Broke but not without Hope: Exploring Exits from Housing First and Returns to Homelessness

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BROKE BUT NOT WITHOUT HOPE:
EXPLORING EXITS FROM HOUSING FIRST AND RETURNS TO HOMELESSNESS

by

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DEDICATION

This dissertation is dedicated to all those living on the margins, those without a home, and to those who have found hope in the midst of everyday violence and adversity.

Figure 0.1 The Urban Ministry Center Garden
ACKNOWLEDGEMENTS

First and foremost, I would like to extend my gratitude to the participants in this study who shared their experiences with me. I am grateful for being welcomed into their community. My eyes were opened to a world of survivors, for this I am forever grateful.

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Thank you to my family whose love has encouraged me to follow my dreams. Last but far from least, thank you to Derek—my husband and best friend whose depth of love and support keeps me afloat.
ABSTRACT

“…he succeeded in giving the impression of being broke but not without hope.”

Nels Anderson, *The Hobo*, 1923

*Introduction*: This research offers a thick and rich, multidimensional and situational look, into a Housing First program in Charlotte, North Carolina. This dissertation focuses on individuals who have experienced chronic homelessness who exit Permanent Supportive Housing (PSH) programs that employ a Housing First (HF) model and return to homelessness. The ultimate goal of my research was to address the gap in knowledge service providers have in housing retention for the chronically homeless and to break the cycle of misunderstanding around why people return to homelessness. In order to understand why individuals who have experienced chronic homelessness may assimilate to a street culture, exit housing, and return to homelessness I explored Social Disaffiliation Theory (SDT) and Human Motivation Theory (HMT).

*Research questions*: 1. What individual factors influence exits from Housing First programs among individuals who have experienced chronic homelessness? 2. What program factors influence exits from Housing First programs among individuals who have experienced chronic homelessness?

*Methods*: This study’s methodology is a qualitative inquiry that uses certain ethnographic
techniques. The combination of prolonged engagement, in-depth interviews, focus groups, and field observations enabled me to examine and analyze what individual and program factors contribute to people leaving housing and returning to homelessness. I conducted two pilot studies that provided an avenue for community engagement in Mecklenburg County.

*Findings:* Participants exited HousingWorks for multiple individual and programmatic reasons. Findings reveal that individuals in the chronically homeless population disaffiliate from mainstream society, however connect to a society on the margins. While living as a member outside of mainstream society the basic needs of the chronically homeless population are met and meaning is fostered through relationships. All exits in this study were tied to relationships individuals had with friends, family (of choice and biological), romantic partners, case managers, and neighbors. The relationships that impacted exits were sometimes strained connections with case managers or neighbors, but also favorable associations that provided desired bonds that were not being fostered in HousingWorks.
## TABLE OF CONTENTS

**DEDICATION** ........................................................................................................................................ iii

**ACKNOWLEDGEMENTS** .......................................................................................................................... iv

**ABSTRACT** ............................................................................................................................................. v

**LIST OF TABLES** .................................................................................................................................... ix

**LIST OF FIGURES** .................................................................................................................................... x

**CHAPTER 1** INTRODUCTION ...................................................................................................................... 1

**CHAPTER 2** REVIEW OF THE LITERATURE .............................................................................................. 13

**CHAPTER 3** METHODS ............................................................................................................................ 57

**CHAPTER 4** FINDINGS .............................................................................................................................. 76

**CHAPTER 5** DISCUSSION .......................................................................................................................... 127

**REFERENCES** ......................................................................................................................................... 150

**APPENDIX A** – UMC LETTER OF SUPPORT ............................................................................................ 168

**APPENDIX B** – INFORMED CONSENT LETTER ........................................................................................ 170

**APPENDIX C** – FACILITATION GUIDE: UNDER THE BRIDGE .............................................................. 172

**APPENDIX D** – INTERVIEW GUIDE: HOMELESS PARTICIPANTS ......................................................... 174

**APPENDIX E**–INTERVIEW GUIDE: FORMERLY HOMELESS PARTICIPANTS ........................................ 177

**APPENDIX F**–INTERVIEW GUIDE HOUSING FIRST STAFF ................................................................. 180

**APPENDIX G**–ECOMAPS ......................................................................................................................... 182
LIST OF TABLES

Table 2.1 Erikson’s Theory of Psychosocial Development ........................................... 45
Table 3.1 Inclusion Criteria ............................................................................................. 61
Table 4.1 Demographics ................................................................................................. 77
Table 4.2 HousingWorks Exits ....................................................................................... 79
Table 4.3 HousingWorks Residents .............................................................................. 80
Table 4.4 HousingWorks Case managers ...................................................................... 82
Table 4.5 HousingWorks Directors ............................................................................. 84
Table 4.6 Key for Ecomaps ............................................................................................ 97
LIST OF FIGURES

Figure 0.1 The Urban Ministry Center Garden................................................................. iii

Figure 4.1 EcoMap Haiti................................................................................................. 97

Figure 4.2 EcoMap Angie............................................................................................... 99

Figure 4.3 EcoMap Bryan............................................................................................. 101

Figure 4.4 Individual Factors....................................................................................... 103

Figure 4.5 Program Factors....................................................................................... 118
CHAPTER 1

INTRODUCTION

“You can’t change hope, hope is hope.” –Aaron, African American, Male, 55 years old

Why this topic?

This study explores why people leave Housing First programs and return to homelessness. My arrival at this topic was the culmination of not only my experience as a PhD student but also my journey as an artist and advocate. In 2002, I began volunteering in an art program at the Urban Ministry Center (UMC) in Charlotte, North Carolina where I worked with homeless participants to construct a mosaic wall. The theme of the wall was taken from the concept of “a-walk-about”\(^1\) and was intended to encourage homeless clients to express their life stories through visual representation. I developed relationships with people as I worked to build my own life story with broken pieces of mirror, colored plates, and glass. Many people I met had substance abuse issues, and their use was most times connected to traumatic childhoods and violent adulthoods. Learning about the layers of trauma and abuse people experienced was troubling and eye opening. This experience led me to pursue a graduate degree in social work. After graduate school in 2005, I once again became peripherally involved with the Urban Ministry Center. I

\(^1\) “A-walk-about” is a short period of wandering as an occasional interruption of regular work.
joined a few friends in “guerilla gardening”\(^2\). The three of us along with a number of homeless people we met at the UMC began planting flowers and vegetables near homeless campsites. Due to my extensive time spent outdoors around the center I got to know a number of people trapped in a cycle of chronic homelessness. Soon after my return, I accepted a full time position as a staff member at the UMC. When I became an employee, the relationships continued to grow but took on a different form negotiated by the rules of the organization. Although this decision took me from the streets to an administrative position, I never lost my desire to understand the culture I was just beginning to learn about. The development of friendships with those who make up a portion of the homeless population created a curiosity that guided me through my graduate studies. At every theoretical turn or methodological nuance, I found myself being pulled back to this close network of survivors who live/d on the streets of Charlotte. Therefore, I reached out to old friends who granted me access into a world that is invisible and scary, yet beautiful and fascinating. This dissertation is a testament to my empathy for those shunned by mainstream society and my admiration for their ability to find hope in the midst of tremendous adversity.

During my first conversations upon my return to the UMC in 2012, I found that many people labeled as chronically homeless were moving into housing through a program called HousingWorks. However, there were concerns amongst case managers and the homeless population because people were returning to their campsites or having a

\(^2\) “Guerilla gardening” is the act of gardening on land that the gardeners do not have the legal rights to utilize, such as an abandoned site, an area that is not being cared for, or private property.
hard time adjusting to a new life indoors. HousingWorks is the first program in Charlotte to utilize the Housing First philosophy. Permanent Supportive Housing (PSH) programs that employ a Housing First (HF) philosophy are the most common service delivery method for housing the chronically homeless. Under this model, housing is offered with no preconditions (Wong, 2006; Kresky-Wolff et al., 2010; Rog, 2014; USICH, 2015). Permanent Supportive Housing is a direct service that helps adults who are chronically homeless identify and secure long-term, affordable housing (Rog, et al., 2014). The principles of Permanent Supportive Housing state there are no time limits, and tenants may live in their homes as long as they meet basic obligations of tenancy. Individuals participating in these programs generally have access to ongoing case management services that are designed to preserve housing and address their current needs (Rog, et al., 2014). The goal of PSH is to secure long-term, affordable housing and to provide access to support services to homeless adults.

Studies conducted over the past decade have found that, compared with traditional housing models Permanent Supportive Housing for chronically homeless individuals reduced homelessness, increased housing retention, and resulted in fewer emergency room visits and hospitalization (Thompson, 2004; Rog et al., 2014; Tsemberis, 2015). In 2004, it was reported that Housing First programs sustained an 80% housing retention rate, a rate challenging clinical assumptions held by many housing providers who regard the chronically homeless as “not housing ready” (Tsemberis, 2004). This retention rate has been found in numerous studies across the country that has evaluated Housing First programs. Therefore, after listening to the concerns of individuals who are part of the
HousingWorks initiative and reading the literature on Housing First, I became curious about why some people are leaving this program and returning to homelessness.

I drew upon my connections with people I have known for over ten years to help me understand the housing conundrum experienced by those who are chronically homeless. In turn, the relationships that informed this study provided an in depth look into a population of people that exists on the margins of mainstream society. Within these margins the lives of the unwanted, the forgotten, the abused, those struggling with addiction, and the homeless can be found. People living in these margins find ways to make unwanted space not only useful but also beautiful. Creating life by planting gardens, painting outdoor living spaces, and building communities and networks for survival are reflections of the stories of resilience and hope that are also told in the interviews collected in this study. I met two homeless men, Alex and Jess, a few weeks before I started formally interviewing people for this study. I was impressed with their ingenuity and fortitude in creating their outdoor living space.

“Today I went with an outreach worker to a homeless camp. We met two men (Alex and Jess) at Dunkin’ Donuts across the street from their camp, which is located deep in a wooded area in between undeveloped lots on the edge of downtown near the football stadium. They have relocated from an area off the highway because the cops recently did a sweep of camps in the area. During the sweep the police destroyed the campground and threw away their camping equipment. We pulled into an over grown drive way and parked behind a chain linked fence with a sign that says “Private property, Do not enter”. We walked through a deserted parking lot that looked like an illegal dumping ground; tires, plastic containers, bottles, and decaying trashcans littered the space. As
we moved past the parking lot Alex and Jess maneuvered us through some more brush until all of a sudden we came to a very clear walking path. The path opened up to a beautiful southern wooded area, as we walked deeper into the woods we came to a large fire pit, and I could see two family size tents yards away from each other. Down a hill there was a creek that the two men had made a make shift water filtration system out of camping gear. They used this water for bathing, brushing their teeth, shaving, and cooking. If I didn’t know that I was in the heart of a busy urban city I could have been convinced I was on the Appalachian Trail of the North Carolina Mountains.” -Fieldnotes December 2015

Ultimately, Alex and Jess did not meet the inclusion criteria for this study. However, meeting them gave me the opportunity to ask their perceptions of the HousingWorks program.

“Alex and Jess met in rehab and decided to camp together after both of their housing options fell through. As we had coffee I asked them about their housing experiences. Alex was placed in a sober living house and Jess had lived in a Permanent Supportive Housing site for older adult men in recovery. During this time Alex would come visit Jess. Alex and Jess talked about how miserable they were in housing, Alex left first and established a camp, he then “convinced Jess to come camp because he was so miserable”. Jess recounted, “I hated it, all those people talking, sharing a bathroom, it was so loud, it was horrible. I needed to get up out of there.” We talked a little bit more, and then I asked both men if they had considered HousingWorks as a housing option. Jess immediately chimed in, “No way am I moving into that big building all the way out there, it looks like a prison.” Alex commented, “I couldn’t handle it, too closed in with
too many people.” Jess then said, “if we could have our own apartments beside each other, or be roommates, that would be ideal.” Alex agreed, “Yeah, then we could still watch out for each other.” -Fieldnotes December 2015

The Urban Ministry Center and Homelessness

From June 2012 through October 2016, I became acquainted with several dozen homeless and formerly homeless people who sought services provided by the Urban Ministry Center (UMC), the main stem for serving Charlotte’s chronically homeless population. For example, Alex and Jess were two men I met through the UMC. The center is a gathering place for people who have been homeless for a long period of time and also a place people go when they are first on the streets and need immediate help. The people I got to know over this period of time were both new and old acquaintances. Alex and Jess were new to me but some of the participants in this study I’ve known since 2002. Alex and Jess chose to camp together instead of living in housing, not out of necessity as neither had been evicted from their housing, but to be together where they felt safe. This interaction served as a harbinger for additional stories to come from the participants I formally interviewed for this study. To me this was another glimpse into a new way of understanding life in the margins.

The Urban Ministry Center is a microcosm of Charlotte, in both perceptions of homelessness and how services are designed to address poverty. In the early 1990s, Bank of America relocated its headquarters bringing jobs and people from around the globe to Charlotte. With this influx of business came urban renewal, gentrification, and the displacement of the poor who did not have the resources to keep up with the escalating
cost of living. In 1994, growing frustration with panhandlers in the uptown area, children and families seeking assistance at local churches, and a visible increase in the homeless population caused uptown congregations and businesses to create The Urban Ministry Center (www.urbanministrycenter.org, 2017). The Urban Ministry Center is an interfaith organization that draws support and funding from mostly volunteers and non-government donations (private individuals, congregations, corporations, and foundations) (www.urbanministrycenter.org, 2017).

As the city has grown so has the gap between the rich and the poor, and the need for the services the Urban Ministry Center provides. As a result, the UMC has expanded to include numerous social service programs including the housing program, HousingWorks. This expansion has essentially split the UMC into two arms with competing philosophies. The first arm is grounded in the center’s historical roots with a faith-based focus or in the social work parlance, a charity-based model. The philosophy guiding the second arm of the UMC has a programmatic focus connected to both government and non-profit entities. Public opinion is polarized on what it means to help the mentally ill and impoverished. On one hand, people want to help those living on the margins through faith-based organizations because of a moral imperative. On the other, they believe social services or law enforcement should take punitive measures against those who panhandle or live on the streets. As such, my approach to working with the UMC and the homeless population is premised on the anthropological concept of cultural relativism. Cultural relativism calls for the researcher to suspend moral judgment in order to understand practices outside of mainstream society. For me, it was a practical way to
gain access to the difficult reality of chronic homelessness and to critically analyze this as a social problem.

Homelessness is a complex topic. The people who fall into the chronically homeless category are not only living in poverty but often are socially isolated, mentally ill, abusive of drugs and alcohol, physically disabled, and recurrently sick (Kosa, 2009; Miller-McCune, 2009; Wright, 2005). Chronically homeless people are among the most vulnerable people in the homeless population (NAEH, 2015). This population tends to have high rates of behavioral health problems, including severe mental illness and substance abuse disorders, conditions that may be exacerbated by physical illness, injury, or trauma. The Urban Ministry Center homeless population do not embrace the term homeless or chronically homeless, instead referring to themselves as “camping at the moment” or “out here, living”. Many times people would deny they were homeless even though they were living in a camp or sleeping under a bridge. Although many reject this label they still endure the chronic pain, anxiety of hunger, fear for their safety, and social exclusion because of their transient existence. Compounding the struggle of living outdoors is the potential for arrest, violent assault, colds, flu, and skin infections, which are constant concerns.

Only through further studies can researchers more fully understand why individuals leave housing and return to homelessness. In the following section, I provide a statement of the research problem, the specific aims of this study, an overview of the methods, and contributions of this study to homelessness research.
Research Problem

At any given time there are over 610,000 people experiencing homelessness in the United States (HUD, 2015). The majority of the homeless population is comprised of individual adults (387,845 people) (HUD, 2015). Almost 92,600 people are considered chronically homeless, meaning they are living with a disability and staying in shelters or on the streets for prolonged periods of time (HUD, 2015). However, being homeless is more than a problem of not having a permanent place to live; homelessness is a human rights issue. The suffering of chronic homeless individuals is cumulative and embedded in societal and interpersonal abuses. Many people caught in a cycle of chronic homelessness are living with addictions to drugs, victims of domestic violence, sexual trauma, and physical abuse, and are exploited in general. The term abuse generally refers to interpersonal relations that violate an individual’s human rights and implies emotional, psychological, and/or physical suffering (Bourgois, 2009). Understanding societal abuse is important when studying homelessness in the United States, because many people consider homelessness and poverty to be caused by personal flaws or sinful behavior. In turn, inequality is reproduced within classes and within social groups perpetuating the abuse of those existing on the margins (i.e. the chronically homeless).

The abuses the chronically homeless population experiences have become a concern for many housing rights advocates. Therefore, over the past decade many communities have implemented Housing First programs to combat chronic homelessness. However, despite efforts to find a housing model to help people transition from chronic homelessness to housing, individuals are still leaving and returning to homelessness. In addition, people are not being asked why they are leaving nor are there standardized
protocols to track of where they go upon leaving these programs. Therefore, very little empirical data exists about what factors draw people back to homelessness and away from housing. Currently, this research is especially important because programs using the Housing First philosophy are replacing traditional housing programs in the United States yet the livelihoods of those displaced by this model have yet to be explored.

**Specific aims**

This study aimed to understand why people leave a Housing First program and return to homelessness. Housing First does not require residents to undergo psychiatric treatment or maintain sobriety prior to obtaining housing (Tsemberis, 2010). Vulnerable clients can engage in services and address their chronic medical conditions once they are no longer dealing with the instability of homelessness (Tsemberis, 2010). The low barrier nature of Housing First is designed to house those considered to be the hardest to house. Therefore, when numerous chronically homeless individuals leave these programs and return to homelessness, implications are that something is happening of which practitioners are not aware.

**Overview of methods**

The data for this study was formally collected from January 2016 until June 2016 from three sources. For the first source, I worked closely with the Associate Director of the Urban Ministry Center to identify people who exited HousingWorks and returned to homelessness. I then conducted in-depth interviews with 14 of the 22 who were identified (7 potential participants were either incarcerated or unable to be found) over the course of six months. To gain variation in sampling and perspective, for the second source I
conducted a focus group with people who live in the HousingWorks program. For the third source, I conducted a focus group with staff of the HousingWorks program and then conducted three face-to-face interviews with administrators. The goal of this sampling approach was to examine the perspectives of diverse groups, such as housed versus unsheltered, client versus staff, stays in housing and exits from housing, and from diverse socioeconomic statuses.

**Relevance of this research**

In the housing literature there is no unified definition of what it means for an individual to exit Permanent Supportive Housing programs using the Housing First philosophy. Across programs, the way that exits are labeled varies from positive and negative, to voluntary and involuntary, yet do not track where individuals go once they are no longer part of these programs. There is limited documentation of the number of people returning to homelessness or moving into different housing programs, mortality rates, health outcomes, and what service needs they have when they are no longer connected to housing.

Research on residents who leave supportive housing programs determined that involuntary exits were associated with psychiatric illness severity, substance use, functional status, and higher needs for intervention from residential support staff (Lee, Wong, & Rothbard, 2009; Wong et al., 2006). In comparison, residents who leave these programs voluntarily were more likely to move and stay in more independent living situations and to use fewer mental health services (Lee, Wong, & Rothbard, 2009; Wong et al., 2006). The reasons why individuals exit Permanent Supportive Housing programs
and return to homelessness are not reported or published in the literature. Therefore, the findings of this study contribute significantly by focusing on why a person leaves a Housing First program and returns to the streets. By acknowledging the differences between how clients and professionals described exits from HousingWorks, I believe I have uncovered a new way of understanding solutions to meeting the needs of the chronically homeless. In doing so, this study may provide new insights into the lives of those caught in a cycle of chronic homelessness.
CHAPTER 2

REVIEW OF THE LITERATURE

Historical Context

Court records from the earliest English settlements in America are filled with references to the traveling poor. Seventeenth and eighteenth century Americans brought from England old world suspicions of strangers and took harsh measures to suppress the transient poor (Golden, 1992; Liebow, 1993; Depastino, 2003). Settlement laws\(^3\), which remained in effect until the twentieth century, were established to protect towns from the responsibilities of poor relief for traveling men and women. These laws, however, were not enough to control the migrant workers impacted by the industrial revolution from wandering into cities and towns as they crossed the nation in search of labor (Golden, 1992; Liebow, 1993; Depastino, 2003).

With the Industrial Revolution in the nineteenth century, homelessness reemerged when people left their homes to find work where the economy boomed. Specifically in the United States, the homeless population would travel to the West to work in oilfields

\(^{3}\) The Settlement laws stipulated who could claim access to resources and who was liable for the cost. Each person had a legal settlement in one parish, according to his or her familial, occupational, and other circumstances. Samuel, 'Village labour'; Thompson, 'Custom, law', p. 139; Snell, 'Settlement, poor law', p. 146.
or lumberyards, while other times they migrated to wheat fields at harvest time; often they would find themselves in cities to learn of the newest labor opportunities (Golden, 1992; Liebow, 1993; Depastino, 2003; Patterson, 1981). The hobo world has its roots in America’s rapid industrial growth and the development of the railroad. However, before the hobo era, the traveling worker in America was fairly common throughout the seventeenth and eighteenth century as well.

The market and transportation revolutions of the 1820s and 1830s unleashed new streams of poor migrant workers throughout the country (Snow & Anderson, 1993; Depastino, 2003). The majority were single men seeking work on farms or as craftsmen who could do odd jobs that would earn them room and board (Snow & Anderson, 1993; Wormser, 1994; Depastino, 2003). Many workers who could not find a job in the more settled areas moved to the West to start new lives. Some of the workers who moved to the West became famous pioneers such as Daniel Boone and Davy Crockett (Wormser, 1994). Others became “mountain men” who lived with or near Native Americans, avoiding western settlers (Wormser, 1994). While settlement and commercial revolutions set new groups in pursuit of opportunity, they also dislocated farmers and craftsmen bankrupted by the wildly competitive economy (Snow & Anderson, 1993; Depastino, 2003). Rural farmers and craftsmen flocked to urban centers with many other workers in search of survival and wage labor.

The large numbers of workers who flocked to the cities lived in parks, around riverbanks, and in slums (Golden, 1992; Snow & Anderson, 1993; Wormser, 1994). Given the fact that they lacked roots in the community, they were often referred to as vagrants (Golden, 1992; Snow & Anderson, 1993; Wormser, 1994). The early vagrants
were both poor men and women. Many women vagrants were widows or those whose husbands and children had left home to find work and could not support them. With the advent of the factory system the number of women vagrants decreased as they found employment and room and board. Factory owners employed women and children because they were cheaper and less likely to strike than men (Golden, 1992; Snow & Anderson, 1993; Wormser, 1994). Female vagrants who did not find opportunities in factories or domestic work subsisted through the sex economy in city centers. Extensive migrations to find employment were difficult for women not only because of harassment and violence, but also because of exclusion from public lodging organizations that men could take advantage of. There was also a charitable sympathy for women vagrants that did not exist for men. In order to prevent women vagrants from wandering the roads, charitable organizations founded unprecedented numbers of caretaking institutions that provided work and housing (Golden, 1992; Liebow, 1993; Depastino, 2003).

The Civil War began in 1861 and provided work for many men and women who were traveling workers. Railroads were developed and factories were built to supply the needs of the army. After the Civil War the industrial revolution emerged with the expansion of the railroad at its center. Before the war, the United States had 35,000 miles of railroad track and by 1900 it had 193,000 miles of railroad track (Golden, 1992; Liebow, 1993; Wormser, 1994; Depastino, 2003). The railroad made it possible for manufacturers, farmers, and businessmen to transport their products to markets all over the country. Trains also carried hundreds of thousands of workers to fill the jobs the industrial revolution created. It is estimated that, by the end of the nineteenth century there were more than a million men on the road and railways seeking work. When the
industrialized economy boomed the era of the hobo was at its height as men crossed the country on trains seeking temporary wage labor.

During World War II the hobo era began to dissipate as the American economy became strong enough to support large numbers of Americans in more stable jobs (Snow & Anderson, 1993). However, with the coming of the Great Depression the number of homeless people began to rise again (Wallace, 1965; Snow & Anderson, 1993). In 1934, Nels Anderson testified before the U.S. Senate that the homeless population had risen to at least 1.5 million (Wallace, 1965). However, the situation of the homeless was dramatically different than in the days of the hoboes. During the era of the hobo, the “Main Stem” was the home of self-supporting hoboes and was a gathering place for political and intellectual engagement (Anderson, 1923). During the Great Depression, the Main Stem was transformed into skid row, where transients and men primarily dependent on charity lived (Snow & Anderson, 1993; Liebow, 1993; Wallace, 1965).

The policies developed under the New Deal marked the first time the federal government of the United States directly addressed the problems of the homeless population (Patterson, 1980; Rosenthal & Foscarinis, 2006; Willse, 2010). Before the New Deal of the 1930s, local laws still operated under the logic of the settlement laws (Patterson, 1980; Rosenthal & Foscarinis, 2006; Willse, 2010). To be admitted to a shelter, authorities required proof of belonging to a certain jurisdiction. This posed a challenge to the millions of traveling poor in search of jobs, who could not afford to return to jurisdictions where they were registered as settlers (Patterson, 1980; Rosenthal & Foscarinis, 2006; Willse, 2010). In response, the federal government formed the Federal Emergency Relief Administration (FERA), which established Federal Transient
Centers as well as camps in rural regions (Patterson, 1980; Rosenthal & Foscarinis, 2006; Willse, 2010). By 1934, New Deal administrators dismantled FERA, forcing many FERA centers to close down, dispersing their residents to lodging houses and other communities (Rosi, 1989). In addition to the federal response, the onset of World War II in the late 1930s caused the Great Depression’s homeless population to decrease, as people were absorbed into the workforce, and recruited into the armed services, and war industry (Patterson, 1980; Rosenthal & Foscarinis, 2006; Willse, 2010). After World War II, in the mid-1940s, the federal government provided benefits for veterans in an effort to assist them in transitioning back to civilian life. The time between 1945 and the 1950s was also the first time in American history in which the end of a war did not significantly increase the homeless population (Snow & Anderson, 1993; Wallace, 1965).

By the early 1960s, the populations of America’s skid rows had dramatically declined (Bogue, 1963; Bahr, 1967). Due to the availability of welfare benefits and entitlements, many who would be dependent on skid row’s cheap housing and services could live in other city neighborhoods (Snow & Anderson, 1993). Due to urban renewal and gentrification, homelessness reemerged as a significant social problem in the United States in the late 1970s and early 1980s (Relburn & Buss, 1986; Schutt & Garrett, 1992; Snow & Anderson, 1993; National Coalition for the Homeless, 2006; Willse, 2010). Therefore, in the early 1980s the initial responses to the widespread and increasing homeless population were primarily local. Local responses included charitable organizations that provided food, clothing, and shelter. However, due to the rising levels of homelessness across the nation, public and political debate was dominated by questions about who were the homeless, how many people were homeless, and why these
people were homeless (Rosenthal & Foscarinis, 2006). Answers to these questions corresponded to responses to ending and preventing homelessness from the 1980s into the present (Snow & Anderson, 1993; National Coalition for the Homeless, 2006; Rosenthal & Foscarinis, 2006; Willse, 2010). These responses continue to range from policies and programs that focus on changing the behavior of the individual, to those calling on social action, and ones that seek systemic solutions to ending homelessness (Rosenthal & Foscarinis, 2006).

**Homelessness: The 1980s-present.** In the literature, there are two historical moments of federal intervention repeatedly cited for understanding how homelessness developed as a current social problem: the New Deal of the 1930s, and welfare reform in the 1980s (Patterson, 1981; Rosenthal & Foscarinis, 2006; Willse, 2010). In the 1930s, the New Deal illustrated a direct federal response to the rise in the homeless population. The Great Depression resulted in a surge of homelessness as people left their homes in search of jobs and a new way of life. In contrast, welfare reform in the 1980s illustrated a response to a rise in poverty, but not a direct response to homelessness.

As the eighties began, incomes dropped, unemployment rose, and antipoverty programs were cut as poverty increased (Kozol, 1988; Golden, 1992; Snow & Anderson, 1993; Rowe, 1999). In addition to these structural factors, the individual characteristics of the homeless population began to shift as well. One change was in the average age of the individual who was homeless. During the skid row era, while the average age for males was over fifty, the homeless of the 1980s tended more often to be in their early to mid-thirties (Brown et al., 1983; Caulk, 1983; Robertson et al., 1985; Roth et al., 1985). The homeless population of the 1980s was also increasingly ethnically diverse (Golden,
1992; Snow & Anderson, 1993). Across the nation research regarding the numbers of the homeless population varied by region and community. However, most researchers found a greater portion of ethnic minorities than they had on skid row. In addition to more ethnic minorities, the proportion of women and families in the homeless population had also dramatically increased by the early 1980s (Burt & Cohen, 1989).

The differences between the homeless of the skid row era and the homeless of the 1980s included a shift in how the public perceived the issue as well as how the government responded. Urban renewal and gentrification dismantled skid rows in city centers leaving the homeless more visible to those in the housed population (Snow & Anderson, 1993; Rosenthal & Foscarinis, 2006). This increased visibility resulted in homelessness becoming a highly debated topic in public discourse. In the early 1980s, the public initially reacted to the increased visibility of the homeless population by ascribing certain behavioral characteristics to homeless individuals (Main, 1998). Voluntary characteristics were considered to be ones in which homelessness was a chosen lifestyle or a result of substance abuse as a failure of self-control. Involuntary characteristics were considered to be ones in which homelessness was the result of a physical or mental disability, or illness (Main, 1998).

By the mid-to late 1980s, individually based explanations of homelessness were increasingly challenged by researchers, activists, and advocates (Kozol, 1988; Snow & Anderson, 1993; Rosenthal & Foscarinis, 2006). The scholarly perspective shifted to focus on the involuntary displacement of people from housed lives by larger social processes such as scarcity in affordable housing, the deinstitutionalization of mental health hospitals, cuts in welfare programs, economic shifts, and gentrification (Snow &
Anderson, 1993; Rosenthal & Foscarinis, 2006). Specifically, the lack of low-income housing was cited as the most significant cause of the sudden increase in the national homeless population. In his first year in office Reagan had halved the budget for public housing and Section 8 to about $17.5 billion (Dreier, 2004).

The gap between tenants’ income and rent grew rapidly in the 1970s and 1980s and impacted those in the lower income brackets (Hartman & Zigas, 1991). Even economic recovery in the late 1980s did not relieve the homeless crisis. The new poor of the late 1980s were not being recalled to their former jobs, because their former plants were not being reopened (Salerno et al., 1984). Temporary layoffs in the late 1970s and early 1980s were from dying industries (Hopper & Hamburg, 1984). Two million jobs in steel, textiles, and other industries disappeared between the years of 1979 to 1985 (Kozol, 1988). Furthermore, nearly half of all new jobs created from 1979 to 1985 paid poverty-level wages. In addition to the gaps in income and the cost of living, the number of affordable housing units rapidly declined as new condominiums replaced single room occupancy (SRO) hotels (Hartman & Zigas, 1991). The result of all these factors combined was a massive increase of homelessness among the poorest Americans.

By the late 1980s public perceptions and discourse had mostly shifted to embrace a structural view of homelessness. A structural view of homelessness is understood in the literature as one in which the causes of homelessness are defined by systemic problems such as poverty, shifts in the economy, and the housing market, to name a few. A structural view on homelessness generated perceptions of possible solutions that addressed systemic problems. The morality of the individual was no longer at the center of debate when discussing who was homeless and why (Kozol, 1988; Snow & Anderson,
1993; Rosenthal & Foscarinis, 2006). The initial position of the Reagan administration in 1982 was that homelessness did not exist (Rosenthal & Foscarinis, 2006). In fact, one administration official publicly stated that no one was living on the streets (Hopper & Hamburg, 1986; Rosenthal & Foscarinis, 2006). In 1984, President Reagan expressed the view that homelessness was not a structural problem but that people were homeless by choice (Dreier, 2004). However, as pressure rose from the public, local governments, and homeless people themselves the federal government was forced to act.

Over the past decade, the way in which homelessness has been defined has undergone a significant shift. In the early 2000s, the term “chronic homelessness” was introduced by scholars researching a small percentage of individuals who experienced long-term or repeated episodes of homelessness but consumed the majority of emergency shelter resources (Byrne T. & Culhane, D., 2015; Kuhn, R. & Culhane, D., 1998). Research has found that these individuals have higher rates of physical and mental health disabilities compared with those who experience homelessness on a short-term basis (Tsemberis, 2007). In addition, those who are defined as chronically homeless have been reported to make frequent and costly use of general medical, behavioral, criminal justice, and other social services (Tsemberis, 2007; Culhane, 2015).

In 1987, the federal government authorized the McKinney-Vento act, which allocated a billion dollars over a two-year period and created fifteen new programs providing aid to the homeless population (Dreier, 2004). The McKinney-Vento Act is the federal policy that for the past twenty-five years has governed the education of homeless youth in the United States (Cunningham, 2014). The McKinney-Vento Act was named for two men, Congressmen Stewart McKinney and Bruce Vento, who were instrumental
advocates in the fight for fair and equitable education for children and who focused on the need for enhanced laws for homeless families (Tolliver, 2014). The McKinney-Vento Act defined homelessness as “lacking a fixed, regular, and adequate nighttime residence” (The McKinney-Vento Homeless Assistance Act, 2009). According to McKinney Vento, the term ‘homeless child and youth’ means individuals who are sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason (The McKinney-Vento Homeless Assistance Act, 2009). The McKinney Vento Act primarily provided emergency aid, with most of the funding going towards emergency shelter and food.

Until the mid 1980s, at the state level shelters and soup kitchens routinely operated by non-profits (mainly religious groups) were the majority of direct response to homelessness (Kozol, 1988; Snow & Anderson, 1993; Dreier, 2004; Rosenthal & Foscarinis, 2006). However, by 1996 as activists and advocates raised awareness and put pressure on the federal government, the government had become the primary provider for funding and organizing the delivery of services for the homeless population (Kozol, 1988; Snow & Anderson, 1993; Burt, 2001; Dreier, 2004; Rosenthal & Foscarinis, 2006). In the mid to late 1980s, local government responses to homelessness increased as federal dollars reached the local level (Kozol, 1988; Snow & Anderson, 1993; Dreier, 2004; Rosenthal & Foscarinis, 2006).

Homelessness persisted into the 1990s despite increased public awareness and federal interventions. Although public polls continued to show support for structural interventions such as access to housing, politicians supported more punitive approaches to homelessness directed towards the individual (Link et al., 1995) For example, at the
local level new ordinances were set in place that criminalized such acts as panhandling, sleeping and using the bathroom in public, and urban camping (National Law Center on Homelessness and Poverty (NLCHP), 1991). Despite interventions directed towards the individual on the local level, policy makers on the federal level argued that homelessness could be explained by a combination of both individual and structural factors. In the literature individual factors are understood as behaviors associated with homelessness for example, such as substance abuse, mental illness, or lack of independent living skills (Jencks, 1994; Main, 1998). Structural factors are understood to mean systemic reasons for homelessness associated with lack of affordable housing, poverty, or having little access to social services, to name a few (Jencks, 1994; Main, 1998). Despite the increase in funding, shelter space was not sufficient for the need, once again leaving the homeless more visible to the media and housed population (Simon, 1994; Main, 1998). In response, local officials across the country begin to turn to the police to remove the homeless from the streets and out of the public eye (NLCHP, 1993).

The belief that providing increased social welfare resources would attract homeless populations to cities with extensive homeless services is a regularly cited rationale for cities’ limitations on aid and programs for homeless people (Tsemberis, 2004). However, there is little research to support the idea that homeless people are more mobile than the housed population. In the literature it is discussed that in order to provide housing and services to the homeless population more local and federal money is needed, when in fact more money has been spent on hidden costs such as police arrests, medical costs at emergency rooms, and ambulance rides (Culhane, 2002; Tsemberis, 2004). During the 1990s, evidence began to accumulate that cost effective solutions to
homelessness were possible. In 1993, the incoming Clinton Administration made homelessness a top priority for the US Department of Housing and Urban Development (HUD) (Foscarinis, 2004). Funding for the McKinney-Vento Act increased from $362 million to $1.37 billion by 1995. Additionally, President Clinton asked Congress to approve a $2.5 billion budget increase for the Department of Housing and Urban Development that increased HUD's fiscal year 2000 budget to $24.5 billion.

Beginning in the early 1990s, the McKinney Vento Act shifted the emphasis away from emergency aid and toward exit and prevention (Bratt et al., 2006). The 1990 McKinney amendments included the Shelter Plus Care Program, which provided housing assistance tied to services for homeless people with disabilities, added prevention activities, and expanded on the Projects for Assistance in Transition from Homelessness (PATH) program aimed toward assisting mentally ill people (Foscarinis, 2004; Bratt et al., 2004). These changes emphasized a shift in understanding of the importance of the coordination of services aimed toward ending and preventing homelessness. Therefore, in 1994 the Clinton Administration adopted the Continuum of Care (CoC) approach for the McKinney housing and shelter programs (Foscarinis, 2004; Bratt et al., 2004). The CoC approach emphasized community-wide coordination between housing and services (Burt et al., 2002). Under the CoC model, the Emergency Shelter Grants program remained but the McKinney Vento programs that were emphasized were: Shelter Plus Care and Section 8 Moderate Rehabilitation Single Room Occupancy to increase the supply of affordable housing units (Burt, 2001). From 1988 to 1996 the number of transitional and permanent supportive housing units created by McKinney funding had expanded from none in 1988 to 274,000 by 1996 (Burt, 2001).
By 1996, most of the permanent supportive housing created was for people who were already homeless, with little focus on prevention. As the CoC process evolved through the late 1990s, goals changed to incorporate interventions geared towards not only housing the homeless but also preventing America’s poor from becoming homeless. Beginning in 2000, the National Alliance to End Homelessness (NAEH) proposed to end homelessness in ten years (NAEH, 2002). The proposal emphasized the importance of engaging the mainstream anti-poverty programs as well as providing more supportive housing for the chronically homeless population (Culhane, 2002; NAEH, 2002). In addition to the NAEH plan to end chronic homelessness, others argued that policy must aim to end all forms of homelessness.

In 2003, Congress introduced the Bring America Home Act (BAHA) that emphasized the need for housing, social services, health and childcare. The BAHA contains a wide range of contingencies, including housing, healthcare, and economic security, as well as civil rights provisions (National Coalition for the Homeless (NCFTH), 2012). However, in 2002 the first Bush administration’s proposed budget signified the start of a new downward trend in the federal government’s response to homelessness. During the Bush administration, there were significant cuts in Section 8 housing units, and the budget for HUD was cut by over $5 billion and included a proposal to eliminate the Community Development Block Grant (CDBG) (NAEH, 2003; HUD, 2012; NCFTH, 2012). Overall, the reduction of resources to address homelessness in the United States in the past two decades has resulted in a chronic homeless population.
Housing Strategies

Chronic homelessness is a complex social problem, and there is a range of strategies for housing people, depending on how this problem is understood. For example, three common approaches to homelessness are rapid re-housing (RRH), permanent supportive housing (PSH), and a Housing First (HF) philosophy that has been applied to both PSH and RRH. Rapid re-housing places priority on moving a family or individual experiencing homelessness into permanent housing as quickly as possible. Subsidies are shallow (generally lasting only a short period of time) and services focus primarily on overcoming immediate housing barriers. Permanent Supportive Housing (PSH) is for people who need long-term housing assistance with supportive services in order to stay housed (USIH, 2015). PSH refers to exiting homelessness and living long-term indoors and not returning to shelters or living outdoors. Permanent supportive housing is a component of the HUD’s Supportive Housing Program, which is HUD’s principal program to meet the needs of homeless people with disabilities and mental illness. Housing First is a philosophy that has been applied to both the rapid re-housing and PSH models. Housing First provides permanent, independent housing without prerequisites for sobriety and treatment, and offers supportive services through community treatment teams (Stefanci & Tsemberis, 2007).

Rapid re-housing (RRH) first emerged in the early 2000s when a number of programs across the country began experimenting with short-term financial assistance and the concept of rapid exits. The concept of a rapid exit refers to a process in which a central intake worker conducts an assessment of each individual or family’s barriers to finding housing (NAEH, 2015). Contracted housing providers’ help the family or
individual find housing and then offers support to the family, including responding to landlord concerns and mediating conflicts as needed (NAEH, 2015). Evaluations of the rapid re-housing model returned positive results in regards to housing stability, for both families and individuals, and encouraged communities across the country to emulate the rapid re-housing model. By 2008, HUD began accepting applications for the Rapid Re-Housing Demonstration Project, which provided 25 million dollars to 23 communities to pilot rapid re-housing. Rapid Re-Housing also grew out of recognition of the success in applying Housing First principles to house the chronically homeless.

Permanent Supportive Housing (PSH) is a direct service that helps adults who are chronically homeless or disabled identify and secure long-term, affordable housing (Rog, et al., 2014). The word “permanent” in permanent supportive housing means the length of stay is up to the individual or family. There is no time limit, and tenants may live in their homes as long they meet basic obligations of tenancy. Individuals participating in permanent supportive housing generally has access to ongoing case management services that are designed to preserve housing and address their current needs (Rog, et al., 2014). The goal of PSH is to secure long-term, affordable housing and provide access to support services to homeless adults with mental and substance use disorders. PSH programs differ from other living arrangements by providing a combination of flexible, voluntary supports for maintaining housing and access to individualized support services (SAMHSA, 2014).

National organizations and the Substance Abuse and Mental Health Services Administration (SAMHSA) have drawn from practice and research to identify several core elements of permanent supportive housing (Kresky-Wolff et. al, 2010). Within the
PSH model the core elements are tenant choice, access to housing, quality of housing, community integration, rights of tenants, affordability, coordination between housing and services, and separation of staff roles. Tenant choice refers to the tenant’s ability to choose the services they receive. As the tenants’ needs change over time they can choose to receive more or fewer services without losing their homes. Access to housing refers to the role of staff in facilitating access by proactively developing positive relationships with landlords, advocating on behalf of prospective tenants, and offering landlord incentives such as reimbursement for excessive damages or court costs should the tenancy be unsuccessful. Quality of housing refers to helping tenants secure housing that is safe, clean, and appropriate for human habitation. Community integration refers to providing housing and services that reduce stigma and offers tenants’ opportunities to interact with the broader community in which they live. Rights of tenants refer to the tenant’s independence. Within the PSH model, tenants have a lease in their name and control over their living space. Affordability refers to the PSH policy that tenants pay no more than 30 percent of their income toward rent and basic utilities. Coordination between housing and services refers to the communication and working relationship between support service staff and property managers to prevent evictions. Finally, the separation of staff roles means that the PSH model distinguishes between housing and services. This means that even if there are services provided onsite there is a separation of the staff that run the housing elements (such as rent collection) and the staff that are in charge of providing services (case management).

There is no single service delivery method within the PSH model. Supportive housing providers use evidence based practices in the delivery of services to chronically
homeless tenants. In the literature, the most common service delivery method for housing the chronically homeless is Housing First, in which housing is offered with no preconditions (Wong, 2006; Kresky-Wolff et al., 2010; Rog, 2014; USICH, 2015). Reportedly, the Housing First approach gained popularity through Pathways to Housing, which was implemented in New York City in the early 1990s and later replicated in several cities around the country (Miller-McCune, 2009; Collins et al., 2013). The Housing First approach is implemented in two main ways, scattered-site and single-site models (Thompson et al., 2004; Stefanic & Tsemberis, 2007; Collins et al., 2013).

In the scattered-site Housing First models, residents are offered a choice of individual housing units and access to a variety of supportive services (Tsemberis, 2012). Scattered-site housing is the evidence-based model SAMHSA is referencing when noting the characteristics of PSH. In single-site Housing First models, residents are offered units within a single housing project, where they are offered case-management and supportive services (Collins et al., 2013). Research on programs that employ the Housing First model have shown high rates of housing retention, especially when compared with continuum-of-care or linear residential housing (Stefanic & Tsemberis, 2007; Tsemberis, Kent, & Respress, 2012). However, there has been controversy surrounding these findings because the Housing First model does not require residents to change certain behaviors (e.g., abstinence from substances, participation in treatment) in order to acquire or maintain housing (Stefanic & Tsemberis, 2007).

Some service providers use the Vulnerability Index (VI) to identify and prioritize people who are homeless for participation in Housing First programs (Thompson et al., 2004). The VI identifies the most vulnerable individuals through a ranking system that
takes into account mortality risk factors and the duration of homelessness. This ranking allows communities to prioritize permanent supportive housing and other support services to those with the most severe health risks (USICH, 2015). The factors shared by those who are considered high-risk form the basis of the scoring for the VI. The VI is administered in the form of a survey, which captures a homeless individual’s health and social status (USICH, 2015). For individuals who have been homeless for at least six months, one or more of the following markers place them at heightened risk of mortality: more than three hospitalizations or emergency room visits in a year; more than three emergency room visits in the previous three months, aged 60 or older, cirrhosis of the liver, end-stage renal disease, history of frostbite, immersion foot, or hypothermia, HIV+/AIDS, and co-occurring psychiatric, substance abuse, and chronic medical condition (USICH, 2015). Although the use of the VI has grown, its use is not consistent across the country, and it is questioned as a research instrument by academics. The Vulnerability Index Service Prioritization and Decision Assistance Tool (VI-SPDAT) is now considered to be more rigorous than the VI. The VI-SPDAT is a pre-screening, or triage tool that is designed to be used by all providers within a community to quickly assess the health and social needs of homeless persons and match them with the most appropriate support and housing interventions that are available (OrgCode Consulting, 2015).

In the literature, housing retention rates in PSH programs are routinely compared to two traditional approaches to housing the chronically homeless, the continuum-of-care and linear residential housing. The continuum-of-care is a concept involving a system that guides and tracks patients over time through an array of health services (HIMSS,
2015). The continuum-of-care focuses on recovery from substance abuse, and mental and/or physical illness as part of the process before finding housing for the chronically homeless. Similarly, linear residential housing contains several settings that provide different levels of service with the most intensive treatment offered in the most restrictive setting (Ridgway & Zipple, 1990; Collins et al., 2013; Tsemberis, 2012). The goal of both the continuum-of-care and linear residential housing models are to move the client out of the mental health system and into independent living (Ridgway & Zipple, 1990; Collins et al., 2013; Tsemberis, 2012). Results show 80% of people have successful housing outcomes for persons in Housing First–versus only 30% stable housing outcomes for people in traditional treatment based models that use treatment and sobriety prerequisites for obtaining permanent housing (SAMHSA, 2011).

Results from numerous studies report conflicting information regarding comparisons of housing retention in PSH programs and traditional housing models. In one study conducted in 2004, a Housing First program sustained an approximately 80% housing retention rate, a rate that challenges clinical assumptions held by many continuum-of-care supportive housing providers who regard the chronically homeless as “not housing ready” (Tsemberis, 2004). Similar studies conducted over the past decade have found that PSH for individuals with mental and substance use disorders, compared with traditional housing models reduced homelessness, increased housing retention, and resulted in fewer emergency room visits and hospitalization (Thompson, 2004; Rog et al., 2014; Tsemberis, 2015).
The Aging Homeless Population

People who live on the streets have higher rates of early mortality than the general population (Cohen, 1999; Hibbs et al., 1994; Hwang et al. 1998; Morrison 2009), with the average age of death for a homeless person cited as 39 years (Trypuc & Robinson, 2009; Grenier, 2012). Research indicates that gradual declines and/or trigger events (Shinn et al., 2007; Gonyea et al., 2010), as well as various individual and structural factors, contribute to later life homelessness. Structural issues associated with homelessness include inadequate affordable housing; fewer available jobs, leading to competition for employment and poverty among some older adults; and policies that limit certain individuals’ access to health, disability and pension benefits (Lee et al., 2010; Tully & Jacobson, 1994). Poverty research shows that 28% of adults aged 66 and older do not have sufficient financial assets to survive at the low-income threshold for three months (Rothwell & Haveman, 2013). People with lower levels of education are at greater risk (Rank & Williams, 2010), and persons released from prison are more likely to be homeless than those who have never been incarcerated (Kushel, Evans, Perry, Robertson, & Moss, 2003; Metraux & Culhane, 2006). Other findings indicate that those who experience higher levels of victimization and poverty when younger are more likely to be homeless later in life (Browne & Bassuk, 1997; Koegel, Melamid, & Burnam, 1995; North, Smith, & Spitznagel, 1994; Stein, Leslie, & Nyangathi, 2002; Toro, 2007), as are those who experience traumatic life changes if they have limited social and family networks (Morris et al., 2005). People who experience these vulnerabilities may lack the skills or resources to cope with emergency situations. In turn, these situations may trigger homelessness (Crane & Warnes, 2005).
The older adult population historically, has been underrepresented among the homeless population. A 1996 national study by the Urban Institute found that, while those over age 55 represented 28% of the general adult population, they made up only 8 percent of the homeless population (Burt et al., 2001). There are more Americans over the age of 65 today than every before and the number is rapidly increasing. During the past century, the number of older people has grown from 3.1 million in 1900 to 37 million in 2008 (Sermons & Henry, 2010). This demographic shift means that we have become an older nation, with a median age of almost 37 years old-the country’s highest median age on record (Sermons & Henry, 2010). The U.S. Census Bureau projects that by 2050 there will be approximately 89 million people over the age of 65, which will more than doubles our current older adult population (Sengupta et al., 2010).

The US Department of Housing and Urban Development estimates that there were 43,450 homeless people over the age of 62 in 2008 (HUD, 2009). Based on these estimations of the older homeless population, HUD projects that homelessness is to increase by 33% from 44,172 in 2010 to 58,772 in 2020 and will more than double between 2010 and 2050, when over 95,000 older persons are projected to be homeless (National Alliance to End Homelessness, 2009). Older chronically homeless people often require intensive service coordination as they often face barriers to accessing resources and benefits such as Social Security, Medicare, and Supplemental Security Income (SSI). From my research, I have observed that participants may not know they are eligible, they may not know where to start, and they may have a hard time following up with service providers, meeting appointments, or completing the necessary paperwork due to mental or physical health limitations (HUD, 2007).
Chronically homeless older adults who age into homelessness often have critical health and service needs in addition to their housing needs (Sermons & Henry, 2010). In the aging homeless population there are roughly four men for every woman; the percentage of women as ranged from 8% to 30% in various studies (Bissonnette & Hijjazi, 1994; Burt, 1992; Douglass, 1988; Ladner, 1992; Roth Toomey, & First, 1992). Older women generally are able to stave off becoming homeless more easily than men because of economic factors. For example, welfare programs have been oriented toward women and children rather than “able-bodied” men (Marin, 1991). Older women reported becoming homeless for the first time in their mid-fifties whereas older men reported coming to live on skid row permanently in their mid-forties (Cohen, 1999). Several studies have found that older homeless people are more likely to be White whereas the younger homeless tend to be non-White, particularly African American. Minorities are disproportionately represented among the aging homeless population. Numerous studies have found that older African Americans were more likely than older Whites to have multiple episodes of homelessness (Gelberg et al., 1990; Keigher & Greenblatt, 1991).

In general, homeless people have higher overall rates of mental health problems compared to other populations however, there have been mixed reports on whether the older homeless have higher or lower rates of mental illness than the general homeless population (Garibaldi, Martel, and O’Toole 2005; George et al. 2008; Hahn et al. 2006). Scholars have argued that mental health problems are one of the major issues affecting the older homeless population. The literature demonstrates that mental health problems can be either a cause or result of homelessness in adults (Crane and Warrens, 2001). Research has shown that mental health is a factor leading to the continuance of
homelessness in older adults and that the presence of psychosis or history of psychiatric 
hospitalization was significantly related to the inability of the older homeless to be placed 
in permanent housing (Cohen, Ramirez, & Teresi 1997).

**Predictors of homelessness among older adults.** As incomes stagnate and 
housing costs rise, adverse events may lead older adults to become homeless for the first 
time late in their life (Shinn et al., 2007). Additionally, there are five risk factors 
documented in the literature that contribute to homelessness in poor people over the age 
of 55 (Shinn et al., 2007). These factors include disability, economic, human, and social 
capital, and stressful events leading up to homelessness (Shinn et al., 2007; Dietz, 2007; 
Crane et al., 2005). Disability includes substance abuse, and physical and mental illness, 
which are believed to predate an individual’s homelessness. The lack of economic, 
human, and social capital is also documented to contribute to an older adult’s tendency to 
enter into homelessness.

In the literature, economic capital refers to home ownership as the primary 
monetary asset for middle-class adults. Therefore, low levels of home ownership and 
high levels of economic stressors are considered predictors for older adults entering 
homelessness (Shinn et al., 2007; Dietz, 2007; Crane et al., 2005). Economic stressors 
and stressful life events are described as transitions that may serve as a cause for 
homelessness. These events include but are not limited to widowhood, marital 
breakdown, stopping work, evictions and onset or increased severity of mental or 
physical illness (Crane et al., 200). Human capital refers to the ability to earn economic 
assets, which include educational attainment and work history (Shinn et al., 2007; Dietz,
Social capital refers to the social and organizational ties on which an individual can draw on for assistance (Shinn et al., 2007). Many studies have found that homeless individuals and families lack social support or exhaust relatives’ and friends’ resources before becoming homeless.

In many cases homelessness in older age results from a combination of risk factors (e.g., a housing shortage or an individual’s mental or physical health problems) and causes (widowhood or withdrawal of social security benefits) (Crane et al., 2005). These risks and causes when combined with poverty, addiction problems, mental illness, and a lack of resources, skills, or social support are documented in the literature as results in homelessness among older adults (Shinn et al., 2007; Dietz, 2007; Crane et al., 2005).

**Homelessness and premature aging.** Homeless people are thought to experience accelerated aging relative to the general population (Cohen, 1999). Older homeless adults, aged 50 and older, have high rates of impairments in activities of daily living (IADLs), which may increase their risk for need of care and nursing home placement (Lawton and Brody, 1969; Brown et al., 2016). Common IADLs are considered to be the inability to perform activities of daily living such as: bathing, dressing, eating, using the toilet, taking transportation, managing medication, managing money, applying for benefits, setting up a job interview, and finding a lawyer (Brown et al., 2016). IADLS typically first occur in housed adults aged 75 and older. In addition, older adults who live in stable housing may be able to modify their environment to adapt to geriatric impairments (Brown et al., 2016). In contrast, older homeless adults living in unsheltered environments or frequently moving locations have a more difficult time living
independently (Brown et al., 2016). IADLs are high in older homeless adult populations. A recent study found that despite the median age of 58 years, homeless participants had rates of IADLs similar to or higher than adults in the general population with a median age of 80 years (Brown et al., 2016; Kelsey et al., 2010). The high prevalence of IADLs in homeless people living in unsheltered environments calls for broader solutions that address both housing and health care for older adults (Brown et al., 2016).

**Gaps in the Literature**

Current research on the development of chronic homelessness as a social problem, strategies to prevent and end chronic homelessness, and retention rates for individuals in programs that employ the Housing First model have inconsistent findings. Several studies have examined the process of an individual’s time in PSH programs and variables that contribute to their exits (Thompson et al., 2004; Henwood et. al., 2014; Benet et. al., 2015). However, neither the challenges of moving indoors, nor the transition experiences of the individuals moving from homelessness to housing are well studied. Over the past five years, of sixty-nine studies focused on housing the homeless, only four focused on the experiences of those that have exited housing and returned to homelessness. In addition, of these four studies two focused specifically on housing the chronically homeless through Housing First (Lee, Wong, & Rothbard, 2009; Wong et al., 2006). Absent in the literature is a discussion on factors regarding why people may decide to leave, and what happens to them once they leave these programs.
Context of study

In this section I will explain the basic tenets of the Housing First model, the HousingWorks program, and the physical context of homelessness in Charlotte. I became interested in exits from HousingWorks and returns to homelessness in Charlotte from working with the chronically homeless population. I also noticed an increase in the criminalization of homelessness in local media, alongside stories of urban renewal, a mass transit system, the construction of breweries and restaurants in the uptown area, and an increasing population of young professionals from around the country moving to the region. As the city develops, affordable housing has become scarce and homelessness is more visible. Charlotte now ranks last out of the country’s largest cities in terms of upward mobility (http://www.equality-of-opportunity.org). While uptown Charlotte has become a popular destination for new apartments and entertainment. Historically, this has been where the homeless community gathers due to the close proximity to social service agencies and shelters. With the increase of apartments and nightlife in this area, uptown residents and the homeless community have quickly clashed. Residents started complaining to the police of panhandling, and seeing people sleeping on benches, and/or urinating outside of apartments. In response, the Urban Ministry Center in partnership with the Men’s Shelter of Charlotte, Salvation Army Center of Hope, the Mecklenburg County Sheriff’s Office, Criminal Justice Services, Provider Services Organization and the Public Defender’s Office joined resources to attempt to end chronic homelessness through a Housing First perspective by December 2016. These groups did not reach their deadline for ending chronic homelessness in Charlotte and extended their effort through 2017 in concert with Built for Zero, a national effort to end chronic homelessness
It was an ambitious goal, especially when the chronic homeless population is ever changing, expanding and largely invisible. With this in mind, it is important to understand the context in which this study takes place.

**Basic tenets of Housing First**

The Housing First philosophy is built on a core practice of respecting clients’ priorities. To name a few, clients’ priorities refer to meeting specific individual needs such as safety and security, and the opportunity to transfer from one housing situation to another if tenancy is threatened. The Housing First model originated through the non-profit corporation Pathways to Housing in New York City in 1992. The Pathways’ Housing First program is built on two decades of clinical and operational research, manuals, and fidelity standards (Tsemberis, 2010). This program has been replicated across the United States, Europe, Australia, and Canada. The Pathways approach to housing is providing housing first and then to combine that housing with supportive and treatment services. Although this approach sounds simple, it is a complex clinical and housing intervention.

Housing First is comprised of three major components, a) program philosophy and practice values, b) permanent independent housing, and c) community-based, mobile support services (Tsemberis, 2012). Each of these components includes both structural and operational aspects. For example, the first component-program philosophy and values-includes principles of psychiatric rehabilitation, recovery, consumer choice, and the belief that housing is a basic human right, these values directly correspond to Housing
First practices (Tsemberis, 2012). The extent to which a program embraces the Housing First philosophy and operates in a manner that is consistent with these principles is a measure of its’ fidelity to the Housing First model (Tsemberis, 2012). The second component—permanent independent housing—emerged as the dominant approach in response to client choice. Although two approaches have emerged in Housing First, scatter-site and single site, the evidence based (Pathways) model is identified with scatter-site individual apartments. The evidence based retention rate for the scatter-site model is 85%; an evidence base for single site has not yet been identified (Tsemberis, 2012). The third component is community-based support services in which the services component should take different forms depending on the needs of clients served (Tsemberis, 2012).

The Housing First model requires training, practice, and supervision. The Pathways program is based on the principles of consumer choice and individualized treatment. Translating these principles into day-to-day decisions on the program level requires input from each client. Each client makes unique choices, therefore programs that employ this model must be prepared to be flexible and open to client driven solutions. When implemented correctly, Housing First looks like a home that is integrated into the community, the program participants live among fellow citizens, and client choice is at the foundation.

The rapid dissemination of the Pathways’ Housing First program has encountered a number of challenges. Programs should follow the evidence based Housing First fidelity criteria in order to work effectively. Housing First fidelity criteria include a) eliminating barriers to housing access and retention, b) fostering sense of home, c) facilitating
community integration and minimizing stigma, d) utilizing a harm reduction approach, and e) adhering to client choice and providing individualized consumer-driven services that promote recovery (Stefanic, 2013).

**HousingWorks**

HousingWorks is the Housing First program through the Urban Ministry Center that I focused on for this study. This program does not offer housing to chronically homeless families. HousingWorks has three options for housing chronically homeless individuals. The options for housing are a 120-unit single site; 90 scatter-site apartments; and 45 scatter-site apartments through a partnership with Mecklenburg County. A team of social workers, therapists, a full-time nurse and a part-time psychiatrist provide supportive services to manage the transition from long-term homelessness to housing, and to help individuals meet personal goals.

The Urban Ministry Center chose the Housing First intervention because of it’s proven cost effective measures in addressing homelessness. The average community cost of a chronically homeless person is more than $39,000 per year in shelter, hospital, emergency room and jail costs (www.urbanministrycenter.org). According to the Urban Ministry Center, HousingWorks can provide stable housing and case management to the same person for $13,983 annually (www.urbanministrycenter.org).

**Physical context**

As a community activist and visual artist, I have spent time visiting campsites, walking the streets, and creating art with the homeless population of Charlotte. From my observations as a researcher I have come to see art as the language of the disenfranchised.
In campsites and around the soup kitchen, art is a way in which people living on the margin communicate their history and find meaning in the present. During my fieldwork, I would often spend time in between or after interviews, viewing art and having conversations with the artists. The homeless artists were open to sharing their perspectives of what they were working on, and our conversations usually turned to discussions of life circumstances. These interactions are an indication of the steps I took to gain an emic understanding about why individuals exit housing programs and return to homelessness. Talking to homeless artists while in the field helped me to develop a storyline to guide my analysis. The storyline is *Broke but not without hope: Exploring exits from Housing First and returns to homelessness*, which is the analytical thread that unites and integrates the major themes in this study. The storyline tells the importance of hope in the face violence, poverty, and institutional oppression.

**Theoretical framework**

In this study, I used Social Disaffiliation Theory and Maslow’s Theory of Human Motivation (hierarchy of needs) as animating descriptors of what is guiding the community response to the homeless problem. I chose to explore these theoretical perspectives because they are embedded in the underlying assumptions of common programmatic responses and volunteer work with the homeless population. In order to further explore the concept of street culture assimilation as outlined by Social Disaffiliation theory, I drew upon Erikson’s (1950) psychosocial stages of development and Elder’s (1998) identity development through life course model. I also explored Elder’s (2003) Life Course Theory to help me understand how historical and social
changes may have altered the life course and developmental trajectories of participants. A critique of this study’s theoretical framework is discussed in the final chapter.

**Social Disaffiliation Theory.** A key component of Social Disaffiliation Theory points towards a detachment from mainstream society through the lack or weakening of affiliative bonds that link people to a network or to interconnected social structures (Bahr, 1973). In the simplest of terms, affiliative bonds refer to the human need to be with others. According to Bahr and Caplow (1974), homelessness is a condition of detachment characterized by the absence of the affiliative bonds that link housed persons to a network of interconnected social structures. Affiliative bonds refer to family relationships, education/occupation opportunities or experiences, and participation in voluntary associations. Bahr and Caplow (1974) assert that affiliative bonds are absent among the homeless. These bonds include: family, education/occupation experiences, and involvement in voluntary associations. Bahr discussed three paths to disaffiliation. The first path is what he called external changes, natural changes, or situation changes (e.g. loss of a job or death in the family). The second path is the person’s voluntary withdrawal from the community (e.g., drug addiction). The third path Bahr postulated is a person’s lifetime of isolation from all aspects of ties that occurs amongst individuals with mental illness or physical disabilities (Bahr, 1973).

Bahr (1970) defined disaffiliation as detachment from society through the lack or weakening of affiliative bonds that link people to a network or to interconnected social structures. Street culture assimilation is a concept drawn from Social Disaffiliation Theory. Street culture is conceptualized as encompassing access to information regarding
homelessness, values, associations, and lifestyle preferences of those who are chronically homeless. According to Social Disaffiliation Theory, this assimilation supports and gives meaning to life on the street, but may make it difficult to reenter housed society (Wallace, 1965; Piliavin, 1993). Individuals begin to assimilate to life as a homeless person living outdoors once they have detached from housed society. The detachment from housed society and the development of new relationships results in assimilation to the social norms of other individuals living outdoors. Through this process of assimilation, bonds and relationships are developed that are valued above having basic needs met such as food, shelter, and safety as provided through housing programs. These bonds result in a return to homelessness, which, in turn contributes to a continued state of chronic homelessness. Disaffiliation leads to a return to homelessness because homelessness is a condition of detachment from housed society (Bahr, 1973). This detachment is characterized by the absence of the bonds that link persons to a network of interconnected social structures (Caplow, et al. 1968). These social structures include but are not limited to, family, education, occupation, and voluntary associations. In turn, while homeless, individuals may have lost bonds with housed society. Therefore, when transitioning into housing individuals may feel a draw back to their life outdoors when they lack bonds to housed society, or do not recognize the social norms of housed society.

**Identity development.** I explored Erik Erikson’s (1950) theory of psychosocial development comprising of stages from infancy to adulthood and Glen Elder’s (1974) theory on social pathways across the life span to understand identity development in economically disadvantaged groups. The core concept of Erikson’s theory is the establishment of personal identity is the psychological connection between childhood and
adulthood. This theory has eight distinct stages and assumes that a crisis occurs at each stage of development. Successful completion of each stage results in a healthy personality and the acquisition of basic virtues used to resolve subsequent crises (McLeod, 2013). Erikson (1963) suggests that these crises are of a psychosocial nature because they involve the psychological needs of the individual conflicting with the needs of society. The first five stages begin in infancy and extend up to the age of 18 years and the three further stages go into adulthood (McLeod, 2008). The stages of psychosocial crisis and the basic virtues attained are displayed in the following table.

**Table 2.1 Erikson’s Theory of Psychosocial Development**

<table>
<thead>
<tr>
<th>Psychosocial Crisis</th>
<th>Virtue Attained</th>
<th>Age</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trust vs. Mistrust</td>
<td>Hope</td>
<td>Infancy 0-1 ½</td>
</tr>
<tr>
<td>Autonomy vs. Shame</td>
<td>Will</td>
<td>Early Childhood 1 ½-3</td>
</tr>
<tr>
<td>Initiative vs. Guilt</td>
<td>Purpose</td>
<td>Play Age 3-5</td>
</tr>
<tr>
<td>Industry vs. Inferiority</td>
<td>Competency</td>
<td>School Age 5-12</td>
</tr>
<tr>
<td>Ego Identity vs. Role Confusion</td>
<td>Fidelity</td>
<td>Adolescence 12-18</td>
</tr>
<tr>
<td>Intimacy vs. Isolation</td>
<td>Love</td>
<td>Young Adult 18-40</td>
</tr>
<tr>
<td>Generativity vs. Stagnation</td>
<td>Care</td>
<td>Adulthood 40-65</td>
</tr>
<tr>
<td>Ego integrity vs. Despair</td>
<td>Wisdom</td>
<td>Maturity 65+</td>
</tr>
</tbody>
</table>

(McLeod, 2008).

Building on Erikson’s theory, Elder (1974, 1998, 1999) discusses the impact of social context on psychosocial maturation as developmental precursors of adult identity. Elder’s (1999) theory addresses how adolescent contexts such as family social economic status, race-ethnicity and gender influence psychosocial development and adult identity.
formation. According to Elder (1999), youth from poor and working-class backgrounds are more likely to take on greater household and financial responsibilities and have more adult-like interactions with adults than their more economically advantaged peers. The extension of adult responsibilities to children accelerates their psychosocial development. However, within the context of poverty these tasks are often done so without the support and guidance from adults and parents (Burton, 2007). Psychosocial adjustment through the life course in economically disadvantaged groups has consequences for adult identity (Benson & Elder, 2011).

**Life Course Theory.** In order to further understand how social and historical contexts may impact the findings from this study I explored Glen Elder’s Life Course Theory (2003). Elder (2003) outlines concepts and principles in Life Course Theory that explain how individual lives and decisions are embedded within specific contexts. There are three concepts developed from Life Course Theory that are helpful in thinking about how lives are socially organized: social pathways, trajectories, and turning points (Elder et al., 2003). According to Elder, social pathways are the courses of education and work, family and residences that are followed by individuals and groups through society (2003). “Large-scale social forces can alter these pathways through planned interventions (e.g., funding for education) and unplanned changes (e.g., economic cycles and war)” (Elder et al., 2003, p.8). Elder postulated that individuals choose the paths they follow; yet choices are always constrained by the opportunities structured by social institutions and culture (Elder et al., 2003). The second concept, trajectories or sequences of roles and experiences, are made up of transitions or changes in roles. Examples of transitions include leaving a parental home, becoming a parent, or retiring (Elder et al., 2003).
Transitions often involve changes in status or identity, both personally and socially and result in opportunities for behavioral change. The third concept, turning points, involves a change in the direction of one’s life. A turning point may involve returning to school in midlife or losing a job. According to Elder, most turning points involve work issues, including job changes and job insecurity (2003).

Life Course Theory entails understanding that lives are influenced on multiple levels from the macro structures and social institutions of society to the micro experience of individuals. The life course model provides a framework for studying “phenomena at the nexus of social pathways, developmental trajectories, and social change” (Elder et al., 2003, p.10). There are five general principles that emerged from the life course paradigm, which are discussed in detail below.

1. The Principle of Life-Span Development: Human development and aging are lifelong processes. By viewing life changes in the context of time we can begin to understand the interplay of social change and individual development. Adults experience fundamental changes—biological, psychological, social—that are developmentally meaningful as they age (Elder et al., 2003).

2. The Principle of Agency: Individuals construct their own life course through the choices and actions they take within the opportunities and constraints of history and social circumstance. People make choices and compromises based on social influences and structural constraints. The planning and choice making of individuals, within the particular limitations of their world, can have important consequences for future trajectories (Elder et al., 2003).
3. The Principle of Time and Place: The life course of individuals is embedded and shaped by the historical times and places they experience over their lifetime. Individuals and birth cohorts are influenced by historical context and place. In addition, the same historical event or change may differ in substance and meaning across different regions or nations (Elder et al., 2003).

4. The Principle of Timing: The developmental antecedents and consequences of life transitions, events, and behavioral patterns vary according to their timing in a person’s life. Events and experiences may affect individuals in different ways depending on when they occur in the life course. Additionally, the very meaning of an event can change at different developmental stages. For example, becoming a parent at a young age and transitioning into adulthood has detrimental effects on an individual’s mental health when compared to individuals who transition into adulthood who are not parents. The differential experiences in the transition to adulthood explain the emergence of gaps in socioeconomic status as a person develops through adulthood (Elder et al., 2003).

5. The Principle of Linked Lives: Lives are lived independently and socio-historical influences are expressed through this network of shared relationships. Often, individuals are affected by larger social changes on the macro level that impact interpersonal contexts on the micro level. The initiation of new relationships can shape lives as well by fostering “turning points” that lead to change in behavior (Elder, 2003, p. 13). And, because lives are lived interdependently, transitions in one person’s life often entail transitions for other people as well (Elder, 2003).
The five principles of Life Course Theory recognize that individual choice and decision making is impacted by larger social contexts and history and of the timing of events. They also enhance the understanding that human lives cannot adequately be represented when removed from relationships with significant others. Life Course Theory promotes a holistic understanding of lives across time and changing social contexts (Elder, 2003).

**Human Motivation Theory.** Maslow’s (1943) Human Motivation Theory asserts that human needs arrange themselves in “hierarchies of prepotency” (p. 370). The appearance of one need usually follows the satisfaction of another more pre-potent need (Maslow, 1943). There are at least five sets of goals, which Maslow calls basic needs (physiological, safety, love, esteem, and self-actualization). Humans are motivated by the desire to achieve or maintain the various conditions by which basic satisfaction and intellectual desires rest (Maslow, 1943). These basic goals are related to each other in the form of a hierarchy of prepotency. Maslow contended that human behavior is first motivated by the unconscious need to satisfy basic or physiological needs. It is only after a human being satisfies their physiological needs will they begin to have the desire to meet needs in different categories. Once basic needs are relatively well gratified, safety needs emerge as a new set of needs to be met. Following safety needs are love needs, and then esteem needs, and once all these needs are satisfied the need for self-actualization emerges. “This means the most prepotent goal will monopolize consciousness” (p. 394) and “the less prepotent needs are minimized, even forgotten or denied” (Maslow, p.395, 1943).
Although Maslow posited the hierarchy principle is empirically observed, he also noted reversals of the average order in the hierarchy. Maslow discussed that an individual may lose the higher wants in the hierarchy or choose to forego basic needs for psychological stimulation under special conditions. Maslow (1943) classified the reversal or reorganizing of the hierarchy of needs as “any thwarting of these basic human goals, or danger to the defenses which protect them is considered to be a psychological threat. With few exceptions, all psychopathology may be partially traced to such threats. A thwarted man may actually be defined as a sick man” (p. 395).

**Pilot work**

I conducted two pilot studies in preparation for this dissertation. In the spring of 2013, I was awarded a grant through the Mecklenburg County Community Foundation (Front Porch Grants) to facilitate the first pilot study as a series of storytelling groups with both formerly and currently homeless individuals. In the spring of 2014, I was awarded an additional Front Porch Grant in partnership with the architectural organization, Civic by Design to facilitate the second pilot study. The purpose of this project was to engage people who are both homeless and formerly homeless to share their stories and cultivate friendships with people who have not experienced homelessness at an event using Pop-Up Porches. Pop-Up Porches is the volunteer act of inserting portable front porches where they are able to support existing social activity and serve as a catalyst for community gathering. The first pilot project was implemented at the Urban Ministry Center (UMC) in Charlotte and was called “Under the Bridge: Stories from the Street” (a name given to the program by the participants themselves). Through this
project, I worked to further understand the struggles individuals have escaping cycles of homelessness. I also explored the use of storytelling as an innovative approach to understand the needs of this population. This project also had artistic significance, as it integrated the arts and social sciences to develop a more extensive and critical understanding of homelessness as a social problem.

I conducted the pilot studies to find out if exits from HousingWorks and returns to homelessness would be of interest to possible participants. By challenging and uncovering some of my assumptions about this topic and homelessness these studies helped set the scientific premise for my dissertation research. In addition, the pilot studies helped me to understand what research methodologies would be possible to conduct this dissertation research. The differences I experienced between people who were currently homeless and those who were housed during the first pilot study, made it clear that being housed through HousingWorks has a positive impact on an individual both physically and psychologically. Therefore, through the pilot work I started developing research questions for my dissertation around the phenomenon of why people would exit housing and return to homelessness. I developed friendships with a core group of formerly homeless men and women who helped gain access to the chronically homeless population, test the language and substance of the interview guides, and helped with member checking during the pilot studies. I received Institutional Review Board approval through the University of South Carolina for all aspects of both pilot projects (informed consent for narratives and photographs were acquired).

**Influence of pilot studies on research.** The pilot studies were extremely helpful for trying out different aspects of my proposed dissertation research. Not only did it help
me clarify my research questions and learn about the population of interest, but I also was able to test out different research methodologies. The different research methods I tested included a narrative approach using storytelling as a methodology, in-depth interviews, focus groups, participatory action research, and community engaged research. In addition, I was able to practice transcription techniques, and dissemination options to inform what is appropriate when working with this specific population. I practiced what it would be like to take field notes while in the presence of participants while facilitating the storytelling group. I learned that jotting down words, and then using them as writing probes for when I got home worked best.

Another lesson learned through the pilot studies was what roles I should play in addition to researcher. For example, in the pilot studies I played the role of participant, advocate, friend, community activist and educator, and artist. Developing relationships with formerly chronically homeless participants living in HousingWorks and with individuals living outdoors provided access to the research setting. However, I learned that for the purposes of staying focused while conducting the dissertation research, I wanted to conduct in-depth interviews in a controlled environment. This led to the decision to conduct data collection onsite at the Urban Ministry Center and HousingWorks, opposed to campsites. I developed two specific questions to guide the dissertation research and this required I take a different sampling approach in addition to the snowball method used in the pilot studies. Overall, the pilot studies revealed the intricacies of engaging the hard to reach chronically homeless population furthering my understanding of what was feasible for my dissertation research.
Research questions

The questions guiding this research are:

Research question #1: What individual factors influence exits from HF and return to homelessness among individuals who have experienced chronic homelessness?

Research question #2: What program factors influence exits from HF and return to homelessness among individuals who have experienced chronic homelessness?

Definition of terms

For my first research question, I utilized Maslow’s (1943) hierarchy of needs and Erikson’s (1950) psychosocial stages of development to define individual factors. Additionally, Social Disaffiliation Theory, Elder’s (2010) identity development and life course model helped me to tease out the individual factors regarding a homeless person’s street culture identity and assimilation. Social Disaffiliation Theory posits that formal education is linked to occupational mobility (Bahr and Caplow, 1974). Therefore, educational experience for this study is defined as an individual’s formal education, level of education attained, and reasons for leaving school. It is further posited that economic factors drew participants away from school at an early age leading to limited options for occupation, further contributing to an impoverished state. There is evidence that persons with voluntary affiliations are more involved in political activity, have more positive attitudes toward their life situations, and are less likely to disaffiliate from society (Bahr, 1970). For this study, I define participation in voluntary affiliations as involvement in organizations. For example, types of affiliations may include church groups, clubs,
veteran support groups; ball teams, bowling leagues, political organizations, artistic or hobby groups, and community/neighborhood organizations. The term voluntary affiliation thus refers to a category containing all types of affiliation except work and family ties (Bahr and Caplow, 1974).

For my second research question, the factors I define and asked participants about are associated with how the program works and whether it is effective. The program factors are: transitions from homelessness to housing, formal operations, and the quality of staff and support services. The HousingWorks program classifies exits from the program as voluntary or involuntary. Voluntary exits are defined as exits, when a resident leaves Housing First on their own volition. Voluntary exits include situations when a resident decides to leave because they found other housing or they moved out of town, and in some instances they are simply listed as “unknown or disappeared”. On the other hand, involuntary exits are defined as exits, when a resident is forced to leave HousingWorks by program staff or their landlord. Involuntary exits include evictions because of non-payment of rent, non-compliance with the rules of HousingWorks, or criminal activity.

I define transitions as when a resident moves into housing and the adjustments to not only a life indoor but also the rules and expectations of the housing program. Transitions are understood to happen when a resident has been living in a campsite or on the street for an extended period of time. Formal operations are defined as understanding paperwork, lease agreements, rules of living in an apartment, and abiding by the living arrangements as outlined by the HousingWorks program. Quality of staff and support services are defined as how case managers help clients with transitions into their housing,
completing paperwork, communicating eviction status and the process, and assisting clients once they leave HousingWorks.

Summary and Conclusion

In the literature it is posited that relationships with housed society and service providers is an important aspect in an individual’s choice to remain in housing (Bahr, 1973; Rog, et al., 2014). As such, the occurrence of individual and program factors in positive housing outcomes have been linked. Yet, the relationship between individual and program factors and exits from PSH/HF has yet to be defined and utilized in helping the chronically homeless to remain in housing. Permanent Supportive Housing is associated with positive outcomes for residents, including longer housing tenure (Tsemberis, Gulcur, & Nakae, 2004; Tsemberis, 2000), improved quality of life (Lehman, Slaughter, & Myers, 1991), participation in more meaningful activities and work (Browne & Courtney, 2004), greater housing satisfaction (Seilheimer & Doyal, 1996; Siegel et al., 2006), lower rates of psychiatric hospitalization (Browne, Courtney, & Meehan, 2004), and reduced public service utilization costs (Culhane, Metraux, & Hadley, 2002). Given the apparently positive impact of living in Permanent Supportive Housing, then it is important to understand more about why individuals leave Permanent Supportive Housing programs using the Housing First Philosophy and return to homelessness.

In this study, I begin to fill the gaps in this literature by using a hybrid of qualitative research methods. There are many studies that use an ethnographic approach to focus on aspects of homelessness dating back to the advent of skid row and the industrial revolution. However, there are no studies to date that use a combination of
ethnographic techniques to investigate the transition of chronically homeless folks into Housing First and their returns to homelessness. Additionally, research on the individual experience while living in Housing First is sparse. Understanding the experience of leaving homelessness and moving into housing from the client’s point of view will allow for a better understanding of the factors that influence their decisions to stay indoors or return to homelessness. Findings from this study can be used to design programs that can improve the well being of a person leaving the streets and moving indoors. The unique contribution of this study comes from the access provided to me by friendships developed over the course of 12 years with both homeless and formerly homeless individuals, and homeless service providers in the Charlotte region. The following chapter will describe the specific methods used to conduct this research.
CHAPTER 3

METHODS

Methodological Approach

I applied anthropological concepts of fieldwork and participant observation to study groups of people who are homeless or who have been homeless in Charlotte. I was particularly drawn to ethnographic methods, which is a traditional practice grounded in interpretivism. Interpretive researchers appreciate the differences in people and believe meaning is socially constructed (Glesne, 2011). Interpretive studies employ multiple methods to reflect different aspects of people or a phenomenon. I used ethnographic practices by participating in prolonged engagement, developing friendships, having conversations, and participating in every day activities with the target population while conducting pilot studies. However, this study was not designed to involve extensive time in the field; rather, this study’s methodology is a qualitative inquiry that uses certain ethnographic techniques. The combination of prolonged engagement, in-depth interviews, focus groups, and field observations enabled me to examine and analyze what individual and program factors contribute to people leaving housing and returning to homelessness.
Assurance of Human Subject Protection

This study was submitted to the Institutional Review Board (IRB) at the University of South Carolina and was approved for Human Subjects Exempt status. I used an informed consent letter for all in-depth interviews (Appendix B). Before each interview I explained that all information collected was anonymous and matching transcriptions to the participant would not be possible. In order to insure confidentiality, I kept all personal/identifiable information (for follow up meetings) in a password protected excel spreadsheet on a password-protected laptop. Additionally, I explained that participation was voluntary and participants could drop out of the study at any time. Finally, I discussed the risks and benefits of participation, as well as any concerns or questions. I recorded each interview using an audio recorder and transcribed each one immediately after they were conducted. Data in the form of hardcopies were secured in a locked storage file.

Recalling the experiences of leaving housing and returns to homelessness may have brought up traumatic memories for homeless participants. Therefore, at the end of each phase of data collection I provided the participants with my contact information. Only two participants needed my assistance, one to enter a rehabilitation facility and one to help furnish an apartment. After each interview, I asked participants if they needed a list of mental health, food, clothing, and shelter resources. All participants were connected to services at the time of this study. Additionally, I gave members of the focus group my contact information and told them I was available if they had any questions or concerns.
Explanation of process and methods

The study conducted was inductive and exploratory. Qualitative data sources were in-depth interviews with 14 men and women who left HousingWorks, a focus group with 12 men and women who live in HousingWorks, a focus group with six HousingWorks case managers, and in depth interviews with three HousingWorks directors. This section reviews the sampling, data collection, data analysis, and data management procedures I used in this study.

Sampling Procedures

This study required a purposive, convenience sample of HousingWorks clients and providers to achieve maximum variation in perspectives. Maximum variation sampling identifies diverse characteristics or criteria for constructing the sample (Padgett, 1990). According to Padgett (1990), by including in the sample individuals that have had different experiences, it is possible to “more thoroughly describe the variation in the group and to understand variations in experiences while also investigating core elements and shared outcomes” (p.172). This strategy increases confidence in the analytic findings on the grounds of representativeness (Miles & Huberman, 1994). Therefore, I asked four groups that represent four different perspectives. The first sample frame was drawn from a list of former HousingWorks residents. The UMC began keeping account of who was leaving the HousingWorks housing program in 2011, three years after the start of the pilot program in 2008. Therefore, the sampling frame for this group included those who left (both voluntarily and involuntarily) HousingWorks from 2011 to 2016. The second sample was drawn from residents living in the HousingWorks program in January 2016.
Finally, the third and fourth samples were drawn from staff of the HousingWorks program and their professional titles were case managers, program directors, and executive director. A case manager is responsible for orienting all eligible participants to the program and providing housing search and supportive services to promote participants self-sufficiency, integration into the community, and permanency in housing (www.endhomelessness.org, 2016). Program directors are responsible for ensuring that best practices are implemented according to a Housing First approach as well as management of daily workflow as it relates to overall program operation. In addition, the Program Director assures that all work is performed in accordance to contracts, appropriate procedures and established organizational standards. The Program Director collaborates with the city and non-profit providers serving those experiencing homelessness to ensure continual progress to prevent and end homelessness (www.endhomelessness.org, 2016). The Executive Director is responsible for overseeing the administration, programs and strategic plan of the organization. Other key duties include fundraising, marketing, and community outreach (www.endhomelessness.org, 2016). Variations in gender, age, race, housing type, and socioeconomic status were sought across all samples.

**Inclusion criteria**

**Former HousingWorks participants.** The criteria I used to select the former HousingWorks participants for this study were that they experienced chronic homelessness; were of age 18 years or older, had the ability to give verbal consent to participate in the study, and exited a program that employed the Housing First philosophy within the past four years. In January and February of 2016, I interviewed 14 participants
who left HousingWorks either voluntarily or involuntarily. Four possible participants who left HousingWorks were incarcerated at the time of this study. The sample included five black females, one Native American female, two white males, and six black males. The ages ranged from 47 to 67 years old. Of the 14 participants interviewed, nine left involuntarily and five left voluntarily, seven were placed in scatter-site apartments and seven were placed in single site apartments in the past five years (see Table 3.1). All participants were compensated with a $25 visa gift card for their time. The payment was not contingent upon completing the interview. According to the Institutional Review Board, the small amount of the gift card was considered an incentive for participation in this study and not coercive. All information concerning the payment was set forth in the informed consent document. All participants needed my assistance in activating the card and learning how to use a debit card. Requiring assistance with this task illustrates the discrepancy in understanding how to conduct formal operations once an individual has spent a considerable amount of time living outdoors.

**Table 3.1 Exits Inclusion Criteria**

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<table>
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<table>
<thead>
<tr>
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</tr>
<tr>
<td>Housing Type</td>
<td>Count</td>
</tr>
<tr>
<td>---------------</td>
<td>-------</td>
</tr>
<tr>
<td>Scatter Site</td>
<td>7</td>
</tr>
<tr>
<td>Single Site</td>
<td>7</td>
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</tbody>
</table>

**HousingWorks residents.** In January 2016, I conducted a focus group consisting of 12 formerly homeless individuals living in single site HousingWorks apartments. The sample included two white men, four black men, two Native American women, three black women, and one white woman. The ages ranged from 40 to 64 years old. Interviewing participants that have stayed in HousingWorks enabled me to compare experiences to those who have left and not returned to homelessness to capture developing patterns. Participants of the focus group were provided lunch to compensate them for their time but were not required to stay for the duration of the meeting.

**HousingWorks staff.** I interviewed nine HousingWorks staff. The criteria for selecting staff were that they had experience working with homeless individuals who have exited HousingWorks. Interviewing staff enabled me to compare these perspectives with the perspectives of homeless participants and formerly homeless participants to see what theories and patterns developed. In January 2016, I conducted a focus group with six frontline case managers, and individual in depth interviews with three administrative HousingWorks staff members. The sample for the focus group included two white women, one black man, one black woman, and two white men. The ages ranged from 25 to 58 years old. I provided lunch for staff participants to compensate them for their time. The sample for the administrative interviews included two white men, and one white woman. Ages ranged from 42 to 63 years old.
Participant Recruitment

**Former HousingWorks residents.** In January 2016, after obtaining Institutional Review Board approval, I began recruitment of participants by working closely with the associate director of research of the Urban Ministry Center to generate a list of individuals who have left the HousingWorks program. For privacy purposes, once this list was generated the associate director worked as a mediator in contacting the former residents of the program. The UMC provides mailboxes for the homeless population. After the associate director identified potential participants, she placed a letter explaining the study with my contact information in the respective mailboxes. In addition, the associate director called each potential participant (who had a phone number) to confirm I could call to set up a time to conduct the interview.

**HousingWorks residents.** Recruiting residents for the focus group involved snowball sampling. To recruit HousingWorks participants for the focus group, the director for the program posted a flyer at the HousingWorks site announcing the date and time and that lunch would be provided. In addition, members of HHH who I worked with on the pilot studies announced the focus group at their weekly meeting. Members of HHH who lived at the HousingWorks site also encouraged other residents to attend in order to increase participation. The focus group consisted of 12 men and women who were residents of HousingWorks at the time of this study.

**HousingWorks staff.** To recruit staff for the focus group the director of the HousingWorks program sent an email detailing my study, requesting participation and announced that lunch would be provided. Through prolonged engagement I developed
relationships with the staff in the HousingWorks program and the Executive Director of the Urban Ministry Center. Therefore, I sent individual emails to the three directors requesting interviews. The six staff participants in the focus group were willing and excited to share their knowledge and experiences regarding working with the HousingWorks program.

**Data Collection**

Data for this study were collected through semi structured in-depth interviews, focus groups, participant observation, and myself as a research instrument. I decided to use in-depth interviews with currently homeless or former residents of HousingWorks because returning to homelessness or leaving HousingWorks is a sensitive topic. Being homeless comes with a certain degree of shame and stigma. Anecdotal evidence from the pilot studies shows that returning to homelessness after being in housing comes not only with stigma but also confusion and shame. With this in mind, asking people to discuss situations in which they believe they may have failed in the housing program, or were not sure why they were evicted, required privacy and open ended questions. I decided to use in-depth interviews with directors of HousingWorks because all three represent the program to the community. Therefore, the politics involved in being the face of the organization may have prevented the participants from feeling comfortable answering sensitive questions about what could be improved with the HousingWorks program.

I decided to use focus groups to interview residents of HousingWorks in order to generate brainstorming and a deepening of discussion amongst participants as they shared their own perspectives and experiences of HousingWorks. From prior conversations, I
understood that people who were once homeless and are now housed feel empowered and proud to share their stories of survival. Therefore, collecting data from this sample did not require the privacy that the interviews with former residents of HousingWorks called for. Similarly, conducting a focus group with the case managers was appropriate because they could build on each other’s experiences without the worry that something they said might be misconstrued or harm their professional reputations.

**Semi-structured interviews.** Semi-structured interviews allowed for privacy and for me to ask the same set of open-ended questions in a sequence. I developed and tested the interview guide while conducting the pilot studies. The interview guide consisted of open-ended questions structured around the study’s categories of informational needs (Padgett, 2008). The interview guide was standard for all participants; it was accompanied by anticipated probes but allowed for the emergence of unique probes tailored to each interview. When setting up the interview date and time, I suggested to former residents we meet in a private office at the Urban Ministry Center, however I asked if there were somewhere they would be more comfortable. Similarly, I recommended to the directors we meet in their office while offering the option of another location. All interview participants wanted to meet at the suggested location.

I began with a set of guiding interests regarding affiliative bonds as postulated by Bahr and Caplow’s (1970) social disaffiliation theory. For example, to better understand a participant’s path of disaffiliation from their biological families I asked them to tell me about their childhood. Followed by the following probes: “Who if anyone influenced your childhood?, and tell me how they influenced you”. These questions were designed with the anticipation that they would inform me on the use of Social Disaffiliation Theory
when listening to interviewees and thinking analytically about the data (Glesne, 2011). I started and ended each interview with small talk when the recorder was not running. Small talk helped with going over the informed consent form in the beginning and ending the interview leaving the participants with a sense of being appreciated. Additionally, small talk at the end of the interviews with former residents allowed time to ask about referrals, and additional help activating the gift card. Across all interview participants, time at the end of the interview allowed me to also lay the groundwork for follow-up if I had additional questions.

The interviews with the former residents began with the open-ended question: “Tell me about what happened (or how you came to) leave HousingWorks and return to (camp, streets, homelessness)?” This question was then followed by more specific questions about decision-making regarding housing and concepts related to street culture assimilation (family bonds, education, and voluntary affiliations). I relied on probes to obtain the richness and depth desired in qualitative interviewing (Padgett, 2008). I used a variety of the following probes as outlined by Padgett (2011): In order to go deeper (can you tell me more about…?), to go back (earlier you mentioned…please tell me…), to clarify (and were you…when you…), to steer (that’s very interesting, but can we return to…), and to contrast (how would you compare your experiences while homeless with living in HousingWorks). A script of the interview guide for former residents can be found in Appendix D.

After introductions and small talk, the interviews with the directors began with the open-ended questions: “Tell me your thoughts about why people stay or leave HousingWorks?” and “What did you first notice when you started working with
residents in HousingWorks?" These questions were then followed by a number of more specific questions about their opinions regarding the HousingWorks program. Interviews with the directors also relied on the probes listed previously to capture depth and richness in the data. A script for the interview guide for HousingWorks staff can be found in Appendix F.

All participants were provided with information about the research both verbally and in the form of a letter or email. I explained the goal of the study, how long the interview would take, and what I planned to do with the information. I explained that participation was voluntary and they could decline to answer any questions or stop participation at any time. Prior to each interview permission was acquired through the informed consent process. A copy of the informed consent form can be found in Appendix B. All interviews were audio recorded, at the conclusion of the interview I jotted down my reactions to the participants demeanor, and sights, smells, and sounds in the research setting at the conclusion of the interview. Most times I would wait until I got home to expand the jottings into field notes. However, in some instances I would write field notes in my field journal while sitting in my car before leaving the center. Two former residents moved out of state and required phone interviews. I mailed the informed consent forms, demographic forms, and interview guide to the participants. Once I received the signed and completed forms I conducted the interview over the phone. I recorded the phone interviews by conducting the interview while on speaker and using an audio recording device. At the conclusion of each interview, I asked the participants if I could contact them by phone, email, or letter to clarify statements or ask additional questions.
Each participant was given an identification number, categorized by group (exits, stays, or provider). I stored a separate list of identification numbers and contact information in a separate locked file from other research information. All computer files were stored on a private computer that was password protected, and backed up to ensure information was not lost. These files included digital audio recordings, photographs, as well as transcriptions. Recordings of interviews were transcribed and stored on a password-protected laptop. The transcripts were assigned a code and cannot be matched to the participants’ names. All names and contact information are confidential and I have assigned pseudonyms to all participants. Before each interview I asked participants to fill out a short demographic form, and (upon signing a photo release form) if I could take their picture. Only one person declined to have their picture taken. I informed all participants that I was a social worker and graduate student conducting interviews for a research project on Housing First.

Data management processes and procedures included protection of confidentiality, transcription, reviewing transcribed interviews, and field notes and memos. Prior to transcribing each interview I assigned each participant a pseudonym to protect their identity, fictitious names were used on all data. This data was stored in a separate, locked file accessible only to myself. All field notes and memos about the interviews and interactions included the pseudonyms. I personally transcribed each interview and both focus groups. By June 4, 2016, I transcribed all 17 interviews and two focus groups resulting in over 525 pages of single spaced data. I imported all transcriptions, photographs, field notes, and memos into ATALTS.ti, a qualitative data analysis software package, in order to electronically organize and code all data obtained
during the data collection phase. As part of the transcription process, I also began to analyze the data as soon as they were transcribed in order to inform the research process and the subsequent interview. Interviews were conducted until saturation of data had been reached in order to answer the research questions (Lincoln and Guba, 1985).

**Focus groups.** I conducted focus groups with HousingWorks residents and HousingWorks case managers. Focus groups are useful because they draw on the synergy between members (Padgett, 2008). The focus groups in this study elicited insights from individuals stimulated by the group dynamic (Padgett, 2008). Focus group interviewing was an efficient use of time because it allowed me to access the perspectives of numerous people at the same time. The focus group with those who were currently living in HousingWorks began with a request for a story about their first night indoors after being homeless. The script for the focus group with HousingWorks resident can be found in Appendix E. This request was then followed by more specific questions about how living indoors compares to living outdoors and what challenges they faced when they first moved into HousingWorks. I also conducted a focus group with the case managers of HousingWorks. A script for the focus group with HousingWorks case managers can be found in Appendix F. Before the focus groups I explained the purpose of the study and how I intended to use the information. In addition, I read the informed consent, photo release, and demographic forms. After the participants signed the forms, I answered questions and addressed concerns. I recorded the focus groups with a digital recorder and took photographs with the participants’ permission.

**Participant observation.** I used participant observation in order to build relationships and trust with HousingWorks clients and staff. Participant observation falls
on a continuum from full participant-to-full observer. For this study, I did not conceal my role as a researcher, which made me a collaborative partner in the research process. I conducted observations in two primary settings, at The Urban Ministry Center and Moore Place (the single site HousingWorks location). At the Urban Ministry Center, I observed the daily routines of the clients and staff, and the interactions between the two. At the Moore Place, I observed the clients as they interacted with each other and staff as well. These observations were conceptually related to affiliative bonds and street culture assimilation.

I recorded my observations with field notes both during and after I was in the research setting. In the beginning I described specific behaviors without my personal inferences. I jotted down points of interest from conversations to expand later into field notes. I noted my impressions, feelings and concerns about participants, the research setting, and abstract emotions that I simply needed an outlet for. When I could not write down my thoughts I took photographs to add to my field journal that served as visual jottings. I only took pictures of participants with their approval and signature of a consent form.

**My role in the research process.** While conducting the interviews and focus groups I was the central research instrument with my specific experience, expertise and perspective. In line with constructivist thinking, “it can be maintained that virtually no information about a person, group or social system exists without a relationship with that person or social system” (Berg & Smith, 1988, p. 22). Our knowledge of the world is understood through our eyes based upon our relationships with the world (Goldstein, 2002). During the pilot studies, I learned that my personality and values impact how I
approach research participants. Specifically, I have a tendency to become friends with people quickly, without judgment on where they are positioned in regards to socioeconomic status, or living within addiction. From that stance, I befriended three (two men, one woman) participants in the pilot studies who I travelled with, shared meals and visited their homes. To this day, we speak on the phone, text, and email about project issues and personal issues as well. Through the development of these relationships, I learned to remain cognizant of my privilege when working with people living on the margins. For an instance, and despite my training I forgot to do this. One afternoon, I went to visit a friend at his apartment to plan a presentation on our work. When I arrived he seemed inebriated, I asked him if he was all right, and he said he had not slept the night before due to stress. We decided to meet in the common area of the apartment building instead of his apartment. As we sat there, it became clear I should come back another time. So, I left and told him to get some sleep. At 4:00 the next morning, I received multiple text messages from him that were mostly ineligible. I was able to read one that said, “I need you, help me.” This scared me; I thought something had happened to him. I called him around 8:30 that morning and he did not answer. At that point, I contacted his case manager to check on him. When I spoke to my friend that afternoon, he did not recall sending the messages and told me it must have been an accident. I do not know what happened that day, but it gave me pause. I realized that although I value the lives of the participants in this study and we do have friendships, I needed to draw boundaries. I am not a case manager, and I have ethical obligations as a researcher to protect participants from harm. Due to this stance, I knew I needed to clearly define my
research role for this study. However, my preparation was not exhaustive and I remained open to each situation and context of the research setting.

My professional social work practice, prolonged engagement, and research experience with the chronically homeless, enhanced my capacity to gather the data needed for this study. In addition to data collection however, my role as a researcher at times has been both advocate and friend. In the process of doing this research, I acquired information that could be potentially dangerous to some participants. For example, some homeless participants owed drug dealers money or had warrants out for their arrest. I found that the continual protection of confidentiality was the best policy in these situations. In this sense, my role was to be a friend participants could trust with their privacy. Due to this role, I developed relationships that continue to grow to this day.

**Data Analysis**

Data analysis involved a number of techniques to code and classify data. I coded the data using the data management software ATLAS.ti. First, I used open coding to construct themes in the data. Open coding involved breaking down the data to find similarities and differences. I read every page of each transcript to identify key words each participant shared from the interview responses. I read passages of transcripts in order to compare incidents across interviews and perspectives. During this initial phase, I compiled hundreds of codes including in vivo codes that helped with the development of themes in the next coding phase. In vivo codes helped to preserve the participants meanings of their views while I developed codes in to themes. Examples of in vivo codes included: street names (e.g. Mama, Code Red) references to drugs as “dope”, references to different types of homeless people such as “fly girls”, and the ways in which people
talked about the underground economy (e.g. flying the sign is slang for panhandling) and money. I used these instances to identify themes of relationships, identity, and street culture assimilation. Once I finished consolidating the open codes into a manageable list, it enabled me to compare across groups to similar questions (e.g. tell me about your experience with HousingWorks).

In the second phase of coding I used focused coding, I read through every page of the transcripts to complete coding based on each individual interview and focus group. I reduced the hundreds of codes down to the following categories: continuum of readiness, chronic inebriates, physical needs (housed vs. homeless), psychological needs not being met, affiliative bonds, identity, no uniform program implementation, transition to housing, and relationships. These codes were more directed, selective, and conceptual than open coding (Glaser, 1978). Focused coding used the most frequent earlier codes to sift through large amounts of data. Using focused coding; I made decisions about which initial codes made the most analytic sense to categorize my data. In the next phase of coding I condensed the categories into themes.

In the third phase of the coding process, I used axial coding, collapsing codes into broad, and emerging themes. Axial coding related categories to subcategories and brought the data back together in a coherent hole. In addition, axial coding allowed me to sort, synthesize, and organize the large amounts of data and reassemble them in new ways. Open coding separated the data into separate pieces and distinct codes. I used axial coding to help me to link the codes together and discover how they were related. In this phase of coding I organized the data into individual themes (physiological needs, psychological needs, identity and relationships), program themes (transitions, formal
operations, staff and support services), and interconnected themes (relationships, transitions, identity- under the umbrella of Housing First implementation).

In the final phase of analysis, I used Ecomaps to identify the strength of relationships between major themes and the former HousingWorks participants. An Ecomap is a graphic depiction of relationships and how individuals, families, and their collective environment influence their strength and impact on (for this study) decisions to return to homelessness. Processing information pictorially helped me explore associations between concepts, understand the relationships between concepts, and display the connections in order to evaluate the strength of the relationships. Ultimately, Ecomaps enhanced my understanding of how themes were interconnected and contributed to exits from HousingWorks.

At each of these above phases of coding, I met with two members of my dissertation committee to discuss broad themes and patterns that were emerging. After concluding the coding process and analysis, I began the synthesis and writing process to draw conclusions and findings.

**Memo Writing.** Throughout the interviewing, analyzing, and writing process, I wrote in my field journal, and developed research memos. In certain cases, I took photographs and recorded sounds to capture the research setting. I discussed my memos with my dissertation chair to identify emerging themes, ethical concerns, and patterns between interviews. These steps increased awareness of my reactions to the participants, and potential bias. These memos were also tools for processing issues raised throughout the research process, as well as other areas of further exploration, potential theoretical conclusions, or new ideas generated. Immediately after the interviews, I wrote field notes.
using Microsoft Word (or audio notes with an audio recorder) to reflect on my reactions to the interview, document what was going on in the research setting, and note any details about the participant or interview that helped me in my analysis later.

**Displaying Data.** Miles and Huberman (1994) describe data display as “an organized assembly of information that permits conclusion drawing and action taking” (p11). Visual representation assists in making meaning of data, creating diagrams helped me to analyze the data and theorize about the social phenomena happening in this study. I created a thematic display to help me understand and present the major concepts evolving through my inquiry. This display allowed me to see the overall patterns in this research without getting lost in the details. Select diagrams are presented and discussed in the following chapter.
CHAPTER 4

FINDINGS

This chapter will explore why individuals leave Permanent Supportive Housing utilizing the Housing First philosophy and return to homelessness. The findings of this study are divided into four sections. The first section describes the participant’s demographics. In addition, the first section is an introduction to the study’s four groups of participants. In the second section, I answer the first research question by describing the individual factors that influence exits and returns to homelessness. The third section describes the program factors that influence exits and answers the second research question. The major themes for the first research question regarding individual factors are: physiological and psychosocial needs, identity, and relationships. However, these factors do not stand-alone and interconnect with each other to construct findings. The major themes for the second research question regarding program factors are: transitions to housing, formal operations, quality of staff and support services. Similarly to individual factors, program factors interconnect to reveal findings. Therefore, in the fourth section I discuss interconnecting themes across factors.

Major Finding

Reasons for exits
All exits in this study were tied to relationships individuals had with friends, family (of choice and biological), romantic partners, case managers, and neighbors. The relationships that impacted exits were sometimes strained connections with case managers or neighbors, but also favorable associations that provided desired bonds that were not being fostered in HousingWorks.

4.1 Participant Demographics

This study’s overall sample is comprised of 35 individuals. I examined the perspectives of fourteen (n=14) individuals who exited HousingWorks, twelve (n=12) residents who lived in HousingWorks, and nine (n=9) HousingWorks staff members (6 case managers and 3 directors). In table 4.1 is a summary of the study’s demographics.

Table 4.1 Demographics

<table>
<thead>
<tr>
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<th>Exits N=14</th>
<th>Residents N=12</th>
<th>Case Managers N=6</th>
<th>Directors N=3</th>
<th>Total N=35</th>
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<tbody>
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<td><strong>Gender</strong></td>
<td></td>
<td></td>
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</tr>
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<td>7</td>
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<td>1</td>
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<td>4</td>
<td>4</td>
<td>3</td>
<td>13</td>
</tr>
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<td>0</td>
<td>2</td>
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<td>0</td>
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</tr>
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<td>31-40 years</td>
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<td>0</td>
<td>2</td>
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<td>3</td>
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<td>41-50 years</td>
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<td>1</td>
<td>1</td>
<td>5</td>
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<tr>
<td>51-60 years</td>
<td>6</td>
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<td>1</td>
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<td>1</td>
<td>0</td>
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</table>
4.1.1 HousingWorks Exit Participants. While four group’s perspectives were explored, the main units of analysis were the participants who exited HousingWorks. Seven participants exited the scatter-site apartments and seven participants exited the single site apartments through the HousingWorks program. All 14 participants exited HousingWorks for multiple interconnecting reasons. The sample of HousingWorks exits included five black females, one Native American female, two white males, and six black males. The ages ranged from 40 to 67 years old. Of the 14 exits, one was transgender male to female, seven were male, and six were female. Educational attainment varied greatly from less than a high school diploma (three participants), high school diplomas (seven participants), associate’s degrees (one participant), and to one participant with a Bachelor’s degree. Two participants declined to answer. Nine of the 14 participants self-disclosed they were living with an addiction to drugs or alcohol. In table 4.2, is a summary of participants’ housing type, exit type, time on the street, current housing status, age, education, and gender. All 14 participants were living in poverty and/or homeless at the time of this study, evidenced by their discussions of their current living situations. For example:

“I slept outdoors for about a week because I didn’t want my girl to be by herself. We slept in the car; I had a van so we slept in the van. You know on the bus stop. You know we did what we had to do because we couldn’t go to like a shelter or nowhere. I’m in a hotel some nights now.” -Aaron

Similarly:
“M: So where do you think you’ll stay?

P: Maybe with my dad? Well hopefully if things work out he’s supposed to move to a new public housing place. So I’m pretty much just biding my time.

M: Where do you think you’ll go?

P: I’m going to go stay at the shelter and stack my money. So when it’s time, I got everything I need.” -Raven

Of the ten participants that left involuntarily, eight were homeless at the time of this study, one was living in a boarding house, and one was living with a family member. Of the four that left voluntarily, two were homeless; one lived on their own in a Section 8 apartment (not connected to HousingWorks), and one lived with family members.

Table 4.2 HousingWorks Exits

<table>
<thead>
<tr>
<th>Pseudonym</th>
<th>Housing Type</th>
<th>Exit Type</th>
<th>Time on the street</th>
<th>Current Housing Status</th>
<th>Race</th>
<th>Age</th>
<th>Education</th>
<th>Gender</th>
<th>Living with addiction</th>
</tr>
</thead>
<tbody>
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<td>Involuntary</td>
<td>40+ years</td>
<td>Homeless</td>
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<td>57</td>
<td>High School</td>
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</tr>
<tr>
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<td>Homeless</td>
<td>Black</td>
<td>50</td>
<td>8th Grade</td>
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</tr>
<tr>
<td>Bryan</td>
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<td>Homeless</td>
<td>Black</td>
<td>55</td>
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</tr>
<tr>
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<td>Involuntary</td>
<td>15+years</td>
<td>Homeless</td>
<td>Black</td>
<td>56</td>
<td>High School</td>
<td>Trans M/F</td>
<td>Yes</td>
</tr>
<tr>
<td>Scottie</td>
<td>Scattered</td>
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<td>20+ years</td>
<td>Homeless</td>
<td>Black</td>
<td>?</td>
<td>?</td>
<td>Male</td>
<td>Yes</td>
</tr>
<tr>
<td>John</td>
<td>Scattered</td>
<td>Voluntary</td>
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<td>Homeless</td>
<td>Black</td>
<td>66</td>
<td>High School</td>
<td>Male</td>
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<tr>
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<td>Voluntary</td>
<td>10+years</td>
<td>Housed Native American</td>
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<tr>
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<td>Homeless</td>
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<td>Single</td>
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<td>Housed Black</td>
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<td>?</td>
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<td>Male</td>
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</tr>
<tr>
<td>Aaron</td>
<td>Single</td>
<td>Voluntary</td>
<td>10+years</td>
<td>Homeless</td>
<td>Black</td>
<td>55</td>
<td>High School</td>
<td>Male</td>
<td>No</td>
</tr>
<tr>
<td>Raven</td>
<td>Single</td>
<td>Involuntary</td>
<td>15+years</td>
<td>Housed Black</td>
<td>47</td>
<td>47</td>
<td>High School</td>
<td>Female</td>
<td>No</td>
</tr>
<tr>
<td>Angie</td>
<td>Single</td>
<td>Voluntary</td>
<td>20+years</td>
<td>Housed Black</td>
<td>67</td>
<td>8th Grade</td>
<td>Female</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td>Joanie</td>
<td>Single</td>
<td>Involuntary</td>
<td>7+years</td>
<td>Homeless</td>
<td>Black</td>
<td>53</td>
<td>Bachelors</td>
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<tr>
<td>Steven</td>
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<td>Involuntary</td>
<td>20+years</td>
<td>Homeless</td>
<td>White</td>
<td>60</td>
<td>9th Grade</td>
<td>Male</td>
<td>Yes</td>
</tr>
</tbody>
</table>
4.1.2 HousingWorks residents. The sample of HousingWorks residents included two white men, four black men, two Native American women, three black women, and one white woman. The ages ranged from 40 to 64 years old. Educational attainment varied greatly from less than high school (one participant), high school diplomas (seven participants), associate’s degree (one participant), Master’s degree (one participant), to two participants who declined to answer. In table 4.3 is a summary of the participants’ housing type, time on the street, time in the HousingWorks program, race, gender, age, and education.

Table 4.3 HousingWorks Residents

<table>
<thead>
<tr>
<th>Housing Type</th>
<th>Time on the street</th>
<th>Time in Housing</th>
<th>Race</th>
<th>Gender</th>
<th>Age</th>
<th>Education</th>
</tr>
</thead>
<tbody>
<tr>
<td>Scattered</td>
<td>20+ years</td>
<td>6 years</td>
<td>Black</td>
<td>Male</td>
<td>54</td>
<td>High School</td>
</tr>
<tr>
<td>Single</td>
<td>10+ years</td>
<td>5 years</td>
<td>Black</td>
<td>Female</td>
<td>53</td>
<td>11th grade</td>
</tr>
<tr>
<td>Single</td>
<td>15+years</td>
<td>5 years</td>
<td>Black</td>
<td>Male</td>
<td>54</td>
<td>High School</td>
</tr>
<tr>
<td>Single</td>
<td>7+years</td>
<td>5 years</td>
<td>Black</td>
<td>Female</td>
<td>?</td>
<td>?</td>
</tr>
<tr>
<td>Single</td>
<td>10+years</td>
<td>6 years</td>
<td>Black</td>
<td>Male</td>
<td>?</td>
<td>High School</td>
</tr>
<tr>
<td>Single</td>
<td>10+years</td>
<td>4 years</td>
<td>Native American</td>
<td>Female</td>
<td>52</td>
<td>?</td>
</tr>
<tr>
<td>Single</td>
<td>15+years</td>
<td>5 years</td>
<td>Black</td>
<td>Male</td>
<td>54</td>
<td>High School</td>
</tr>
<tr>
<td>Single</td>
<td>8+years</td>
<td>4 years</td>
<td>White</td>
<td>Male</td>
<td>52</td>
<td>High School</td>
</tr>
<tr>
<td>Single</td>
<td>10+years</td>
<td>5 years</td>
<td>White</td>
<td>Female</td>
<td>?</td>
<td>High School</td>
</tr>
<tr>
<td>Single</td>
<td>20+years</td>
<td>5 years</td>
<td>White</td>
<td>Male</td>
<td>62</td>
<td>High School</td>
</tr>
<tr>
<td>Single</td>
<td>10+ years</td>
<td>4 years</td>
<td>Black</td>
<td>Female</td>
<td>64</td>
<td>High School</td>
</tr>
<tr>
<td>Single</td>
<td>7+years</td>
<td>5 years</td>
<td>White</td>
<td>Male</td>
<td>47</td>
<td>Masters</td>
</tr>
</tbody>
</table>

4.1.3 Case managers. The sample of HousingWorks case managers included two white women, one black man, one black woman, and two white men. The ages ranged from 25 to 58 years old. Educational attainment was the same for case managers with five
participants having Master’s degrees, except for one participant who had a bachelor’s degree. The focus group with case managers was conducted over the course of an hour with six participants. The first question I asked the group was, what are your thoughts about why people leave or stay in HousingWorks? Many of the responses mirrored the individual interviewees personal experiences. However, when talking about evictions due to drug use, one case manager made the distinction between evictions due to drug activity versus drug use. She described evictions due to drug activity, as ones in which the crowds of people hanging around the apartment were the cause, not the personal drug use. The homeless participants in this study did not understand this distinction. There are a number of instances of miscommunication between HousingWorks staff and residents illustrated in this study. Both former and current residents mentioned miscommunication or lack of communication between staff and clients. A HousingWorks resident recounted how she found out about the housing program only days before she moved in.

“I had been homeless for about six years and actually used to go back and forth to UMC and when I was down there a staff member asked me if I’d ever heard of HousingWorks and I hadn’t then a friend mine told me I was on the HousingWorks list to move in. I didn’t know what she was talking about, and they told me to come up here.”

The focus group with case managers gave me an opportunity to explore the differences between housing placements in single site apartments and scatter-site apartments. In the single site model residents are offered units within a single housing project, where they are offered case-management and supportive services. In the scatter-site models, residents are offered a choice of individual housing units and access to a
variety of supportive services. The first response that came up was the issue of security. At the single site building there is security at the front desk, and visitors have to show identification in order to check in and out. Current residents echoed the importance of security in their decision to stay in HousingWorks.

"First thing is security, that’s the first thing that keeps me here is that I ain’t go to worry about nobody or lookin over my shoulder worry about whose going to knock me over my head and this and that outside.” –HousingWorks Resident

In the scatter-site program, there is no security, which is why you see instances of drug dealers setting up shop in residents’ apartments. When I probed more about this topic one case manager stated that there are only a few rules, and these rules are all tied into “being a good neighbor”. According to this case manager “being a good neighbor” means, “Respecting your neighbor, being responsible about who you let in your apartment, understanding you are responsible for who are your guests, and to follow the rules the apartment landlords lay out for you.”

Table 4.4 HousingWorks Case Managers

<table>
<thead>
<tr>
<th></th>
<th>Case Managers N=6</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Gender</strong></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>3</td>
</tr>
<tr>
<td>Female</td>
<td>3</td>
</tr>
<tr>
<td><strong>Race</strong></td>
<td></td>
</tr>
<tr>
<td>Black</td>
<td>2</td>
</tr>
<tr>
<td>White</td>
<td>4</td>
</tr>
<tr>
<td><strong>Age</strong></td>
<td></td>
</tr>
<tr>
<td>18-30 years</td>
<td>2</td>
</tr>
<tr>
<td>31-40 years</td>
<td>2</td>
</tr>
<tr>
<td>41-50 years</td>
<td>1</td>
</tr>
</tbody>
</table>
4.1.4 Directors. I conducted interviews with the Director of Housing First for Charlotte Mecklenburg County, the Director of HousingWorks, and the Executive Director of the Urban Ministry Center. I interviewed the Directors of Housing First and HousingWorks due to their expertise on the program and the Housing First model. I interviewed the Executive Director because he was central in bringing Housing First to Charlotte, and has been a leader in fighting for the rights of the homeless since the inception of the Urban Ministry Center.

I started each interview requesting a response to the statement, “please tell me why you think people stay or leave HousingWorks.” Responses from the three directors were insightful and unique based on their position. The Director of Housing First talked about the statistics of Housing First across the country, and how there are no predictors on why this program works for some and not for others. By the end of the interview, she shared an anecdote that brought her to tears, and expressed an emotional connection to the chronically homeless population that was deeply moving. The Executive Director discussed that some people “cross a line” after being homeless for so long, that traditional housing simply is no longer an option. So, programs like HousingWorks that embrace concepts such as harm reduction (strategies for safer drug use opposed to abstinence) are the best option. Even when people exit HousingWorks, he believes that many people find alternative housing options and that represents another “line that people cross”. This other line is when people can no longer imagine being homeless and they now perceive themselves as part of housed society.
The sample for the individual director interviews included two white men, and one white woman. Ages ranged from 42 to 63 years old. Educational attainment was the same for all HousingWorks directors; all three have Master’s degrees.

**Table 4.5 HousingWorks Directors**

<table>
<thead>
<tr>
<th>Directors</th>
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</tr>
</thead>
<tbody>
<tr>
<td><strong>Gender</strong></td>
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</tr>
<tr>
<td>Male</td>
<td>2</td>
</tr>
<tr>
<td>Female</td>
<td>1</td>
</tr>
<tr>
<td><strong>Race</strong></td>
<td></td>
</tr>
<tr>
<td>White</td>
<td>3</td>
</tr>
<tr>
<td><strong>Age</strong></td>
<td></td>
</tr>
<tr>
<td>41-50 years</td>
<td>1</td>
</tr>
<tr>
<td>51-60 years</td>
<td>2</td>
</tr>
<tr>
<td><strong>Education</strong></td>
<td></td>
</tr>
<tr>
<td>Masters</td>
<td>3</td>
</tr>
</tbody>
</table>

### 4.2 Individual factors

As a roadmap to this section, I will state again how I defined the individual factors for this study. Individual factors that influence exits from HousingWorks and returns to homelessness are: physiological needs, psychosocial needs, identity, and relationships. First, I will outline the details of each term. Second, I will explore the themes around the physiological and psychosocial needs that influenced exits. Third, I discuss the impact of identity on exits. Finally, I illustrate the effect relationships had on participants’ decisions to leave HousingWorks.

Physiological needs are defined as food, drink, shelter, and warmth. In addition, physiological needs also include safety, esteem, and self-actualization. Safety needs are defined as protection from elements, security, stability, and freedom from fear. Esteem
needs are defined as independence, status, dominance, self-respect, and respect from others. Self-actualization needs are realizing personal potential, self-fulfillment and seeking personal growth. Psychosocial needs are concepts that include how participants spoke about trust, shame, guilt, inferiority, love, care, and wisdom at different stages during their time homeless. In the findings, physiological and psychosocial needs worked together as factors to create themes. Identity is a lifelong process that is shaped by earlier life experiences and development. I classified the relationships most frequently reported into three broad categories: institutional, friendships, and family.

4.2.1 Physiological and Psychosocial needs

This study found that physiological and psychosocial needs overlapped to contribute to exits. In most cases, participants sacrificed the security provided by HousingWorks in the form of basic (physiological) needs to fulfill desires for intimacy, love, respect, and care (amongst other psychosocial needs). Fulfilling psychosocial needs led participants to exit HousingWorks because these needs were met through affiliative bonds fostered in relationships with people who were still part of the homeless community.

Greg and Aaron referred to what prompted their exits from HousingWorks in terms of choosing intimacy and love over their apartments (shelter). Greg would often let people stay with him for weeks at a time because he knew what it was like to be homeless.

“You know it was bittersweet. I wanted to go but I did not want to leave my friends. And when I got there I was very lonely, very lonely, I didn’t have a network of anyone to get in touch with or just talk to. And I was like, you know, it’s hard to tell a person to get out
once you’ve been homeless. You’re like gosh, I’ve got a place to stay, why can’t they just stay but it’s against the rules you know.”

Five of the 14 homeless participants chose to pursue love with romantic partners who were on the street. Aaron chose to exit and return to homelessness to be with a romantic partner. This relationship met many of his psychosocial needs and issues related to his identity as a provider and “a man”.

“I had to find a place for my woman. I had to be a man. That’s the only way I can put it. I had to do what a man was supposed to do.”-Aaron

Reggie risked losing his housing to feel respect, intimacy, and care. These needs intersected with maintaining his identity and having self-respect as a provider. However, these findings do not suggest that providing care is aligned with gender roles. Instead, people in the homeless community provide protection in exchange for love, trust, and care regardless of gender.

“I was trying to get this girl off the streets because she hadn’t had no sleep and I said well come on over to my building I’ll let you spend the night up here tonight but you gonna have to leave tomorrow. Well then she didn’t want to leave! So I told the girl I got all this money in my hand lets go get a motel. I’ll get you off the streets.”-Reggie

Three out of the 14 participants discussed risking their shelter to meet needs related to trust (a psychosocial need). For example, Scottie spoke that his lack of trust that his apartment was “really his own” drew him back to his life on the streets. He became “fed up” with having to think about where his keys were and what would happen if he lost them. The act of having keys and being able to unlock a door was exciting yet terrifying.
“I can remember my first day when they gave me my keys. I was frightened yes I was frightened. I didn’t really believe that morning they were going to take me to an apartment. I didn’t trust them I didn’t trust anyone. My counselor shut the door and locked it and gave me the keys. And I unlocked it and I felt relief. I was also scared to death.” – Scottie

Five of the 14 participants discussed the importance of taking care of themselves, which are considered esteem needs as outlined by Maslow (1943). Participants left HousingWorks when their independence was threatened and when they felt as if they were relying too heavily on case managers or social services. Dependency on case managers or a social care system resulted in feelings of inferiority, which led people to leave HousingWorks to meet esteem needs. As expressed by Scottie:

“I take care of my own finances. I don’t need a case manager. I have a support network. So whenever I need to talk to someone that is afforded to me. I take advantage of that.”

4.2.2 Identity

The adult identities of the chronically homeless participants in this study were impacted by social status characteristics in adolescence, and street culture assimilation through adulthood. As noted previously, this study used theories surrounding street culture assimilation and the life course model to understand how chronic homelessness shapes the formation of an adult’s identity. Specifically for this study, a person’s social economic status and adolescence influences impacted the developmental process and formation of adult identity. In addition, participants became homeless in young adulthood after spending their childhood and adolescence in poverty. This lack of upward social
mobility resulted in assimilation to street culture as adults in order to survive while homeless.

4.2.2a Life course events and adult identity. All 14 participants discussed leaving HousingWorks to seek love, intimacy, and care through relationships. According to Erikson (1950), the desire to meet this need happens in young adulthood between the ages of 18 and 40 years. Although most participants are much older, they became homeless at this stage in their lives. This finding suggests that chronic homelessness has an impact on one’s psychosocial development. In addition, all 14 HousingWorks exits discussed having issues of trust while homeless that lingered with them when they moved into HousingWorks. Developing trust happens when we are young children. If a young child does not receive proper care they develop mistrust that follows them into other relationships, as they grow older. Mistrust leads to anxiety, heightened insecurity, and a lack of confidence in one’s ability to influence life events (Elder, 1998). The participants in this study had violent and disruptive childhoods. In many ways, they are still seeking to meet needs that were not met in childhood and adolescence, which has impacted their decisions to exit housing and return to homelessness.

Socioeconomic status, adolescence and identity. All 14 homeless participants in this study grew up in economically deprived families. Like many youth from poor backgrounds, the participants were responsible for household and financial responsibilities and expected to behave as adults in early adolescence. As young people, participants were often put into adult like positions without the psychosocial capacities to cope with the emotional demands of these roles. Due to these demands and roles, the participants experienced accelerated identity development that seemed to come to an
abrupt stop by young adulthood. Many started to abuse substances and engage in sexual activity in adolescence. Twelve of the 14 participants had multiple children before the age of twenty. Many of the psychosocial needs these participants seek are those developed in the stage of young adulthood. The following excerpts from participants illustrate how experiences in childhood/adolescence impacted the development of their adult identity.

As a young boy, in his early teens, Reggie was asked by his mother to watch over his siblings when his parents died. When his parents died, his brother started abusing drugs and killed himself. Reggie felt responsible when this happened and began drinking heavily.

“The reason I ended up on the streets in the first place, my moms died when I was a boy. I’m a country boy raised on a farm. So mom was in bad health and dad was in bad health, mom wanted me to make a promise when she passed away and dads passed away she wanted me to take care of my sisters and brothers. But things happen to a child when they growing up. My brother used drugs and shot himself. I was a teenager and I started drinking.” –Reggie

When Bryan was a teenager he witnessed a shooting in his family. He was put in a position to testify against a family member. Due to his involvement, there was dissension in his family, which he felt responsible. At the time of this study, he blamed the shooting and his role as a witness for being estranged from his family.

“When I was a kid I experienced a shooting that was between two first cousins, one shooting the other. I was the key witness and I had to testify. The one that got shot died.
You know I went through some depression and that's what got me druggin. I didn’t man up like I should have. I allowed drugs and a drink to take it off my mind.” -Bryan

Matthew did not specify exactly what happened to him as a teenager, and was guarded during our interview when talking about his childhood and adolescence. He did talk about being homeless as a teenager and learning to survive on the streets while living with an addiction to heroin.

“This trust thing stems way way back. This happened when I was a teenager. I hadn’t really quite left my adolescence yet. I would say maybe in the 11th grade and I started developing the sense of distrust. People would just take advantage of me. So now I don’t trust nobody because I have the mind set that everyone is the same.” -Matthew

Raven discusses her abusive father, the loss of her mother, and the death of her brother. Raven’s mother died when she was 15 years old and she was thrust into a provider role for her father and siblings. As noted previously, at this stage of her development she never developed the psychosocial skills to cope with the demand of this role, nor the abuse she endured from her father.

“I lost my mother when I was 15 and my oldest brother I took care of him, he had AIDS til he died. Then I had three more brothers that died. It really took its toll. I’m the 8th of 9th children. I have always been heavy and my dad would always say no decent man will want to jump up and down with you because you’re fat you’re ugly so I grew up with self esteem issues.”

4.2.2b Street culture assimilation impact on identity. Street culture assimilation happens when a homeless individual develops affiliative bonds outside of housed society. Findings from this study show that the 10 participants that exited HousingWorks
involuntarily, did not have affiliative bonds to mainstream (housed) society. These bonds include: family (of origin), education/occupation experiences, and involvement in voluntary associations. However, participants reported similar affiliative bonds to unconventional aspects of society. The lack of affiliative bonds to housed society contributes to the development of an identity related to street culture assimilation. In addition, the impact of the participant’s life course events set the stage for street culture assimilation in adulthood. Participant’s reflections of survival while on the street show that physiological and psychosocial needs sometimes are met through relationships within the homeless community. The following findings from four of the 14 participants, illustrate the impact of street culture assimilation on identity formation and exits from HousingWorks.

**Social network and protection.** For Scottie, when he was in HousingWorks, he did not know how to protect himself. Although living on the streets is dangerous, Scottie knew how to find protection because he was connected to other people living on the margins. Protection is a physiological and psychosocial need that is an essential part of human development learned in adolescence. While he was homeless, he was a part of a group of people who depended on each other for survival. Scottie developed bonds with his homeless friends for mutual protection, which contributed to his street culture assimilation and identity.

“On the streets there’s a code. Well at least a code for me, I don’t bother anybody. The people that I know know me and if some one were bothering me they’d come to my rescue. There is a community of homeless that is very protective if you are within that group.” -Scottie
**Belonging.** Corrie became homeless when she was 15 years old. She never discussed what happened to her mother. As a child she was under the care of her father, when he could no longer care for her, she moved in with her aunt for a short time. Her aunt struggled with substance abuse and poverty, and eventually Corrie was left to care for herself. She never had the opportunity to develop affiliative bonds with her biological family. In this regard, her assimilation to street culture began early. She developed bonds with people on the street that linked her to a community in which she found belonging. When she moved into HousingWorks she did not know what to do or where she belonged. Due to her extensive time on the street, she had an identity and a place within a group of homeless individuals.

“When my dad left and my aunt left me I didn’t have no where else to go. So I just went to the shelter. Then it was the same thing in HousingWorks, I was alone and I didn’t want to listen to no rules, and so I just came back out here. I’m used to being outside. I didn’t want to be closed up. One time I stayed right across the street over there underneath the bushes. During the day I’d wonder around and go see my friends and sometimes I camp with them or let them come stay with me.” —Corrie

John left his HousingWorks apartment to stay in Room In the Inn; a program in which churches offers shelter to the homeless community during the winter months. John wanted to develop bonds with housed society but still identified as a homeless man. He did not necessarily want to go back to camping on the streets, but missed the community of care provided to people while homeless. John felt a connection to the people who stayed at Room in The Inn and the people who ran the program.
“I like talking to people, I get lonely. When you go into a church, and it’s warm you are out of the cold. They feed you and you sleep on a good mattress or whatever and they treat you good. You wake up to people, and they feed you breakfast, and smile. I feel human.” – John

Staff participants reported that residents have a difficult time developing a new identity in housing. Staff observed that when a person has been chronically homeless they have forged bonds with a homeless community that take the place of the affiliative bonds discussed previously.

HousingWorks residents return to their camps and the soup kitchen on a daily basis. Staff accepts that their residents are going to have a difficult time leaving the streets and moving into HousingWorks. When clients are faced with challenges having to do with moving indoors, people are known to return their camps to feel comfort and belonging.

“We have folks that go back to their camps every day because it's a sense of comfort and sense of family and it's the place that times during adversity. They think: These were the people who stuck beside me, I am still the same guy to him now.” - Case manager

An additional staff member reflected on how people who move into HousingWorks are faced with the task a developing a new identity. In a particular case, one of the residents leaves his apartment daily to go see his friends and eat lunch at the soup kitchen even though he has access to his own kitchen and groceries.

“One of these guys, he’s the most popular person at the soup kitchen. There he is somebody, and the people there know him, these are the people he came through his struggles with. And now he’s forced to create a new identity because he wants to be in
“housing and if he had it his way he would take all his friends with him into housing.” – Case manager

4.2.3 Strength and Impact of Relationships

The strength of relationships people experience while homeless illustrate the development of affiliative bonds. The development of bonds is not contingent on housing but on the relationships in people’s lives. In addition to forging bonds within street culture, the strength of these relationships as they worked together, in the participants’ environment, influenced the decision to leave HousingWorks. Findings in this study suggest that participant’s relationships with institutions, friends, and families impact decisions to return to homelessness. In this section, I discuss the impact of institutional, family, and friend relationships on participants’ exits from HousingWorks.

All study participants discussed the importance of relationships in their lives. Specifically, the lack of relationships, the strain of relationships, or the desire to have relationships resulted in exits from HousingWorks. In order to understand the influence of relationships on a participant’s exit from HousingWorks, I created EcoMaps. I chose the EcoMaps of Haiti, Angie, and Bryan’s relationships as examples to discuss in this chapter. All other participant’s EcoMaps can be found in Appendix F.

4.2.3a Institutional relationships. The first example highlights the impact of institutional relationships on a participant’s exit from HousingWorks. Institutional relationships include volunteering, church, shelters, social service agencies, and case managers. Five of the 14 participants talked about volunteering at churches in different capacities. However, the relationships with churches through volunteering were stronger amongst participants when homeless opposed to when housed. The weakening of
volunteer relationships contributed to these participants’ exits from HousingWorks. Once the participants were homeless again, they developed stronger relationships with churches, and reported feelings of belonging and care they were missing when housed. At the time of this study, Reggie and Greg were volunteering at their respective churches. Reggie helps clean up the property of his church, and Greg sings in the choir and plays piano at his. Haiti, Angie, and Joanie participate in community education as guest speakers at various churches now that they are no longer in HousingWorks. While housed these participants did not volunteer nor were they engaged with religious communities outside of HousingWorks.

All 14 participants had troubled relationships with their case managers. Participants reported that case managers favored certain residents over others, and that evictions were unfairly delivered. In some instances, participants felt overwhelmed with the amount of interaction they were required to have with their case managers. This forced social interaction resulted in feeling disrespected as adults and a desire to exit HousingWorks.

“The person that put me out he didn’t care, he did not care. My case manager, he still upset with me. I let him down.” – Corrie

Raven and John felt that their case managers treated them unfairly. As the following two excerpts illustrate, relationships with case managers are often contentious before a resident exits HousingWorks.

“But the thing I’ve noticed is that the case managers have their picks. What I have a problem with is how unfair it is, why are some people still there and I’m not. They broke the rules too. Why are you singling me out, for what reason?” – Raven
“My case manager, she was nasty. She never did get all the facts. That’s just my personal opinion, she took what she thought it was and rolled with that. I read from her in her eyes- it was like you know you’re guilty you know you’re unfair.”—John

Steven was shocked with how impersonal his exchange was with his case manager when he was put in jail. When he was evicted his case manager threw all of his belongings in the trash. Interestingly, other participants reported similar experiences with their belongings being thrown out when evicted.

“I got thrown in jail, my case manager wrote me a letter in jail that said we can’t hold your place no more. And that’s when I got pissed off, I wasn’t even gone that long. She threw everything out; she threw all of it out of my apartment. So I was left with nothing.”

—Steven

Haiti’s EcoMap depicts that a majority of her relationships in her social environment are stressful. When speaking of her exit from HousingWorks she spoke often of the impact of relationships on her eviction. Illustrated on the EcoMap are two lines that show the strength and stress of Haiti’s relationship with her case manager and with the other institutional relationships.

“My case manager didn’t tell me things, and other little stupid stuff, because when I moved in the house, she was supposed to give me a bus pass for the week or somethin’ oh and she made a comment about my heat. I been out here on the streets, in the cold, sleepin’ in the snow you not going to come up in here and tell me how to work the heat.”

—Haiti
Figure 4.1 EcoMap: Haiti

Table 4.6 Key for Ecomaps

<table>
<thead>
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<th>Mutually Strong</th>
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4.2.3b Family Relationships. Family relationships include children, parents, siblings, and romantic relationships. Six of the 14 participants reported mutually strong, positive
(not stressful) relationships with their children. Five participants have children but did not mention the relationships, and two participants reported stressful relationships with their children. All participants had living siblings, eight of the participants did not mention these relationships, and six of the participants mentioned stressful relationships with their siblings. Only one participant mentioned a relationship with his mother, which is strong and not stressful. Only one participant mentioned a relationship with her father, which is strong and stressful. Five participants mentioned romantic relationships that contributed to their exits from HousingWorks. However, only one participant was currently in a romantic relationship that resulted in his exit.

The second EcoMap portrays the strength of Angie’s family relationship that led to her exiting HousingWorks. Illustrated on the EcoMap is a line that shows that her relationship with her children is mutually strong and an additional line that shows her relationship with social service providers is stressful.

“I just had to constantly go to the emergency room. So at HousingWorks they didn’t have anyone to go to the emergency room with you and so they told me if I went to the ER one more time they were going to send me to the nursing home.” - Angie

“My family is great, yeah they great, they keep me laughing by buggin at me, they bug me about physical therapy because they know I don’t like going. They say girl you just don’t want to go that’s what it is. They keep me fed and I have fun with them they come over they laugh with me and visit me and stuff we have a great time.” – Angie
4.2.3c Friend Relationships. Friend relationships include street friends, housed friendships, drug dealers, and drug users. When I asked, “who do you hang out with or who do you spend time with” all 14 participants reported they were “loners” and did not spend time with anyone. However, with further conversation all 14 participants revealed a network of people they relied on for support and survival that were not family and not romantic partners. Current residents discussed having relationships with people whom they considered friends. In addition, if a relationship was perceived as stressful current residents spoke of finding a different community of friends to rely on that contributed to their staying in HousingWorks.
“Everybody don’t get a long and see eye to eye. It’s just like anywhere. They more worried about your business than their business, you know just do you- don’t worry about nobody else. Then I feel like things would go a lot better.” –Current resident

Current residents discussed having a community of friends they formed in the housing program. The friendships were usually developed around a communal activity offered by the program. For example:

“We got a group here, about 12-13 of us, called the Labyrinth group we go usually the third Monday of each month and do our labyrinth walk. When all of us get together there’s a real togetherness there and we can go to anyone of those people in that group if we have a problem and they'll talk to you and listen to you and try to help you out with your problems.”–Current resident

The third EcoMap illustrates the strength and influence of relationships with friends on Bryan’s exit of HousingWorks. As previously noted, Bryan claimed to be a loner and not have friends yet went on to discuss certain friendships that were harmful. There are two lines to show that the relationships were both stressful and mutually strong. Bryan explains his strong connection with a friend who is still homeless and the consequences of that:

“One of my friends came by and at that time he was sort of a partner and he was homeless. Him and I had been friends for quite a while and I allowed him to take a shower and stay over. But he was a drug user and we got high together. Most all of my friends are on the streets. In HousingWorks, I didn’t know anyone who wasn’t on the streets. I didn’t want to go back out there because I had somewhere to stay so why not bring them in here? Then they’ll have somewhere to stay and you know we’d be inside! I
had air condition in the summer and plenty of heat during the winter. It was ideal. You know if I was able to save my food stamps I would have a cook out and invite friends over and that would help to gain more friends. And these are people that are still out on the street.” – Bryan

Figure 4.3 EcoMap: Bryan

Staff reported that friendships with people who are still homeless and people who are using or selling drugs are the leading cause for residents to exit their apartments either voluntarily or involuntarily. The relationships that people form while homeless are a tight network of bonds that have replaced the traditional affiliative bonds to housed society.

The following excerpt illustrates this point.

“I say you know you can cook your own food the soup kitchen is for people who are still homeless why are you still going there its like you are taking advantage you know? But
they don’t see that way, they say that’s where I go hang out with my friends you guys won’t let them move in here so I might as well go see them everyday there.” - Case manager

Additionally, a staff participant explained two points having to do with relationships with drug activity and HousingWorks exits. The first is having drug dealers and drug users stay at their apartment, which results in unwanted attention from landlords. The second point is that, there are times when an individual owes drug dealers money and if they do not have the money to pay them they will leave their housing. Owing money has a different type of consequence when someone has an address, and some have chosen to sacrifice their housing to escape paying debts.

“Our hot button item is not so much if somebody is using drugs but if they have a lot of people involved in drug activity in their apartment which draws the attention of outside sources be it the police or the landlord. I think we’ve had a few people that owe drug dealers who left because they didn’t want to be found.” - Case manager

Summary. These individual themes intersected with each other to influence exits from HousingWorks. For example, participants sacrificed meeting physiological needs through HousingWorks to meet psychosocial, identity and/or relationship needs met while homeless (see Figure 4.4 Individual Factors). Most often participants in this study (all four groups), described drug use or drug activity to explain exits from housing and returns to homelessness without a critical look into what underlying issues drive prolonged homelessness. Clearly, issues of alcohol and drug addiction present a number of factors that contribute to exits from housing. For this study, I wanted to explore additional issues concerning street culture assimilation, affiliative bonds and
relationships, and psychosocial needs. Therefore, although drug and alcohol abuse are mentioned, they were not the focus of this analysis.

**Figure 4.4 Individual Factors**

### 4.3 Program factors

Participants reported the following program factors directly contributed to exiting HousingWorks: transitions from homelessness to housing, formal operations, and the quality of staff and support services. To help navigate this section, the following are how I defined these terms. Transitions are situations that happen during the time when a resident is adjusting to living indoors and the housing program. Formal operations are defined as understanding paperwork, lease agreements, and following the rules of living in an apartment outlined by the HousingWorks program. Quality of staff and support services are defined as how case managers help clients with transitions into their housing, completing paperwork, communicating eviction status and the process, and assisting clients once they leave HousingWorks.

**4.3.1 Transitions from homelessness to housing.** Ten of the 14 homeless participants reported challenging experiences transitioning to living indoors, and
adjusting to the housing program. Of the four participants who did not struggle with transitions, three left voluntarily and one was evicted for a violent altercation with another resident. All participants described moving into HousingWorks with a mixture of emotions from elation, confusion, fear, and gratitude, to sadness. When someone is homeless, they are isolated from mainstream society yet are a part of a tightly knit community for survival. While living on the streets people are surrounded by others waiting in line or for appointments and filling time in between meals. When someone leaves this community to move indoors, they often find themselves in limbo, between the homeless life and housed society. While in limbo, the participants in this study faced a period of transition laced with confusion and loneliness. Participants had contact with their case managers, landlords, and neighbors. However, these new relationships lacked social history and personal connection that their long-term friendships or partnerships with the homeless community provided. In turn, many reached out to relationships that were familiar during this time of transition for intimacy and security. Most times the nature of these relationships did not fit with program expectations outlined by HousingWorks, resulting in exits and returns to homelessness.

This study found that building on the relationships people have while homeless can benefit residents as they transition from homelessness to housing. Friendships were a source of strength for residents who stayed in HousingWorks. Those who had relationships with each other while homeless spoke of growing closer as they transitioned into housing together.

“We were real tight in the shelter, we were companions. And now we’ve gotten even closer now that we’ve moved in here. And one thing I say about my friend over here he’s
got something wrong with his leg and every time I turned around they would be giving him a top bunk and I thought that must be hard for him and he would have to go up and down to that top bunk so I know he’s happy to be here.” –HousingWorks Resident

### 4.3.1a Trouble with the daily tasks of living indoors.

Participants had difficulty performing daily tasks associated with living in an apartment opposed to camping or living in a shelter. These tasks included arranging furniture, cooking on a stove, sleeping in a bed, or taking a shower. Participants sometimes stacked their furniture against apartments doors and windows for added security. Some participants did not know how to cook on a stove because they had either been camping, or eating prepared meals in soup kitchens for twenty years. For example:

“A lot of people ain’t never had no house-they stayed with their cousins, grandmas, sleeping in cars they ain’t never had no stable place. Eatin out of cans, I had some people come over I handed them a can opener because they go over there get a knife and just start cutting.” –Scottie

People who have been homeless for decades have become accustomed to sleeping on hard surfaces (outdoors or in shelters). Therefore, sleeping on a bed was a concept to learn and become comfortable with during a time of transition. Participants spoke about not being able to shower without wearing their shoes after developing phobias of diseases spread in shelters and outdoor camps. The transition of moving from homelessness to housing is a complex process. The findings from this study suggest this is an issue not fully addressed by the HousingWorks program.

### 4.3.1b Transitioning to a place of their own.

While every participant was able to recall his or her first night indoors, not everyone had the same emotional response to
transitioning from homelessness to housing. Six participants described the initial excitement of having “a place of their own” and escaping the dangers of homelessness. However, eight participants expressed being overwhelmed, lonely, sad, or confused after moving into HousingWorks. In the following excerpts, participants describe experiences of transitioning into their new apartments.

“HousingWorks, well I can remember my first day when they gave me my keys. I was confused, yes I was frightened, one thing I remember about it was I didn’t really believe that morning they were going to take me to an apartment.” -Greg

The experience he describes involves not only leaving his community on the streets, but at the soup kitchen as well.

“I had a lot of friends and that day I left-I actually had a locker here-and they were standing there, and the day I loaded up the car to go the apartment, I cried. Because I had to leave my friends out here homeless and I had a place to go.” –Greg

An issue reported by most participants when moving indoors was keeping their mind occupied while alone (discussed previously). For Greg, finding a support group where he felt like he could be himself and to be accepted was especially important. Greg explained that because he was lonely, he allowed drug dealers to move in and use his apartment to conduct illegal business, which consequently resulted in his eviction and return to homelessness.

Similarly to Greg, John expressed feelings of confusion and loneliness once he moved into his apartment. John was irritated reflecting on moving in to his apartment without instructions on how to live indoors.
“I don’t think they should just take a man from here or from the shelter and just throw him into an apartment and say okay live. Okay, so how do I live, you haven’t given me any type of classes to say when get you into your apartment you are going to experience this.”–John

Haiti explained to me that she was lost and overwhelmed with her new set of responsibilities in HousingWorks. When I asked Haiti what the first week was like in her new apartment, she responded:

“I got in there and I just wasn’t sure which direction I was supposed to take. Am I supposed to just sit here and wait until she comes and tells me something to do or am I supposed to go out and find me something to do? I just didn’t know what to do because I was so used to doing everything on my own.”

Reggie had a hard time transitioning from the communal existence of living outdoors to an apartment complex of people living in single units. He likes to drink, and does not like to drink alone. While homeless, he could always find a group to share the bottle with and talk for hours into the night (or morning). When he moved into his apartment, he was alone and would reach out to his neighbors for company. Not all of his neighbors wanted to wax philosophically over copious amounts of libations. This desire to be with others while intoxicated resulted in his eviction. Many of his neighbors complained about him knocking on their front doors late into the night. Reggie drinks from years of being homeless and “needing something to occupy his mind”. Interestingly, he did not understand why he was evicted, which he explains in the following passage.

“Well, I drink and you know people on the streets have to do something and I was on the streets for about 24 years. And you know how people there at HousingWorks still do
drugs in their place? They’ll knock on your door at crazy hours at night. They wanted to hang out with me! Why was I kicked out and not them?”

4.3.1c Lack of staff support transitioning indoors. Bryan spoke about the tension he felt as a recovering person with addiction living in HousingWorks. When asked about his first month, he discussed that the staff were not equipped or trained to handle a housing program with a majority of recovering people who have lived with addiction in residence. In this passage, he talks about not knowing where to turn for support when faced with interacting with active drug users on a daily basis. He talked about this issue when asked what kind of things he worried about while living indoors. This finding echoes comments made by additional participants when speaking about the prolific drug use and case manager involvement in HousingWorks.

“I’m being honest in HousingWorks I stayed tense. I just couldn’t feel the support...for some of them that haven’t been there and are now counselors but don’t know what its like to sleep under a bridge. I understand that I’m not your only person, the world doesn’t revolve around me and that's another thing about HousingWorks, they didn’t get it, at least not to me.”

4.3.1d Issues of trust and fear when transitioning indoors. When they first moved into their apartments, all 14 participants were in disbelief that they were the owners of the furniture, kitchenware, towels, and other household items. In addition, the participants in this study spoke of the symbolic and pragmatic power of having keys and being able to lock the door to their own living space. Although, these were positive aspects to the moving in experience, there were still challenges to transitioning with the
concept of ownership and privacy. Many feared that these housed luxuries could be taken from them at any time, and never fully accepted the space as their own.

“I’d have to check and make sure my stuff was still in there and you know trust people because out here you can’t trust people. Every time you go home you have to check. It took awhile you know to make sure the door was locking. Can someone else come in here and get my shit you know without me knowing. After a while once I found out I can stay gone and come back and my Kool Aid and my razor still hangin on my wall then I could take my coat off there.”-Matthew

4.3.1e Survival skills and moving indoors. John described his experience transitioning from living on the streets to moving indoors and feeling a loss of a sense of belonging. He spoke of being admired on the street but not in housing. This conversation contributed to future interviews in which I added questions about the value of survival skills on the streets and how those skills are used once a participant moved indoors.

“It was a transition, it was one hell of a transition because I had been homeless for so long. You feel like you want to belong so you become friendly with neighbors, you want to fit in and it’s not a good thing especially when you know both sides. It’s hard living in mainstream society and living outside of mainstream society.”

Raven spoke about her difficult transition from homelessness into housing after experiencing severe trauma. She developed coping skills while homeless and translated those mechanisms to living in doors. In the following passage she describes her first two weeks in her HousingWorks apartment and how she adapted her street survival skills to living indoors.
“It was weird, I would take chairs and put them up against my door. And I got to a point where I found some sticks and I would put them up against my window. I locked myself in my apartment for like three months and my case worker would take me to get groceries and pay my bills or if I had a doctor’s appointment that’s the only time I would leave. I would stay locked up in my own house, I felt like a prisoner.” -Raven

**4.3.2 Formal operations.** In this study, formal operations had to do with evictions concerning lease agreements and paying bills on time. All but four participants were angry about the way their evictions were handled. In addition, the ten participants were confused about what the legal status was, and what the credit ramifications were of the eviction. The ten participants who were evicted had friends living with them in the apartment, or they were behaving in a manner that was considered generally disruptive, and/or violent. Many of the exits related to formal operations are related to transitions and the quality of staff and support services.

**4.3.2a Communication regarding eviction.** All ten participants who were evicted from HousingWorks expressed confusion on their eviction status, or the reasons for the eviction. In most cases, miscommunication resulted in feelings of anger and frustration from both clients and staff. For example, Haiti expressed frustration and confusion by the way she was evicted, even though she had friends who were drug dealers living with her at the time.

“I had the drug boys in my residence and I was evicted because the police came in, anyway they came and got those people out of there, I told the case worker at the time to move me across town but they wouldn’t do it. Now I can’t go back, that’s just nasty.”
Haiti’s response suggests that she may not have completely understood her lease agreement, which states no other persons, may live with her in the HousingWorks apartment.

Scottie expressed understanding why he was evicted but also confusion that other residents were still housed.

“I said, why ya’ll all on me? You should be on their case too. Why you banning me, they the ones banging on my door? Then I get caught and I’m the one catching hell. And you ain’t doing nothing to them? If you gonna kick me out why don’t you kick them out too? That’s how I feel about that.” - Scottie

In some instances, participants reported a misunderstanding of the exact reason they were evicted. For example, Matthew told me the reason for his eviction was vandalism but it was actually because of a violent fight. In the following segment he describes the incident with another resident that resulted in his eviction.

“I swings the hammer at him trying to deliberately hit him in the back of the head. I missed his head and put two miniscule very small holes in the wall and that's how I got evicted. I got evicted for vandalism. That's how I ended up losing my place. It's a crying shame.” - Matthew

Similar to Matthew, Raven discussed an altercation with another resident that resulted in her eviction. In the following passage Raven told me she was confused because no one on staff explained to her why she was evicted and the other resident was not.
“So he was cursing and I was cursing too and it got ugly. And he told everybody in the building that I had stole money out of his apartment and I said you need to stop telling people that. So by this time I’m boiling mad. It just pretty much got ugly.” -Raven

After his eviction, Greg was confused about what the current legal status was of his lease after he was released from jail for drug possession.

“I don’t have the apartment, I’m homeless again. But, I don’t know how the eviction looks legally. I don’t know how it looks on paper because that’s going to have an effect. If I got evicted on what grounds did I get evicted? Did I do any thing? What did I do?”- Greg

4.3.2b Disregard of client’s autonomy. All of the study participants who were evicted spoke with irritation about how they were treated before and during the eviction process. Ten of the 14 participants explained that there were too many rules to abide by in HousingWorks and they felt like their case manager was constantly watching them.

“Yeah, yeah. Because it’s too much of a, you gotta do this, and you gotta do that. You in our housing so you gotta do this and you gotta do this and you gotta do that. I can do all this I’m over 21. I know what to do when it comes to housing, You ain’t got to tell me I got to do this and I got to do that because I know that I’m not doing it.” –Scottie

4.3.2c Requirement to attend meetings. Participants reported being required to go to doctor’s appointments and drug counseling meetings. Ten of the 14 participants reported feeling uncomfortable when they were required to sign a contract or a piece of paper when they were unsure what it was for.

“You have to go to certain appointments, you have to go to meetings, and you have to do this, see I’ve never been to meetings. Drug meetings, NA, AA, stuff like that and you have
to go sign this paper for this that and the other. I pay that no mind, I sign for my own especially when it comes to my own money, I’m not taking anything from you.” – John

4.3.2d Trouble with rules and operations. A number of participants were evicted either for being disruptive or not paying rent. John chose to buy drugs for himself and his friends instead of paying rent. When he moved into his apartment, he was not ready to leave his life on the streets.

“I was so late and the sheriff had to come evict me, late from paying the last few months of rent, that's what I mean, the drugs, it got so bad, I stopped paying rent. So I came down here and had to panhandle. I had to get money in my pocket. It just happened at the wrong time.” - John

The longer a participant lived on the streets, the harder time they had following the formal operations of the HousingWorks program. For example, Steven would rather be homeless then to abide by the rules and operations outlined in HousingWorks.

“I finally said I’ve had enough I’m done here’s the key to the house I’m gone. I said I can’t take this. I said I can’t deal with this. I’d rather be back on the streets. I can deal with that better then being in here, and all these rules.” - Steven

During the focus group with staff, I asked the case managers their opinions on evictions. One staff member recounted the trouble residents have with formal operations once they have built a community on the streets. All staff participants repeated this reflection that people have a hard time telling their friends who are still homeless they can’t move in. Allowing people to come live in their HousingWorks apartments results in eviction.
“Everyone has the same rules that you can have people visit but you can’t have people live with you. And that goes with the lease and the HUD requirements you know all across the board but it's a very difficult thing for someone initially in housing and they were out there particularly if they were out there with people they hung out with.” - Case manager

In addition to people moving into apartments, staff reported that residents also allow drug activity on the property. Allowing drug activity on the property has legal and lease ramifications. The staff participants talked about how they do not evict someone one for using drugs in their apartment, but if they get sent to jail then they lose their HousingWorks placement.

“The vast majority of our exits have been related to property destruction, violence, and drug activity. The drug activity would usually lead to incarceration so they would exit because they have been left in jail or have prison terms because we can only hold the apartment for 90 days.” - Case manager

4.3.3 Quality of staff and support services. The quality of staff and support services refers to how case managers helped the participants of this study transition into HousingWorks, communicate with them regarding eviction, and assist them when they left HousingWorks. All of the study participants reported different experiences with staff and support services. Participants described confusing exchanges with case managers regarding eviction, and their returns to homelessness. Participant’s confusion resulted in feeling angry and dismissed by case managers. From these descriptions, it is apparent that participants needed more support services when living in and exiting HousingWorks. In
addition, all 14 participants discussed issues of miscommunication with their case managers while they were housed and once they exited.

4.3.3a Favoritism. Participants reported perceived situations of favoritism amongst staff, which contributed to exits and returns to homelessness. Corrie’s perception is that case managers make decisions about certain residents by talking amongst each other. Five additional participants believe their evictions were due to unfair decision-making amongst staff and the administration.

“I guess each one has a different group of people they have to go see. So basically all the case workers had one criteria to choose a few people out of this one bunch to work with...they choose a few people to work with and they get together and talk about it or whatever. I know this for a fact.” –Raven

4.3.3b Rules and HousingWorks. Twelve of the 14 participants discussed having problems with following the rules outlined by HousingWorks, and/or feeling that their independence was threatened by demands put forth by case workers. Haiti’s description illustrates her desire for independence and the tension she felt when her case manager would come to check on her.

“Yes, yeah the case manager. Checks in on everybody, she just pops up when she feels like it. Don't knock on my door. You don’t do that. You know at least call and say I’m on my way or can I come by? She just pops up whenever she felt like it.”

4.3.3c. Staff not respecting privacy. Participants discussed the desire to exit HousingWorks when their case manager was invasive and did not respect their privacy or independence. For example, Haiti believed that her case manager would come by her apartment unannounced and perceived this to infringe on her feelings of autonomy.
"The case manager came over she was so nosey. It was ridiculous, she came in there
you have a doctor’s appointment, you need to call them and reschedule” She just pops
up when she feels like it. A couple of times I ain’t have nobody in the house I told her I
was busy don’t bother me right now, leave me alone. Don’t knock on my door. You know
at least call and say I’m on my way or can I come by? She just pops up whenever she felt
like it I ain’t doing a damn thing leave me the hell alone. Get out my face. I’m a grown
ass woman.” - Haiti

Similarly, in the excerpt below Raven reported a negative exchange with her case
manager when told of her eviction. When discussing their evictions both Raven and Haiti
expressed anger and perceived a lack of support services from case managers.

“The case manager told me I was evicted so I went in there and I destroyed everything in
the whole house, I said “you bitch, I told you to find me somewhere else to go, instead of
putting me off on the streets! She didn’t even try. She really didn’t try, so I told her
what’s up.” – Raven

4.3.3d Needing support before eviction. Participants’ responses suggest the need
for transitional support services before they are faced with eviction. For example, the
findings from this study suggest disruptive behavior has to do with assimilation to the
norms of street culture and a communal lifestyle. However, participants were evicted for
this behavior based on a “three strike rule”. Meaning, they were given three warnings for
behavior deemed unacceptable before being evicted.

“When I left MP and I was back on the streets. I messed up a good thing over there you
know what I mean? I paid my rent. That’s what they told me I had to do. You know what I
mean? Because I get a disability check and I get Medicaid. I paid my rent, but the rent wasn’t the problem. I didn’t do nothin nobody else was doin’.”—Reggie

I asked all participants why they left HousingWorks, regardless of if they were evicted or not. Joanie spoke of being taken advantage of by other residents and feeling afraid while living in HousingWorks. Joanie is not a drug user, abided by all the HF rules, and has close ties to her family yet her tenancy was in jeopardy. Joanie did not know how to draw boundaries with other residents and left HousingWorks.

“In light of the fact that there was a lot of money owed to me by the residents I really couldn’t see myself being healthy living in HousingWorks any longer it wasn’t a healthy environment. I felt threatened and in danger, it was dangerous. Yeah they had security during the day but at night there was just the residents. So then what?”—Joanie

Summary. The program factors in this study intersected with each other as contributing factors for exiting HousingWorks (see Figure 4.5 Program Factors). While transitioning to housing, individuals need intensive staff support to understand the formal operations of HousingWorks. Ultimately, staff is responsible for how the HousingWorks program is implemented. The process of transitioning from homelessness to housing is a factor that appears largely ignored by the HousingWorks program. Issues with transitions are simplified, and then used as punitive measures for residents who do not conform to housing norms as quickly as staff expects. The punitive measures come in the form of evictions, which are miscommunicated and mishandled.
Figure 4.5 Program Factors

4.4 Interconnecting Themes

Individual and program factors intersected with each other to create findings. These intersections resulted in three overarching themes that led to HousingWorks exits.

In addition to the findings previously discussed, the three overarching themes point towards implications at the program level. The first theme is that relationships people develop with one another represent affiliative bonds, which give life on the street a sense of purpose. The second theme is that participants have their basic needs met through street culture assimilation and are accustomed to functioning in survival mode. The third theme is that street identity is maintained through affiliative bonds and street culture assimilation.

4.4.1 Relationships give life on the street a sense of purpose. The relationships participants developed while homeless represent affiliative bonds that resulted in attachment to life on the street. The relationships established while homeless are platonic, familial, and/or romantic. Through these relationships social networks developed that met basic needs and brought purpose to life in the form of love and belonging. As with many relationships in which love and care are exchanged, these resulted in deep connections
that did not end once a participant was housed. The following examples illustrate how the bonds participants developed while homeless effected exits from HousingWorks.

**Platonic and familial relationships.** Seven of the 14 homeless participants jeopardized their shelter, warmth, and safety to be with friends. These decisions usually led to evictions and/or a return to homelessness, because friends moved into the resident’s apartments, which is against the program rules. Due to the communal nature of the homeless population, many participants rely on groups of other homeless individuals for survival while living on the streets. Therefore, participants still feel a deep connection to their homeless friends, and a responsibility to provide help when it is needed.

“I let my boundaries go, I didn’t protect my boundaries. I started to invite the crowd for the purpose of having friends. If I had the crowd then I’m going to bring the drug boys, if the crowd patronizes my place then the drug boys are going to come.” - Aaron

Aaron’s experience is not unique. Corrie, Haiti, and John all talked about having people stay with them, which led to drug dealers taking up residence and conducting business out of their apartments.

“I had some people over, they was just siting there lookin’ at TV, and they had let the dope dealer in the house. Then the police came lookin’ for the dealer. Then I got locked up and the dope boy bailed me out. But the dope dealers, you know they give me respect.” - Corrie

Her esteem needs were met through her relationships in the homeless community, which out weighed safety and shelter needs assured through HousingWorks. Corrie continues to spend time with this community now that she is homeless again, where she receives respect and protection.
Responses from participants that have stayed in HousingWorks illustrates that not all residents sacrifice their shelter to maintain the deep friendships and connections developed while homeless. Those that have maintained these friendships and remained in housing illustrate an understanding of the rules outlined by HousingWorks.

“I got friends that come and visit me and we hang out and watch tv and cook and you know they’re doing their own thing and I’m doing my own thing, yeah I basically hang out with the same people I did while on the street.” –HousingWorks Resident

“I still have a lot of friends that are still on the street that come by and I let them stay the night every once in a while because you know what it’s like when you been out there on the streets.” –HousingWorks Resident

**Romantic relationships.** Haiti has a boyfriend who is homeless that she has been with since the early 2000s. They did not break up when she went into housing and she is still with him now. Haiti also illustrates the development of familial bonds when she speaks of her social network on the street. She also has deep connections with homeless people she refers to as her family (the boys). She allowed these individuals to come stay with her in HousingWorks. The relationships she has with her boyfriend and the “boys” are more gratifying than her relationship with her HousingWorks case manager. The relationships with her boyfriend and her friends fulfilled her need to have respect from others and for her independence.

“My boyfriend you know, we stayed out on the streets together and he protected me. And I’ll tell anybody these boys are my family. You know not having nobody and they looked out for me, they told me when I got put out they said we are coming to get you, when I got
arrested they said, “we are coming to get you out”. The case manager, she didn't care.”

Haiti

Cathy left HousingWorks suddenly to seek love and intimacy through a relationship with her boyfriend at the time. She abandoned her personal items, and did not give warning to her case manager. Similar to many participants, Cathy suffered violent assaults while homeless, including rape. She also spoke of suffering abuse in her childhood and domestic violence in a previous marriage. Cathy recounts leaving HousingWorks in the excerpt below.

“I had a boyfriend and I let him come and stay at night with me. I left my apartment because of a man. I was in love and lonely. Someone was looking for him so we had to leave town. Then I was homeless again.”

4.4.2 Basic needs and street culture assimilation. All 14 homeless participants and 12 resident participants, described how they were able to find food, shelter, and warmth while they were living on the streets.

“A lot of people leave or won’t even go into HousingWorks because they know where to go for at least two meals a day. So they’d rather stay on the streets. And some say, I can do what I want to with my money- because people have problems paying bills. And I’ve seen myself in that situation.” -Matthew

Therefore, meeting physiological needs through HousingWorks is not the driving force to remaining housed. Many of these participants reported concerns about safety at HousingWorks. Participants stated due to living on the streets for a prolonged period of time, they knew more about survival on the streets then living in an apartment.
“People would come into my apartment and I knew people were going to steal from me and I had my keys but it was no better than living on the damn street. At least living on the streets I had blankets, and my knife. I knew when to run. I had everything I needed to survive.” –Steven

Eight of the 14 homeless participants sacrificed the security of food, shelter, and warmth in HousingWorks to maintain their identity as survivors. In addition, needing to assert their independence resulted in exiting HousingWorks. Angie left HousingWorks because the staff wanted to refer her to a nursing home. She also perceived HousingWorks as a temporary place to live, and never a permanent home. Angie chose to meet her need for independence and maintain her identity as a survivor, rather than stay in HousingWorks.

“They told me they were going to send me to the nursing home. I did not want to go to a nursing home. I just needed a place to get back to myself. I was going to move out of there sooner or later because it was a transition place so I left to do it on my own.” - Angie

4.4.3 Street culture and survival mode. Six of the 14 homeless participants specifically spoke about being bored while in HousingWorks. This finding points toward programmatic factors having to do with communication and transitions. Haiti, Corrie, Greg, Steven, Scottie, and Reggie sacrificed safety and stability to escape boredom while housed. I have learned working with this population, that when you are homeless you are in survival mode. People spend their days meeting immediate needs, living from moment to moment. With this existence, people become accustomed to a certain degree of chaos. This study found that, people who moved from homelessness to HousingWorks struggle
with exiting survival mode. Having basic needs met in order to address other issues (e.g. physical or mental health issues) was often associated with boredom. In addition, the thought of “not having something to do” led to reaching out to friends that were still on the street or engaging in destructive behaviors (i.e. drinking, drug use).

“I drank and you know people on the streets have to have something to do and I was on the streets for about 24 years. 24-25 years is a long time. At HousingWorks every day they tell you, I’d go outside and I’d clean the parking lot up I’d pick up the butts, I’d sweep it up. I’d pick up the trash in the office. Now, I help out in the yard a lot. I work in the yard, I do what I can.”-Reggie

Scottie and Reggie both moved into HousingWorks after being homeless for over 20 years.

“I guess I just got bored in housing. It was the same routine. Everyday, everyday, people coming by walking by, I mean I walked everywhere, just to have something to do. I was just bored to death.”-Scottie

Reggie believes being homeless is about more than not having a house. Part of having been homeless for an extended period of time is living outdoors and in open spaces. This experience contributed to his exiting HousingWorks because he felt “closed up” while living indoors. He reported that the survival skills he developed while homeless are important and not easily replicated. Reggie believes knowing how to survive on the streets is a skill. These skills are central to his street culture assimilation and identity.

“I’ve been on the streets so long that I’d just rather be back on the streets. I can deal with that better then being in here. I don't know. I just been on the streets so long, you
know? You know how a person does a lot of time in a prison or jail and that's all they know? Then they come back on the streets and they can't deal with street life so they'll mess up and go back to prison? That's what it's like when you been homeless. You know what I'm saying?” – Reggie

Consistent with the perspectives expressed above, staff discussed how people need help relearning how to put safety, esteem, and self-actualization needs before their survival instincts learned while homeless. Staff spoke about helping residents who had been homeless for a prolonged period time transition from survival mode to recovery mode.

“For some people who have been on the streets for a long time paying rent and bills, that’s not something they are used to, they haven’t done that in a long time so that's something we try and help with, work with them to make sure their bills get paid.” – Case manager

Staff participants talked about moving from homelessness to housing as an individual factor that impact whether a resident stays or exits HousingWorks. Staff seems aware of clients’ needs but the program is not being implemented in a manner that allows for client-based solutions. A case manager discusses the significance of loneliness:

“When people are homeless and they are outside, they are in lines with people, they are constantly around people so they can eat, so they can get IDs, so they can get their mail, so everything they have to do they are around a lot of people and I think there is a real culture shock when they move into housing where they are very lonely.”
However, residents who have stayed in HousingWorks at times discussed finding a balance between issues of being accustomed to survival mode and transitioning to housing.

“I sleep with my tv on, because I can’t take quiet. From being on the street, I have to have noise or I go stir crazy if I don’t hear something going on. But I was going to say too, since I’ve been inside I’ve accomplished a lot of things for myself that I didn’t feel like I could do while I was out on the street.” –HousingWorks Resident

Interestingly, residents that were currently living in HousingWorks discussed benchmarks that illustrated a psychological transition from being in survival mode while homeless to a recovery mode while housed. This switch in thinking allowed residents to accomplish personal goals such as having a job or finishing in high school. This finding illustrates that not all individuals are the same. What works for one person may not work for another.

“Since I’ve been here I’ve accomplished a lot of things for myself that I didn’t feel like I could do while I was out on the street. When I was out there because I was more concentrated on the fact of where am I going to eat, where am I going to sleep, not like going to school.” –HousingWorks resident

Summary

This study examined the experiences of 14 men and women between the ages of 40 and 67 who exited HousingWorks and returned to homelessness. Two broad questions guided the research: What individual factors influence exits from HF and return to homelessness amongst individuals who have experienced chronic homelessness? What program factors influence exits from housing and returns to homelessness?
particularly interested in understanding the reasons why people leave a housing program that is designed to accommodate the chronically homeless population. Perspectives from former residents, current residents, and staff of the HousingWorks program informed these findings. The themes described in this chapter discuss the individual and program factors that influenced exits from HousingWorks and returns to homelessness. As discussed earlier, the major themes for the first research question regarding individual factors are: physiological needs, psychosocial needs, identity, and relationships. The major themes for the second research question regarding program factors are: transitions to housing, formal operations, quality of staff and support services. Specifically, the impact of relationships on housing retention and the development of affiliative bonds while homeless, offer valuable insight into reducing exits from housing programs.
CHAPTER 5

DISCUSSION

This exploratory study employed a qualitative inquiry that used ethnographic techniques to gain an emic understanding of why people leave housing and return to homelessness. The findings suggest a number of areas in which this research affirms, challenges, or extends our existing knowledge on Housing First and homelessness. In this chapter, I conclude with a discussion of the major findings, a critique of the theoretical framework, the contributions to existing literature, implications for policy and practice, strengths and limitations of this study, and recommendations for future research.

Major Findings

Participants exited HousingWorks and returned to homelessness for multiple individual and programmatic reasons. In addition, the theme of relationships connected all findings in this study. Findings also reveal that while individuals in the chronically homeless population disaffiliate from housed society, they connect to a subculture outside of the mainstream through relationships and affiliative bonds. While living as a member outside of mainstream society the basic needs of the chronically homeless population are met and meaning is fostered through relationships. Participants’ relationships that impacted exits represent affiliative bonds developed while homeless. These findings suggest participants were expected to disengage from these relationships while placed in
HousingWorks. The apparent dismissal of relationships in helping residents’ transitions into HousingWorks represents a missed opportunity at the program level, and presents challenges to this study’s theoretical framework.

**Program Implementation**

The local context of Charlotte presents implementation challenges for the HousingWorks program. Implementing Housing First programs can be especially difficult in a landlord’s rental market. The percent of Charlotte residents renting instead of buying homes is at an all time high of 47%, and rents have gone up 19% in the past three years (www.aptindex.com, 2017). The average rent for an apartment in Charlotte is around $1,000 a month (www.aptindex.com, 2017). Census data show a continual rise in the city’s population due to a strong job market (www.census.gov, 2017). For many incoming residents renting has become a necessity. Landlords can turn people away who have bad credit or a criminal record, and can charge much more than housing subsidies offer. HousingWorks case managers are able to secure funding for housing subsidies but struggle to find landlords to accommodate clients. Due to constraints having to do with local politics, lack of affordable housing, and landlord availability the HousingWorks program has not closely followed the Housing First fidelity criteria. If a tenant is evicted from HousingWorks many times there are simply no other options.

**Housing First fidelity criteria compared to HousingWorks.** As discussed previously, Housing First fidelity criteria include a) eliminating barriers to housing access and retention, b) fostering sense of home, c) facilitating community integration and minimizing stigma, d) utilizing a harm reduction approach, and e) adhering to client
choice and providing individualized consumer-driven services that promote recovery (Stefanic, 2013).

The following are HousingWorks implementation themes compared to the Housing First evidence based fidelity criteria. These themes illustrate that if the HousingWorks program were to be implemented according to the Housing First fidelity criteria, exits and returns to homelessness could be avoided. The implementation themes are:

1. If housing and service goals were tenant/consumer driven (criterion e) then problems outlined by clients would meet physiological and psychosocial needs with staff support. Staff offering support to develop service plans based on clients’ priorities would meet needs for respect and trust and minimize perceptions of favoritism.

2. Housing First fidelity criteria would help staff understand how to assist with transitions having to do with individual factors of identity and relationships (criteria b & e).

3. Providing a tenant the opportunity to transfer from one housing situation to another could have prevented 10 of the 14 exits in this study (criteria a, b, & e). Transferring housing situations meets physiological and psychosocial needs as well as addressing transitions, identity and relationships.

The first implementation theme illustrates the connection between the Housing First fidelity criteria, meeting physiological and psychosocial needs, and staff and support services. An example of a solution to a client-identified problem that could be incorporated into a service plan is Bryan’s request for sobriety testing. Bryan was the one of two participants to state they would like sobriety tests as part of their living
arrangement. Although sobriety is not a requirement to acquire housing in HousingWorks, evidence-based fidelity criteria state that supportive services should emphasize engagement and problem solving that are client driven. Developing a service plan for Bryan that addresses his priorities would also meet his physiological need for respect and his psychosocial need to trust.

“Yeah, HousingWorks, it doesn’t change your situation and help you get something different going on. It doesn’t give you the chance to come up out of the cloud.” -Bryan

The second implementation theme demonstrates how fidelity criteria involving the theory of harm reduction, can help staff understand how to assist with transitions moving into HousingWorks. Under harm reduction, evictions due to drug activity and belligerent behavior could be evaluated with support services. If tenancy is in jeopardy a plan could be offered to help with the transition to living indoors and to address problems impacting the housing placement. Developing a plan with clients addresses psychosocial needs of respect and honors the importance of relationships. Ten of the 14 participants in this study may have avoided eviction with a set plan on how to navigate their relationships with their homeless friends as they transitioned into housing.

For example, When John moved into HousingWorks he invited his friends to stay with him. On the streets they took care of each other, so John felt a sense of duty to his community. Unfortunately, with the crowd came loud parties and illegal activity. John was removed from HousingWorks when his landlord evicted him for the parties and drug activity. The following excerpt illustrates that at the core of the revelry were individual factors concerning psychosocial, physiological needs, and relationships.
“My thing is how you treat me is how I treat you. I told people hey its late don’t go out there. There’s a bedroom back there go on and get you some rest. They watch out for me, so I watched out for them. People trust me with their money to get their drugs. So, I’d go get their drugs. And I knew the drug man because we hung out together on the street. So it was safe.” -John

The third implementation theme explains how staff communication is important in meeting physiological and psychosocial needs. Specifically Housing First fidelity criteria state that programs should facilitate community integration and minimize stigma. Currently, HousingWorks does not offer transfers from one housing type to another because there is a lack of affordable housing and a scarcity of landlords who will sign leases with HousingWorks clients. However, the participants in this study were not aware of this. Understandably, this miscommunication has led to perceptions of favoritism because some residents have been accommodated, and some have not. Improving staff communication with residents put tenant needs first and meets needs of trust and respect.

“I wanted to move to another site, with a different landlord. Some people got it, but I didn’t. I asked to move, because there are other places. Yeah I asked to be moved. There are just so many double standards. This girl got kicked out too. She’s got another place but I can’t get one. She got kicked out while I was up there. I don’t know why. She did something wrong, she got put out. To me that’s double standards. She went against the rules, but she gets another place. It makes me think they were just out to get me.” -Scottie

Housing First philosophy and HousingWorks. Many of the program factors that contributed to exits from HousingWorks may have been prevented if staff were to revisit the basic tenets of the Housing First philosophy. First, the finding that many
participants experienced boredom in housing represents a missed opportunity to build on the inherent strength of the individual. Caseworkers could apply the residents’ survival skills to transitioning indoors in order to pacify their boredom. Second, participants reported issues of favoritism that resulted in their evictions. If these issues are reported, staff could call upon their community team to find a better match of case manager to assist the resident in remaining housed if their tenancy is in jeopardy. Third, the Housing First philosophy and model is based on the scatter-site model. In the scatter-site model, programs can separate housing operations from care services. However, the implementation of the HousingWorks single site model illustrates the tensions that arise when case managers are responsible for client services and enforcing rules related to lease agreements and property management.

**Critique of Theoretical Framework**

The implication that the participants in this study are choosing to return to homelessness after living in housing raises questions about individual responsibility. I found that conventional theories on poverty and housing are too narrowly focused on economics or a person’s mental health to capture reasons why people are drawn back to homelessness. These arguments are too limited as explanations to explore why people in this study make the decisions they do. To understand why people who have experienced chronic homelessness exit HousingWorks, I explored the concept of street culture assimilation in Social Disaffiliation Theory and the hierarchy of needs from Maslow’s Human Motivation Theory. I chose these theories because they reflect underlying assumptions regarding common community and programmatic responses to homelessness. As the HousingWorks program has been implemented, people repeatedly
talk about basic needs because of a specific interpretation of Maslow’s theory. This interpretation brings the focus to the individual and assumes one must have their basic needs met in order to address various psychosocial and behavioral needs.

**Maslow’s Human Motivation Theory**

The findings from this study calls for a critique of the hierarchy of needs delineated in Human Motivation Theory. Maslow (1943) suggested that the reversal or reorganizing of the hierarchy of needs was a reaction to psychopathology or sickness in an individual. Within this critique I recognize that the basic needs of human beings must be met in order to survive. However, participant responses point towards a more complex relationship between basic needs and the meaning of self-actualization, belonging and esteem than Maslow outlined in the hierarchy. An interconnecting understanding of basic needs and self-actualization, not a hierarchical one is a more appropriate interpretation for this study’s population. For example, basic needs can be met while homeless, and sharing basic needs with others brings meaning to life. Maslow’s hierarchy of needs assumes that if an individual has a home (meeting their basic needs of safety and security), then he or she will address other challenges such as psychiatric symptoms, addiction, and employment (Greenwood et al. 2013).

According to Maslow’s hierarchy of needs there are five stages that motivate people to achieve certain goals. At the lower level there are physiological needs (such as food, water and air) that need to be reached before progressing to the next level (Maslow, 1943). Once physiological needs are met people seek to meet needs on the next levels (safety, belonging, and esteem) up to the need for self-actualization at the top. Maslow
described the need for self-actualization as the desire to become everything that one is capable of becoming (1943). Maslow posited that people are motivated to search for personal goals, which make their lives rewarding. Specifically, self-actualization refers to finding meaning in life. In the following excerpt, a participant discusses the communal nature of survival on the street. Sharing food with his friends brings meaning to his existence. He finds joy in the conversations about life, the past, and the future shared over meals. Although this participant has struggled with addiction in the past, he found sobriety again once he was evicted from HousingWorks. He credits his sobriety to the relationships he has with other homeless individuals in similar circumstances.

“All of my friends are on the streets. I don’t know anyone who isn’t on the streets. You know if I am able to save my food stamps I will cook outside and invite friends to eat with me. We take care of each other out here; make sure we aren’t lonely or hungry.”

**Social Disaffiliation Theory**

According to Social Disaffiliation Theory, homelessness is a condition of detachment characterized by the absence of the affiliative bonds that link housed persons to a network of interconnected social structures. These bonds include: family relationships, education, occupation, and involvement in voluntary associations (volunteering, recreation). However, the findings from this study reveal that disaffiliation from housed society is the beginning of an individual’s assimilation to society on the margins. The society on the margins is more than a community of homeless or stigmatized individuals seeking survival. It is a community of friendships, familial type relationships, romantic relationships, and cultural norms, much like any other society.
These are affiliative bonds that bond an individual to a society outside of the norms of housed society.

Bahr (1973) stated that a person's membership in a group is the most important source of power in modern societies. Bahr contended that the homeless person is without a stable social network, powerless and socially disaffiliated. Bahr posited there are three major paths to disaffiliation. The first path is what he called external changes, or natural changes in life (e.g., death of a family member), situational changes (e.g., loss of a job) or both. The findings from this study illustrate that the homeless population disaffiliate from mainstream society through these channels, yet connect to peripheral or unconventional aspects of society through additional paths. These alternative paths to assimilation are through a social network of people living outside of mainstream society. New relationships are created that form strong affiliative bonds through street culture assimilation. Assimilation to street culture establishes a social network and through these relationships individuals are empowered. Therefore, individuals in the homeless population are not powerless and/or socially disaffiliated. Their affiliations look different then the ones seen in housed society because of factors related to marginalization from the mainstream. However, these relationships take the form of familial, occupational, recreational, and platonic bonds as discussed in Social Disaffiliation Theory.

The second path is the person's voluntary withdrawal from the community by drug or alcohol addiction. The theoretical assumption that drug addiction or alcohol abuse is a voluntary path to disaffiliation does take into account the context of environmental and medical factors that account for addiction. In the literature, the disease model of addiction classifies addiction and alcoholism as a disease that is progressive and
chronic and if left untreated fatal (Shaffer et al., 2009). In addition, the disease model of addiction attributes addiction and alcoholism to a genetic predisposition that can be exacerbated by environmental factors (i.e. homelessness) (Gelberg et al., 2000). These environmental factors such as poverty, result in lack of access to healthcare and issues of self-medication to ease the pain and suffering that accompanies chronic disease and pain (Gelberg et al., 2000).

The third path is a person's lifetime isolation from all aspects of ties, which Bahr stated occurs among the disabled (Bahr, 1973). This theoretical assumption does not take into account the context of historical factors, such as the disability rights movement. Over the past 30 years people with disabilities have worked alongside the civil rights struggles of African-Americans, women, lesbians, gays, and other minorities to demand fundamental human rights, which has led to the emergence of a disability culture (Shapiro, 1993) Advances in medical technologies have saved the lives of severely injured people (e.g., soldiers, car accidents, premature babies, cancer survivors) replacing isolation from society to a culture of belonging and acceptance (Shapiro, 1993).

**Street Culture.** The findings from this study also call for a critique of the concept of street culture. Bahr and Caplow (1973) use the term street culture to refer to aspects of life represented on Skid Row. Theoretically, Skid Row is not a place but a condition of sociological disaffiliation that encompasses the transient homeless population. Conceptually, Skid Row in this study represents the physical space where a homeless person sleeps, cooks, barters, socializes, and partakes in recreational activities. Bahr and Caplow discuss four attributes of transience: residence on skid row, chronic inebriation, extreme poverty, and separation from kin. Although the findings in this study show that
street culture encompasses these attributes, there are additional factors that illustrate the inherent strength and power individuals retain once disaffiliation from mainstream society occurs. Specifically, participants placed a great deal of importance on the connections with others and how these influenced their exits from HousingWorks. While members of the chronically homeless population disaffiliate from mainstream society and adapt to a street culture, they develop strong bonds with others at the same time. These bonds are evident in relationships developed while homeless that carry over when an individual moves into housing.

Additionally, street culture assimilation results in the development of a street identity, which becomes central to a homeless individual’s survival. Identity was a central focus with participants’ experiences transitioning into housing once having lived on the streets for over 10 years. Participants’ identities encompassed a number of constructs that were outlined by Bahr and Caplow in their discussion of street culture assimilation (1974). However, in this study participants’ identities were further constructed to meet psychosocial needs through relationships within the homeless community. Through relationships and assimilation to the culture on the street, individuals develop and maintain an identity that becomes central to their survival both physiologically and psychologically. While Haiti was homeless, churches requested she come speak to their congregations about living on the streets. When she moved into HousingWorks, she was no longer allowed to volunteer. Being connected to a church as a volunteer was essential to her identity. When she could no longer volunteer she no longer felt committed to staying in housing. Her identity as a homeless woman had a positive impact on her sense of self worth.
“They had me going around doing talks about being homeless and stuff and I ended up getting awards because of all that. And I told them this year that I’d volunteer but they said I couldn’t, once you get in the HousingWorks services here, you can’t volunteer.”

**Life Course Theory**

The findings from this study confirm many assumptions outlined in Life Course Theory when seeking to understand the behavior of individuals who have experienced chronic homelessness. Specifically, Life Course Theory provided further insight into how participants’ experiences in childhood and adolescence impacted the development of their adult identity when thrust into chronic homelessness. Elder’s concepts of social pathways, trajectories, and turning points helped me to understand how the lack of upward social mobility amongst participants resulted in assimilation to street culture and the development of an identity outside of mainstream society while homeless. All 14 participants who exited the program grew up in economically deprived situations in which they were often put into adult like positions without the capacity to cope with the emotional demand of these roles. These circumstances represented transitions from the role of a child to the role of adult that put them on a certain social pathway. Additionally, becoming homeless for most participants were turning points in their life course that set them on a social pathway towards street culture assimilation while chronically homeless. The interplay between the socioeconomic status participants were born into and the individual decisions they made, represent the influence of macro structures and micro experiences on becoming part of the chronically homeless population.

The principles of Life Course Theory helped me understand how social and historical context influences the developmental paths of the participants in this study.
Social change may have altered the life course and developmental trajectories of the participants through changes in the socioeconomic environment by way of lack of affordable housing, decline in health services, and the time in which this cohort were born. All current and formerly homeless participants in this study are 47 to 67 years old, meaning they were born between 1950 and 1970. This time frame puts their life span during the emergence of social change movements, drug epidemics, and economic crises. These historical and social contexts may have shaped the pathways of the participants by presenting a set of options in time and place.

Summary

Social Disaffiliation Theory stemmed from discussions during the advent of Skid Row in the 1960’s and 1970’s and represents aspects of present day societal understandings of chronic homelessness. Housing First programs have adopted an interpretation of Maslow’s theory that assumes once basic needs are met individuals will assimilate to mainstream society. The two are specifically related within public assumptions that homelessness and poverty are consequences of individual choice and/or immoral behavior. By viewing the HousingWorks program through this theoretical framework we begin to understand how individual and program factors intersect to contribute to exits from HousingWorks. However, these theories do not take into account the context of systemic and institutional factors that contribute to returns to homelessness. In addition, they also dismiss important relational aspects of living on the street where people develop affiliative bonds with one another. Interestingly, the philosophy of Housing First, as stated by the evidence-based model recognizes the context of poverty and presents tensions with both Social Disaffiliation Theory and
Maslow’s theory. The widespread adoption of Maslow’s theory as rationalization for implementing Housing First programs has been largely created by community practitioners not following all aspects of the evidence based fidelity criteria.

**Contributions to existing literature**

These findings may contribute to current literature in several areas, including literature around the implementation, dissemination, and program fidelity of the Housing First program and philosophy. As past research suggests, members of the chronically homeless population are not only living in poverty but often are socially isolated, mentally ill, abusive of drugs and alcohol, physically disabled, and recurrently sick (Kosa, 2009; Miller-McCune, 2009; Wright, 2005). Chronically homeless people are among the most vulnerable people in the homeless population (NAEH, 2015). The participants in this study fit this description of the chronically homeless population. However, these findings show that being a member of the chronically homeless population also represents strengths and skills that contributes to survival on the streets. These strengths and survival skills influence exits from housing and returns to homelessness when needs for autonomy and respect are not met.

This research contributes to our understanding of identity development in economically disadvantaged groups across the life span (Benson & Elder, 2011). Previous research on identity report adolescents who grow up in economically deprived families are more likely than their more advantaged counterparts to experience accelerated aging (Elder, 1999; Benson & Furstenberg, 2007; Foster, Hagan, & Brooks-Gunn, 2008). In addition, studies of adolescent delinquency also show that engaging in
maladaptive behavior (such as drugs, violence, early sexual experience) is associated with feeling older and more mature (Moffit, 1993; Newcomb & Bentler, 1998). All the participants in this study spoke of their biological family life in economic terms that reflect previous research on identity. In young adulthood, being poor was often one of several ways they identified themselves in addition they described themselves as sisters, brothers, sons, daughters, wives, and husbands. Rarely did participants describe themselves as parents, although most had children in young adulthood. Several participants took specific steps to rename themselves in ways that fit who they felt they were in adulthood as part of the homeless population. In addition, the findings show that individuals who experience poverty in adolescence develop an identity in young adulthood that stays with them through adulthood, as their economic situation declines in homelessness. A lesson learned regarding identity is the importance of having a unique identity within the framework of street culture assimilation. Participants had street names, and at times located themselves in parental or familial type roles (i.e. mother, father, brother, sister). I found that three participants who voluntarily exited HousingWorks still referred to themselves as homeless, even though they were housed at the time of this study.

“I’m the only homeless person that stays out here. I’m the only one. My landlord bought this unit; see here we all have different landlords. I got a nice land lord, she’s real cool.”-Cathy
Implications for policy

The findings from this research can inform policies and programs working to house the chronically homelessness. Housing First (HF) is an evidenced based approach to ending homelessness in which people experiencing homelessness are connected to permanent housing swiftly with few to no treatment preconditions, behavioral contingencies, or other barriers (HUD, 2016). Mentioned previously, there are several core elements of Housing First that are commonly referred to as the Housing First Fidelity criteria that need to be assessed to make sure programs are actually implementing the evidenced based Housing First approach. The findings generated through this research indicate that in order to prevent exits from Housing First, programs must assess whether they are using Housing First principles. Programs can assess the implementation of HF by addressing the following questions: does the program being implemented meet the evidence based Housing First criteria; does it have the correct structure and process so that administrators can obtain the outcomes demonstrated by extant research on Housing First; which program components are flexible enough to be adapted to new localities as well as serve new populations; and which components are core principles that must remain constant (Tsemberis, 2013). The findings from this study indicate that assessing policy and program fidelity criteria can help meet the complex needs of the chronically homeless population.

The primary mission of the social work profession is to enhance human well-being and help meet the basic human needs of all people, with particular attention to the needs and empowerment of people who are vulnerable, oppressed, and living in poverty (National Association of Social Workers, 2008). The core values of social work are the
right to self-determination and respecting the worth of all people. Therefore, it is the social worker’s job to empower clients to find the skills they need to stay in housing. I believe policy is what directs us in the way we do things. In this regard, listening to the perspectives of the chronically homeless can inform social workers on what to do for people transitioning into housing paying particular attention to identity and relationships.

**Implications for practice**

Social workers and other professionals are involved in varying aspects of housing the chronically homeless. Social workers especially are involved in assessments while homeless, helping people transition into housing, home visits, and pre and post housing support. The findings of this research suggest the need for more effective strategies to better prepare social workers to help people transition from chronic homelessness to housing in order to decrease recidivism through later adulthood.

Before engaging in practice with the chronically homeless population moving into Housing First programs, social workers should examine their own knowledge, experiences, and feelings about substance abuse and mental illness. Training programs for social workers working in Housing First should include content on communication and dynamics with marginalized populations, and culturally competent and sensitive practices when working in the field of mental health. Additionally, designing new interventions to address potential clinical issues arising within Housing First around the areas of identity, street culture assimilation, and relationships are areas for further social work training.
Training programs for social workers engaging in work with Housing First should include content about Housing First fidelity criteria. There is especially a need for training in order to follow a set of guidelines to ensure that programs implement housing, support, and treatment services, and practice philosophy that is consistent with the evidence based model. There is a program fidelity scale that can assist with program implementation and evaluation and identify areas needing improvement or technical assistance (Stefanic, 2013; Tsemberis, 2013). The Pathway to Housing First fidelity scale is anchored in observable and measurable criteria for program components, providing a framework for discussions that might concern local adaptations and innovations, which might depart from the evidence based PHF model (Stefanic, 2013; Tsemberis, 2013). The findings from this study suggest that having measures (e.g. PHF fidelity scale) are a necessary first step in practitioner accountability and understanding what Housing First is and what it is not.

Implementation training is needed for practitioners working to house the chronically homeless through the Housing First perspective. Without proper assessment and accountability of Housing First fidelity criteria individuals get lost in program politics. Program politics include improper (or lack of ) training for staff on the Housing First evidence based model, lack of affordable housing, strained relationships with landlords and law enforcement. Responses from participants reflect these challenges.

“But you know the HousingWorks program, what is the use of giving a person a place if you are going to have to put them out 6 months, a year, or two years later. You know, and I know it makes room for someone else but now you have another homeless person back on the streets.” -Greg
Steven discussed an issue repeated by four other participants regarding violence, prostitution, and drug activity in HousingWorks. From the participant’s perspective this issue has to do with the rapid influx of people moving from the streets to the HousingWorks program within a short period of time.

“More people, more drama. The inevitable happened to the place. They started trying to fill up the building and they brought people the-forgive me father-they brought the same people that’s down here now with the same characteristics, the same qualities, the same habits, the same ways, they brought them from down here to up there. And it just went rampant, wild fire, wide spread and it’s out of control now.” -Steven

This is a factor for this particular program having to do with implementation impacted by local politics, lack of affordable housing, and overcrowding.

**Strengths and Limitations**

**Strengths.** One of the strengths of this study was the response I received based on the recruitment methods I employed. Men and women, homeless and housed, staff and clients were all very interested in being interviewed and sharing their perspectives and experiences with Housing First. All of the former residents told me that sharing their experiences in a research interview was both therapeutic and a welcome opportunity for them to reflect on their lives once they left HousingWorks. Current residents discussed openly their struggles with living indoors as well as their opinions on why people exit or stay in HousingWorks. In addition, the case managers and administrators I interviewed were honest and eager to talk about the strength of a Housing First approach to addressing chronic homelessness and what needs improvement. A second strength of this study is the diversity of the sample. The men and women I interviewed represented
diverse ethnicities, sexualities, genders, and also were from both scatter-site and single site Housing First programs. Their experiences were varied (e.g. some voluntary or involuntary exits), however all were currently living in poverty (e.g. homeless or living with family). Within the men and women’s reflections on their time in Housing First was a broad range of experiences. A final strength of this study is the richness of the data. I was able to look deeply at intersecting aspects of the participants’ experiences in ways that a shorter study may not have revealed. Each participant’s reflection told a complex intersection of class, relationships, trauma, identity, and social problems.

**Limitations.** This study has methodological limitations that were discovered while implementing the research. First, the sampling frame of the former HousingWorks residents represented only those exits who were still somehow connected with the Urban Ministry Center. A broader sampling frame would have included those former residents that were incarcerated, or who were unavailable at the time of this study. For example, there were a number of individuals I could have interviewed if I expanded the sampling procedures to contact people without the assistance of the Urban Ministry Center’s staff. Recruiting participants through the Urban Ministry Center limited the sample to individuals and groups who were comfortable with the staff person point of contact. Including participants who did not want to be associated with the Urban Ministry Center or staff would have provided an additional perspective and layer of understanding. Second, the sampling frame for current residents of HousingWorks disproportionately represented those living in a single-site program. A broader sampling frame would have included those currently living in a scatter-site housing program as well. Third, this study examines one Housing First program in one city. A research design that broaden the
sampling frame to include programs across the state, region, and nation would have provided a more comprehensive look into why individuals leave Housing First programs and return to homelessness. A broader sampling frame may have included, both scatter-site and single-site programs in different geographical locations. Finally, the findings reflect the local context in which this study takes place. Charlotte is currently experiencing urban growth and development that has resulted in a lack of affordable housing, especially for those living at or below the poverty line. The demand for rental property has made it so landlords can turn down housing subsidies in exchange for tenants who have more financial means than the clients of HousingWorks. These tensions have made it so the HousingWorks program has not been implemented fully based on the evidence based Housing First fidelity criteria. Including Housing First programs in additional geographical locations that have followed the fidelity criteria would greatly enhance the research design of this study.

**Recommendations for future research**

The experience of exiting HousingWorks and returning to homelessness comes with many challenges. In this study, the challenges were evident especially when a participant returned to homelessness and found that they no longer were eligible for many services provided to them previously. The reason that they were no longer eligible for services and alternative housing options was the loss of the chronically homeless label. Although, HUD is working to make provisions to address this problem, at the time of this study it was reported frequently as the main reason that most participants were homeless once again. The challenges many faced were sparked on the first night that they exited HousingWorks. Many participants spoke of roaming the streets in search of something
familiar to comfort them. In addition, many reported feeling too ashamed to return to shelters or local service providers after losing their housing. The experience of sleeping on a bench once more after having an apartment was a crushing blow for many participants. Feelings of remorse and guilt most times were assuaged through substance abuse and the company of their homeless friends. However, some participants saw leaving HousingWorks as an opportunity to quit drinking and using drugs, or to reunite with family members. Those who were happy to be away from HousingWorks were doing better psychologically than those who still felt remorse. Most times, those who were dealing with the loss of the chronically homeless label in a positive way were a combination of identity and relationship factors.

As I have gone back to visit participants from this study, I have learned people are more frequently leaving the HousingWorks program and returning to homelessness. In addition, it appears people are leaving more so on their own volition. Why people continue to leave present interesting questions that I believe need further investigation. Given the depth of the interviews and focus groups, there are many future research possibilities that could further expand upon the guiding research questions. For example, multiple program and individual factors can be examined within the interview transcripts. Examination of how identity and relationships overlap with program factors while placed in housing could be further explored. A follow-up study examining ways identity changes in middle and late adulthood once becoming housed could strengthen our understanding of the impact of the HousingWorks program. Consumer based accounts of the transition experiences from homelessness to housing among the chronically homeless population are underrepresented in Housing First research. Further research could provide new
insights into the ways transitions from homelessness to housing impact individual identity development and how this contributes to housing retention.

There is a need for chronically homeless adults, either former or current, to share their perspectives with researchers and scholars to the field of Housing First research. In addition, perspectives of providers and current residents of Housing First programs can help frame critical research questions and ethically pursue answers. Further community-based research, in general, driven by Housing First residents (both former and current) and providers is necessary. In order to fully understand what the participants of this study shared and what their needs are we must be willing to move into unknown areas. Employing community based research methods can assist in this process and broaden our understanding of housing options for the chronically homeless population.
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APPENDIX A – UMC LETTER OF SUPPORT
July 21, 2015

Dr. Naomi Farber,

It is my pleasure to write a letter in support of the dissertation proposal being submitted to the University of South Carolina by Jennie Ann Cole, Ph.D. candidate.

Jennie Ann has been involved with the Urban Ministry Center beginning in 2002. She worked as a volunteer in our community outreach program that specializes in visual arts with the chronically homeless population. After graduating in 2005 with a Master’s degree in Social Service Administration, Jennie Ann joined our staff as the development director.

Jennie Ann worked closely with the staff to support our organization’s efforts to fight homelessness in Charlotte, North Carolina. As Jennie Ann has moved forward in her career, she has remained closely connected to our organization. In both 2012 and 2013, Jennie Ann received two grants from the Foundation of the Carolinas to conduct a project with our clients to connect those that have experienced homelessness with those that have not. These projects resulted in our clients presenting at the National Association of Social Workers conference. In addition, clients created a book documenting their personal stories of homelessness and their current life in housing. This book provides a powerful account of their struggles and successes that they are able to share with their families and friends.

In conclusion, I fully support the efforts of Jennie Ann as she continues to work with our organization to research unanswered questions we have regarding housing those most vulnerable in our society.

Sincerely,

Dale Mullenix, Executive Director

LiZ Classen-Kelly, Associate Executive Director
APPENDIX B-INFORMED CONSENT LETTER
Informed Consent Letter

Project Title: Exploring Exits from Housing First and Returns to Homelessness

Project Director: Jennie Ann Cole, PhD Candidate, University of South Carolina

What am I being asked to do?

You are being asked to participate in this study because you have a unique perspective on housing for the homeless. The interview is voluntary and anonymous. You do not have to answer any questions that you do not want to. The interview will be recorded and take around an hour, at the end you will be given a $25 visa gift card. Jennie Ann Cole and Dr. Naomi Farber are conducting this project. If you have any questions you may contact:

- Jennie Ann Cole at (704-517-0462).
- Naomi Farber at (803-777-8816).

You may keep a copy of the form for yourself, in case you have any questions or concerns at a later date.

Consent

Having read the above information, I give my consent to participate in this project. I give Jennie Ann Cole and Naomi Farber unlimited permission to copyright and use this information that may include me in presentations about this project, as well as in publications. I have been told that I will not be identified by name or by other background information. I waive any right that I may have to inspect or approve the publication.

This project is through the University of South Carolina
APPENDIX C-FACILITATION GUIDE UNDER THE BRIDGE
Street Stories: Past, Present and Beyond

What is a street story?

• Street stories are how people who have been homeless explain how living outdoors has impacted their life, enlighten others of how people survive on the street and reveal how to overcome hardships related to homelessness.
• People tell stories through many different mediums.
• Stories can be expressed in writing or speaking or through pictures (e.g., photograph, paint brush, or video camera).

Why is your street story important?

• Street storytelling is a means for exposing the hardships of homelessness and building a community of people who want to work together to educate others on surviving life outdoors.
• You have a story that needs to be heard to bring about social change.
• Your story can bring hope to others and awareness to government officials, agency leaders, and citizens.

What is this storytelling group about?

• This is a place to share and document your street stories, to educate others and help people who share in the struggles of homelessness.
• By documenting your street stories you have the opportunity to share your experiences with people who do not understand homelessness and to challenge their negative stereotypes.
• At the end of this program we will combine your street stories and share them in the form of an art show, newsletter or a book that celebrates your survival and your accomplishments. (Participation is completely voluntary; we would never put your picture or story on any document without your permission.)

What street stories will we ponder over the next few months?

1. What memory would you like to share about your first night homeless?
2. What about living on the street did you overcome to be here now?
3. Is there anything desirable about being homeless?
4. Are there challenges to making money when you are homeless? What are they?
5. How do you find a safe place to sleep when you are homeless?
6. How do you prepare and find food when you are without a home?
7. How do you protect yourself while living on the street?
8. How is having housing better than being homeless? Or is it?
9. What about living indoors do you find most difficult or challenging?
10. What makes you want to move indoors? Or do you?
APPENDIX D-INTERVIEW GUIDE: HOMELESS PARTICIPANTS
Introduction

Hi, thank you for meeting with me today. My name is Jennie Ann and I’m a student in the College of Social Work at the University of South Carolina. In this interview I am going to ask you a number of questions about your experiences when you lived in housing and how you are doing now that you have moved out. The purpose of this interview is to help me and other social workers better understand the experiences of formerly and currently chronically homeless individuals and how these experiences impact the decision to stay indoors once housing has been secured. Your feedback is important because you have a perspective that policy makers and social work researchers do not, because most of us have never experienced homelessness. This is a consent form, basically you are agreeing to allow me to record and transcribe this interview. (I’ll read through the entire form at this point.) Do you have any questions?

General exploratory questions

1. Tell me about what happened (or how you came to) leave HF and return to (camp, streets, homelessness)?
   a. Tell me about that day or night?
   b. What happened when you first left?
   c. Where did you go?
   d. What did you do?
   e. Who did you hang out with?
   f. What did you think about?
   g. What did you worry about?
   h. What about that night was the best part?
   i. What about that night did you find most difficult?
   j. What about that night will you never forget?
   k. Why is this important to you?

2. While you were living in HF did you consider leaving and returning to your camp?
   a. How many times did you leave before you finally decided to leave for good?
   b. Did you attempt a trial run back out doors before this decision? Tell me about this experience.
   c. Have you considered returning to HF? Why or why not? How often? When?
   d. What does HF not do, that it could do?

Family bonds

3. Tell me about your childhood.
   a. Who if anyone influenced your childhood?
   b. Tell me how they influenced you.

Education/Occupation experiences

4. Tell me about what school was/is like for you.
5. Tell me about your first job. What do you consider yourself to be skilled in? What would you do for employment if you could do anything?

Participation in voluntary affiliations

6. What organizations do you belong to?
a. How are these helpful?
b. What do they help you with?

Conclusion

Thank you for allowing me the opportunity to learn more about you and your life experiences. Do you have any questions? Is there anything you think I should know? If you think of something or want to talk with me further please do not hesitate to contact me.
APPENDIX E-INTERVIEW GUIDE: FORMERLY HOMELESS PARTICIPANTS
Introduction

Hi, thank you for meeting with me today. My name is Jennie Ann and I’m a student in the College of Social Work at the University of South Carolina. In this interview I am going to ask you a number of questions about your experiences moving into HF and living here. The purpose of this interview is to help me and other social workers better understand the experiences of formerly and currently chronically homeless individuals and how these experiences impact the decision to stay indoors once housing has been secured. Your feedback is important because you have a perspective that policy makers and social work researchers do not, because most of us have never experienced homelessness. This is a consent form, basically you are agreeing to allow me to record and transcribe this interview. (I’ll read through the entire form at this point.) Do you have any questions?

General exploratory questions

1. Tell me about what happened (or how you came to) live in HF.
2. When, if at all, did you first notice you wanted to stay/live in HF?
3. If so, what was it like? What did you think then? How do you feel now?
4. Tell me a story about your first night indoors after being homeless.
   a. What about that night was the best part?
   b. What about that night did you find most difficult?
   c. What about that night will you never forget?
   d. Why is this important to you?
5. Tell me the challenges you have had moving indoors (if any)…
   a. What happened that made moving indoors difficult?
   b. What happened that made moving indoors easy for you?
6. How does living indoors compare with being homeless?
   a. Tell me what is better about living indoors…
   b. Tell me a story when you felt happy while you were homeless.
   c. How is being homeless better than living indoors? Why or why not?
7. While you have been in HF have you considered leaving and returning to your camp/street/homelessness?
   a. How many times did you leave before you finally decided to stay for good?
   b. Did you attempt a trial run back out doors before this decision? Tell me about this experience.
   c. Have you considered leaving HF? Why or why not? How often? When?

Family bonds

8. Tell me about your childhood.
   a. Who if anyone influenced your childhood?
   b. Tell me how they influenced you.

Education/Occupation experiences

9. Tell me about what school was/is like for you.
10. Tell me about your first job.
   a. What do you consider yourself to be skilled in?
   b. What would you do for employment if you could do anything?

Participation in voluntary affiliations
11. What organizations do you belong to?
   a. How are these helpful?
   b. What do they help you with?

Conclusion

Thank you for allowing me the opportunity to learn more about you and your life experiences. Do you have any questions? Is there anything you think I should know? If you think of something or want to talk with me further please do not hesitate to contact me.
APPENDIX F-INTERVIEW GUIDE: HOUSING FIRST STAFF
Introduction

Hi, thank you for meeting with me today. My name is Jennie Ann and I’m a student in the College of Social Work at the University of South Carolina. In this interview I am going to ask you a number of questions about your experiences as a person on staff. This is a consent form, basically you are agreeing to allow me to record and transcribe this interview. (I’ll read through the entire form at this point.) Do you have any questions?

1. Tell me your thoughts about why people stay or leave HF?
2. What did you first notice when you started working with residents in HF?
3. What contributed to their leaving HF?
4. Tell me about how HF could improve.
5. What are your impressions of how HF is implemented here in Charlotte? Strengths? Weaknesses?
6. What are your impressions of the relationships between staff and clients? How does this influence when/if people stay or leave HF?
7. What are your impressions of how relationships among staff influence when/if people stay or leave HF?
8. Is there anything that you might not have thought about before that occurred to you in this interview?
9. Is there anything else you think I should know?

Conclusion

Thank you for allowing me the opportunity to learn more about you and your life experiences. Do you have any questions? If you think of something or want to talk with me further please do not hesitate to contact me.
APPENDIX G-ECOMAPS
Participant 1: Haiti
Participant 2: Corrie
Participant 3: Reggie
Participant 4: Bryan
Participant 5: Matthew
Participant 6: Greg
Participant 7: Aaron
Participant 8: Steven
Participant 9: Raven
Participant 10: Cathy
Participant 11: Angie
Participant 12: Joanie
Participant 13: John
Participant 14: Scottie
APPENDIX H-PARTICIPANT PROFILES
Scatter Site Exits

**Haiti.** Haiti lived in the scatter-site apartments through the HousingWorks program. At the time of this study she was 57 years old and homeless but on a waiting list for senior housing. Haiti is one of the individuals I have known for over a decade. She has been on the streets (off and on) for over 40 years. Haiti was one of the first residents to enter HousingWorks in 2008 and was evicted in early 2010. Haiti discussed that she finds it easier to use/buy drugs while housed then when she is homeless. At the time of this study, although homeless she had been sober for a year. For as long as I can remember she has been a fixture at The Urban Ministry Center, volunteering with maintenance, helping others with laundry, and volunteering in the center’s community education program. In fact, the younger homeless individuals on the street call her “Mama” and offer her protection when she is camping. I remember a conversation we had when I worked at the center, where she described to me how she climbed under a bridge every night to sleep. She would make sure to be at her spot before nightfall, around 4:30 or so (it was winter at the time). She had a safety protocol in place, to make sure no one followed her to this sacred place. There was space in the structure of the bridge that was big enough for her to crawl into, it was just below the surface and she could hear the cars driving over her as she fell asleep. She felt safe there because it was hidden and surprisingly warm once she was wrapped in her sleeping bag. I remember this conversation vividly, because I told her I admired her bravery and she seemed baffled at my reaction.

**Corrie.** Corrie lived in the scatter-site apartments through the HousingWorks program as well. I met Corrie in 2005, and at the time of this study she was 50 years old. Due to her small stature she looks much younger than 50 years old, usually dressed in baggy clothes with her hair tightly fixed in braids, she appears to be almost adolescent. Corrie is an older Black woman who has been homeless for over 20 years. She did not want me to take her picture because she was embarrassed by her appearance. She struggles with drug addiction and was very lonely living indoors. Some nights she would sleep outside with her homeless friends, just for the company. While living in HousingWorks, Corrie had trouble telling her homeless friends they could not live with her. She would invite people to come stay with her for weeks at a time, and some of these guests were drug dealers. This open door policy ultimately resulted in her eviction. Similar to Haiti, Corrie is considered a paternal figure within the younger homeless community. Although she has biological children she does not speak to, she is very close with those on the street she considers her children.

**Bryan.** Bryan is a 55-year-old Black man who lived in the scatter-site apartments through the HousingWorks program. He is now currently homeless and looks much older than his age. Due to drug abuse, and enduring the harsh elements of the street his skin is weathered, he walks with a limp, and he suffers from debilitating heart problems. At the time of this study, he recently had a stent implanted in his heart due to years of cocaine and crack use. Bryan asked that I not take his picture because of legal problems and the fear of being found by authorities. He also mentioned he owed money to someone and did not want to risk being exposed as homeless again.

**Greg.** Greg is a 56-year-old gay Black individual who sometimes identifies as transgender (male to female) and other times as male. I mention his sexual orientation because, it was central to the way he discussed his experience in HousingWorks and as a
reROSSING person living with drug addiction. He lived in the scatter-site apartments through the HousingWorks program. I met Greg in 2005 at The Urban Ministry Center, at the time he had been living on the streets for over 15 years. During this study, although homeless he was an active member in the choir at a local church and volunteering in various capacities around the Urban Ministry Center. Greg was evicted from the scattered site program through the HousingWorks program due to drug use and allowing people to live with him. He spoke openly about not being ready to live in his own apartment when he was placed in HousingWorks. When I interviewed Greg, he told me he cried the day he packed up his locker at the Urban Ministry Center to move into his apartment. When I asked him why, he told me it was because he did not want to leave his friends, and he knew that he was going to be very lonely. Even though he was a member of a church, these relationships could not compare to the tight network of friends he had on the street. Interestingly, after being homeless again for a year he quit using drugs and committed himself to a treatment program. Greg told me he wished he could have another chance at HousingWorks now that he could think clearly, but according to the program rules he is now banned.

Scottie. Scottie is a Black man who appears to be in his 50s or 60s and is currently homeless. He did not divulge his age or education but talked about his time homeless and living in HousingWorks during the interview. He was evicted from the scatter-site apartments through the HousingWorks program. Scottie was very hard to get in touch with, as he would call me from an “unknown” number and refuse to leave a message. He would only communicate with me through handwritten messages left at the Urban Ministry Center. When we conducted the interview he was guarded and clearly upset with his eviction status. He asked not to have his picture taken and did not want to be noticed around the Urban Ministry Center. However, at the time of this study he was homeless. Scottie specifically instructed me not to contact him again, and he would find me if need be.

John. John is a 66-year-old Black man who identifies as a veteran. He was evicted from the scatter-site apartments in the HousingWorks program. Before entering HousingWorks he lived on the streets for over 22 years. John was angry and confused on why he was evicted from his apartment; numerous times during the interview he asked rhetorically “On what grounds did I get evicted? Did I do any thing? What did I do?” At the time of this study, he was homeless but seeking help from the Veterans Administration for legal help to dispute the eviction. Apparently, John was sent to jail but the charges were dismissed. However, he was still evicted from his apartment and had been homeless since that time. Similar to other participants, he told me that while housed he had a hard time keeping the “drug boys” away from his apartment. John went into great deal about the methodical way that drug dealers target people with addictions living in HousingWorks. John had incredible insight into the ways chronically homeless people remain vulnerable even after entering housing. As he told me,

“They have ways now to where if they can get a person who has a place and they are weak for the drug they’ll sell out of their house and feed them drugs. Rather than be on the street, they’ll find somebody that’s an addict, that can’t say no and they’ll feed them the drugs and move in and make their money, thousands and thousands of dollars a day.”
Cathy. Cathy is a 40-year-old Native American woman who voluntarily left her scatter-site apartment after only six months. She was homeless for over ten years. After leaving HousingWorks, she was homeless again for two more years before finding housing through a different program. Cathy left her HousingWorks apartment because she started using drugs with an ex-boyfriend. The two of them became so enveloped by their drug use, that when her monthly check came she spent it on drugs. In addition to not paying the rent or bills, she also purchased drugs on credit through a dealer that came to her apartment. When the drug dealer came to collect the debt, Cathy and her boyfriend absconded through a back window and never returned to the apartment. Actually, Cathy put off finding housing for years out of fear the drug dealer would find her address and come to hurt her. I conducted the interview at her apartment because she refused to come to the Urban Ministry Center, in case the dealer recognized her. She also told me, going to the UMC is a trigger for her because it is so easy to buy drugs there. While at her apartment, she double locked the door behind me and all of the curtains were tightly drawn. She made a point of showing me the escape routes from her apartment to the parking lot “in case someone broke in” while I was there. The escape route was through her bedroom window (which was barred shut) and down a tree to my car. Although experiencing PTSD, Cathy was hopeful for the future. What struck me about this interview was that she not only spoke unapologetically about her struggles, but also told her story with optimism. Cathy’s apartment was covered with little notes to remind her to stay positive and focus on the future.

Single Site Exits

Reggie. Reggie is a 66-year-old White man who has been recurrently homeless for over 40 years. He is actually somewhat famous around the Charlotte region, especially around the neighborhoods close to downtown and the Urban Ministry Center. He got the street name “Dancing Bear” because when he is intoxicated he dances in public spaces for money or for his sheer entertainment. Reggie told me it was snowing one night, and he decided to sleep in a dumpster that was in the back of a church. A woman who works at the church saw him trying to climb in and invited him to come stay with her for the night. She took him in when he was kicked out of the HousingWorks single site apartments, and remodeled a shed in her backyard with insulation, heat/air, and electricity. He pays her with his disability check every month. She buys groceries, cooks meals, and pays the electricity bill for the shed for Reggie. In exchange, he does the occasional chore and keeps her company. This interesting living arrangement has received attention in the media and amongst housing providers. Social workers have tried every housing option but Reggie always returns to homelessness. He was evicted from HousingWorks for being intoxicated and disruptive. He told me he enjoys living in the shed because he can drink “his beer and not be bothered”, and he still feels like he’s outside and not confined by other people’s rules. This living arrangement has been the only solution for Reggie’s long-term homelessness. He continues to live there to this day.

Matthew. Matthew is a Black man who appears to be in his 50’s or 60’s; he did not want to tell me his exact age. He also did not want me to take his picture although he did not tell me why. Matthew was housed in the HousingWorks single site apartments after spending over ten years homeless and was evicted for getting into an argument with another resident. He knew Corrie and Haiti (scatter-site participants) and mentioned their
evictions as he was telling me his experience. Matthew was clearly upset about the way the eviction was handled and insisted he was not a violent person. He felt like the eviction was unfair and personal. At the time of this study, he was staying in a boarding house that he paid for weekly. When he arrived for the interview he had an 80’s style boom box and was playing the radio loudly as he walked through the Urban Ministry Center. I noted this in my fieldnotes, because it struck me as an effective coping mechanism to keep people from talking to him. He only turned the radio off when the door to the office was closed and we were alone. When Matthew first sat down, he immediately started talking rapidly about currently being school. Towards the end of the interview when I started to engage in small talk, he seemed to grow anxious. He started making phone calls, and talking loudly on his cell phone as I was activating his gift card. I assumed these were additional coping mechanisms to protect his personal space and boundaries.

Aaron. Aaron is a 55-year-old Black man who after three years voluntarily left the HousingWorks single site apartments. He moved into HousingWorks after spending a decade homeless. Aaron has chronic health problems and recently suffered a heart attack. He left HousingWorks to be with his girlfriend who is homeless and much younger than him. Aaron told me they met one day when he was walking home from the grocery store. Soon after they met, she started staying with him at HousingWorks. However, due to the rules of the program she could only spend the night with him for a few days. In order to be with her and “protect her”, they would stay up all night then sleep all day in his apartment. Eventually this schedule became inconvenient, so instead of paying his rent he decided to use the money to pay for a weekly hotel room. Aaron also spent time in the service and identifies as a veteran. At the time of this study he was sleeping in a car and his girlfriend was living with her mother.

Raven. Raven is a 47-year-old Black woman who was homeless for over 15 years before moving into the HousingWorks single site apartments. She was evicted from HousingWorks because of a disagreement with another resident. She appeared to be confused about her eviction status. Raven explained to me that when she was evicted she was told she could return if she signed a month-to-month lease. I looked into this for her, and according to the director at the single site, no such lease exists. There was obviously some miscommunication between her and the case manager about why she was evicted. When she left HousingWorks she was homeless again. At the time of this interview, she was staying with her father, which I got the feeling, was an unhealthy situation. She mentioned several times that when she moved into HousingWorks she felt liberated to be away from her family, especially her father. When the interview first started she was guarded and agitated but as the interview progressed, she opened up about her family situation. From what I gathered, there was physical and psychological abuse from her father when she was growing up, and those dynamics were still in play in adulthood. For example, she explained how he continually belittled her by calling her fat and ugly, and worthless. Raven was raped on several occasions when she was younger and while she was homeless. It was from these forced sexual encounters that she contracted HIV. By the end of this interview she expressed vulnerability yet still seemed cheerful. Her story mirrored many of the experiences the participants spoke about concerning sexual abuse and everyday violence.
Angie. Angie is a 67-year-old Black woman that I have known since 2002. We have a long history of working on art and activism projects together in Charlotte. When I first met her she was living in a camp with her then husband, who subjected her to a number of unsafe situations because of his drug addiction. They are now divorced and he is incarcerated. Actually, the reason she was able to enter into HousingWorks is due to his incarceration. HousingWorks only houses single adults. She was one of the first people to be placed in the HousingWorks single site apartments. In 2005, Angie suffered a massive stroke and was hospitalized. I would go visit her in the hospital and when she was discharged, I drove her to an apartment she was sharing with her husband (before his incarceration). She could not walk, and could barely feed or clothe herself. The apartment was not equipped for someone in her condition but she insisted I leave her there. It was also 30 miles outside of Charlotte, and far away from any social services or medical assistance. I was worried about her, and relieved when I heard she was moving into HousingWorks. Due to her deteriorating physical condition, the HousingWorks staff wanted to move her into a nursing home. At this point, she chose to leave HousingWorks to move in with her daughter in Alabama. The thought of living in a nursing home terrified her. She had some fascinating insights into why other people leave HousingWorks and returned to homelessness. Specifically, that the socializing at the HousingWorks single site building was harmful, and people were safer on the streets. What I deduced from her comments about the socializing aspect was in reference to drug use and prostitution. Which, are two growing issues in the HousingWorks program that other participants mentioned. Angie was also extremely active in the art program at the HousingWorks single site complex. Her paintings have been showcased in galleries and restaurants across the Charlotte region. Although the subject matter of her work is mostly abstract, there is always an angel painted somewhere within the depth of color and brush strokes. When I interviewed her by phone she was in great spirits and maintaining her health with the help of her family.

Joanie. Joanie is a 53-year-old Black woman who was evicted from the HousingWorks single site apartments after three years. The reason for her eviction was non-payment of rent. Joanie identifies as a veteran and suffers from PTSD and schizophrenia. She became homeless because she was not taking her medication and as she articulated, “everything was distorted, I couldn’t think clearly”. While homeless, Joanie was arrested five times in two years for trespassing charges. All the charges were dismissed yet are still on her record, so she has a hard time when applying for jobs and housing. Although medicated, she was staying in hotels or on the streets because she could not get her housing application passed for an apartment. Due to this difficulty, HousingWorks was an answer “to her prayers, at first”. However, living in the single site apartments quickly became a nuisance. Joanie had a job and a car, so unlike most residents she had income and transportation. Other residents quickly attached themselves to her, borrowing money for drugs and alcohol and requesting rides at all hours of the night. She described an environment within the single site building as threatening and dangerous. Eventually, it became too much and she left without warning to go live with her son out of state. I interviewed her by phone, and at the time of this study she was staying with family.

Steven. Steven is a 60-year-old White man who was evicted from the HousingWorks single site apartments. Steven is originally from Eastern North Carolina,
likes working on cars and knows how to build motorcycles. He lived in the single site apartments for five years after spending over 20 years homeless. Before entering the HousingWorks program, he lived for a short time in a nursing home but was kicked out for “drinking a beer”. At the time of this study, he was living in a camp on the outskirts of downtown. However, his friends often let him take showers and stay with them in the HousingWorks apartments. Steven is chronically ill, and before moving into HousingWorks he was told he only had six months to live. When he did not die after six months, he moved from the hospital to his own apartment. In addition to physical ailments, he also struggles with alcohol and drug addiction. His drug use escalated while living in HousingWorks because crack was so easy to attain. Steven was evicted from HousingWorks because he was in jail for 10 months for check fraud. He was upset by the way the eviction was handled. According to Steven, “they wrote me a letter in jail that said we can’t hold your place no more. And that’s when I got pissed off. They threw everything out; they threw all of it out of my apartment. So I was left with nothing.” At the end of our interview, he stated “I know how to talk to people on the street. I know so many people on the street, I don’t need HousingWorks.”

**HousingWorks Residents**

Johnny is a dedicated volunteer on many projects involving housing in Charlotte, and has been a key gatekeeper for this study. He recruited his neighbors to participate in the focus group, and encouraged conversation from his peers when I asked questions. For example, when I asked the group what struggles they faced when they first moved into housing, Johnny was the first to share his experience. He set the stage for a candid and honest conversation about living in HousingWorks. I believe by making himself vulnerable he made the other participants comfortable. Due to being accustomed to staying in the Men’s Shelter, he was not able to take a shower barefoot for the first few months after he moved into his apartment. Public showers are notorious for spreading fungus and disease. In addition, he also could not sleep without the television on, because he was used to sleeping outdoors or in the shelter where the noise of other people was a constant.

The lounge is a gathering place for many residents as they make their way to appointments and check in and out of the building. Here, you can find residents having discussions while waiting for appointments or just hanging out. During the focus group, Jason talked about the positive impact volunteering has had on his psychological state. Since moving into HousingWorks, Jason volunteers at a food bank. At the time of this study, he had just won volunteer of the year. He spoke about how volunteering helps him to “fight back” negative thoughts about himself. Karen appreciates all the activities available through HousingWorks. She discussed how being involved with the HousingWorks community has helped her transition to life indoors. As she stated, “Occupy your mind, keep your mind thinking, it keeps you from getting into a depressed state.”

**Director of HousingWorks**

The Director of HousingWorks, Jack, supervises the case managers and is involved in the daily activities of both scattered and single site residents. Therefore, although Jack plays an administrative role he also interacts with residents, helping with
eviction notices, navigating disagreements, and other issues that may come up. This role, and his location give him a slightly different perspective on why people leave HousingWorks. Residents come to visit him when they have issues with case managers, troubles in the program, and with other residents. Jack also helped me recruit participants for both focus groups. Similar to most participants, he was excited and eager to share his opinions on and experiences with HousingWorks.

**Project Director of Housing First Charlotte Mecklenburg**

The Director of Housing First for Charlotte Mecklenburg County, Catherine, came to Charlotte after managing a Housing First project in New York City. Originally, Catherine was recruited to Charlotte to run the single site project when it opened but left that position after five years. She returned a year later as the project Director for Housing First of Charlotte Mecklenburg County. However, soon after I concluded data collection she changed positions again to become the Associate Director of The Urban Ministry Center. When she accepted this position, she took the place of the individual I worked with recruiting homeless participants.

**Executive Director of the Urban Ministry Center**

The train depot is considered the original building and is a historical landmark. The center has expanded to meet the growing demands of the rising homeless population, and adjacent to the train depot is a new building. I began working at the Urban Ministry Center when all the services were still located in the train depot, and this is where I first met Dan, the Executive Director. Dan has been the Executive Director of the Urban Ministry Center from the beginning, since the early 1990’s. He worked with a group to bring Housing First to Charlotte and raise money to build the single site project. The interview with Dan was interesting because his perspective represents a myriad of different roles. He is the face of the organization, so presents a certain narrative that puts a positive spin on HousingWorks. At the same time, he is inundated in the daily lives of the homeless population and can empathize with the struggles of people who are evicted from HousingWorks. Dan provided valuable insight into factors that contribute to exits and returns to homelessness.