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Introduction

Though at one time in our history passing a man huddled under a blanket on the sidewalk or observing a woman asking for money outside a grocery store was a rare occurrence, we now witness such sights daily in large cities in the United States. A relatively invisible political issue affecting a small portion of the population until the early 1980s, homelessness became increasingly problematic throughout the late twentieth and early twenty-first centuries in the United States. Although the economy rose and dipped during these decades, as did the percentage of people living in poverty, homelessness appeared to be a relatively intractable problem. The numbers of people newly homeless generally did not abate, even during periods of economic growth. According to the US Conference of Mayors report, the demand for emergency shelter increased every year from 1985 to 2014, through periods of both economic stagnation and growth.¹ Homelessness also came to be seen as a pressing social problem because of the statistics citing women and children among the fastest-growing segments of the homeless population. Women were seen as a surprising subset of the “new” homeless; few women were among
the hobos and itinerant workers of the late nineteenth and early twentieth centuries. And in part because homeless women often have children with them, women’s homelessness introduced new concerns and understandings about what it means to be on the street. Today most estimates indicate that families with children make up at least 30 percent of the homeless population. With approximately 1.6 million children becoming homeless annually, the number of homeless children in the United States is at a “historic high.”

Research suggests that the reasons for homelessness are complicated and multilayered. First and foremost, homelessness is a product of poverty:

[A] variety of complex social system dislocations—an increasing rate of poverty, a deteriorating social “safety net,” the steady loss of low-skill employment and low-income housing, and others—have created a situation . . . where some people are essentially destined to become homeless. In so many words, we now have more poor and otherwise marginalized people than we have affordable housing in which to accommodate them.

While the official US poverty rate has hovered around 15 percent since 2010, estimates suggest that “a third of all people were near poor and poor.” In addition to poverty being widespread, the depth of poverty represents a pressing problem in the United States. Approximately 6.6 percent of households have an income under 50 percent of the poverty line, or roughly $12,000 annually for a family of four, which presents a tremendous barrier to housing stability for a considerable portion of the population. As Edin and Shaefer discovered in their research on impoverished families, in 2011 approximately 1.5 million households lived on cash incomes of at most $2 per day, per person, a calculation that includes cash welfare payments but does not include in-kind assistance like food programs. When poverty is that profound, people clearly struggle to afford basic necessities such as housing, food, clothing, and utilities and are at considerable risk of becoming homeless.

Low-income housing is in short supply and housing subsidies are not widely available to those whose incomes qualify them for assistance. With almost 12 million extremely low-income renters (those who earn less than 30 percent of area median income), there are just over 4 million available units that are affordable for this group. More than 70 percent of households earning less than $15,000 annually pay more than 50 percent of their incomes for rent each month, putting them at severe risk for homelessness. Thus,
housing supply has not kept pace with the numbers of low-income people whose incomes require low-cost housing if they are to remain stably housed. In addition, among those who qualify for government-funded low-income housing vouchers, only a fourth get access to a voucher, and low-income households can expect long waiting lists for federal rental assistance.11

Struggles with poverty and low-income housing shortages interact with several other convoluted causes of homelessness, often a combination of what are termed “structural” and “individual” issues, such as low wages and the declining value of the minimum wage, family violence, lack of access to welfare supports, mental illness, and drug and alcohol use.12 Both men and women suffer from a lack of low-income housing, low wages, and sporadic employment, but women also contend with domestic violence and the traditional responsibility of caring for children. It is difficult to capture the interaction of these multiple reasons for homelessness without sustained and intimate knowledge of homeless women’s lives. Statistics tell only part of the story; poverty rates, unemployment rates, and welfare rates cannot fully describe women’s homelessness. For these reasons this project relies on the rich and detailed information revealed through homeless women’s personal narratives, describing the causes of homelessness in homeless women’s own voices.

In addition to the causes of homelessness, I also question the meanings of homelessness through homeless and housed people’s perspectives. That is to say, homelessness refers to the lack of a dwelling considered standard in our society, the literal lack of a roof over one’s head. But homelessness also symbolizes, in a very visceral way, all the things we as a society attribute to poor people—it represents the lack of personal responsibility, the loss of a work ethic, and a general disassociation from the norms and trappings of middle-class society. In analyzing portrayals of homelessness, which both homeless and housed people help to create, this study also looks at how such meanings of homelessness affect the kind of help homeless people are offered.

Women’s representations of their histories and current living conditions reveal much about how homelessness is understood as a “public problem” in the United States and about the relationship of homelessness to American culture.13 As the interviews will indicate, certain kinds of explanations for and solutions to homelessness have more cultural resonance than others. In other words, homelessness can only be explained by placing it in the specific
cultural context of the United States in the first decades of the twenty-first century, where the dominant view of poverty focuses on individual rather than structural explanations and divides the poor into categories of deserving and undeserving. Homeless women’s stories intersect with these notions of the deserving and the undeserving poor and also may contribute to the process by which categories of deservingness are constructed.

Homelessness is analyzed in this book through three separate, although interconnected, components. First, to understand the meanings and experiences of homelessness, I rely on interviews with both homeless women and housed people; these two sets of interviews represent two prongs of the study. The third prong analyzes shelter services, philosophies, and policies because ideas about homelessness are both created and reflected in the shelter system. Shelters are important because they often serve as housed people’s only representation of homelessness. They give clues about how to understand homelessness, transmitting meanings of homelessness and representations of homeless women. By making many aspects of their programs mandatory, for instance, shelters give the impression that homeless people will not take the initiative on their own to look for work or housing, enroll their children in school, or keep their living spaces clean. They must be forced to do so. By mandating budgeting classes, shelters suggest that people become homeless in part because they are irresponsible with their money. It is in a sense a symbiotic relationship: shelter programs influence the ways housed people think about homelessness, and the views of the housed public—whether ordinary citizens or policymakers—affect the formation of shelter programs and how such programs treat homeless people.

Thus a description of homeless women’s lived experiences appears alongside a consideration of homeless and housed people’s interpretations of why people become homeless, what kinds of people constitute the homeless population, and the best policy responses to homelessness. This study reflects the processes by which homeless and housed people—in their attempts to make sense of poverty and homelessness as these issues impinge upon their daily lives—participate with shelter employees, homeless advocates, and policymakers in shaping the meanings of homelessness. By relying on the words of ordinary homeless and housed people to provide the majority of the data for this book, I suggest that to understand the politics of poverty and homelessness, one needs to examine the ways people in multiple social
locations engage in constructing meanings for homelessness and the identity of “the homeless.”

Methodology

Three sets of in-depth interviews with homeless women comprise the bulk of the data for this study. At different points from 2003 to 2011, I completed formal and informal interviews with 30 homeless people in California. Another 10 interviews were completed with women in Oregon and Washington in 2007. And in the mid- to late 1990s, I interviewed 33 women living in Arizona homeless and battered women’s shelters and engaged in participant observation with an additional 100 homeless people. For each of these time periods, I talked with, ate with, walked with, and listened to homeless people talk about their lives. For many women I became a shoulder to cry on and an ally to laugh with, as I listened to stories of financial crisis, family stress, and struggles within the shelter system. In-depth, semi-structured interviews included discussion of family and work histories, education, income, violence, mental illness, and substance use, as well as how they felt about homelessness and what it meant to them. Interviews ranged from one to four hours. I had ongoing contact with many of these women—meeting their friends or family members, visiting their jobs, accompanying them on errands, and having extended talks over a meal or a cup of coffee. The interviews featured in the book primarily are with residents of two homeless shelters, the Lighthouse and the Family Shelter; two transitional housing programs, People in Transition and Endowment for Phoenix Families; and two domestic violence shelters, La Casa and Rose’s House; and they are combined with participant observation in three of those programs and in one homeless camp in the desert.

To provide additional breadth to the interview data, I reviewed fifty randomly chosen confidential case files at one of the family homeless shelters featured in the study. The files provide less depth than the interviews, but the information they contain on work, education, and family history helps to support my findings with statistical information. They also offer a different kind of information than was gained from the homeless interviews and participant observation. Specifically, the files are notes written by a staff equipped with distinct categories of “the deserving and the undeserving” homeless, through which residents are filtered. In this sense they provide another set
of data on staff attitudes, beliefs, and practices. In addition, I worked for a year as a part-time paid caseworker at one of the battered women’s shelters. Exposure to staff and residents as a caseworker versus as a companion to the residents brings a different perspective on the difficulties inherent in both living and working in a shelter and on the meanings of homelessness.16

To meet residents at both homeless and battered women’s shelters, I had to get the permission of a sometimes reluctant shelter staff. Some shelters such as La Casa, a battered women’s shelter featured in this study, have policies generally prohibiting researchers from interviewing residents on the grounds that doing so violates client privacy. Others want to encourage residents to spend their time pursuing housing, employment, and other goals rather than answering interview questions, and residents may not be readily accessible because they are working on these goals. Moreover, a dearth of public community space at the shelters made it difficult for me to become familiar to residents, a key element in relieving the uneasiness that may initially accompany an interview request.

All homeless people who agreed to interviews did so voluntarily. At the Family Shelter and Rose’s House, where I spent a good deal of time talking with residents, accompanying people on errands, or assisting with child care, I initially set up interviews by attending resident meetings or gatherings, explaining my research, and passing around a sign-up sheet for those who wanted to participate. In this way people could decline to interview without having to face me directly, a position I assumed would be more comfortable for them than a face-to-face refusal. In time I met other shelter residents through women who had participated in those initial interviews, while visiting in women’s rooms or when talking with people in the public community area. Similarly, at the Lighthouse, initially the caseworker put a sign-up sheet on the door of the shelter that described the study and had specific times for people to sign up. I then met other people while I was in the shelter to conduct the initial interviews; sometimes I approached people, and other times women would express interest in being interviewed. At People in Transition I spent time talking casually with people, and I helped to organize and took part in recreational trips and an off-and-on women’s support group. I then asked people individually if they wanted to participate.

At La Casa, unlike at the other shelters, the caseworker set up the interviews herself. Her concern was not to select the women to be interviewed
so much as to ensure that they could decline without discomfort, thereby avoiding the possibility that some women might feel pressured to participate. In this sense La Casa offered me the least access to shelter residents. In addition to the caseworker’s control over interview arrangements, she did not allow me to spend time interacting with residents on the shelter grounds. As a result, Rose’s House figures more prominently than La Casa in the discussions regarding domestic violence shelters.

In addition to the interviews with homeless women and review of case files, over a twenty-year period I have visited multiple homeless shelters, battered women’s shelters, and antipoverty agencies in such diverse cities as Phoenix, Arizona; Tucson, Arizona; Los Angeles, California; San Luis Obispo, California; and Baltimore, Maryland, where I interviewed shelter directors and caseworkers, usually professional social workers, hired to work with the homeless. Individual caseworkers wield exceptional power over individual homeless women, who are dependent upon the shelter to meet basic needs. Many caseworkers labor valiantly to assist homeless women in a socioeconomic context of diminishing real wages, job stability, and availability of public assistance. But because the shelter staff serves as the most direct representative of a stingy and bureaucratic system, homeless women may blame them for inadequacies the staff cannot control. These representatives of the system, even when they provide real assistance to the residents, also personify the seemingly endless regulations and personal intrusions homeless women have to accept to get housing. Homeless women often do not perceive caseworkers as full human beings or note the times they have been helpful and caring because homeless women experience staff help in the context of their own powerlessness. The goal, then, is not to depict caseworkers’ experiences and viewpoints but to show life from the standpoint of homeless women and to emphasize their voices, so conspicuously absent from much scholarly research.

My wish to describe homelessness from the standpoint of homeless women means that the portrayal of shelter staff tends to be more negative than positive. Indeed, in comparison to other studies of homelessness, the portrait of shelter staff often seems to miss the caring and empathetic work many do for the homeless. Further, in contrast to the depiction of homeless people, the staff seems much more one-dimensional. This is the case because although I interviewed caseworkers and directors of shelters, I
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self-consciously depict staff words in the context of how homeless women experience them. A shelter resident does not simply listen to a caseworker describe homeless people as “dysfunctional” and in need of basic “life skills” training but understands that those beliefs translate directly to decisions about assistance (or lack of assistance) that deeply affect the possibility of becoming housed. Thus staff attitudes and beliefs—often a mix of objective distance and paternalistic concern—are described from homeless women’s, not staff members’, perspectives.

The interviews with sixty-five people who were not homeless also are an important tool to analyze meanings of homelessness. Housed people with no formal or direct connection to homelessness understand and interpret the existence of homelessness from their specific social locations, using shared cultural constructions of homelessness and poverty. Housed participants came from a wide range of organizations and workplaces, including, but not limited to, schools, an art gallery, a construction company, a law firm, an actuarial company, a counseling center, and a real estate office. Those who might be considered more politically active than the norm were also sought out and included National Service Program employees, as well as Democratic, Republican, and Libertarian activists and members of the National Organization for Women. Although the majority were middle class, low-income and upper-income people also participated. The interview asked for opinions about why people become homeless, how homelessness can be addressed, what feelings and responses homelessness evokes, personal experience with homelessness in the past, and definitions of homelessness. As a member of the housed community myself, my own perspectives about homelessness and attitude toward homeless people underwent a major change as a result of interviewing homeless women. Instead of the sometimes uncomfortable mix of sympathy and revulsion I had felt for the seemingly incomprehensible life of a homeless person, I now feel empathy, respect, and awe that anyone emerges from homelessness and from the shelter system with self-respect, hope, and humor intact.

Ethnography

Ethnographic studies of homeless people typically use participant observation, focusing on how and where homeless people live and considering the
issues and problems they face while living in shelters or on the streets. Such studies build on a long line of urban ethnographic explorations of the lives and material struggles of people in low-income communities. The best of these ethnographies capture the myriad ways the people interviewed make sense of their lives, helping to create meanings for homelessness and poverty.

Ethnographic research supplies depth and contextual information that help to make sense of homeless women’s experiences. It is only through in-depth interviews and long-term participation in at least some aspects of homeless women’s lives that the political and cultural meanings of homelessness and the relationship between personal experiences and the cultural construction of homelessness is revealed. Sherry Ortner points to the “immediacy” and “power” of relating people’s stories, although at the same time she cautions against ethnography’s tendency to portray a group as static and homogeneous—failing to capture “the multiple subject positions,” the diverse and sometimes contradictory voices, and the dynamism of the people studied. Nevertheless, Ortner argues that “America is overanalyzed and underethnographized” and suggests that we look to ethnography as a way of knowing rather than a “kind of text”:

Ethnographic knowledge is knowledge of the lived worlds of real people in real time and space, and while we may be able to do without ethnographies as we have known them, we cannot do without ethnography. And although there is a significant body of ethnographic work on America, much of it quite good, the ratio of knowledge derived from this work to knowledge derived from polling, statistics, media analysis, and journalism is radically out of whack.

Indeed, the literature on homelessness contains a significant number of books that rely on survey or other kinds of research, with the authors sometimes never speaking to a homeless person at all. Even though homeless people are living with homelessness, they are not presumed to have significant specialized knowledge about why it occurs and how to address it. Their presumed “deviance” means they are incapable of being experts on homelessness or of sharing inside knowledge to explain the process of becoming homeless.

Analyses of homelessness based on survey research tend to divide people into groups, arguing that a certain percentage are homeless as a result of drug use, another group is mentally ill, and still another is homeless because
of the structure of the economy. Categorizing people based on the one reason they lost housing precludes a focus on the process of becoming homeless—on how, for example, domestic violence, drug use, and poverty actually intertwine to lead to homelessness. Ethnography lends itself more easily to an emphasis on the process of becoming homeless and in that sense has affected the results of this study. Participant observation and in-depth interviews are more likely to find the multiple and interconnecting factors that affect housing status. My interviews showed that women became homeless as a result of a combination of events and reasons that intersected and often depended on one another, that occurred in a specific time and place to a particular person. Such particularities reveal themselves only through the ongoing and intense interaction possible with in-depth interviews and participant observation.

The Shelters

The shelters discussed in this book house as few as five families to as many as 100 individuals; all have cumbersome sets of rules and extensive client and staff contact. Smaller, more tightly controlled shelters offer more privacy and amenities than the armory-style shelters, such as individual rooms for each family and fewer clients per caseworker. Although the more comfortable living environment is accompanied by more stringent regulations, these shelters are almost always full, and many homeless people find it difficult to gain admission to them. Generally, such shelters do not permit residents to use alcohol or drugs on or off the shelter premises. Before the staff considers accepting a person with a history of drug or alcohol use, he or she must have been clean for some time before having sought shelter or be willing to attend counseling once in the shelter. Moreover, caseworkers tend to accept those homeless people who appear most “motivated” or most likely to succeed in finding a home within the three months they live at the shelter. This may exclude mentally ill women, although those who have been “stabilized” on medication are sometimes accepted. This practice may also favor those with more skills or job experience, since they are the group most likely to become stably housed within three months.

The definition of homeless people as deviants tends to dominate in these smaller, more tightly controlled shelters. Most emergency shelters are short
term, offering no more than three months of housing, and they are staffed primarily by social workers. Assigning the problem of “fixing” homeless people to social workers tends to individualize and psychologize the reasons people become homeless, since social workers as social deviance experts not only advocate for shelter residents with housing programs or other social service agencies but also argue that they need to help homeless people eradicate “dysfunctional” behaviors. Under the direction of social workers, the services these shelters offer differ from those that might be available if job training programs or housing developers had primary responsibility for confronting homelessness. Perhaps the response would not center around temporary, emergency shelters offering life skills classes but would focus on building permanent low-income housing or generating entry-level jobs outside the service sector.

Consonant with the emphasis on homeless deviance and dysfunction, shelters employ complex sets of rules, mandatory “work programs,” and curfews—all geared toward social control of residents. Although more true for homeless than battered women’s shelters, attempts to micromanage residents’ lives suggest that social control is often viewed as the only acceptable response to the “intractable” problem that the homeless represent. Lee Rainwater argues that since the 1960s,

Political and public discussion has seldom concerned itself with poverty as a basic condition of the life of a significant group in American society. Instead debate has focused on the social problems associated with poverty—thus we have issues of the welfare crisis and welfare reform, street crime, crack cocaine, poor schools . . . births to unmarried teenage mothers, infant mortality, homelessness. . . . Each problem has its own diagnosis, its own therapy, and its own professionals hungry for funding. Poverty and the poor as a class get lost in the scramble for social problem definition and control.

As Rainwater suggests, the first step in “fixing” the homeless is to divide them into distinct categories based on their particular dysfunction. Thus, for example, drugs, alcohol, laziness, and teen pregnancy each can be addressed with the appropriate responses and therapies.

A homelessness policy dominated by short-term emergency shelters and social control is gendered on several levels. In the shelter, staff attitudes, rules, and acceptance policies combine to articulate appropriate (largely
conventional) gender roles. First, homeless women are more likely than their male counterparts to appear to meet shelters’ demands for docile, appreciative clients. In this sense they are more likely to be defined as deserving of help and to be accepted into shelters. Relatedly, caseworkers feel comfortable approaching a largely female clientele—defined as weak, passive, and dependent—with paternalistic and controlling measures. On the other hand, even if women—in particular white women—are more likely to be defined as “good” clients, women are under more pressure to appear deserving of help because they have fewer options than men. The vast majority of homeless adults who have children in their care are women. They cannot stay on the street without risking losing custody of their children. Moreover, even for single women, the risk of rape and other violence makes living on the street extremely dangerous. Thus women have few alternatives to the controlling environments of the shelters.28

Relatedly, within the context of social control, emergency shelters, especially those in large cities, tend to categorize homeless women into discrete groups. In general, each directs its services toward one subpopulation of the homeless—such as abused and neglected teens, drug addicts, homeless women, or battered women—to the exclusion of others similarly without housing. This propensity extends in particular to the construction of separate identities—and therefore different services—for battered women versus homeless women.29 Battered women’s shelters and homeless shelters each create a different set of eligibility criteria that corresponds to a specific identity. Until 2010, shelters routinely refused to provide services to women who did not conform to the criteria that supposedly defined the particular group the shelter program targets. At least on paper, this began to change with the passage of the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act (Pub. L. 111-22) in 2010, which explicitly mandates that women fleeing domestic violence be considered homeless and fully eligible for homeless services. According to women seeking shelter, neither battered women’s shelters’ nor homeless shelters’ eligibility criteria fully reflect women’s lives and experiences. Thus those who do not fit clearly into either the battered woman or the homeless woman identity may have difficulty locating a program to assist them or may redefine their experiences to correspond more closely to the shelter staff’s expectations.
The decision to include in this study women from both homeless and domestic violence shelters resulted from their strikingly similar reasons for seeking emergency housing. In particular, many told stories about abusive partners in discussing their past histories and paths to both kinds of shelters. Although I began this research by concentrating exclusively on women in homeless shelters, I extended the interviewing to include women in domestic violence shelters when I discovered the centrality of abuse in homeless women’s stories. Interviews and participant observation reveal that a woman with a history of having been battered may enter a homeless shelter after spending some time at a domestic violence shelter. She may also go directly from her battering relationship to a homeless shelter because, among other reasons, the domestic violence shelters are full. Other women may prefer the attention paid to housing and job needs at homeless shelters. The women’s stories in this study indicate that many seek assistance for multiple problems but learn to emphasize one and conceal another to gain acceptance into a particular shelter. They also suggest that the distinctions between “battered woman” and “homeless woman” are not straightforward or absolute.

**Homeless Policy**

Over the past thirty years, two primary policy methods for ameliorating homelessness have developed, the “linear” method and the “Housing First” approach. Short-term emergency shelters are at the core of the linear model; such shelters proliferate in US cities and are often the only type of homeless service available in a metropolitan area. Homeless people must meet certain milestones to move through a series of steps toward permanent housing; the reliance on emergency shelters is considered the first step in the linear approach. “Housing First,” on the other hand, seeks to provide permanent housing immediately and follow up with social supports, addiction therapy, and the like, after housing has been secured. Since the primary function for Housing First to date has been to help long-term or “chronic” homeless people who struggle with mental illness and substance abuse, families often do not have the option to utilize programs with a Housing First approach.

In place in some form since the 1980s, the linear model still stands as the dominant type of homeless service provision in the United States. More shelters and programs rely on this version of homeless assistance than the
Housing First model, and all the shelters featured in this study are based on the linear model. Characterized as “earning your way to housing,”31 linear programs are built on the notion that homeless people must move through various stages of social services, for example, emergency shelter, transitional shelter, and finally permanent housing. Based in the pretext that the individual must be reformed in order to gain and maintain housing,32 this model “anticipates that homeless persons will enter and graduate from a sequence of programs . . . with progress based on recovery toward self-sufficiency.”33

The linear model depends upon acceptance into a short-term homeless shelter as the first step in the progression toward housing. Though they vary, most emergency shelters employ basic regulations that serve as surveillance and control mechanisms; clients are expected to reveal to the staff their personal histories, current goals, and daily activities. Shared living space and case worker surveillance make it difficult for homeless residents to find time to themselves and to keep many aspects of their lives private. Indeed, because of shelter rules and invasive staff practices, many homeless people exhaust other options before turning to a shelter as their last resort. Yet because so many people do have to choose between the street and a shelter and because there are too few shelters for the number of homeless people, the shelters are almost always full; they constantly have to turn people away for lack of space.

In the linear approach, permanent housing is perceived as a resource that could easily be wasted on those who are not “housing ready.” For homeless people to be successful in maintaining housing over a long period of time, they must conquer a series of steps to stabilize their mental health, achieve abstinence from drugs and alcohol, improve their financial status, and regulate their behavior: “Most linear interventions assume that a return to long-term stable housing, in either the private market or a subsidized setting, requires the restoration of behavioral self-regulation and the capacity to interact in a constructive social environment and also that an individual’s tangible resource needs must be addressed.”34 Each step in the sequence comes with increasing demands on the homeless person,35 often including treatment for drugs, alcohol, or mental illness.36 Clients must prove they are abstinent from substances and psychiatrically stable, which usually is based on agreeing to take medication.37 For those who are perceived as noncompliant or who may choose another path to housing, their uncooperativeness is
proof that they cling to the dysfunctional behaviors and choices that created their homelessness; in other words, they are not “housing ready.”

By contrast, the central premise in Housing First models is that people can be housed immediately, without having to prove that they are housing ready. Supportive services such as primary health care, employment assistance, substance abuse counseling, and mental health care are offered after housing is secured. The organizing principles include the argument that homeless people have a right to housing, even if it is not a legally recognized right in the United States, and that homeless people should be able to exercise consumer choice in housing, including the quality, style, and location of housing, as well as the services utilized once housed.

With assistance to locate housing and extensive support services offered but not mandated once a person has been housed, Housing First “offers the independence and privacy that most consumers desire,” alongside intensive but flexible and nonmandatory services to help people maintain their housing and attain greater self-sufficiency. Staff members track down and do outreach to invite homeless people who are eligible for housing to apply to the program and, once they have entered the program, help them locate, choose, rent, and furnish an apartment. Programs may lodge clients in a variety of settings: “Supportive housing may consist of individual residential units in market housing; set-asides of some number of units inside larger residential developments; congregate apartment or single room occupancy (SRO) buildings that exclusively house the target population; or mixed-tenancy, congregate buildings that provide affordable housing for people with and without disabilities or histories of homelessness.” Neither psychiatric treatment nor sobriety must be attained by homeless people to qualify for housing, and they need not agree to participate in any particular service or form of care to remain housed; rather, programs employ a harm reduction approach with the goal of reducing risks to participants associated with substance use or mental illness.

Contrasting advocates’ and social programs’ calls for housing as a “right,” the US government began to support using a Housing First approach for chronic homeless populations largely as a cost-saving measure. Thus, in 2003, HUD called for an end to chronic homelessness in ten years and a drop by 50 percent in five years (United States Department of Housing and Urban Development 2002); HUD matched its behest with funding increases for
programs providing permanent housing and supportive services for mentally ill and substance-dependent long-term homeless people. The US government pledged $35 million to fund permanent housing and supportive services for chronic homeless people. Concerned over the cost of managing the service needs of this group, HUD and others cited data suggesting that chronically homeless people cost state and local governments significant amounts of money from their use of shelters, jails, detoxification facilities, hospitals, and other services. Studies show, for example, that chronically homeless people “represented a relatively small proportion of the homeless (approximately 10 percent), but utilized approximately half of shelter services as measured in days.” The average cost per year in services paid for local, state, and federal governments for each chronically homeless person was estimated at $44,733 in 2006 dollars.

Although Housing First represents a departure from past homeless policy requiring people to prove they are “housing ready” or “deserving” of help before they get assistance, not all portions of the homeless population share in the advantages presented by the new programs. In essence, with its emphasis on chronic homeless individuals, Housing First may be siphoning both funding and the focus of policymakers from families and other homeless subpopulations:

In recent years, homeless families with children have not received the same federal attention and level of fiscal support as other homeless subgroups. Specifically, the federal government and local agencies have responded to the unique needs of chronically homeless persons with an influx of targeted federal funding. Even as their numbers increase and more are taking longer to transition to self-sufficiency, homeless families remain largely invisible to the public and absent from the national policy debate.

Thus the attention to the economic costs associated with allowing chronic homeless people to remain on the street has enabled Housing First advocates to gain funding for programs, obtain housing vouchers, and the like, exclusively for chronic homeless individuals. Families, who are relatively invisible to the public as compared to chronic homeless people and cost the state little comparatively, have not gained the same traction with policymakers. Data suggest that while chronic homelessness has decreased in the past ten years, there has been an increase in family homelessness. Low-income housing
shortages particularly affect single-parent families, where one income must stretch to support multiple people; single-parent families are more likely to experience “severe” problems affording housing.⁵⁵

Among the women profiled in this book, the vast majority have not benefitted from Housing First policies. Since they do not fit the federal definition for chronic homelessness, they are not eligible for most Housing First programs, and their experience while homeless has changed very little from the mid-1990s to the present. The only option for most is a program governed by the treatment first, or linear, model. As will be explored in the subsequent chapters, homeless women, particularly those with children, have few options besides short-term emergency shelters.

Overview of the Book

In Chapter 1 women recount their paths to homelessness, describing a complex set of interlocking reasons for the loss of housing. For the women interviewed, poverty, domestic violence, and low-rent housing shortages most often lead to homelessness. Within the context of the narratives in Chapter 1, Chapter 2 describes the physical environments of the shelters and the relationships between the staff and residents within the shelter system, providing an intimate exploration of the linear model in operation. Social workers closely monitor homeless shelter residents’ daily lives and minute aspects of their behavior, primarily by controlling public and private space within the shelter. Although battered women’s shelters are less controlling than homeless shelters, many of the same tactics are found in both types of shelters. Women resist social worker surveillance and regulations they find onerous or unfair in a variety of ways. Because they rely on the shelter to meet basic needs like housing and food, however, resistance is often covert and individual.

Chapter 3 compares domestic violence and homeless shelters. Although women in both groups share strikingly similar life stories, the shelters themselves differ in many ways. Whereas homeless shelters assist residents with job and housing needs, domestic violence shelters emphasize emotional healing. The programs and services offered by the two types of shelters significantly affect women residents both materially and in terms of their understandings of themselves and of poverty and homelessness. Staff caseworkers play a key role in delineating meanings for the identities of “homeless woman” and
“battered woman.” These institutional definitions help to create and sustain distinctions between residents in the two types of shelters.

Chapter 4 brings housed people into the story, plumbing their interview responses for clues to the ways homelessness is understood in US society. Their attitudes about poverty, personal interactions with homeless people, and charitable impulses reveal much about the multiple meanings of homelessness. Likewise, Chapter 5 argues that cultural definitions of the term homeless are layered with multiple ideological and material connotations, such that to call a person homeless conveys much more about her than that she simply lacks housing. By focusing again on homeless women’s interviews, this chapter allows homeless women to, in a sense, answer housed people’s conceptions of the homeless.

Notes


7. Ibid.

10. Ibid.
17. See, for example, Deborah R. Connolly, Homeless Mothers: Face to Face with Women and Poverty (Minneapolis: University of Minnesota Press, 2000).
18. Ibid., 133.
19. Most housed interviews were conducted either in person or over the phone, although in the interest of time a number of people filled out questionnaires. They contained the same questions used in the in-person interviews.


32. Ibid.

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35. Padgett, Henwood, and Tsemberis, *Housing First*. 


38. Padgett, Henwood, and Tsemberis, *Housing First*. 


42. Tsemberis and Eisenberg, "Pathways to Housing." 491. 

43. Greenberg et al., “Supportive Housing Best Practices.” 


45. Padgett, Henwood, and Tsemberis, *Housing First*. 

46. Willse, *The Value of Homelessness*. 


49. Moulton, “Does Increased Funding for Homeless Programs Reduce Chronic Homelessness?” 


51. Moulton, “Does Increased Funding for Homeless Programs Reduce Chronic Homelessness?” 601.


54. Weinreb, Rog, and Henderson, “Exiting Shelter.”