, & Gelberg, 2000). Violence and acute medical emergencies result in mortality rates averaging nine times higher than the general population (O’Connell, 2005). In contrast to the experiences of living unsheltered, housing is associated with lower rates of sexual assault among women (Kushel, Evans, Perry, Robertson, & Moss, 2003). This high risk of exposure to adverse events as a result of living unsheltered sets this group apart from others who are homeless and live in shelters. Their experiences are not well studied, nor has an explanation for why they tend to remain outside been given.

As a sub-group, within the larger group labeled “homeless,” these individuals who live unsheltered are excluded from most studies (Bonin, Fournier, & Blais, 2007; Kushel, Vittinghoff, & Hass, 2001; Padgett, et al, 1990; Stein, Andersen, & Gelberg, 2007). On JSTOR alone, over the past 15 years, there have been 439 studies with people who are homeless and only 3 studies with people who live unsheltered published. However, people who are homeless and living unsheltered are a frequent concern of social workers. Our primary intervention is to bring people inside, but in many instances people living unsheltered refuse
housing even when it is offered. Explanations involving trust and working alliances are offered for this refusal. In the sparse literature on people who live unsheltered a common assumption is that they do not trust, and therefore attempts at working alliances fail (Kryda & Compton, 2009). In the prolific literature on working alliances it is posited that trust is necessary for the working alliance to succeed, and that the lack of development of trust will probably lead to the disengagement of the working alliance (Horvath, 1994). As such, the phenomenon of trust and the process of the working alliance have been linked. Yet, in doing so the practice of social work on the street with people living unsheltered has become steeped in the misconception that lack of trust equals lack of alliance.

While this link between trust and alliance has been proposed by scholars as well as practitioners for years, it is only through empirical studies that researchers and consumers of research can more fully understand how trust and working alliances intersect in the lives of people who live unsheltered. To redress this gap I conducted a qualitative study with two aims: (1) to investigate the nature of the working alliance in a non-traditional setting with people who live unsheltered, and (2) to investigate the role of trust in the bond component of those working alliances. I suggest that people who live unsheltered do with great frequency engage with others in working alliances. Hence, the ultimate goal of my study is to break the cycle of misunderstanding around the role of trust in working alliances of people who live unsheltered.

The working alliance I refer to was first conceptualized as the special role of the relationship between the therapist and the patient (Freud, 1912).
working alliance, also called the therapeutic relationship, the client and the therapist align with one another to work on goals agreed upon by both. Mid-20th century versions of the working alliance focused on the positive transference from patient to therapist, which may predict a successful alliance (Greenson, 1965). More recently, the concept of the working alliance has been thought of as a common part of all therapeutic relationships (Bordin, 1975; Luborsky, 1976).

A positive outcome of a working alliance for a person living unsheltered is simply the outcome from the alliance that the unsheltered person expected or hoped would happen. By definition, if a working alliance happens there was a positive outcome, namely the goal attainment. In achieving this outcome, the unsheltered individual has engaged with another person, stated a need (goal), and the two have agreed upon what needs to be done (task) to get what he needs. Along with this goal setting and task assigning is a mutual bond between the two people. This triad experience of goal, task, and bond that leads to a positive outcome for the person living unsheltered has been analyzed qualitatively to explore what is going on when things actually go according to plan and the positive outcome occurs.

The reliance on working alliances between case managers and people living unsheltered to achieve goals is not new. Specifically, informal and interpersonal interactions with case managers, such as eating meals together, going to clothing banks, and going to appointments are shown to be actions that build alliances with people who are homeless. Those case manager to client interactions have been shown to improve the treatment outcomes for some people who are
homeless (Goering, Wasylenki, Lindsay, Lemire & Rhodes, 1997). This is supported by theoretical assumptions (Kanter, 1989; Goering & Stylianos, 1988; Wasylenki, 1992) and empirical evidence (Gehrs & Goering, 1994; Solomon & Draine, 1995).

In contrast to those case manager to client alliances that are typically the ones studied, I focused on the alliances of people who live unsheltered and another person, not necessarily a case manager or other professional helper. Specifically, this study focused on the participants’ perspectives of what occurs during an alliance with any person to achieve any goal desired by them. I assumed that many of the alliances formed by people who live unsheltered may contain the basic components of the working alliance we depend on as professional helpers, including the development of a mutual bond. This study is novel in that it takes a process generally understood to happen between a professional and a client, but this study considers the same process between people who are living unsheltered and another person, not necessarily a case manager or other professional helper. I took this approach because I hypothesized people living unsheltered actually do, with regularity, engage in working alliances with others, but because they are not likely to involve a case manager or a social worker, these alliances have been overlooked. By acknowledging the less formal engagements and alliances of people who live unsheltered, I believe I have uncovered a new way of viewing how that group manages their lives. By doing so, this study may provide new opportunities for research to better understand this vulnerable group.
Introduction to the concept

In this study, the working alliance is conceptualized as being formed to achieve any goal deemed worthy by the participant. For example, many participants in this study talked about a time when they engaged with another person to get food or clothing or assistance going to the bathroom. While social workers are often concerned with longer term and loftier goals, such as permanent housing or dependable income, this study has highlighted those goals that may seem small to us. I chose this approach because I wanted to document any experience that the participant chose as a time when he\(^1\) worked with another person to get what he wanted. I particularly wanted to focus on the alliances that are proportionally more important, perhaps due to the immediacy of the need, to a person living unsheltered than to a professional like me who wants to place them in housing. I believe this approach has given several results that highlight the nature of working alliances on the street, which we can use to improve our future professional interactions with this group.

The problem

Social workers rely on research demonstrating that trust is important in the working alliances; so important, in fact, that the absence of trust prevents individuals, such as people who are living unsheltered, from accepting help from helping professionals (Kline, 1993; Swayze, 1992). Yet, this claim has been

\(^{1}\) I will use the pronoun “he” to refer to all genders.
made before we understand the phenomenon of the working alliances of unsheltered people, and specifically the role of trust in the bonds created as part of their working alliances.

My question brings the focus squarely on the person living unsheltered. I interviewed people who agreed to talk about engagements and collaborations that are successful. The current claim that unsheltered people do not trust and therefore they do not work with us has been made without closer consideration of the positive outcome working alliances some unsheltered people have had. A positive outcome alliance is an alliance ending in the attainment of the goal from the perspective of the interview participant. In other words, the goal is the one desired by the person I am interviewing.

Term definitions

In this study, I have defined the following terms:

**Working Alliance:** The working alliance is defined as a combination of three components. These three parts are (a) the two people agree on the goal, (b) the two people agree on the task to achieve that goal, and (c) there is a development of a personal bond between the two people (Bordin, 1979). For this study, these working alliances include those with any other person with whom the participant recalls being involved in a mutually agreed upon goal-driven task.

**Trust:** “Trust is a psychological state comprising the intention to accept vulnerability based upon positive expectations of the intentions of another” (Rousseau, Sitkin, Burt, & Camerer, 1998, p. 395). From the viewpoint of the truster, there is a willingness to be vulnerable coupled with an expectation that no ill-will will
come from the trusted. This definition integrates two main points. First, some willingness to be vulnerable to harm is necessary to trusting another person; second, that trust is propelled by one’s expectations that another will prove trustworthy in current interactions (Tomlinson & Mayer, 2009).

**Unsheltered:** Living unsheltered is when a person spends his day and night in public or private places not meant for human habitation (HUD, 2013). This includes, but is not limited to, sidewalks, benches, on the ground, under bridges, in the woods, behind or in dumpsters, fields, porches of vacant houses, and on the banks of streams or rivers.

**Research question and analytic strategy**

The question guiding this research is:

What is the role of trust in the working alliance bond between a person who is living unsheltered and another individual?

To learn about the role of trust in these bonds, I have collected data through interviews with people who are living unsheltered and have analyzed their recollections of working alliances. My analysis plan was a grounded theory approach (Charmaz, 2000; Strauss & Corbin, 1990). I used the constant comparative method. My analytic strategy involved inductive reasoning: deriving general principles by extending what is observed for a specific case to other cases of the same class (Aneshensel, 2002). I used coding to categorize or classify my data. My goal was to learn about the role of trust in the bond that forms between two people, from one person’s point of view. I suspected trust is involved, and in some way explains the success of the working alliance, but this
was only a conjecture and a grounded theory approach has allowed me to ex-
plore rather than confirm.
Chapter 2

Literature Review

Historical background of living unsheltered

For many centuries, people living unsheltered, how they got there and what to do with them, have been the topic of debate. Experiencing wildly different responses from both homeless and housed people, people living unsheltered have been viewed in myriad ways, from being seen as holy wanderers to being held in contempt as criminals. People living unsheltered have been segregated to Main Stems and Skid Rows or placed on the outskirts of major cities in Hoovervilles. They have been single men with intermittent work, older men with disabilities, or families with small children. More recently, runaway teenagers are a growing group seen living unsheltered. Commonalities among people living unsheltered are extreme poverty, lack of attachment to family, and resistance to offers of help (Baum & Burnes, 1993; Donely & Wright, 2012).

From England during the Middle Ages to the location of this study, the descriptions of individuals living unsheltered have been strikingly the same. For instance, in preindustrial England, people who were referred to as “floating populations” (Lofland, 1973, p.40) were impoverished and unattached to any other social group. More recent accounts of people living unsheltered include descriptions of extreme poverty, disaffiliation with others, and survival strategies rooted
in crime (Hagan & McCarthy, 1998). The story of people living unsheltered in extreme poverty without social support has been consistent over time.

**Idealization or contempt**

Late in the Middle Ages, most people living unsheltered in England were idealized and offered charity and hospitality (Cohen & Sokolovsky, 1981). Christians followed the creed of Saint Francis that claimed all beggars were holy and that the holy should live as beggars (Beier, 1985). This idealization of the unsheltered as holy ceased around the 14th century when religious views along with social views changed. For instance, Franciscan ideals were discredited as hypocritical because the order was becoming rich, and people in the Renaissance sought personal success (Beier, 1985). Around the same time, the Black Death became a severe pandemic. In response to concerns about the spread of illness, an effort to control the movement of people resulted in the first vagrancy statute (Chambliss, 1964). These types of laws continue to control or restrict the freedom of movement for people living unsheltered.

Public and private attitudes towards people living unsheltered continued along a less than charitable path. After the Black Death of 1348, it became illegal to give assistance to able-bodied beggars who refused to work, including people who were living unsheltered (Foote, 1956). Unsheltered people were punished severely, especially during the time leading up to the 1400s when they were perceived as dangerous criminals (Chambliss, 1964). During the next hundred years in England, the population nearly doubled, and homelessness grew as well (Beier, 1985). Punishment for being vagrant in the 1500s was branding;
a 1572 statute required all vagabonds to be “grievously shipped and burned through the gristle of the right ear with a hot iron an inch in diameter” (Beier, 1985, p. 159). The Slavery Act of 1547 placed people without homes in slavery, and the Vagrancy Act of 1597 sent this group to the colonies.

While some working poor who scrape by and provided a roof for themselves have been respected, those who cannot afford a roof have been viewed with suspiciousness. In The Communist Manifesto, Marx differentiates between the working poor and the tramp. He refers to the tramp as the *lumpenproletariat*, social outcasts who will not participate in the revolution, but may undermine the working class by siding with the police (Marx, K. & Engles, F., 1848/1948). Much earlier, Martin Luther (1528/1860) edited and promoted the publication of the work “Expertus in Truffis” (Expert in Roguery), a confessional of a vagrant to expose the secrets of his underworld, so that “men may see and understand how mightily the devil rules in this world” (p. 3). These derisive attitudes took hold and continued later in America.

**Considered a bad risk**

Two systems that originated in the Elizabethan Poor Laws in England were quickly put in place to deal with people who were unsheltered and poor in colonial America. One required a person to show legal residency before he or she could receive food or shelter from community support. This was nearly impossible for new immigrants who as a result quickly became homeless. Another required a person to petition communities for settlements rights. Again, new immigrants were often denied support from communities who viewed them as “bad
risks” (Snow & Anderson, 1992, p. 12). As a result, a new kind of transient poor emerged, who moved from community to community unable to qualify for relief because they had no residence and were unable to get a residence because they were considered too risky to become involved with.

The philosophy beneath the English Settlement Act was another factor that contributed to the growth of people who live unsheltered. People who were poor and needed assistance faced strict eligibility rules that restricted poor relief to people who owned property or had lived in the same location for a number of years (Chapin, 2014). As a result, people without connections to a specific location were denied assistance. Two other ways existed for people without connections to a specific location to receive help. One was the workhouse, or house of correction, because it was where people who were poor and broke the law were sent. The other was the almshouse, where people with a disability preventing them from working would be sent. If a person owned no property, avoided crime, and remained sane, he had little choice when faced with poverty than to live unsheltered and wander. For nearly two centuries, people living in the U.S. struggled with homelessness and it was not until the mid-1800s that the first shelters and soup kitchens were opened (Hirsch, 1989).

After the Civil War, the number of people who were homeless increased (Caton, 1990). Many former slaves were displaced and America had an increase in immigration during that time. Both groups became a part of a mobile workforce, and became labeled the American hobo. These unsheltered individuals rode trains across the country, working industrial and agricultural jobs during part
of the year and returning to large cities to wait out the jobless months. This
group of people moved into parts of cities known as Main Stems or Hobohemia
(Snow & Anderson, 1992). One example was Chicago’s Main Stem in the early
1920s where it is estimated that nearly a half a million transient workers passed
through in the course of a year (Anderson, 1923). The Main Stems were home
to mostly men who worked and paid for rooms when they could afford them, but
lived outside otherwise. They were often vilified. Several newspaper articles
from Chicago and New York show how the media viewed this people who lived
unsheltered. One paper advised readers to put poison in the food they gave to a
tramp, to not only kill him, but to warn others to stay out of their cities (Allsop,
1967). In spite of those types of comments, the hobo of the Main Stem was
mainly self-supporting and spent brief parts of the year homeless.

**Disabled men and families**

Following the Great Depression, two groups emerged that may be la-
beled as living unsheltered. One was an older, more disabled group of men who
lived on skid row, the name given to these areas of towns where men primarily
dependent on charity lived. Another was homeless families and single children
on the road. Hoovervilles were roadside encampments used by families who had
lost their mid-west farms and were traveling west. Jails were also used as over-
night shelters. For the first time, children were documented as being homeless.
A 1932 nationwide U.S. Children’s Bureau study documented over 200,000
homeless children (Minehan, 1934).
In 1933, the federal government implemented the first government efforts to address homelessness. The Federal Transient Bureau paid cities for shelter and meal costs of non-locals at tent camps (Hoch & Slayton, 1989). This help was temporary and there was more money put into moving people along. Local governments discouraged people who were living unsheltered from staying in their towns and cities. In New York State, as much money was spent on transporting non-local people living in tent cities out of the state as was spent supporting services for local people who faced homelessness (Crouse, 1986).

During World War II, most men who had been living unsheltered were recruited by the armed forces and Skid Rows nearly disappeared (Wallace, 1965). Following the war, the population of people living unsheltered did not increase, because the federal government provided assistance to many veterans. The few people who were attracted to Skid Rows following the war differed from the employable, able-bodied men of the 1930s; they were older, often disabled, and unskilled laborers (Wallace, 1965). Although this new version of Skid Row was smaller, it still served a function desired by government and law officials, by segregating the unsheltered homeless from the rest of the community. Skid Rows continued to decline throughout the 1960s with an increase in welfare benefits and other entitlements, an increase in urban renewal and gentrification, and a decrease in the labor exchange previously supplied by Skid Row residents (Hoch & Slayton, 1989; Snow & Anderson, 1992).

In the 1980s, many people who were living unsheltered and homeless lived in neighborhoods and in business districts, literally under the noses of
housed people. As a result, the public perception of people who were homeless changed. For the first time, people became interested in who this group was; studies from the 1980s by researchers in the social sciences have been carried out in nearly every community throughout the country. The majority of these studies contain data on demographics and disabilities of the homeless. Most of what we know about people who are homeless fails to differentiate between those living in shelters and those living unsheltered. This is a limitation because these studies supply a narrow view of the problems faced by people who are homeless by limiting their studies to sheltered people. The little we know about unsheltered people shows us that they live a more dangerous life as a result of being unsheltered. Another limitation of the studies from the 1980s is the focus on demographics and disabilities, rather than telling us about actual life on the streets. These studies have advanced our understanding of the demographics and disabilities, which may help plan services for this group, but they deflect attention from questions needed to develop an understanding of the nature of the lives of people living unsheltered. They have generated “experience distant” rather than “experience near” constructions and understanding (Geertz, 1983, p. 57).

Explanations of why people remain homeless and unsheltered

Structural explanations

There are structural explanations of why people become homeless, which include the effects of rising poverty rates and shrinking availability of sustainable and affordable housing (Wolch & Dear, 1993). In the past 30 years,
more people have moved into service-oriented jobs with limited benefits and a reduction in income-earning abilities (McChesney, 1990). With this decrease in pay has come an increase in dependence on public assistance, which has seen significant restructuring during the same time. This restructuring has resulted in reductions in income and services and restrictions on eligibility requirements for all people in need of help with food, shelter, and clothing. At the same time, policies from the past have had a long-term impact on individuals who are barely making it. One of the most lasting and significant has been deinstitutionalization where mental health institutions closed and moved people into communities for less restrictive settings (Torrey, 1988). This has resulted in an increase in the number of people with mental illness needing low-cost housing. Those and other people who live on limited incomes and need sustainable and affordable housing increasingly compete for housing. This type of housing has been declining in number and quality, forcing many on the streets (Shinn & Gillespie, 1994).

**Individual deficit explanations**

While many structural barriers to shelter are recognized as contributing to homelessness, there are many who assert that individual deficits contribute to a person's inability to maintain stable housing. Multiple studies attribute homelessness to mental disability, substance misuse, criminal history, spousal abuse, family instability, and/or veteran status (Caton, Shrout, Eagle, & Opler, 1994; Drake, Osher, & Wallach, 1991; Gelberg, Linn, & Leake, 1988; Hartz, Banys, & Hall, 1994; Robertson, 1991; Susser, Lin, Conover, & Struening, 1991; Taylor, Elliott, & Kearns, 1988; Weitzman, 1992; Wood, Valdez, Hayashi, & Shen, 1990).
In reality, any person who is homeless might experience multiple structural and individual barriers. Structural barriers exacerbate the individual ones and vice versa, resulting in uncertainty to which came first, or which actually causes a person to be homeless.

Aside from the potential to contribute to a person becoming homeless, both structural and individual deficit barrier explanations omit any empirical distinctions between the condition of being sheltered or unsheltered. It is well established that living unsheltered, as opposed to being homeless and living sheltered, increases a person’s exposure to adverse events that include assault (Levitt, et al., 2009). Without regard for the glaring differences in exposure to adverse events between these two groups (e.g., sheltered homeless and unsheltered homeless), it is unlikely the results of these studies can be generalized to all people who are homeless. In addition, these studies either implicate external barriers like poverty or job loss, or internal barriers like illness, yet fail to consider the interactions between other barriers that must have some impact on how or why a person becomes homeless.

**Remaining unsheltered: Lack of insight into danger or mistrust of outreach workers**

Many people who are homeless refuse offers of help, especially when those offers of help include shelter that is dependent on a psychiatric diagnosis (Koegel, Sullivan, Bumam, Morton, & Wensel, 1999; Rosenheck & Lam, 1997). Outreach workers, case managers, and clinicians are quick to blame this refusal
on lack of insight into the dangers of living outside, which may come from symp-
toms of a mental illness or substance misuse, or an apparent willingness to sabo-
tage offers of help (Baum & Burnes, 1993).

Recently, other explanations have emerged that challenge the individual
deficit explanation, or the idea that mental illness or substance misuse interferes
with a person’s acceptance of shelter. Rather, individuals may refuse services
because of a pervasive mistrust of outreach workers and the agencies that em-
ploy them, as well as a lack of confidence in available services (Kryda & Com-
pton, 2009). Similar themes of mistrust and prior negative experiences were prev-
alent in a more recent study that asked why homeless individuals chose to live in
camps in the woods rather than accept shelter nearby (Donely & Wright, 2012).

These studies leave several questions unanswered and make assump-
tions about the role of trust in the process of working alliances. First, the claims
that people living unsheltered do not trust outreach workers (Kryda & Compton,
2009) begs the question, "When do they trust helpers?" and obviates the possi-
bility of learning from relationships that unsheltered people do establish. Second,
the conclusion that negative experiences lead to avoidance of shelter (Donely &
Wright, 2012) implies that people who do accept shelter have not have any nega-
tive experiences. Several studies document assault, robbery, and other serious
negative experiences from those living in shelters (Donely & Wright, 2012; Far-
rell, 2010). Therefore, the avoidance of negative experiences cannot be the only
reason for people to remain outside, since this is something those who live out-
side have in common with people who live inside.
**Illness or something else?**

The most enduring and common explanation for why people remain unsheltered focuses on the individual’s diagnosis of a serious and persistent mental illness (Caton, Shrout, Eagle & Opler, 1994; Drake, Osher & Wallach, 1991; Gelberg, Linn & Leake, 1988). Mental illness is often accompanied by delusional thinking, in which a person's reality is not congruent with the world around him or her. When this occurs, it is difficult to convince the individual that moving inside is safer.

In a study to explore more deeply what actually goes on when people with mental illness refuse shelter, Lurhmann (2008) found that those who refused services did so publicly and on the pretense or claim that they were not crazy. Deriving an explanation of her findings from social capital theory, Lurhmann (2008) views their refusal as “‘costly signal’ acts that might be thought harmful from a purely materialist or individualist perspective but in fact accrue what social theorists call ‘symbolic’ or ‘social capital’” (p. 19). What appears to be a refusal of diagnosis-dependent housing is actually a rational decision-making process that ultimately benefits the individual. Although the act of refusing seems costly, the acceptance of diagnosis-dependent housing would send a message to others that, yes, “I have a mental illness,” and that would cost more symbolically than the refusal of housing would cost them physically. Lurhmann (2008) concludes that the “signal asserts competence and strength in a social setting in which those attributes are highly valued” (p. 19).
While Lurhmann’s (2008) results and conclusion as to why some people continue to refuse shelter may be useful, her study is limited because it applies only to women with a suspected serious and persistent mental illness. There are more people living unsheltered without mental illness who continue to refuse services than there are people living unsheltered with mental illness. By recent counts, less than thirty percent of all unsheltered individuals have a mental illness (Homeless Research Institute, 2013). Therefore, a more complete view of the phenomenon of living unsheltered is necessary to make claims about why people remain unsheltered.

**Remaining unsheltered: Extremely high exposure to adverse events**

Another major part of our understanding of the experience of living unsheltered is that the exposure to adverse events is extremely high. People who live unsheltered are at a higher risk of attack, illness, and death than others who are homeless but live inside (Levitt, Culhane, DeGenova, O’Quinn, & Bainbridge, 2009; Nyamathi, Leake, Keenan, & Gelberg, 2000; O’Connell, 2005). In spite of these dangers nearly one-third of people who are homeless remain outside even when shelter is available immediately (HUD, 2013).

As a result, it is possible that part of the process of forming a working alliance is different for people living unsheltered, because they experience high levels of exposure to adverse events, which may have an impact on their capabilities to engage in a working alliance. Their exposure to adverse events may lead to trauma responses that may have an impact on a person’s capacity to trust. If a person’s capacity to trust is affected, the capabilities one has to engage in a
working alliance may change. An understanding of the role of trust as a process in the working alliances people living unsheltered choose to have may reveal something new to us about the way to engage them in working alliances that could lead to shelter. In the following section, my understanding of how trust is defined and described by others is explored.

**Trust**

Trust often is assumed to be necessary for human relationships to flourish. Plato (Grube, 360 BCE/1992), in the *Republic*, writes rather indirectly about the issue of trust, preferring to discuss a version of friendship and cooperation that ought to exist between the elite and their underlings. The common good, a win-win situation, is experienced through cooperation. For this cooperation to persist, there is an expectation that the average citizen will trust in the philosopher kings to rule wisely and in the citizens' best interests, while the elite are expected to trust their underlings not to poison their wine or destroy their libraries.

Again showing how people have acknowledged that trust is essential for cooperation, and hence a peaceful society with mutual benefit, several books of the Talmud deal with how to create and maintain just and honest social conventions. For example, *Bava Metzia* chapters 1-5 discuss a trustee who takes care of the property of another person. In Modern Hebrew, the terms for interpersonal trust are *neamanut* (i.e., faithfulness, loyalty, reliability) and *aminut* (i.e., credibility). In contrast to the framework where trust involves two or more people, Saint Thomas Aquinas called for people to put their trust, via faith, in God. One is strongly encouraged to trust in God and not in mortal benefactors (Psalms 115;
Jeremiah writes cursed is the person who puts his trust in human beings rather than in God (Jeremiah 17:5, English Standard Version).

This concept of trust as a form of cooperation, in which both the trustee and the truster benefit when cooperation is achieved, came back into favor recently. For example, Bok (1978) places trust central to the kind of interactions between people who are working to accomplish what matters to both or all of them. “Whatever matters to human beings, trust is the atmosphere in which it thrives” (p. 31).

While there are multiple definitions of trust, the one that may be of most utility for this study is this one: “Trust is a psychological state comprising the intention to accept vulnerability based upon positive expectations of the intentions of another” (Rousseau, Sitkin, Burt, & Camerer, 1998, p. 395). This definition integrates two main points. First, some willingness to be vulnerable to the will of another person is necessary to trusting another person. If there were no chance of ill-will, then trust would not be necessary (Gambetetta, 1988). Within the helper/client context on the street, there is almost always a degree of risk of ill-will for the client. While the client may receive help that is beneficial (e.g., food or water, referrals to shelter, healthcare), he might also encounter undesirable consequences by engaging in conversation with another person (e.g., involuntary hospital admission, identification as a “patient,” arrest by officers).

The second point in the above definition is that trust is propelled by one’s expectations that another will prove trustworthy in future interactions (Tomlinson
& Mayer, 2009). Again, looking to the helper/client context, the client may expect that the helper can be trusted not to interfere or otherwise disrupt his well-being. In this sense, the client views the helper as trustworthy. This trustworthiness is based on thinking that the helper has the ability (e.g., wisdom, knowledge, skill, expertise), benevolence (e.g., loyalty, caring, honesty, selflessness), and integrity (e.g., morality ethicality, credibility, consistency) characteristic of a beneficial exchange (Mayer & Davis, 1999; Mayer, Davis, & Schoorman, 1995). Consistent with this view, recent interpretation of findings from a study with people who refuse help from outreach workers suggest that refusals come from a pervasive mistrust of the worker’s intentions, abilities, and selflessness (Kryda & Compton, 2009). Therefore, a client’s evaluation of a helper’s ability, benevolence and integrity are cited as reasons for refusing help. When the evaluation is poor, then trust is weak. The role of trust in refusal of help may be that there is little or no trust at all. Trauma is a factor that may add to the complicated nature of how trust plays out in working relationships, such as the ones described above. Undoubtedly, people who live unsheltered are exposed to adverse events that could lead to a traumatic response more often than any other group who is homeless.

**Trauma**

Trauma is an emotional response to a distressingly serious event, like accidents, rape, crime, homelessness, or natural disasters. Symptoms commonly found in some victims of these extreme stressors are grouped to form the diagnosis of post-traumatic stress disorder (PTSD) (American Psychological Association, 2013). PTSD is linked to poor mental functioning, substance abuse,
and physical health problems (Zinzow, Grubaugh, Monnier, Suffoletta-Maierie, & Fruch, 2007). Common symptoms among victims of a traumatic event include persistent re-experiencing of the event through recollections, dreams, or dissociative states; a numbing of general responsiveness, and persistent symptoms of arousal, such as irritability, angry outbursts, hyper vigilance, and sleep disturbances (APA, 2013).

Trauma responses, such as PTSD, are common in people who are homeless. They are part of the experience of being unsheltered. Multiple studies suggest people who are homeless have high lifetime incidences of physical and sexual assault (Kim & Ford, 2006; Kim, Ford, Howard, & Bradford, 2010; Kushel, Evans, Perry, Robertson, & Moss, 2003; Stremac & Paradis, 2001). Furthermore, being homeless increases the likelihood that a person will experience victimization and trauma (Garland, Richards, & Cooney, 2010). Nearly all women who are homeless reported past exposure to potential trauma (Tsai, Rosenheck, Decker, Desai, & Harpaz-Rotem, 2012). The potential trauma experiences included having been robbed, their life threatened, sexually assaulted, and physically assaulted (Tsai, et al., 2012). Exposure to sexual trauma is not very different between men and women who are homeless (62% for women compared to 53% for men) (Kim & Ford, 2006). Other studies suggest that a stressful life event, such as becoming homeless, introduces psychological consequences that may lead to trauma (Dohrenwend & Dohrenwend, 1974; Goodman, Sax, & Harvey, 1991; Rivlin, 1986).
Trauma and trust

Research that explores the neuroendocrinological underpinnings of trust propensity suggests how trauma and trust propensity are related. The neuropeptide oxytocin plays a role in shaping a person’s trust propensity. Oxytocin is believed to diminish the fear response common when we are in close proximity with others (Zak, Kruzban & Matzner, 2004). When oxytocin is administered to study participants playing a trust game for real stakes, the results show that oxytocin doses led to greater trust in one’s trust partner (Kosfeld, Heinrichs, Zak, Fischbacher, & Fehr, 2005). Interestingly, safe environments bolster the effects of oxytocin, while stressful, unsafe environments can diminish the effects of oxytocin (Zak, Kruzban & Matzner, 2004). While I do not propose to test my participant’s blood for oxytocin levels, these results are intriguing because they may support my claim that the situation of homelessness, with its high rates of trauma, has an impact on a person’s capacity to trust.

In summary, key points from the literature are that people have been living unsheltered for a very long time and there may be structural and individual factors that contribute to that phenomenon of living outside. Yet, though there has been a great deal of research on homelessness, there is a significant gap in the literature that suggests that what we have relied on to explain the phenomenon of being unsheltered and what we have relied on to change it is not adequate. The role of trust during times when people seek or accept help is not fully understood.
Chapter 3

Methodology

This research study was an exploratory, qualitative study using constructivist grounded theory methods, which included the constant comparative method of data analysis (Boeije, 2002; Charmaz, 2006).

There is a major gap in the literature regarding the experiences of people who live unsheltered and how they view their circumstances. Most of the research with people who are homeless relies on survey or brief interviews with homeless service providers, or with people who are homeless and living inside. While such data have their value, they provide very little information on the experiences of people who live unsheltered. Specifically, there is a need for basic information about conditions in which people who live unsheltered engage in working alliances, because working alliances are a critical foundation for social work practice, and social workers are greatly concerned with the problems related to homelessness.

In addition to the need for research on the experiences and observations of people who live unsheltered, no extant studies examine the effect of trust on working alliances among people who live unsheltered and no specific theories exist to suggest how or why they decide to engage with other people. Qualitative methods such as grounded theory allow for theory to emerge from the analysis of
the data collected directly (Strauss & Corbin, 1998). In this study I used interviews to collect the responses of people who live unsheltered and to examine the role of trust in the bond component of their working alliances. I sought to answer the following research question: What is the role of trust in the working alliance bond between a person who is living unsheltered and another individual?

**Sampling and study design**

**Sample characteristics and selection criteria**

In the winter of 2014 and spring of 2015 I conducted in-depth interviews with 15 adults who reported living unsheltered. The sample included four black females, seven black males, and four white males. The ages ranged from 18 to 68 years old.

My goal was to find people living unsheltered who have had an interaction with another person that resulted in the interview participant getting what he or she needed or wanted. Inclusion criteria included the following: living unsheltered for at least 1 month; having engaged in a mutual agreement with another person (in the recent past while living unsheltered) where another helped the interview participant; age 18 years or older, and having the ability and agreeing to give verbal consent to participate in the research. The participant’s capacity to give informed consent was based on a communication of understanding of the study’s risks and benefits and the voluntary nature of the study. All participants were provided with information verbally about the research, including the goal of the study, how long the interview would likely take, and what I planned to do with their information. I answered any questions and addressed any concerns. Their
participation was voluntary and they could decline participation, stop participation at any time, or decline to answer any particular questions. There would be no negative consequences for them in doing. All participants were compensated with $20 for their participation. Two participants refused to take the money at first, and then decide at the end of the interview to take the money. I informed participants that I am a social worker and graduate student completing a research project, and that I wanted to record an interview to use in my study. The Institutional Review Board at the University of South Carolina approved this study and determined I should not collect signed consent forms, but rather get a verbal consent and maintain the anonymity of the participants.

Recordings of the interviews did not include the participants’ names. The transcripts of the recordings were de-identified with the use of a code and cannot be matched to the participants’ names. I did not write down the names of the participants. I have assigned pseudonyms to the participants.

Preceding the interview and recording, I asked each potential participant a few questions to see if he was a person with an experience of working with another person to fulfill a need and if he would be willing to talk about that experience. I asked him if he had been living unsheltered and for the duration of that time. I asked him about interactions and looked for responses that suggested the potential participant has interacted with another in a way that was mutual, not coerced (e.g., neither the person I am interviewing nor the other person engaged in the alliance did so without full volition to do so), had a goal, and had an outcome that was favorable to the potential participant.
Recruitment strategy

Recruitment for this sample of people living unsheltered involved walking or riding my bicycle through the streets of downtown in designated blocks of the Downtown District between the Green River to South Meadow Road and from Mill Street to Hillview Boulevard. I looked for potential participants during the day on my bicycle or on foot and looked for adults who appeared homeless. Initially, I identified potential participants based on their clothing and/or bags. If clothing was in layers and a person was carrying luggage or backpacks, but did not look like a college student, I went to him and ask him if he minded me sitting down and talking to him. After a few seconds of identifying myself, I would ask the person if he had been sleeping outside and if so, if he would talk to me for my research project. I carried a backpack containing my audio recorder, a notebook, and wallet with money to give to the people who agreed to participate.

In my work as an outreach social worker I have interviewed hundreds of people who live unsheltered and have demonstrated an ability to engage people exposed to adverse events on and off the streets. During this research, I presented myself in a non-threatening and non-judgemental manner and interacted with people who live unsheltered with respect for their personal space. I wore casual, modest clothes, flat shoes, and walked with my bicycle at my side. I began talking to the person when I was about 20 steps away from him to let him tell me “no” before I was very close and already in his personal space. If a person said to leave them alone, I did not pursue him any further. If the person said “okay” or made eye-contact, I walked closer, but stopped before I got close
enough for them to touch me or vice versa. I left this extra space between us because I have learned that some people on the street are unpredictable and can begin swinging their arms or canes at very little provocation. I also respect that a person is vulnerable to anyone talking to them at any time, and I do not want to assume a person will want contact, so I give him every opportunity to gesture or verbally say he does not want me to bother him.

The interview participants were offered the $20 cash immediately after I determined they met the interview criteria and if they agreed participate in the interview. I made it explicit that the interview participant could take the money and end the interview at any time. I offered food to all participants and provided meals to 4 during the interview.

In the initial planning stages of this research, I had planned to interview several people whom I have known for years as people who live unsheltered, but those people declined to participate in this study. I had also planned to seek referrals from sources that have a great deal of information about people who are living unsheltered and resisting going to shelters. Referral sources may have included: the police, public safety downtown, other people who are homeless, emergency room social workers, business owners, city council, and shelter outreach workers. In only one instance did I receive a referral; a participant referred his friend who agreed to participate. Otherwise, I found willing interview participants just by walking around and asking people if I could talk to them.

The limitation of recruiting only through walking around and asking people to talk to me was that I could have missed the people living unsheltered who
are involved in more formal working alliances than the ones reported in this study. I also missed people who avoid the main corridor of downtown. More reclusive people may have had a very different experience with engaging and aligning with others for help. If I had used professional references, such as soup kitchen case managers, shelter outreach workers, or public safety officers, I may have collected data on working alliances between those individuals and the unsheltered person. In contrast, this study involved participants relating working alliance experience that were informal between them and a passerby or other people who are homeless. By recruiting people who were outside, I may have biased my sample with those individuals who spend less time engaged in formal helping relationships and more time in less formal ones. For example, many people who live unsheltered engage with food or clothing pantry workers to get basic necessities met. I might have interviewed people who described working alliances of those types. Instead, most of the people I interviewed described very informal interactions, which may have been the result of my sample being weighted with people who rarely use supportive services like food or clothing assistance.

**Data collection**

The following data were collected: face-to-face interviews, photographs of 12 participants, basic demographic information, field notes, memos on field notes, and memos on analysis of interviews. I asked questions to understand the role of trust in successful working alliances, with specific focus on the bond component of those alliances.
For the purposes of this study, trust involves two concepts including 1) the will to be vulnerable to another person for the purpose of working together, and 2) the expectation of no ill-will from the other person involved. The complete interview guide is found in Appendix 1. Below are the two topics around which the interview questions were organized:

Topic 1: What is the story of a successful working alliance?

My objective in exploring this topic was to get the participant to describe or relate a story of his experience when he forms an alliance. Within this story I probed to explore the concept of volition to vulnerability in the role of trust.

Topic 2: What matters to you most in these interactions?

My objective in discussing this topic was to get the participant to expand his story with details about what he expected or hoped for in the interaction alliance. In this discussion I listened for and explored the concept of expectations of no ill-will.

The interviews were all audio-recorded. Interviews 1-11 were transcribed completely by a hired transcriptionist and organized within Atlas.ti software. Interviews 12-15 were transcribed partially by me and organized using Atlas.ti software. Memos, field notes, and tables were organized in Microsoft Office. From the beginning of my data collection and analysis I followed a constant comparative analysis that varied in the following way. Initially, I had my interviews fully transcribed, and then realized that as I waited for my transcriptionist to return my interview files, I spent time listening to the interviews and copying down select passages and phrases on my own. By the time I received the full transcription, I
had spent many hours with the raw data doing the constant comparative method. It made sense to me at that point that I stop getting my interviews transcribed by someone else and continue the listening, copying steps to code and categorize the data. This is a change in the methods I described in my dissertation proposal, but it is not a complete change from how I approached each interview from start to finish.

**Interviews**

Once a potential participant was identified by me as I walked or biked through downtown, I walked up to the person and explained that I am a social worker and a graduate student and that I wanted to ask him a few questions for a research study. I confirmed the inclusion criteria, answered any questions, and discussed where we could comfortably complete the interview. I asked if I could photograph the person before beginning the interview. Often, we sat in a public spot on a wall or bench to begin the interview. Several interviews took place while the person was eating something I had purchased for him before the interview. I asked everyone I interviewed if they were hungry and those who answered yes received food from me. I provided 4 meals, which the participants ate during the interview. I completed thirteen interviews outside and two interviews in the public library at a community table. The outside locations resulted in multiple interruptions, mostly from other people who were homeless at the time and who wanted to know what I was doing and if they could get involved. Most
of these interruptions were brief. After a request for privacy from either the interview participant or me, the person who interrupted would step away and give us time alone.

I conducted individual, face-to-face interviews with interview participants. I completed one interview per participant. Data was collected through semi-structured audio-recorded interviews with four women and eleven men who met the selection criteria and agreed to participate. I began with a general question to confirm that the person was living unsheltered and was willing and able to give consent. Then I asked him to tell me about the type of interactions he has with another that leads to a positive outcome for the participant. In the first few minutes of the interview, I used open-ended interviewing to obtain the points of view of participants (Gilgun, 1994). I let the participant control what he wanted to say after I initially let him know that I wanted him to tell me about an interaction with another where the outcome was positive for the participant.

Later, I guided the interview process to learn about the role of trust in that process, from the participant’s point of view. I asked him if he felt vulnerable, or if he had been willing to feel vulnerable, in order to get what he wanted. I also asked whether he went into the interaction with an expectation that the other person would do no harm.

The interview guide was not a rigid script of questions, but instead a starting point with prompts for discussion. The prompts focused on the two major characteristics of trust, including the willingness to be vulnerable and the expec-
tation of no ill-will from the other person. The interview contained general questions, each with a list of follow-up questions. For instance, I began with the “big picture” question, providing participants with the opportunity to talk about their experience of getting something they need or want with the help of another person. The follow-up questions asked more specifics regarding items that were mentioned in response to the “big picture” question to help the participant give more information into specific areas. Follow-up questions were asked when the participant did not address the topic of trust during his or her initial responses.

This method of data collection helped “prevent the interviewer from collecting superfluous or irrelevant information and avoids overlooking important questions” (Goodman, 2001, p. 312). I asked questions to learn how the participant personally views the role of trust with respect to his interaction with another who helps them to get what they want.

**Basic demographic information**

During the interviews, I asked questions and/or made visual observations to determine several demographic and other individual characteristic. Immediately following the interviews, I documented the following information about the person: location where person was first met, physical description, age, race, gender, and other (e.g., whether I detected any substance use, mental or physical illness, how long the person had been outside, and if they were known to me prior to the interview).
Field notes and memos

Immediately after the interviews, I wrote field notes to reflect on my reactions to the interview and to immediately document the setting and interview participant characteristics that helped me later in my analysis to recall details about the interview. For example, I wrote notes about the appearance of the person if it was unusual or distracting. One participant had about eighty percent of his face covered in open sores. He talked about how difficult it was for him to engage with others who were offended by his skin. In my notes, I reflected on my deep feelings of compassion for him. His skin condition is complicated by his delusions about putting antibiotic cream on his skin (he believes it will contaminate him), so I noted those observations and the accompanying emotions elicited by him. Other times I wrote notes about the brief interactions the participant had with people who walked by during the interview. The interactions demonstrated the interconnectedness people who live unsheltered have with other pedestrians. While those interactions are not the focus of this study, I noted them and their content for future use in a study to expand on the types of engagements people who live outside make. Later during analysis, I memoed on the field notes and used my dissertation preparation meetings with my dissertation chair to discuss these memos. Through field note taking and memoing, I kept an audit trail of my research (Lincoln and Guba, 1985), hence increasing the transparency of my study. In addition, this additional note taking and memoing allowed me to document themes and to track emerging theoretical reflections, and linkages among interviews.
Data analysis

The purpose of this study was to explore the bond component of the working alliances of people who live unsheltered. To do this, I collected data through semi-structured in-depth interviews with people who live outside. Following a process of grounded theory methodology (GTM); the analysis began with listening to the audio-recorded interviews 3 times in their entirety; continued with open-coding; followed by axial coding; and finally, selective coding designated the core components of the theory. As is required of GTM analysis, I used the constant comparative method (CCM) throughout the analysis process (Boeije, 2002).

Throughout the analysis process, I kept field notes using Microsoft Word, which included the impressions I had of the interview process immediately following the interview, the theoretical impressions, as well as planned next steps. In addition, I met regularly with my dissertation chair and less frequently with my full committee to discuss my experiences during the interview process, and to get feedback about my theoretical impressions.

Grounded theory

The study was designed to be qualitative and for my data collection and analysis process to be reflexive (Bryant & Charmaz, 2007; Patton, 2002). Transcripts were transferred to the qualitative analysis software ATLAS.ti (version 1.0.5) and a constant comparative method (Boeije, 2002) was conducted based on grounded theory process (Glaser & Strauss, 1967; Strauss, 1987; Glaser,
This included creating quotes and codes for all interviews looking for conceptual similarities and differences and predominate and relevant themes. The codes were then synthesized and grouped and analyzed in order to answer my predefined research questions.

**Grounding categories**

Grounded theory in this type of study is intended to elicit the personal reflections of individuals, because it allows theory to be built directly from data collected in vivo (Strauss & Cobin, 1998). This is accomplished via grounded theory methodologies that involve the process of the grounding of categories in the data from which the categories emerge (Dey, 2007). Categories, derived from codes, developed from the first contact with the first interview participant and continued to develop and evolve through the analysis process. For instance, after the first and second interview, I recognized that both interview participants mentioned that they wait until desperation sets in before accepting offers of engagement with another to get what they desperately need (e.g. food or assistance to the bathroom). Therefore, through memoing and listening to the recordings, and reading the transcripts, I noted a potential category. Initial categories were derived from actual interview words and phrases. This is a strategy described as open coding (Glaser and Strauss, 1967).

**Constant Comparisons**

**Listening**

I listened to the first interview 3 times in its entirety to denote details about the interviewee’s experience with the working alliance. I wrote memos and
kept lists of phrases or words that seemed to relate to the working alliance, especially anything that had to do with the bond component. I repeated this step following each time I completed an interview. For example, I listened to interview 2 after I recorded it, and interview 3 after I recorded it, all the way through interview 15. If I collected 2 or more interviews in the same day, I would devote one day to each interview before collecting more. After I listened to interview 1 and 2, I would return to interview one to listen for any word or phrase that reminded me of interview 2. I conducted this listening process with the newest interview first, then going back to previous interviews and taking notes on what each of them had in common. I worked through all 15 interviews with this process, often listening to multiple interviews back to back. If I heard the same theme in multiple interviews, I noted which ones were similar and listened to them over again, noting whether the similarities existed. Simultaneously with this listening process, I conducted the Open and Axial coding, which is described in detail next.

**Open coding**

During and following the open coding process, I constantly compared coded categories with each other and with data that had yet to be analyzed, established boundaries of categories, assigned segments to categories, summarized the content of each category, and looked for negative evidence (Tesch, 1990). The analysis involved two activities, namely *fragmenting* and *connecting* (Dey, 1993). The first emphasized any separate themes that emerged from each interview and focused on the individual ordering process that was relevant to my research question (Boeije, 2002). The second activity emphasized the context
and richness of the data as the interview parts were interpreted as a whole and the pieces of one interview were connected (Siveind, 1999). These two activities, namely fragmenting and connecting, were repeated throughout the analysis, which was organized by two repeated steps. The first was the comparison within a single interview and second was the comparison between interviews within the sample.

Within these two steps, the comparisons made differed on four criteria, namely 1) description of the setting; 2) aim; 3) the questions asked; 4) the results (Boeije, 2002). For example, the comparison within a single interview involved open coding, summarizing the core interview, and finding consensus on my interpretation of the fragments. During this step, the aim was to develop categories and understanding of what was going on. I asked several questions, namely “What was the core message of the interview?”, “How were the different fragments related?”, “Was the interview consistent?”, “Were there contradictions?”, “What did fragments with the same code have in common?”

Of the fifteen interviews, I paid for the first eleven to be professionally transcribed. I did not send the last four to her deciding instead to apply the following process to them: After 2-3 listens of the entire interview, I played the interview on my computer with a Word document open. I listened to the interview and paused the audio or re-listened to the audio and transcribed the word or phrase in the word document. I repeated this process though the entire interview multiple times before moving on to the next interview. I followed this process for 2-3 listens, and directly transcribed to my word document before either going back to
a previous interview or moving on to the next one. I had followed this process with the first eleven interviews, even though I had a fully transcribed document to work from. In those documents, I would highlight, cut, and paste the word or phrases I assigned a code.

I conducted a line-by-line analysis (i.e., open coding) with all 15 interviews to identify emergent concepts and categories. Every passage of the interview was heard to determine exactly what was being said and to label most passages with an adequate code. I applied a four-step analysis that included a description, an aim, questions, and results. During the description process, I transcribed parts of the interviews and noted an appropriate code for the concept within the transcribed part. The aim step involved developing categories and labeling them with the most appropriate codes. In this step, the core message of the interview was formulated with codes. Any inconsistencies and highlights were discussed during meetings with my dissertation chair. During this process, general conceptual categories and some very broad generalizations emerged. Simultaneously with the open coding, I constantly compared coded categories with each other and with data that I listened to as soon as a new interview was collected. The third step involved raising questions about which codes would be used to label categories. In the final step, the results included a summary of each interview, and a list of provisional codes. I have 155 codes from opening coding. Table 1 illustrates this process of open coding.
**Table 3.1** Illustration of Open Coding for Concepts

<table>
<thead>
<tr>
<th>Text ID</th>
<th>Interview Statement</th>
<th>Line-by-line code</th>
</tr>
</thead>
</table>
| #1      | *Sometime they might say no,* not expecting help *sometime they might say yeah.*  
          *Sometime they curse you out and*  
          *Tell you to get from around them* | |
| #5      | *Well, I was, well I would like to* expecting help *expect from them to try to help me*  
          *as much as they can and do whatever*  
          *they can to the best of their ability* | |
| #6      | it’s something that I can’t really trust is a feeling: vibe  
          explain. You can’t see it, you can’t touch it, you can’t smell it, but you can feel it. You just, you just, it just something that you just know. | |
Axial coding

After open coding, I realized many of those codes could be grouped under more abstract or higher concepts (Strauss & Cobin, 1967). This process of reducing codes to subcategories, known as axial coding, was the next step in the analysis. Using Boeije’s (2002) constant comparative method, I continued the internal comparison in the context of axial coding to develop more concepts. During this step, the aim was to conceptualize the subject of multiple interviews and to produce a typology. I asked several questions, namely “Is A talking about the same as B?, What did both interviews reveal about the bonding process in the working alliance?”, “What combinations of codes convey similar meaning?”, “What interpretations existed for clusters of codes?”, “What were the similarities and differences between interviews A, B, and C…?” These questions led to the identification of core categories.

During the process of constant comparative method analysis, I read and re-read each interview passage transcript, applying the method to each interview. The purpose of this was to discover how many interviewees shared those themes as well as to find any non-confirming cases.

Selective coding

I began selective coding, after I completed the axial coding, focusing on the conceptual connections among central themes in the research question. These included the constructs in trust: the will to be vulnerable and the expectation of no ill-will. I documented this process with new analysis memos containing
a conceptual diagram to note relationships between central themes. When a relationship was detected, I continued the constant comparative method to determine which cases contained the hypothesized relationship. This resulted in several underlying similarities or a uniformity in the categories, which developed into a set of higher-level concepts (Holton, 2007). Those concepts contributed to several boundaries of an emerging theory. Included in the description of each concept is the number of interviews in which the theme was found.

This study contained one specific research question with two main constructs of trust as the underlying concepts to be explored. The overall findings are summarized in the theoretical model of the role of trust in the bond component of the working alliance.

**Role of the researcher**

**Researcher-participant relationship**

During this study, I introduced myself to participants as a social worker and graduate student interested in people who live outside. When I met the potential interview participant, I approached him respectfully and tried not to invade his space. After years of working on the street attempting to engage similar individuals, I learned that the streets are essentially the person’s living space and to be respectful requires the mindset that you are walking into someone’s living room or bedroom unannounced or uninvited. Following the interview participant’s acknowledgment that I could come close enough to talk to him, I explained the study, asked for verbal consent, and then allowed time for him to ask any questions.
Reseacher bias

I began this study after having worked as a social worker with my group of interest for more than 17 years. I recognize that this experience has been beneficial to my study in terms of developing rapport with my participants, as well as ensuring my knowledge of how to keep myself safe on the streets, but I also recognize it could have introduced bias into the study. To ensure that this bias is not damaging to my study, I have written memos in order to capture my own thoughts about the research process.

In recognition that my extensive practice experience might bias my interpretation of my data, I conducted the research in the role of learner during the data collection and analysis process. By doing this, I looked to the interview participant as the expert regarding the interview responses. I held the view that the participants are experts about their own lives and I did not doubt the descriptions of their realities. This approach increased the chance that the data reflects the personal views of the participants. I asked questions to clarify and to establish that I am not the person with the most knowledge about the topic. During the interviews, I did not push for answers regarding inconsistencies in responses or contradictions between statements. My role was not as a case manager or social worker. My role was not to question or change how the participants live, but to understand what conditions explain or predict when a person living unsheltered engages in a working alliance.
Professional background

I have a master’s degree in social work and have practiced social work with people who live unsheltered for 17 years prior to conducting this study. For the past 6 years, I have been working on my doctorate in social work. I received my undergraduate education from a private women’s college, my master's degree from a private Jesuit university and my doctorate degree will come from a public university. I have studied and practiced social work in the mid-western and southern United States.

Trustworthiness of study

Trustworthiness of the results in this qualitative study will be described in the sections that follow. I will address the following constructs:

a) credibility (in preference to internal validity);

b) transferability (in preference to external validity/generalizability);

c) dependability (in preference to reliability) (Guba, 1981).

Credibility

Credibility is a measure of how truthful the findings are from a qualitative study. Credibility deals with the question, “How congruent are the findings with reality?” (Merriam, 1998). A study has high credibility when the findings are presented in a way that others who share the experience would quickly and easily recognize the findings as true to their own experiences (Strauss & Cobin, 1998). Credibility was achieved in the following ways:

a) the adoption of research methods well established in qualitative investigation.

I developed my interview questions to collect data and designed the study using
data analysis methods that were similar to those used in comparable projects.

More specifically, I read several dissertations from others who interviewed people who are homeless and used their style of open-ended questions. I received feedback from my dissertation committee regarding how to conduct semi-structure interviews, and I learned from other research articles how ask questions in a non-leading way. I read books on ethnography, which helped me to understand the importance of the environment and how interviewing participants outside might lead to interruptions and distractions.

b) the development of an early familiarity with the culture of participants before the first data collection takes place. This is a process of prolonged exposure with participants and with the research itself (Lincoln & Guba, 1985). This is achieved by preliminary visits to places where the research will happen in order for the researcher and the participants to establish a relationship of trust (Shenton, 2004). While I did not meet with my participants before I interviewed them, before I conducted this study I worked for 17 years with other people who live unsheltered. More recently, I have spent five years reading and synthesizing the literature on homeless, working alliance, and trust. The work experience and the years studying the concepts result in me being very comfortable in the setting where these interviews were conducted and with the engagement process required to collect data.

As a result of this prolonged exposure with a similar group and with the research itself, I could assume these experiences contribute to the trustworthiness
of my analysis by increasing my familiarity with the culture of the participants before the interviews took place. Following that line of thinking, I could assert that my familiarity with others resembling my participants gives me an advantage of knowing this group better than most and therefore being able to understand them better than someone who has less experience than I have. For example, later in this dissertation I assert that people who live unsheltered are active in their engagement with other people when they need something; I frame this as being a strength of people who live unsheltered and highlight that this strength needs to be recognized and called upon if we are to help people in this group. My familiarity with this group and my analysis of the data from this study have led me to assert this claim. If this is actually what is going on and not a strong bias resulting from previous experiences, then the credibility of my study is reasonably high. On the other hand, my previous work experiences with people who live unsheltered could deter from the trustworthiness of my analysis. Following that line of thinking, I could expect my familiarity with others resembling my participants creates a strong bias or fixed way of thinking about them that clouds my understanding of my data, which may limit my ability to see new information available only in the interviews I collected in this study. The nature of my biases would most likely involve me over-estimating the capabilities of people who live unsheltered. I have a tendency at being overly optimistic. I often chose to see the glass half full. While this outlook has given me the tenacity and stamina to work for years with this group who frequently “fail” according to most people, I realize this is my bias, which may not always be accurate. The effect of my over-estimating the
capabilities could result in me over-emphasizing the capabilities of my participants to make working alliances.

c) tactics to help ensure honesty in participants when contributing data. In particular, each person who was approached was given the opportunities to refuse to participate in the research (Shenton, 2004). Partly, this insured that only participants who were genuinely willing to take part did so. I encouraged participants to be honest about their experiences, and to build rapport; I indicated that there are no right answers to the questions that I wanted to ask. I told participants that I am a graduate student and not affiliated with any social service or government agency, so participants would talk about their experiences with fear of offending or speaking badly of any agency who might be helping them. I made it clear that participants could stop the interview and still keep the money provided to them before the interview started.

d) frequent debriefing sessions between my dissertation chairperson and me, and occasionally with my full committee. I used these sessions to discuss alternative approaches. Many times flaws in my assumptions, including where I may have overlooked interesting or relevant data and jumped to conclusions too quickly, were pointed out. These sessions changed the way I viewed my data and had a positive effect on my subsequent interviews by giving me a more critical stance. As a result, I noticed that I became more comfortable with the unexpected responses and was better at pursuing data from responses that initially would not have seemed relevant. Once for example, my chair and I were listening to an interview where the female participant responded to a question about
who she could trust and who she could not. She indicated that men could not be trusted and began to indicate why. In the recording, it is obvious that I tensed up, and interrupted her. In the debriefing session, I realized that I did so because I did not want to hear about any assault the woman had experienced. I wanted to learn about trust, not about assault. This was an act of self-protection from a story I have heard too many times where a woman on the streets is raped or beaten multiple times a week by strangers or people she knows, but by avoiding the content, I may have missed important data concerning the role of trust in this participant’s engagement. Following this type of debriefing, I learned to wait and listen, even if my reflex was to interrupt.

e) peer scrutiny of the research project. I met often with several social workers in practice with people who are homeless, I also met with another doctoral student to receive feedback on my ideas and assumptions about my data. These meetings were mostly social, which helped me to see my data and the research process, which could be isolative at times, as accessible and interesting to other important people in my life. I gained from the frank criticism of my peers.

f) examination of previous research findings to assess the degree to which the study’s results are congruent with those of past studies. I spent nearly a year reading and writing my literature review and my conceptual framework chapters of my study proposal. Throughout the time I planned this study and collected data, I related my findings to the existing studies. There was limited research in the same setting as my study, yet I was able to learn about comparable issues
from other articles. In a study about people who live in tent communities in Florida, I learned that many people are willing to participate in surveys and interviews, but refuse to engage formal working alliances to leave their tents and move into permanent housing. This study encouraged me to pursue data collection from a group that mostly refuses to participate when approached by a case manager. Since this experience was the first time I had attempted to engage with people living unsheltered in the role of researcher, I had worries over whether they would refuse to engage with me as they had so many times before when I was a social worker. The Florida paper helped me feel confident and to remain optimistic. Similar to the experiences of the researchers in the Florida paper, my participants were as willing to help me conduct my study. This shows that my study and my experience as a researcher were congruent with those of past studies.

Transferability

External validity is concerned with the extent to which the findings of one study can be applied to other situations (Merriam, 1998). I spent a relatively brief period of time with a few people who live unsheltered, so the extent that I can apply my findings to other situations is limited. However, I focused the time I spent with my participants on questions about the role of trust when they engage in working alliances, so the data I collected is rich with details about that experience. Still, my study has a very small number of participants, which prevents me from being able to apply the findings to a wider population. My study findings are specific to the fifteen participants outside in a small southern city. I believe that
generalizability is not possible as all the data and observations I collected are defined by the specific context in which they occurred. I do believe that there are similar contexts with similar groups of people living unsheltered, and I have tried to provide sufficient information about where my research took place, so that others might make transferability inferences. Others may work in small, developing cities and find similarities with my study. They may transfer some of my findings to their work with people living unsheltered. Specifically what constitutes the nature and extent of the background and contextual data has been highlighted the work of Cole and Gardner (1979), Marchionini and Teague (1987), and Pitts (1994). I have provided the information on the following issues recommended by those authors:

a) any restrictions in the type of people who contributed data. Others have intentionally excluded people who appeared to have a mental illness or who seemed under the influence of drugs or alcohol. I included anyone who could understand what their participation would involve and who could give verbal consent. I restricted my sample by age, and whether they lived unsheltered for at least a month. Otherwise, I interviewed anyone who agreed to participate.

b) the number of participants involved in the study. I had a sample size of fifteen.

c) the data collection methods employed. In this methods section, I have described the methods I used to conduct this study and to analysis my data.

d) the number and length of the data collection sessions. I conducted one interview that ranged from 20 to 45 minutes with each participant.
e) *the time period over which the data was collected.* I collected data from the winter of 2014 to the spring of 2015.

**Dependability**

When facing the issue of reliability, a researcher uses measures to show that, if the research were repeated, in the same context, with the same methods and the same participants, similar results would be obtained (Shenton, 2004). In qualitative research, dependability is addressed through an attempt on my part to make it possible for another person to repeat the study, if not to gain the same results. I have done this by including in this dissertation the following:

a) *the research design and its implementation, describing what was planned and done.* In the proposal that preceded this study, I described the study plan and then updated that plan in this final dissertation.

b) *the operational detail of data gathering.* I have discussed in detail what I did to collect data.
Chapter 4

Results and Analysis

“Trust and me, well trust to me is like a bond, like your word, like what you just said or what we just did just now, that’s trust.”

23 year old man living unsheltered, quoted after he and I had lunch together

Living unsheltered, the nature of working alliances, and the role of trust

Findings from this study suggest that people who live unsheltered engage in working alliances. Participants described working alliances with friends, acquaintances, or strangers. Only one mentioned a person who could be described as a formal helper. All of the working alliances described in this study involve simple tasks that result in the attainment of basic needs or assistance.

Trust involving both the volition of the participant to be vulnerable and to expect no ill-will from the other person was indicated by over half of participants. The remainder of the participants either talked explicitly about their willingness to put themselves in a vulnerable position by seeking help from another person, or they did not speak explicitly about making the decision.

With respect to the expectation of no ill-will, some participants talked about expecting a positive outcome. These responses might suggest that when those participants decided to engage in a working alliance, trust was involved. In contrast, other participants talked about their experiences with working alliances
where expectations were less optimistic. They expected to be cussed out and refused help. Even those participants sought a working alliance, yet did so with the expectation that the outcome might result in insult or disappointment. These results suggest that working alliances can happen with or without the presence of trust as I have conceived it in this study. They also suggest that sometimes the working alliances involve the volition to be vulnerable and an expectation of no ill-will. First, I will present descriptive results of the sample as a group of people living unsheltered. Next, I will present results that describe the nature of the working alliances formed by participants. Then, I will present the last section of results about the role of trust in the working alliance described by the participants. That last section contains four parts: a) evidence of volition to be vulnerable, b) evidence of expectation of no ill-will, c) evidence of expectation of ill-will, and d) results from participants who spoke explicitly about trust.

Living unsheltered

The housing status of all participants in this study fits the current definition of living unsheltered. Participants reported living unsheltered from 2 months (the youngest participant) up to 5 years (the oldest participant). Participants spent their days and nights in public or private places not meant for human habitation. This included sidewalks, benches, and in the woods. All participants were interviewed in the location where I found them or very close by in a restaurant, park, or semi-private place.

Participants ranged in age from 18 to 68 years old. I interviewed 4 black females, seven black males, and four white males.
Nature of working alliances

The fifteen participants described a time when they worked with another person to get what they (the participant) needed. Not one of the people I approached to interview had difficulty recalling a recent experience of working with another person to get what he needed. Only two people I approached refused to talk to me. Of the entire fifteen who agreed to participate, two people described emotional discomfort, such as sadness, over the necessity of engaging in working alliances. Fourteen alliances involved the participant engaging with a stranger or an acquaintance. One involved engagement with a person identified as a helper. She was described by the participant as a person who comes to the park every week to “help us.” All fifteen working alliances involved simple tasks, such as lifting and helping go to the bathroom, or exchanging milk for money to then use to get cigarettes, and all resulted in the attainment of a basic item or assistance. From these findings, it is possible to say the nature of working alliances with people who live unsheltered is different from ones in more traditional settings such as clinics, shelters, and inpatient settings. Rather than involving working on solutions to problems involved in treatment goals, working alliances on the street are about fulfilling an immediate need or goal.

Negative feelings or emotional discomfort to engagement

While every participant was able to recall a recent time when he had engaged and worked with another person to get something he needed, not everyone had the same emotional response to needing to do so. Most participants described actively deciding with whom and when to engage, and did not comment
on how it felt to ask for help. In contrast to the majority, two expressed being overwhelmed or sad about the experience. In the following excerpts, two participants describe their experience of negative emotional response to asking for help.

Donna is a 55 year old black woman in a wheel chair. She said she has “two bad knees” and is waiting on surgery. I have seen her sitting in her chair on the corner of a main intersection downtown for over three months. I expected her to have a strong body odor when I approached her for the first time during this interview, but to my surprise she was as clean as a person living inside with regular access to a bathroom. The working alliance she described involves her getting the help of any person who walks past her to assist her to go to the bathroom. This involves lifting her from the chair, helping her pull down her pants, and then holding up a sheet to cover her while she relieves herself in the dirt near her chair. Donna described the experience of asking for help as being “the most formidable thing” she faces while living outside. She cried as she responded to my questions about how she decides who to ask. She replied that she “just asks everyone” and sometimes has to ask for “seven or eight hours” before anyone agrees to help her. She told me that the biggest issue for her is keeping her dignity and keeping clean. She said for the most part she feels safe when asking people for help, but she said she “always has to tell the men that she is not going to have sex with them.”

Chris, a 50 year old white male I met in the county library, has a very different experience from Donna when he engages and works with another person.
He described a time when he approached a person for work; he “rakes yards to make a few bucks here and there.” After only a few minutes into the interview, Chris informed me that he is “retarded.” His experience is similar to Donna’s in that he feels emotional about being in the position to have to ask for help. Out of all the participants, Chris and Donna may be the most “disabled”; Donna cannot lift herself out of her chair and Chris has a cognitive impairment that seems to make it more difficult for him to engage with others. The interview process with Chris was difficult to complete because he had a hard time understanding my questions. He tried very hard to answer them, but often gave short, non-specific responses that did not address the question.

Similar to Donna’s assertions that asking for the help of another person is “formidable,” Chris explains his similar difficulties in this except: “I have trouble communicating with people. It’s been a little rough experience. To me it feels like it’s kinda sad.” When asked if engaging with another person is something feels comfortable doing or if he only does so when he has to, he responds, “something I have to do.” He says engaging with another person is never his first choice and if he did not have to do so, he would avoid it.

**Relationship type**

In contrast to what might be considered more traditional working alliances like the kind between a professional helper and client or patient, nearly all participants described working alliances not involving a professional helper. Fourteen participants described working alliances that involved strangers, friends, or acquaintances met via another person. One participant described a
working alliance with a woman described as a helper. In the following section, I divide the findings among relationship type going from strangers, to friends, to acquaintances.

Strangers prior to working alliance:

Phillip is a young black man I spotted on weekday walking near the middle of the business district. He was wearing a jacket about 3 sizes too large for him. His arms were inside the jacket and the sleeves were swinging loosely by his side. He immediately engaged with me and was very enthusiastic about spending time helping me. In his interview he talked to me about always looking for people to engage and how frequently he felt overwhelmed by having to work all day long at getting other to help him, saying, “sometimes I wanna just dog-gone ball up and just go away somewhere, but it’s like I can’t, I gotta stay strong.” Phillip immediately agreed to let me interview him. It was cold outside and lunch time, so I offered to buy him some food. As we were sitting in a small hamburger restaurant, he saw his foster brother pass by and we asked him to join us. I interviewed Phillip first and then Patrick. Both said they had been “out on the streets nearly 3 months,” and were having no luck getting into shelters or finding work. Both ate 2 lunches and asked for something to take with them.

As an aside, one of the most surprising findings, which these two participants exemplify best, is the rate of hunger when you live outside. Even as an experienced outreach worker, I suspected people ate at least once a day, but nearly all participants in this study admitted to eating one meal about every two to three days.
Perhaps not surprisingly, Phillip talked about the engagement and alliances he forms with other people to either get money for food or to get food. It is interesting to note that the time we spent together completing my interview could be seen as a typical working alliance for Phillip, as our time together reflected a nature similar to the one he describes. He was open to engaging with me, a stranger, and he was open to whatever I had to offer, which is similar to how he describes his experiences with others.

First, I asked him how he decides to engage with other person. To that question, he responds, “well first, I don’t just run up to them and walks them over or whatever, I’m, excuse me sir, hey, how you doing, you having a good day, and all this and that. I start a conversation first to make them feel good. I, I’m not gonna hurt you or something.” That passage describes Phillip’s engagement with a stranger in a way that may be less startling, yet still allows Phillip to initiate the engagement. Phillip uses a non-threatening and reassuring approach to get what he needs from anyone who walks past him including strangers.

Three participants who described working alliances with strangers also commented that they expect more help from other people who are homeless, even those unknown to them, more than they expect from housed people. This response came without a prompt from me, so I think it is an important finding. Basically it supports the evidence based practices of several outreach models that suggest peer-outreach workers are an important tool in engagement and retention of people who live unsheltered. All three participants told me that under
every circumstance a person who is homeless will do more for another person than a housed person will.

Pete used to live in a local emergency shelter and even worked in the kitchen during his stay there. He has a diagnosis of sickle cell and is in and out of the hospital several times a month. He recently left the shelter and moved to Florida to live with family but that did not last long and now he is back living in town sleeping “wherever I can find a spot.” He was the first participant to mention his assessment of people who are homeless with respect to the help they offer. During our interview, he talked about how people “out here care for one another.” He continued with his thought in this passage:

P[articipant]: Let me tell you something. I give you an interview like this here, and I say it to you like this, you riding, you got your car, you on the freeway, you know what I’m sayin, boom, you have a flat tire. You got how many more cars coming by you, how many of them gonna stop?

I[nterviewer]: None!

P: A homeless persona walking down that same road would do the first thing he, they would ask you is, what?

I: May I help you? Do you need help?

P: Do you need help? Do you need help? They don’t do it because they want some money, they do it because they see you stranded. You know what I’m sayin? And a lotta, a lotta people see that you for real.
In a later interview, Luis, a young white man who says he has been on the streets since coming up from Florida several months ago, comments that a person “who is homeless will go a lot further to help you.” He explains to me that maybe this is “because he has nothing better to do. Or maybe he thinks he will get something too.”

The final participant to make a statement about the difference between a person who is homeless and one who is not was Jim. When I asked him how he determines if a person is trustworthy or not, he responded saying:

P: I think homeless are most trustworthy.

But then he changed his mind and said:

P: No there really is no way. It’s even on both sides. You’re taking a 50/50 chance.

Friends prior to working alliance:

Patrick is a young black male introduced to me by his foster brother Phillip. Both young men have been on the streets and helping each other for three months. I have seen them on Main Street during the day walking and talking to one another. Unlike Phillip, Patrick rarely approaches strangers to engage with them for something he needs. He prefers to know the person first. In the recent working alliance he describes, Patrick classifies the person as a friend who is almost like a brother:

I: Yeah. When the person that had the place, talk a little bit about what happened when you, when you met them, when you were talking about what you needed, a place to get off the street, what
they had, a place with a roof over it. Talk about that exchange. Did you know the person before?

P: Um-hum (affirmative), I know him before.

I: How well do you know the person?

P: He was basically something like my brother.

I: Okay. Okay, so you’ve known the person for years?

P: Right, cause we grew up in the same, in the same foster home.

I: Okay. And so there was a, a history.

P: Um-hum (affirmative).

I: Had the person helped you before?

P: No, this was the first time

Acquaintances met via another person:

Another relationship type detected in the working alliances described by participants involves engagement with a person previously unknown, but one who is introduced by a person who is known prior to the engagement. Frank is a middle aged white male I met in the county library. He was reading, but enthusiastically agreed to an interview. Frank says he was introduced to the other person by an acquaintance who pointed out how the alliance could benefit both parties. Here is the excerpt where he explains the details of how he decided to work with the other person to turn his food stamps benefits into cash so he could buy cigarettes. He is introduced to a new person by his friend Sally:
I: So if we can kind of focus in on that interaction with her and you, because that’s an excellent example and it’s really what I’m looking for. How did you decide to, to work with her to do this?

P: We, there was a lady sitting there in the smoking area outside [inaudible]. There was a lady out in the smoking area and she, she asked [inaudible] candy bar. [Inaudible] pay for it. And I said, yeah I’ll give you a dollar, you know, it was a big king-size [inaudible]. So I did that [inaudible] the lady, Sally was sitting there. She said, wish you could smuggle in some milk for her.

A similar acquaintance-introduction relationship is described by Pete:

I: Okay. Okay. Tell, tell me about that experience. Tell me what happens, tell me how you decided to, to even go to him.

P: I mean, basically I know him and I knew who he was, and I knew his girlfriend. You know what I’m sayin’, so I knew if I’m really hun-gry and he know in his heart that I done missed the places that they feed, you know what I’m sayin’, I know if they ain’t, you know, it’s him.

The volunteer caseworker anomaly:

Only one participant, Mary, described a working alliance with a person who Mary identifies as a “helper.” In this segment, Mary describes working with a woman who comes down to the park every week to offer food and money:
P: Well, only thing that I know about Susan is that she come down in the park, she feed and she make sure that I have number one ticket. And after they feed everybody they’ll make sure that I get extra. She’s a nice person. She, she’ll throw me $5 or $10 in my pocket. She, she’s okay and she’ll tell me, come on and go, take me to the house so I can take a shower. She’s a good person.

**Simple tasks and basic items or assistance**

All fifteen participants described working alliances that involved simple tasks, and resulting in attainment of a basic item or assistance. By simple, I mean the actual task or tasks involved to accomplish the goal required no special skill, nor did it require any deep interpretation or discussion between the person living unsheltered and the other person. No participant described anything similar to an intervention or type of case management experience. The simple tasks they talked about often led to the attainment of a very basic need, such as food, clothing, or relieving one’s self.

In one example, the only thing the participant Donna needed was for someone to physically lift her from her wheelchair and to the ground so she could use the bathroom, and although the task involved lifting and holding up an old blanket for privacy, the participant describes in this segment how she waits a very long time every day for someone to agree to help her:

P: Sometimes it takes seven hours before someone will stop and help me. All I need is a person who can lift me.
In another example, the participant Frank went to the store, purchased something the other person needed, and exchanged that item for money, which the participant then used to buy cigarettes. In this excerpt he describes a working alliance that led to getting a basic need met:

P: Like there’s, there’s a lady in the day center at the shelter, she’s got, [inaudible] cirrhosis of the liver, she’s [inaudible]. I think she’s taking a lot of medication. At night. Well, you can’t bring any, any outside food or anything into the day center, only drinks. But she needs milk to take her medicine at night. So I just, I use my EBT card to go buy her a $2.00 jug of milk and I smuggled it into Transitions. And sold it to her for $1.25, and I go and I buy [inaudible] cigarettes with the $1.25.

Most participants described brief alliances that were formed only one time and lasted only a few minutes. In the following segment, Phillip describes a brief interaction with people when he panhandles to get money or food. His response indicates he will repeat the brief engagement over and over:

I: Okay, okay. Tell me a little bit about what those experiences have been like? When you do talk to someone and let him know that you need some change or a couple of bucks, and it works out tell me about that experience.

P: Well, well when it works out I know I can go and do it again, do it again, that’s how I get enough money up to get what I need to get.
I: So it’s encouraging.

P: It’s encouraging, but then again it’s risky cause you gotta watch out for the police and stuff.

I: Cause it is illegal these days.

P: Yeah. Yeah.

I: Right. But you’re willing to do it even though it’s, because of, of sometimes it pays off.

P: Yeah, um-hum (affirmative). And sometimes it do pays off a whole lot.

In contrast to the brief alliances described by Phillip, two participants talked about times when they worked with the same person several times and for a longer period of time. In this segment, Pete describes how he got to know the other person with whom he later engaged in the working alliance before and how that previous relationship led him to engage in a working alliance later:

I: Okay. So it’s somebody that you knew. How did you get to know this guy?

P: That person, I met him through Transitions.

I: He was someone in there as well?

P: Yeah, he was someone in there as well, and his girlfriend.

I: How did you meet him? What happened?

P: Coming through the line, he was coming through the line to get – cause like I said I worked in the kitchen.

I: So you were on the side of, of making the food.
P: So I’m – yeah, yeah, I was a, one of the cooks.

I: Uh-huh (affirmative), and they came through the line.

P: And they come through the line and they got to know who I was
and they got to know the, the meals were different.

I: How did they get to know who you were?

P: The meals.

I: From the quality of your meals.

P: The, the way you cook food and serve to people.

I: Was different.

P: Was totally different.

I: Was better.

P: And was way better.

I: So that got them interested in who you were.

P: Yes.

I: And, and then that got you, how, how did you feel towards them?

P: I felt pretty good about ‘em. I felt that, you know what I’m sayin’,
somebody cared.

I: Hmm. How did you know they cared?

P: Because I learnt they cared after I left.

Unlike the majority of the participants, the participant above knew the
other person from before and described how that positive experience led him to
believe he cared. This seems to have had an impact on whether the participant
later engaged in a working alliance.
In summary, all interactions during the working alliances described in this study are simple, and basic. Participants describe alliances with limited steps involved in the tasks required to reach a simple goal of some basic item or assistance. One or two steps, to get food, or help going to the bathroom, or cigarette money was typical of the alliances described. The majority of alliances described happen one time with the other person. In all cases except for one, the other person in the working alliance was either a stranger or an acquaintance.

**Role of trust**

The remaining results suggest that the type of working alliances described above can happen with or without the presence of trust.

**Evidence of volition to be vulnerable**

The presence of trust is apparent in the responses of several participants who talked about their willingness to put themselves in a vulnerable position by seeking help from another person. In three cases, there is evidence of the participant making the decision to engage and taking the first step to initiate a working alliance, regardless of the vulnerability they might feel. Phillip, the young male I talked about earlier, who has been on the streets for three months following his aging out of foster care, described how he is always on the lookout for someone to help him with money or food. I asked him if there is ever a time when he would not engage with a person, even when he is not certain the alliance would result in a positive outcome; he responded,

P: “not out here cause everything counts. Everything counts. Well, some of everything counts. Some stuff ain’t good for you out here,
so. Like I say when somebody gives you a blanket or something, you don’t know if they got a doggone disease on them or anything. I mean, you can be sleeping on the blanket and wake up, you go spots and stuff on your neck.

Patrick, who is Phillip’s younger foster brother, described an even slightly less assertive process. Although his approach is described as more slow and deliberate, he explains the process of making the choice to pursue the alliance in the following section. Similar to his foster brother, Patrick, Phillip eases his way into the engagement with the other person.

I: Had the person helped you before?

P: No, this was the first time.

I: Okay. And did you approach them?

P: Not really, I kinda like just eased my way on in there, you know. I ain’t really like, hey you know, I need a place to stay, you can help me out, you know, I kinda just kept spending nights over there and nights end up turning to, you know, months. And eventually, you know, you know, he noticed it, like that, okay well since you gone stay here, you know, you gone have to do something. You know what I mean?

A third participant, Deb, clearly articulates her willingness or volition to pursue an alliance. When she needs something, if she needs to she will engage with another person and will expect to get what she needs. In my time conducting this study, I saw Deb many times. She seems to walk the same streets at the
same times every day with her head down looking for cigarette butts and stopping to go through garbage cans along the sidewalk. She pulls out anything valuable, like clothes or leftover food and puts them in her back pack. I have sat at the same coffee shop for months writing and see her on her way up the street and then on her way back. She appears to be a person who follows a very specific process to get her needs met. This may result in her being certain she will get what she needs when she engages with another person. This may have an impact on her willingness to pursue working alliances. In this passage, she speaks with assuredness that she will get what she wants:

I: Will you talk to a time recently when you worked with someone else to get something you need; like, even like food or, or cigarettes or a place to stay? Can you, will you talk to me about a time like that?

P: Yeah, a lotta time I'll ask somebody for some food and they'll give me some food. They'll say, come on, they'll buy me some food. A lotta times they give me money to get food. Whenever I need clothes or anything [inaudible] to go down to the park and they have clothes down there. I get what I want.

Deb, Patrick, and Phillip make the first step to engage with another person. They all make the first move, yet the men do so with in a gradual or cautious way. Phillip approaches strangers often; while Deb and Patrick engage with someone they has known from a previous encounter or relationship. In Deb’s case, she has frequent contact throughout the week with the person who
gives out food and clothes in a park. Patrick has infrequent contact with his foster brother whenever he needs a place inside to sleep.

In several instances where a participant describes taking the first step, the decision to actively engage with another is informed by how the other person looks or acts towards someone the participant knows. Two participants discussed that their choice to engage in a working alliance is typically informed by what the person is wearing or how they have been observed interacting with others. Again, Deb demonstrates this category when giving her response to the following question:

I: Okay. If you had to think of some words to describe her what kind of words would you come up with to describe Mary?
P: Um, only thing I know, talking about the way she look?
I: No, just how she, how she is towards you.
P: Well, well she’s a nice person. She, she’s good. She don’t, she don’t talk bad to me or nothing. She talk nice to me and she call me Miss Deb. She’s a nice person. She seems to have a lotta concern about people because she’ll take care of you if she can. She’s a good person.

In several cases, if a person has been seen being nice to others or if they are known to be a good person, then the participants will actively seek the engagement. There are visual cues, such as being well-dressed or clean, that participants use to decide whether to pursue engagement. For example, one participant avoids anyone known or suspected to be involved in illegal activities
and another participant watches how the person she engages with interacts with others. Several participants stated that they are more likely to engage with another person who looks like they can help. People who were wearing clothes that made them look like they had the ability to help were more likely to be engaged in working alliances.

**Volition, but at a time when desperation sets in**

In contrast to the participants who pursued working alliances without hesitation, others described situations where they seemed to wait until they become desperate before approaching another person. These participants still show volition to be vulnerable by their initiation of a working alliance, but in contrast to the previous examples, these participants wait until there seems to be no other way to get what they need. From these descriptions, it became apparent that there is a point when need overrides a tendency to just wait until someone comes along and offers help. Six participants engaged in working alliances where they expressed getting to a point of near desperation before engaging with another person.

These six participants all described taking a chance as a process that is a choice that comes only when it is necessary. Frank tells of a time when he had one resource, his food stamps, but was desperate for cigarettes. In this segment from his interview, he describes the desperation that propelled him to engage with another unknown person in a working alliance:
I: Okay. Okay. Now seems like you didn’t know her very well and you started up this working sort of relationship with her. In other situations do you need to know a person before you would get really this involved with them to accomplish something?
P: Probably, yeah. In that case I only did it because I, you know, was kinda desperate for cigarette money. If it wasn’t for that I wouldn’t, you know, I wouldn’t open up and trust somebody like that.

Another participant, Chris, admits engaging with another person would not be his first choice if given another option:

I: Okay. Is there anything particular that you could describe to me about feeling afraid when you’re doing that?
P: Not really.
I: Okay.
P: Can’t really describe it.
I: Okay. Hard to describe, yeah. Do you, can you let your guard down when you need to get help from another person?
P: I think I can.
I: Um-hum, um-hum (affirmative). Is that something that you feel comfortable doing? Or is it something that you have to do to get what you need?
P: Something that I have to do.
I: Um-hum (affirmative), yeah. So like, it’s not really your first choice. If you didn’t have to choose to do that you would, you would avoid it?

P: Yes, ma’am.

In another response from Frank, he goes into details about the effect that being homeless has on his decision to put himself in a vulnerable position by seeking an alliance. Here he discusses desperation and lack of volition as pieces of the homeless experience:

P: - guess it does because when you’re homeless, even if you manage to get comfortable sometimes you’re still in a desperate situation, you’re in your own [inaudible] situation.

I: And so how does that affect trust?

P: When you’re feeling desperate you’re actually more, you wanna protect yourself more and you’re more, I’m sure there’s a –

I: Cautious.

P: - word for it, yeah. Yeah. It makes it harder to trust people.

I: Okay. Okay, so being cautious limits your ability to trust?

P: Sure. Yeah, when you’re already in a desperate situation it puts you that much more unlikely to trust someone [inaudible].

I: Okay. Okay, so when you’re less vulnerable or less desperate you, you feel like you can be more trusting of people and, and not be so cautious and maybe be open to trusting people.
P: Yeah, because you don’t have as much to lose. I mean, when I was working and, and had a place to live I was more generous and I could trust people cause if I get hurt, oh well, you know, still got a place to live and to eat and, you know, my bills are paid. So then, maybe I didn’t see it that way then but now, sure. Now I’m a lot less likely to, to trust somebody or make friends with somebody now because I got so much less to lose. Versus, you know, what little I have left to lose I don’t want to lose.

Evidence of expectations of no ill-will

Three participants had the expectation of no ill-will when they engaged in the working alliance. The first participant, Miss Mary, says she expects a beneficial exchange; that they will help her as much as they can. She also expects slightly that she might be let down during the alliance, but main message is one of positive expectations. Here, she describes her expectations that people will do what they say they will do:

I: Miss Mary, when you, when you rely on someone else, what, what do you expect from that person?

P: For them to take care of me the, the, whatever they say they gonna do. Whatever they say they gonna do I hope that, I, I, you know, is for, for them to do. And anybody tell me they gone do something they do it.
Patrick, who talked about being encouraged when things work out for the best, discussed expectations that people will do their best to help out when asked:

I: Okay, okay. Tell me a little bit about what those experiences have been like? When you do talk to someone and let them know that you need some change or a couple of bucks, and it works out tell me about that experience.

P: Well, well when it works out I know I can go and do it again, do it again, that’s how I get enough money up to get what I need to get.

I: So it’s encouraging.

P: It’s encouraging, but then again it’s risky cause you gotta watch out for the police and stuff.

I: Okay, okay. When you talk to somebody and get some help, what do you expect?

P: Well –

I: Or ask for what you expect?

P: Well, I was, well I would like to expect for them to try to help me as much as they can and do whatever they can to the best of their ability.

I: Okay, and so what sorts of things go through your mind when you feel like you trust a person? What, what do you know is going on when there’s trust there.
P: They ain’t gonna let me down.

I: Okay. Okay, so your, what you expect to have happen will.

P: Yeah, but it might not happen like right then and there, it might happen probably a couple hours, probably a day or two, but still I got that trust that they gonna –

I: Eventually.

P: - yeah, um-hum (affirmative).

I: Eventually what they say they’ll do and what you need them to do will happen.

P: They will come through for me.

Similarly, Frank expects that a person will follow through as promised.

I: Okay. And when you, when you rely on her to do what she says she’ll do, do you, what, what are your expectations?

P: Pretty much that, that she'll pay me if she can. That, most, and that she doesn’t, you know, like spread it around so that security gets it on it [inaudible].

I: You don’t expect that she’s gonna screw you over, you –

P: Yeah.

I: - just really expect that, that she’s gonna follow through.

P: Doing it a couple times, yeah I see what you’re saying. But then I got to know her well enough to know she’s a nice person. She’s not [inaudible], you know, I trusted her. At first, you know, I was
desperate, I was willing to take the chance but like I said, now that I
know that I can trust her, I don’t mind if she [inaudible].

Frank makes the distinction between people he can trust and people he
refers to as “bad people.”

I: Sure. Yeah, yeah. I'd like for you to talk a little bit more about
what trust is and what it feels like and what, if I, if I came from an-
other planet and I didn’t know the word trust and I was wondering
what this, this, what is trust, how would you explain it to me?

P: You know, most people have a certain trust, it’s like you trust
somebody to do a good thing or do the right thing, but not neces-
sarily. You, you can trust somebody just to do what you expect
them. Like trust a bad person to be a bad person. Like, you know,
to trust what their motives are we good, versus somebody like
some of the people, friends and people I know, trust that they’re
gonna behave the way I expect them to, the way I know. If you
think you know somebody and they do something that’s completely
out of character for them, then you get that feeling though that
you’ve been betrayed, right?

I: Right.

P: So that’s what trust is. Mostly I guess people when they say,
they just talk about trust or trust people to do the right thing, they
feel it’s the right thing, to treat, treat you fairly, honestly, that sort of
thing. Anyhow, I think that’s, that’s a good definition I guess. See,
trust is, is when you can comfortably expect someone’s going to behave in an honest, an honest fashion I guess.

Evidence of expectations of ill will

Three participants explicitly commented that they expect the worst from people in working alliances, yet pursue the engagement and the working alliance. This small group of participants vary in what outcomes they expect. An older black female, named Deb, says she usually receives verbal assault when she engages with another person for help. During our time together, I witnessed several of her interactions with other people near the bench where I found her sleeping early one morning. These interactions involved rough language and assertiveness from the males towards her. One tried to sit on her lap multiple times; she pushed him off and nearly into the street after he refused to leave and let her finish the interview. Deb mentions the possibility of being helped, but describes being verbally assaulted more often than not:

I: When you have to rely on someone else for help what do you expect?

P: Sometime they might say no, sometime they might say yeah. Sometime they curse you out and tell you to from around ‘em.

I: What did you just say?

P: Sometime they curses you out and tell you to get from around them.

I: Okay. Yeah, so sometimes when you expect someone to help you, they curse you out?
P: They curse me out.

Being cursed out and even physically “handled” by others was something I witnessed during my time with Deb, and from her description of how she expects to be treated by others, this seems to be common. Another participant, an older white male, named John, expects “things to fall apart,” based on previous experiences. He has an attitude that if things can go bad they will. He describes being cautious and ready for the worst. Yet, like Deb, this expectation of ill-will does not prevent him from going ahead and engaging with another person. Regardless, in this passage, he explains that life experiences have taught him to expect things to fall apart, eventually:

I: What are your expectations?

P: That things will fall apart. That’s one thing life has taught me.

I: Can you let your guard down?

P: No, I am real cautious.

I: How do you know it’s safe to work with someone?

P: I don’t! I have always been real independent. It never is.

The third participant responded similarly to Deb and John, yet his reference to having “protection” against expected harm may have been a display of psychotic symptoms. The majority of the interview involved him trying to comprehend my questions, but I did not exclude him from my results because he was able to tell me about a working alliance and he was able to tell me what his expectations involved. In this third example of a participant expressing the expectation of ill-will,
yet still engaging with another in a working alliance, Karl explains what he would do if a person does something to harm him rather than to help him.

P: I recall being in a situation this morning and I know I had my protection and I know that if the person would have done something (bad) to me, I would have had to defend myself. I have to put myself at risk, in some categories, that don't make it safe for me.

In these three examples, Deb, John, and Karl express how their expectations are low, but they pursue the alliance with others none the less. Each expresses these expectations of ill-will differently, and each have experienced interactions with others quite differently maybe because of race, gender or state of mind.

How trust is talked about by participants

Five participants described situations of working alliances and explicit about the role trust in those alliances. Both Jim and Joe stated explicitly that trust is necessary in the working alliance:

P (Jim): I wont ask someone for help if I don't trust them.
I: How did you decide to engage with her?
P (Joe): I trusted her.

Luis, who says he is 18 years old and another participant, Jim, help each other keep up with personal belongings by hiding bags and blankets and watching each other’s belongings when the other is away. They keep their belongings together in a space known only to them. When asked to explain why he engages with his friend, Luis explains that he does so because he can trust him:
P: I know that he’s not gonna do me wrong or steal from me. You have to sleep with one eye open. We sleep out in public and anything could happen. He’s a good dude. I can trust him.

Explicit descriptions of trust
Five participants described the feeling when they trust the other person as a vibe. In describing details of feeling the vibe of trust when he engages in working alliances, Patrick said:

P: I mean, I mean, for me I don’t know what it is, I mean, you can just always tell when, you know, you always get a vibe when somebody ain’t, when they ain’t trustworthy, you know what I mean? It’s all depends on like, you know, back when I was in school, you know, they always teach you, you know, about the who, what, when, where, and how, you know, so I always, when somebody talk I always listen, you know, how, who, when, whatchu talking about, you know what I mean? And if it just don’t, don’t add to me, you know, a red light’ll come up, a red flag’ll come up, so I just know, nah, I ain’t, you know, and I don’t trust you, you know what I mean? You can just tell within a few words sometimes with somebody.

I: Will you talk about what you mean, what does the, what is the vibe? Cause vibe’s an interesting word but I don’t, I don’t, I know what I mean when I say the word vibe. What do you mean when you say there’s a vibe and you know you can trust someone?

P: Vibe, vibration, it’s just something that you can just feel in your body.
I: How, how would I, if I felt the same thing you felt, how would I know, oh that’s what he’s talking about?

P: I can’t, it’s something that I can’t really explain. You know, it’s like, it’s like when the Bible say, you know, you gotta have faith the size of a mustard seed, you know, you believe in God but you don’t see him, but you believe in Him and you can feel Him, you know, it’s the same way. You can’t see it, you can’t touch it, you can’t smell it, but you can feel it. You just, you just, it just something that you just know. You know what I mean?

I: Yeah. That’s wonderful. I, I really wanna push you though, if you could put some words to it.

P: Some words to it. Oh, man. I can’t, ah man, put a word to it, whatchu mean by a word? Like, what?

I: You’re describing it as a feeling.

P: Uh-huh (affirmative).

Luis also talks about feeling a vibe and being an empath who is capable of detecting the good in people:

I: Could you identify what makes you want to continue to work with a person?

P: Usually, if you spend a couple of days together, you can say if this guy has good intentions. I can feel it. I’ve been wrong before. I’m a empath. I can feel how people feel, not in a mental health issue way. I can feel vibes. It’s a primal instinct. It can’t be taught.
When asked how he decided to engage in the working alliance, Jim explains the feeling of a vibe that let him know he would get along well:

I: How did you decide to collaborate with him?
P: I guess the vibe. We clicked up immediately.

When asked if there is any way to tell if a person is trustworthy, Patrick gave the following details:

I: What does the person do, really do? What do you see, hear that you know, I can trust that person? Besides just coming to people on their word.
P: Well, well sometimes, well when a person look you in your eyes, that to me, that’s got one thing to do with it.
I: What does it look like when a person looks you in your eyes and, and it feels like trust, as opposed to something else? But I wanna know what the trust looks like to you.
P: You talking about like what they do?
I: Yeah, what it looks like.
P: They do a million things, you know, some people, you know, some people look away when they talk, you know.
I: And that’s not trusting?
P: Nah, I mean, that’s why I say, that’s when it go outta play, I get all, it’s just a feeling, it’s just something, you know what I mean,
cause you know like when people, they be like, well I can tell if a person lying if they doing this or if they doing that or if they doing this. That ain’t the case cause everybody do different things, you know, so it’s just, that’s what I’m saying, like alright, you know, a person might look you straight in the eyes but they can be lying through their mouth.

I: I know!

P: See what I mean?

I: I know!

P: [Laughter] They can be doing all that or, you know, they might move a certain way, you know what I mean, and if I see that, you know, immediately I be like, nah you know, I’m backing away from you.

I: Okay. Okay. So really body language.

P: Um-hum (affirmative).

I: Is kinda what you’re talking about.

P: But then when you get into the depths of it, it’s really even more than just body language, it’s just, that’s why I get that back to that point, it’s just that feeling, you just know. Like you just, you know, like, you know what I mean? You just know when somebody is lying, and sometimes you don’t, but some people, you know, they know how to do it real good, you know, they can easily gain somebody trust and ain’t doing, not being, they ain’t trustworthy at all.
But some, now I say about, I say about eight times outta 10 you can always tell when somebody ain’t right.

**Summary**

The housing status of all participants in this study fits the current definition of living unsheltered. Participants described working alliances that involved simple tasks, and resulting in attainment of a basic item or assistance. Several participants experience difficulty or say they are uncomfortable during the working alliance, yet this does not inhibit them from engaging in one. The presence of trust is apparent in the responses of several participants who talked about their willingness to put themselves in a vulnerable position by seeking help from another person. In several instances where a participant describes taking the first step, the decision to actively engage with another is informed by how the other person looks or acts towards someone the participant knows. In several cases, if a person has been seen being nice to others or if they are known to be a good person, then the participants will actively seek the engagement. In contrast to the participants who pursued working alliances without hesitation, others described situations where they seemed to wait until they become desperate before approaching another person. Several participants had the expectation of no ill-will when they engaged in the working alliance. Yet others commented that they expect a negative outcome, but continue ahead in working alliances. Five participants described situations of working alliances and were explicit about the role trust in those alliances.
Chapter 5
Discussion

I conducted this study to learn about the role of trust in the working alliances formed by people who live unsheltered. Along the way, I learned about the role of trust, but I also learned more broadly about the nature of working alliances people who live unsheltered have with other people. Some of my findings are similar to previous research with people who live unsheltered. Yet, several of the participants’ responses challenge the assumptions put forth earlier by others.

While this study is very limited by the small number of participants, these findings suggest that people who live unsheltered pursue engagement and accept engagement with other people. During these engagements, working alliances form. Most interestingly, the people I interviewed could recall a working alliance with ease. In general, people who live unsheltered are thought of as loners, difficult to engage, and resistant to working with others. In contrast, my findings show that engagements and alliances are formed, but unlike the type of formal alliances we often choose to test for, the alliances described by my participants result in the attainment of basic needs and may happen even when the outcome is unclear. This last finding is interesting, because it shows how even with expectations of ill-will, people who live unsheltered willfully engage in working alliances. That finding is in direct contrast to the findings in the study that asserted prematurely that people who live outside do not trust and therefore do not
engage in helping relationships. In my findings, I see a different story. People who live unsheltered might not trust, but they still engage in working alliances.

What may be learned is that we should attend to the needs and wants of people who live outside, before we set goals of housing and healthcare. The nature of these engagements and alliances highlights that the process of just being in the physical space and just being open to engagement is important. The implications for practice are for us to be near and attainable when a person who lives unsheltered is ready to engage. This will mean saturation of outreach workers who have no specific agenda other than just being in and around the locations where people who live unsheltered gather.

In this study, the decision to engage in a working alliance with another person and the outcome of that alliance was not simply, or indeed often, based on the presence of trust. Living unsheltered, being extremely poor, and existing with little support generally posed difficulties in meeting basic needs. To get those needs met, all participants engaged in working alliances, but trust was not always a factor in their decision.

The descriptions by the 15 people in this study provided insight into their experiences with other people particularly when study participants engaged in alliances to get something they wanted. As a group, people who live unsheltered have been said to lack trust in helpers, which has been suggested to contribute to the refusal of engagement to services (Kryda & Compton, 2009). I designed this study to learn about the role of trust when engagement of any kind is ac-
cepted. I did this out of my concern for helpers rushing too quickly to the assumption that the lack of trust leads to lack of engagement. From the findings in this study, I have learned that people pursue engagement and form alliances with other people, with or without trust.

**Challenges to the current literature**

The participants' willingness to engage in a working alliance, regardless of trust, to get what they need argues against the common assumption that they do not trust, and therefore attempts at working alliances fail (Kryda & Compton, 2009). While I cannot say why attempts at working alliances fail, in a very small way my finding suggest that trust as we currently define it does not have to be present. Participants were not individuals resistant to seeking or receiving alliances, nor were they disengaged. At least in this setting and with these participants, these findings challenge the assertion that trust is necessary for the working alliance to succeed, and that the lack of development of trust will probably lead to the disengagement of the working alliance (Horvath, 1994). While most working alliance literature is from more formal helping settings such as clinics and therapist's offices, fairly recent research with people living unsheltered shows the same way of thinking. Kline (1993) and Swayze (1992) both assert that trust is important in the working alliances; so important, in fact, that the absence of trust prevents individuals, such as people who are living unsheltered, from accepting help from helping professional. Again, the data is small and the study is very preliminary, the interactions described by my participants were brief, but the findings provide inspiration to continue with this question and others that
may make the meaning of the findings more clear. Compared to most studies about the working alliance, which are longitudinal, my study involves a snapshot of the recollection of a working alliance that is described as brief. This may be the nature of working alliances on the streets.

Outreach workers, case managers, and clinicians are quick to blame this refusal on lack of insight into the dangers of living outside, which may come from symptoms of a mental illness or substance misuse, or an apparent willingness to sabotage offers of help (Baum & Burnes, 1993). While I can agree that many people who are homeless refuse to engage with others who offer help, especially when those offers of help include shelter that is dependent on a psychiatric diagnosis (Koegel, Sullivan, Bumam, Morton, & Wensel, 1999; Rosenheck & Lam, 1997), the explanation is often inaccurate when used to explain why others, without a mental illness, refuse to engage. This explanation fails to explain why the majority of people who are homeless and living without a mental illness remain homeless, yet the explanation is often cited as the reason why our attempts at working alliances fail. Again, my findings offer a slightly different explanation for this failure on our part. First, about one half of my participants showed symptoms of mental illness, including delusional content in their responses and/or difficulty concentrating. On the other hand, the other half seemed to have clear thoughts with no symptoms of mental illness at the time of the interview. While I did not conduct any formal assessment of the person’s mental status, I have nearly 20 years of experience working as a mental health social worker and base my assessment of my participants’ mental status on that experience. From my
findings, it appears having a mental illness does not have an impact on my participants’ willingness or ability to engage in a working alliance.

Admittedly, I was not offering diagnosis dependent housing, so the contrast between my findings and the studies cited (Koegel, Sullivan, Bumam, Morton, & Wensel, 1999; Rosenheck & Lam, 1997) fall short, but my findings challenge the general assumption that mental illness takes away a person’s volition and by extension their ability to trust, and therefore negates the working alliance from happening. On the contrary, the people in my study, with or without symptoms of a mental illness, engage in working alliances. I believe the merit of this study is to begin to change our old ways of thinking about our work with people who live unsheltered. If we view people with mental illness as resistant to engagement, as we have in the past, then I believe we are sabotaging our work. This old assumption creates a pervasive pessimism, yet the findings of this study suggest people living unsheltered are capable of engaging and we just need to understand better when and how and why. The findings of this study are simply the first step at making sense of the working alliances people who live unsheltered form.

Recently, other explanations have emerged that challenge the individual deficit explanation, or the idea that mental illness or substance misuse interferes with a person’s acceptance of shelter. Rather, individuals may refuse services because of a pervasive mistrust of outreach workers and the agencies that employ them, as well as a lack of confidence in available services (Kryda & Compton, 2009). The finding from my study challenge both views, particularly when
you consider how often participants engaged in working alliances without trust playing a role. In contrast to the Kryda & Compton (2009) findings, my study’s participants engaged with another person when they needed that person’s help to get what they needed, without the necessity of trust.

Similar themes of mistrust and prior negative experiences were prevalent in a more recent study that asked why homeless individuals chose to live in camps in the woods rather than accept shelter nearby (Donely & Wright, 2012). Those campers explain their choice to live outside comes after experiencing more dangerous conditions in shelters. While the study differs from my study considerably, especially with respect to the focus on negative experiences, I see similarities. Specifically, the authors suggest that mistrust leads to the refusal of engagement to permanent housing. This and the previous studies leave several questions unanswered and make assumptions about the role of trust in the process of working alliances. First, the claims that people living unsheltered do not trust outreach workers (Kryda & Compton, 2009) begs the question, "When do they trust helpers?" and obviates the possibility of learning from relationships that unsheltered people do establish. Second, the conclusion that negative experiences lead to avoidance of shelter (Donely & Wright, 2012) implies that people who do accept shelter have not have any negative experiences. From years of personal experience, I know that most people who accept sheltering come face to face with negative experiences while in the shelter, yet remain there. Now, from the finding in my study, I see signs that people who engage with other people in working alliances come face to face with negative experiences during their
working alliances, yet maintain them long enough to get what they need. Therefore, the avoidance of negative experiences cannot be the only reason for people to remain outside, since this is something those who live outside have in common with people who live inside.

Another study that focused on the experiences of people who refuse shelter narrowly focused on women suspected of having a serious mental illness. As a result, the findings are very limited to how far they can be extended to most people who live unsheltered, and while Lurhmann’s (2008) results and conclusion as to why some people continue to refuse shelter may be useful, her study is limited because it applies only to women with a suspected serious and persistent mental illness. There are more people living unsheltered without mental illness who continue to refuse services than there are people living unsheltered with mental illness. By recent counts, less than thirty percent of all unsheltered individuals have a mental illness (Homeless Research Institute, 2013). In contrast to the pin-point focus of Lurhmann (2008), my study may prove useful in helping us understand more generally about the role of trust in the choice to engage with another person, especially in the choices of people who live outside. For example, the participants in my study talked about their engagement in alliances to get what they needed. As many appear to have a mental illness as not, therefore, my small study suggests mental illness does not play a role in a person’s willingness to engage in a working alliance. Certainly, it is to early to suggest what matters most, but my findings provide the inspiration, at least to me, to go to the next study with that question. Clearly, something matters to people
who live unsheltered when they decide to engage in a working alliance. My findings suggest the small, but important things matter. For instance, getting your basic needs met is an avenue into a working alliance. As helpers, case managers could be more successful with working alliances, and hence establishment and maintenance of a working relationship with people who live unsheltered if the case manager begins literally where the client is. This approach is not new to social work. In fact, an early influence on the work of case managers in social work is the fundamental school, which asserts the place to begin is where the client is.

I believe most of our work with people who live unsheltered is informed by literature and practice wisdom that originates in more traditional settings like clinics or inpatient settings. As a result, we consistently apply skills that are unmatched to the setting, the streets, and unmatched to the clients, people living unsheltered. Our mistake is in our tendency to overlook the unique experiences of people who live unsheltered, including the nature of their working alliances. This nature, described as basic, brief, and simple, comes through from the interviews in this study and gives a new way of thinking about people who live unsheltered: they engage in working alliances with or without trust being a part of the decision. The next step will be to study what matters most when the working alliance goes from basic, brief, and simple to more complex and in the pursuit of more significant goals (at least to case managers) such as shelter and permanent housing.
Contributions to existing literature

Living unsheltered

The past descriptions of people who live unsheltered and the participants in this study are quite similar. First, people living unsheltered have and continue to be segregated to areas, which were called Main Stems and Skid Rows (Baum & Burnes, 1993). Similar to the locations described a hundred years ago, my participants sit, walk, and sleep in places where they are less likely to be disturbed. In these out of the way places, many participants in my study live in places where they are undisturbed. In contrast to those out of the way places, some participants were living in places that I call private spots in public locations. Like the common phenomenon that happened in the 1980s when many people who were living unsheltered and homeless lived in neighborhoods and in business districts, literally under the noses of housed people, several participants lived on sidewalks. Second, people in this study were single men and women, some with intermittent work, some older, some younger, and all are living in extreme poverty (Baum & Burnes, 1993; Donely & Wright, 2012).

In contrast to the early references to the mistrust and dislike of people living unsheltered, which led to unsheltered people being punished severely, especially during the time leading up to the 1400s when they were perceived as dangerous criminals (Chambliss, 1964), most of the participants in this study described the public as kind. Only two participants described negative reactions, including being cussed out on a regular basis.
**Trust**

From my findings, it is possible to say trust, as we define it, may not play a role when people who live unsheltered form working alliances. Yet, in the cases where trust seems to play a role, the nature of that role is interesting and warrants discussion. An understanding of the role of trust as a process in the working alliances people living unsheltered choose to have may reveal something new to us about the way to engage them in working alliances that could lead to shelter. In those cases where trust seems to play a role, the descriptions of trust resemble the one used in the design of this study. While there are multiple definitions of trust, the one that may be of most utility for this study is this one: “Trust is a psychological state comprising the intention to accept vulnerability based upon positive expectations of the intentions of another” (Rousseau, Sitkin, Burt, & Camerer, 1998, p. 395). My study was designed to find out what the role of trust, as conceptualized by that definition, and as a result, the focus has been narrow. Findings suggest that kind of trust plays a role sometimes. I concede that other forms of trust may exist, such as over trusting or under trusting, and a major limitation of this study is in the narrowness of the focus regarding the way trust is conceptualized. However, as a starting point, and in relation to previous studies that follow the same narrow conceptualization, my findings challenge those previous studies. For instance, recent interpretation of findings from a study with people who refuse help from outreach workers suggest that refusals come from a pervasive mistrust of the worker’s intentions, abilities, and selflessness (Kryda & Compton, 2009). I interpret those claims as suggesting a person
who is living unsheltered will not put himself in a vulnerable position to engage with outreach workers, or another person for that matter, and he expects ill-will from the other person. In those cases from the Kryda and Compton (2009) study, like in my study, participants were living unsheltered. Kryda and Compton (2009) conclude that their findings explain how people living unsheltered refuse offers, and reject working alliances, because they do not trust. When viewed in terms of how trust is conceptualized in that study and in mine, the logical assumption would be that people living unsheltered do not trust, and because working alliances require the component of trust in the working alliance, they do not form them. In fact, I designed my study to, in some ways, test the assumptions of Kryda and Compton (2009). I believe I can say with certainty, yet maybe not with much strength given the size of my sample, that people living unsheltered do in fact engage in working alliances without trust about as often as they do with trust. In contrast to the Kryda and Compton (2009) findings, my findings provide a different way of looking at refusal of offers of help, and although my findings do not show what matters, if trust does not, at least they provide a pathway to the next study, the next question, which may provide more strength to my belief that trust, on the streets with people living unsheltered looks like something we are not familiar with.

Trauma is a factor that may add to the complicated nature of how trust plays out in working relationships, such as the ones described above. Undoubtedly, people who live unsheltered are exposed to adverse events that could lead to a traumatic response more often than any other group who is homeless.
Trauma responses, such as PTSD, are common in people who are homeless. They are part of the experience of being unsheltered. Multiple studies suggest people who are homeless have high lifetime incidences of physical and sexual assault (Kim & Ford, 2006; Kim, Ford, Howard, & Bradford, 2010; Kushel, Evans, Perry, Robertson, & Moss, 2003; Stermac & Paradis, 2001). Furthermore, being homeless increases the likelihood that a person will experience victimization and trauma (Garland, Richards, & Cooney, 2010). Nearly all women who are homeless reported past exposure to potential trauma (Tsai, Rosenheck, Decker, Desai, & Harpaz-Rotem, 2012). The potential trauma experiences included having been robbed, their life threatened, sexually assaulted, and physically assaulted (Tsai, et al., 2012). Exposure to sexual trauma is not very different between men and women who are homeless (62% for women compared to 53% for men) (Kim & Ford, 2006). Other studies suggest that a stressful life event, such as becoming homeless, introduces psychological consequences that may lead to trauma (Dohrenwend & Dohrenwend, 1974; Goodman, Sax, & Harvey, 1991; Rivlin, 1986).

I assumed my participants experienced adverse events and may have a trauma response as a result of those events. The literature supports that assumption. Adversity that resides in merely becoming homeless to the seriousness of physical and sexual assault is a fact of life when you live unsheltered. My study took into account this fact and the repercussions felt by my participants, which may have a direct impact on their ability to trust. After completing this study, I believe some people who live unsheltered trust in a way that is similar to
the way trust is conceptualized as volition to be vulnerable and having the expectation of no ill-will. However, I am interested to look further into the cases where trust, as defined there, is not mentioned. I believe a study that goes into more detail with the people in this study who did not indicate the role of trust in their working alliances would provide some insight into several areas still unclear. For example, it is not clear whether the lack of trust is truly because it is not there, or is possibly there but just conceptualized differently. If this is the case, a study that asks questions that are more open to interpretation and less constricted by the way I conceptualized trust, may provide new and more accurate ways to define and conceptualize trust, especially for participants like my sample. I have learned that the role of trust during times when people seek help is not fully understood.

From the planning stages of this study, I assumed that it was possible that part of the process of forming a working alliance would be different for people living unsheltered, because they experience high levels of exposure to adverse events, which may have an impact on their capabilities to engage in a working alliance. Their exposure to adverse events may lead to trauma responses that may have an impact on a person’s capacity to trust. If a person’s capacity to trust is affected, the capabilities one has to engage in a working alliance may change.

**Working alliances**

Participants in this study were asked to describe a recent time when they worked with another person to get what they needed. From their descriptions, I
have made several statements in the findings section regarding the nature of these alliances. I assessed that the working alliances represented by my participants involved basic steps in the task, were formed for a brief time, and led to the attainment of a basic need. It is clear that these alliances differ from the ones described in textbooks.

In those descriptions, the working alliance, also called the working relationship or the therapeutic alliance (Freud, 1958/1912) is defined as the feeling that both people care about one another, and that they can and will work productively towards a shared goal (Kokotovic & Tracey, 1990). Specifically, the working alliance is discussed as an interaction between a professional helper and a client or patient. The working alliance may contribute to the overall success of the therapeutic relationship. It may be one of three interdependent parts to the therapeutic relationship involving the working alliance, the transference relationship, and the real relationship (Greenson, 1967). In contrast to that textbook description, the participants in this study mentioned an alliance with a professional helper, who was a volunteer from a church, only once. While this study has a very limited number of participants, and generalizations will be avoided, I believe the findings that participants have working alliances that do not have or even require a professional helper is interesting. First, it tells us that working alliances are possible, but the first ones we attempt with people living unsheltered need to resemble the alliances described in this study. Maybe if they resemble what is already happening, then they will be more likely to lead to success. These find-
ings show that the nature of the working alliance leads to small, negligible accomplishments. In other words, the alliances that are forming and working to benefit people who live unsheltered could be a guide for future practice involving social workers.

Aside from the stark contrast between Freud’s conceptualization of the working alliance and the alliances described in this study, another possible way of understanding the working alliance involves a combination of three related parts that determine the quality and strength of all helping relationships; these are the client and social worker agree on the goals (goals), they agree on the tasks necessary to achieve those goals (tasks), and there is a personal bond between them (bond) (Bordin, 1979). The findings of this study are more compatible with Bordin’s conceptualization.

Social workers are able to recognize the importance of the mutual bond, or relationship, upon which our work with others relies. As Perlman (1979) describes the helping relationship: its purpose is to support, enable, and facilitate the help seeker’s work on the problem; its makeup is an emotional bond that brings one human being into alliance with another. Mutual agreement on the goals, tasks, and a personal bond or caring implies the co-creation of the working alliance. In co-created working alliances the client’s ability to form attachments with others, to trust them, and to take responsibility for his or her work in the alliance has an impact on the quality and strength of the alliance (Gelso & Carter, 1985). This study supports the co-creation approach and suggests our work to
establish a working alliance with people living unsheltered needs to reflect more of a client self-determination approach.

This study adopted Bordin’s (1979) conception of the working alliance and its application to any change oriented activity that the participant has engaged in and is willing to talk about. The working alliance viewed as a change-facilitating activity, where there is a goal, a task, and a bond, was the focus of this study, and the findings show that this conceptualization of a working alliance exists. People who are unsheltered do with regularity work with others to get what they need, and to create change over their situation. These are change activities that involve working with others to satisfy hunger, to keep belongings safe, to gather clothes for the week. These are interactions that involve positive outcomes through facilitating change activity (i.e., working alliances).

Just how the findings regarding living unsheltered, forming working alliances, and the role of trust in those alliances contributes to gaps in the literature is exciting. I went into this study with nearly 20 years of experience working with people who live unsheltered. My role as an outreach social worker taught me many things, but this study’s findings surprised me in multiple ways. First, I learned that the nature of working alliances is different from ones in more traditional settings such as clinics, shelters, and inpatient settings.

Second, these findings suggest trust, which may be conceptualized as the volition to be vulnerable and the expectation of no ill-will, may be too narrow to apply to the experiences of people who live unsheltered.
Lastly, as people who live outside continue to need the help of case managers or other helpers, a growing challenge for those of us who work with these individuals is to effectively engage and form working alliances with people who have, for the most part, avoided our outreach efforts. The outreach literature has not focused extensively on the experiences confronting people who live outside, and there is very little literature on the theory that considers those experiences. Most of the limited information regarding how to best conduct outreach to people living outside is provided in tutorial videos on government websites. The focus of those videos involves outreach worker safety, and some direction with respect to how to initially approach a person on the streets. To foster advances in outreach literature in relation to the experiences of people who live outside, my findings provide an opportunity to begin a discussion about the implications of using empowerment and advocacy theories when attempting to help that group. As outreach workers, we pay more attention to our goals than to the goals of people living outside. The findings of my study make that clearer to me than 17 years of working with that group did, and I am excited that my contributions to the literature, and by extension practice, may change the way we work. In truth, this is not new. Social workers learn empowerment theories and are expected to integrate those theories in our interventions. Our professional focus is on client self-determination, which is a concept fully supported by empowerment practice. However, empowerment practice is difficult to do. Partly, this is because people who live unsheltered are the most marginalized and oppressed
group, even within the larger group of people who are homeless who live in shelters. As a result of being outside, this group is viewed with suspicion. Most towns, including the one where this study was conducted, make standing too long in one place or sleeping in public illegal and punishable by citations. These citations often multiply and people who live unsheltered often go to the county jail just for being unsheltered. As a result, people who live unsheltered are viewed as suspicious lawbreakers, and this makes it very difficult to increase their personal, interpersonal, or political power so that they can take action to improve their situations. Yet, my findings suggest that people living unsheltered may be open to our help if they are able to take action to improve their situations. This appears to be the best way to help them. More precisely, my findings show that people who live unsheltered will engage in working alliances to get what they need. In contrast, practice outcomes show this group to be very difficult to engage. This contradiction is interesting. It does not make sense, so there might be another way of looking at the situation. Another explanation is that our approach to working alliances is too complex. Often our goals are to get a person inside, which may be too lofty a goal. My findings suggest we should begin where the client is and to pay close attention to client determination. More precisely, the findings of my study support the use of empowerment theory as a guide in the outreach process.

Empowerment is a process of increasing personal, interpersonal, or political power so that people can take action to improve their situations. Outreach
that takes direction from the empowerment process fosters power (i.e., the capacity to implement change for self) in disenfranchised and powerless groups for use in their own lives. People who become empowered use that power to act on issues that they define as important. From my findings, people who live unsheltered are already empowered; they respond to that “feeling” in a positive way, by literally acting on issues that they define as important. For example, many participants in my study do the things they need to do to meet their basic needs. This shows me that in many ways, my participants use the little bit of power they have well. The problem lies in the fact that they have very little power, and as result are limited by the level of goals they can set and achieve. I interpret my findings to mean the following: our best approach to outreach would be to increase the power available to people who live unsheltered, which may result in them implementing change for themselves. My findings suggest that the appropriate role of the outreach worker is to help people living unsheltered to build their own power base. The approach of outreach workers may involve: (a) first recognizing the power difference that exists between us and them, (b) intentionally diminishing our own role as experts in the outreach process, and (c) including them as mutual experts in the process (Hocomb-McCoy & Bryan, 2010).

**Implications for practice**

The findings highlight the nature of the working alliances of people who live unsheltered. While not the traditional setting for working alliances, it is necessary for social workers that work with people who are homeless and unshel-
tered to learn about this essential tool we rely upon to help our clients. Our current understanding of the role of trust in these alliances may be changed by the findings of this study. In the past, trust has been viewed as an essential component in the working alliance. Yet, from these findings, there is evidence that trust may not play a role.

The primary implication for practice is that people who live unsheltered will engage in working alliances with or without trust being involved. This is to say that we should not work to develop trust when working with people who live unsheltered; far from it. However, from these preliminary findings with a very small sample, I assert that people living unsheltered are willing to engage in working alliances when they need to, and even when they expect a negative outcome. What these findings suggest is that people who live unsheltered decide when they engage in working alliances and do so in short bursts of time to get basic items or assistance.

It seems that the findings should encourage practitioners to be available, flexible, and client focused rather than agency or policy agenda driven when working with people who live unsheltered. Organizations that serve people who live unsheltered vary in their practice for meeting the people’s needs. They vary in their use of outreach and the skills to respond. Most organizations agree that the main goal is to move people into shelter. Yet, the steps involved in doing so are rudimentary. They involve motivational interviewing and stages of change models, but there is little understanding of what to do if those approaches fail.
From this study’s sample, it was clear that living day to day in an unsheltered environment has an impact on how people experience the working alliance. It was clear that the alliances being formed result in the attainment of basic resources; it appears that living outside consumes a person’s time with getting those basic resources. As a result, there is little time for more lofty goals of shelter. When all outreach and engagement service providers adopt client-centered relationship building interventions that recognize how hard it is to just to survive unsheltered, I hope we can then begin to assist people in ways that meet them where they are. Specifically, interventions that begin with working alliances formed via collaboration with the person living unsheltered, as opposed to interventions with goals mandated by laws. The town where this study was conducted recently passed laws making feeding in public illegal without a permit. This law is considered a type of intervention to prevent the spread of unregulated services to people who are unsheltered, yet if the findings of this study are considered, we would see that limiting the access of a basic necessity only makes it harder for people who live unsheltered to get through the day, which ultimately stands in the way of their ability to take on a more complex goal like getting into shelter.

**Implications for policy**

It is premature, given the exploratory nature and small sample of this study, to say anything definitive about policy change. However, I believe these findings are a powerful reminder for us to do what we know to be the best way to establish engagement and to build working alliances with people who have very
little power left as a result of being thought of as suspicious criminals. More specifically, we are taught to promote client self-determination. Furthermore, in most schools of social worker we are encourage meet the client where he is rather than to set our own goals for social justice and to expect our clients to passively follow us to change in their situations. I believe policy is fundamentally the way we do things. My findings are preliminary, yet I believe they say a lot about how we should do outreach with people living unsheltered. First, I propose we stop going into the outreach milieu with a set agenda to get a person housed. Second, I suggest we practice from empowerment and advocacy theories, because my findings suggest that people living unsheltered already use power to change their situations. The problem that we can help them with is getting more of the power they have lost as a result of being unsheltered back. With that power reinstated, the person living unsheltered may do what he needs and wants to change his situation. This approach will be challenging, because of the distance between the power he has and the power he needs to change his situation. I believe it is a social workers job to figure out and do what a client needs most and my findings have provided me with a reminder that I have the skills, but that I have forgotten to use them.

**Recommendations for future research**

From this study’s findings, I have several recommendations for future research. One recommendation is to continue to examine the working alliances of people who live unsheltered, preferably with the same participants I recruited for this study. I see my participants in the same locations where I interviewed them.
for this study. Nearly half could be interviewed again. I recommend getting the participants to talk about their past experiences with trust, broken trust, and lack of trust in the context of working alliances on the street because this would advance my research agenda of finding out how and when trust advances or inhibits change in people living unsheltered.

A second recommendation is to design a study where the participants are able to identify a time when they worked with a formal helper, like a social worker, or outreach worker, to get something they needed. Specifically, the question, “Under what conditions do the working alliances of people who live unsheltered take the ‘next step’ to becoming more complex and goal oriented towards sheltering?”

Another third important question to ask is, “In instances when people who live unsheltered engage in working alliances, what matters most to the success of those alliances?” This question takes the role of trust out of the equation and is more open to learning what, if not trust, matters to people who live unsheltered.

A fourth recommendation would be to design a study where I would interview people who live unsheltered and the person who they engaged with in the working alliance. This would give me a chance to learn more about the subjective nature of the participant’s recollections of the nature of working alliances. This type of study might complete the picture and lend multiple perspectives to the findings about the nature of working alliances on the street.
A fifth recommendation is to explore more fully the finding with respect to the brevity of the working alliances participants described. Compared to most studies about the working alliance, which are longitudinal, my study involves a snapshot of the recollection of a working alliance. It is unclear whether brief encounters are typical of encounters on the street or more specific to working alliances on the street. In other words, do most encounters involve little time, or just the ones involving getting something accomplished?

**Strengths and limitations of this study**

One major strength of this study is its design that gave the words of people living unsheltered priority. I have captured in a snapshot the responses of people who live unsheltered when asked, “tell me about a time when you worked with someone else to get something you need.” When I started out each day to find a person to interview, I kept in mind, and was comforted by the thought that the world is “shifting, changing, dynamic” (Filstead, 1979). By design, this study takes advantage of the fact that the lives of people who live unsheltered are constantly changing. I did not plan or expect to find a participant again for a second interview, because I am aware that anyone I see today before lunch could end up arrested, hurt and in the hospital, or hopping a bus and headed to warmer climate. In fact, I believe that those aspects are the strengths and weaknesses of this study. First, the strength: by capturing the responses of people as they stopped and gave me their time and attention, I may have taken the first recording depicting how people living unsheltered talk about their working alliances. In many cases, there were similar themes and this is encouraging with respect to
how useful these findings may be to anyone interesting in helping people get into shelter and housing. More specifically, these responses from a small sample are rich, although maybe not as rich as other groups would have provided. However, my experience with people living unsheltered is that they rarely want to talk and just answer in one or two words and keep walking. So, in my assessment, the responses are rich and descriptive, which is a strength of qualitative research. Next, the weakness: by relying on interview questions that were intended to explore the phenomenon of the working alliance, with a focus on the role of trust in the process, I have in most case collected data on the working alliance, but may have fallen short in getting definitive details about the bonding component and how trust works in that bond. Looking back over my study design, I now see that I was ambitious. On one hand, I could have gone back for second interviews and settled deeper into questions about trust. However, I believe that the findings regarding the nature of the working alliance are useful and see future research growing out of this study.

Another weakness of this study is that the results are most likely influenced by my personal biases. This is a common criticism of qualitative research, which I respect. However, I believe I have used peer and dissertation committee supervision during this research to become aware of most biases that might be a problem. For example, I am aware that my familiarity and comfort with taking to people who live unsheltered may have led me to overlook some details when I went through the interview recordings and transcripts. In order to counter any bias I might have because of being too familiar with the subject, I immersed
myself in the data by listening to the recordings up to 30 times each, at different times during the day. I would try to clear my head of any preconceptions about the participant and to simply listen to what the person had to say. I am astounded by the amount of details that came out after listening to the interviews over and over again. I believe this approach gave me time to think about the interview between listening. I thought a lot about my reactions and tried to minimize them. In a way, I believe I became aware of my biases and then was able to do the analysis using constant comparative with more of an emphasis on the data and less of an emphasis on my reactions.

A final strength of this study is that since it was qualitative and exploratory, I collected several cases that vividly demonstrate the nature of the working alliance and the way participants talk about trust. I have used excerpts to illustrate how I think trust plays a role in the working alliances of people who live unsheltered. In contrast to a survey or more structured way of collecting data, I have kept my interview questions brief and iterative. During the interviews, I listened carefully and asked questions to get participant to go further with a response even if that meant not completing the interview guide. This may be viewed as a flaw in my methods, but I believe I used my best judgment in the short amount of time I had with participants to get the most details I could. In the next study, I imagine using what I have learned from this study to move beyond so much exploration and more in the direction of findings that may be more generalizable.
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Appendix A: Interview Guide

Here is a topic outline of interview questions that guided this study: I asked questions to understand the role of trust in successful working alliances, with specific focus on the bond component of those alliances.

For the purposes of this study, trust involves two concepts including 1) the will to be vulnerable to another person, and 2) the expectation of no ill-will from the other person involved.

**Topic 1: What is the story of a successful working alliance?**

*(this topic gets to the concept of vulnerability in the role of trust)*

**Objective was to get the participant to describe or related a story of their experience**

I. Will you talk to me about a time recently when you worked with another person to get something that you need/wanted/could use?

Prompts:

A. If they seem confused--Like food, cigarettes, sex, a spot to rest?
B. How did you decide to work with another person?
C. Tell me about this other person

1. How did you meet them or get to know them?
2. What were they like?
3. What made you decide to work with them

   D. Could you tell me what it feels like when you work with another person to get something you want?

   E. What was it like working with another person?

   1. At times did it feel risky or vulnerable? How so?

   2. At times did it feel comfortable? How so?

**Topic 2: What matters to you most in these interactions?**

*(this topic gets to the concept of expectations of no ill-will in the role of trust)*

**Objective was to get the participant to expand their story with details about what they expected or hoped for in the interaction.**

II. At times like the one in the story you just told me, What matters when you rely on another person to get you something?

   A. Do you need to know them or not?

   A. Can you let your guard down with just anyone and accept their help when you need it?

   B. How do you figure out if someone is safe to work with and let them help you?

IV. What do you expect when you rely on others for help?

   V. What are things that make you keep wanting to work with someone? That make you want to stop working with them?

VI. How did you feel when this was happening?

   B. Were you afraid?
C. Were you cautious?

D. Did you trust the other person?
   1. Will you talk a little about what you think trust is?
   2. Will you talk some more about whether that kind of trust is important to you when you work with someone to get the things you need to survive?