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# Exploring Differing Experiences of Homelessness in Hawai'i: Full Report to Stakeholders Part I

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**Summary of Key Findings**

- Homeless service providers and service users in Hawaiʻi described a number of factors that impact homeless experiences in the state

- Using a framework called Bronfenbrenner's (2005) Ecological Theory, these factors were grouped into nested levels

- At the **Individual and Family Level**, participants listed a number of factors that influence different experiences of homelessness, including:
  - *Demographic characteristics*
    - Age, Ethnicity, & Family Composition
  - *Background Experiences*
    - Criminal History, Veteran Status, Education, & Economic Factors
  - *Health Related Factors*
    - Physical Health/Disability, Mental Health, & Substance Abuse
  - *Personal or Social Characteristics*
    - Important Relationships & Willingness

- Individuals and families who experience homelessness are also greatly impacted by their interactions with service programs and organizations. Important **Program and Organizational Factors** described by participants included:
  - The *Comprehensiveness* of services and *Trustworthiness* of staff and organizations
  - The various program *Rules and Requirements*

- Individuals experiencing homelessness and the organizations that serve them are situated within a larger service system context that can also shape different experiences of homelessness. **Systems Level Factors** discussed included:
  - High levels of *Bureaucracy* and a need for more *Funding*
  - The importance of both interagency *Collaboration* and working with *Related Systems* (e.g., the healthcare, public benefits, and mental health systems)
  - The way that various system-wide *Approaches to Homelessness* can have different impacts on different groups of service users

- Individuals, organizations, and the service system are situated within **Community and Society Level** contexts that also impact homeless experiences, including:
  - The overall lack of *Affordable Housing* in the state
  - Public perception of homelessness and the *Community's Willingness to Help*
  - *Public Policy* initiatives that make legislative decisions related to homelessness
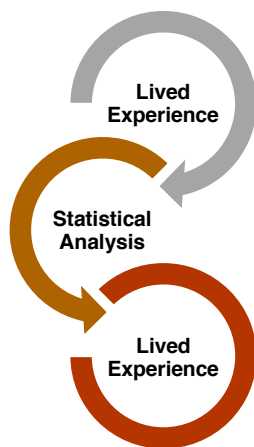  - Underlying issues that make homelessness a *Symptom of Larger Problems*

# Table of Contents

**Introduction**

In many cities and towns across the U.S., homelessness has arisen as a prominent and difficult problem to address (Quigley, Raphael, & Smolensky, 2001). It has become a public health and humanitarian concern at both the national level and at the state level in Hawaiʻi. The recent *Homeless Service Utilization Report* for Hawaiʻi State, which tracks administrative data related to homeless service usage across the state, shows that the number of homeless individuals in Hawaiʻi has steadily grown since 2007, with a record 14,954 individuals receiving services in the last fiscal year (Yuan, Vo, Gleason, & Azuma, 2016). Hawaiʻi is not alone in facing sustained rates of homelessness despite efforts to address the problem. In fact, across the nation homelessness has been a fairly intractable issue, defying simple programmatic and policy solutions (Culhane, Park, & Metraux, 2011; Lee, Tyler, & Wright, 2010). However, while patterns and predictors of homelessness in Hawaiʻi likely share some similarities with those in other states across the nation, the unique geographic, historical, and cultural setting of the state may result in important differences in homeless experiences in the islands.



The overarching goal of this project was to explore and understand patterns of homeless service usage in the unique setting of Hawaiʻi. In order to examine homeless experiences from multiple angles and perspectives, the study was designed in three overlapping, interactive stages. Stage 1 of the project began by looking to homeless service providers and homeless service users to describe their knowledge and observations about experiences of homelessness in the state. To do this we used semi-structured qualitative interviews to talk with nine service providers and nine service users from Oʻahu, Maui, and Hawaiʻi Islands. This stage of the project was based on the idea that it is important to consider the perspectives of those with "on the ground" knowledge of homelessness (Jason, Keys, Suarez-Balcazar, Taylor, & Davis, 2004).

In addition to the qualitative interviews, a large dataset of administrative service usage information was analyzed to determine if there were statistically distinct and meaningfully identifiable patterns of service usage in the state (Stage 2). The results of that analysis are presented in Part II of the Report to Stakeholders. Finally, Stage 3 circled back to focusing on the importance of lived experiences by giving the original Stage interviewees the opportunity to review and comment on preliminary results from both Stage 1 and Stage 2. This feedback stage helped to ensure that the results detailed here line up with the real world knowledge of these experts, those whose daily lives are impacted by homelessness.

This Part I report focuses on the content from the Stage 1 participant interviews, mentioning feedback from the Stage 3 interviews where appropriate. Too often when homeless programs and policies are discussed we do not hear the voices of those who have experienced homelessness firsthand (Lee et al., 2010). Therefore, this report focuses on highlighting those voices and on detailing the rich description and nuanced discussions provided in the participant interviews.

## Methods

A total of 18 participants were recruited for Stage 1, including nine local homeless service providers and nine homeless service users. In deciding who to interview, those who seemed to have extensive knowledge of the range of experiences within the homeless service system were sought. The service providers (SP) and service users (SU) were located in three of Hawai'i's five counties: the City and County of Honolulu (SP = 7; SU= 5), Hawai'i County (SP = 1; SU = 3), and Maui County (SP = 1; SU = 1).

The interviews were semi-structured. This allowed the participants space to discuss their thoughts about the various factors that may impact homeless experiences. Generally, the questions focused on what helps or hinders individuals and families from successfully exiting the homeless service system. All interviews were audio recorded and transcribed verbatim.

The interview transcripts were analyzed using thematic qualitative analysis techniques as outlined by Creswell (2007). The overarching question guiding the analysis was: "What kinds of factors might influence one's experience of homelessness?" First, the interview content was divided into five categories:

1) *Individual and Family Level Factors* which might diversely impact one's experience.
2) *Program and Organization Level Factors* related to the homeless service programs or organizations with which service users interact.
3) *System Level Factors* related to the homeless and other service systems.
4) *Community and Society Level Factors* that influence experiences of homelessness in the state.

A total of 13 of the original 18 participants (72%) completed a Stage 3 follow-up interview. All but one service provider from the original group participated in the follow-up interview (*n* = 8). The service users were more difficult to contact for follow-up, but a total of 5 of the original 9 service users participated in the follow-up portion of the study. At least one service user and one service provider from each of the original 3 counties (the City and County of Honolulu, Maui County, and Hawai'i County) participated in the second interview. Stage 3 participants were presented with preliminary findings from the first two stages of the study and were asked to discuss: 1) areas they agreed with or that made sense to them according to their experiences; 2) areas that they disagreed with or were not sure about; and 3) anything that might be missing. Additional information from these follow-up interviews was used to enhance and refine the results presented below.

## Results

Table 1 indicates the themes and subthemes that were found under each category. It also shows how many of the Stage 1 interviewees (broken down by service providers and service users) discussed issues related to the various themes and subthemes. It is useful to keep in mind that these categories are not necessarily discrete or mutually exclusive. Rather, they represent an attempt to organize the complicated and interrelated factors that interviewees thought would likely contribute to the various different experiences of homelessness in the state.

Table 1. Number of Participants who Discussed Each Theme and Subtheme During the Stage 1 Interviews.

| Category | Theme | Subtheme | Initial Interview Coverage | | |
| --- | --- | --- | --- | --- | --- |
| | | | # Service Providers | # Service Users | Total |
| Individual and Family Level Factors | Demographic Characteristics | Age | 7 | 4 | 11 |
| | | Ethnic Group | 8 | 4 | 12 |
| | | Family Composition | 6 | 9 | 15 |
| | Background Experiences | Criminal Justice | 6 | 3 | 9 |
| | | Veteran Status | 7 | 1 | 8 |
| | | Education | 3 | 2 | 5 |
| | | Economic Factors | 7 | 6 | 13 |
| | Health Related Issues | Physical Health | 5 | 6 | 11 |
| | | Mental Health | 9 | 7 | 16 |
| | | Substance Abuse | 7 | 7 | 14 |
| | Personal or Social Characteristics | Relationships | 8 | 9 | 17 |
| | | Willingness | 7 | 8 | 15 |
| Program or Organization Level Factors | Comprehensive Support | | 9 | 8 | 17 |
| | Trustworthiness | | 8 | 7 | 15 |
| | Requirements | | 7 | 6 | 13 |
| System Level Factors | Bureaucracy | | 3 | 5 | 8 |
| | Funding | | 6 | 4 | 10 |
| | Collaboration | | 6 | 0 | 6 |
| | Approaches to Homelessness | | 8 | 7 | 15 |
| | Related Systems | | 9 | 4 | 13 |
| Community and Society Level Factors | Affordable Housing | | 8 | 9 | 17 |
| | Community Willingness to Help | | 8 | 8 | 16 |
| | Public Policy | | 7 | 4 | 11 |
| | Symptoms of a Larger Problem | | 5 | 2 | 7 |

During the Stage 3 follow-up interviews there was near universal endorsement of this overall organization of the factors influencing homeless experiences. Because the majority of participant feedback in the follow-up interviews was affirmatory (and therefore often redundant), the analysis below will only include follow-up interview data that either questions or significantly expands upon the original themes. Wherever the Stage 3 follow-up data are included, it will be clearly noted as such.

## Section 1: Individual and Family Level Factors

All 18 interviewees discussed at least one (in most cases, several) of the following individual/family level factors. However, the coverage of each theme varied from participant to participant depending on his or her experiences with different groups of individuals and families experiencing homelessness. Because of the large number of participant-generated individual and family level topics (11 total), four overarching themes were created to organize this content: demographic factors, background experiences, health related issues, and social/personal factors.

### Section 1a: Demographic Characteristics

Each of the 18 participants mentioned at least one subtheme related to the demographic characteristics of homeless populations. Age or developmental stage ($n = 11$), ethnic or cultural identity ($n = 12$), and the composition of the homeless household ($n = 15$) were mentioned as factors likely to impact one's homeless experience. Table 2 indicates the number of service providers and service users who discussed each subtheme.

Table 2. Initial Interview Coverage of Demographic Subthemes.

| | | Initial Interview Coverage | | |
|---|---|---|---|---|
| **Theme** | **Subtheme** | # Service Providers | # Service Users | Total |
| Demographic Characteristics | Age or Developmental Stage | 7 | 4 | 11 |
| | Ethnic/Cultural Group | 8 | 4 | 12 |
| | Household Composition | 6 | 9 | 15 |

Key Findings:

- Youth and the elderly were thought to be particularly vulnerable populations presenting with special challenges and unique experiences
- The discussions of different ethnic groups in the homeless service system tended to divide individuals into two major groups: Newcomers (including Mainlanders and "Micronesians") and (relative) non-newcomers (including Locals, Native Hawaiians, and other Pacific Islanders)
- Newcomers, particularly COFA Nationals, can experience stigma, discrimination, and blame for homeless issues in the state
- Several service provider interviewees seemed to want to highlight the extent to which the homeless problem impacts local residents, perhaps so that more support can be generated for addressing local factors that contribute to homelessness
- Single individuals are often associated with chronic homelessness; however, this can be a harmful overgeneralization of this group
- Families with children seem to experience unique stresses and challenges, but children may also be a strong source of motivation for parents to work hard to get stable housing
- Larger families and intergenerational families may face particular challenges in finding affordable housing large enough to accommodate their size

*Demographic Factor 1: Age or Developmental Stage*

A total of 11 interviewees mentioned age or developmental stage as a factor that could impact differing experiences of homelessness. Most frequently, they discussed youth/young adult and elderly individuals as populations that might have unique or particularly challenging experiences of homelessness. For younger homeless populations, participants discussed risk factors such as family dysfunction, involvement with child protective services and/or foster care, and abuse or neglect:

> *Not everyone who comes through the door at ORGANIZATION[1], but a lot of the ones that come through the door at ORGANIZATION, they're system kids. They've been in foster homes and group homes and they've failed at home and they've failed at school and they've kinda crashed and burned through the system and they end up down here after kinda everybody's sort of given up on 'em. And they're really the square pegs that don't fit in the round holes* (SP - Service Provider).

Similarly, the elderly were thought to be a population with unique challenges. Some service providers spoke of the difficulties related to ensuring that older adults who were "medically frail" were able to access the supportive services that they needed. This often required working with hospitals, insurance companies, and medical case managers. A few of these providers observed that they were seeing more elderly in homeless services in recent years. Service users also listed elderly individuals as a population they thought might be particularly vulnerable:

> *I'm thinking about the older women here, the elderly. Like, they make 'em wait so long just to get a stupid house...They don't- they gotta do these classes, and I feel they should find houses first. 'Cause they lived their life. They work most of their life. Now they wanna retire. They wanna enjoy having their grandchildren or children over their house, you know, have, all the family things they used to have before became homeless. They just don't provide that. Some of the women here, been over a year, never got housing yet. Now they offering 'em housing. Why offer 'em now? You know, I would rather see them in their place as soon as they can, instead of waiting longer and they getting more depressed and more agitated, not sleeping good, you know* (SU – Service User).

In summary, most participants seemed to see age as an important factor influencing one's experience of homelessness. On the whole, those on the extreme ends of the spectrum (youth and the elderly) were thought to be particularly vulnerable populations presenting with special challenges and unique experiences. However, a few participants did mention that these age groups may also be able to generate more public and family sympathy, which could enable some members of these populations to receive help and support that others have difficulty accessing.

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[1] Wherever text appears in all capital levels, this signifies a generic term inserted to mask the identity of specific individuals or organizations.

*Demographic Factor 2: Ethnic or Cultural Background*

Many interviewees (*n* = 12) made at least a passing comment about how one's ethnic or cultural background might influence their experience of homelessness. In this section, I am defining cultural groups broadly to include specific ethnic groups that were mentioned (e.g., Micronesians), but also mainlanders, who often come from quite different cultural backgrounds than most in the islands. When including "mainlander" in this way, the discussions of different ethnic groups in the homeless service system fell roughly into two major groups: Newcomers (including Mainlanders and "Micronesians") and (relative) non-newcomers (including Locals, Native Hawaiians, and other Pacific Islanders).

Participants discussed two main groups of newcomers to the islands and the homeless service system: "Micronesians" (and other COFA Nationals) and Mainlanders. The ways in which they discussed these two groups were markedly different, but both were understood to be non-local and to have different experiences compared to locals ("*homegrown residence, born and raised*").

A few participants discussed a pattern whereby individuals from the mainland come to Hawai'i for the imagined tropical island lifestyle and found themselves unprepared for the cost of living once they arrive:

> *A lot of it are folks who come through- and these are like samples of the ideations- but basically, "Going to Hawai'i will be really neat. I can stay on the beach and live in a grass shack or go surfing with the beach boys, hang out with some friends," whatever it is* [Interviewer: "I don't need a place to stay, it's fine"]. *Yeah, "I don't need a place to stay." And then they come through and they walk in ABC store and it's like "Holy Jesus, eight dollars for a gallon of milk!" And they go to Wal-Mart, and you're like "Oh My God six dollars! I'm gonna go upstairs to Sams Club, five forty nine!" You know, reality kinda settles in. And also you have folks that- that come here seeking ad- adventure a lot of the time* (SP).

However, one service provider also discussed concerns about the "*myth*" that most of Hawai'i's homeless population come to the Islands from the Mainland:

> *And, so part of that was 'cause we tried to make a concerted effort in registering* [homeless individuals not yet in the system], *but then it also helped us to, um, demystify the myth that it's all people coming from the mainland, yeah? So the majority that we saw, ah, have, um, 10 plus years, 20 plus years. You know, 67 percent, um, are Hawai'i residents. You know, so that's the majority. Ten percent are- were homeless, um, were Hawai'i residency for less than a year. So there is people coming, but at a smaller rate. And so the majority of people we're servicing is local residents, Hawai'i residents* (SP).

The other ethnic group that also seemed to be thought of as a newcomer was "Micronesians" or COFA Nationals. The Compact of Free Association (COFA) is an agreement the U.S. government has made with certain states in the region of Micronesia including The Confederated States of Micronesia, the Marshall Islands, and Palau. This agreement allows the U.S. military to maintain a presence in the area in exchange for the ability of residents of these nations to travel to and work in the U.S. without needing a visa (Talmy, 2010). Some portion of those coming is unprepared for the high cost of living and competitive housing market in Hawai'i and so become vulnerable to homelessness. Several service providers and one or two service users identified Micronesian individuals as a particularly vulnerable population. Language barriers and having different cultural and social norms, along with the potential for less social support if they are isolated from family back home, were all thought to contribute to their vulnerability. Others discussed the difficulties that Micronesian clients face in the housing market due to discrimination and stigma:

> *Um, well, the Micronesian families would be the next one that I would be- suggest, because, um, yeah, the stigma, um, the thought that more will come. I think I've heard that, so even though- [Interviewer: Oh, the landlords are thinking]. Yeah. 'Cause they said, you know, "I've- I did one before, and, you know, and they-." Just ruins it for the next, right? You have like, "I went to do a site visit and there were like 20 slippers and only 4 people supposed to be in there, and.." Um, so that stigma gets tied to them into the next families* (SP).

One service user did cite Micronesians as one of the more successful groups in getting housing and thought this might be so because they were eligible for more services. However, at least two service providers discussed their difficulty in providing services for COFA Nationals because members if this group are not considered U.S. citizens and are, therefore, not eligible for certain programs and benefits that other populations are able to access. Thus, Micronesians likely face more challenges and barriers to services and housing than do Mainlanders. Limited eligibility for services and benefits, cultural and language factors, and discrimination are perhaps greater challenges for this group compared to other groups.

Both Mainlanders and Micronesians tended to be considered "new" as opposed to "resident" or "local" homeless populations. To the extent homelessness in the public consciousness is associated with newcomers, it is likely that these groups will continue to absorb blame for the problem. When this happens, solutions tend to focus on addressing these smaller subgroups of individuals experiencing homelessness rather than acknowledging the complicated nature of the full problem. However, several service provider participants seemed to want to highlight the extent to which the homeless problem impacts local residents, perhaps so that more support can be generated for addressing local factors that contribute to homelessness:

> *Um, but we look at our data and say, "No." You know, they're not all coming here. I mean, it's- there's a percentage, we agree, but most of them are Hawai'i residents. And it's because we can't afford* [housing] (SP).

*Demographic Factor 3: Family Composition*

Most participants (*n* = 15) discussed family composition as a factor that could greatly impact experiences of homelessness. Many of the participants discussed a general divide between single person households and family households in terms of their experiences with services and their ability to exit homelessness quickly. Indeed, homeless services themselves, such as emergency shelter facilities, do tend to differentiate between singles and families, often having separate shelters for each group.

In general, it seemed that among participants, singles were thought to be more likely to be chronically homeless than other groups. The federal definition for chronic homelessness requires that one be continuously homeless for one year or more OR have four or more episodes of homelessness in the last three years AND have a disabling condition. Those who experience chronic homelessness tend to be the most visible population both in terms of their physical presence in the community and in terms of their high rates of service use. Thus, one challenge for single individuals may be a stigma attached to stereotypes of single people as more likely to be chronic homeless. This stereotype may result in less sympathy and perhaps fewer resources for single individuals, especially if they do not meet the criteria for chronic homelessness (which would qualify them for additional services).

Many participants reported that they thought families with children tended to have more success in getting housed than other household types. Participants listed two major reasons for this higher level of success: greater availability of services and greater motivation. Some participants discussed the fact that they thought families with children might receive higher priority for services than other groups. Additionally, most of the service users who discussed this, even those without children, endorsed the idea that households with children should receive highest priority for housing:

> *I'd rather the kids get in first with the family, you know. So they can make it. 'Cause it's the kids that's our future, you know? Like me, I can still hang out in the sun and, you know, whatever* (SU).

Indeed, several of the transitional shelters available in the state exclusively serve families with at least one minor child. The transitional model provides stable housing, often in the form of a stand-alone unit, for up to two years, during which time the family can work towards obtaining permanent housing. This is a service type that is less available to singles and couples without children. Therefore, there does seem to be some support for the idea that there are more services available to families with children than for other groups, potentially making them a more "successful" population in terms of housing.

While the family population may have some advantages in terms of services and motivation, they also have some unique challenges that single persons and those without children do not have to face. One extra financial strain that families with children often experience is the need to devote resources to childcare. Childcare was discussed with some frequency as a major stress for

parents. Parents often are limited in the employment opportunities they can accept because they have to plan around school days and available childcare. Additionally, single parents discussed the strain that even minor child illnesses can cause in that they often require the parent to miss work and forfeit their hourly income for that day.

Another challenge that may face some family populations is obtaining affordable housing large enough to accommodate the family. One participant described a "*two person per room preference*" on the part of landlords and the challenge this can present for larger families. Another participant described a lack of inventory in terms of larger apartments and houses. Large family sizes may include high numbers of children or may include extended and multigenerational family configurations. As a larger family size can often present additional challenges to finding housing, it can be difficult for multigenerational families to stay together when looking for housing:

> *Um, which is sad, because, you know, I mean, I grew up in a multigenerational home. So, yeah, and it helps with, um, childcare and there's support, you know, parents are working. So I understand, yeah, the multigenerational, um, but so it's hard to find larger homes in our community. So they- they tend to wait it out, you know, until, like, they can't wait it out anymore, 'cause they can't just bear living in the community - living in the shelter. But they tend to just keep waiting it out and, um- [Interviewer: Hope for something to come up?] hope- yeah* (SP).

In addition to the childcare and housing size challenges, parents also face the challenge of worrying about how their circumstances are impacting their children. Therefore, one of the biggest concerns with family homelessness is, of course, the effects of homelessness on the children:

> *It's like- it's hard on the parent, but think about it, how it's hard on the kids also. They don't have a s- they don't have this stable home, you know, to live. So it's like as a parent you're worrying about your child because already they- you're not stable. You know, well, some children will misbehave because of their foundation, it's broken. Their family is broken* (SU).

There are certainly different concerns and challenges for different constellations of households experiencing homelessness. Children seem to present unique stresses and challenges, but may also be a strong source of motivation for parents to work hard to get stable housing.

**Section 1b: Background Experiences**

Several of the participants discussed the importance of "background experiences" when talking about differing experiences of homelessness. These included past or current experiences with the criminal justice system ($n = 9$), military service ($n = 8$), level of formal education ($n = 5$), and various general economic factors ($n = 13$). Table 3 presents the initial interview coverage of these background experience subthemes.

Table 3. Initial Interview Coverage of Background Experience Subthemes**.**

| Theme | Subtheme | Initial Interview Coverage | | |
|---|---|---|---|---|
| | | # Service Providers | # Service Users | Total |
| Background Experiences | Criminal Justice Background | 6 | 3 | 9 |
| | Veteran Status | 7 | 1 | 8 |
| | Education | 3 | 2 | 5 |
| | Economic Factors | 7 | 6 | 13 |

Key Findings:

- Individuals who have a history with the criminal justice system often have difficulty finding employment and housing and were, therefore, considered one of the most vulnerable homeless populations
- Veterans are stereotypically associated with chronic homelessness, but many participants seemed to express hope that this was changing due to new policies targeting this group
- Some participants thought that not having a high school degree could present particular challenges to being able to earn enough income to afford stable housing; however, others were not sure higher levels of education (particularly college degrees) provided much opportunity or benefit in the context of Hawai'i
- Those who have mainly economic problems and few other complicating issues are thought to be more successful at leaving homelessness than most other groups
- However, because of the lack of affordable housing in Hawai'i, even those with mainly economic problems can still struggle to find housing

*Background Factor 1: Criminal Justice History*

When they were discussed in interviews ($n = 9$), individuals (both singles and those in families) who have a history with the criminal justice system were almost universally thought to be one of the most vulnerable homeless populations. When asked about who might have the hardest time leaving homelessness and getting housed, one service user replied:

*People with felon. A lot of felons, like.. they're- I don't know, it's so weird. Like, the system will tell you, "Oh yeah, you know, you can get a second chance!" And, you know, this and that. And they throw you in society and nobody hires you. And nobody- the government doesn't wanna house you* (SU).

Several service providers talked about a lack of supportive services for this population and their unique challenges related to obtaining employment and housing. They described how for some housing programs, having a criminal record is disqualifying. Even youth who have shoplifted or committed other petty crimes can have difficulty with obtaining employment and getting into desirable programs, such as JobCorps. Additionally, service providers and service users alike observed that landlords tend to be reluctant to rent to those with a record. For example, one single father described his experience of searching for housing:

> *Especially with a background, you know. That's… the only thing that kinda slowed my motivation down. You know, at times I was, like, kinda bummed out. You know, "I got this! I'm, like, so excited!" And then go into the interview and then they tell me, "Oh, you got a background?" "Yeah." "Okay, well we can't -we can't allow you here." You know, and I'm like,"Why?" You know, it's not like- I gotta ten year old son I'm raising and how can I be out doing crime and raising my son, you know?* (SU)

*Background Factor 2: Veteran Status*

Veterans were mentioned with moderate frequency (*n* = 8) in participant interviews. Some participants discussed veterans as a particularly vulnerable population in need of more services. For example:

> *I have one friend that, he has, um- he was in the service- with, um, PTSD, and he's dealing with other things, and.. You know, like, for him, it's like he has a hard time trusting the system. 'Cause the system doesn't- just did him wrong, you know. So- in a lot of ways, like, he was asking for assistance and they're like, "Oh, no, no, you are.. you're fine." You know? Like, that kind of stuff. Just because somebody might look fine, they might have issues on the inside, you know. Either here [indicating head] or whatevers, you know, so. And they- they need to deal with that. And it's like, the system just failed them. You know, and then other groups came to him and said, "Oh, yeah, we're gonna help you." And it didn't work out, you know. I do see the VA stepping up, and, like, they're doing really good now, and so. I really want him to be open-minded too, so, you know, to those type of things, you know?* (SU).

In the comment above, the participant indicated that perhaps veteran services are getting better and "*doing really good now*." Others echoed this sentiment and cited the recent state and national policy push to address veteran homelessness and the resulting greater availability of services and housing vouchers for this population. Therefore, some service providers discussed veterans as a population that is stereotypically associated with chronic homelessness, but many seemed to express hope that this was changing.

*Background Factor 3: Education*

Education as a factor influencing homeless experiences was only mentioned by a handful of participants (*n* = 5) in Stage 1. These participants described lower levels of formal education as major risk factor for more complicated experiences of homelessness. They reasoned that lower levels of education, especially not having a high school diploma, are often associated with a lower income-generating ability. However, during the Stage 3 follow-up, a few participants from a group interview seemed to disagree with the idea that education can improve employment opportunities in Hawai'i:

> *I just- I guess what I would say about this education thing is, um, maybe I'm jaded and maybe I don't understand the issue in enough detail, but I think that the job market in this state is so lopsided that I'm not even so sure education would even- factors into it. You know, you could have a Bachelor's degree and still be workin' at ... fast food or a hotel, working in the service industry with your Bachelor's degree* (Follow-up, SP).

This provider and others in the group interview argued that some fairly secure and high-paying jobs in the state do not require college degrees, and because of the limited employment options for those with a college degree, higher levels of education do not necessarily garner higher paying jobs in this context.

*Background Factor 4: Economic Factors*

Whenever participants discussed economic factors that could impact homeless experiences but were not linked to other factors (i.e., age, criminal history, disability, etc.), their comments were coded under the theme "economic factors" (*n* = 13). In fact, many of the subthemes mentioned in this section can be traced through their impact on income levels. For example, both age and criminal history are factors that can impact one's ability to get employment and generate income, which then impacts the likelihood of obtaining affordable housing. However, some of the participants highlighted instances in which clients seemed to experience mainly economic issues and often did not need a high level of other supportive services. These individuals and families were described as having simply run into "*some confluence of bad factors*" that led to their homelessness. As this group was seen mainly as just having fallen *"on hard times,"* a few of the service providers listed these individuals and families as the most likely to obtain housing and leave services quickly:

> *Um, so it's all those people who you would guess: people who have a lot of protective factors already in place and that their homelessness was circumstantial, and they were able to, um, address those circumstances in a relatively short period of time and get back on their feet* (SP).

In this way, having a reliable source of income or being able to quickly re-establish a reliable source can act as a protective factor and help shorten homeless stays. However, in order to provide this protective function, reliable sources of income need to be high enough to access housing. Some providers discussed concerns that those with few complicating problems and mainly economic issues could still struggle to leave homelessness. In some cases, households falling in this group may not be able to qualify for higher levels of case management services and/or the income-enhancing benefits that populations with more intensive needs can access. Indeed, one participant described the population at an emergency shelter for families as largely having at least one or more parent with a full-time job. Thus, having access to income via a regular job is certainly an asset, but is not always enough. If clients simply cannot reach the income level necessary to access housing, it is difficult to break out of homelessness:

> *Um, our section 8 waitlist is- I heard just last night- 8,000 people we have on the list [Interviewer: Just for this island?]. Yes. And they've, um- so- and the list is closed. They can't even apply. So you have a lot of lo- um, people who are low income waiting for a subsidy. And in the meantime, wherever they're at, they're doubling or tripling up. You know, if that doesn't work out, some family conflict happens, you know, it all like, "Oh we're gonna lose the house!" Or- um, so that seems to be the quick- the one's that's the easiest* [to house]: *those with a subsidy* (SP).

While those who simply "*fell on hard times*" were often listed as one of the more "successful" and low-needs populations, they still seem to face significant challenges in getting out of homelessness.

**Section 1c. Health Related Issues**

Three participant-generated themes fell within the overall category of health related issues. In this case, "health" was used holistically to include physical health as well as mental health. Participants discussed three main topics related to health issues and/or disabilities: physical health ($n = 11$), mental health ($n = 16$), and substance abuse ($n = 14$). Table 4 indicates the initial interview coverage breakdown for each of these subthemes.

Table 4. Initial Interview Coverage of Health Related Issues Subthemes.

| Theme | Subtheme | Initial Interview Coverage | | |
|---|---|---|---|---|
| | | # Service Providers | #Service Users | Total |
| Health Issues | Physical Health/Disabilities | 5 | 6 | 11 |
| | Mental Health | 9 | 7 | 16 |
| | Substance Abuse | 7 | 7 | 14 |
| | | | | |

Key Findings:

- Participants discussed health issues, physical disabilities, mental illness, and substance abuse issues as risk factors for more complicated or prolonged homeless experiences
- Health, mental health, and substance abuse conditions can also be significantly worsened by experiences of homelessness
- The stress and stigma of life in shelters or on the "streets" can increase rates of depressive and post-traumatic stress issues among those without pre-existing mental health illness
- Stable housing can greatly improve physical and mental health, as well as provide the consistency needed to address substance abuse issues

*Health Factor 1: Issues with Physical Health or Disability*

Several participants listed a disabling injury or other medical condition as a major contributing factor related to their homelessness or that resulted in the homelessness of someone they knew. Health issues and disabilities can have a direct impact on someone's income generating ability because they often interfere with the ability to work:

> *So a lot of people in the shelter too, they do have health issues to where it's hard to work. Like, that's very, very common. Because most likely if they're working, they're not gonna need to be there* (SU).

Shelter providers also discussed the high prevalence of medical needs in their shelters and the challenges this presents. One service provider explained the complicated ways that illness and disability can impact one's vulnerability to homelessness and how experiencing homelessness

can also have a negative impact on these health conditions. This amounts to a disastrous feedback loop:

> *There's definitely the medical aspect of it. So we know that a lot of our guys frequent the ER. And so their medical bills are shooting sky high for goin there. Um, part of being homeless is you don't really have a place where you can go check your mail regularly or you don't have access to it. So if you are late turning in, ah, an eligibility review or something to renew your insurance, your insurance drops. And then it takes three more months to get that person back, um, on, back on to some sort of medical insurance. But we have so many severely ill, physically ill, people out there that, you know, having that happen is not really an option for them because it's- it really does make the difference between going in to receive your diabetes treatment or going in to receive dialysis or going to see your specialist because you have extreme pain in whatever part of your body. Without any medical insurance, they cannot see 'em. It - for our clients here it's - you know, if they don't have medical insurance, they can't see a psychiatrist. They can't see a psychiatrist, they can't get their medication. They can't get their medication, bam! They're psychotic* (SP).

Being without a home, therefore, can make managing health (and mental health) problems more difficult. Additionally, some participants described how having a disability can also impact one's ability to access service sites and find adequate housing. These participants described the difficulties wheelchair users may encounter in shelter spaces that are not as comfortable or accessible for them. Other participants mentioned that disability units in transitional housing can take longer and that finding housing that can accommodate special needs can also be difficult. Overall, health issues were thought to both provide additional vulnerability to prolonged homelessness and greater challenges to housing access. Because health issues are often difficult to manage properly in unsheltered and emergency shelter conditions, homelessness can negatively impact one's health concerns and vulnerability in a vicious cycle of increasing chronicity.

*Health Factor 2: Mental Health*

As a factor that can impact experiences of homelessness, mental health issues are very similar to the health and disability issues discussed above. Mental health issues can result in vulnerability to prolonged homelessness, can present extra challenges, and can be negatively impacted by being homeless. In fact, those with severe mental health issues, along with those who have substance abuse issues (discussed below) and comorbid (both mental health and substance abuse) issues, were the populations that service providers and service users alike most frequently cited as being highly vulnerable to prolonged homelessness. According to one service provider, "*co-occurring severe and persistent mental illness with substance abuse*" is a strong predictor for chronic homelessness. Another service provider described those with severe and persistent mental illness as the "*most vulnerable subset of homeless individuals.*"

However, while those with severe mental health issues have come to represent one of the major stereotypes of homelessness, participant observations seemed to indicate that many of these individuals can and do successfully maintain housing with the appropriate supportive services. Additionally, these service providers discussed their observations that stable housing can, in fact, greatly improve even very severe mental health symptoms. According to one participant, housing "*shoots their recovery up like 500 percent*" (SP), and another participant observed:

> *You know because, um, we found firsthand that, you know, a unit can definitely improve someone's quality of life, you know, and exponentially. And … all these people really need is a chance and someone who kinda goes in there on a regular basis, to double check, help them out with small things that they probably- you don't really- you take for granted yourself because you've been doing them. But these guys haven't done that for a long time. You know, so, um, the gap population that I think- I'd like to see more services for behavioral health* (SP).

A handful of participants also discussed the impact that less severe forms of mental health issues can have on those experiencing homelessness. Some service users described struggling with issues such as depression and post-traumatic stress disorder (PTSD), and how this can make their efforts to obtain housing and leave homelessness more difficult. According to one service user there is a general need for mental health support among those experiencing homelessness:

> *Therapy. Um… a lot of resources for mental health because if you're on the street, you're gonna go crazy. No matter how many services are out there, you're on the street, you're gonna go nuts. [Interviewer: Sure. At the very least, have some kind of trauma, right?]. And if you define trauma in all the possible ways it could happen, that's what makes it harder for houseless people. If you don't have a house and what a luxury a house is. It is such a blessing* (SU).

Service providers also discussed their observations that "*PTSD and depression are probably pretty generalizable*" (SP) in various homeless populations, including single adults and youth.

In sum, it seems that adults with severe mental illness were consistently discussed as a vulnerable population in need of specialized supportive services. Despite the fact that this population can face significant challenges, several participants attested to their ability to be successful in housing with the right kind of support and to the fact that housing can significantly improve their wellbeing and mental state. Additionally, mental health concerns, such as depression and trauma, are thought to be widespread across homeless populations and can make efforts to leave homelessness more difficult. It would seem that daily exposure to the stress of experiencing homelessness can take an emotional toll on individuals regardless of whether they had experienced preexisting mental health issues or not.

*Health Factor 3: Substance Abuse*

Substance abuse issues were discussed in one form or another by most of the participants (*n* = 14). Addictions were mentioned as a factor contributing to homeless episodes, causing setbacks in one's trajectory out of homelessness, or as a risk factor for chronic homelessness. When asked who might have a harder time getting housed and leaving homelessness, participants often cited those with substance abuse issues as having a harder time:

> *[Interviewer: Any other groups that you feel like have a harder time leaving the system?] People with addiction. They might be the next one on the list. Sometimes- most of the time, 'cause it's a choice, you know. They choose to still use and continue use, so. Maybe… It's hard, 'cause, you know, I'm an addict myself. Been clean and sober for fifteen years. But I made that choice to clean up, you know. And it's like they need to make that choice. And only they can. That's another tough one* (SU).

Several service users discussed their own struggles with addictions and how maintaining their sobriety was an important part of their path out of homelessness. Several providers also talked about the difficulty that active addictions can present in terms of finding housing. It seems that many landlords are reluctant to lease to those they think might have substance abuse issues. It is important to note that at least one provider discussed how substance abuse issues, like health and mental health issues, are often made worse by the hardships involved in being homeless:

> *Almost like.. I wanna- I'm hesitant to say half the population, but it really feels like, um, the longer you are out there, there's a direct correlation between homelessness and substance use, you know? The longer you're out there, the more you kinda are- have access to it, either forced to do so or you just- meaning like they don't intend to be, you know, addicted to a substance, but, you know, to stay up, you may need to do that. You know, and then it just, life after a while becomes so overwhelming that you often just succumb. And that's not- this is what we heard from the clients. You know, like, never intended to be addicted to any of these things, you know, but things happen. Things get exacerbated and then next thing you know, you're in a unmanageable position and your just kinda grasping everything. And then you owe people money and it's just- it's- it's a difficult, like, problem to address, just solely focus on one thing* (SP).

This observation suggests that preventing prolonged homeless stays may also result in fewer chronic addiction issues in homeless populations. Additionally, at least two service providers indicated that they do not believe substance abuse issues are a strong risk factor for more prolonged experiences of homelessness. One service provider made the point that drugs and alcohol use is pretty common on the street and may indicate coping mechanisms or self-medicating and that perhaps because it is so common, substance abuse as a general indicator of potential homeless trajectories may not be as helpful as is often thought.

When this category was presented during the follow-up interviews, a few participants singled it out as a particularly salient risk factor. One participant, however, added the observation that populations who struggle with substance abuse are less sympathetic in the eyes of the public, perhaps adding extra stigma and vulnerability to those who have substance issues:

> *Substance use I think is, like, a pretty difficult- people aren't really sympathetic towards people who are, you know, going through that recovery. I think even medical providers are- and even government- they're not real keen on providing support to people who are consistently abusing, you know, drugs or whose lives are disrupted by it, right? There's not a lot of compassion. "Okay, well, um, if you just get off the drugs then you can get a meaningful job." Well … [Interviewer: Yeah.] Yeah! You know, that's the thought, but the experience and the support one needs to get that, we're talkin' about housing, we're talkin' about clinical support. Many times- not many times but in some cases very much like oh- um, you need a- a environmental stability, like, to address withdrawing off of some of these substances, especially if it's long term, you know?* (Follow-up, SP).

**Section 1d. Personal or Social Characteristics**

This theme describes aspects of people's lives that are a bit more abstract and difficult to measure or characterize concretely. The "important relationships and social support" theme has to do with the social aspects of one's life that may help or hinder a trajectory out of homeless; and "willingness" has to do with one's readiness (or not) to put in a substantial amount of time and effort to get out of homelessness. Table 5 illustrates the initial interview coverage of these personal/social characteristics subthemes.

Table 5. Initial Interview Coverage of Personal and Social Characteristics Subthemes.

| Theme | Subtheme | Initial Interview Coverage | | |
|---|---|---|---|---|
| | | # Service Providers | # Service Users | Total |
| Personal or Social Characteristics | Important Relationships/Social Support | 8 | 9 | 17 |
| | Willingness | 7 | 8 | 15 |
| | | | | |

Key Findings:

- Social support can be an important protective factor for those experiencing homelessness
- Sometimes that support comes from family members who are able to help and sometimes family relationships are more complicated or even harmful
- Other individuals experiencing homelessness, churches, and self-help groups can offer alternative avenues for social support
- Those who are willing to engage with services, persistent, and hardworking are often the ones who are able to obtain housing and leave homelessness
- Being willing to engage with services and work hard does not necessarily guarantee housing success

*Personal or Social Characteristic 1: Important Relationships and Social Support*

Whereas the family composition theme discussed above described issues related to the household unit experiencing homelessness, the "important relationships and social support" theme (*n* = 17) centered on the friends, family, and other important relationships that are outside of that unit, but that can impact its homeless trajectory either for better or for worse. When asked who tends to be successful in obtaining housing and leaving homelessness, one service user discussed the importance of supportive relationships as a key factor in determining who would be successful:

*Any kind of, um, a positive support. I think that that's really important. And, you know, without that.. it can be easier to give up in difficult situations* (SU).

Participants also described the impact of important others in more negative or ambivalent ways. For example, family was frequently discussed as having both helpful and unhelpful influences. Because of this ambiguity, it was difficult to divide these influences into protective and non-protective relationships, and so the influences of both social support generating relationships and more complicated or maladaptive relationships were coded into the same theme. The major types of important relationships described by participants included family relationships (including romantic partners), church and other non-family support, and relationships with other homeless individuals and groups.

The influence of family on experiences of homelessness seemed to be extremely case-dependent. Some service providers discussed the positive ways in which they have seen family be able to help a homeless household, whether by offering them a stable place to live, helping them recover from struggles with mental illness, or providing other instrumental support, such as childcare, temporary shelter, or financial assistance. However, often families are not able to help as much as they would like because of their own limited resources. One service provider described some of the ways in which accessing family support can be complicated:

> *Um, usually by the time they come to me they've burned all their bridges. Um, or they don't want their bridges, they don't want those people. Some have family and they're lovely and they have housing and they do help them. Um, but they can't live with them for whatever reason, the house is too small or their landlord won't let 'em have anybody else there. So maybe mom or dad is willing to be a support system. Um, but they can't have 'em live there. So that part's good. When we have people like that sometimes they'll watch the children so they can go to work, you know and stuff like that. Um, a lot of times, though, there is nobody. Ah, they don't have anybody in their life to help 'em. Or they're on the mainland somewhere. Or, um, they're on Chuuk, somewhere else. Um, or maybe the.. place- the people that they were raised with are part of the problem. And if they go back and hang with them that they're tempted to use drugs or…* (SP).

Other participants echoed some of these observations that many homeless individuals are unable or unwilling to access family help, that many families do help to the extent they are able, and that some individuals do not access family help because it may be unhealthy to do so. One service provider described challenging family dynamics as *"intergenerational maladaptivity."* Runaway youth and adults fleeing domestic violence were the most extreme examples of maladaptive family relationships that were discussed by participants. In these cases, family members or romantic partners are the sources of significant pain and trauma, which can both contribute to and complicate experience of homelessness:

> *And the reasons for running away: every now and then it's just I'm just a punk kid with a bad attitude, but usually it's things are pretty crappy at home and I'm running away because I think it's safer on the streets* (SP).

Perhaps because helpful family support is often not available, service user participants talked about the importance of other forms of support, including that of other homeless individuals. Several of these participants spoke about the comfort they found in getting support from others who understood the experience of homelessness and of the degree of trust and friendship that they have known either in shelters or on the "streets." According to one participant:

> *Yes, and can relate to you. You know, that's why I mean you- everybody sees it as, you know, a problem, a nuisance of the tents in Kakaʻako, all the tents. I mean, you know, yes, it looks a mess, I agree, just a hot mess out there. But they're in their own little community and they have to understand the emotional side of it. You know, the stress side of it, to where we all can relate to each other here on that level. You know, to have that community- 'cause it is a community* (SU).

A few of the service providers also discussed the sense of community and stability that can be found in some homeless encampments and how that can be protective. For example, one provider discussed the community-enforced standards in one encampment, which set expectations that children go to school and men try to find work because, "*they really want their focus on that area- you know, they know that they don't have, um, a traditional home. They know that they've been pushed to this and they're making it work*" (SP). However, it is also important to note that other participants did discuss the potential for negative experiences when interacting with other individuals experiencing homelessness, including inter-homeless robbery and assault. Others discussed wanting to keep to themselves at shelters as a way of self-protection. Therefore, while often supportive, relationships with other individuals experiencing homelessness can also be dangerous, maladaptive, or a complicated mix of risky and protective influences.

In addition to getting support from others who have experienced homelessness, service users discussed the support they sought in other types of community groups, such as churches or support groups:

> *Other people.. you know, in the same situation or- you know, just like for me, like, the only reason why I made it was because I had my church family, my AA family, my NA family, you know. I didn't want housing from them, but, you know, they blessed me with, you know, a hot meal here and there, or, you know, some clothes, and whatnot. But definitely a support group and if I ever needed to talk about it, you know. And then my homeless group, you know, I could just vent to them about being homeless and all of that. You know? And I think that's- I think that's awesome, you know. Like, we need more of that, you know, so people don't understand that they're not the only ones going through it, you know?* (SU).

In summary, social relationships seem to be a very important factor in the lives of many individuals experiencing homelessness. Social support can be a significant protective factor and maladaptive relationships can impede one's ability to get and maintain stable housing. Often our closest relationships are with family, but family relationships can be both supportive and

maladaptive (sometimes at the same time!). For many of the participants who had experienced homelessness, forming supportive relationships outside the family, often with other homeless individuals or church groups, seemed to provide important support. When this category was presented to participants during the follow-up interview stage, there seemed to be general agreement around the idea that important relationships can sometimes be protective and sometimes be maladaptive.

*Personal or Social Characteristic 2: Willingness*

The individual/family level factor that was mentioned most frequently was the theme of willingness. A high number of participants mentioned factors related to willingness ($n = 15$), but also many of those who spoke about willingness featured it prominently as a very important factor in determining success. For example:

> *Once in a while we'll have somebody go through the whole intake process and then walk away because they know they can't- they're not gonna be able to stay clean and sober or whatever, so they just walk away. But that's rare and most of the people that come here are willing to do what it takes and so, um, you know, they put up with the drug tests, they may put up with the classes and the meetings, and then once they start actively participating and engaging themselves, then they start to really make a difference in their own lives and it starts to work and you see it happening and its pretty exciting* (SP).

Both service providers and service users alike talked about the importance of being willing to accept services and work hard to do whatever is necessary to obtain housing. When asked if they thought homeless services were meeting people's needs in Hawai'i, several service users responded in a very similar way to the comment below:

> *Absolutely. As long as they're following program rules and doing what they're supposed to do by doing the footwork to, you know, better themselves, I think that, yes, it's a very exceptional program and that everybody's meeting their needs* (SU).

Other fairly common phrases related to the theme of willingness included: *"put in their own efforts," "follow-through," "motivation," "ready," "do everything that's asked of them," "committed," "all-in," "persistent," "push themselves," "strive,"* and *"strong-willed."* For example, when asked who was likely to be successful in exiting homelessness one service user replied:

> *I would say the most.. the person that's motivated the most, I mean, honestly, is the one that is gonna get the house first* (SU).

It was clear that many of the participants associated successful exit from homelessness with effort, hard work, and persistence and saw this as often requiring a willingness to accept services and their associated rules. On the other hand, other participants also linked willingness and motivation to one's level of hope for getting to a better situation. In this view, willingness and hope are intertwined and may depend on how successful efforts have been over the course of one's experiences. If repeated effort is fruitless "*people can get worn down*" and lose hope.

> *Interviewer: Who do you think tends to have harder time getting housed, leaving services, and why do you think they a have harder time?*
>
> *Participant: A harder time…I think it's a simply they don't want to deal with it. Um, giving up because their resources aren't there and the services aren't there. I mean people can get worn down of having to deal with the police or, um… There- there's a lot of people that off themselves. I mean suicide is a very, very real problem. Um, so yeah I mean people give up, people just let it all go [Interviewer: Losing the hope that it'll ever get better?] Very true* (SU).

The overall tone of the conversations emphasizing the importance of motivation and willingness was that of needing to fight to maintain prolonged effort in the face of difficulty. For some houseless individuals and parents, being willing to do whatever it takes to get housed may indeed be an important ingredient to their success. However, expecting everyone to maintain this level of prolonged effort in the face of repeated disappointment is perhaps unrealistic. For many in the islands, willingness may just plain and simply not be enough to successfully exit homelessness:

> *The hardest part is where are they gonna go? You know? It's just an ongoing problem we've had for a dozen years. You know, you can tell them. You can bring them in. You can motivate them. They can make the changes. They can become good tenants* [in the transitional program]. *They can pay their rent on time every month and take good care of their unit and be good neighbors and where are they gonna go?* (SP).

In sum, willingness and motivation seem to be important factors related to maintaining hope and persistence in the face of prolonged difficulty. Because of this, they are certainly protective factors. However, it is important to remember that willingness alone may not be enough to guarantee success.

## Section 2. Program and Organizational Factors

When discussing issues related to who might be successful in getting housed and what might help someone leave homelessness, many participants discussed how particular programs did help or were helping people get on their feet and succeed in permanent housing. On the other hand, a few service users also discussed some negative experiences they had with services. This section is an attempt to gather and discuss participant comments about how programs and organizations can influence the trajectories of homeless individuals and families. Participant comments about programs and organizations fell into three broad themes: comprehensive support ($n = 17$), trustworthiness ($n = 15$) and program requirements ($n = 13$). Table 6 illustrates the initial interview coverage for program and organizational level themes.

Table 6. Initial Interview Coverage for Program and Organizational Level Themes.

| Category | Theme | Initial Interview Coverage | | |
|---|---|---|---|---|
| | | # Service Providers | #Service Users | Total |
| Program or Organization Level Factors | Comprehensive Support | 9 | 8 | 17 |
| | Trustworthiness | 8 | 7 | 15 |
| | Requirements | 7 | 6 | 13 |
| | | | | |

Key Findings:

- Service users spoke favorably about services that provided comprehensive support and that seem trustworthy
- In general, it seemed that many of the participants thought it was better to be able to receive as many services and supports as possible at one site rather than having to get their needs met by a variety of programs and organizations
- Comprehensive support across the different stages of homeless services (outreach, shelter, post-shelter housing placement) was also thought to be helpful
- It is important for homeless organizations and service providers to build trust with clients, treat clients with dignity and respect, and reliably follow through with services
- The rules (e.g., sobriety, curfew) and requirements (e.g., classes, program fees) put in place by many homeless service programs were sometimes thought to be helpful and sometimes thought to present barriers to individuals being willing or able to access services

**Section 2a. Comprehensive support**

When talking about services they thought were particularly helpful or good, both service providers and services users often spoke very positively of programs that provided wide-ranging support of individuals and families:

> *I don't consider it a shelter. It's like a resource center, you know. Um, I, like, I found here, like, to be so rewarding. Like, I don't feel like I live in a shelter, like I said, a resource center. There's so many resources here* (SU).

The supports listed as helpful included mental health support, health care services, support for substance abuse issues, legal help, financial planning help, help with housing searches, housing vouchers, parenting classes, childcare, transportation help, computer availability, donated clothing, a community garden, and others. In general, it seemed that many of the participants thought that it was better to be able to receive as many services and supports as possible at one site rather than having to get their needs met by a variety of programs and organizations. For example, one service user suggested:

> *Um,.. because I- I do think if we have one organization that people could go to, maybe umbrella organization that have multiple organizations under it that, um, affected different cultural groups. And have those different cultural groups, um, have all the resources needed like job preparation, drug addiction, disabilities, families, singles. It would cost a lot of money, but it wouldn't be a competition for.. how do you say, fundraising… oh grants! That's the word I was looking for. So, if an organization has to go out there and say I need a grant because I wanna start this, it doesn't seem right the organizations that are being helpful, have to compete against another organization* (SU).

In addition to discussing the usefulness of having many different types of services, several service providers also discussed the need for comprehensive support during different stages of the service process. At the beginning stage of the service process, one provider discussed the need for more comprehensive coverage in terms of mental health, healthcare, and addictions focused personnel on outreach teams so that they can better target and serve a diverse array of unsheltered individuals. Once service users obtained shelter, some participants spoke about the need for comprehensive supports at these shelters to help prepare clients for later housing stability. Finally, at the tail end of service provision, several providers discussed a range of efforts geared towards helping clients find and maintain permanent housing. Several service provider participants discussed the importance of building relationships with landlords so as to have a pool of contacts for potential housing placements. Additionally, providers discussed how their programs continue to support clients who have been housed in order to facilitate long-term success and maintain good relationships with area landlords through addressing and preventing potential problems that might occur:

*'Cause on the back end we're working with property managers and, um, identifying, like, which ones have the bleeding hearts for veterans, which ones have the bleeding hearts for families. So we try to create our own black book on who to approach when we have a particular group of people, who would be willing to stretch a bit more for other populations, and who just won't and only wants this kind, um, type of families…So, yeah, we're just having a luncheon, an appreciation luncheon. So, you know, yeah, we wanna- we know not everybody wanna be veterans. But we know that there are, like, no matter what, you know, they would wanna try. So, we wanna tug at that. And then, you know, if they gain their experience, their relationship, with us, you know, then we try to slip in somebody else. We're like, "Oh, how about- ?" [Interviewer: Bait and switch?] Yeah! "How about this guy? He's not- he's not veteran. But look, he's, you know, he's 60!" You know? So, you know, it's all, like, relationship. You know, it's a gamble. You know, we'll still be involved* (SP).

At the follow-up interviews, one service provider found the feedback related to comprehensiveness to be particularly useful:

*I think for this one especially. That's good to know as affirmation 'cause one of the things we're trying to do is try to create a one-stop shop where- yeah. Especially on our island it's, like, you gotta go there for the benefits, you go there for employment, you know. It's all over the place and- yeah, and if you don't have transportation, it's challenging for them to access the services. Yeah* (Follow-up, SP).

**Section 2b. Trustworthiness**

The importance of the trustworthiness of services was another strong theme among participants ($n = 15$), especially service users. When discussing their good experiences and their appreciation for certain programs, service users often talked about the importance of being treated "*as a human being*" and of providers being "*understanding and respectful.*" These kinds of feelings of being respected and understood can generate trust in the program and its staff:

> *Yeah, um.. treating people as human beings. You know, that makes real good service. Instead of there's some places that treated me as a number. You know, and I didn't like that. And I'm like, "Brah, I'm not no cattle, you know. I mean, frick'n, screw you! I don't need that." But then when people came and talked to me and, like, treated me as a human being, despite whatever I was worth, you know, or what I looked like, or whatevers, you know, they treating me as a human being, you know. I thought that was awesome. So that made me feel comfortable, made me feel, you know, accepted. For being more open to suggestions or even to get help from their services, I think that helped out a lot* (SU).

On the other hand, several of the "bad experiences" that service users talked about had to do with their feeling that services were not trustworthy. Bad experiences often had to do with a feeling that service providers were not following through with the help that they had promised or that providers were acting dishonestly. It seems that providers who can generate trust among their clients do so by conveying respect and dependability, by following through with their efforts to help, and by listening to their clients' concerns on an individual level, rather than treating them "*like a number.*" One service user stressed importance of trust among those experiencing homelessness:

> *Interviewer:  Yeah, that makes sense. So if the system wants to prevent that, they have to be trustworthy from the start [Participant: Yeah]. Yeah.*
>
> *Participant: They do, you know. I think, we as homeless people, we might not have a lot, but what we do have is our word, you know? And our word is gold. Like, if I say I'm gonna do something, I'm gonna go do it. You know, if I say, "I'm cooking dinner tonight," and if I don't cook dinner tonight, you know how much people is gonna be mad at me? And then that's not gonna earn my trust. They're gonna distrust you and they'll be like, "No, get the hell outta here!" So and that's all we have is our word, so, you know, it'd be nice if the system kept to their word. And I know there's some red tape. Might be a lot of red tape, but at least to let the individual know. You know, "'Eh, I tried out, I went to this, and whatevers, and it didn't work out. But I'm still gonna work with you. And we're gonna try something else." You know? [Interviewer: Yeah, Being upfront about it]. Yeah, and not just like, "Oh you know, I didn't come see you for a month because" whatevers, some BS story. You know?* (SU).

These passages and others highlight the importance of being upfront and transparent about what a program can and cannot do so that clients do not end up confused or frustrated with misguided expectations and "*mixed communications.*" Trustworthiness was not just seen as a quality of individuals, but also of whole organizations and programs. For example, one participant talked about how a particular organization had built a reputation of trust over the years:

> *But, again, most of 'em are system youth, have pretty healthy distrust of adults, and it takes a while to kinda build that trust and rapport and- I mean we've been going since 19XX, which, CENTER has really good word of mouth out on the streets. But even so, "I don't really know who are you? And what's this about?" And so it's a challenge. Ah, but even- you know, so once we've sorta built some trust and relationship and you know, "Hey, this is what we're about and we're not gonna turn you in for being a runaway…"* (SP).

Thus, organizations, programs, and shelters that have built a reputation of trust, that cultivate a trusting and understanding demeanor among their staff, and that ensure feelings of trust and safety in their facilities, can have a tremendous impact on the lives of individuals and families. However, when a program or its staff breaks or fails to build that trust, there can be negative consequences for the service users involved. Broken trust can result in less willingness to access other services, which can prolong or complicate the housing trajectories of those individuals.

During the Stage 3 follow up interviews, while not necessarily disagreeing with the sentiment that it is important to create an atmosphere of trustworthiness, some providers discussed issues or limitations that might prevent programs from seeming as trustworthy as they might like (e.g., sudden loss of funding). Other providers and service users discussed the fact that they saw the service provider/service user relationship as something requiring mutual communication and respect. In other words, a few participants seemed to push back against the idea of placing the responsibility for client success too much in the hands of the programs rather than in the hands of the clients themselves. The following passage provides an example of how a participant might agree with the general principle of trustworthiness, but then also argue for client responsibility:

> *Interviewer: People you know just kinda have a bad experience and don't wanna deal with the organizations?*
>
> *Participant: Unfortunately, people look at others with judgment before getting to know the person, ya know? And they judge by what they see and not know what's on the inside. So yeah that I see that happening a lot with the different ethnic backgrounds and single people, you know, with mental health problems, with disabilities, ya know? …But then I also see- you know, yeah, they are, and then, you know, you got the ones that whine and cry and "poor me," ya know? And it's hard to help someone that's so into self, ya know? And that's the willingness part, ya know? That's, like, you gotta be willing to take yourself out of self* (Follow-up, SU).

The overall takeaway from these and similar comments seems to be not that the principle of trustworthiness is unimportant, but that factors at higher (systems) and lower (individual) levels are also important to consider when evaluating the perceived trustworthiness of any one agency. That is, systems issues such as funding and failures in collaboration can negatively impact a client's impression of a program's trustworthiness, as can individual temperaments and levels of "willingness" among the clients.

**Section 2c. Requirements**

While "trustworthiness" and "comprehensive support" were both qualities that were almost universally seen as positive aspects of programs and organizations, participants sometimes seemed to view program rules/requirements as helpful and positive, and at other times they discussed the difficulties or barriers that these rules and requirements could present. Some of the program rules and requirements that were discussed included: verification of homelessness (a letter verifying the client does not have a place to stay, often from outreach worker), TB clearance, VI-SPDAT (assessment tool) score, program fees, sobriety (sometimes verified by drug testing), curfews, and required classes or activities.

Generally, program rules were understood as an attempt to ensure that a facility provided a safe environment for all clients, which was often seen as helpful. For example, one service user discussed the difficulty of being a recovering addict in a shelter that was "wet" (i.e., did not require sobriety). However, a few participants did mention that some individuals might then be excluded from using important services because they are unwilling or unable to follow the rules:

> *Yeah, I have a lot of friends that are still homeless…So a lot of it I see when I say the willingness is the willingness to want to change, you know, to humble themselves and to follow the rules, you know, of having a curfew or, whatever, you have to be clean and sober, you know, gotta..* (SU).

Therefore, rules that are too strict or prohibitive can restrict the range of individuals who are able to receive effective help (i.e., those without addictions, those who are able to tolerate a certain amount of loss of autonomy and control, etc.). Additionally, one participant discussed the tension between creating a safe environment and allowing clients to be "*humans*" without feeling that they are overprotected or "*gated*:"

> *A lot of good things have happened since this new, um, woman has taken over. Um, you're not as gated in as before. You know, before you were only- couldn't get out till 5 in the morning and you had to be in by 12 at night. For the last maybe three months, they've changed that to where you can come and go at any time in the day or night. Because, you know, we're humans, and, you know, it's like a nest. You know, here you- you get out. You learn how to crawl and you learn how to fly, you know. And, you know, sometimes if people are so protected, protected, protected, they tend not to know what to do when you get out there. So, you know, you can come and go, 24 hours a day. If you have a night job, you can, you know, work or whatever* (SU).

In addition to the need to follow a certain set of rules, some programs, especially those following a transitional shelter model, also had requirements that participants were expected to meet to remain in the program. The two requirements most often discussed were program fees (a specified monthly amount akin to rent, but sometimes put aside as savings) and classes. When

service providers discussed program fees they tended to view them as a tool to help clients practice paying rent, generating savings, or better managing their finances. Additionally, one service user pointed to the fact that the program fees in transitional housing helped to establish a rental history and gave a sense of "*structure*" and "*independence*." However, at least one service user spoke extensively about the burden that program fees placed on clients and how it felt like a barrier rather than a tool for success. This same participant spoke warmly about an experience with a program that had few rules and requirements and how that program felt more supportive and inviting. It would seem that participants did not completely agree on the usefulness of program fees.

Another common requirement that participants mentioned was "classes." Required classes and activities could include group therapy, parenting, money management, and life skills classes, among others. For the most part, service users tended to speak favorably about the classes they were required to attend. However, one participant did acknowledge that at first the classes were "*a waste of time*." After a while, though, it seemed that the classes did prove helpful:

> *I was fighting a battle in myself and I was losing every day until I realized that it was me and it was all the classes that I went to, you know, to where now I can sit in there and I can just laugh in the class. You know, and not sit there and feel like, "Oh, my god, they're talking about me! Who the hell talk-!" You know, "Who was talking shit about me?" [Interviewer: Feel shame when- yeah]. Yeah! Because it's like, "Oh, my god, he's just talking straight to me because that's exactly how I behaved." You know, but secret- you know, in my mind and my thoughts* (SU).

Thus, it seems that classes and other program rules and requirements were often helpful on an individual level, but could present barriers to certain groups of individuals.

The reactions that follow-up participants had to the "requirements" category were very much in line with the ambivalence towards requirements that came through during the original interviews. Some participants reacted by reaffirming the usefulness of requirements and others questioned their usefulness. One service user expressed a desire that requirements could be more individually tailored so that attending classes could be optional depending on one's life experiences and needs: "*I mean, it's kinda like I wish I could just gain the shelter and not have to deal with the services but it doesn't work that way*" (Follow up, SU).

## Section 3. System Level Factors

Just as individual programs can have an important impact on the individuals and families that they serve, so too can the homeless service system as a whole. Therefore, it is important to consider the system level factors that may impact organizations, programs, individuals, and families. Major themes related to system level factors included: bureaucracy ($n = 8$), funding ($n = 10$), collaboration ($n = 6$), systemic approaches to homelessness ($n = 16$), and the functioning of other related systems (e.g., health care or law enforcement) ($n = 13$). Table 7 shows the initial interview coverage for the system level themes. A few of the themes within this category were more prevalent in the service provider interviews (e.g., collaboration, funding, and related systems) than in service user interviews. This seems natural, as service providers are often required in the course of their work to think about the homeless service system as a whole, while service users may be more likely to experience pieces of the system without seeing its inner workings. The one theme that was more discussed by service users than service providers was "bureaucracy."

Table 7. Initial Interview Coverage of System Level Factors.

| Category | Theme | Initial Interview Coverage | | |
|---|---|---|---|---|
| | | # Service Providers | # Service Users | Total |
| System Level Factors | Bureaucracy | 3 | 5 | 8 |
| | Funding | 6 | 4 | 10 |
| | Collaboration | 6 | 0 | 6 |
| | Approaches to Homelessness | 8 | 7 | 15 |
| | Related Systems | 9 | 4 | 13 |
| | | | | |

Key Findings:

- Bureaucracy in the homeless service system, including complicated program requirements and eligibility rules, can present a real barrier to service users
- Several participants thought that improved funding for homeless services would make them more effective and would greatly improve the experiences of service users
- Better collaboration among agencies in the homeless service system was thought to be useful in preventing service users from falling through the cracks, facilitating more comprehensive service provision, and making services more efficient
- Different large-scale approaches to homelessness, such as street sweeps, the continuum of care approach, or the Housing First approach, are likely to differentially affect various subpopulations, creating systems-level influences on their trajectories (e.g., focusing on ending veteran homelessness will help veterans)
- The effective functioning (or not) of various other systems (e.g., mental health, health care, welfare, etc.) can greatly impact the journeys of homeless service users

**Section 3a. Bureaucracy**

Many of the service users (*n* = 5) and a few of the service providers (*n* = 3) mentioned one or more issues related to the confusing bureaucracy that seems to infuse the homeless service system (and other related systems). Bureaucracy is probably the side of the system that is most visible to homeless service users. The "bureaucratic" factors participants discussed included confusing eligibility requirements, large amounts of paperwork, waiting periods, the mysteriousness of what is available to them and how to access it, and the seeming arbitrariness of being denied services or benefits. For example:

> *I think the system is broken, so. There- there's too much rules and.. and they don't want everybody.. I guess, not- each program is, like, different. So like, I know- I know certain programs won't take AMHD* [Adult Mental Health Division], *you know, the mental health people. And some certain programs won't take, um, felonies. Or certain programs won't take this or whatevers. And then that's- that's the weird part* (SU).

While several participants stressed that with persistence and willingness one can learn to be better at navigating the system and accessing what is needed, it is likely that demystifying and simplifying the process of getting services would make those services more accessible to some of the more vulnerable populations. In the words of one participant: *"Cause bureaucracy sucks. It does, sucks so hard"* (SU)*.* For example, one service user with a high level of formal education and fairly good system navigation skills recommended:

> *I'd be nice just to have one, like, big sheet of just all your options. Just one big log. You know, like, standard thing to where, like, everything is just in your face. Of course, that's so hard to just, you know, have to figure out this, figure out that. Because even case managers don't really know everything* (SU).

Indeed, one of the service providers confirmed this suspicion that even providers struggle to navigate the bureaucracy of the system:

> *As housing navigators and case managers and outreach workers, we have a hard time navigating through the system and we're engorged in it, like, we are there. And we have a rough time, um, trying to figure out how to help our guys get housed and I can just imagine somebody who doesn't have that information going through the system. It- it's frustrating. You know, your go- number one goal of getting housed is, forget it, I just wanna learn how to read, forget it! You know?* (SP).

**Section 3b. Funding**

Another systems level factor that was mentioned by both service providers ($n$ =6) and services users ($n$ = 4) was the availability of funding for homeless services. When asked what they would do to make homeless services in Hawai'i better, several participants replied that they would increase funding and resources:

> *Easy.. Easy would be… more financial for these programs, you know. It's- there's not a lot and a lot of it got taken away. And.. I think they need more services, you know? So.. like, the welfare, problem, like, I remember before when they had all the workers, like, there wasn't all these people out there. You know, there wasn't all these people in the line. And it's crazy. So stuff like that. And they need more workers. They need more people to help out with that* (SU).

The service user above linked funding directly to the ability of agencies to hire enough "workers." According to several participants, therefore, there is a need for both more services and resources and for higher staffing levels for the services that are available. Thus, even programs with caring and dedicated staff can be understaffed and overworked, significantly impacting the experiences of those they serve:

> *Yep, so, right now I think there's only about 45 outreach workers that do homeless services, not just specifically outreach. I believe it's about 45. But you're talking about a population of 7,000 people. Families, singles, you name it. They have it. 45 people working with 7,000 people, you kinda split it up. I don't know what the numbers are but it's just a ridiculous number. You know, we can't- You know, so we can't reach everybody. And we can't- you know, we're very limited on that and we- if we had more agencies that focus in on homelessness or homeless outreach and case management, in house case management, or, just that aspect of that interim case management until you can get into that primary case management role. I think that would really improve, you know, the quality of life for a lot of guys* (SP).

While some participants discussed a general need for more funding "*across the board,*" others discussed how funding cuts in particular areas could affect certain populations. For example, one service provider mentioned cuts to funding for mental health and substance abuse treatment beds affecting the availability of housing options for those populations. In sum, many participants pointed to improving the levels of funding for homeless services and the more judicious allocation of those funds as ways to improve the availability and quality of homeless services in the state.

**Section 3c. Collaboration**

Collaboration among agencies in the homeless service system was a strong theme with service providers (*n* = 6). Collaboration was often thought to be useful in that it could prevent service users from falling through the cracks, could facilitate more comprehensive service provision, and could make services more efficient. Therefore, several providers spoke about a need for better coordination among entities in the homeless service system and some spoke of their frustration with the current level of coordination:

> *Um.. I think... there are so many things. The population is so transient and it feels that there are different sections in the government, whether it be through city and state, operating at different, um, initiatives and, um.. and goals, you know? And while we all say we're moving in the right direction, we're often not in the same, like, running parallel with each other, you know? It's - feels like- and sometimes people in organizations and branches kind of go left to accomplish a goal, when everyone is going right. Um.. and it can be counterproductive and frustrating* (SP).

In addition to this need to coordinate services so that all agencies are working towards a common goal, other service providers spoke about coordination among providers as an important tool in using funds efficiently. Given that lack of funding will likely continue to be an issue for homeless services, one participant highlighted the fact that better coordination among services could help ensure that providers are able to do more with less:

> *I believe there are tons of resources that we're not aware of.. So I think it's the whole awareness of letting the people of Maui know and then letting the different agencies know about each other and how is it that we can all come together and know what... we all serve, we all offer, we all have to offer. And instead of within our agency trying to duplicate something that is already available, learning to tap in and utilizing those services rather than trying to find a grant to bring it within our agency, when there is already an agency or service out there that provides it. So learning more about each other, being aware that.. a need of- for a certain situation is out there, somebody offers it. So just collaborating with everybody and knowing what we all do, so that we can all tap in the service together and make it a stronger team instead of ORAGANIZATION trying to implement all these bunch of services and classes and finding grants and funding to serve something for our clients when there's already something available* (SP).

When the collaboration theme was presented to participants during the follow-up interviews, the following aspects were highlighted: 1) collaboration among service providers was generally thought to have positive impacts on clients; 2) many thought more collaboration was needed, but 3) several participants also discussed improvements in this area in recent years.

**Section 3d. Approaches to Homelessness**

In addition to talking about the need for better coordination among homeless services, both providers (*n* = 8) and service users (*n* = 7) alike discussed overarching strategies that they thought would be helpful for guiding the system in terms of how to address homelessness in the state. However, there was not widespread agreement about what the overall guiding approach to homelessness should be. This is in part a reflection of the fact that the participants had experience in a wide range of service types and homeless populations. Thus, a provider serving youth might advocate for an approach that is sensitive to the needs of that population, and a provider serving families might advocate for approaches to homelessness that benefit families, etc. However, the differing, and sometimes even opposing ideas among the study participants about how to best direct the system to address homelessness might also be a reflection of the various philosophies and "initiatives" competing for prominence in wider discussions about homelessness in Hawai'i and across the U.S.

Participants mentioned several approaches to homelessness in the state, including a plan to create a temporary shelter space on Sand Island, the Mayor's "compassionate disruption" program to clear out several large homeless encampments in Honolulu, and the Housing First philosophy versus the Continuum of Care model, among others. It is beyond the scope of this study to explore participant views regarding each of these various approaches. It is important to note, however, that participants often disagreed about how effective each approach would be. These varied and opposing views on how to address homelessness can make it more difficult to coordinate a system-wide plan.

Additionally, these discussions about different approaches to homelessness are important in that any one particular approach may favor some subpopulations of homeless households over others. For example, the recent pushes to end veteran and chronic homelessness are attempting to harness more resources and support for these particularly vulnerable homeless populations, but at least one service provider had concerns that this might take resources away from attempts to help other populations, such as families experiencing homelessness:

> *Um, so, certainly because there's a lot of pressure I think on what people- what the public sees visibly is the chronically homeless. Um, but- and also because of the resources and times- time that it takes, the chronically homeless, away from, um, or the emergency services away from, you know, real crises. So, I mean, I see, um, the rationale in that, but I think it's the families right- right now being left behind, um, and the- and the local residents* (SP).

This comment reveals the tension and tradeoffs that occur among the different plans and initiatives. It also highlights the fact that whatever approaches the system favors at any given point are likely to differentially affect various subpopulations, creating systems-level influences on their trajectories. Thus, how any one particular group may tend to fare is often not a stagnant feature of the group itself, but can change across time depending on system policies and politics.

**Section 3e. Related Systems**

The homeless service system does not operate in a vacuum and often intersects, as do its service users, with other large service systems in the state. Participants discussed how these various related systems can impact the journeys of homeless service users. The related systems discussed included the public housing system, the Veteran's Affairs system, the police and fire departments, the Hawai'i State Department of Health, the Medicaid system, the mental health system, public safety and the judiciary, the criminal justice system, child protective services, public records, the foster care system, and the education system (in the case of youth). While there were a few examples of related systems providing extra help or support when needed, when speaking about related systems, participants more often discussed how failures in these systems have negatively impacted homeless service users. Therefore, a few participants discussed the need to create better routes of coordination with these systems:

> *I also think, which you've.. undoubtedly.. come to the conclusion of it as well, is that having more boundary spanning particularly of information across the universes of public safety, and, um, healthcare, and housing, would be very important. Because what I really think is happening is I think that there is a lot of, um.. a lot of economic externalization from other systems that occurs and the product of which becomes homeless service utilization or homelessness. And they were the byproducts of that as homeless service utilization, particularly with substance abuse treatment and, you know, mental health and so on and so forth* (SP).

While mentioning the need for better "*boundary spanning*" across service systems, this participant also seems to view failures in these related systems, especially substance abuse treatment and mental health, as contributing to homelessness. That is, if related systems functioned better, then homelessness may be less of a problem. During the follow-up interviews one participant discussed a particularly "*glaring*" example of related systems failure and highlighted the devastating affect it can have on the trajectory of individuals and families struggling with homelessness:

> *… the welfare staff is underfunded and overworked. And they will drop the ball with the client and they'll not pay them that month - their money - and then they'll blame the client that, "Well you didn't turn your paperwork in," when it's probably buried. You know it's there 'cause we have proof that it got turned in and so then somebody is out their $416 or whatever it is that month and now they can't pay their rent or get their food or anything. And now they have to reapply and go through the whole process. So it's a system failure that is really glaring and happening a lot to us. In fact, so much so, that we're actually gonna go talk to them, see if we can get an appointment with the head of- the person in charge of welfare and just say, "You have a problem going down the line." So that's a system failure because it isn't just one worker. We're hearing this from- this gets- this happens to several of our clients over a course of years. It's been going on. And it's like this keeps happening, there's something wrong here.* (Follow-up, SP).

## Section 4. Community and Society Level Factors

Even as the homeless service system is set within a network of interrelated systems, this network of systems is situated within the wider community and impacted by larger social forces operating at that level. To ignore these community and society level factors is to miss a big part of the story of homelessness in Hawai'i.

Throughout the participant interviews, the most discussed challenge related to homelessness ($n = 17$) was the lack of affordable housing in the islands. This is very much a community-wide problem and affects not only those who have experienced homelessness, but large chunks of the population who struggle with high rent-to-income ratios. Affordable housing is one example of a community level factor that has important repercussions for individuals and families across the state. Highlighting community and society level factors helps to draw attention to the root causes and underlying factors that maintain homelessness, suggests higher-level interventions, and keeps us from locating the problem solely within the individuals themselves. Table 8 shows the initial interview coverage for the community and society level themes.

Table 8. Initial Interview Coverage for Community and Society Level Themes

| Category | Theme | Initial Interview Coverage | | |
|---|---|---|---|---|
| | | # Service Providers | # Service Users | Total |
| Community and Society Level Factors | Affordable Housing | 8 | 9 | 17 |
| | Community Willingness to Help | 8 | 8 | 16 |
| | Public Policy | 7 | 4 | 11 |
| | Symptoms of a Larger Problem | 5 | 2 | 7 |
| | | | | |

Key Findings:

- Lack of affordable housing is a big problem in the state, causing a bottleneck in the number of homeless service users who can exit services into permanent housing
- Stigma and negative public perception can be harmful to the wellbeing of those experiencing homelessness
- Negative public perception and placing blame or fault with houseless individuals can also interfere with the willingness of community members to help address the problem
- The problem of homelessness in Hawai'i is so large and deep-rooted that the community as a whole must be willing to come together to address the issue
- State and Federal policy can greatly impact homeless experiences
- Homelessness may be a symptom of larger problems that must be recognized and considered in order to solve the problem

**Section 4a. Affordable Housing**

Of all the issues that impact homelessness in the state, lack of affordable housing was the most cited obstacle (*n* = 17). It was discussed extensively as one of the defining major issues related to homelessness in the islands. Several service providers discussed lack of affordable housing as a real barrier to placing clients in permanent housing. For example, some service users in the state are lucky enough to get a housing voucher, which provides government subsidies for rent. However, many providers discussed the problems they face even in placing clients who have these housing vouchers. Thus, clients who have done everything they needed to do to complete the service programs and have received housing assistance may still struggle to get housing:

> *That said, I don't- I agree with everybody that says we- the problem now is that we don't have enough affordable housing. So, we've got a process in place. We've got some subsidies in place. We're just- we just need housing. So if the housing market is considered part of the continuum of services for homeless people, then the housing market end of it sucks* (SP).

When the housing market is such that there is an overall lack of affordable units, there is naturally intense competition for whatever units are available, tipping the power balance strongly in favor of landlords. This kind of power imbalance between landlords and potential tenants can disadvantage some groups, particularly those with criminal records, substance abuse or mental health issues, or those with large families. It can also breed a subtle kind of systemic racism, where individual landlords may not consciously or overtly discriminate against certain groups, but nonetheless these groups experience the negative effects of discriminatory housing markets:

> *What I mean by that is- is that.. for a landlord in Wahiawa, if that person has an option of.. renting to say a local Asian family: mom, dad, one kid.. and.. their income is moderate.. or a Marshallese family, let's just give an example. Let's say that they have- it's mom and three kids. And mom's got a pretty good job. Or an Air Force first lieutenant with his wife. Probability is that the Air Force first lieutenant is gonna win. Because it's guaranteed income. If somebody by chance doesn't pay then you go straight to command. And so that, you know, there is a kind of pressure. Or you can have a group of students versus a family, which are you gonna take? Well, you know, if the students got.. you know, if they say, "Well, you know, you guys' incomes are a little bit low." It's like, "Oh! Here's my grandpa!" "Yep, I'll cosign anything." You know, of course it's gonna be- there's that kind of pressure that's established. So I'm sure that outright discrimination exists. But I think in addition to outright discrimination the other thing that is the appeal of the particular tenant to the landlord* (SP).

Thus, while the lack of affordable housing may impact many in the islands, it does seem to disproportionately affect some groups more than others, especially if one's ethnic background serves as a subtle indicator of class or is taken to communicate one's likelihood of being a "good tenant." As such, it is an important issue with which the community as a whole must wrestle in its attempts to address homelessness. Many of the study participants conveyed the idea that homelessness cannot be adequately addressed until the issue of affordable housing was taken seriously as an avenue for intervention.

**Section 4b. Community Willingness to Help**

Community willingness to help was another community level issue that participants (*n* = 16) discussed at length. These discussions were two-pronged and included: 1) the harmfulness of negative public attitudes towards those experiencing homelessness and 2) the need for more public engagement around addressing the issue. Several service users emphasized the fact that the community needs to recognize that homeless individuals are human beings:

> *'Cause we're all humans, you know what I mean? We all bleed the same color. And, you know, it's just, you gotta help out your fellow neighbor even if they're in a tent* (SU).

At the end of each interview I asked participants if there was anything else they wanted me to know or if there was anything else I should be asking in the interviews. At this point, a few of the service users seemed to want to leave me with the final message that homelessness is not the stereotypes that are bouncing around in society. That these were the final ideas they wanted to convey in the interview left me with the impression that the issue of negative stereotypes towards the homeless was particularly salient to them. It seemed like they wanted to use the "official" medium of the research project to counteract those stereotypes:

> *Interviewer: And is there anything else you'd like me to know?*
>
> *Participant: You know, coming into this homeless program, you know, I wasn't, like, portrayed as like a homeless, homeless. I mean, I was homeless, but my son was going to school. I'm a fulltime student also…*
>
> *Interviewer: Well, and it sounds like you kinda want.. me, but maybe also the general public, to know that.. that - that not everyone is the stereotypic [Participant: Yeah, yeah. Exactly, exactly] homeless, right? Yeah.*
>
> *Participant: It's - it's all type- I mean, I've seen people in there that have two jobs and still be homeless. You know it's hard. The rent is just so high and owning a house is just crazy, mortgage and whatnot. It's quite expensive to live in Hawai'i, I mean, you know?* (SU).

The negative stereotypes that pervade community opinions about the issue have a number of important consequences. The passages above indicate the harmful dehumanizing quality that many of these stereotypes can have and the insistence on the part of service users that they be seen as "*individuals*" and as "*humans.*" Certainly the repeated exposure to dehumanizing messages can wear upon the spirits of individuals and families experiencing homelessness. An additional consequence of these negative stereotypes is their impact on community willingness to engage in solutions to the problem of homelessness. Several participants discussed the importance of the community as a whole coming together to address the issue:

> *Um, and it also seems like the solutions for how to remedy all the huge groups of homeless in Hawai'i should be fairly obvious. Um... but I don't think everybody is paying attention. I think something's only obvious when every member of the com- the village is really paying attention or really taking an interest. I guess there's a difference between paying attention and taking an interest. ..Um, but I think what makes it hard for people to go from being homeless to- to not homeless is that I don't know that.. that's a shared value in our culture, in our society. So, that's kind of the- the soil that we have to like try to germinate this little seed of like how do we solve this problem? Um.. so, the first answer to that question is.. um.. there doesn't seem to a collective.. will to really solve this problem. And that's so depressing* (SP).

Thus, many of the participants seemed to want to situate the problem of homelessness as a problem for the whole "*village*" to address. They also questioned whether there was a public will to do so, perhaps in part because of the negative stereotypes and misperceptions that exist about homelessness.

In the follow-up interviews, several participants confirmed and agreed with the above assessment about the harmfulness of negative stereotypes of homelessness, the need for the community to be willing to help, and the public will be required to address the problem. Additionally, some participants discussed further examples of interactions they have had with friends, family, and landlords who make negative assumptions about homeless individuals. Notably, some participants also discussed some examples of churches and other groups in the community who have made efforts to help with the issue of homelessness by offering instrumental support, such as food, and by aiding in the process of placing homeless individuals in stable housing. It seems that while there is room for improvement in terms of community willingness to help with the issue, it is also important to acknowledge times when community members do engage in the helping process.

**Section 4c. Public Policy**

One community/society level way of addressing homelessness is through public policies that might impact the issue. Because public policy was not an explicit focus of the study, participant comments about public policy did not cover the range of policies which have attempted to address the issue. Rather, comments selectively highlighted the individual policies or general policy approaches which were viewed as particularly impacting the trajectories of homeless individuals and families. Because of the salience of the issue in Honolulu in recent months, perhaps the most discussed public policy was the sit-lie ban legislation and the related "street sweeps." Together these policies were intended to decrease visible homelessness in Honolulu and to encourage those who were sheltering in public spaces to seek emergency shelter services.

While many of the participants discussed how they have seen these policies impacting their clients, there was not complete agreement over whether they were helpful in addressing the issue or not. Several providers and service users discussed the negative impacts of the street sweeps on those who lost property and identification documents, were issued fines they have no hope of paying, or were displaced to more remote locations. Others discussed the ways in which they observed these policies changing the dynamics of the homeless communities with which they worked. However, there was not universal agreement about whether these impacts had positive or negative results. Some passionately defended the practices as an important tool in helping individuals and families obtain more stable shelter. Thus, these and other policy strategies related to homelessness are often contentious. Even so, there seemed to be universal acknowledgement that they can have significant impacts (either for better or for worse) on homeless experiences in the state.

When the qualitative themes were presented to the participants at follow-up, other types of public policy that could be added to the list of those that impact homelessness were discussed. Included among these were policies towards development in the state, which could potentially influence whether or not affordable housing was included as a development priority:

> *This card* [Public Policy] *is making me think of two things. Um, HCDA specific to Honolulu [Interviewer: What- do I know what it is?]. Hawai'i Community Development Association. That is the board- the body of individuals that is tasked by the State of Hawai'i to monitor, regulate, approve, um, development…So just the homelessness issue on the side, just in terms of the growth and health of the community, and the island, and the City and County of Honolulu, it's just super crazy making… but, yeah, development is going completely unchecked. And I think we took a break in the 80's…Um, but the 70's was a huge, um, uncontrolled development period and now in this current time, there's just nobody making any, um, priority. And an affordable unit is what? $400,000? $375,000? What is considered an affordable unit?* (Follow-up, SP).

**Section 4d. Symptom of a Larger Problem**

A handful of participants ($n$ = 7) pointed towards a need to consider underlying or root causes of homelessness. Because these perspectives are important to situating homelessness in a larger context, they are included here briefly to indicate that while perhaps not the dominant or most frequent theme regarding homeless trajectories, these calls to consider the larger problems within which homelessness exists were decidedly present within participant discussions:

> *Um, I think the state is, you know, doing the best that they can. Um, homeless services seems to be the catch-all of all broken systems, is how I best describe it. So while one department is trying to address homelessness, we need to look at all the other broken systems that's leading to homelessness, right? So the public safety system without a transition of folks coming out of jail and have nowhere to go makes the homelessness. The displacement of the COFA families and that impact and not having services for them on their islands prior to coming, you know, transition or relocation plan. And because that's not in place, you know, it feeds into the homeless service system. You know, 'cause of poverty, you know, it feeds into the homeless system and the lack of living wages. So the researches that we're putting to address homelessness, I think what we're not doing well is trying to do a prevention system work. And that's not an immediate answer. And that's- probably tends to be why that doesn't happen, is 'cause they're looking at the immediate and what they can see visually and how to help those people on the street…There certainly needs to be more attention towards the prevention of homeless and changing policies and putting, programs in place that would prevent- stop the bleeding* (SP).

As in the comment above, other participants listed various "*deeper causes*" in relation to homelessness. These included generational poverty, the negative consequences of a "*capitalist system*," colonization, and "*broken systems*," among others. Below is an example of one participant's view of the problem as having complicated causes that are not easily solved:

> *You know.. Yeah, you know, it's a shell game. And, yeah, and so until there's- erh- I mean, and then, you know, I- at- at my heart, I'm probably a socialist because the whole frick'n capitalist system is rigged to keep the oppressed down. And so until you fix that. You know, and Bernie Sanders isn't gonna come along and fix that. And, you know, and it's not going to- yeah. So big picture-wise, I'm very cynical and pessimistic. Um, on an individual basis, I'm very optimistic. You know, this particular person might be okay in the long run* (SP).

When this theme was presented during the follow-up interviews, many of the participants seemed to agree with the idea that there are some deeper root causes to consider when discussing issues of homelessness. Of all the suggested root causes, the idea of colonization having an impact on homelessness seemed to generate the most discussion, with several participants indicating agreement that it was important to consider the impact of colonization. During the group interview, the following interaction occurred around the issue of colonization:

*Participant A: What's the correlation though? Where you going with that? What do you mean? Just the- the tide of the human condition, and get this shit happens from time to time?*

*Participant B: Well, what I mean is that all societies, I think, above a nomadic subsistence level have their own unique inequalities between different groups of people in terms of distributing power and wealth and stuff like that. And so it makes no one group particularly anymore evil from any other group. Whether you're any of the different Chinese or Roman Empires or whatever came through Egypt and so on and so forth through history. But essentially, when you are part of one group that ends up being subjugated by another group than you have a problem…* (Follow-up, 2 SP).

## Conclusion

It was clear from the Stage 1 and Stage 3 interviews that participants had given careful thought to the factors that might impact one's homeless experience. Service providers and service users alike easily engaged in discussions around elements that might help or hinder progress out of homelessness. They discussed individual characteristics or background experiences that might help or hinder one's progress, as well as what organizations and programs do to help or hinder individuals. They also listed larger, more abstract factors that impact homelessness at the systems level and at the community or society level.



### Individual and Family Level Factors

The interview questions were primarily geared towards asking participants for their views of the individual level factors that might impact someone's experience of homelessness and their progress in obtaining permanent housing. Because of this, the individual and family level category was the most robust with a large number of themes and subthemes, including:

- The impact of demographic characteristics, such as one's age or developmental stage, ethnic or cultural background, and family composition.
- Background experiences that might influence a person's homeless trajectory including involvement with the criminal justice system, education level, veteran status, and other general economic factors.
- Health issues, such as physical illness and disabilities, mental health issues, and substance abuse problems were also discussed at length in terms of the various ways that these issues might influence and be influenced by homelessness.
- Finally, participants discussed two personal or social factors that might also provide protective influences or potential complications to one's homeless journey: the quality of social support available and one's personal willingness and perseverance when engaging with services and pursuing housing.

Many of these characteristics were analyzed, though often imperfectly, in the quantitative portion of the study (See Part II of this report), including age, ethnicity, family composition, history of criminal justice involvement, education level, veteran status, economic factors, and health information, among others. However, it is important to note that the participants typically did not discuss these individual and family level factors in a vacuum. They often also discussed organizational, systemic, and community level factors that might contribute to these increased risks. ***Therefore, while the individual and family level factors were enormously helpful to informing the quantitative arm of the study, the higher level organizational, systemic, and community level factors were critical to ensuring that these individual level factors did not essentialize, stereotype, or blame the groups that they were describing.***

**Program and Organizational Level Factors**

In discussing the various factors that might influence one's homeless trajectory many participants spoke extensively about both the ways that programs could positively impact one's experience and how bad experiences with homeless services could derail one's progress.

- Two of the major themes that emerged in relation to programs and organizations suggested that programs that strive to provide comprehensive support across a wide range of needs and did so in a thoughtful and trustworthy way could have enormous positive impacts on their clients.
- Another organizational level theme had to do with the requirements involved with following program rules and milestones and suggested that these rules and requirements could be helpful to some and prohibitive to others.

That service users themselves expressed diverse preferences and needs related to program requirements suggests that ***having a wide range and balance of approaches within the service system could be beneficial in providing support for those who need or want requirements, while also making sure that groups are not being shut out of services because they cannot or are not willing to meet these standards.***


**Systems Level Factors**

Participants also described a number of systems level factors that might influence differing homeless trajectories. These included:

- How high levels of bureacracy in the system could impede service user progress.
- The importance of good collaboration and adequate funding levels in helping to address homelessness.
- How issues or problems in related systems could impact homeless service users.
- How varying systemic approaches to homelessness could differentially impact a range of subpopulations.

The idea that differing "*initiative*s" and approaches to homelessness could differentially impact service users is an important one to consider. It suggests that the individual level characteristics associated with the different service use trajectories described in Part II of this report could change based on systemic decisions about how to address homelessness. For example, several participants discussed their observations that veterans may now be a less vulnerable group because the service system has made ending veteran homelessness a priority. This population is now experiencing an influx of funding and services, including specially dedicated housing vouchers. As one service provider astutely pointed out, whichever group is targeted with housing vouchers has a strong chance of being the one most likely to be successfully housed (See also Shinn et al., 1998). ***Therefore, it is important to remember that the risks and vulnerabilities highlighted in this report are not innate or constant. Risk levels can change over time as systemic approaches and community and society level factors shift.***

**Community and Society Level Factors**

One of the factors cited most frequently and discussed most extensively by participants was the community and society level factor of affordable housing. Participants cited lack of affordable housing as the major limiting factor in addressing homelessness in Hawai'i.

- Without enough affordable housing, low income individuals continue to be at risk of homelessness, programs cannot effectively exit clients into permanent housing, and the homeless service system will likely continue to struggle with high rates of homelessness (Quigley et al., 2001).
- Therefore, while the individual level factors explored here and in relation to the latent class growth analysis described in Part II of this report may impact one's *vulnerability* to a more complicated homeless trajectory, **they likely do not impact the overall rates of homelessness in the state**.
- This is consistent with what Lee et al. (2010) call "housing squeeze hypothesis," which explains homelessness as an interaction between macro-level factors (such as availability of housing, government policy, and employment rates) and individual vulnerabilities.

Along with affordable housing barriers, participants also discussed a number of other issues that they saw as being root causes of homelessness in the state. These root causes included, but were not limited to:

- The influence of the current capitalist system on creating a large group of low status, low income individuals.
- The destructive consequences of colonization throughout the Pacific.
- Widespread poverty, among others.

***Several participants understood homelessness as a symptom of these larger problems and proposed that the root issues would need to be acknowledged and addressed in order to truly solve the problem of homelessness.***

Other community and society level factors that were discussed as influencing experiences of homelessness in the State of Hawai'i included:

- Public perception and willingness to help with the issue and public policy decisions.
- How homelessness is viewed and understood by the community (public perception) will directly affect the interventions (public policy) designed to address the problem.
- Public policy level interventions often trickle down across systems and organizational levels and have important impacts on how homelessness is experienced by individuals and families in the state.

***These factors serve as additional reminders that homeless experiences are not static, but are open to change and suggest community attitudes as a potential target for instigating that change.***

## Recommendations

This study has examined factors that can impact experiences of homelessness at a number of different levels. Thus, there is also the potential for harnessing change at each of these levels. For each level outlined above, select preliminary targets for change are described below.

### 1. Individual and Family Level Targets for Change

More concrete individual level recommendations can be found in Part II of this report, which summarizes potentential targets for intervention based on the statistical analysis of service usage data. That report uses many of the themes described here (age, family composition, mental health status, etc.) to identify risk factors for prolonged or complicated service usage and makes recommendations based on these risk factors. ***It is important to note, however, that individual and family level risk factors are often related to higher level influences. Therefore, to focus too heavily on this level is to miss a big part of the story.***

### 2. Program and Organizational Level Targets for Change

The results above suggest that there are wide-ranging differences and needs among homeless subpopulations. Therefore:

- Fostering a wide range of service approaches is likely to be more effective in offering programs that can meet differing preferences, needs, and potentials.
- This range of services could include highly structured environments for groups such as young adults or those with severe mental illness, who might benefit from more structure and support.
- However, given that some individuals may be reluctant to lose their sense of autonomy and control, the range of available services should also include programs with fewer rules and lower barriers to participation.

***Regardless of the types of services offered, it is important for services to convey a sense of trustworthiness and attempt to provide wide ranging comprehensive support. The interview content seems to suggest that these qualities can go a long way in facilitating client willingness to engage in the processes required for successful use of services.***

### 3. Systems Level Targets for Change

Decreasing bureaucratic barriers and increasing funding and collaboration across serivces and across systems are imporant potential targets for change at the systems level.

- While many of the paperwork and other bureaucratic requirements that exist in the homeless service system are part of federal guidelines, and thus offer little room for change, state, county, and organizational practices could be examined and streamlined to reduce redundancy and decrease overall barriers to service.

- Additionally, system-level attempts to develop and disseminate user-friendly service directories and/or flow charts would also help to clarify and demysitify homeless services.
- Increasing funding and strategicaly targeting funding to a range of effective, but different, services would also help the overall ability of programs and organizations to facilitate atmospheres of trustworthienss and comprehensive support, thus increasing the likelihood of their clients' engagement and success.
- Similarly, continuing to build collaborative relationships across homeless services and across other systems would also likely aid in the effectiveness and efficiency of the services offered.

## 4. Community and Society Level Targets for Change

Community and society level factors are probably the most difficult targets for change. However, the slow, grueling, higher-level changes are often the ones that have the deepest and most long-lasting impacts on a problem.

- While it will likely be extremely difficult to accomplish, ***Quigley et al. (2001) suggest that even modest increases in the numer of affordable affordable housing units can have large impacts on the rates of homelessness in an area.***
- Therefore, one of the most important levers for changing homeless rates in Hawai'i would be to focus on developing a greater availability of affordable housing.

The results described in this study also suggest two related targets for change at the community and society level: public policy and public perception.

- Public policies towards housing, development, and homelessness are all likely to impact both individual experiences of homelessness and overall rates of homelessness in the state.
- Policy that focuses on increasing affordable housing, regulating development to benefit lower-income families, and truly compassionate approaches to individuals and families without homes are likely to have important impacts.
- However, public policy is often tied to public perceptions of a problem. It is difficult to pass policy if there is no public will to do so.
- Therefore, another potential target for change is to continue efforts to educate the community about homelessness, dispell harmful myths and stereotypes about those who have lost their homes, and advocate for community action on the issue.
- Researchers, service providers, houseless and formerly houseless individuals, churches, community groups, and the media can and do represent powerful voices for change in our community. Continuued efforts on this front are important in shifting public and civic opinions related to homelessness.

***Focusing on affordable housing, public policy, and public perception as long-term targets for change is necessary for addressing such an intrenched, multifaceted, and complicated problem as homelessness***.

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