"We Need to Put the People Back into It:" A Participant-Driven Exploration of Homelessness

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“WE NEED TO PUT THE PEOPLE BACK INTO IT:” A PARTICIPANT-DRIVEN EXPLORATION OF HOMELESSNESS

By

Rebecca Long, B.S.

A Professional Project submitted to the Faculty of the Graduate School,
Marquette University,
in Partial Fulfillment of the Requirements for
the Degree of Master of Arts in Public Service

Milwaukee, Wisconsin

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ABSTRACT

“WE NEED TO PUT THE PEOPLE BACK INTO IT:” A PARTICIPANT-DRIVEN EXPLORATION OF HOMELESSNESS

Rebecca Long, B.S.

Marquette University, 2014

Homelessness is a phenomenon that has been studied for decades. The homeless have been counted, analyzed, recounted, identified, grouped, and categorized. Their profiles and trends have been stored in massive database systems such as the Homeless Management Information System (HMIS). A wealth of literature exists exploring who the homeless are and why they are homeless. What seems to be lacking in the homelessness literature is a thorough analysis of issues and solutions from the perspectives of the individuals who know homelessness the best—those who have experienced it.

Structural issues such as housing and poverty are crucial components of any solution, and they are explored ad nauseam in the literature. While researchers contend that dignity, self-esteem and identity may be just as important to satisfy as basic needs in order to end homelessness, these themes still have not been fully explored. The purpose of this study was to create a forum for participants to raise issues about homelessness and advise possible solutions. Issues and solutions were then organized through the lenses of dignity, identity and self-esteem, since all participants discussed these themes in detail.
ACKNOWLEDGMENTS

Rebecca Long, B. S.

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A PARTICIPANT-DRIVEN EXPLORATION OF HOMELESSNESS

“We Need to Put the People Back Into It:” A Participant-Driven Exploration of Homelessness

I first noticed the problems that arise from a lack of dignity, self-esteem and identity among the homeless while working as a case manager for a supportive housing organization. One day a client told me, “cuesto menos que mis zapatos” (translated means: I am worth less than my shoes). This individual was contemplating suicide and felt as though he had no purpose or identity. Even though he was safely housed and had a number of talents, skills and a charming personality, he still had not regained the sense of self-worth and identity that was stripped from him with 10+ years on the streets.

After this and similar encounters, I decided to explore how the lack of dignity and identity can affect individuals living on the streets. Other researchers paved the way and demonstrated connections among dignity, purpose/identity and an inability to exit homelessness. Increasingly, researchers and social service organizations are coming to understand that new and continued solutions to homelessness must focus on instilling dignity and self-worth in participants (Hoffman & Coffey, 2008; Glover, 2008; Sumerlin & Bundrick, 2000). Through affirmation and empowerment, individuals experiencing homelessness can create sustainable felt-identities that are more readily integrated into society. More important than reintegration, dignity and identity are inextricably linked with self-esteem, mental/physical health, and employment, factors crucial to improving quality of life. It is possible that positive dignity and identity are as important as basic needs in ending the cycle of homelessness (Miller & Keys, 2001).

This paper attempts to explore three central questions: How important are dignity and identity to ending homelessness? What are “homeless identities?” What relationships exist
among homelessness, identity and dignity? These are convoluted questions that could never be answered by one study alone, but they are important for promoting humane and effective social services. The overall purpose of this study is to continue the homeless identity, self-esteem and dignity conversation and to provide a glimpse into the perspectives of those experiencing homelessness.

### Literature Review

#### Defining Homelessness

The word “homelessness” may conjure up images of malodorous mentally ill older men (Bullock et al., 2001). However, the phenomenon is much more complex than what is seen on the surface. In an attempt to define, explain, explore and assign function to the homeless population, the United States has imposed regulations and definitions on this amorphous group. For example, in HUD’s recent re-categorization (through the HEARTH Act) four separate categories were created to encapsulate homelessness. These categories include: literally homeless, at-risk homeless, unaccompanied youth that are homeless under unique federal statutes and individuals or families fleeing a domestic violence situation (HUD, 2012). In addition, three distinct temporal groups were created to define the homeless population and provide adequate services: transitional, episodic and chronic (Culhane & Metraux, 2008 p. 113). These categories serve to reduce the homeless population to manageable groups. The categories are limiting—yet they are the very foundation of our housing services.

There is no shortage of categories to define, describe, and prescribe homelessness. However, no emerging definition will ever be comprehensive. In fact, many social science researchers agree that instead of drawing sharp distinctions, homelessness categories, “reinforce the point that housing hardship forms a continuum not easily dichotomized into homeless and
A PARTICIPANT-DRIVEN EXPLORATION OF HOMELESSNESS

nonhomeless segments” (Lee et al., 2010, 503). Julia Wardaugh, in her study of homeless women reaffirmed this when she stated, “home and homelessness are not simple descriptions of being in the world: they refer, rather, to complex and shifting experiences and identities” (Wardaugh, 1999, 93). Most sociologists, like Wardaugh, highlight place in society and personal identity in addition to a lack of housing when defining homelessness (Lee et al., 2010, p. 502). Therefore, homelessness, in the broadest sense, can be defined as a state of rooflessness that convolutes identity, dignity and self-esteem on both a personal and social level (Boydell et al., 2000, p. 26).

Dignity and Homeless Services

When exploring dignity and homeless services, it is perhaps best to start with the least dignified housing services in our history. Much of the public housing that was built by federal and local governments in the 50s and 60s has since been torn down and partially replaced with voucher programs. The high-rise housing projects were wrought with structural flaws, faulty elevator systems that caused death, little green space, minimal amounts of living space and were void of even the most basic sanitary and health necessities (Hunt, 2009). Since the massive failure of these housing projects, HUD and other policy programs have fought hard to provide housing and homeless services that promote dignified treatment. This is reflected in a marked shift in social science literature—from a top-down approach to housing to one that is more grass roots and promotes dignity and respect.

Miller and Keys conducted a study in 2001 of twenty guests at a café and restaurant open specifically to provide individuals dealing with homeless with a location where they can feel dignified. The researchers found that dignity can be promoted/violated through interpersonal interactions as well as person-setting interactions. Dignity is validated on an interpersonal level
through a number of methods including receiving personal/individualized services. In addition to dignity promotion, dignity was violated with interpersonal events such as poor service or unfair treatment. With respect to setting-interactions, dignity was validated through cleanliness and available resources. Dignity was violated through a service site’s arbitrary rules or staff members’ negative associations. In the end, the researchers found incredible negative consequences of dignity violation, such as: a lack of self-esteem, anger and depression. These negative consequences in turn perpetuate mental illness, self-doubt and a lack of motivation. Especially for the chronically homeless population, this negative cycle prevents exit from homelessness by increasing reliability on mental health services, decreasing self-reliance, and potentially increasing substance abuse disorders. Researchers postulated that roles that promote self-worth and dignity may be just as important as basic resources such as food and shelter (Miller & Keys, 2001).

Mirroring Miller & Keys’ transactions, Jacobson utilizes grounded theory to provide a taxonomy of dignity. This taxonomy includes both human dignity and social dignity (Jacobson et al., 2009 p. 725). The researchers suggested that dignity promotions and violations happen on individual, personal, communal and societal levels. Furthermore, they defined dignity with respect to place and space. The researchers suggested that, “the city is the setting for multiple dignity encounters between individual and collective urban residents…For people who are poor, sick, and otherwise vulnerable, urban dignity is contextualized by a paucity of privacy, self-determination, and choice” (Jacobson et al., 2009, p. 731). Jacobson confirmed Miller and Keys’ findings above that dignity violation, especially among the homeless population, results in: fear, disbelief, hurt, mortification, frustration, anger, degradation, feelings of worthlessness, humiliation, depression and even suicidal feelings (Jacobson, 2009, p. 7).
Sumerlin & Bundrick, in an interesting spin on dignity literature, studied the ways in which dignity promotion led to happiness and self-actualization among homeless men. Through face-to-face interviews with 146 homeless individuals, a thematic analysis, and factor loading, the researchers found that many homeless men were able to find happiness despite difficult conditions. While domiciled individuals would expect the homeless population to feel constantly dejected and undignified, the researchers instead discovered that individuals experiencing homelessness found self-esteem, self-worth, dignity promotion and happiness in their situation. The researchers proposed an existential-humanistic model to explain this happiness. This model contends that happiness and inner self-worth (dignity) are existential, resulting from feeling purposeful in a larger societal context, and humanistic, resulting from satisfaction of physiological needs. Most individuals who are homeless manage to find self-worth and happiness even in the most difficult conditions. In fact, “a homeless person, like the whole of humankind, is at every moment becoming and dynamic” (Sumerlin & Bundrick, 2000, p. 200). Even if social service conditions are difficult, life on the streets repugnant and homelessness miserable, individuals are still able to find happiness. It is important to explore happiness and to not limit the homeless population to a pitiful self-loathing group.

Finally, Kryda & Compton in their study of homeless outreach services explored why individuals experiencing homelessness reject offers by outreach workers to move into shelters, apply for government subsidies, go to food banks, etc. The researchers, after 24 interviews, found two crucial themes. Many participants thought that outreach workers did not have others’ well being in mind. Second, the interviewees collectively believed the outreach workers made promises they could not keep. Largely, the individuals living on the street felt invalidated and suffered dignity violations. The researchers explained, “it is of critical importance to ask people
who are homeless what their needs are rather than assuming what their needs are based on an outsider’s perspective” (Kryda & Compton, 2008, p. 149).

Dignity was explored at great length in the 1990s and early 2000s, but has since been largely accepted as common social service vernacular and is not often investigated. However, as demonstrated above, dignity interactions are a component of ending the cycle of homelessness and should therefore be continuously evaluated. Dignity promotion and positive self-esteem are important components of improving the quality of life of individuals experiencing homelessness. In addition, there are various types of dignity encounters. Some occur within an individual’s sense of self and are difficult to define. Other dignity encounters occur based on interactions with daily people, spaces and places. Still others are based on larger socioeconomic patterns expressed through policy and media representations. Finally, researchers found that listening to individual needs is the best way to promote dignity. Top-down methods to service provision, as seen in public housing projects, are frightening failures.

**Identity and Homelessness**

Identity researchers recognize that identity does not exist solely within each individual. In fact it is a collective and collaborative process that is shaped by communal interaction. Within the past two decades, the majority of identity research has focused on a humanist or cultural studies approach. This approach is most commonly known as the social constructionist approach to identity. A similar approach will be used in this paper (Cerulo, 1997, p. 201-2). Cerulo, in her review of identity literature, explained that the social constructionist approach:

Rejects any category that sets forward essential or core features as the unique property of a collective’s members. From this perspective, every collective becomes a social
artifact—an entity molded, refabricated and mobilized in accord with reigning cultural scripts and centers of power. (p. 387)

The Social Constructionist approach demands that identity studies must be as dynamic and open as identity itself, and that they consider an individual’s context, specifically culture and power relations. Identity researchers have come to understand that identity extremes do not work. A collective identity does not account for unique differences, yet individualistic identity does not exist, as the majority of people do not live in isolation. Identity therefore is both internal and external.

Snow and Anderson (1987) conducted one of the most crucial homeless identity studies. Their study focused on how “street people” construct their identities. Snow and Anderson demonstrated that construction of identity is crucial to preserving self-worth and dignity. As a, “superfluous” group that seems to serve no purpose in our society, homeless street people must find new and innovative ways to create purpose for themselves (p. 1339). The researchers found three common themes through homeless identity talk: distancing, embracement, and fictive storytelling. Distancing consisted of separating self from homeless roles, associations and institutions. This was a method of shirking a “homeless identity,” and instead either becoming invisible, or at least not visibly homeless. The second pattern, embracement, marked an agreement between one’s socially imposed role and individual identity beliefs. For instance, some homeless street people did in fact consider themselves “tramps” or “bums.” (p. 1354). More positive embracement occurred as well, with some individuals feeling like they were “brethren of the road,” (Snow & Anderson, 1987, p. 1355). Regardless, embracement deals with accepting a part of the socially imposed homeless identity, internalizing it and making it a part of one’s own felt identity. Finally, the researchers found fictive storytelling as a powerful tool to
preserve and create identity. Many individuals “embellished” or “fantasized” components of their lives. Individuals told elaborate stories and exaggerated past, present and future feats. Snow and Anderson’s groundbreaking research demonstrated that street people do not merely tacitly agree with the false roles, identities and purposes assigned to them by society. Many individuals find creative and dynamic ways to carve out a place for themselves in a society that wants nothing to do with them.

Extending the work done by Snow and Anderson, Farrington and Robinson completed a participant observation study surrounding homelessness and identity maintenance. The researchers found that most homeless participants fell into different phases that were directly correlated to their length of time homeless. Those who were recently homeless tied their identity into exiting homelessness. Those who had been homeless for multiple years attached their identities to their homeless network. These individuals prided themselves on being expert homeless service navigators and were able to share information with others. Farrington and Robinson, like most homeless researchers, made a distinction between personal identity and social identity and assert that both are equally important. The researchers concluded that, “the longer-term homeless will have a stronger homeless identification and…escape is more likely if an individual does not come to identify with other homeless people” (Farrington & Robinson, 1999, p. 191). Similar to Farrington and Robinson, Boydell et al. (2000) focused on felt identity, or, how an individual perceives her/his own identity primarily through emotional expression. The researchers confirmed results that the longer individuals experience homelessness, the more they attach themselves to a homeless identity, and the more difficult it is to exit from homelessness (p. 35).
Osborne, in his study of homeless street people, found different results from individuals who identified as homeless. Osborne created a tool to measure how strongly an individual living on the streets associates him/herself with a homeless identity and interviewed 97 homeless individuals. Both costs and benefits to identifying as homeless were revealed. Osborne discovered that becoming more entrenched in a homeless identity might increase an individual’s self-worth, integrity and sense of respect. However, Osborne also confirmed that the more an individual identifies as, “homeless,” the more difficult it is for that individual to reintegrate into society (Osborne, 2002).

One final concept that is necessary to discuss is the link between identity and economy. Akerlof & Kranton (2000) constructed a mathematical utility function that measured identity in comparison to socioeconomic status. The researchers found that identity and economics are directly related. They found that most people in lower economic categories do not have the option to choose their identity. Instead their socioeconomic status assigns them an identity (p. 717). Macleod (2008) in his book, *Ain’t No Makin’ It*, proved this point through an ethnographic study of two groups of high school boys in a housing project. Despite aspirations of the two groups, most were unable to secure any meaningful labor or a living wage throughout their entire lives. While many may indict these boys as “not working hard enough,” Macleod points to our flawed achievement ideology. America’s “achievement ideology” states that you can be whatever you want to be if you just work hard enough. However, Macleod demonstrated that: 1) America is a class-segregated society where higher classes have more resource access than lower classes. 2) The cultural capital (beliefs, values, norms) of lower socioeconomic classes are not valued or seen as “educated” and 3) Most individuals in these lower socioeconomic classes are not provided with opportunities for upward mobility or traditional American success (Macleod,
2008). Macleod’s study, and countless others, demonstrate that the lower economic rungs of our society are continually shut out and thus lower economic identities are negated or undervalued (Harter et. al., 2007; Mantsios, 2003; Granfield, 1991; Ehrenreich, 2001).

To summarize the literature review on identity, we can point to Boydell et al.’s definition of identity: “[Identity] is both multidimensional and unified, emotional and cognitive, and uniquely individual and intimately connected to the social” (Boydell et al., 1999, p. 28). In being “connected to the social,” we must acknowledge the role that power, class, and stigma play in shaping the homeless identity while simultaneously deeming this identity unacceptable.

**Methodology**

This study draws on components of participatory action research (PAR), a research methodology used for social change. PAR studies involve participants in a collaborative way. In addition, PAR studies recommend action based on participant collaboration (Walter, p. 3). With PAR in mind, the research was conducted to allow individuals to tell their own story and explain where they want/need to see change in homeless services in order to be successful.

The primary research tool was a semi-structured interview. Participants were asked to share whatever they felt was relevant to their experience of homelessness. The primary investigator rarely spoke and allowed the participants to direct the flow of the interview. In addition to the interview, participants were asked to take two surveys. First, participants completed Rosenberg’s self-esteem survey (Rosenberg, 1965). Rosenberg’s self-esteem survey is one of the most reliable tools for reporting self-esteem. This survey was taken to draw conclusions about participant’s self-esteem and enrich the conversation about how dignity/identity may affect it.
The second survey was adapted from one developed by Randall Osborne, professor at Indiana University East, in his study, “I May be Homeless, But I’m Not Helpless: The Costs and Benefits of Identifying With Homelessness.” Osborne asked individuals to respond to the statement: “homelessness is a major reflection of who I am.” Responses included 0 – disagree completely, 1 – strongly disagree, 2 – slightly disagree, 3 – slightly agree, 4 – strongly agree and 5 – agree completely. The responses to this survey are recorded in table one below. For a deeper exploration of identity, and continuing with Osborne’s model, the participants were then asked to describe how they see themselves in ten words.

**Sampling and Demographics**

Participants were self-selected and convenience sampled. The researcher went to one meal program in the city and two different supportive housing organizations, also located near the city center. At these locations, the researcher explained that she was, “conducting a study on dignity, identity and homelessness and is looking for individuals who would like to share their story.” Individuals volunteered themselves to participate in the study. All participants had been homeless at least once in the past ten years and were made fully aware of the intent of the study and their ability to opt out at any time. In addition, the researcher was fully compliant with the Institutional Review Board’s human subject protocol and took measures such as de-identifying data, deleting audio recordings and using participant codes to protect participants. Participant demographic information was collected in order to draw comparisons back to the city’s overall homeless population and is detailed below in table 2.
### Table 1

**Demographic Information of Participants**

<table>
<thead>
<tr>
<th>PARTICIPANT ID #</th>
<th>Age</th>
<th>Gender</th>
<th>Race</th>
<th>Number of lifetime episodes of homelessness</th>
<th>Length of current homeless episode</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>46</td>
<td>Male</td>
<td>White/Native-American</td>
<td>1</td>
<td>3 years +</td>
</tr>
<tr>
<td>2</td>
<td>54</td>
<td>Male</td>
<td>Black</td>
<td>&quot;on and off&quot;</td>
<td>between 1-2 years</td>
</tr>
<tr>
<td>3</td>
<td>40</td>
<td>Female</td>
<td>White</td>
<td>&quot;on and off&quot;</td>
<td>between 1-2 years</td>
</tr>
<tr>
<td>4</td>
<td>45</td>
<td>Male</td>
<td>White</td>
<td>&quot;on and off&quot;</td>
<td>&lt;6 months</td>
</tr>
<tr>
<td>5</td>
<td>54</td>
<td>Male</td>
<td>White</td>
<td>6+</td>
<td>NOT homeless at present</td>
</tr>
<tr>
<td>6</td>
<td>60</td>
<td>Female</td>
<td>Black</td>
<td>1</td>
<td>between 1-2 years</td>
</tr>
<tr>
<td>7</td>
<td>57</td>
<td>Female</td>
<td>White</td>
<td>1</td>
<td>between 6 months - 1 year</td>
</tr>
<tr>
<td>8</td>
<td>61</td>
<td>Male</td>
<td>White</td>
<td>1</td>
<td>&lt;6 months</td>
</tr>
<tr>
<td>9</td>
<td>44</td>
<td>Male</td>
<td>Black</td>
<td>1</td>
<td>&lt;6 months</td>
</tr>
<tr>
<td>10</td>
<td>77</td>
<td>Male</td>
<td>White</td>
<td>3+</td>
<td>NOT homeless at present</td>
</tr>
<tr>
<td>11</td>
<td>38</td>
<td>Male</td>
<td>&quot;I'm a mutt&quot;</td>
<td>&quot;too many&quot;</td>
<td>NOT homeless at present</td>
</tr>
<tr>
<td>12</td>
<td>29</td>
<td>Male</td>
<td>White</td>
<td>1</td>
<td>&gt;6 months</td>
</tr>
<tr>
<td>13</td>
<td>64</td>
<td>Male</td>
<td>Multi-racial</td>
<td>1</td>
<td>3+</td>
</tr>
<tr>
<td>14</td>
<td>56</td>
<td>Female</td>
<td>White</td>
<td>1</td>
<td>6 yrs</td>
</tr>
<tr>
<td>15</td>
<td>22</td>
<td>Male</td>
<td>Black</td>
<td>1</td>
<td>1 month</td>
</tr>
<tr>
<td>16</td>
<td>33</td>
<td>Male</td>
<td>Black</td>
<td>1</td>
<td>NOT homeless at present</td>
</tr>
<tr>
<td>17</td>
<td>53</td>
<td>Male</td>
<td>Black</td>
<td>1</td>
<td>16 years</td>
</tr>
<tr>
<td>18</td>
<td>58</td>
<td>Male</td>
<td>Black</td>
<td>3</td>
<td>&lt;6 months</td>
</tr>
<tr>
<td>19</td>
<td>50</td>
<td>Female</td>
<td>Black</td>
<td>&quot;on and off&quot;</td>
<td>15 years</td>
</tr>
<tr>
<td>20</td>
<td>50</td>
<td>Male</td>
<td>Black</td>
<td>2</td>
<td>4 years</td>
</tr>
</tbody>
</table>

It should be noted that the racial categories used by this survey were based off of the Continuum of Care’s point in time survey and are rather limiting. In addition, children, young adults and women were underrepresented in the research, primarily due to the sensitive nature of the research. Other than these important groups, the sample is relatively representative of the homeless population at large, who, based on the most recent point in time survey, are primarily older, African-American males (Continuum of Care, 2011).

To avoid any misunderstandings, the researcher offered to read the survey instruments out loud to participants. All participants chose to conduct the survey aloud instead of filling it
out. If participants had a question about a specific item, the researcher answered said question without guiding the participant to a specific answer.

From the 20 participants, 8.91 hours of recorded data was collected, including interviews and surveys (which were also audio recorded). The shortest interview lasted 7 minutes and 8 seconds, the longest interview lasted 1 hour, 9 minutes and 57 seconds. The mean interview duration was 26 minutes and 45 seconds. All of the information in the interviews was transcribed verbatim, de-identified and then coded using a team of educated coders. Coders used a combined emotional and holistic coding method by separating chunks of data into emotional beats and focusing on using coding words taken from the participants’ own language (Saldana, 2013). A second level of coding condensed various codes into relevant themes based on where participants steered the conversation. These themes are presented in the discussion section below.

**Survey Results and Discussion**

As mentioned previously, participants were asked to take two surveys. One was the Rosenberg self-esteem survey, the other, the Homeless identity survey created by Osborne. The Rosenberg self-esteem survey deems a score of 15-25 as “normal.” Anything lower than 15 is considered “low self-esteem” and anything higher than 25 is considered “high self-esteem.” In addition to the two surveys, participants were asked to describe themselves in ten words. These words and survey scores are listed below. Three participants opted out of the surveys and therefore their information was not recorded.
### Table 2

*Results of Self-esteem and Homeless Identity surveys*

<table>
<thead>
<tr>
<th>Part. #</th>
<th>Self-Esteem score</th>
<th>Homeless Identity Score (5 max)</th>
<th>Identity description words</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>13</td>
<td>5</td>
<td>Hard worker, musical (guitar), family man, in a bad situation, wants to have more dignity, kinda hopeless, good friend, good listener, big heart, needs better medical coverage.</td>
</tr>
<tr>
<td>2</td>
<td>28</td>
<td>0</td>
<td>People-person, open to some, good sense of humor, all-around good, good personality, basketball player, romantic, in a relationship.</td>
</tr>
<tr>
<td>3</td>
<td>28</td>
<td>0</td>
<td>People-person, open to everyone, don't hold back nothing, honest, broad sense of humor, lots of patience, good at cards, good with kids, simple.</td>
</tr>
<tr>
<td>4</td>
<td>25</td>
<td>0</td>
<td>From Mississippi, survived 4 hurricanes, been homeless, learned how to look out for other people, good cook, dad recently died, loves Dad and watched him die, can't get a job in Milwaukee</td>
</tr>
<tr>
<td>5</td>
<td>27</td>
<td>0</td>
<td>Tries to help others, polite, helpful, confident, family health affects him, personal health is poor, courteous, kind, nice, friendly.</td>
</tr>
<tr>
<td>6</td>
<td>15</td>
<td>3</td>
<td>Friendly, easy-going, church-goer, family, my kids, singer, cooking, cleaning, shopping, going out with the ladies.</td>
</tr>
<tr>
<td>7</td>
<td>26</td>
<td>0</td>
<td>Generous, likeable, helpful, educated, talkative, agreeable, confident--I fight for my rights, sarcastic, proud and helpful.</td>
</tr>
<tr>
<td>8</td>
<td>17</td>
<td>1</td>
<td>Indigent, I want to be solvent, I want to be healthy, electrical professional, I like to be near my children or grandchildren, I want to have a small place, I just want to be healthy, not on welfare, I don't want to worry.</td>
</tr>
<tr>
<td>9</td>
<td>20</td>
<td>0</td>
<td>Man, strong, responsible, hard-working, caring, loving, focused, courteous, heroic at times, generous.</td>
</tr>
<tr>
<td>10</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>11</td>
<td>26</td>
<td>0</td>
<td>Obnoxious, funny, jolly, charismatic, happy, crazy, big heart, loveable, worthwhile, pleasure to be around, exciting.</td>
</tr>
<tr>
<td>12</td>
<td>16</td>
<td>4</td>
<td>Strong, open-minded, anxious, at times annoyed, fearful, alone at times, open-minded, free spirit, can be shy, strong heart.</td>
</tr>
<tr>
<td>13</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>14</td>
<td>16</td>
<td>4</td>
<td>Sometimes useful, self-esteem, helpful, almost housed.</td>
</tr>
<tr>
<td>15</td>
<td>27</td>
<td>5</td>
<td>Smart, funny, adorable, obnoxious, rebellious, independent, judgmental, respectful, caring and anti-social.</td>
</tr>
<tr>
<td>16</td>
<td>27</td>
<td>0</td>
<td>Generous, good heart, clever/street smart, easy-going, not aggressive, good days and bad days, I hate cold weather, I try to smile every once in a while, basketball player, WWF.</td>
</tr>
<tr>
<td>17</td>
<td>21</td>
<td>1</td>
<td>Interests, in a rough spell, changes, at war with self, complicated, wolf-side, lamb-side, good, trying to make it, set backs.</td>
</tr>
<tr>
<td>18</td>
<td>30</td>
<td>0</td>
<td>Nice, honest, faith, family-oriented, people person, knowledgeable, dependable, patriotic, hopeful, determined.</td>
</tr>
<tr>
<td>19</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>20</td>
<td>19</td>
<td>4</td>
<td>N/A - chose not to provide descriptors.</td>
</tr>
</tbody>
</table>

Out of all twenty participants, only one scored in the “low self-esteem range” with a score of 13. In addition, eight individuals scored in the “high self-esteem range.” These scores suggest that perhaps homelessness does not affect self-esteem as strongly as previous studies have indicated. Or else, homeless individuals find unique ways to preserve their self-esteem. The
fact that these individuals self-selected and volunteered for the interview is evidence that they have self-confidence, but this limitation could not be avoided.

With respect to identity trends, only six individuals provided a score of 3, 4, or 5, (in other words, answered the question, “homeless is a major reflection of who I am with slightly agree, strongly agree, or completely agree”). The other 11 participants answered with a score of 0 or 1, with 0 being the most frequent answer. Nine participants “completely disagreed” with this statement. Again, this could be evidence of the sample’s relatively high self-confidence, but this information confirms, at least anecdotally, that most homeless individuals find ways to maintain their identity that do not include identifying themselves as, “homeless.”

Out of the 138 descriptors participants used to describe themselves, 29 were situation-related. This includes statements such as, “I want to be solvent,” “in a rough spell,” “in a bad situation,” “can’t get a job,” and more. Twenty-one percent of total identity words had to do with an individual’s situation. Even though participants did not consider homelessness to be a big part of their identity, situation and street realities had an effect on how the participants viewed themselves. In the graph to the left, “homeless identity score” was plotted as the bottom line below “self-esteem score.” You can see that, aside from one outlier, there is an inverse
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relationship between self-esteem and homeless identity. In other words, as homeless identity increases, self-esteem decreases and vice versa.

Participant #15 is an obvious anomaly. This participant is the youngest in the sample, and also has been homeless for the shortest amount of time. This participant dresses very well and does not appear to fit the mold of the “street homeless.” These factors suggest that perhaps this participant has not yet internalized his homeless identity to the point where it affects his self-esteem. Or, perhaps, due to his appearance and relatively short length of homelessness, he has not experienced the type of dignity violations and stigma that deplete self-esteem.

For the purposes of the graph shown above, individuals not currently homeless were entered as “0” in the years homeless category. These not currently homeless individuals had some of the highest self-esteem scores and some of the lowest homeless identity scores. This suggests that once housed, negative impacts on self-esteem and homeless identity can be curbed. The prediction made by many researchers, that the longer someone is homeless the more they will identify as “homeless,” and the lower their self-esteem will drop, is not reflected in this data.

Figure 2. Years homeless vs. identity score vs. self-esteem score. Length of time homeless (line with triangular points) is plotted against homeless identity score (line with circular points) and self-esteem score (top line) with respect to participant number (listed on x axis).
The dotted line, representing how long participants have been homeless, increases yet the other two lines (homeless identity score and self-esteem score) show no possible correlation to length of time homeless.

**Interview Results and Discussion**

The purpose of this research was not to produce survey results and to quantify homeless issues. The most important part of the study was the qualitative interviews. When asked to talk about their experiences with homelessness, participants were a wealth of knowledge and resources. After coding, a few overarching themes emerged. Themes were recorded when more than three participants mentioned the same concept or when one participant focused on a specific theme in an intentional and lasting way. Participants focused on major themes of dignity, identity and self-esteem. Dignity, identity and self-esteem themes emerged as barriers to exiting homelessness. Additional external barriers included: 1) race, class and gender; 2) internalizing oppression, 3) physical/mental health and 4) feeling out of touch with technology. Dignity barriers to exiting homelessness were organized based on housing location: 1) extreme dignity violations were found in shelter services and on the streets, 2) small dignity violations occurred in supportive housing but also, 3) dignity promotion (not a barrier) was also found in supportive housing. Finally, identity barriers to exiting homelessness emerged as: 1) family and friendship, 2) job identity and 3) stigma/stereotypes.

On the other hand, participants mentioned dignity, identity and self-esteem as motivators for exiting homelessness and as potential solutions. Self-esteem and identity themes manifested themselves as solutions in 1) story-telling and humor and 2) street smarts/toughness as identity. Dignity and humanity also emerged as a solution theme. Employment and education represented a third avenue for solutions and, finally, participants mentioned creative solutions including: 1)
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collective impact and 2) doubling up. For the remainder of this paper, these themes will be explored.

**Overarching Theme I: Barriers to Exiting Homelessness**

**External barriers—Race, class and gender.** Gerald has been homeless three times in his life, currently for six months. He has a bachelor’s degree in Social Work and held stable employment for the majority of his life. A hard and devoted worker, things took a turn for the worse when he lost two jobs simultaneously:

Even though I had two jobs I was living check to check. One of ‘em I did property management. Another one was a machine operator in an old factory. But, anyway, I had them both at the same time at one point. And in one week in March, I lost both jobs. Got laid off from both jobs at the same exact time. Ain’t that a shame?

And so, uh, at some point my unemployment didn’t come in fast enough.

Because of these unusual and unfortunate circumstances, Gerald found himself homeless for the third time. Gerald’s self-confidence and humor keeps him afloat. When asked to answer the self-esteem survey he told me, “you should have had a question: are you overconfident? Are you big-headed about yourself? Ha.” Incredibly well-educated, well-spoken and astute, Gerald is a change maker who has more than one idea about what keeps people homeless. First, he discussed opportunity structure and oppression:

Class. Gender. Finances really dictate how you live in this society and how you’re looked at in this society. I think America puts so much emphasis on stuff like that. This is the only place that puts this much pressure on stuff like race and gender and education—stuff that sometimes you can’t do nothing about! That you’re a female, that you’re black, that you weren’t raised with a silver spoon in your
mouth. But the fact that you were born in them type of societies and environments
determine how people deal with you.

Those in the lower class and minority races are “dealt with” differently in our society. Even in
the post civil-rights era, discrimination is still a barrier to many minority groups as stereotypes
and racism persist (Bobo, 1999). Gerald highlights how race issues are prevalent in
homelessness:

  Ain’t it a shame. You come in these places, you see 90% of these people are
  black. Any shelter you go to. Same thing with prisons. So what has happened?
  That makes our situation that unique or that different? Is it us? Is it attitudes?
  Beliefs and behaviors? Is it culture? It’s a lot of things, it really is.

Gerald explains how people with lower socioeconomic and minority statuses are disadvantaged
in American society. From his experience, class, race and gender can be a real asset or a real
hindrance. For black individuals in Milwaukee, race, class and segregation are very real barriers
to exiting homelessness. Gerald confirms Macleod’s ethnographic findings that many
disadvantaged individuals astutely recognize their barriers:

  We live in a judgmental, mean, and in some cases vindictive, world. I don’t think
  the majority of it’s like that, but the mouth that gets fed, that’s what they are. The
  ones who’s making the decisions.

Gerald points to the fact that those in more advantaged social positions (often whites and the
upper class) make decisions for all without understanding the plight of the lower class. Gerald
also points to a glaringly obvious fact, that a large amount of individuals experiencing
homelessness are black. Racial minorities are overrepresented in the homeless population due to
long histories of oppression and social immobility.
On a macro level, class and racial hierarchies permeate American beliefs and politics and affect policies designed for the poor such as housing and welfare. Tighe (2010), in his review of public opinion on affordable housing explained general public opinion on class, race and economic integration:

Public opinion is one of the driving forces behind the creation and maintenance of public policies. That racial and economic [housing] segregation continues to exist reflects the public’s ambivalence toward policies designed to promote racial and economic integration. Opposition to the development of low-income housing is likely a product of this ambivalence, as the introduction of poor and minority households into otherwise homogenous neighborhoods often produces concern that the urban problems associated with concentrated poverty and racial minorities will be transferred to middle-class and affluent communities (p. 13).

One of the main reasons affordable and low-income housing is not being built in America is the fact that middle-class and affluent communities do not want it. While people are sympathetic to the plight of the homeless, when it comes time to take action and build more housing, most suffer from “NIMBY” (not in my backyard) syndrome (Tighe, 2010). This is the idea that, of course I want those people to have housing, but not near my kids, my family, and my neighborhood. This stigma-fueled attitude keeps affordable housing at a minimum, or else, in undesirable neighborhoods.

Another way that individuals experiencing homelessness are held back through structural barriers is through the “criminalization of homelessness.” Punitive laws are designed to curb homelessness, or at least make it invisible. Yet these laws typically hinder the homeless from exiting the system: “Public sleeping, camping, urination, and panhandling legislation only further
reduces a homeless person into the cycle of debt. Fines and prison sentences pile on top of one another, hurting both the individual and the local criminal justice system” (Will, 2012, p. 31). Take for example, an individual experiencing homelessness who cannot stay at a shelter because it is full. This individual sleeps on a park bench. He is awoken by a police officer and given a fine for sleeping in public. The next day, he attempts to panhandle to get food and is given another ticket. The tickets begin to mount, the individual cannot pay, and he is summoned to court. He is then sentenced to community service since he cannot pay his tickets. His community service commitment prevents him from his job search and contributes to keeping him homeless. Will’s evaluation of our system explains that there is only one real legal response to homelessness: do not be homeless, or else pay for it.

**External Barriers—Internalizing oppression.** Jake is a professional boxer and wrestler. With an incredibly muscular physique, it is easy to see that he has had a successful career. He has a fiancée and once-supportive parents. The high pressure environment of professional boxing led to Jake’s spiral into addiction. After being pressured by his mother to quit using, he was kicked out of the house. He managed to keep his relationship with his fiancée, but even that is shaky. Jake is only 29 years old, but his (so far) eight month stint with homelessness has aged him in a troubling way. Coming up against his addiction again and again, Jake explained he has started to, “feel like a failure.” He strongly identifies with homelessness and openly discussed the effect of judgment by other individuals:

a lot, a LOT of people treat me negatively. You tell ‘em about your drug use and they tend to look at you like you’re a crack head, you’re worthless, you don’t matter to anyone else anymore. They treat you different. It’s a lot. You kinda break down and cry.
To assume that Jake does not matter because of his addiction is harmful to Jake’s psyche. This dignity violation has taken a toll on his sense of self-worth:

It’s very hard out there. Not a lot of people understand once you’re homeless—what it takes. A toll on your body, your mind, your spirit. You kinda lose it at times. It’s a very hard life. I mean, I’m still with my fiancée but at the same time I’m struggling trying to get a job.

Jake is a great athlete, a gentle person and is looking forward to starting a family. He is very well connected and compassionate towards his friends. He has a boxing match lined up in a few months and is looking forward to getting back into boxing. On many levels, Jake could be seen as successful. However, if you are told often enough that you are a failure, you may start to believe it.

Other participants internalized stigma and oppression by asserting that, “some people are homeless by choice, not because they got to be.” Four different individuals explained that they were not like those “other homeless people,” who “choose to be homeless.” All four of these individuals, when asked to explain, referenced individuals dealing with drug/alcohol addictions and mental health issues. Despite the fact that these individuals have intense obstacles: mental disabilities, job loss or low-wage jobs, economic contraction, lack of affordable housing, removal of institutional supports for mental illness and racial, ethnic and class discrimination (Burt, 2001, p. 2), many still blame homeless individuals for their own situation. Nearly 35% of the public in one study said that it is their own fault they could not succeed (Toro & McDonell, 1992, p. 61). The fact that this claim infiltrated the homeless population is evidence that public opinion, stigma and oppression can be internalized. While addiction and homelessness may start
with a series of choices, they quickly morph into new demons that are impossible to easily tackle.

**External Barriers—Physical and mental health.** Joseph spent over an hour talking to me and most of the hour was spent discussing his health complications. Joseph is a recovering alcoholic with diabetes, kidney problems, and cirrhosis of the liver. A recent car accident led to extensive knee surgery and depression. He attributes his homeless situation to his health problems:

> I think once after my leg got injured and then I found out I had some internal stuff wrong with me, my liver started acting up on me which kind of affected my kidneys and stuff like that. It’s just been kind of an uphill battle for me. And uh…because of that, it drove me to homelessness.

Not only have health problems driven Joseph to homelessness, but multiple times he lost his shelter bed because of overnight hospital visits:

> Like, I went to the hospital a while ago and they [shelter staff] cut my lock off over on my locker and threw all my stuff out. And they do that, they say, you should call in and we’ll put it in a medical locker…which I did do that, but, I don’t know. This is like the third time they’ve done this to me. Besides, it’s not even close to sanitary in there!

Health complications coupled with inconsistent shelter practices keep him from being able to stay in the shelter, so Joseph sleeps on the streets. In addition, medication costs are incredibly limiting. Joseph explained not being able to do anything because he cannot afford two crucial medications that manage his cirrhosis and knee infection.
Out of all of the participants, Joseph reported the lowest self-esteem. Mental and physical health barriers have really taken a toll on him. No matter how hard he tries to secure housing, employment, pay for his medication and get back on his feet, his health barriers prevent him from upward mobility. This led Joseph to feel as though he is abnormal: “I am just trying to ask for a little something back that I paid into [social security]. That’s all I’m asking for. Just so I can get an apartment and live like any other normal person.” At this point in his life, his health problems are so limiting that they are affecting every facet of living and preventing him from success.

These are not just Joseph’s problems. Most of the participants cited some sort of health issue, including, but not limited to: “cancer,” “poor health,” “dental,” “depression” (3 participants), “disability” (5 participants), “medical problems,” “poor health” (9 participants), “suicidal thoughts” and even, “fear of death from health problems.”

Poor resources for mentally ill individuals keep people from living a high quality life. In a study done by the Treatment Advocacy Center and National Sheriffs’ Association, it was found that more mentally ill individuals are in prison than in mental health facilities. In fact, in 2004 there was approximately one psychiatric bed available for every 3,000 people. Compare this to 1955, when intense reform led to implementing one psychiatric bed for every 300 people (Torrey et al., 2010 p. 9). Incredible cuts in funding for mental health services have resulted in mentally ill individuals being incarcerated instead of receiving appropriate treatment. In fact, in Wisconsin, a 2010 audit of three state prisons found that between 55 and 76 percent of inmates were mentally ill (Torrey et al., 2010 p. 10). Mental and physical health barriers keep individuals in the cycle of homelessness.
External barriers—technology, “out of touch.” Tom is 77 years old. He explained, “I am probably one of the few people alive who has hitch-hiked US route 66 Chicago to LA both ways and have driven it both ways.” Tom talks about growing up in an era that was more receptive to homelessness. An era where “tramps” and “hitchhikers” were common:

There’s a lot [different today] it’s a lot more dangerous than it was then. Back then it [homelessness] wasn’t looked down upon as hard as it is today. I mean, you had what we used to call tramps that are guys that used to live on the railroad. They rode the cars from here to there and they’d get by with doing odd jobs and bagging and that kind of thing.

Tom talked about how deindustrialization and “clean-up” efforts that got rid of flophouses, industrial trades, and day-by-day labor opportunities severely disadvantaged homeless individuals. A lack of blue-collar jobs and trade training contributes to the unemployment problem among individuals experiencing homelessness:

You know, when I was in high school, our high school had proper shop, scene shop, and masonry shop, there was a pre-chefs thing, an auto shop, it had all of those. And kids came out of that, and, you know, they had a good chance at becoming employable right now. But there’s almost none of that left. And, for the homeless, they probably don’t have the skills to get a good job, or the stability.

In addition, the vast majority of job applications must be filled out online. Job searches are done online, resumes are posted online and LinkedIn has become the new employment network. For individuals trying to get into the job market without knowledge of computers, it is nearly impossible: “I don’t know a thing about computers because I wasn’t brought up in that era and I wasn’t given the opportunity to learn how to do ‘em. I’m computer illiterate.” When this same
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participant attempted to take a computer-training course, he was unable to do so because of inadequate resources. He explained that he got in line for a library course on computers but, with only ten computers and long lines, he was never able to get into the program. It is unrealistic to expect people to exit homelessness with no opportunities for stable employment.

These various external components: race, class, gender, technology, internalized oppression and physical/mental health combine to create barriers that seem insurmountable. While these components do not directly relate to dignity, identity or self-esteem, they were important themes that participants mentioned. Any real change in homelessness may require a complete overhaul of our employment system, medical system and our insidious social hierarchy.

Dignity Barriers

In addition to these external barriers, dignity and identity issues complicate participants’ lives and lead many to feel out of control of their own situation. As researchers demonstrated, dignity barriers contribute to a lower quality of life and offer little motivation. This trend was reflected in the interviews. Interviewees spoke about dignity almost always in relation to their housing situation, confirming Miller & Keys’ (2001) and Jacobson’s (2009) assertions about the importance of setting in dignity interactions. Therefore, dignity was split into three categories: Extreme dignity violations through a local shelter, dignity violations through supportive housing and dignity promotion through supportive housing

Dignity barriers—extreme dignity violation in shelters. Rob has been homeless for four years, and this is his second experience with homelessness in his lifetime. He is knowledgeable about homelessness and spends a lot of his time volunteering at meal programs, day shelters, and more. An incredibly hard worker, Rob is an expert at navigating the system and
is a constant source of advice and support to others. He can also be a challenger when needed. He speaks out about getting the “runaround” from social services, and he is adept at recognizing when he is not being treated with dignity and respect. Rob brought attention to one particular program, the “Christian Shelter Project” (CSP). He found the conditions of this shelter abhorrent and was very vocal about it. Rob stayed at the CSP over the years. He explained the reaction that many individuals give when told they should go stay at the CSP:

Somebody can say to someone, you should go stay at that shelter – and you look at their face when you say that and they say, ‘what? No. Not gonna happen.’ I would rather freeze or die out here before I would do that. I’m serious.

Rob justified this harsh criticism by the fact that shelter staff frequently violate dignity and do not respect their residents. This comes through especially in the way they talk to and treat individuals:

’Cause they talk to people any kind of way. ‘You don’t like it? Get out! It’s that line, they kick people out all the time. They spit on some people. Oh and they say, ‘I don’t like the way you looked at me – you gotta go.’ But at the same time they say, ‘we care about everybody’ as soon as the TV cameras around, we LOVE you.

Rob also mentioned how this shelter’s rules/regulations and shelter structure violate dignity and result in humiliating experiences for residents:

Oh, and the most humiliating thing about the whole situation, they herd you in the showers like cattle. Three minutes. Wet, out, and then they give you a gown. From the hospital. So you walk around with your butt hanging out and you’re sleeping … and people wonder why guys would rather sleep out on the street than go there? And that’s the only option they got.
The CSP is the largest shelter in the area and one of the only options for homeless people to get temporary residence. The poor treatment and inability to find other housing options combine to make many feel utterly hopeless.

In addition to the poor treatment, Rob talked about how the Christian focus forces people to adopt values and beliefs they may not agree with:

But they won’t help you with anything. Unless you join a Christian program. So if you’re Atheist, if you’re Muslim, if you’re Hindu, you won’t get in that program. If your religious belief is anything other than what theirs are, you can’t get in their program. So it’s not based on need, its based on you converting to Christianity.

Rob has an incredible work ethic and applies for jobs constantly. Because of his age, his criminal record, and the fact that he hasn’t held stable employment in five years, it is nearly impossible for Rob to gain meaningful employment. Rob may be misconceived as overly passionate or exaggerating his statements about the homeless shelter, but he is honest and upfront. He cares about the services in his city and he volunteers almost everywhere where he uses services.

Rob is not the only one who mentions the disconcerting conditions at the Christian Shelter Project. Throughout the interview process, and without any prompting, ten out of 15 males made comments about the Christian Shelter Project. The interviewees made a combined 20 different statements in addition to the statements Rob made above. Every statement was about a dignity violation and no single statement made about this shelter was positive. One participant said that staying in the shelter caused him to get sick, and that he also saw roaches during his stay. Another participant explained he frequently got his belongings stolen by shelter staff members. He would see it happen and then the staff members would deny it. Another participant explained how inconsistencies in intake kept him on the street for two days:
I was taken to the place called the Christian Shelter Project. For some reason they said they were going to take me in. Then they immediately said, no, come back tomorrow. I don’t know if they made a mistake, or something?

Another participant echoed Rob’s sentiment that he would rather sleep outside before staying at that CSP because of the extreme dignity violations:

I wouldn’t live there if that was the last place to live. They really look down on you, as being less than peoples. Like a buncha cattle just there. And they waiting to collect they money off of it. That’s what they doing. That’s that shelter. I’d sleep outside before I sleep at that shelter.

Another participant echoed Rob’s sentiments about the Christian nature of the program being more harmful then helpful:

Everything’s horrible. It is a horrible place. They got a program there, it’s basically a religious program. And I believe their main objective is to convert people to Christianity. And, uh, yeah, the setup is not good.

Two other participants echoed Rob’s sentiments about the poor treatment and negative attitude of staff members at the Christian Shelter Project. Some participants also touched on the lack of effective programming:

So if I [shelter staff] can break your spirit, if I can treat you like you’re nothing. If I have NO programs that’s gonna help you get out of homelessness, that means I make sure that you’re homeless. If I give you nothing to encourage you to get on your feet, get a job, get whatever help and resources you need, then obviously I am encouraging you in an indirect way to be homeless.
This same participant explained how he thought the homeless shelter “gets away with” their poor treatment of shelter residents. The participant explained that it is a symptom of a larger societal problem:

But they figure, here’s what they count on. *That the stigma about homelessness will keep us silent.* In other words, even if we told the stories you wouldn’t believe it. Who cares? They’re homeless people. They’re bums. don’t matter. Who cares if they’re not being treated just right. Who cares? They get a roof over their head, they get three meals a day, what more could they ask for? They wanna be treated with *dignity? respect?* Are you *serious?* That’s the attitude people have. That’s why they get away with it.

The idea that homeless people need to be provided with basic resources and not with opportunities for self-worth or self-actualization is nothing new. Many researchers contend that shelters need to be completely revamped or else the shelter system should be done away with. Not only are services inhumane, but the shelter system is a money pit. Between the years 1982 and 1988 the national shelter budget increased from $1 million to $30 million. With countless resources thrown into it and little results, it is obvious that our traditional idea of emergency shelter is not solving problems but is instead “managing” homelessness (Culhane, 1992). The common misconception that homeless people “choose” to live on the street is disproved by shelter conditions. Many individuals live on the street not because they are lazy, but because it is more humane than living in a poorly managed, cruel shelter that treats people like animals. The CSP needs to refocus on dignity and respect, and possibly introduce some additional effective programming.
Dignity barriers—supportive housing violations. Another emergency housing program that has been introduced in the past decade is Permanent Supportive Housing (PSH). PSH was developed using the Housing First model. The model believes that if you fix the “housing problem” first, you can fix the problems that contributed to homelessness later. Supportive housing accepts people into apartments as they are, with few requirements. In addition, PSH pairs residents with supportive services and case management in an attempt to reintegrate them into mainstream housing. In a pilot study, after 24 months, 78% of individuals were still housed (Tsemberis et al., 2004). Supportive housing is cost-efficient, effective and it focuses on dignity and respect (Culhane & Byrne, 2010).

While not as serious as the shelter situation, dignity violations still occur in well-meaning PSH programs. The majority of these dignity violations come from program rules and regulations. One participant, Dave, explained his experience in a supportive housing building. Dave is newly homeless and has only been homeless for a few months. Dave spent his entire life working as an Electrical Professional. He inherited the trade from his father when he was only ten years old. He has his electrical license in Arizona and moved to Wisconsin to be close to his family when work fell through. Once he moved to Wisconsin, Dave began suffering from seizures. During one seizure, Dave fell on top of a bedpost, which punctured his shoulder. Dave lost all feeling in one side of his body from nerve damage. He was completely unable to secure work in the electrical profession after the damage. While applying for jobs at dollar stores, general stores and Wal-Mart, Dave explained that he is a, “one trick pony” with no experience aside from his electrical work. It has been a humbling and somewhat degrading experience for Dave to be forced to abandon his electrical profession and seek menial labor. His unemployment
eventually ran out, he lost his apartment and Dave was forced to sleep on the streets for two days until he found a room at a supportive housing organization.

New to the service system, Dave explained that he had difficulty navigating the rules and regulations of the supportive housing organization:

There is a list that is given to you of 30, they call ‘em guidelines/rules. Then there is another list of 18 common sense things about being courteous. You know, you’re not supposed to fight with people, stuff like that…but even with the staff here I have noticed from staff member to staff member I have gotten different answers to the same question. And sometimes they do not coincide with the written.

A ton of rules and regulations as well as inconsistency among staffers makes it difficult to be a compliant resident.

Dave also talks about what it’s like to live with over 50 other adults, “because that (gestures to shared bathroom) takes some getting used to. That goes back, that’s even worse then my high school days in PE.” Dave also explained difficulties of a shared communal space: “except for when the TV is on and people are gabbing. I wish they wouldn’t do that. Like in the evening people like to sit around the television and just *watch* television.” Difficulties in sharing communal space, sharing bathrooms, and rules and regulations all violate an individual’s right to privacy and self-respect. Rules and regulations keep order, yes, but when applied inconsistently the result is confusion and frustration. They often cause people to feel like they do not have any choice or control in their living situation (Miller & Keys, 2001). In addition, crowded spaces, too-full bathrooms and an inability to have some private space or peace and quiet can be small violations of personal privacy and dignity.
These violations are relatively inconsequential when measured against the violations participants mentioned in the shelter situation. Yet bureaucratic restrictions, staffing qualifications, a lack of resources and an increasing number of individuals experiencing homelessness all compound to prevent supportive housing agencies from being able to provide the dignified experience originally intended.

**Dignity —supportive housing promotions.** Mike is ready to move on with his life. He has been homeless for only a few months and is hoping to exit homelessness quickly. Mike worked at a manufacturing plant and was laid off when the company left for Mexico. A blue-collar worker with a high school diploma, he has trouble finding work but is constantly applying for jobs with his case manager. Employment is very important to him and he has had great success with PSH programs:

> Now this supportive housing, I don’t find no faults in it. Everything seem like its in the right place at the right time. You know? They doin' what they gotta do to help. It’s helping me, you know. So I have no problem with that. They got beautiful staff, all of ‘em is friendly, from what I can see. And they don’t look down on you. I know this housing gon’ be here for a long time. Back in my early part of the 80s, I came through here and its been the same way, helping peoples you know.

In contrast to shelter services, Mike explained that PSH helped him get back on his feet and he feels largely supported and respected by the staff. Mike is not the only one who has had a positive experience with PSH. Dave, as well, says he has largely been surprised and, “inundated with what support is here,” saying it is, “a lot more than I expected.” Other participants had similar reports. The six participants that were staying in PSH made 25 statements about housing
conditions. Of the 25 statements, 20 were positive such as, “I like it here,” and, “this place is a positive influence.” Another participant said that the PSH site was the only place where he could, “get some answers.” Overall, participants felt as though they could make progress in PSH and also felt as though they were treated with dignity. A few participants commented on the one-on-one case management they received from PSH, saying that it helped them apply for jobs, disability, social security and secure medical appointments. PSH’s focus on dignity led to motivation and positive change for residents that participated in this study.

**Dignity barriers—life on the streets.** Betty and Willie have been homeless on and off for a couple years and the whole time they have stayed together. Since there is little availability in shelters for unmarried couples, Betty and Willie spent most of their time on the streets. They slept primarily in parks and under bridges, or in tent communities. They worked hard to keep clean and dress well so they could “blend in” with the rest of society. However, they explained that sometimes this did not hide their status as “street people” and they received comments on their appearance. Betty described one instance where someone stigmatized her:

> All the time people say negative things. We were walking in the downtown area and we dress nice, we dress like we are now. A woman and a man came out of a building. They were professional looking. He had a suit and tie on, she had a nice dress on, and the woman made a point to walk away from us, around us, and she made the comment: ‘I don’t like those street people.’ That was really something.

Huh.

Despite their best efforts to get back on their feet and assimilate into society, Betty and Willie were still judged and stigmatized.
Betty and Willie know where they can get a hot meal, a shower, and they are on a waiting list to get into a PSH apartment. In the meantime, Betty and Willie struggle to navigate street life. The difficulties of satisfying the most basic needs on the street can be disheartening. Betty and Willie succeed, largely, because they rely on each other. However, others are not so fortunate. Betty described one time she came in contact with another homeless man sleeping in a park: “I saw him go into a trash can, all the way down to the bottom and pick out some chicken bones. That was just the saddest thing I’ve ever seen in my life.”

Willie’s experience on the street has been difficult, but his dignity remains largely in tact. Since public space is vast and diverse, it is possible for individuals staying on the street to find a piece of their own privacy and to preserve dignity and identity using creative methods. For example, Willie has become an expert at surviving on the streets and is proud of his survival tactics and street smarts: “If you ain’t got no strong mind, you ain’t gonna make it. People judge me because they forget that that table can turn. That table can turn quick. But if it turned on you, can you have a smile? Like I had a smile when I was homeless? Every day?” Willie and Betty are an example of how street life can both violate and promote dignity. Many individuals in the study discussed this dichotomy on the street. Living on the street provides some autonomy—you can choose where you sleep, how you spend your day, and where you travel. This can be a more dignified way of life for individuals with no options.

But, of course, there are limitations to street life. One participant discussed how he lived in a tent city that was under a bridge for a few months. The City of Milwaukee discovered the tent city and, deeming it a nuisance, destroyed the entire city and disposed of the few belongings he and his friends had. The police did not give anyone a warning before destroying the city and no one was able to retrieve anything.
Jacobson et al., (2009) explained that, “every human interaction holds the potential to be a dignity encounter” (p. 3). In this section, we explored the human interactions that occur on the street, in emergency shelters and in permanent supportive housing. Participants revealed that dignity encounters vary widely based on place. For example, daily street interactions can be dignified or degrading, shelter interactions were mainly degrading, and PSH represents a step in the right direction. Participants also talked about the negative outcomes of dignity violations. Rob felt angry, upset, and harbored mistrust of the service system because of his interactions with the CSP. Other participants agreed with Rob’s assessment and felt abused by the CSP. Dave and other participants, on the other hand, were pleased overall with their PSH residence, but still had trouble navigating countless rules, regulations, and a lack of privacy.

These findings suggest that the CSP should either be revamped to include more dignified practices or removed entirely. The fact that no participants felt positive or motivated by their interaction with the CSP suggests that it is holding individuals back and preventing them from exiting the cycle of homelessness. On the other hand, PSH is providing needed services and instilling hope in residents. PSH can improve their services by evaluating rules and regulations and attempting to create more opportunities for quiet and privacy for residents.

Participants confirmed what researchers discovered in the literature, that a lack of dignity leads to anger, low self-worth, confusion, frustration, and may inhibit exiting the cycle of homelessness. Participants also raised important questions about how we provide homeless services. The CSP demonstrated that putting a roof over someone’s head is not enough to motivate real change. Dignity must be a primary service focus, not just in theory but also in practice, if we are to enlist our service sector in helping to end homelessness.
Identity Barriers

Dignity barriers are limiting, but they are not the only force that individuals experiencing homelessness come up against. Many participants talked about various facets of identity and how a loss or alteration of identity occurs when one loses their housing. Identity barriers were tangible and heart breaking to many participants.

Identity Barriers—family and friendship. Tyrone has been homeless for sixteen years, longer than any other participant. With a beautiful smile, Tyrone explained how he used to be a successful salesman, “I could sell ice to an Eskimo,” he said. “I have the gift of gab.” Indeed, Tyrone is a gifted speaker. Living a carefree life as a younger man, Tyrone blames himself and his choices for his homeless situation. Getting caught up in drugs, alcohol and a fast life, Tyrone didn’t mind life on the streets at first. He spent a few years living in his car and doing odd jobs to pay for gas, food and other necessities. Now that he is older, Tyrone regrets not getting out when he could. Suffering from multiple personality disorder and an alcohol addiction, Tyrone struggles daily to be the person he wants to be:

I try not to be an evil person. I’m just a person that’s trying to make it that had some shortcomings due to some things I was doing in my life that wasn’t positive, wasn’t good. And so it caused me to have setbacks, you know. That’s basically who I am. What’s important is me finding out who I am and fixing that person that I know I can be.

Tyrone largely defines his identity and who he is by his setbacks. He described one particular setback in detail, losing his family. Tyrone was very tender and emotional when describing his family. It was evident that they were a big part of his life:
Somebody [ex-wife] loved me. Somebody took time out to care for me.

Somebody took time out to help me, a lot of times. And somebody took the time out to be patient with me. I just wasn’t patient, you see what I’m saying? And I didn’t know how to deal with it so I went. since I been homeless, in order for me to deal with that a lot of times I will fall into doing drugs and doing alcohol and chasin womens and all that old stuff that just wasn’t good for me. And when I get caught up in it, it seems like it becomes part of you, after doing it for so long.

Tyrone feels his identity was altered due to choices he made to deal with losing his family. His personal identity and ideas of self-actualization are closely tied to his family. Tyrone explained where he wanted to be in ten years, “I want to have my own place...and a relationship with my son. And him having babies, and I’m taking care of grandbabies.” Tyrone measures his success by his relationship with his son. The choices that Tyrone made that led him to homelessness are the same choices that prevent him from being close to his family and finding solace in an identity as a father.

Tyrone is not the only one who attached his identity and happiness to family. Every single participant mentioned at least one family member or a close friend. Another participant explained that he moved north because he was the executor of his father’s will. His father was on life support and he had to pull the plug. The participant explained how it felt to pull the plug: “God forbid I hope that never happens to you. Because I don’t know death, but watching my dad die, sucked.” This participant blames his family for his homelessness situation. He explained to me that he stayed up north to negotiate the distribution of his father’s belongings among his “greedy” brother, sister, and his father’s ex-wife. In the meantime, he missed work so long he lost his job (in a factory down south) and has no connections in this new city. Unable to find a
job or place to stay temporarily, this participant turned to sleeping on the street, all while grieving the death of his father.

Twenty different statements were made about family and friends and how they craft identity, including, “you kinda lose contact, feel lonely,” “if my mom dies I’ll just go completely bonkers,” and, “we should take care of our own.” Participants tied their worldviews closely to friends and family. Many of them deeply miss their personal networks and feel as though their identity has been compromised in some way because of it. One participant felt as though he should have a strong identity as a father but was unable to fulfill this promise because of his addictions and mental illness. Another participant attached his identity to his relationship with his father and, once he lost his father, lost everything. If we are to encourage individuals to get out of homelessness and/or poverty, we must nurture familiar connections that are so deeply engrained in our psyches. Participants demonstrated that these connections become a part of who we are. Losing these connections means losing roles, identity, purpose, support and motivation.

**Identity barriers—employment as identity.** As mentioned previously, identity is a convoluted concept made up of many social and personal components. Employment is one of these components. Employment is both a personal identity asset, as it can provide people with a role or sense of purpose, and a social identity asset, as it provides networks and connections. Interviews confirmed that participants equated employment to their own identity and self-worth. Most participants were forthcoming about their niche in the work force. Participants explained that their employment ranged from factory work, social work and electrical, to graphic design, sales, property management and more. All participants discussed either current employment, previous employment or what they hoped would be future employment.
Chris, one participant in particular, was *adamant* about finding employment. He only had time to speak with me for about fifteen minutes because he needed to go to the computer lab and apply for a few jobs. The PSH that Chris lives in asks residents to apply for 3-4 jobs a day. This may seem unreasonable to some, but Chris told me he applies for close to 10 some days. The only reason Chris came to this city in the first place was for work:

I moved up here from Chicago ‘cause I caught work. I stayed working there for 5-6 years. If they wouldn’t have shut down, I woulda been alright. But once I get another job, I’ll be up and at ‘em again. So yah, that’s about it.

Chris describes himself as “hard-working” and “focused” and indeed he is. For Chris, employment is the ticket out of homelessness and into a better role and identity. He did not have time to talk with me or dwell on homelessness because he had more important things to do, “Nah, that’s about it. I talk the talk and I gotta walk the walk. I gotta prove what I just said. That’s my daily itinerary, to prove what I just said. “

Chris has wrapped his entire identity maintenance and self-preservation strategy into employment. Instead of dwelling on his homelessness situation, or addressing other issues, Chris focused entirely on employment. He believes it will create a new, more positive identity for him.

In addition to employment, many participants chose to volunteer at local service organizations while waiting for jobs. For one participant, not having employment was devastating. This participant had been a tough, blue-collar worker his entire life. All of a sudden he was laid off from a job he worked at for 16 years and he had nothing to do. This led him to depression. To keep himself busy, he started volunteering at a meal program: “I come every day. Every day, sometimes it’s good, sometimes its dead but most of the time it does take my mind off of a lot of stuff. So, it’s good for now, I guess.” Volunteer opportunities for individuals
experiencing homelessness can be a good way to “take your mind off” of a situation and it can be a foot in the door for job opportunities. But volunteering doesn’t pay.

It is a common misconception that homeless people do not have jobs because they are lazy. In reality, some homeless people do have jobs, but these jobs do not pay a high enough wage to afford permanent residence. Regardless of the facts, many employed homeless individuals are still influenced by the negative perception that they are lazy or not hard enough workers. This impacts overall self-esteem and leads to shame and embarrassment (Shier et al, 2010). 31 percent of individuals experiencing homelessness in this city have some college or trade school education more than high school, and 13-30 percent of the individuals are employed. This employment differs based on how long an individual has been homeless (Continuum of Care, 2011). The belief that homeless equals jobless is unfounded and harmful.

Chris is a resilient man whose employment-focused goals have kept him from sinking into negativity or even depression. The possibility of employment has become all consuming and a strong motivator for him to get out of his current situation. Christ, and all participants who focused on employment, demonstrate that employment is more than just a paycheck. It is purpose, identity, and deeply imbedded in who we are. In a society that follows up, “nice to meet you,” with, “so what do you do for a living?” We must not underestimate the strong connections that exist between employment and identity/self-worth.

Employment is paramount in finding an individual’s role in society and building self-worth. Without a role and without self-worth, individuals can get stuck in a web of addiction and depression with little motivation. Individuals like Tyrone internalize their situation as personal failure and cease believing they have assets. Employment offers a solution to all of this: motivation, purpose, identity, empowerment, and a paycheck.
Identity barriers—stigma and identity. Stigma is discussed here to reaffirm claims made by current research that stigma affects identity and self-worth. The youngest individual in the participant pool, only 22 years old, is an interesting case. Moving from Detroit to start a business with his brother, the business went sour and his brother kicked him out of the house. This individual is hopeful about his business—screen-printing t-shirts and graphic design—and is actively looking for connections to make the business a reality. In the meantime, he is navigating the homeless system and the stigma associated with it. He explained:

To tell the truth, it’s been a lot of individuals treating me bad. I get a lot of mugs, like stares, just, disgusting faces like looking at me based on how I look and stuff like that. People look at homeless as a whole different thing and they frown upon it, you know. Some people frown upon it. That’s all I can really explain.

This individual struggles with stigma and the toll it takes on his identity. As a young man dealing with homelessness, he is outside of the traditional view of the homeless. Therefore his very identity and life circumstances are confusing and challenge the status quo. His inability to secure prosperity compounded with what American society values left this participant feeling depressed:

There’s been plenty of times suicidal thoughts have come in because it happens continuously. Try to get your own stuff, like other people, try to get a house, and it gets harder and harder. Then you feel as if, okay, I wanna commit suicide.

This particular individual links homeless difficulties to his own suicidal thoughts. The fact that he is comparing himself to others who have houses demonstrates the power of stigma. Stigma says that in society, those who do not have are worthless. Therefore, many individuals dealing with extreme poverty and homelessness internalize this lack of prosperity as a lack of personal
value. Stigma tells people that their way of being in the world is unacceptable. This participant unfortunately provides one possible explanation for the high rate of suicide among homeless individuals, internalized stigma. In one study of 226 homeless individuals, 43% reported suicidal ideations, and 21% reported attempted suicide, compared to the average population, which has a suicidal ideation rate between 11-16% and an attempt rate between 3-5% (Walsh, 2011 p. 40). Stigma deems certain lifestyles unacceptable and inappropriate, leaving individuals who are forced into these lifestyles to feel that they themselves are unacceptable.

Stigma also deems certain places acceptable and unacceptable for homeless individuals and forces many of them to retreat and become “invisible.” Harter et al., (2007) in their study of the “hidden homeless” found that, “stigmatization not only creates definitions of acceptable and non-acceptable individuals and groups, it creates powerful cognitive maps of acceptable and non-acceptable places” (p. 313). Stigma has a strong ability to contain, objectify and demoralize individuals experiencing homelessness.

A combination of external forces, dignity barriers and identity barriers combine to keep people from acquiring the necessary resources, support, and encouragement to exit homelessness. External barriers such as race, class, gender, internalized oppression, technology and physical/mental health are some of the leading causes of homelessness. Participants discussed these at length and discussed the fact that these barriers strip them of control in their own lives. Dignity barriers, especially in social services, add another layer that prevents individuals from seeing their own self-worth. Finally, when components of identity are stripped away such as family, friends and employment, stigma creeps in and dehumanizes individuals experiencing homelessness. With all of these hidden barriers combined, it is not surprising that it is more difficult to exit homelessness than some would believe. That being said, these barriers do
not have the ability to crush an individual entirely. Many are still able to look forward to working hard and living out their own story.

**Overarching Theme II: Solutions to exiting homelessness**

While participants were not shy about sharing their barriers, they were also forthcoming with solutions to external, identity and dignity barriers. Through finding semi-private spaces where individuals can escape stigma and recognize their own assets, solutions to homelessness emerge. One such solution that emerged was how individuals created positive self-esteem and identity even in trying circumstances.

**Positive Self-Esteem and Identity Creation**

*The “jokester.”* I overheard a volunteer at a meal program say, “I had no idea how hilarious these people could be.” We expect those in a difficult situation to constantly feel dejected and pitiful. Yet this is not often the case among individuals experiencing homelessness. Many find creative ways to preserve their identity through humor. One such individual was Sean. Sean is a self-described “jokester” and “story-teller.” He spoke with me for over an hour and most of that time was spent telling stories. He told me about his employment with a carnival when he was younger, about being struck by lightning four times, and more. Here is one story he told:

Funny story about the gate, four guys tried to pick this electrified gate. Now, they didn’t get shocked. If they had tried to touch the gate themselves, they woulda been shocked. But reaching into the lock? No shock. So I’m sitting there thinking, okay, they can’t pick it with those picks they got….I said to them, ‘oh, I could pick that.’ They said, ‘really, you think you could pick that? All four of us couldn’t pick that.’ But I did it, walked through, closed the gate, locked it back.
They were like, but…but…but…but…I said, I could pick it, didn’t say I was gonna let you in.’ They say ‘but…but…but…you! why you in there?’ I said ‘I’m sleeping in there.’ I was staying in the alcove just inside the gate.

These stories probably seem unbelievable, but to this individual they are windows into a world of fun in which he is the hero. Constantly joking with volunteers, telling fabulous stories and laughing to make others smile, he succeeds in creating positive self-esteem. Sean has dealt with homelessness and mental illness most of his life, but was recently placed into supportive housing. His “jokester” persona makes him loveable among guests and volunteers at meal programs. It may even make difficult situations more bearable. He explained: “I’m not going to give any more negatives because frankly I’m getting kinda tired of the negatives. Positives, the plus side of homelessness: friends, excellent alcove to sleep in, adventures…” Not only does Sean love having adventures and telling stories, he uses them to create his own positive self-image and keep himself away from the “negatives.”

As mentioned previously, Snow and Anderson (1989), in their ethnographic study on how individuals experiencing homelessness preserve identity found a common theme of “fictive storytelling.” More than 1/3 of total identity comments made were of a storytelling nature (p. 1359). The researchers demonstrated that storytelling is an important tool for identity maintenance. Empowering individuals to share stories, whether completely true or elaborate fantasy, reinforces the fact that these stories are important and, therefore, the individuals are important. By making a place in our society for homeless storytelling, identity can be affirmed and encouraged. Awareness through story telling even has the power to battle stigma. Story telling is one way to carve out an identity while homeless. Countless other methods exist.
**Street toughness and street smarts.** In a capitalistic society, success is largely measured by ability to contribute to profit making. For individuals who are shut out of the workforce, like the homeless and those with extremely low income, this avenue to identity and self-confidence is unavailable. Many people turn to “street smarts” or “toughness” as another measure of identity and confidence. In Macleod’s (2008) study, one individual, Shorty even stabs four people and himself to demonstrate how “bad” he is and prove his worth to his group of friends (p. 59). One participant accurately described this mentality as a defense mechanism:

> And that’s what the streets will do to you, that’s what being homeless will do to you. It will cause you to have resentment. It will cause you to be mean. Lot of homeless people got mean spirits. But they don’t mean to be like that. It’s just a defense mechanism we use to keep people from messing with us.

In order to keep other people away and to create an identity that is congruous with society’s imposed identity, many homeless people place value on being “street tough.” Another participant echoed this sentiment when he said, “Oh. I’m a mean guy. You don’t like me? I don’t care.” Creating a wall of cool, calculated confidence keeps stigma and oppression out.

Toughness is not the only street skill that had this effect among participants. “Street smarts” were also viewed in a positive and productive light. One participant explained:

> The homeless have a thing called “the trail.” You ever heard of that? These are the routes and the places and the services that people take advantage of while they’re homeless. So you know exactly what meal sites to go to, you know exactly where to get medical attention, you know exactly where to get clothing, and that’s called the trail. This is homeless talk. Homeless have their own jargon, their own language, and everything. It’s a subculture, you know what I mean?
“Homelessness experts” emerged all throughout the interview process. These individuals had a vast knowledge of the trail and were eager to share this knowledge. They valued their street smarts and their ability to help others boosted self-confidence. One participant spoke very highly of his ability:

I probably had people come up to me every day when I was homeless. Where do I go and get a meal? Where can I go to get help or whatever? And there is I and a couple other guys that automatically know it. If you don’t know, go ahead and ask.

The ability to combat the oppression and stigma of the streets with toughness, as well as using street smarts and cunning to navigate “the trail,” are two ways in which individuals experiencing homelessness excel. It takes skills to survive on the street: intuition, cunning, time management, and an ability to communicate/network, just to name a few. These skills are highly valuable and individuals experiencing homelessness recognize this. Not everyone possesses these skills. As one participant posed the question earlier, “Would you make it [on the streets]?” Not all of us would and not all do.

Harter et al., (2007) supported participants claims. The researchers explained the abilities of their homeless participants aptly and also described how society does not value these abilities:

Among other things, street smarts include reliance on instincts to read a situation, preparedness, adaptability, and in general a heightened level of awareness of one’s surroundings…However, the rules and resources of mainstream education too often fall short of recognizing street smarts as an authentic form of knowledge (p.319-321).
Another unique solution to decreasing the stigma placed on the homeless population is to acknowledge the unique set of skills that homelessness fosters. These are not useless bums; these are people who use cunning to survive in a judgmental world. They foster an authentic form of knowledge unique to the homeless subculture. Participants valued these skills. If society at large also valued and taught these skills, the homeless identity would not be discounted.

**Humanity and dignity.** Another common solution that participants explained was promoting humanity and dignity. Many participants discussed how life in the shelter or on the streets left them feeling ragged and worn, because of the negative treatment they received. When asked what could be done to improve the quality of life for individuals experiencing homelessness, three individuals directly responded that there was a need for more dignity promotion:

- Humanity. Start with humanity. Treat people like human beings. If successes that come out of your place were measured in, who got a job? Who got treatment? Who succeeded? Who finished it? Even if it’s just who got it, who signed up? But like I said, their success is based on how many beds they keep filled every night. And most shelters need to keep the beds full for the funding to come. They need you to be homeless.

The “counting” of the homeless and “counting” of the number of beds needed, compounded with funding allocation based on numbers, is reductionist and ineffective. Instead, this participant asked for solutions based on effectiveness of programming, effectiveness of recruiting participants, measuring success, etc. While PSH and similar programs do this type of outcome measurement, it is still not universal practice. Another participant explained a similar solution:
Everything [in homelessness services] is one size fits all—and it doesn’t. Like, there used to be a woman that came here. I got talking to her one day and the reason she was homeless was because she had kind of a paranoia. If she could hear somebody walking or talking, they were coming after her. Which meant she had to sleep out some place away from people. You know, she couldn’t go to a shelter. She couldn’t go to a hotel or a motel for that reason. So where is she supposed to go?

PSH offers a solution with more freedom and choice that can be tailored to individual and specific needs. It is certainly more uniquely tailored than the shelter system, but it is still not a perfect solution. Rules and regulations, funding restrictions, reporting requirements, paperwork and more keep PSH from being able to offer the sort of flexible services needed to accommodate such a diverse population.

A third participant explained how dehumanization allows for negative or nonexistent perspectives to continue:

We’re people! And we need to put the people back into it. Because the stigma means we’re not people, or we’re people that are expendable, that don’t matter, ‘Oh, they probably don’t got kids, they probably single, probably drug addicts.’ Because we can deal with it if we demonize it. Or dehumanize it. We can deal with it better that way, can’t we? Of course. Unfortunately, if we can dehumanize it and demonize it, we as a society—and that includes me and you—can deal with it better.

Indeed, a good place to start would be to, “put the people back into it.” Focusing more on dignity and humanity and less on cost efficiency, number of programs, number of clients, etc. will go
miles in alleviating the pain associated with homelessness. One participant explained how a local meal program helps the homeless feel valued:

Their mentality is to treat people with dignity and remind them that they’re not an animal and that things get better. When you treat people with respect, and stuff like that, they tend to not think that they know better than anybody else. That we’re all the same, everybody goes through certain things.

The effects of respect and dignity can be strong. Participants explained that a focus on respect and dignity in services goes a long way to empowering individuals. This empowerment helps individuals focus on their strengths and apply these strengths in their job search, housing search, community relationships and identity creation. Focusing on these components is more effective than constantly focusing on deficiencies. By “putting the people back into it,” service providers, policy makers and local leaders will remember that only unique and encouraging services can end homelessness.

**Employment and education.** These services must include employment and education opportunities. Participants demonstrated that employment and education were barriers to exiting homelessness for many reasons: poverty, identity creation, and self-worth. On the flip side, participants also explained that employment and education are viable solutions that build self-esteem and create positive identities. One participant, Ann, lost her apartment, which was owned and operated by a slumlord. She lost her job and her rent was a few days late, so she was kicked out without appropriate notice. Work has always been a sense of pride and dignity for Ann and her situation with homelessness has not changed that:
I am a licensed clinical social worker. I've had a lot of jobs. I’ve just got employment as an office manager so I’m looking forward to that. She’s going to pay me well, so hopefully within a month I’ll be able to get out of here.

Employment is Ann’s ticket out of homelessness. With a skilled degree and experience, she has already been able to secure a new job and hopes to be out of supportive housing in a month.

Not all participants are as fortunate or skilled as Ann. Most participants interviewed had a high school degree or even less schooling. For these participants, a fast-paced technologically driven white-collar job market is out of reach. Tom, the oldest participant, explained how this was not always the case. Individuals used to be able to make a living with the skills they had:

This guy I used to know years and years ago, he never held a regular job in his life. He just could not take that daily routine. He was a good worker, he could go get a three, four day job and he was fine. He’d work on the ranches for a few days, or he’d do this, do that, work in the fields, whatever.

This nomadic lifestyle, which many individuals were used to growing up, is no longer feasible. Some were not able to transition as seamlessly into a new globalized, deindustrialized economy as others because of a lack of resources. One participant explained this issue:

Everything is college prep now. I got nothing against college, but take Milwaukee, 2/3 of the kids can’t afford to go to college. So there’s nothing there for them in high school. And they wonder why they have so many dropouts, you know? Take some 15 or 16 year old, knows what’s ahead of him, knows he’s not going to college, why should he stay in school? We need to go back to some kind of industrial and trade training.
Martha Burt, in her critique, “What will it take to end Chronic Homelessness?” explains that one of the contributing causes of homelessness is a lack of opportunities for people with a high school education (Burt, 2001, p. 2). “College” has become the new high school and the cost of higher education keeps extremely low-income individuals completely locked out of education and, often, employment systems.

A study done by Gwadz et al (2009), demonstrated that a lack of employment opportunities for homeless youth often cause them to turn to the “street economy,” including: prostitution, drug-selling, theft, panhandling, etc. The same study demonstrated that these youth were able to secure long term employment in the formal economy when encouraged, and that they demonstrated: resilience, self-sufficiency, critical thinking, the ability to adapt and more skills highly useful in the job market (Gwadz et al., 2009). Furthermore, as demonstrated above by Akerlof & Kranton (2000), economics is highly tied to personal identity. Individuals can eschew their negative low status identity by climbing up the economic ladder.

Participants offer unique solutions to their own homeless situation: securing employment, doing odd jobs, and advocating for more industrial and trade training. As is, our job market is exclusive and is leaving behind a large part of our society. This part of society has skills, can contribute, and the vast majority want to contribute and are hard workers. Our economy would certainly benefit from educating and employing individuals experiencing homelessness. Creating more opportunities for individuals with low income and lower educational attainment would increase tax contributions, productivity and eventually decrease poverty and homelessness.

Creative Solutions

Today, most major metropolitan areas are recognizing that it is necessary to switch gears from, “managing” homelessness to ending homelessness. In fact, many cities are developing 5
and 10 year plans to end chronic homelessness. These plans should incorporate the voices of the homeless and also rely on creative solutions. Participants came up with a couple very creative solutions to ending homelessness.

**Doubling up.** First, one participant described a model in which family and friends could take in their homeless relatives and receive subsidies for taking care of them temporarily:

We should take care of our own. And if more people did, then you’d probably have less people in shelters. I think you could do it, though. I mean, if you got a welfare system and disability system and they’re basically doing the same thing.

If people could take these people in, who are homeless, if you did it for a year or six months until they get on their feet, you’d probably have less homelessness for sure. They’d do something else.

“Doubling up” is not a new concept. In fact, one study conducted with 136 homeless street individuals demonstrated that 82% had moved in with family or friends in an attempt to avoid homelessness. The researchers explained that, “most homeless people do not turn to shelters until they have completely exhausted their social networks” (Marin & Vacha, 1994, p. 652). However, it is difficult for these families to take in additional friends/relatives as they usually are cost-burdened themselves. Marin and Vacha recommend subsidizing the doubled-up households to maximize assistance.

While this solution seems a bit far-fetched, it leaves the onus of individuals experiencing homelessness on the people who care the most about their well-being, their network of family and friends. Granted, not everyone has a strong network, but those who do should be encouraged to rely on that network and, in turn, their networks should be encouraged to support them.
Collective impact. Another creative solution dealt with collective impact. One individual explained how maximizing networks of services is a better way to provide than having a wide range of repetitive and less effective services:

I was totally amazed by what they did [at another day shelter in a neighboring city]. Yah, all the centers up there work together. It used to be the same way here that each shelter, no matter what, they share their resources. Now, they don’t share. Everybody’s like in a competition, which I think is not the way to solve a problem.

In the nonprofit and social services industry, resources are scarce. Since the sector relies on a finite number of donations, grants, service contracts, etc., the best way to maximize use of resources is by working together. A stronger connected network of service providers in Milwaukee would greatly improve services.

These are just two unique and innovative solutions that came from listening to stakeholders. Individuals experiencing homelessness know what they need, how to get it and who is on their side. They are real assets to policy makers and leaders and their advice should be highly considered in initiatives to end homelessness. Doubling up and Collective Impact represent community-wide solutions to a community-wide problem. These solutions came from a simple interview about an individual’s homeless situation. One can imagine what sorts of solutions could emerge from a more in-depth panel discussion or long-term evaluation of services by individuals experiencing homelessness.

Limitations and Future Research

The interviews and surveys conducted in this study merely scratch the surface of participant knowledge. While this paper and many others demonstrate that self-worth, purpose,
and felt-identity are crucial to ending homelessness, questions remain, including: How do we promote these components effectively in social services? Can we evaluate/quantify these components? How do we provide cost-effective services while also allowing for unique identity/dignity creation and promotion of self-worth? A citywide study examining how social services promote dignity would help identify positive organizations and answer a few of these questions. On the other hand, band-aid services that do not empower individuals should no longer be tolerated. More targeted research could locate and improve these insufficient services.

Finally, more qualitative and participant-based research is needed. Positivistic efficiency-based approaches to research breed one-dimensional results. Stanhope & Dunn (2011) demonstrated that just because something makes quantitative sense does not mean it is the best course of action. The researchers wrote, “in an ideal policy making setting, empirical knowledge shares the floor with experiential knowledge, values, ethics and the multiple interests, needs, and desires stakeholders bring to the table” (Stanhope & Dunn, 2011, p. 281). “Putting the people back into it” as a primary focus of research and services opens doors for deeper explorations of society. More participatory action research related to homeless and housing issues is sorely needed.

This type of research has inherent limitations, limitations that are reflected in this study. First, the interviewer-interviewee dynamic is limiting. While the researcher attempted to remain as neutral as possible, the fact remains that she did not have a previous relationship with interviewees so the information may not have been as forthcoming or truthful as it otherwise could have been. Other limitations include the inherent difficulties of “measuring” dignity, identity and self-esteem. Since these are rather nebulous and personal concepts, any attempt to define them will be reductive. In addition, Osborne’s identity score has not been sufficiently
tested by researchers. While it is an intuitive and informative tool, increased usage by researchers will prove its reliability.

A final limitation deals with sample size and generalizability. Since this qualitative study is specific to one city and there were only 20 participants, it is not fair to generalize conclusions drawn from this study to other cities or the nation’s homeless population. Instead, this type of in-depth qualitative research serves to illuminate trends within a particular place and explore innovative solutions to homelessness.

**Conclusion**

Participants spoke openly and freely about their own barriers to exiting homelessness. These barriers included: External barriers such as race, class and gender; internalized failure and oppression; physical/mental health; and being out of touch with technology. Dignity barriers were also prevalent including: dignity violations in the shelter and on the streets and small dignity violations in supportive housing. Overall, however, supportive housing agencies in Milwaukee demonstrated relative success in promoting dignity. Identity barriers included: family/friendship networks being lost or distanced, job/employment roles as identity, and the overwhelming oppression of stigma and stereotypes. None of these barriers are new, yet a lot of them go unmentioned in mainstream America.

Gregory Mantsios in his 2003 article, “Class in America,” dispelled the myth that America is a classless society. In fact, the chances of being poor increase drastically for lower class minority races and women. The chances are: 1 in 10 for a white male/female, 1 in 5 for a single white female, 1 in 5 for Hispanic male or female, 1 in 5 for black male/female and 1 in 3 for a single black female. Despite obvious evidence that class exists, Mantsios explained that Americans do not talk about or really deal with class (Mantsios, 2003). Mantsios is one
A PARTICIPANT-DRIVEN EXPLORATION OF HOMELESSNESS

researcher who drew attention to the stigma and classism that often does not get discussed in policy-making and service provision. This project also brought light to some of the more “hidden” issues involved in ending homelessness. Issues that are not easy to quantify, evaluate, and solve, yet these issues: dignity, identity and self-worth, must become a bigger part of the conversation.

In the past decade, many have come to believe that supportive housing is the solution to America’s homeless crisis. Studies focus again and again on the fact that supportive housing has high retention rates and is very “cost efficient” (Tsemberis et al., 2012; Davidson, 2006). PSH is now highly regarded by President Obama and his Administration (Davidson, 2006). While supportive housing is a step in the right direction, there are still issues. Dignity and identity dilemmas still exist. In addition, because of fiscal, staffing and political constraints, the units are not always as dignified as they are intended to be. Supportive housing cannot fulfill real dignity promotion within these constraints. Real, effective policy change must come from the stakeholders and must deal in more than numbers.

Participants offered some valuable insight and solutions that policy makers and social service agencies should adhere to, including: 1) Enable and empower individuals to share their stories to combat stigma; 2) Place a higher value on street skills so individuals dealing with homelessness are rightfully seen as valuable; 3) “Put humanity back into it,” create more dignified and individualized services that are less constrained by policy; 4) Create and expand employment and educational opportunities for individuals experiencing homelessness so they can contribute to the economy and find fulfilling roles in the job sector; 5) Consider “doubling up” policies and increase networking for collective impact. In order to truly eradicate
homelessness, the homeless must be imbedded in the creation, implementation and evaluation of strategies. Until this happens, proposed solutions will be patchwork at best.
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Appendix A

Demographic/Intake Form

First name: _________________________

Research participant ID #: _________________________

Participant location: ______________________________

Participant age: ______________________________

Participant gender (circle correct answer):
Female       Male       Transgender

Ethnicity (circle correct answer):
Hispanic or Latino       Non-hispanic or non-latino

Race (circle correct answer):
White
Black/African American
Asian
Multi-Racial (Please specify): ________________________________

Length of homelessness this episode (circle correct answer):
   a) Not homeless at present
   b) Less than one month
   c) At least 1 month but < 6 months
   d) At least 6 months but <1 year
   e) At least 1 year but < 2 years
   f) Two years but < three years
   g) Three years or more

Number of episodes in past five years: ________________

Approx. number in lifetime: ________________

How much do you agree or disagree with the following statement? (Circle the number that corresponds to your level of disagreement or agreement)

“How Homeless is a major reflection of who I am.”

0-----------------1-----------------2-----------------3-----------------4-----------------5
Disagree        Strongly        Slightly        Slightly        Strongly        Agree
Completely        Disagree        Disagree        Agree        Agree        Completely
Appendix B

WHO AM I? – Form developed by Randall Osborne

On the lines below please list the first twenty words or short phrases that come to your mind when you are asked "Who are you?". Your responses should represent who you actually see yourself as being at this point in your life. Please work as quickly as possible (take no more than 5-7 minutes) and try not to leave any lines blank.

Descriptors

1.) ____________________________________
2.) ____________________________________
3.) ____________________________________
4.) ____________________________________
5.) ____________________________________
6.) ____________________________________
7.) ____________________________________
8.) ____________________________________
9.) ____________________________________
10.) ____________________________________
Appendix C

Rosenberg Self-Esteem Survey

Participant First Name and last initial:_______________

Participant Code:_______________

Instructions: Below is a list of statements dealing with your general feelings about yourself. If you strongly agree, circle SA. If you agree with the statement, circle A. If you disagree, circle D. If you strongly disagree, circle SD.

1. On the whole, I am satisfied with myself. SA A D SD
2. At times, I think I am no good at all. SA A D SD
3. I feel that I have a number of good qualities. SA A D SD
4. I am able to do things as well as most other people. SA A D SD
5. I feel I do not have much to be proud of. SA A D SD
6. I certainly feel useless at times. SA A D SD
7. I feel that I’m a person of worth, at least on an equal plane with others. SA A D SD
8. I wish I could have more respect for myself. SA A D SD
9. All in all, I am inclined to feel that I am a failure. SA A D SD
10. I take a positive attitude toward myself. SA A D SD
Appendix D

Semi-Structured Interview Questions

1) How are you today?

2) What are some of your greatest strengths?

2) Would you mind telling me some stories from your experience with homelessness?

3) How has homelessness affected how you see yourself?

4) How has homelessness affected how others see you?

5) Have you had negative encounters with individuals because of your homeless experiences?

6) Have you had positive encounters with individuals because of your homeless experiences?

7) Where do you see yourself in ten years?

8) Do you have any questions for me?
Appendix E

IRB Approval Letter

August 8, 2013

Rebecca Long
Professional Studies

Dear Ms. Long:

The amendment you submitted on July 29, 2013, for your protocol number HR-2631, titled, “Exploring Self-Esteem, Identity and Homelessness,” received expedited approval on July 31, 2013, from a member of the Marquette University Institutional Review Board.

This amendment adds Hope House and St. Ben’s as research locations.

Your protocol is valid until July 11, 2014. Prior to this date, you will be contacted regarding continuing IRB review. Any public advertising of this project requires prior IRB approval. If there are any changes in your protocol or adverse events, please notify the IRB immediately.

If you have any questions or concerns, please do not hesitate to contact me. Thank you for your time and cooperation.

Sincerely,

Amanda J. Ahnadt, RN, MS, MSN, CIM, CIP
IRB Manager

cc: Dr. Christopher Okunseri, IRB Chair
Dr. Jay Caulfield, Professional Studies