

UNSHELTERED PERSPECTIVES

INTERVIEWS WITH 100
PEOPLE EXPERIENCING
UNSHELTERED
HOMELESSNESS IN PHOENIX,
ARIZONA

ASH USS

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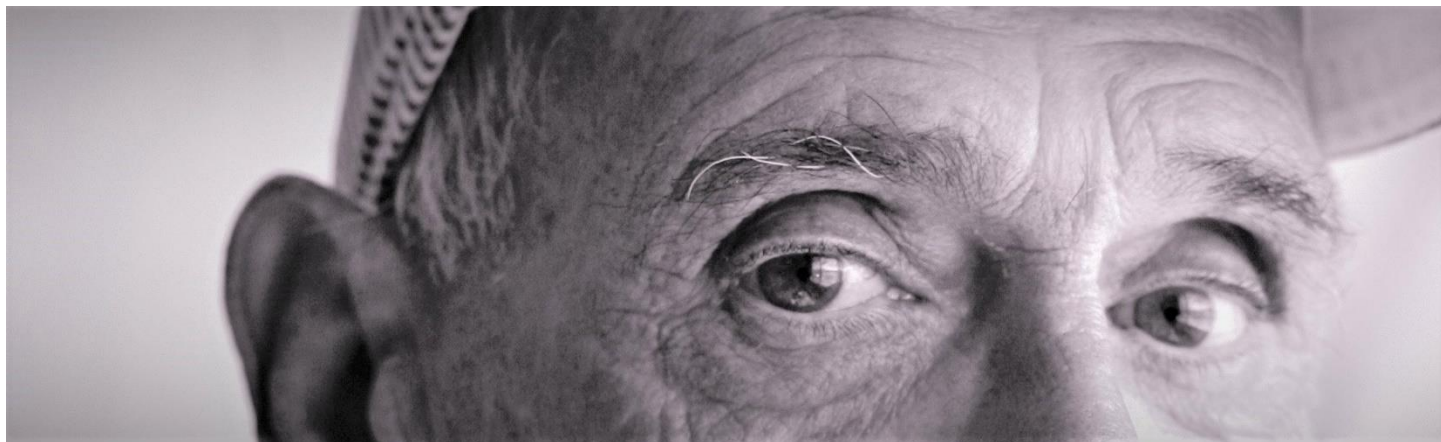


Photo by Sam MacDonald

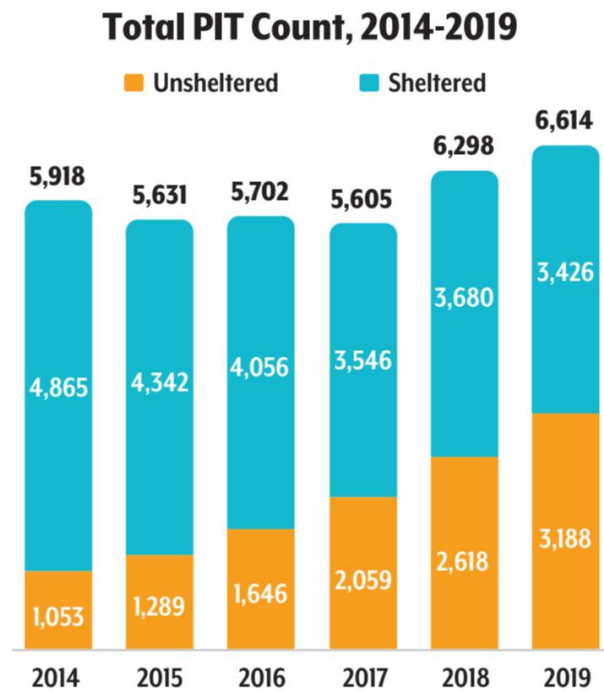
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*This report is dedicated to the people who remain unsheltered,
to people like Diana and Kenny who've passed away on the street,
to people like Tony who slip through the cracks,
to the people who feel forgotten.
You are not forgotten.*

“Some homeless people don’t want to be helped. They would rather sleep outside than in a shelter.”

These statements are frequently used to describe people experiencing homelessness. Many individuals labeled “service resistant” are perceived to be sleeping outside because they want to. We were interested in learning more about the people sleeping on the streets (i.e. the “unsheltered” population). Why do they appear to be resistant to available services? Do they encounter barriers to sleeping in shelters and accessing other services? Rather than imposing our own logic on this population, we interviewed 100 people who are sleeping in Phoenix parks, alleys, lots and streets. We hoped that listening to people who are unsheltered would provide us with a greater understanding of how they could be sheltered in a way that more effectively benefits them and our community.

Our understanding of the data and demographics surrounding homelessness comes largely from the Point-in-Time (PIT) Count:



Source: 2019 Point-in-Time (PIT) Count Report by Maricopa Association of Governments (MAG)

This is an annual count of people experiencing homelessness in shelters and on the streets. The PIT Count is a survey used throughout the country to provide a one-night view of homelessness in particular regions. According to the 2019 Point-in-Time Count for Maricopa County, there were 6,614 people experiencing homelessness on the night of January 21, 2019. 48% were unsheltered or sleeping in a place not meant for human habitation. The number of unsheltered people in Maricopa County increased by 22% since 2018 and has been increasing at an alarming rate since 2014. Almost entirely absent from public discourse is the issue of capacity. There are 19 emergency shelter programs across the valley for single adults providing a total of 1,026 beds. Critical to our understanding of why people are sleeping outside is the recognition that for a large number of people, there are simply no beds available.

The rise in unsheltered homelessness is one of the most significant challenges affecting our community.

Unsheltered individuals are susceptible to violence, public health issues and the scorching Phoenix sun. The rise in unsheltered homelessness may also negatively impact nearby communities and neighborhoods. People who lack shelter often create innovating sleeping accommodations through encampments which can have negative consequences (e.g. safety issues, litter, spread of disease etc.) on nearby residents. The “homeless problem” is a common concern at neighborhood meetings, community forums and conversations at City Hall.

Rather than seeing people on the streets as a problem, we see them as a resource. This research aims to address this issue from a different perspective, through the eyes of individuals who are currently unsheltered. If we wanted to learn why people aren’t sleeping in shelters, we needed to ask them why. In a culture that tries to avert eye contact with people panhandling and sleeping at bus stations, we sat beside them and listened.

Our goal was to better understand the people who are unsheltered, which would allow providers and systems to engage and serve them more effectively. This report summarizes the analysis of 100 interviews conducted from November 2018 through March 2019 with people experiencing unsheltered homelessness in the Central Phoenix area. This report is intended as a resource for professionals and organizations working in homeless services, local policy makers and the public at large.

This report sees unsheltered people not as problems to be solved, but as persons with valuable points of view. We went to the streets to find potential drivers of and solutions to unsheltered homelessness. While we did gain a deeper understanding of the barriers people encounter, we also identified a general need to recognize the experiences and preferences of people experiencing homelessness, instead of imposing our own choices and preferences upon them. People experiencing unsheltered homelessness are not a homogenous group of people. They differ by age, gender, ethnicity, race, military service status, time spent homeless, disabling condition status and many other factors. Despite these differences, we found that the vast majority of unsheltered homeless people desire a safe space to sleep inside, regardless of past personal choices or various other reasons for experiencing homelessness.

90% of this sample is not service-resistant; they instead encounter barriers to sleeping in shelters and accessing other services.

The unsheltered homeless “problem” will likely continue as long as shelters remain warehouses of people rather than reasonably dignified places to rest safely. By taking the time to listen to the lived experiences of people sleeping outside, we learned that the gaps in our homeless services system have less to do with programs or policies and more to do with gaps in empathy. This research found that people sleeping outside are resilient and seeking housing; we just need the resolve as a community to see things through their eyes and to shelter them with dignity.

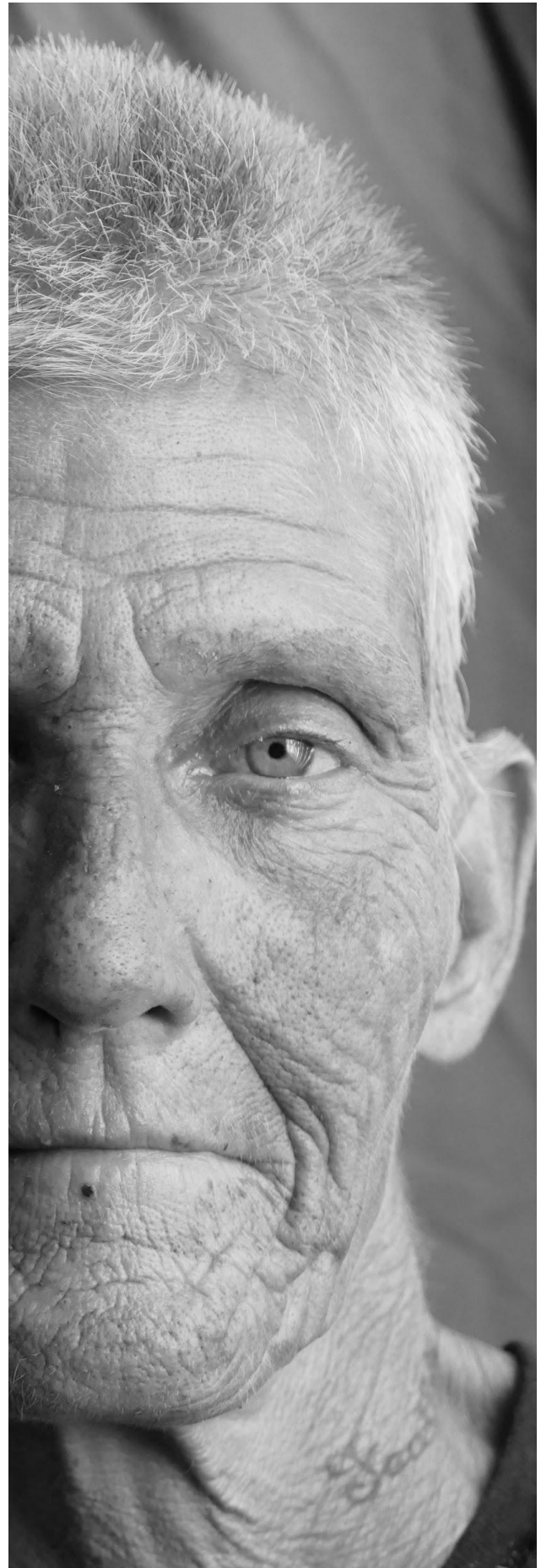


Photo by Sam MacDonald

This report is based on 100 interviews conducted with people who were experiencing unsheltered homelessness in Phoenix between November 2018 and March 2019. To be eligible for the study, participants had to be sleeping outside in a park, on the street, in an alley or in any other place not meant for regular sleeping. Participant recruitment occurred in the area surrounding Andre House and the Human Services Campus in downtown Phoenix, as well as in the surrounding neighborhoods. The interviewers only engaged with participants who appeared non-threatening in an effort to remain safe. While this method may have excluded some of the more mentally unwell individuals, we still had a diverse sample of participants.

The interviews were conducted by a team of staff members from Andre House of Hospitality with help from the Phoenix Rescue Mission and two students from Brophy College Preparatory. Some were paid staff members at Andre House and the Phoenix Rescue Mission and others were unpaid volunteers. Participants received a \$5 gift card to either Jack in the Box or McDonald's as well as a backpack. When possible, interviews found a conference room or quiet space for the interview. Other times, interviews were conducted on sidewalks, in parking lots and at other outside locations.

The sample size of 100 allowed the percentages to equal the number of people, with a few exceptions. This was an intentional and thoughtful effort to humanize the quantitative data.

Participants received an informed consent form to describe the purpose of the study, their rights as participants and the benefits they would receive for their involvement. Before each interview, the interviewer asked the participant to respond to a survey which collected demographic information and quantitative analyses of their experiences with the shelter system. The demographic questions followed the formatting of questions asked by the United States Census Bureau and the Maricopa County Point-in-Time Survey. After completing the

surveys, participants engaged in a semi-structured interview to elaborate on their pathway to homelessness, experiences within the shelter system and their goals for the future. The average length-of-time for the interview recordings was 9 minutes and 19 seconds. We recorded the interviews on portable recording devices and cell-phones. Participants signed their name on the consent form, but the quantitative instrument and the interview recordings were then shuffled together and assigned random labels (i.e. interview 1, 2 etc), to ensure confidentiality. This established a sense of privacy so individuals could speak openly about their experiences, even as they use services at Andre House. The demographic questions and the open-ended interview questions are provided in Appendix A.

Quantitative responses to participant surveys were entered into IBM's Statistical Package for the Social Sciences (SPSS), a statistical analysis software. SPSS quantified the demographic information about the sample as well as the participants' levels of engagement with specific social services. The lead researcher transcribed the audio files for the interviews verbatim. Qualitative analysis began with one initial read-through of all of the transcripts. Following the initial read-through, recurring themes emerged among the interview transcripts. The themes were organized by subject and broken down into sub-themes. After generating a list of themes and subthemes, there was another read through of the transcripts to ensure the highest level of accuracy and diligence.

This sample of 100 people consists of individuals from diverse age groups, races, ethnicities and backgrounds. All of the participants were single adults without children who were at least 18 years of age. The sample of this study is largely representative of the population experiencing unsheltered homelessness in Maricopa County. To test this representation, each demographic is compared to the same data point listed in the 2019 Point-in-Time Report for Maricopa County, with the exception of a few data points which are not currently collected in the Point-in-Time Count.

Quantitative Data Analysis

Table 1. Demographic Overview, N=100

Demographic	% in Sample, N=100	% in Maricopa County (Unsheltered Adults without Children), N=3,184
Age		
18-24 years old	4%	7.2%
25-34 years old	17%	92.8%
35-44 years old	25%	
45-54 years old	34%	
55-64 years old	18%	
65 or older	2%	
Gender		
Male	72%	73.7%
Female	27%	26%
Other	1%	Less than 1% <i>* Responses include "Transgender" and "Gender Non-Conforming"</i>
Race		
White	44.3%	71.2%
Black or African American	32.0%	17.5%
American Indian or Alaska Native	4.1%	8.7%
Asian	3.1%	Less than 1%
Native Hawaiian	3.1%	Less than 1%
Other	13.4%	1.5% of people self-reported as multi-racial
<i>* Respondents were given the option to report multiple races instead of selecting a "multi-racial" option. Although N=100 for this study, these percentages represent the percent of responses for each racial category.</i>		<i>* The Point-in-Time Count offers "multi-racial" as a selection instead of allowing respondents to select multiple races as we did in this study.</i>
Ethnicity		
Hispanic or Latino	29%	19.1%
Not Hispanic or Latino	68%	80.9%
No response	3%	N/A

Table 1 provides an overview of the demographics of the sample in comparison with the 2019 Point-in-Time data for people experiencing homelessness in Maricopa County. The gender and ages of our sample were similar to the Point-in-Time data for unsheltered adults without children.

32% of our sample self-reported as Black or African American compared to just 17.5% of the unsheltered homeless population in Maricopa County. 44.3% of our sample self-reported as White compared to 71.2% of the unsheltered homeless population in Maricopa County.

In both cases, there are alarming racial disparities given the fact that people who are Black or African American comprise 5% of Arizona’s population according to the U.S. Census Bureau. Findings from a 2016 SPARC study on racial disparities in homelessness attribute this disparity to the long-term effects of structural racism; people of color experience housing inequality and other systemic disadvantages that deny them opportunities for economic mobility and make them more susceptible to homelessness.

Table 2. Veteran Status of Sample, N=100

Are you a veteran?	% in Sample, N=100	% in Maricopa County (Unsheltered Adults without Children), N=3,184
Yes	10%	4.4%
No	90%	95.6%

Table 2 depicts the percentage of participants who identified themselves as veterans.

According to the 2018 Annual Homelessness Assessment Report (AHAR), homeless veterans comprise nearly 9% of all adults experiencing homelessness in the United States.

Typically, veterans comprise a larger percentage of the sheltered population than the unsheltered population. This is likely a consequence of increased veteran outreach efforts. Municipalities are participating in strategic initiatives to reduce and end veteran homelessness. The 2018 AHAR reports that increased collaboration between federal, state and local partners has contributed to a 5% decline in the number of veterans experiencing homelessness since 2017. Many of these partnerships are dependent on the work of the United States Department of Veterans Affairs which helps to provide targeted resources and tools for veterans.

Although the 2018 Point-in-Time (PIT) Count showed a decrease in the number of veterans experiencing homelessness, there was an increase in the number of homeless veterans in 2019. The percentage of veterans in our sample was more than double the percentage of veterans reported in the PIT count. It's important to note that in both this study and the Point-in-Time Count, veteran status is self-reported.

Figure 1. Total Length of Time Experiencing Homelessness, N=100

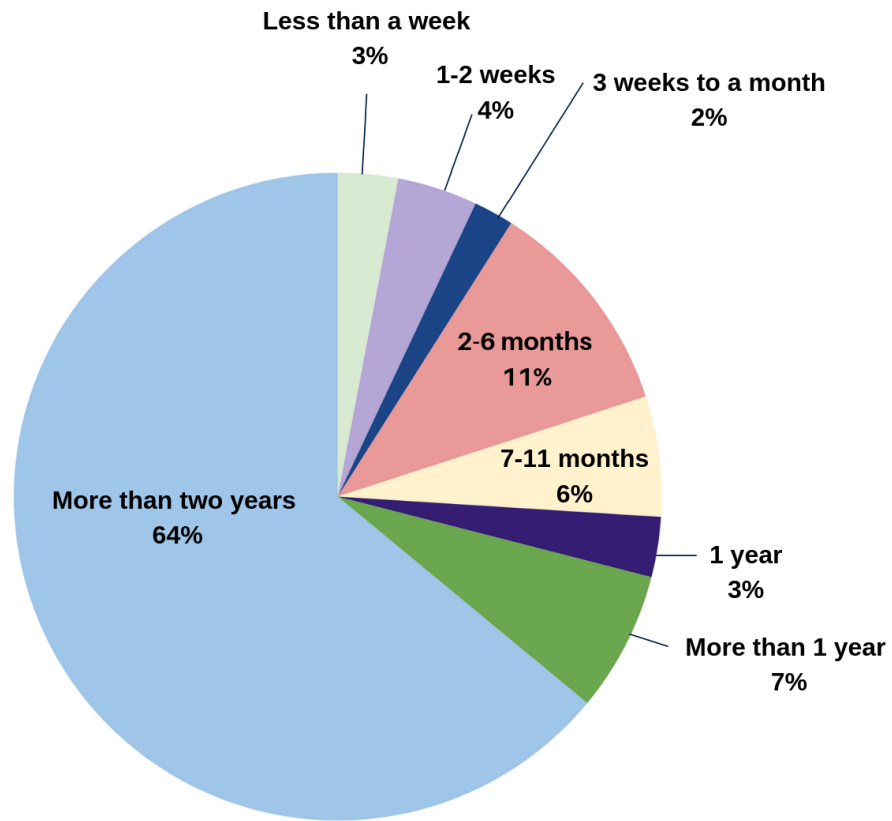


Figure 1 depicts the total length of time that participants have been experiencing homelessness. We asked people to select how long they've been experiencing homelessness. It is important to note that these are self-reported lengths of time.

64 people have been experiencing homelessness for more than 2 years.

Table 3. Eligibility for Chronic Homelessness as per HUD Criteria

Qualifier for Chronic Homelessness	% in Sample, N=100		% in Maricopa County (Unsheltered Adults without Children), N=3,184
Self-reported Disabling Conditions			
No self-reported disabling condition	15.5%		32.4%
Diagnosable substance abuse disorder	25.7%		13.9%
Serious mental illness	23%		13.7%
Developmental disability	11.5%		Unknown
Chronic physical illness or disability	24.3%		Unknown
<i>*Percentages include decimals due to multiple response option</i>		<i>*The Point-in-Time Count reports on adults with a serious mental illness, substance use disorder, HIV/AIDS and survivors of domestic violence. There is no county-wide data on developmental or physical disabilities.</i>	
Length of Time Question			
	Yes	No	% in Maricopa County (Unsheltered Adults without Children), N=3,184
Have you been continuously homeless for one year or more?	76%	24%	<i>Unknown- The Point-in-Time Count report does not explicitly report on length of time experiencing homelessness.</i>
In the last three years, have you had four or more episodes of homelessness?	67%	33%	<i>Unknown- The Point-in-Time Count report does not explicitly report on length of time experiencing homelessness.</i>

Table 3 provides an overview of the participants’ eligibility for chronic homelessness in accordance with the formal definition established by the Department of Housing and Urban Development (HUD). In order to qualify for chronic homelessness, an individual or family must meet both the length of time requirement and the disability requirement. We therefore asked one question for each of the qualifying categories.

According to HUD, a chronically homeless individual is someone that resides in a place not meant for human habitation, a safe haven or in an emergency shelter that

- has been homeless and residing in such a place for at least 1 year or on at least four separate occasions in the last 3 years
- has a diagnosable substance use disorder, serious mental illness, developmental disability, posttraumatic stress disorder, cognitive impairments resulting from a brain injury, or chronic physical illness or disability

Our sample self-reported higher frequencies of disabling conditions compared to the data for Maricopa County. Roughly 26% of our sample reported a substance abuse disorder compared to nearly 14% of unsheltered adults without children in Maricopa County. 23% of our sample reported a serious mental illness compared to roughly 14% of all unsheltered adults without children in Maricopa County. We predict that our interviewers’ relationships and experiences working with vulnerable populations may have helped respondents feel more comfortable disclosing their disabling conditions.

Figure 2. Chronic Homeless Population (in accordance with HUD definition), N=100

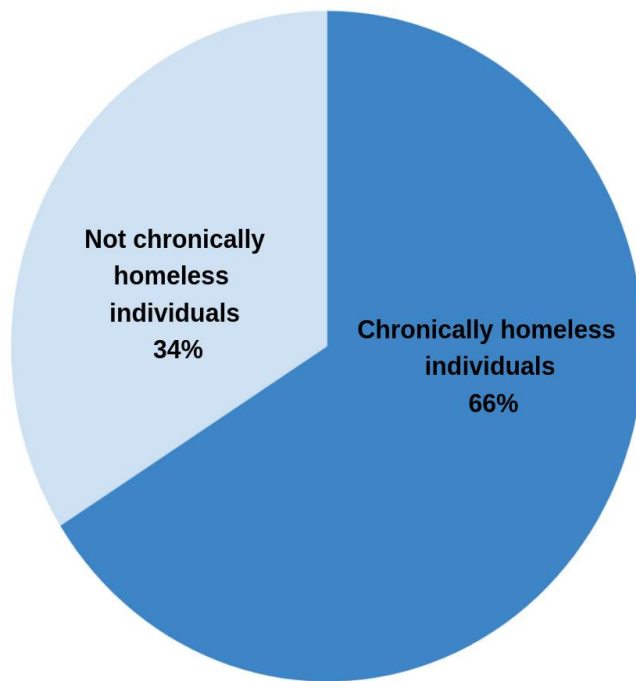


Figure 2 highlights the chronically homeless population in the sample. In order to determine whether an individual would qualify as chronically homeless, responses to the questions answered in Table 2A were reviewed. If an individual reported one or more disabling condition as well as a “yes” response to either of the length of time questions, that individual was flagged as a chronically homeless individual under HUD requirements.

66% of our sample would be considered chronically homeless, compared to just 17.46% of the unsheltered population in Maricopa County.

It is possible that interviewers’ relationships and experiences working with vulnerable populations may have helped respondents feel more comfortable disclosing their disabling conditions, thus explaining why the chronic homeless population in this study was much higher than the chronic population in the Point-in-Time Count.

Figure 3. Maximum Length of Time in Shelter, N=100

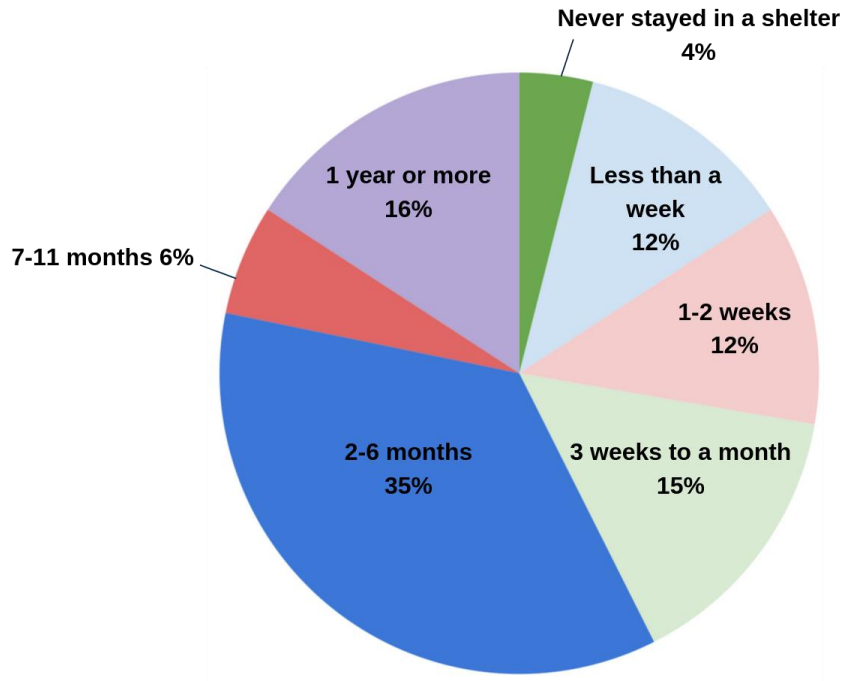


Figure 3 provides an overview for the sample’s self-reported maximum length of time in shelter.

57 people have stayed in a shelter for at least 2 months throughout their homelessness.

This data highlights that the sample is familiar with the homeless shelter system. Although all of these individuals are sleeping outside currently, just four people have never stayed in a shelter before. Worth pointing out is that these shelter stays are neither ongoing nor restricted to Phoenix. We asked participants how long they’ve been in shelter throughout the duration of their homelessness.

Regardless of the hard work of case managers and homeless shelter providers, the average length of time that individuals spend in emergency shelter is significantly impacted by external factors. As housing costs rise and the availability of affordable housing declines, systems nationwide are struggling to exit people into permanent housing.

Figure 4. Current Barriers to Shelter Entry

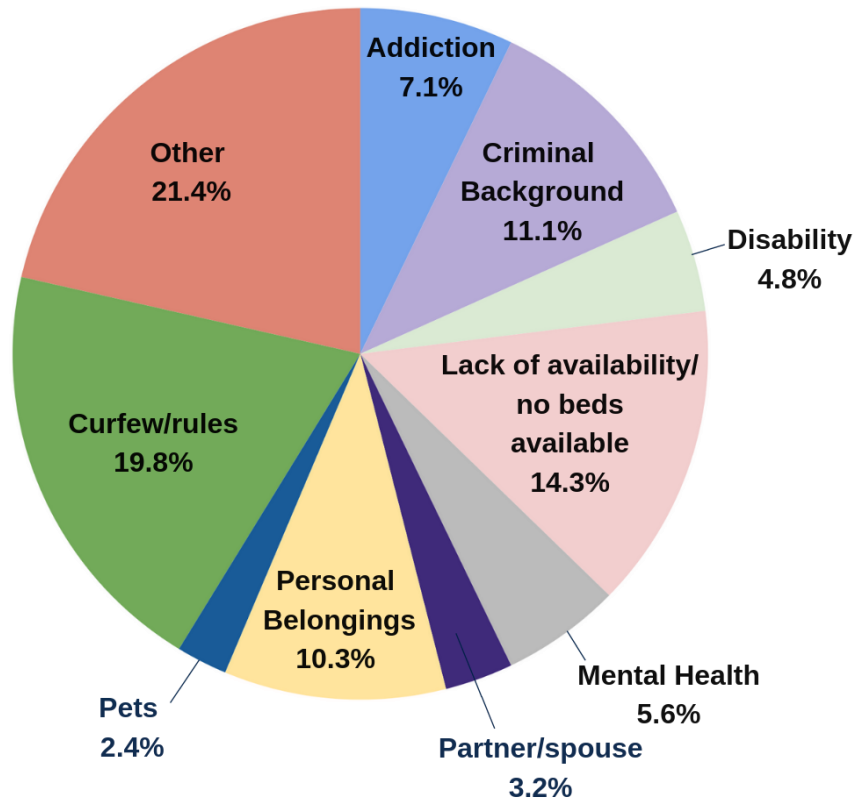


Figure 4 highlights the participants' self-reported barriers to shelter entry. We provided respondents with a choice from the barriers above. Although participants were instructed to select their primary reason for not currently being in a shelter, some participants did report multiple reasons, thus explaining why the percentages contain decimals. For participants who selected "Other", we asked them to describe their other response. For participants who responded "other", the two most common responses pertained to cleanliness and issues of safety.

Besides those individuals who selected "Other", the top two reasons why people were unsheltered were because of the curfew/rules of shelters and because there were no beds available to them.

Cities across the country are struggling to address the issue of shelter capacity. According to a recent report by the National Alliance to End Homelessness, in 2018, the state of Arizona had less than 50% of the shelter beds necessary to shelter its homeless adult population. The Human Services Campus, where 15 independent nonprofit organizations collaborate on services and resources for individuals experiencing homelessness in Maricopa County, sees between 800 and 1,000 individuals every day and there are just 470 emergency shelter beds in CASS, the shelter provider.

For people who reported a criminal background as their primary barrier for shelter entry, some of them likely have a sexual offender designation, which currently prohibits people for entry into CASS, the emergency shelter in downtown Phoenix.

Personal belongings can also be a barrier to shelter entry. Many shelters have policies limiting the amount of belongings that shelter guests can bring into the shelter for reasons due to space, preventing insects/bed bugs and for other health reasons.

Table 4. Activity within the Past Month

In the past month, how many times have you:		
	Mean	Range
Visited the emergency room	0.72	6
Taken an ambulance	0.29	3
Used a crisis service	0.505	5
Been arrested	0.275	8
Witnessed/been the victim of a crime	1.81	30
Spoken to a case manager about shelter/housing options	2.26	30

Table 4 provides an overview of the participants’ engagement with social services in the past month. The mean represents the average. The range represents the difference between the lowest and highest values. Municipalities throughout the United States have looked into the “costs of homelessness”. Because people experiencing homelessness lack health insurance, primary care and many of their most basic needs, they are more likely to visit emergency rooms. They also engage with the criminal justice system often as they encounter misdemeanors and other crimes directly related to experiencing homelessness.

According to the National Alliance to End Homelessness, someone experiencing chronic homelessness costs taxpayers an average of \$35,578 per year with respect to emergency room visits, jails and other health-related services.

Data highlighting the expenses related to homelessness are among the most frequent arguments in favor of permanent supportive housing, or housing programs that incorporate supportive services like medical and behavioral health. In one particular RAND study, researchers found that receiving supportive housing reduced the costs for public services by nearly 60 percent, reiterating the point that it is more cost effective to house people experiencing homelessness. The sample reported that they had either witnessed or been the victim of a crime almost twice per month. Researchers and service providers are persistently examining the relationship between trauma and homelessness. The SHIFT Study conducted by the National Center on Family Homelessness was critical in identifying the link between trauma and residential instability, highlighting the need to address trauma symptoms before expecting people to succeed in homeless programs and services.

The nature of homelessness makes people more susceptible to violence and crime and therefore trauma. If our sample is witnessing or being the victim of a crime nearly 2 times per month, then we must consider how that trauma impacts their ability to engage in services and end their homelessness.

The sample reported speaking to a case manager about shelter and/or housing options an average of 2.26 times in the past month. The city of Phoenix invested \$2.5 million in the PHX C.A.R.E.S. program in 2017. The city contracted with Community Bridges Inc., a behavioral health provider, to engage people on the streets. Although Community Bridges contacted 1,384 homeless people from 2017-2018, it engaged just 27 percent of people by April of 2018. Outreach workers are heavily impacted by a lack of a affordable housing and an insufficient quantity of shelter beds. Despite sincere efforts by agencies like Community Bridges, engaging and meeting the complex needs of people on the streets typically involves more than one contact. When people are unsheltered, outreach workers may struggle to build relationships and provide the necessary services to work on an individual’s housing plan and end their homelessness.

Theme 1. Service Resistance is a misnomer.

90 people said they would enter a shelter program if offered a shelter bed. Just 10 people said no.

"I'd rather be in a tent and have my own area and not be in a strange place with strange people and it's just uncomfortable for me"-Interview 21

"I would rather sleep outdoors"- Interview 48

26 people spoke about their personal belongings as a significant barrier.

"They won't even let you leave your blanket. They let you leave your bag but not your blanket but how am I supposed to go to a job interview or see about a job with a blanket?"- Interview 7

"People are growing tired and being more stressed out by carrying their personal belongings...if you were to get a job or if you were scheduled to get a job at 7 or 8 o'clock and be there for an interview and you had luggage or baggage, I mean how is that supposed to look to the general person that's supposed to employ you or give you a job?"- Interview 36

"Having to keep an eye on your things and your belongings and everything, it's been a stress and a worry which allows a person to get less sleep, you know what I mean? If you're worried about people always taking your stuff"-Interview 46

When asked about outreach experiences with case managers, 52 out of 100 people described how they've never been offered a place to stay by a service provider or case manager.

"An officer rolled up on me around Harmon Park Library. He was with a case worker of some sort...And the lady was like- well, we will give you this resource and he's going to talk to you about how you can get a job without an ID because I'm struggling with my ID. And I was like 'oh, that's great' but um, I need shelter first because if I'm sleeping behind a dumpster and I have to wake up at 6 in the morning but I can't sleep because, you know- it's freezing and people are dumpster diving and someone is doing drugs over there after shelter. If I don't have shelter, then I am not looking for a job"- Interview 3

"One time they came to talk to me. They were supposed to come back and they never came back. The case manager said they were gonna come talk to me or whoever... never came back to talk to me and I never saw them again"- Interview 37



Photo by Sam MacDonald

Theme 2. People dislike shelters that feel inhumane.

29 people disliked that other shelter guests were negative influences and distractions.

“There is always drugs around and the truth is, you can never get away from it and so if I don’t get treatment soon I’m just going to do it for the rest of my life because as long as I am around it, I can’t fight the urge to say no. So of course I keep saying yes and that makes it even worse”- Interview 29

“It’s very hectic. You wanna say, forget this. It brings your self esteem down”- Interview 60

23 people disliked the staff in shelters they stayed in.

“They didn’t treat em nice. The counselors at that place were not nice to anybody. They were all very mean”- Interview 72

“Very non-committed staff. They were there because they had to be. Not because they wanted to be. They weren’t really interested in anything that was going on with you or whatever. It’s like you know- lets just scan your ID, get you in. There’s your mat”-Interview 85

22 people disliked shelters because they were dirty and unclean.

“The only thing I really disliked about it was that with hundreds of people being served in one little area for homelessness shelter for the night, there was only one bathroom and you know- when you put a strain on that, on anybody with one facility, with that many people, it’s hard to keep it clean”- Interview 20

“Health wise, seeing feces on the toilet, on the floor and stuff, that’s gross. They need to have a regular cleaning crew to come in and sanitize the floors. Everything”-Interview 97

18 people spoke about overcrowding and a lack of privacy in shelter programs.

“I won’t stay at shelters because of like open showers, showering with multiple people and being wide open with the visual of other people’s privacy being exposed”- Interview 17

“It was like super capacity. We were basically right on top of each other”-Interview 32

14 people disliked how shelters “feel like prisons”

“I didn’t like it because of the confinement. The basically, just like prison inside”- Interview 64

“They had the wrong thought process, you know? They were running it like a prison instead of looking at people to lift them up, rule after rule. And it holds them down instead of looking at it like, how can we lift them up instead of holding them down” - Interview 8



Photo by Sam MacDonald

Theme 3. People want resources to help them end their homelessness; they also want to feel safe.

41 people spoke about specific resources and services they wanted help with.

“What would make me want to stay there is knowing that I’m gonna stay there and they’re gonna help me uhm move forward in my life, get on my feet”- Interview 11

“More resources to better yourself. There’s a lot of things out there not offered”- Interview 59

“Asking for help. I’ve learned some things. People are people. Everybody’s got their problems, but you know death. Even something? People gotta start somewhere. There isn’t anything that you can’t tackle. Even pain. Even loss. Even disease. Family. Friends. These people are resilient. But we still need guidance and help”- Interview 80

32 people requested that shelters offer them a sense of safety and security.

“ Well security of course. Somebody watching over us while we sleep. And so that uh nobody gets out of hassle and doesn’t ruin it for the rest of the people”- Interview 24

“My biggest thing is security. I have to be safe where I’m at. I need to know that I’m gonna be okay”-Interview 25

“Just to know you’re not gonna have issues with your bunkmates. Stealing. You know? Or rumors and the nonsense. Peace and quiet is nice”- Interview 10

18 people said they just wanted a comfortable place to sleep.

“I know a lot of us out here, we just want to sleep some nights. You just want a good night’s sleep. And that would just make a difference the next day”- Interview 24

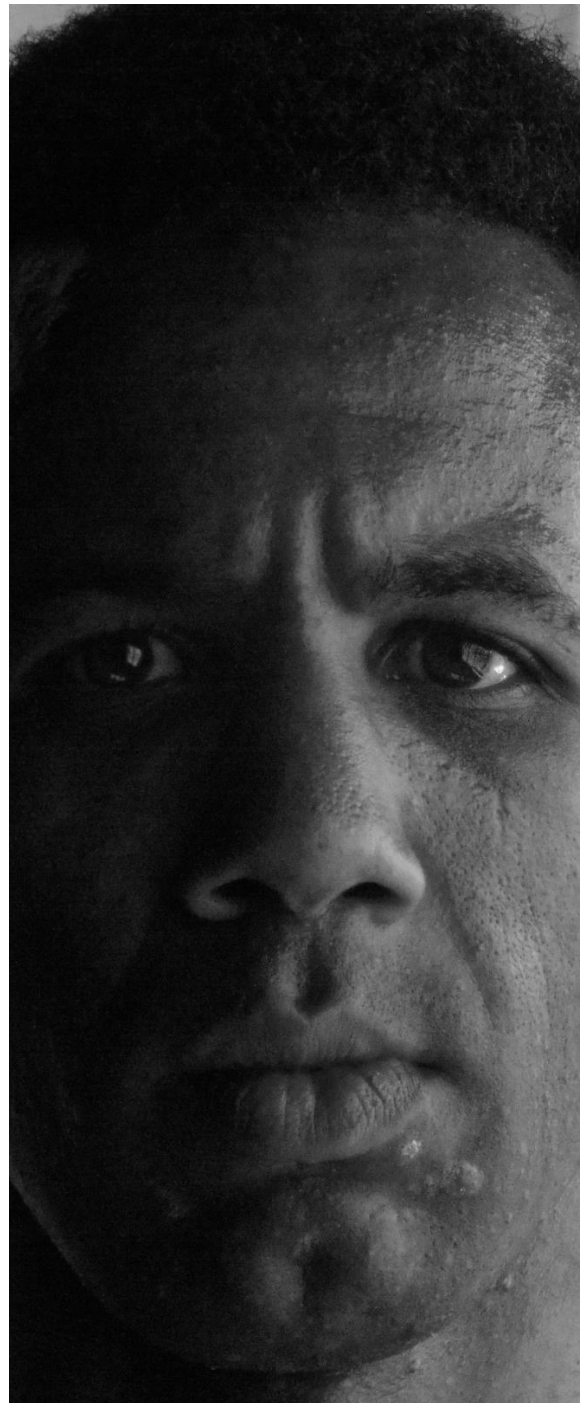


Photo by Sam MacDonald

“Some of us would just love to be able to sleep for a couple days without having to worry about the cops moving us, or without having to worry about someone hurting us, you know?”, “Just to be able to sleep for awhile, I’m just so tired all the time...And people want us to go out and do our housing and this that and everything else but we can’t even get sleep. How do you want us to comprehend anything? The sleep deprivation isn’t good for anybody”- Interview 22



Photo by Sam MacDonald

Theme 4. Community and social supports are critical.

41 people described social isolation as their primary reason for experiencing homelessness.

"I experienced homelessness when my dad passed away back in 2010. After he passed away, I didn't really have nowhere else to go. I didn't have any other family, so"- Interview 51

"Well I turned 18 and got kicked out of my parents house"- Interview 83

Theme 5. People want stability through housing and employment.

59 people spoke about their housing goals when asked about the future.

"If I have a roof and I got some clothes, I'm employable...So I just need a roof so I can sleep, to start working, to start saving money"- Interview 32

"I just want a home. That's all and it's so hard. It's really difficult and I got SSI. I got medical. I got a clean background. I just need a place"- Interview 45

"I mean that's my immediate goal- just to get off the street. You know? A roof. Every night"- Interview 85

43 people described employment as a personal goal.

"I would like to make sure I'm working full time somewhere. It doesn't matter where as long as I'm working full time"-Interview 25

"Well, next month, I'm gonna start driving for Uber because even though I make 945 in SSDI, it's still not enough to get an apartment because they want double the rent or some places want triple the rent. And I'm like, I get it once a month"- Interview 78

Other Significant Qualitative Findings

20 people described substance abuse as their reason for experiencing homelessness.

"I just started to do drugs and then little by little I never went back home"-Interview 9

"I started drinking heavily. I lost my job and my placement and everything"- Interview 42

18 people said they would stay in a shelter just to avoid being outside.

"There's nothing fun about sleeping outside. Period"- Interview 5

"Just being able to come in and stay the night. That alone would make me feel better" Interview 58

Other people spoke about meals, fair treatment, lockers and computers as desires in a shelter program.

"Not every person that is homeless has deficiency in rhetoric, a drug deficiency, you know? And they think that everyone is an issue in these categories. That's not so"- Interview 41

"People look at us like we are a piece of junk. They feel that they don't want to talk to you. They don't want to help you. They don't even know the situation, they just assume. They just assume. They look at you funny"- Interview 57

"Decent food, you know? No one likes being treated like they're scum by getting slop served to them. Half of this food, I wouldn't even feed to a pig or a dog, you know? We're human beings. We might have our issues and stuff and be homeless, but they gotta come up with some better meals than just beans and rotten food and stuff"-Interview 97



Photo by Sam MacDonald

For Service Providers

Homeless shelters need to be compassionate and community-oriented places that triage needs in a holistic way.

The qualitative findings highlight that many shelter guests lack dignity and comfort. With dirty restrooms and sub-standard sleeping accommodations, clients struggle to engage in the resources and services offered to them. Agencies can do more to understand the lived experiences of their shelter guests and the ways in which many of their basic needs remain unmet, even while sheltered. Some questions for service providers to consider:

- **Do your clients have access to a clean restroom?**
- **Are your clients getting restful sleep in your shelter?**
- **Do your clients have a safe place to store their belongings during your appointment?**

There is a high need for resources addressing social isolation, family reunification and substance abuse.

Given the high number of people who spoke about familial problems and a lack of social supports, providers should expand their services to offer resources that address this need. For many individuals, sleeping on the streets would be a last resort. Family reunification offers a pathway to community for people who are disconnected with family members and friends. Substance abuse was also prevalent among the participants of this study; expanding the scope of substance abuse resources will complement efforts to move people off the streets. Whether people struggle with substances or not, community and social supports are critical.

Outreach workers are limited in their ability to engage people in services if they cannot provide people with a shelter bed.

When asked about their experiences with outreach workers, 52 people reported that they had never been offered a place to stay. The success of outreach is limited as long as people remain unsheltered. If outreach workers are able to offer shelter and immediately reduce the length of time that people remain on the streets, they will be more successful in helping people end their homelessness. Some questions for service providers to consider:

- **How would your outreach engagements differ if you could start by offering someone a shelter bed that evening? Do you think they would refuse services?**
- **How would diverse shelter options improve your outreach interactions?**

Shelter providers must balance the safety needs of their guests with a desire to be treated fairly and with freedom.

Nearly 20% of responses for why people are unsheltered were due to the curfew/rules of shelters. The qualitative data paradoxically revealed that people value safety and security most in a “good shelter.” 14 people explicitly used the phrase “feels like prison” to describe a “bad shelter.” This is likely due to the over-policing of shelters or the physical appearance. With high barriers to entry and rules that hyper-regulate the behavior of shelter guests, people may prefer being unsheltered. If shelter providers were able to provide safety in a more humane way, they could balance the concerns for safety with desires for freedom.

For Policy Makers and Individuals at the Systems Level

There is an urgent need for an increase in the number of shelter beds.

Many of the individuals sleeping on the street, would rather be inside. There were 90 individuals sleeping on the streets who would accept shelter. In order to address unsheltered homelessness, we must begin with a basic analysis of whether or not we have enough shelter beds to shelter everyone sleeping outside. There are 19 emergency shelter programs across the valley for single adults providing a total of 1,026 beds. That is not enough beds for the City of Phoenix, the fifth largest city in the United States.

Qualitative data collection is a critical and often absent piece of our understanding of homelessness.

Qualitative data collection provided us with an otherwise absent view into unsheltered homelessness. Currently, the majority of data we have on homelessness is quantitative in nature. Well-intentioned service providers are often dependent on their ability to produce and assess quantitative data to secure and maintain funding. Similarly, HUD has established quantifiable performance measures to assess the efficacy of homeless services systems. For example, a performance measure we included in this study was the maximum length of time in shelter over the participants' time experiencing homelessness. Quantitative data provides an overview of how long people have utilized shelter services, but fails to provide any insight into the lived experiences within those shelter systems. Knowing that clients spend an average of 50 days in a particular emergency shelter does little in assessing the quality of the experience for clients within those 50 days. If our performance measures are utilized to assess system performance, we must also create avenues for qualitative data to complement those numbers and deepen our understanding of how we can improve our homeless services systems.

If we want to address unsheltered homelessness, we need to look beyond the Point-in-Time data.

The Point-in-Time Count is a nationwide one-night survey of people experiencing homelessness. Although most of our data aligned with the findings from the 2019 Point-in-Time Count for Maricopa County, there were certain data points (i.e. race, ethnicity, disabling condition and chronic homelessness) that were significantly different. This could be due to differences in sample size; the sample in this study was 100 compared to 3,184 unsheltered individuals in Maricopa County. It is also true that the Point-in-Time Count has significant limitations. There are many unsheltered individuals who are not reached by the Point-in-Time Count. Additionally, all of the data on unsheltered individuals is self-reported. While providers and individual agencies have made strides to collect internal data on people who are unsheltered, this research speaks to the need for more efforts to collect city and county-wide data from people sleeping on the streets. This research highlights that the one-night Point-in-Time Count is a helpful overview of the demographics of people sleeping on the streets, but it does not provide a roadmap for how we shelter and house them.

We need to invest in affordable housing.

The way to address the growing number of people sleeping on the streets is temporary shelter. The solution to homelessness is permanent, affordable housing. According to the National Low-Income Housing Coalition, fair-market-rent for a one bedroom home in Arizona is at \$809 per month. An individual receiving Supplemental Security Income (SSI) receives a monthly payment of just \$771. With minimum wage at \$11.00 per hour, a minimum wage worker is only able to afford a monthly rental payment of \$572. Until our city, state and federal governments address the lack of affordable housing, people will continue to be without shelter.

Conclusion

This findings in this research indicate that service-resistance is a misnomer. Of the 100 people we interviewed, just 10 were truly resistant to services. For the remaining 90 individuals, there are legitimate explanations and reasons for why they are currently unsheltered. Some people are unsheltered because the City of Phoenix lacks the resources and will to provide them a bed. Others are unsheltered because they have unique needs that our current shelter system cannot meet (i.e. pets, belongings, criminal backgrounds, etc.). If we want to do something about the growing number of people sleeping on the streets, we have to begin by removing the judgments and beliefs which blur our perception of people who are unsheltered. We must learn from the 100 lived experiences shared in this report; we must humble ourselves and try to see things through the eyes of people experiencing unsheltered homelessness.



Photo by Sam MacDonald

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Appendix A. Quantitative Survey Instrument

1. Where did you stay last night?

- Outside-street/sidewalk
- Outside-park
- Outside-car
- Other _____

2. What is your age?

- Under 18
- 18-24 years old
- 25-34 years old
- 35-44 years old
- 45-54 years old
- 55-64 years old
- 65 or older

3. What is your gender?

- Male
- Female
- Transgender
- Other _____

4. What is your race?

- White
- Black or African American
- American Indian or Alaska Native
- Asian
- Native Hawaiian
- Pacific Islander
- Other _____

5. What is your ethnicity?

- Hispanic or Latino
- Not Hispanic or Latino

6. Are you a veteran?

- Yes
- No

7. Do you identify with any of the following (please check all that apply)

- A diagnosable substance abuse disorder
- Serious mental illness
- Developmental disability
- A chronic physical illness or disability, including the co-occurrence of two or more of these conditions

8. Have you been continuously homeless for one year or more?

- Yes
- No

9. In the last three years, have you had four or more episodes of homelessness?

- Yes
- No

10. How long have you been experiencing homelessness? (either sleeping in a place not meant for human habitation or living in an emergency shelter).

- Less than 1 week
- 1-2 weeks
- 3 weeks to a month
- 2-6 months
- 7-11 months
- 1 year
- More than 1 year
- More than 2 years

11. In the past month, how many times have you:

- Visited the emergency room _____
- Taken an ambulance _____
- Used a crisis service (mental health crisis, distress center) _____
- Been arrested _____
- Witnessed/been the victim of a crime _____
- Spoke to a case manager about shelter/housing options _____

12. What is the longest amount of time you've ever stayed in a shelter?

- I've never stayed in shelter
- Less than 1 week
- 1-2 weeks
- 3 weeks to a month
- 2-6 months
- 7-11 months
- 1 year or more

13. What is your biggest barrier in staying in a shelter?

- Addiction
- Criminal background
- Disability
- Lack of availability
- Mental health
- Partner/spouse
- Personal belongings
- Pets
- Shelter curfew/rules
- Other _____

Appendix B. Qualitative Interview Instrument

1. Could you begin by telling me a bit of background information? How did you end up experiencing homelessness and in the Zone?
2. Since experiencing homelessness, could you tell me about places you've stayed? Shelters, motels, hospitals, etc. What were they like?
3. Have you ever stayed in the Overflow shelter or another kind of emergency shelter? What did you like/dislike about it?
4. In the time that you've been experiencing homelessness, have service providers or case managers offered you a place to stay for the night? Describe that experience.
5. If Andre House were to open a shelter for you to sleep in, what would make you want to stay there?
6. Where would you like to see yourself in 3 months, in 6 months, a year from now?



Photo by Sam MacDonald

For questions about this study, requests for more information or survey responses and data or ways to learn about how you can be involved in addressing unsheltered homelessness in our community, please e-mail Ash Uss at ashuss317@gmail.com.