

Olivet Nazarene University

## Digital Commons @ Olivet

---

Ed.D. Dissertations

School of Graduate and Continuing Studies

---

5-2014

# The Voice of the Homeless Adult Male: Perceptions of Those Who Have Successfully Transitioned to Self-Sufficiency

Dallas W. Gatlin

*Olivet Nazarene University*

Follow this and additional works at: [https://digitalcommons.olivet.edu/edd\\_diss](https://digitalcommons.olivet.edu/edd_diss)



Part of the [Community-Based Research Commons](#), [Family, Life Course, and Society Commons](#), [Place and Environment Commons](#), and the [Social Work Commons](#)

---

### Recommended Citation

Gatlin, Dallas W., "The Voice of the Homeless Adult Male: Perceptions of Those Who Have Successfully Transitioned to Self-Sufficiency" (2014). *Ed.D. Dissertations*. 69.

[https://digitalcommons.olivet.edu/edd\\_diss/69](https://digitalcommons.olivet.edu/edd_diss/69)

This Dissertation is brought to you for free and open access by the School of Graduate and Continuing Studies at Digital Commons @ Olivet. It has been accepted for inclusion in Ed.D. Dissertations by an authorized administrator of Digital Commons @ Olivet. For more information, please contact [digitalcommons@olivet.edu](mailto:digitalcommons@olivet.edu).

THE VOICE OF THE HOMELESS ADULT MALE: PERCEPTIONS OF THOSE WHO  
HAVE SUCCESSFULLY TRANSITIONED TO SELF-SUFFICIENCY

by

Dallas W. Gatlin

Dissertation

Submitted to the Faculty of

Olivet Nazarene University

School of Graduate and Continuing Studies

In Partial Fulfillment of the Requirement for

the Degree of

Doctor of Education

in

Ethical Leadership

May 2014

THE VOICE OF THE HOMELESS ADULT MALE: PERCEPTIONS OF THOSE WHO  
HAVE SUCCESSFULLY TRANSITIONED TO SELF-SUFFICIENCY

by

Dallas W. Gatlin

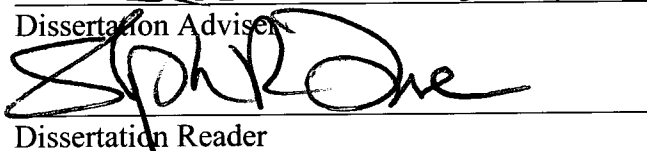
Dissertation



Dissertation Adviser

5-5-14

Date



Dissertation Reader

5-5-14

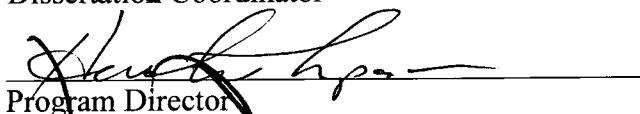
Date



Dissertation Coordinator

6-8-14

Date



Program Director

June 9, 2014

Date



Vice President for Academic Affairs

June 9, 2014

Date

© 2014

Dallas W. Gatlin

All Rights Reserved

## ACKNOWLEDGEMENTS

Humans are social beings who do their best work in concert with others. This dissertation is the result of one researcher relying on the voluntary interest and assistance of many. The 10 men who shared their perspectives on life, their own lived-experiences with homelessness, and how they successfully navigated the difficult road to self-sufficiency, provided the heart and soul of this study. Their voices provide insight for all others who would make this journey and for those who would help them. We are all indebted to them.

I want to thank the board and our staff at the shelter for supporting this study and providing the margin necessary to devote time and energy to this research. I must also express my deep appreciation to my advisor Dr. Dale Oswalt and my reader Dr. Stephen Lowe. Their ardent dedication to timely reviews and their offering of insightful input contributed mightily to the completion of this dissertation.

Finally, I want to thank my wife, Nola, for her steadfast patience and unflinching support during the years of reading, writing, thinking, lamentation, and elation that have characterized this research and the documentation of this study. She is truly a God-given and special helpmate.

## DEDICATION

This study is dedicated to all the special human beings who find themselves homeless and to those who would help others who are homeless—to the spirit of solidarity that permeates the notion of loving God through loving neighbors.

## ABSTRACT

This study drew out and described the perceptions of 10 men who successfully made the transition from homelessness to self-sufficiency. Responding to semi-structured open-ended questions in a one-on-one interview format, participants shared perceptions about their lived-experiences before, during, and after chronic homelessness, and how they navigated the difficult journey to self-sufficiency. The researcher used conventional content analysis to allow the perspectives of participants to emerge from their own words in themes and meaning units. The findings of this study suggest that from participants' point of view loss of social support due to the death of a parent or spouse, divorce, trauma, substance abuse, physical and mental illness, crime and incarceration are contributing factors to episodes of homelessness. The findings of this study also suggest that obtaining a reliable source of income, personal perseverance, personal faith are important factors related to achieving self-sufficiency. Finally, the findings of this study suggest that coordinated services, the support of trusted individuals, and securing a safe, stable, and encouraging environment provides the needed basis from which to begin the journey out of homelessness.

## TABLE OF CONTENTS

	Chapter	Page
I.	INTRODUCTION .....	1
	Statement of the Problem.....	4
	Background.....	4
	Research Questions.....	13
	Description of Terms .....	13
	Significance of the Study.....	15
	Process to Accomplish.....	15
	Summary.....	21
II.	REVIEW OF THE LITERATURE .....	23
	Introduction.....	23
	Homelessness: An Historical Perspective .....	24
	Causes and Contributing Factors to Homelessness .....	29
	Strategies for Addressing Homelessness .....	34
	Lived Experiences of Homeless Individuals.....	49
III.	METHODOLOGY .....	52
	Introduction.....	52
	Research Design.....	52
	Population .....	55
	Data Collection .....	58



Chapter .....	Page
Analytical Methods .....	65
Limitations .....	70
Summary .....	73
IV. FINDINGS AND CONCLUSIONS .....	74
Introduction .....	74
Findings .....	76
Conclusions .....	128
Implications and Recommendations .....	133
REFERENCES .....	138
APPENDICES .....	144
A. Phase I Survey Instrument .....	144
B. Phase II Interview Instrument .....	147
C. Participant Profiles .....	151

## LIST OF TABLES

Table	Page
1. Participant Demographic Information.....	57
2. Research and Interview Questions.....	60
3. Illustrative Verbatim Quotes.....	79
4. Emerging Categories and Themes.....	81

## LIST OF FIGURES

Figure	Page
1. Iterative Content Analysis Process.....	67

## CHAPTER I

### INTRODUCTION

In 2010, in the United States, over 1.5 million people spent at least one night in shelters for the homeless. On any night there were nearly 650,000 individuals living in shelters or on the streets. The major thrust of the United States government is to provide Permanent Supportive Housing (PSH) through a three-year \$1.5 billion program; a strategy commonly referred to as *rapid-rehousing* (United States Department of Housing and Urban Development, 2010). However, it remains unclear if a house is really the answer for homelessness.

In 2010, a shelter in the Midwest implemented a mentoring program in order to help motivated individuals transition from homelessness to self-sufficiency. The experiences of the mentoring program participants who have been successful in making this transition could be valuable for helping others make a successful transition from homelessness to self-sufficiency. This descriptive study will try to capture the perceptions of successful mentoring program participants regarding their experiences with homelessness and their successful transitions to self-sufficiency.

A number of researchers have explored the relationships between life circumstances, behaviors, and homelessness. Caton et al. (2000) studied risk factors for homelessness among adults who had no history of mental illness. Caton et al. found that

those who had never been hospitalized for mental illness accounted for two-thirds of the homeless adults in their sample. It was noted that homeless men in the never-hospitalized-for-mental-illness group were most likely to benefit from education and job-training strategies.

Kim, Ford, Howard, and Bradford (2010) studied trauma, substance abuse, and mental illness as risk factors for homelessness in men. Kim et al. concluded that homeless men benefit more from long-term continuity of care than from sporadic crisis-based care. Caton et al. (2000) and Kim et al. recommended education, job training, and sustained programs or services to address the problems associated with homelessness in men. However, service providers who want to act on recommendations for sustained education and job-training strategies are left wondering which strategies are most successful for transient, homeless men.

Amato and McDonald (2011) examined factors that cause men to become homeless and coping strategies that men use to deal with homelessness. The authors used semi-structured interviews to draw out the perceptions of homeless men regarding the causes of their homelessness and how participants felt about their access to services designed to help them. The authors found that participants reported alcohol abuse, joblessness, and domestic conflict as factors causing participants to become homeless. A small number of the participants reported disability, possession of a criminal record, and mental illness as factors causing them to become homeless. Amato and McDonald reported that 70 % of 189 participants reported feelings of shame when accessing services such as shelters and medical clinics.

The work of Amato and McDonald (2011) explored the perceptions of adult homeless males regarding causes of their episodes of homelessness. In 2010, a Midwestern shelter developed a mentoring program for adult male residents. The underlying objective of the program was that it be simple and prescriptive. The program developed by the leadership staff of this faith-based shelter was designed to be minimally structured around spiritual health, academic preparation, and work experience. The leadership called this program the Personal Success Program committing to recruit residents by requiring them to sign on to a *Personal Success Plan* in order to stay at the shelter past 30 days.

Since January 2010, 154 men have participated in the Personal Success Plan mentoring program at the shelter. While the program was designed to be prescriptive in that each plan is based on each resident's current state relative to his spiritual life, knowledge and skills, and employment; the leadership solicited no input from residents during program development. In the two years of the program's existence, no attempt has been made to understand the journey from homelessness to self-sufficiency from the program participants' points of view.

Indeed, little is known from the research about the perceptions of adult homeless males regarding their experiences with episodes of homelessness, the help that has been offered them along the way, and what was helpful and appreciated and what was not. In order to design interventions guided by a better understanding of the perceptions of those who have experienced episodes of homelessness, more study is needed. This study added to the body of knowledge by evaluating the perceptions of participants' in a mentoring program intended to help them move from homelessness to self-sufficiency.

This study explored participants' thoughts about their past and present circumstances, their experiences with episodes of homelessness, and their hopes for the future. The study also explored participants' thoughts about what happened (or might need to happen) and what they did (or may need to do) to successfully move from homelessness to self-sufficiency. This study provided some foundational information that may be used to design a comprehensive and ongoing program assessment of the mentoring program at the shelter.

#### Statement of the Problem

A faith-based Midwestern shelter has a mentoring program designed to assist motivated men in their journey from homelessness to self-sufficiency. The shelter's mentoring program was developed and evaluated without the input of program participants. This study added to the body of knowledge for helping homeless individuals move from homelessness to self-sufficiency by exploring mentoring program participants' perceptions about the mentoring program and whether or not the program has had a positive, negative, or neutral influence on their journey from homelessness to self-sufficiency.

#### Background

The body of research about the experience of homelessness depends heavily on surveys and interviews with those who lead or work at homeless shelters. Not all homeless people stay at shelters. However, many who live in the streets move in and out of shelters in their cities and many shelter leaders take food and clothing to those living in the streets (Rossi, 1989). Nevertheless, leaders and workers at shelters are often so caught up in the routine of helping that these same leaders and workers never really hear the

voice of the homeless. In order to understand the experience of homelessness it is necessary to use the tools of objective research and attempt to understand the perspectives of those who have experienced it.

Of the research-based books on homelessness, two of the most well known and most respected are the works of Jencks (1994) and O'Flaherty (1996). The authors draw very different conclusions about what causes homelessness. For example, Jencks concluded that deinstitutionalization of mental health patients in the United States caused the population of homeless adults to blossom in the 1980s. O'Flaherty does not share this view. He pointed to rising housing costs for the poor and the elimination of single-occupancy rooms as key factors that drove the increase in homelessness in the 1980s. Both Jencks and O'Flaherty are often-quoted social scientists on the subject of homelessness.

Both Jencks (1994) and O'Flaherty (1996) provided a good foundation from which researchers can begin to understand the problem of homelessness. A number of other researchers have added to the body of knowledge since 1996. Kennedy (2007) examined the relationship between homelessness, violence exposure, and school participation within a sample of poor adolescent mothers living in an urban environment. Various survey and interview methods facilitated the gathering of information on the mothers' race, ethnicity, number of children, receipt of public assistance, exposure to violence, and participation in school. Kennedy found that exposure to violence had a significant impact on the rate of subsequent homelessness for adolescent mothers.

Kim et al. (2010) suggested that among homeless men, traumatic experiences of physical or sexual abuse are strong predictors of the presence of mental health problems.



Each exposure to trauma was associated with a two-fold increase in the risk of mental health problems. The authors asserted that while more study is needed to assess cause and effect, their results suggested that exposure to physical or sexual abuse is strongly associated with future mental health problems and a history of having been victimized by physical and sexual abuse are common among homeless men with or without a history of mental health problems.

Gamache, Rosenheck, and Tessler (2001) studied military veterans and their exposure to the risk of homelessness. Of special interest to Gamache et al., was the cohort of veterans from the first years after the elimination of the military draft in the United States. The authors drew upon data from previous surveys to compare veterans and non-veterans from different age and race cohorts. Gamache et al. found that veterans of all eras were disproportionately represented among sampled populations of homeless men. Causation for this observed relationship was beyond the scope of their study.

Taylor and Sharpe (2008) studied post-traumatic stress disorder among homeless adults in Sydney, Australia. The authors sought to determine whether the onset of post-traumatic stress disorder preceded the first episode of homelessness or was a result of the experience of homelessness. The authors randomly sampled 70 homeless men and women through eight service agencies for the homeless. The authors interviewed participants face-to-face. The authors assessed the lifetime incidence of post-traumatic stress disorder using the Composite International Diagnostic Interview. Taylor and Sharpe found a high incidence of childhood physical and sexual abuse and other trauma in the homeless adults sampled. The trauma rate among homeless adults sampled was nearly twice that reported in the general population. The incidence of post-traumatic

stress disorder was much higher in the homeless adults sampled than in the general population. Both trauma and post-traumatic stress disorder preceded the first episode of homelessness in most of the homeless adults sampled. The authors concluded that providers of services to address homelessness must take into account the experiences of homeless adults with trauma early in life and their ongoing exposure to trauma during episodes of homelessness. Taylor and Sharpe noted that they were unable to demonstrate a causal relationship between trauma and homelessness.

Van Laere, de Wit, and Klazinga (2009) examined the pathways into homelessness for a group of adults in Amsterdam, the Netherlands, in order to gain insight into potential prevention and intervention strategies. The authors surveyed a sample of recently homeless adults in order to discover the problems encountered and the social support services used by this group before and after becoming homeless. Van Laere et al. collected data on demographics, social and medical problems, and social support services used by the targeted adult homeless sample before and after this targeted group became homeless. The authors interviewed homeless adults living in the streets, in day centers, and in overnight shelters.

Van Laere et al. (2009) concluded that three pathways accounted for the descent into homelessness for a majority of participants. These pathways included eviction from housing due to nonpayment of mortgage or rent, loss of housing due to domestic disputes, and lack of housing for prisoners released from prison. The authors recommended one-stop access to publicly-supported social and medical services for at-risk individuals before and during homelessness in order to address the economic, social, and medical

problems that lead to and perpetuate homelessness, but this study by Van Laere et al. did not support this recommendation with persuasive findings.

Zima, Wells, and Freeman (1994) studied emotional, behavioral, and academic problems among sheltered-homeless children in Los Angeles County. Zima et al. interviewed children and their parents and evaluated their data using standardized measures for depression, behavioral problems, receptive vocabulary, and reading. The majority of participating homeless children suffered from depression, behavior problems, and delayed academic development. Among the children having a problem, only one-third of the parents of these children were aware that their child had a problem. Only 15% of the children with problems had ever received mental health care or special education services. Zima et al. concluded that almost all school-age sheltered-homeless children in Los Angeles County exhibit depression, behavioral problems, and academic delay, but few had ever received specialized care to address these problems. Though they did not establish causation, the authors posited that lack of mental health and special education services places school-age homeless children at risk of joblessness and homelessness as adults.

Findings in the research for factors that may place certain individuals at risk for episodes of homelessness include substance abuse, joblessness, loss of low-income housing, and deinstitutionalization of housing for the severely mentally ill. Domestic conflict, disability, possession of a criminal record, and past trauma are a few more factors often linked to homelessness. Most researchers agree that an individual's episodes of homelessness are most likely the result of many interrelated contributing factors and that the effects caused by these factors are likely influenced by the individual's age,

gender, education, and family background (Rossi, 1989). Nearly as perplexing as the question of what causes homelessness is the question of what to do about it.

For their part, Cook et al. (2001) studied the vocational outcomes of 4,778 formerly homeless severely mentally ill individuals enrolled in the Access to Community Care and Effective Services and Support (ACCESS) program funded by various departments of the United States government. The ACCESS program was deployed to help improve access to community services by homeless men, women, and families. Cook et al. concluded that job training and job placement services to the homeless mentally ill are nearly as important as housing and clinical treatment.

Goetz and Schmiede (1996) researched the effectiveness of job training and integrated case management in reconnecting homeless individuals with mainstream society. Thirty homeless men and women learned basic construction skills in a program funded by the United States Department of Labor. A cooperative including researchers, local homeless shelters, local construction trades, and local social and medical service agencies, provided job training and coordinated services to a group of motivated adults who were homeless. The authors' purpose was to evaluate the success of the Homeless Employment and Related Training (HEART) program. Goetz and Schmiede sought to demonstrate the effectiveness of this program that included jobs-skills training, job search assistance, agreements with local contractors to hire qualified graduates, and intensive case management to address food, housing, medical, and psychological services. Eighty-one percent of the study participants found jobs with local contractors after 10 weeks of training. Sixty-five percent of the graduates who found jobs also found permanent housing after the 10-week study.

Rosenheck et al. (1998) studied the effectiveness of service integration in helping the homeless mentally ill gain access to services and housing. The authors tested the hypothesis that greater integration of services and coordination between agencies serving the homeless are associated with improved delivery of services and improved housing outcomes. Rosenheck et al. analyzed data from a previous study (Rosenheck & Lam, 1997). The previous study included data on baseline client characteristics, service use, and three-month and 12-month outcomes from over 1800 clients seen at a number of service sites during the first year of the program. The authors found that service system integration was associated with superior housing outcomes at 12 months. This success was mediated through coordinated cooperation between housing agencies. Rosenheck et al. concluded that service system integration is related to improved outcomes in finding housing for the mentally ill homeless.

Lennon, McAllister, Kuang, and Herman (2005) found that mentally ill chronically-homeless men were more successful at avoiding a recurrence of homelessness when they participated in CTI (critical time intervention) services that include a mentor to follow up with participants after release from shelters. In the CTI group, participants were mentored to ensure medical and counseling appointments were kept. In a control group participants were released with directions to follow up on medical and counseling services by themselves without the help or follow up of a mentor. Lennon et al. found that those who were mentored for nine months following release from a shelter were much less likely to experience recurrence of homeless episodes over the next year.

Persaud, McIntyre, and Milaney (2010) studied a small group of young adult working-homeless men in order to understand how young adult working-homeless men experience their own circumstances in Calgary, Alberta. Persaud et al. began with a three-month period of intensive observation in areas frequented by homeless men. From this group, the authors selected a purposive sample of five young working-homeless men ages 18 to 30 years old. The authors conducted semi-structured interviews and added the results of these interviews to extensive observations and discussion field notes. Persaud et al. designed their ethnographic study to explore the cultural themes of the roles and behaviors of the young working-homeless men in order to gain insight into what it would be like to be a young working-homeless man in Calgary, Alberta. Persaud et al. concluded that the young working-homeless men were homeless because their wages were not sufficient to access housing. The authors also concluded that while the shelters in Calgary provided safe and adequate living conditions, the participants in the study and other young working-homeless men observed by the authors, reported feeling labeled and devalued by the many faceless providers in an otherwise generous support system (p. 346).

Sometimes just providing a connection to normalcy can be important in assisting homeless individuals along a journey to self-sufficiency. Miller, Bunch-Harrison, Brumbaugh, Kutty, and FitzGerald (2005) studied the meaning of computers to a group of homeless men living in a long-term shelter. The authors interviewed seven homeless men who had recently completed an eight-week work-readiness program and assessed participants' perceptions about computers. Participants reported having only sporadic access to computers before the study. The authors posited that because participants'

access to computers was most often in public areas, participants avoided using the public-access computers because of a fear of embarrassment due to incompetence. Participants reported much less anxiety about accessing public computers following the study-training period. During the study-training period, participants learned basic computer and software skills. Participants reported that newly learned computer skills provided a sense of pride and competency, and access to computers provided a sense of connection to the world through the internet.

One shelter for homeless men in the midwestern United States decided that the most promising way to approach the complexity of factors that combined to cause an individual's slide into homelessness was to treat each shelter resident as a unique individual with important opportunities to grow in three key areas: knowing God, gaining knowledge and skills, and preparing for and actively seeking work. The shelter named this program the *Personal Success Plan Program*.

The program was designed with several guiding principles in mind. It should be simple and easy to understand. It should inspire purpose and hope in the tradition of the Protestant Christian faith without bogging down in distinctive denominational doctrines. It should prepare, challenge, and transition participants toward self-sufficiency while respecting participants' potential and limitations. The program developers, members of the shelter's leadership team, did not attempt to consult research findings to support program design decisions. The developers benchmarked other missions but found only rigid 12 to 18-month programs that did not address in any effective way the individual needs of program participants. This study has begun to lay the groundwork for a future

comprehensive program evaluation by exploring the perceptions of individuals who have participated in the program from January 2010 through May 2012.

### Research Questions

Nearly absent from the literature is the voice of the formerly-homeless person. The purpose of this research is to explore the perceptions of those who have found themselves homeless and have taken advantage, to some degree, of an opportunity to move from homelessness to self-sufficiency. Understanding this journey from their perspective will inform future research and inform interventions in the lives of others who are homeless. Understanding participants' perspectives will also provide a basis from which to evaluate the shelter's Personal Success Plan mentoring program for potential improvements. For this study, the researcher will address the following questions:

1. What is a sheltered homeless adult male's perception of his life experiences and circumstances before, during, and after his experience with homelessness?
2. What is a sheltered homeless adult male's perception of actions he took that helped him move from homelessness to self-sufficiency?
3. What is a sheltered homeless adult male's perception about the help he received from others and particularly from the shelter's mentoring program on his journey from homelessness to self-sufficiency?

### Description of Terms

*CTI services.* Critical Time Intervention services are helping services made available at time when those services are likely to do the most good (Lennon, 2005).



*Episode of homelessness.* A period of time during which an individual stays overnight in a place not normally meant for human habitation (United States Department of Housing and Urban Development, 2010).

*Homelessness.* The condition of a person sleeping in a place not meant for human habitation such as living on the streets or living in a homeless emergency shelter (United States Department of Housing and Urban Development, 2010).

*Homeless adult male.* A homeless adult male is 18 years old or older living in the condition of homelessness (United States Department of Housing and Urban Development, 2010) .

*Mental illness.* *Mental illness refers* collectively to health conditions that are characterized by alterations in thinking, mood, or behavior (or some combination thereof) associated with distress and/or impaired functioning. (Surgeon General, 1999)

*Mentoring.* A process in which one person guides another in the learning and application of skills needed to be successful (Goetz & Schmiede, 1996).

*Personal Success Plan (PSP).* A Personal Success Plan is a behavior contract and plan designed to guide a shelter resident's growth from homelessness to self-sufficiency (Subject Shelter Program Manual, 2010)

*Self-sufficiency.* Self-sufficiency refers to an individual's ability to provide for their own food, shelter, and clothing where the domicile is one that would be commonly considered as suitable for human habitation. Income may be from any legal source including government assistance or benefits (Shlay, 1993).

## Significance of the Study

This study was significant because programs to help homeless adult men move from homelessness to self-sufficiency are often designed without a good understanding of the experiences and perceptions of the homeless adult males. Recent programs in the United States focus on rapid re-housing or getting the homeless person as quickly as possible into housing paid for with a government supported voucher. Other programs follow an addiction-recovery model. Still others follow a religious transformation model.

While research related to homelessness as a social problem is plentiful, a study of homelessness as a personal problem is lacking. This study focused on understanding the perceptions of homeless adult men who are motivated to move to self-sufficiency. The researcher believes becoming informed from their point of view has the potential to inform both intervention strategies and future research. This study provides a basis from which the shelter will evaluate its mentoring program for the purpose of making improvements.

## Process to Accomplish

The researcher studied the experiences and perceptions of 10 participants in a Midwest homeless shelter's mentoring program who had successfully transitioned from homelessness to self-sufficiency. This investigation represents a phenomenological multi-case study using qualitative research methods.

The population for this study was homeless adult men who had lived in a shelter in a medium-size Midwestern city in the United States and who had participated in a mentoring program designed to help them transition from homelessness to self-

sufficiency and equip them to avoid future episodes of homelessness. This population was diverse by race, age, marital status, and education achievement level.

The sample for this study was a purposeful sample of adult men who had participated in a *personal success-mentoring* program at a shelter for homeless adult males. The mentoring program is offered as an opportunity to build a plan tailored to a participant's current state and aligned with his abilities. Because the shelter is a faith-based Christian rescue mission, participants engage in Bible study and prayer. Working with a mentor the participant develops a plan for daily Bible reading (or listening) and private daily prayer.

The mentoring program's second area of focus is education. The program stresses academic learning and job-skills training. Participants begin where they left off in their education or training. If they dropped out of high school, they work toward completing a high school graduation equivalency program. Alternatively, they may choose to learn a trade. Participants work with a mentor to plan and track progress toward specific goals. Health care education is an integral part of the Personal Success Plan resident's program.

The mentoring program's third area of focus is work. Program participants must apply for jobs according to a schedule established with their mentor. While waiting for paying work, Personal Success Plan (PSP) residents work on unpaid service work crews as part of their training. Projects at the mission and in local neighborhoods serving the community make up the bulk of work tasks performed. Unlike the programs at many rescue missions there is no specific duration mapped out for completion of the mentoring program. Each PSP resident's program has target dates, goals, and objectives that apply

only to him. Program participants work with resident mentors to establish realistic objectives and document plans to reach these objectives.

From January 2010 through May 2012, approximately 154 men participated in the PSP mentoring program. For each PSP program participant a prescriptive plan was designed to help him transition successfully from homelessness to self-sufficiency. Through a Phase I survey, the researcher attempted to contact every individual in this group for which valid contact information was attainable. The researcher attempted to contact participants by phone, email, social media, or in person. The researcher conducted the survey by phone, via email, or in person; whichever method suited the participant. The actual number of participants in the screening survey was limited to the number of respondents successfully contacted within a five-month period.

The researcher surveyed (Appendix A) this group for some basic descriptive information to profile how they were doing relative to self-sufficiency at the point in time of the study. The purpose of the survey was to determine and document the period of time during which participants stayed at the shelter and participated in the PSP program. Through this survey, the researcher sought to determine and document their current domicile. The researcher also sought to determine and document whether or not participants were working, and how participants were covering costs for food, shelter, and clothing.

From the Phase I survey group, the researcher selected for Phase II interviews a sub-group of participants who had successfully transitioned from homelessness to economic self-sufficiency. For the purpose of this study, economic self-sufficiency means that the participant has sustained himself in a domicile for which he has paid his

own room and board and has done so for at least three months prior to the study. The researcher determined each participant's willingness to participate in the Phase II interview portion of this study. From a sub-group of willing candidates, the researcher selected 10 study participants to participate in the Phase II semi-structured interviews according to a random order generated for the original population of 154 using Research Randomizer. The researcher created the Phase II interview instrument using semi-structured open-ended questions designed to explore the following research questions.

Research Questions:

1. What is a sheltered homeless adult male's perception of his life experiences and circumstances before, during, and after his experience with homelessness?
2. What is a sheltered homeless adult male's perception of actions he took that helped him move from homelessness to self-sufficiency?
3. What is a sheltered homeless adult male's perception about the help he received from others and particularly from the shelter's mentoring program on his journey from homelessness to self-sufficiency?

For the Phase II interview portion of this study, the researcher used qualitative descriptive research methodologies facilitated by face-to-face interviews of 60-90 minutes with each participant to explore each research question (Appendix B). The researcher developed the interview questions to prompt each participant to share perceptions about his experiences with homelessness and his transition from homelessness to self-sufficiency. The researcher pilot tested the interview instrument with two individuals who met the criteria of study participants. The researcher evaluated pilot-test participants' responses to determine if questions were easy to understand and if

the interview questions answered the research questions. The researcher recruited three colleagues familiar with the shelter and the shelter's mentoring program to review the interview instrument and asked them to describe what they think the researcher was trying to assess. The researcher also asked them if there were questions that were hard to understand. With information from the pilot test, the researcher adjusted the interview questions and procedures to ensure clarity and effectiveness in addressing the research questions.

The interviewer used semi-structured questions and asked follow-up questions to encourage participants to share their perceptions. Interviews were recorded and transcribed. The researcher analyzed verbatim transcriptions of interviews for meaning units using conventional content analysis. The researcher categorized meaning units and analyzed these for themes and meaning (Leedy & Ormrod, 2010; Salkind, 2009).

The methodology for this study was non-experimental qualitative-descriptive in nature and as such did not identify independent and dependent variables. Rather the researcher sought to identify themes and categories and build toward an understanding of participants' perceptions related to their experiences with homelessness.

Data arose from participants' responses to semi-structured open-ended interview questions and responses were dynamic, interactive, and reflective. The researcher developed the interview instrument (Appendix B) to draw out the thoughts, feelings, and attitudes of participants relative to their life circumstances and lived experiences. The researcher piloted the interview instrument as described and made necessary adjustments to address the research questions.

The researcher interviewed 10 participants over a period of 24 weeks. The researcher held interviews in a private location at the shelter or at a location preferred by the participant. The researcher reviewed informed consent requirements with participants and obtained signed forms while reassuring participants that their participation was voluntary and they could withdraw at any time with no fear of loss of relationship with the shelter in any way. Interviews were recorded and transcribed verbatim for later content analysis.

The researcher analyzed verbatim transcripts from the interviews using QSR International's NVivo 10 qualitative data analysis software content analysis software to help organize a search for meaning units which were then coded and categorized and analyzed for themes. The researcher determined that available software tools to assist in this analysis would provide for more thorough and reliable data (Salkind, 2009). The researcher tabulated themes, patterns, and meanings. The researcher displayed data and findings visually as appropriate to help detect connections and form the building blocks of a better understanding of participants' perceptions.

The researcher completed this study over a 12-month period. The researcher had access to the population from which the researcher drew the sample. The transient nature of the population from which the researcher sampled presented some challenges because some participants left the shelter or the area without leaving contact information. However, this did not hinder the researcher from reaching the Phase II targeted sample size of 10 participants.

The governing board of the shelter from which the researcher drew the sample endorsed the scope and purpose of this research and provided written approval. The study

was designed to provide the researcher, leaders of homeless shelters, service providers to the homeless, and other social science researchers with valuable insights into the perceptions of sheltered homeless adult male participants who have experienced some success in transitioning from homelessness to self-sufficiency. This research, therefore, provided an opportunity to study a problem that remained relevant, interesting, and important to the researcher throughout the whole process leading up to dissertation defense.

Data collection was completed through interviews with adult male homeless shelter participants in a resident-mentoring program at the subject homeless shelter selected for this study. All data was collected with permission from the board of directors of the homeless shelter and with full consent of participants. The researcher was careful to protect the anonymity of participants through coding of their identities, protection of all data under lock and key, and scheduled destruction of materials that include participants' identification seven years after the successful defense of the researcher's dissertation. The researcher reassured participants that their participation was voluntary and that they could withdraw from the study at any time without jeopardizing their relationship with the shelter.

### Summary

The problem of homelessness negatively affects individuals, families, neighborhoods, and society in general. The research has much to say about the societal costs and the causes of homelessness. Very little is present in the research on the perceptions of those who have experienced a successful transition from chronic



homelessness to self-sufficiency. The next chapter reviews the most current research on the problem of homelessness.

## CHAPTER II

### REVIEW OF THE LITERATURE

#### Introduction

The purpose of this qualitative study was to explore with 10 formerly homeless adult males their perceptions about their lived-experiences before, during, and after episodes of homelessness. Specifically, the researcher sought to understand the perceptions of these homeless adult males about factors that helped or hindered them on their individual journeys from homelessness to self-sufficiency. To carry out this study, it was necessary to conduct a critical review of historical and current literature. The researcher conducted this review continuously throughout data collection, data analysis, and data synthesis.

This study explored the lived experiences and perceptions of participants about the condition of homelessness, factors that cause homelessness and factors that facilitate the escape from homelessness. In light of this, the researcher reviewed and analyzed several key areas of the literature: (a) historical data on homelessness, (b) data on the causes and contributing factors to homelessness, (c) strategies for addressing homelessness, and (d) the lived-experiences of homeless individuals.

Throughout this review, the researcher attempted to identify gaps in the literature and describe these gaps. The researcher pointed out any contentious areas found and discussed these areas. Each section ends with a summary to integrate the ideas discussed with the purpose of this study. The summary at the end of chapter II pulls together and

discusses how the literature has informed the researcher's understanding and the conceptual framework for this study.

### Homelessness: An Historical Perspective

In order to understand better the perceptions of those who have experienced episodes of homelessness it is important to understand the problem of homelessness in an historical framework. Anderson (1923) researched a group of itinerant men in a section of Chicago in the 1920s. The author conducted one of the earliest ethnographic studies in the United States. Anderson studied what he called the *hobos* living in makeshift housing and on the streets of Chicago. Anderson's research revealed the perceptions of the homeless men in *hoboemia* who worked transient day-labor jobs and moved from place to place following the work. Before Anderson's work, most researchers interested in the homeless conducted statistically based surveys that described the characteristics and circumstances of the homeless, but revealed little about the perceptions of participants. Anderson collected the stories of men through open-ended interviews.

Anderson (1923) attributed the causes of homelessness to five factors: (a) unemployment and seasonal work, (b) "industrial inadequacy" or physical disability, (c) defects of personality or mental illness, (d) life crisis, and (e) racial or ethnic discrimination. He also allowed for a special category he called *wanderlust*, a restless adventurer who just could not stay in one place for long. Anderson described homelessness or the world of hobos as a male world. During his studies on the streets of Chicago, women were all but absent from the streets. Those who frequented the streets were prostitutes who all had a place to stay at night.

Anderson (1923) reported a population of 30,000 to 75,000 hobos in hobohemia during the 1920s. For a time, he was a hobo, a fact that he hid for a long time. When he entered graduate school at the University of Chicago, he decided to study the hobo culture. He lamented that he had no skills or tools to do research, but stated, “I had a capacity for interviewing and a capacity for reporting” (p. xii). Though he had trouble answering questions about methodology, the committee approved his Master’s degree noting, “You know your sociology out there better than we do” (p. xxi). Anderson pioneered the use of interviews and qualitative analysis as tools for drawing out the perceptions of those who lived in the streets.

Hopper (1991) reviewed a history of societal perceptions about homeless people and societal actions in response to homelessness. The author described dynamic and changing perceptions of the homeless as drunks, substance abusers, shiftless dependents on handouts, and criminals. A variety of approaches from medieval times to the present have resulted in the homeless being, jailed or run out of town or taken in by churches and other benevolent organizations. Hopper challenged the position held by some that the rapid growth of shelters in the 1980s, somehow fueled the rapid growth in the number of homeless individuals during the same period. Hopper described the homeless as societal victims in need of societal interventions such as affordable housing, housing assistance, quality physical and mental healthcare services, and appropriate social services and benefits. The growth in numbers of homeless individuals and families in the 1980s sparked the interest of researchers who developed a significant body of research from the early 1980s to the present.

This research uncovered a changing mix in the makeup of the homeless population, their life circumstances, and the factors that contributed to their homelessness. Rossi (1989) chronicled a shift in the nation's homeless population from older white males living in skid row housing to a younger, larger group that included many more women, children and minorities. The author and a team of researchers studied the street-dwelling and sheltered homeless population in the streets of Chicago in 1985 and 1986 in one of the first systematic efforts to count the homeless. The author's work suggested that the national homeless population was far lower than thought —300,000 to 500,000 people instead of the two million to three million often cited.

For Rossi (1989), the major problem with getting an accurate count of homeless individuals in any city is the transient nature of their domicile from day to day. While Rossi described any amount of homelessness a “national disgrace” (p. 49), he pointed out that activists and policy makers exaggerate counts looking for funding. Rossi asserted that homelessness is a condition that most likely affects less than 0.10 % of the adult population. He stated that because the homeless population is small and difficult to locate compared to the domiciled population, it is an expensive population to study. For example, a researcher cannot mail a survey to or telephone homeless people in any dependable way. It is also difficult to create random samples of rare populations. While Rossi's work was quantitative and statistical in nature, other researchers sought to understand homeless street people by infiltrating their culture to gain insights into their living conditions and perceptions.

Snow and Anderson (1993) conducted an ethnographic study of homeless street people in Austin, Texas. The authors asserted that the majority of studies conducted in

the 1980s focused on demographics and disabilities and did not draw out the lived experiences of homeless individuals. The researchers immersed themselves in the culture of the street homeless in Austin, Texas and got to know homeless individuals personally. For example, Snow and Anderson asserted that past researchers assumed that homeless individuals trying to meet basic needs at the bottom of the Maslow's hierarchy are not concerned with salvaging a positive self-image. However, Snow and Anderson concluded that many homeless street people employ strategies to salvage a semblance of positive self-image. Their ethnographic study in which they immersed themselves into the culture of street-homeless individuals provided valuable insight into the perceptions of the street homeless and the homeless living in shelters. However, the authors' work did not look at the perceptions of homeless individuals who had successfully transitioned to self-sufficiency. Successful intervention strategies to help adult homeless individuals transition to self-sufficiency depends on drawing out the perceptions of these individuals as to those factors that helped and those factors that hindered their transition from homelessness to self-sufficiency.

Snow and Anderson (1993) were interested in discovering what factors contributed to the onset of episodes of homelessness for individuals and what contributed to the rapid increase in the incidence of homelessness in the 1980s. The authors concluded that the overriding reason for the explosion in numbers of homeless people on the streets and in shelters in the 1980s was the loss of affordable housing. The authors concluded that the reduction of support for affordable housing during the Reagan administration and the proliferation of inner-city renewal projects in the same period,

resulted in the loss of single-room occupancy rooms (SROs) for countless at-risk domiciled poor individuals rendering many of these individuals homeless.

The various methods used to count the number of homeless individuals living in the United States remained controversial throughout the 1980s. Hombs and Snyder (1982) estimated the number of homeless in the United States to be 1.5 million in the early 1980s. However, Jencks (1994) asserted that while the number of homeless individuals in the United States increased dramatically in the 1980s, in the late 1980s the population was closer to 400,000, which compares favorable to the estimates of Rossi (1989). Jencks cited mental illness, drug and alcohol abuse, and the decline of single-room-occupancy hotels as the primary causes of homelessness. Jencks supported the notion that deinstitutionalization of the mentally ill played a large role in the increase in homelessness during the 1980s. Rossi argued that whether the number was 1.5 million or 500,000, the problem of homelessness qualified as a major social issue that would require sound research in order to launch successful intervention strategies.

Kautz and Cochran (2010) documented that the demographics of homelessness had changed since the 1980s to include more women, children, and families and proportionally fewer single men. The literature includes extensive statistical data on the characteristics of homeless individuals and groups. It documents the factors that combine to cause homelessness. The literature includes the observations from popular ethnographic studies that provide insight into the perceptions of homeless individuals living in the streets and shelters of America (Yankowski, 2010). Missing from the literature are the lived-experiences and perceptions of those who have successfully transitioned from homelessness to self-sufficiency. Gaining insight into the perceptions

of those who have successfully transitioned from homelessness to economic self-sufficiency is important to others who would seek a successful route out of homelessness and to those who would design interventions to help homeless individuals navigate this journey. It is also critically important to understand the causes and contributing factors to homelessness.

### Causes and Contributing Factors to Homelessness

A number of researchers have examined the factors that contribute to the problem of homelessness. Rossi (1989) studied the individual and societal causes of homelessness. Rossi attributed the rapid growth of homelessness in the 1980s to the steady loss of affordable housing during that period. A decline of day labor needs in urban areas during the 1970s and 1980s also contributed to the growth of the homeless populations. The loss of affordable housing, according to Rossi, was especially hard on minorities and disabled individuals.

Snow and Anderson (1993) conducted an ethnographic study of homeless street people in Austin, Texas. The authors asserted that the majority of studies conducted in the 1980s focused on demographics and disabilities and did not draw out the lived experiences of homeless individuals. The researchers lived with the street homeless in Austin, Texas and got to know the homeless individuals they met personally. The authors work revealed that many homeless street people employ strategies to salvage a semblance of positive self-image. This is not what researchers who prescribe to Maslow's hierarchy of needs might conclude. The literature includes evidence that past researchers assumed that homeless individuals trying to meet basic needs at the bottom of the hierarchy are not concerned with salvaging a positive self-image. Insight into how the experience of



homelessness affects self-concept and identity in homeless individuals is important for researchers seeking to understand homeless individuals' aspirations for a future absent of homeless episodes. Understanding homeless individuals' perceptions about aspirations for an economically self-sufficient future may provide clues to those trying to make this transition and to those trying to help them.

Researchers noted many factors outside the control of individuals that may contribute to an individual's descent into homelessness. Similar to the findings of Rossi (1989), Snow and Anderson (1993) concluded that the overriding reason for the explosion in numbers of homeless people on the streets and in shelters in the 1980s was the loss of affordable housing. The authors concluded that the reduction of support for affordable housing related to the policies of the Reagan administration and the proliferation of inner-city renewal projects in the same period, resulted in the loss of single-room occupancy rooms (SROs) for countless at-risk domiciled-poor individuals rendering many of these at-risk individuals homeless.

Since Anderson's (1923) studies in the 1920s, the homeless population in the United States has changed from an exclusively adult male population to a population that includes many women and children. Mills and Ota (1989) studied a group of homeless women with minor children in the Detroit metropolitan area in order to understand better the characteristics of this group and the factors that influenced their homelessness. The authors reviewed emergency shelter intake records for 87 families. Mills and Ota concluded that homelessness in mothers with minor children is most closely related to: (a) eviction of the homeless mother from housing she can no longer afford, (b) the homeless mother fleeing or being evicted due to domestic conflict, or (c) the homeless

mother fleeing unsafe living conditions. The authors also concluded that children in homeless families are at high risk for dropping out of school, in part because of the transient patterns of housing for the mother. Mills and Ota acknowledged a limitation of their study. The authors stated that the area from which they drew their sample of homeless families was predominately African-American and, therefore, the results of their study may not generalize to non-African-American groups. The authors' study also did not include homeless males. Nevertheless, it is important for researchers studying homelessness to be aware of the possible contributing factors of early life experiences to subsequent episodes of homelessness later in life.

The factors that lead to episodes of homelessness for an individual can be complex. There exists no little disagreement about the most important contributing factors. Jencks (1994) examined the standard explanations for the causes of homelessness paying special attention to the increased rate of homelessness experienced in the United States in the 1980s. He found that the deinstitutionalization of the mentally ill, the invention of crack cocaine, rising joblessness among men, declining marriage rates, cuts in welfare benefits, and the destruction of skid row have all played a role. Jencks challenged the findings of Rossi (1989), and Snow and Anderson (1993) concluding that changes in the housing market had less impact on homeless rates than many researchers had claimed noting that federal housing subsidies actually doubled during the 1980s.

Researchers looked at the degree to which mental illness contributed to the problem of homelessness. Because of a gap in the research on homelessness, for those who had never experienced mental health issues, some researchers decided to look more

closely at this group. Caton et al. (2000) sought to identify the risk factors, independent of mental illness, that lead to homelessness, for the purpose of laying the groundwork for effective intervention strategies. Caton et al. conducted a matched case-control study of 200 newly-homeless men and women and 200 indigent men and women with no history of mental illness and no history of homelessness. The research team also looked at differences by gender. In the homeless sample, greater numbers by both genders lacked a high school diploma when compared to the never-homeless group. The researchers found that prior history of treatment for substance abuse played a greater role in homelessness in women than it did in men. Caton et al. found that the lack of family financial support was much greater in homeless men and women than in the poor but never-homeless sample. For adult homeless men, Caton et al. found that lack of education and lack of family financial support were key contributing factors related to their first episode of homelessness.

There exist some noteworthy subgroups within the homeless population. Researchers posited that a diversity of characteristics and contributing factors to homelessness in these groups might be important to intervention strategies. Gamache et al. (2001) drew upon data from previous surveys to compare veterans and non-veterans from different age and race cohorts. Gamache et al. found that veterans of all eras are disproportionately represented among sampled populations of homeless men. Veterans from the first years of the all-volunteer army had the highest levels of homelessness according to surveys from 1987 and 1996. The authors posited that less educated candidates, with fewer social supports, were recruited in the first years of the all-

voluntary military, resulting in decreased ability to compete for jobs after discharge from military service. The authors did not test this hypothesis as part of their study.

However, in 2002, Tessler, Rosenheck, and Gamache compared homeless veterans with homeless non-veterans from different eras in order to understand better the connection between military service and urban homelessness. Tessler et al. analyzed data from 4000 applicants based on four years of enrollment in a federally funded program to test strategies that support cooperation among agencies servicing the homeless mentally ill. The authors collected data on participants' military service, age, gender, education, ethnicity, and marital status. The authors also collected data on participants' histories of medical and mental illness, incarceration, family stability, and episodes of homelessness. The authors sought to determine whether the benefits offered to veterans advantaged homeless veterans over homeless non-veterans. The authors also wanted to know whether those drafted into military service were different in any way, relative to their experience of homelessness, from those who volunteered for military service. The authors' findings replicated earlier studies showing that homeless veterans tend to have more resources compared to homeless non-veterans. Although veterans from the all-volunteer force era are different in many ways from veterans from the era of the military draft, the introduction of the all-volunteer military does not seem to have caused these differences. This is a different finding from past studies by the authors and others.

Kennedy (2007) looked at another important subgroup of the homeless population. The author examined the relationship between homelessness, violence exposure, and school participation within a sample of poor adolescent mothers living in an urban environment. Using surveys and interviews, the author gathered information on

the mothers' race, ethnicity, number of children, receipt of public assistance, exposure to violence, and participation in school. Kennedy found that exposure to violence had a significant impact on the rate of subsequent homelessness for adolescent mothers. Homeless adolescent mothers exhibited poor school attendance rates. Though Kennedy's study did not include young men, her work suggested the possibility of similar contributing factors in the incidence of homelessness among young men. This notion is supported by the work of Kim, Ford, Howard, and Bradford (2010) who found that a history of physical and sexual trauma in young adult males is a significant predictor of mental health problems and homelessness in men.

#### Strategies for Addressing Homelessness

Jencks (1994) proposed several practical approaches to helping the homeless. Jencks asserted that dormitory-type shelters do not offer the best solution for a population characterized by alcoholism, drug abuse, and mental illness. He proposed government-funded shelters with efficient, affordable, individual units that would offer safety, privacy, and even a minimal sense of one's own space. Not confining his mission to studying the homeless, Jencks proposed several practical approaches to helping the homeless. He challenged the notion that full-time employment, permanent shelter, and the involuntary commitment of the mentally ill are the most pragmatic methods of helping homeless individuals become financially independent. He attributed the proliferation of mentally ill homeless people both to liberal policies boosting individual autonomy and to conservative policies that cut mental health budgets. He suggested that being born disadvantaged, coupled with lack of support leads to the streets. Jencks recommended increased welfare payments or subsidized housing for families; a day-labor

market supported by government and private sources for working adults; and social services and intervention for the mentally ill.

Goetz and Schmiede (1996) researched the effectiveness of job training and integrated case management in reconnecting homeless individuals with mainstream society. Thirty homeless men and women learned basic construction skills in a program funded by the United States Department of Labor. A cooperative including researchers, local homeless shelters, local construction trades, and local social and medical service agencies, provided job training and coordinated services to a group of motivated adults who were homeless. The authors' purpose was to evaluate the success of the HEART program. Goetz and Schmiede sought to demonstrate the effectiveness of this program that included jobs-skills training, job search assistance, agreements with local contractors to hire qualified graduates, and intensive case management to address food, housing, medical, and psychological services. Eighty-one percent of the study participants found jobs with local contractors after 10 weeks of training. Sixty-five percent of the graduates who found jobs also found permanent housing after the 10-week study. One weakness in the authors' study is the lack of follow-up to evaluate long-term job retention. Goetz and Schmiede also failed to mention whether or not government funding helped to subsidize wages provided to participants by building-trades contractors. This research is valuable to this researcher's study because it deals directly with the evaluation of programs designed to reconnect homeless adults with productive lives and economic self-sufficiency.

Help for the homeless is often sporadic and uncoordinated. Rosenheck et al. (1998) studied the effectiveness of service integration in helping the homeless mentally ill gain access to services and housing. The authors tested the hypothesis that greater

integration of services and coordination between agencies serving the homeless are associated with improved delivery of services and improved housing outcomes.

Rosenheck et al. obtained data from a previous study. The previous study included data on baseline client characteristics, service use, and three-month and 12-month outcomes from over 1800 clients seen at a number of service sites during the first year of the program. The authors found that service system integration was associated with superior housing outcomes at 12 months. This success was mediated through a coordinated cooperation between housing agencies. Rosenheck et al. concluded that service system integration is related to improved outcomes in finding housing for the mentally ill homeless. The authors listed several limitations to their study, one of which was the way data was gathered in order to assess the degree of cooperation between service agencies. The authors relied on raters' judgments, but made no attempt to validate raters' judgments.

Job-readiness training is a potential facilitator for a homeless individual's transition to self-sufficiency. Job-readiness training can be especially challenging for those individuals who are homeless and mentally ill. Cook et al. (2001) studied the vocational outcomes of 4,778 formerly homeless severely mentally ill individuals enrolled in the Access to Community Care and Effective Services and Support (ACCESS) program funded by various departments of the United States government. The ACCESS program was deployed to help improve access to community services by homeless men, women, and families. The authors interviewed participants at the time of enrollment in the ACCESS program and then at regular intervals for 12 months. At 12 months, the authors assessed the types of services used by participants over the previous

60 days and participants' employment status. Cook et al. found that at the 12-month mark, individual participants who were employed were more likely to have received job training and job placement services than participants who were not employed. The authors cautioned that this relationship may have been biased by the fact that those already predisposed to seek work may have been selectively preferred by agencies providing job training and placement. Cook et al. concluded that job training and job placement services to the homeless mentally ill are nearly as important as housing and clinical treatment. The work of Cook et al. is valuable for this researcher's study, which focuses on the perceptions of formerly homeless adult males and their perceptions about successful strategies for reconnecting homeless men, including those with severe mental illness, to productive lives.

Researchers examined the relationship of past trauma to episodes of homelessness experienced later in life. If past trauma plays a role in later episodes of homelessness, then addressing this trauma with appropriate intervention strategies becomes important and strategies that merely address the absence of housing may not be enough to prevent future episodes of homelessness. Taylor and Sharpe (2008) studied post-traumatic stress disorder among homeless adults in Sydney, Australia. The authors sought to determine whether the onset of post-traumatic stress disorder preceded the first episode of homelessness or was a result of the experience of homelessness. Taylor and Sharpe found a high incidence of childhood physical and sexual abuse and other trauma in the homeless adults sampled. The trauma rate among homeless adults sampled was nearly twice that reported in the general population. The incidence of post-traumatic stress disorder was much higher in the homeless adults sampled than in the general population. Both trauma



and post-traumatic stress disorder preceded the first episode of homelessness in most of the homeless adults sampled. The authors concluded that providers of services to address homelessness must take into account the experiences of homeless adults with trauma early in life and the homeless individual's ongoing exposure to trauma during episodes of homelessness. Taylor and Sharpe noted that they were unable to demonstrate a causal relationship between trauma and homelessness.

For those who would design strategies to help homeless individuals transition to self-sufficiency, it is important to consider the heterogeneous nature of the homeless population. Seidner, Burling, Fisher, and Blair (1990) studied a group of homeless veterans in order to understand better this relatively homogeneous sub-group of the overall homeless population. Seidner et al. stated that because of the heterogeneous nature of the homeless population in general, interventions to address the factors that lead to and perpetuate homelessness often fail because needs vary across different homeless sub-groups. The authors conducted a descriptive study of individuals who applied by telephone to a residential rehabilitation program for homeless veterans. The homeless veteran participants in this study were younger, better educated, with a higher rate of previous employment than the non-veteran homeless sample to which they were compared. Homeless veterans also used medical services, substance abuse services, and psychiatric services at a greater rate than the comparison group of non-veteran homeless adults. The authors identified the non-random nature of their sampling as a possible limitation, but explained that their sample was purposive in nature. The work of Seidner et al. points out the value of focusing on distinct sub-groups through descriptive study methodology. The authors' findings support a position that homeless adults are not a

homogenous group. Researchers must use caution when generalizing conclusions about homeless adults using data from a particular sub-group of homeless individuals.

When seeking to help homeless individuals transition to self-sufficiency, helpers must address the risk that those they are trying to help may leave programs early unprepared to succeed. Nuttbrock, Ng-Mak, Rahav, and Rivera (1997) studied factors that might predict attrition among adult homeless mentally ill chemical abusers referred to residential treatment programs. The authors randomly referred participants to either a therapeutic community designed to treat mental illness and substance abuse, or to one of several community residence programs. Nuttbrock et al. defined a therapeutic community as an intensive, directed community, insulated from the outside world, in which residents interact by design, providing support for each other as directed by therapists. The authors described a community residence as a place to live while treatment services are provided by regular community sources. Nuttbrock et al. measured participants' rate of attrition from the residential program and various degrees of mental illness present in participants. From an initial sample of 694 participants, 147 were rejected for admission at their assigned facility; 247 failed to show up for treatment; and 212 dropped out at some point during the 12-month study. Contrary to the authors' expectations, those participants with more severe mental health issues were admitted to treatment and stayed longer at therapeutic communities than at community residences. The authors concluded that when planning interventions, clinicians should consider the therapeutic community approach over the community residence treatment approach. The study by Nuttbrock et al. supported the potential value of therapeutic communities over community-residence-based intervention for homeless mentally ill chemical abusers.

Meadows-Oliver, Sadler, Swartz, and Ryan-Krause (2007) studied 17 homeless teenage mothers in order to understand better the stresses experienced by homeless teenage mothers and the sources of support available to homeless teenage mothers. The authors also wanted to lay the groundwork for more effective prevention of homelessness in teenage mothers and more effective intervention for teenage mothers who are already homeless. Participants completed surveys designed to assess depression, self-esteem, maternal competence, and sources of stress and support. The authors found that homeless teenage mothers had positive scores for maternal competence and self-esteem. This was a different result than the authors expected. However, when compared to teenage mothers who were not homeless, the homeless teenage mothers were more depressed, had experienced more negative life events, and had fewer social supports.

Meadows-Oliver et al. (2007) concluded that homeless teenage mothers experience complex life stressors and basic-needs anxieties. The authors also concluded that homeless teenage mothers represent a high-risk group with few available supports. The authors recommended that interventions designed to help homeless teenage mothers include provisions for basic needs and education opportunities for both mother and child. Interventions that include these provisions may also help to prevent future poverty and homelessness in the children of homeless teenage mothers. This study by Meadows-Oliver et al. is important to this researcher because early intervention with homeless teenage mothers represents a significant opportunity to prevent future homelessness. Childhood experiences of homelessness may have contributed to later-life homelessness for the adult men who are the subject of this researcher's study. For that reason the

research of Meadows-Oliver et al. informs this study on the perceptions of adult males who have transitioned from homelessness to self-sufficiency.

Researchers looked at some tools available today to help the homeless connect to the world; tools that were not available in any meaningful way before the 1990s. Miller et al. (2005) studied the meaning of computers to a group of homeless men living in a long-term shelter. The authors interviewed seven homeless men who had recently completed an eight-week work-readiness program and assessed participants' perceptions about computers. Participants reported having only sporadic access to computers before the study. The authors posited that because participants' access to computers was most often in public areas, participants avoided using the public-access computers because of a fear of embarrassment due to incompetence. Participants reported much less anxiety about accessing public computers following the study, training period. During the study-training period, participants learned basic computer and software skills. Participants reported that newly learned computer skills provided a sense of pride and competency, and access to computers provided a sense of connection to the world through the internet. Participants reported that they most often used the internet for access to email, online news, job postings, and healthcare information. There were only six participants in the study by Miller et al., and the sample was neither racially nor ethnically diverse. A similar study with a larger, more diverse group of participants might prove valuable. The work of Miller et al. informs the work of this researcher because it addressed the perceptions of homeless adults regarding computers. Computer literacy is a key focus of the mentoring program for homeless adult males at the subject shelter for this

researcher's study and, therefore, has the potential to have played some role in the transition of the homeless adult men in this study to self-sufficiency.

Substance abuse is often a part of the lived-experience of those who have experienced episodes of homelessness. Malcolm (2004) studied the relationship between self-esteem and substance abuse in homeless men. According to the author, research by others with high school and college students, supported the notion that strategies to raise self-esteem are effective in reducing substance abuse. Malcolm sought to determine if research relating self-esteem and substance abuse in high school and college students could be generalized to adult homeless men. Malcolm used secondary analysis methodology to evaluate experimental data involving 305 adult homeless males. The author hypothesized that the relationship between self-esteem and substance abuse found in high school and college students could be generalized to homeless men. The results of Malcolm's study did not support his hypothesis. Intervention treatment did not raise participants' self-esteem. For participants' who scored high on self-esteem tests, higher self-esteem was not related to a lower incidence of substance abuse. Malcolm concluded that treatment strategies for homeless adult males that focus on raising self-esteem cannot be expected to lower the incidence of substance abuse in homeless adult males. Malcolm's research is useful to this researcher's work because Malcolm showed that strategies used to raise self-esteem and reduce substance abuse in high school and college age individuals do not generalize to homeless adult males.

One of the factors that can contribute to the experience of those who are homeless is the perceptions of others about the homeless. Phelan, Link, Moore, and Stueve (1997) studied and compared general-population participants' attitudes toward the homeless and

the domiciled poor. The authors' experimental study exposed participants to one of four vignettes involving a 30-year old poor man who was depicted in varying combinations as homeless, poor but living in a domicile, and mentally ill. The authors sampled a population with demographics similar to the general population in a city diverse by race and ethnicity. Five hundred and forty-four respondents answered questions while exposed to an audio vignette over the phone. The authors sought to determine if respondents stigmatized the homeless poor more or less than the domiciled poor. The general public as shown in previous studies, stigmatize the domiciled poor as lazy, uneducated, opportunists, especially those collecting social welfare. Phelan et al. wondered if the homeless poor would experience less stigmatization because of the media's attention to their plight and the tendency for the general population to support food drives and other efforts aimed at the relief of oppression for the homeless. The authors found, however, that respondents stigmatized the domiciled poor man in their vignette and the homeless poor man even more. This study is valuable to this researcher's study because it reveals an additional potential barrier for those trying to transition from homelessness to self-sufficiency. On the other hand, the negatives of this stigmatization might also be a valuable motivator for certain motivated homeless poor to work even harder to move from homelessness to self-sufficiency.

In addition to the perceptions of the general population about the homeless, of special importance are the perceptions about the homeless of those who provide services to the homeless. Kane, Green, and Jacobs (2010) studied the perceptions of a group of social-work students about older and younger male and female homeless individuals. The authors wanted to assess if the perceptions of future social-service workers toward the

homeless might be influenced by the age or gender of a homeless individual. The authors exposed participants to four vignettes in which a character was identified as an older male, an older female, a younger male, or a younger female. The character in each vignette was shown alone, walking along a highway, and appearing disheveled, thin, and frail. Of the 207 student participants exposed to the vignettes, most concluded the character in each vignette to be mentally ill, neglectful of health, and probably carrying a disease like HIV or hepatitis. Participants were more likely to identify the older man in the vignette as a substance abuser or as a military veteran suffering from mental illness. Participants were more likely to describe the older woman in the vignette as a victim of economic misfortune. The authors found that participants' responses were influenced primarily by gender or age on seven out of 41 questions in the survey instrument. Kane et al. acknowledged one limitation of their study. The authors did not question participants about their past experiences with homeless individuals, and past experiences may have influenced participants' responses. The research by Kane et al. is valuable for this researcher's study because it provides insight into how perceptions about homeless individuals can be influenced by the homeless person's gender or age.

When considering *what* intervention strategies to employ, it is also important to determine *when* to intervene and for *how long*. Lennon et al. (2005) reanalyzed data from an earlier study of mentally ill homeless men in a critical time intervention (CTI) program. The authors made use of a technique called latent class growth analysis to see if it was useful in understanding outcomes for individuals subject to intervention. In an earlier study, 96 men leaving a shelter's psychiatric treatment program were randomly assigned to experimental and control groups. The experimental group received CTI

services. The control group received normal follow-up services. Participants' housing circumstances were tracked over 18 months. Lennon et al. subjected data from this earlier study to reanalysis. For the purpose of their study, Lennon et al. defined homelessness as one night or more of homelessness in a 30-day period.

Lennon et al. (2005) found intervention effects not apparent in the original study. During the 18-month tracking period, mentally ill formerly-homeless men were more successful at avoiding a recurrence of homelessness when they participated in CTI services. The positive effect of CTI services to help mentally ill formerly-homeless men avoid a recurrence of homelessness was not evident in the original study. These benefits only came to light with the authors' reanalysis of the original study's data using latent class growth analysis. The authors concluded that the use of latent class growth models improved intervention evaluation. The authors' study demonstrated the value of critical time intervention as an important intervention strategy.

Sometimes homeless individuals face a complicated array of scattered, uncoordinated services when they are trying to find help. Van Laere et al. (2009) studied homeless adults in Amsterdam in order to identify effective intervention strategies. The typical single homeless person was male and 40 years old often with some combination of significant indebtedness, addictions, and mental and physical illnesses. Participants most frequently reported eviction, relationship problems, and recent release from prisons as pathways to homelessness. The authors concluded that three pathways accounted for the descent into homelessness for a majority of participants. These pathways included eviction from housing due to nonpayment of mortgage or rent, loss of housing due to domestic disputes, and lack of housing for prisoners released from prison. Participants



reported difficulties related to a lack of clarity about where to find services and lack of coordination between social-service providers. The authors recommended one-stop access to publicly-supported social and medical services for at-risk individuals before and during homelessness in order to address the economic, social, and medical problems that lead to and perpetuate homelessness.

The lived-experience of homeless individuals may include serious consequences related to poor availability of quality medical care. Hwang (2011) studied mortality among homeless men in Toronto. The author determined the mortality rate for a sample of homeless men in Toronto and compared this rate with the mortality rate for the general population of men in Toronto. The author also compared the mortality rate for homeless men in Toronto with mortality rates for samples of homeless men in Boston, New York, and Philadelphia. The author found that the mortality rate for the sample of homeless men in Toronto was greater than the mortality rate for the general population of men in Toronto. The author also found that the mortality rate for the sample of homeless men in Toronto was less than the mortality rate for homeless adult male participants in Boston, New York, and Philadelphia. Hwang surmised that lower homicide rates in the general adult male population in Toronto, compared to homicide rates in the general adult male population in Boston, New York, and Philadelphia, may be a factor in the lower mortality rate for homeless men in Toronto compared to the mortality rates for homeless men in Boston, New York, and Philadelphia. The author acknowledged that the absence of female homeless participants was a limitation of this study. The author's work is valuable to this researcher's study because it addresses elevated mortality rates among the homeless.

Caton et al. (2000) researched the risk factors for homelessness among urban adults without dependent children and with no history of mental illness. The authors stated that most of the homeless adults in the United States have never been hospitalized for psychiatric reasons. The researchers sought to identify the risk factors, independent of mental illness, that lead to homelessness, for the purpose of laying the groundwork for effective intervention strategies. Caton et al. conducted a matched case-control study of 200 newly-homeless men and women and 200 indigent men and women with no history of homelessness. The research team also looked at differences by gender. In the homeless sample, greater numbers by both genders lacked a high school diploma when compared to the never-homeless group. The researchers found that prior history of treatment for substance abuse played a greater role in homelessness in women than it did in men. Caton et al. found that the lack of family financial support was much greater in homeless men and women than in the poor but never-homeless sample. The authors recommended high school equivalency education and job training as important strategies to address risk factors. In addition, they recommended ready access to substance abuse counseling and separate housing away from others who are abusing substances. The work of Caton et al. is important to this researcher's study because it demonstrated relationships between a poor education, substance abuse, lack of familial support, and homelessness.

How homeless individuals cope with their homelessness is of special interest when trying to understand the perceptions of those who have transitioned to self-sufficiency. Amato and McDonald (2011) examined factors that cause men to become homeless and coping strategies that men use to deal with homelessness. The authors' purpose was to gain information that might help improve services for homeless men.

Amato and McDonald studied a group of 189 homeless men who staying at a large shelter. The authors found that participants reported alcohol abuse, joblessness, and domestic conflict as factors causing participants to become homeless. A small number of the participants reported disability, possession of a criminal record, and mental illness as factors causing them to become homeless.

Amato and McDonald (2011) measured help-seeking behaviors. Seventy percent of participants reporting feelings of shame when asking for help. The authors also measured predisposition toward violence and gender-role conflict and found that younger homeless men who had used drugs were more prone to violent thoughts and behaviors. Participants of all ages who scored high on a test designed to measure predisposition to violence also scored high on a test designed to measure gender-role conflict. The authors reported their failure to accommodate participants who did not read or speak English as a limitation of their study. This study by Amato and McDonald informs this researcher's study about the perceptions of homeless men who have transitioned to self-sufficiency because it examined risk factors that lead to homelessness from the point of view homeless men. The authors' work also informs this researcher's study regarding factors that influence the help-seeking behaviors of homeless men.

Abdul-Hamid and McDonald (2009) studied a group of homeless men in New York and a group of homeless men in London in order to compare the services received by homeless men in the two cities. The authors compared 38 men in a New York City shelter to 101 men in several hostels for the homeless in London, paying particular attention to the nature and severity of mental health problems, psychiatric service needs, and the quality of psychiatric services received by the two groups. The New York City

homeless participants were generally younger and had higher rates of substance abuse than did the London homeless participants. New York participants stayed at the shelter for less than a year while London participants lived in hostels for the homeless for almost eight years on average. The authors found that the New York City shelter was much more structured with more institutional controls than the London hostels which are characterized by much more self-governance. The authors found that the sample of homeless men in New York City had less access to necessary psychiatric services than the sample of homeless men in London. Abdul-Hamid and McDonald warned that shelters are creating a new institutionalized population in the United States, but their research did not demonstrate this relationship. The authors' research informs this researcher regarding the potential value of a less structured setting over a more institutional setting and provides a cue to look for participants' perceptions in this researcher's study about structure and self-governance as factors in facilitating or hindering transition from homelessness to self-sufficiency.

#### Lived Experiences of Homeless Individuals

Boydell, Goering, and Morrell-Bellai (2000) studied the perceptions of 29 shelter-dwelling single homeless adults. The authors used qualitative methodology with structured and semi-structured interviews with content analysis to explore participants' lived-experiences and their individual concepts of self. Participants' responses revealed continuously developing self-concepts grounded in the past, present, and future. Participants communicated pride about past jobs they had held, past athletic or academic achievements, people they had met. Participants mentioned their children's

accomplishments even when participants were estranged from these children. Participants shared perceptions about hopes, dreams, beliefs, and understandings about self.

Boydell et al. (2009) also explored the ways in which homelessness damages notions of self and identity. The authors looked at the hierarchy of identity homeless single adults employ to cope with their feelings about being homeless. The authors reported that newly homeless adults often refuse to identify with the chronically homeless. The newly homeless cited misfortune or mistakes as the reason for their own temporary situation. The newly homeless seemed to distinguish themselves from those who have apparently conceded that they are homeless people. The authors' work provides evidence that individual homeless single adults are continuously rethinking their concept of self as it is influenced by the past, presence, and hopes for a better future. The authors posited that because of this dynamic and continuous rethinking, in many cases, homeless single adults may be motivated to exploit opportunities to plan and work toward the realization of realistic hopes to transition from homelessness to self-sufficiency.

Snow and Anderson (1993) documented ethnographic studies with homeless individuals and described the various career paths (p. 276) these individuals follow. Some extricate themselves from the streets quickly while others remain chronically homeless. Still others experience periodic episodes of homelessness over many years. The authors documented that a lack of affordable housing and inadequate income to meet sustenance needs, combined with a lack of familial support, are the major factors that lead to episode of homelessness. The authors concluded that a successful and sustainable transition from homelessness to economic self-sufficiency involves "cutting through a complex of

interrelated entanglements that include a mix of resources deficiencies, institutional dynamics, social ties, and cognitive factors” (p. 299).

Missing from the work of Snow and Anderson (1993) is the voice of those who have successfully transitioned from homelessness to economic self-sufficiency. Drawing out the perceptions of those who have extricated themselves from the street for a sustained period, will fill in some significant gaps related to understanding the perceptions of those who have transitioned to self-sufficiency. This was the focus of this researcher’s study.

CHAPTER III  
METHODOLOGY

Introduction

The purpose of this phenomenological multicase study was to explore with a sample of formerly homeless adult males their perceptions about their lived-experiences before, during, and after episodes of homelessness. Specifically, the researcher sought to understand the perceptions of adult males who had successfully transitioned from homelessness to self-sufficiency. The researcher believed that a better understanding of this phenomenon would inform strategies to help other homeless men transition from homelessness to self-sufficiency.

In seeking to understand this phenomenon, the researcher addressed three research questions:

1. What is a sheltered homeless adult male's perception of his life experiences and circumstances before, during, and after his experience with homelessness?
2. What is a sheltered homeless adult male's perception of actions he took that helped him move from homelessness to self-sufficiency?
3. What is a sheltered homeless adult male's perception about the help he received from others and particularly from the shelter's mentoring program on his journey from homelessness to self-sufficiency?

This chapter reviews the study's research methodology and covers the following areas: (a) research design and rationale, (b) population and the research sample, (c) data collection methods, (d) data analysis and synthesis, and (e) study limitations. The chapter concludes with a brief summary.

### Research Design

The researcher studied the experiences and perceptions of 10 participants in a Midwestern homeless shelter's mentoring program who had successfully transitioned from homelessness to self-sufficiency. This investigation represents a phenomenological multi-case study using qualitative research methods (Robson, 2002). The researcher considered quantitative methods in order to assess whether factors associated with the shelter's mentoring program correlated positively with the successful transition of some program participants from homelessness to self-sufficiency. The researcher determined, however, that it was important first to understand the lived-experiences of those who had successfully transitioned from homelessness to self-sufficiency.

Quantitative research methods to identify relationships between variables did not offer the prospect of answering this study's research questions (Patton, 2002). The researcher was concerned with how participants experienced, interpreted, and understood the phenomenon of homelessness and their own successful transitions to self-sufficiency and so the researcher looked at qualitative methods.

The researcher sought to enter the world of participants and understand in a holistic way what it is like to be in their world and experience it through discovering and analyzing the perceptions of those who have lived there. Qualitative methodology emphasizes discovery and illumination, uncovering and interpreting the meaning of



experiences (Gibbs, 2012). Understanding the lived-experiences of formerly homeless men was the focus of this research.

Boydell et al. (2000) provided insights into appropriate methodologies to address research questions related to the perceptions of those who had experienced episodes of homelessness. The authors used qualitative methodology with structured and semi-structured interview questions followed by content analysis to explore the lived-experiences of 29 homeless adults and their individual concepts of self. Content analysis of verbatim interview transcripts revealed that participants held a dynamic and continuously developing concept of self, connecting their self-concepts to events in the past and present, and to future hopes and dreams. The authors posited that homeless single adults, given the right opportunity, might be able to exploit opportunities to create and execute a plan to realize their hopes to transition from homelessness to self-sufficiency. The authors' work informed this researcher's research design as to methodology best suited to answer research questions related to perceptions about lived-experiences.

The work of Kvale and Brinkmann (2009) informed the manner in which the researcher conducted, documented, and analyzed interviews. The researcher addressed questions of reliability and validity following the suggestions of established qualitative researchers (Patton, 2002; Miles & Huberman, 1994; Gibbs, 2012) carefully reflecting on biases, listening carefully to participants, and meticulously documenting the researcher's interpretive thinking.

The researcher, informed by the experiences and expertise of other qualitative researchers (Gibbs, 2012; Patton, 2002; Kvale & Brinkmann, 2009) analyzed and

synthesized data from interviews identifying the themes, categories, and meanings that emerged from participants' responses to open-ended questions. The researcher conducted constant comparative analysis making repetitive trips through the text to do open coding, axial coding, and finally interpretive coding (Gibbs, 2012). Each rereading of the text was informed by previous readings much like an archeologist's visits to a certain field site is informed by previous visits.

Because the coding process is also a thinking process, the researcher also continuously revisited the literature throughout this study in order to provide insight into emerging themes and categories (Creswell, 2013). The researcher analyzed the data using open coding to identify themes and categories drawn from the text. Axial coding provided a method to label connections and relationship between themes and categories. Finally, the researcher used interpretive coding to label the meanings of themes, categories, and connections between themes and categories that emerged from the text. The researcher made use of NVivo 10 software to help organize the analytical process (Gibbs, 2012) and to display emerging themes and categories visually to aid the researcher in making interpretations and to aid the reader in following the researcher's logic trail.

### Population

The researcher recruited 10 men who had resided at a homeless shelter in a medium-sized Midwestern city. The men had participated in a mentoring program to help men successfully transition from homelessness to self-sufficiency. For the purpose of this study, self-sufficiency meant that the participant had a legal source of income, had

provided for his own domicile and sustenance, and had done so successfully for at least the 3 months leading up to the interview with no episodes of homelessness.

Sample selection for this study was purposive as described by Robson (2002). The researcher wanted to assess participants' perceptions about how they successfully navigated the transition from homelessness to self-sufficiency. Robson explained that purposive sampling does not attempt to achieve random assignment of members of a population to the study sample. However, Patton (2002) and Gibbs (2012) described the importance of guarding against researcher bias. Therefore, the researcher decided to select interview candidates, based on a random ordering of all 154 men who had participated in the mentoring program at the shelter between January and May 2012. The researcher sought to guard against biases that might influence candidate selection.

At the beginning of the study, after identifying the population of 154 mentoring program participants, the researcher randomly assigned each member of this population to a candidate list. The researcher surveyed the population with a survey instrument (Appendix A) designed to assess each individual's availability and willingness to participate in the study and whether or not they met the study's criteria of economic self-sufficiency. The researcher used this information and the random order assigned to each individual to select the 10 participants for in-depth interviews. Participants were selected into the sample of 10 if they: (a) responded to the survey, (b) met the criteria for self-sufficiency, (c) were willing to participate in Phase II interviews, and (d) were in the lowest 10 ordering positions that met criteria (a) through (c), and at the time of invitation were actually available for interviews. The researcher selected a sample size of 10 for practical purposes. There are no clearly established guidelines for multicase study sample

size, but a sample size of 10 is consistent with multicase study methodology discussed by most respected qualitative researchers (Gibbs, 2012; Patton, 2002; Robson, 2002). The researcher collected demographic data using the Phase I survey and confirmed this data during Phase II interviews. Table 1 presents demographic data for study participants.

Table 1.

*Participant Demographic Information*

Pseudonym	Age	Ethnicity	Education Level	Occupation
Bud	50	White	GED	Handyman
Will	48	White	HS Diploma	Maintenance
Kelvin	28	Hispanic	HS Diploma	Assembler
Vindell	23	White/Hispanic	HS Diploma	Assembler
Cliff	62	African American	HS Diploma	SSI
Scott	49	White	HS Diploma	SSI
Dennis	56	White	HS Diploma	Sanitation
Don	35	White	HS Diploma	Cook
Kevin	52	African American	GED	Handyman
Jim	56	White	HS Diploma	SSI

Note: (1) GED = General Equivalency Diploma; (2) SSI = Supplemental Security Income; n = 10

## Data Collection

Methodology for this study is non-experimental qualitative-descriptive in nature and as such did not identify independent and dependent variables. Rather the collection of data sought to identify themes and categories and build toward an understanding of participants' perceptions related to their experiences with homelessness. This phenomenological multicase study was designed to discover the lived-experiences and perceptions of participants. Data emerged as participants' responded to semi-structured open-ended interview questions. The interview instrument was created by the researcher and was pilot tested with colleagues to ensure clarity of questions. Three colleagues reviewed interview questions and provided feedback regarding clarity. Based on their input the researcher slightly modified a few questions. The researcher modified questions as interviews with participants progressed. The researcher retained questions and revised others in order to ensure that questions elicited responses that addressed the three research questions (Gibbs, 2012; Miles & Huberman, 1994; Patton, 2002). For example, after the first two interviews the researcher realized that the open-ended request, "Tell me about your childhood?" and letting the participant go where they wanted to with the answer was more conversational and encouraged more energetic and informative responses than the number of specific questions in the researcher's interview instrument (Appendix B).

In order to collect data the researcher interviewed participants using semi-structured open-ended questions tied to the three research questions. The work of Kvale and Brinkmann (2009) informed the researcher as to the importance of tying interview questions to research questions and making adjustments to questions in order to elicit

participants' sharing of their own perceptions. The authors suggested that interviewers ask short questions and let interviewees provide long answers, interrupting them only to clarify or redirect when interviewees' answers become repetitive without providing new information. Table 2 provides a sample of interview questions associated with the three research questions. Seidman (2006) recommended 90-minute interviews. In Seidman's view, this helps the participant know the interview has an endpoint while at the same time ensures that the interview is long enough to provide a sense of value to the interviewee. The researcher followed Seidman's advice. Interviews lasted approximately 90 minutes in a private location mutually agreed upon by the interviewer and participants.

Eight of 10 interviews were face-to-face in a private conference room at the shelter. One was in a participant's apartment. The researcher conducted one telephone interview with a participant who lived several hours away from the shelter and worked long hours making scheduling a face-to-face interview difficult. The researcher was concerned about this variance in procedure, but Sturges and Hanrahan (2004) studied the quality of information gathered in face-to-face interviewing compared to telephone interviews. Previous research, most notably using quantitative methodologies, showed that interviews in person provided higher quality data than those conducted by phone. Other researchers were unable to reproduce these results.

Table 2

*Research and Interview Questions*

Research Question	Interview Questions
RQ 1 What is a sheltered homeless adult male's perception of his life experiences and circumstances before, during, and after his experience with homelessness?	<ol style="list-style-type: none"> <li>1. Tell me about the jobs you've had. Successful ones? Disappointments? Regrets?</li> <li>2. What were your hopes and dreams when you were a boy?</li> </ol>
RQ 2 What is a sheltered homeless adult male's perception of actions he took that helped him move from homelessness to self-sufficiency?	<ol style="list-style-type: none"> <li>1. What do you know now that will keep you from being homeless in the future?</li> <li>2. If you were to become homeless again, what do you think would cause it to happen?</li> </ol>
RQ 3 What is a sheltered homeless adult male's perception about the help he received from others and particularly from the shelter's mentoring program on his journey from homelessness to self-sufficiency?	<ol style="list-style-type: none"> <li>1. What people or things helped you most along the way to self-sufficiency (not being homeless, providing for your own needs, getting a keeping a job and a place to live)?</li> <li>2. What groups, agencies, or services were most helpful to you? Describe the ways they were helpful.</li> <li>3. Describe some things that got in the way of your progress from time to time.</li> <li>4. Describe what you can about the Personal Success Program.</li> </ol>

Sturges and Hanrahan (2004) conducted and recorded semi-structured face-to-face and telephone interviews with corrections officers and visitors of inmates at a county jail in a northeastern state in the United States. The authors transcribed interviews and field notes verbatim and analyzed the content for meaning units and themes. The authors found that the quality of data was similar for telephone and face-to-face interviews. They concluded that telephone interviews can be a good option for hard to reach participants, participants desiring a greater sense of anonymity, and for participants answering

questions to sensitive topics. The authors noted that telephone interviews might cause interviewers to miss visual cues. The researcher took note of this while conducting the one telephone interview for this study and during the analysis of the interview contents.

The interviewer called participants by phone to schedule interview sessions at a mutually agreed place and time. The researcher advised participants of the purpose of the interviews, the voluntary nature of the interviews, and of the benefit of the interviews to the researcher and to those interested in helping others transition from homelessness to self-sufficiency. Participants were generally enthusiastic about their insights potentially helping someone else make a successful transition to self-sufficiency. Most participants, in one way or another, expressed satisfaction with the notion that their input could help shelter leaders improve the mentoring program. Interviews with the study's 10 participants occurred between October 2012 and March 2013.

Each interview session began with a description of the purpose of the interviews provided for the participant by the researcher. The researcher then reviewed informed consent documents with participants and answered any questions. Participants acknowledged understanding the purpose and voluntary nature of the interviews, their right to stop the interview at any time with no repercussions, their right to review interview transcripts, and the interviewer's desire that they review transcripts and provide feedback. Participants understood that the researcher would protect the confidentiality of their responses. Participants signed informed consent documents.

The researcher took steps to guard data collection from threats to accuracy and credibility. Seidman (2006) noted that certain strategies help to minimize the effect the interviewer has on participants' meaning-making process. Some specific things the



interviewer can do are: (a) listen more and talk less—silence is a useful tool, (b) avoid interrupting, (c) avoid value judgments, ask participants to pretend the interviewer is someone not known to them, and (d) ask participants to reconstruct their stories and try to ignore what they think the interviewer might want to hear. The researcher, who is the executive director of the shelter, knows the participants in this study because of their time at the shelter. The researcher employed the strategies suggested by Seidman.

The researcher reminded participants that candor was the goal and to try their best to suspend relationships for the sake of sharing their perspectives honestly and openly. The researcher reminded participants that the value of an accurate understanding of their lived-experiences and the potential benefits to others would be enhanced if participants answered openly and honestly. The researcher also reminded participants that their candor would in no way affect their relationship with the interviewer or their good standing with the shelter.

The researcher tried to sense when *interviewer pleasing* could be happening and reminded residents to feel free to share their criticisms and concerns as well. Following the advice of Patton (2002) and Gibbs (2012) the researcher endeavored to practice reflexivity or continuous reflection during each interview session to ensure the interviewer was not intentionally or inadvertently fishing for positive comments about the shelter, the shelter's mentoring program, or the shelter's staff.

Seidman (2006) strongly recommended the recording of interviews and verbatim transcription. Patton (2002) also stated that transcripts should be verbatim. The words of participants represent their thoughts unmodified and these thoughts are the data of qualitative content analysis. The researcher recorded all interviews using a digital

recorder. Recording started at the beginning of the interviews and continued uninterrupted through the end of the interviews. Recordings were clear and intelligible with no quality problems. On average interviews lasted about 90 minutes. Participants seemed eager to tell their stories. The interviewer hired a professional transcriptionist who transcribed audio files verbatim. The researcher uploaded transcript files into NVivo 10 content organization software. The researcher reviewed these transcripts while listening to the audio files. The researcher filled in words missed by the transcriptionist but recalled from field notes or memory. A few other edits were necessary to correct terminology related to the shelter. Where there were omissions the interviewer could not address, the interviewer made no edits.

Kvale and Brinkmann (2009) noted that in qualitative studies, it is acceptable and good practice for analysis to begin during the interview process. It is important for the interviewer to think about emerging themes and meanings and to record these thoughts during data collection. In order to avoid disrupting the flow of interviews, it is best to let the interview be conversational and to use the time after the interview to reflect on emerging themes and record thoughts in a research journal. The researcher reviewed the work of Kvale and Brinkmann only after completing most interviews. The interviewer intentionally did not take notes during interviews in order to remain fully engaged. Some time elapsed before the interviewer listened to the audio files to jot down thoughts from interviews. The researcher recommends that other interviewers adopt a post-interview practice of listening to the audio files immediately followed by reflection and journaling.

Seidman (2006) recommended a three-interview approach. The first interview is designed to gather background information. The second and third interviews are designed

to explore perceptions about life experiences and the meaning of these experiences respectively. Seidman asserted that this is important because interviewers often know nothing about participants at the beginning of the study. In this researcher's study, participants were not strangers but residents of a mentoring program and well known to the researcher. For this study, the researcher did not follow a three-interview approach. The researcher, however, did follow the spirit of Seidman's suggestions in that Phase I surveys were conversational and included background information. Phase II interviews were in depth and explored participants' perceptions about life experiences and the meanings of these experiences. The researcher also conducted follow-up conversations with each of the 10 participants to provide them with their interview transcripts and to clarify facts and meanings. Miles and Huberman (1994) stressed the value of providing feedback to informants to ensure that interview transcripts reflect informants thinking and that conclusions drawn are on target. The researcher followed this advice in order to ensure accurate files for data analysis.

The researcher collected and managed data through:

1. Phase I surveys conducted by phone and in person to collect demographic data
2. Phase II interviews conducted in person to collect data from participants about their perceptions related to the three research questions
3. Audio recordings of sessions transcribed verbatim by a hired professional transcriptionist

4. Proofreading of transcripts by the researcher while listening to audio recordings and conducting first analytical reading
5. Follow up sessions with participants to discuss the accuracy of transcripts and to get feedback on interpretations of meanings
6. Noting of observations, issues, decisions, and interpretations in research log at each stage of the data collect process

The researcher followed these steps throughout data collection and continued noting all observations, issues, decisions, and interpretations throughout data analysis.

#### Analytical Methods

The researcher analyzed verbatim transcripts from the 10 interviews using conventional content analysis to look for *meaning units*, which were then coded, categorized, and analyzed for themes. The researcher used NVivo 10 qualitative data analysis software to assist in organizing data for analysis (Salkind, 2009). The researcher tabulated themes, patterns, and meanings using an iterative constant comparative approach to discover and describe with thickness the lived-experiences and perceptions of participants regarding their experiences with homelessness and in particular their perceptions about how they transitioned from homelessness to self-sufficiency (Gibbs, 2012).

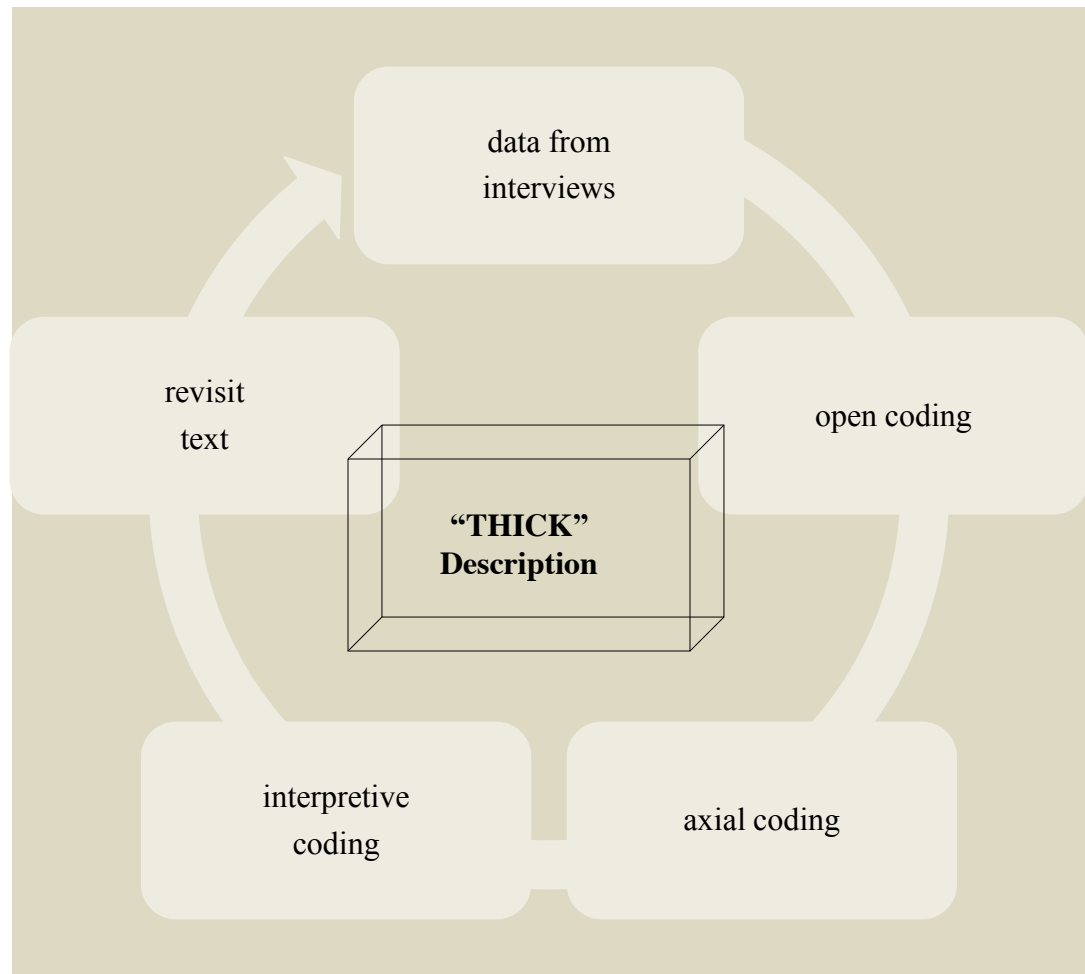
Hsieh and Shannon (2005) described three approaches to qualitative content analysis. Their work informed this study because it clarified which approaches to qualitative content analysis might prove most useful in addressing this study's research questions. Hsieh and Shannon reviewed conventional, directive, and summative approaches to qualitative content analysis. In conventional content analysis, the

researcher's aim is to let the text of interview transcripts reveal meaning units, themes, and meaning clusters without preconceived notions as to what those meanings and themes might be. The objective of conventional content analysis of text is to provide knowledge and understanding of the phenomenon under study. It involves systematic classification through the coding of meaning units, themes, and categories.

Directed content analysis typically draws upon predetermined themes to direct interviewing. Researchers using directed content analysis attempt to assess whether participants' responses support some existing theory. Coding of major themes is determined ahead of analysis based on that theory. Summative qualitative content analysis focuses on the summing up of word counts, giving weight to the frequency of words or phrases as indicative of importance or meaning (Hsieh & Shannon, 2005). The researcher conducting this study made use of elements of conventional content analysis and summative content analysis.

Denzin (1989) strongly supported the use of a variety of methods, multiple observers, and multiple theories to compensate for the intrinsic bias that comes from single-method, single-observer, and single-theory studies. For the purpose of this study, the researcher made use of colleagues to provide triangulation for methods by taking and commenting on the survey and interview instruments (p. 307). Colleagues also provided independent input on coding of themes and meaning units. Finally, the researcher made use of a number of theories, not relying on one particular classical qualitative methodology. The researcher used elements of conventional content analysis and grounded theory in that no predetermined themes or categories preceded analysis (Gibbs, 2012). Themes and categories emerged during analysis and evolved through a number of

iterations of returning to the text. The researcher paid attention to word and phrase frequencies in order to assess the kinds of thoughts and perceptions mentioned most often by participants. Word and phrase frequencies guided the researcher's interpretation and identification of major themes and categories. Figure 1 displays the analytical process used by the researcher.



*Figure 1. Iterative Content Analysis Process*

Content analysis is the active identifying, coding, categorizing, and labeling of patterns and themes in the data (Patton, 2002). A framework begins to emerge and an iterative reflective process to find meanings and relationships proceeds to a point of saturation or until it seems there is no more to learn.

Patton (2002) pointed out that qualitative inquiry uses inductive approaches to develop theories and frame questions. The qualitative researcher plays an active role, getting on the inside of a phenomenon using both inductive and deductive reasoning to discover meaning and patterns, coaxing them from the data. There is a certain competency in pattern recognition that is required when analyzing content from interviews and field notes. Patton defined content analysis generally as qualitative data reduction and sense-making that tries to identify the core meaning of words, phrases, and thoughts. The researcher classified and coded words, phrases, and thoughts preparing the data for interpretive analysis throughout the process, providing a framework upon which to hang themes and ideas that arise from qualitative analysis. From this analysis, the researcher drew conclusions and interpreted findings related to participants' perceptions related to the research questions. The researcher used qualitative methods to assess the "substantive significance" of conclusions and interpretations as opposed to the statistical significance assessed by the researcher using quantitative methods (p. 467).

Miles and Huberman (1994) described the value of displaying meaning units and themes in matrices with cases or participants in order to facilitate the visualization of patterns and relationships. This is not only important for the reader to understand a researcher's findings, but the display of themes and categories visually is important for analysis, helping the researcher to notice theme connections and clusters of meanings. The researcher made use of this approach for analysis and has displayed this work in chapter IV.

Patton (2002) asserted that while quantitative methodologies consider validity, reliability, and statistical significance, qualitative methodologies address the same needs

using terms such as trustworthiness, authenticity, and substantive significance. If the qualitative researcher uses rigor in following a logical, open-minded path, is thorough in describing and documenting this path, and fair-minded in describing limitations, then the researcher may achieve a level of credibility with readers and other researchers. The researcher practiced “reflexivity” (p. 495) or a reflective self-awareness throughout data collection, analysis, and reporting as recommended by Patton. It is impossible to interview participants and analyze transcripts without affecting the outcomes, but Patton asserted that researchers must be reflective about things like, “What do I know? How do I know what I know? How have my perceptions and background affected the data I have collected and my analysis of those data?” (p. 495). The researcher for this study adopted Patton’s suggestions and maintained an auditable trail of rationale for interpretations offered during analysis.

Denzin (1989) posited that one way the qualitative methods researcher can enhance credibility is through a systematic search for negative cases or cases that do not support the evolving patterns or themes. Properly performed and documented, this method demonstrates to the reader and other researchers that the qualitative researcher has worked hard to be open-minded and to let the data tell the story. The researcher actively searched for negative cases and documented the proceedings and conclusions of this search and assessment.

Patton (2002) made it clear that it is not the qualitative researcher’s role to draw conclusions about causes, but conjecture is appropriate and expected so long as the researcher clearly labels his or her positions as conjecture. This differs from Miles and Huberman (1994) who described an elaborate set of logical criteria from which the



qualitative researcher could draw strong causal inferences from the data. For Patton, the aim is to understand the phenomenon being studied. Phenomenological analysis pursues the meaning, structure, and essence of a lived experience. He described grounded theory as an approach that begins with basic description, moves to conceptual ordering of themes and ideas, and concludes with theorizing constructs and ideas into explanatory schemes. This researcher made no attempt to make strong statements about cause and effect, but rather documented the logic trail, interpretations, and conclusions related to ideas that were suggested by the major themes related to participants' perceptions.

Finally, Seidman (2006) stressed the value of creating a participant profile in first person. This helps the researcher remain faithful to participants' actual words, thoughts, and perceptions. Seidman's approach is designed to coax from the participant a profile of the participant's background and to facilitate the gathering of a participant's perceptions, thoughts, and interpretations of meaning about phenomena in order to achieve the understanding sought by the researcher's research questions. The researcher recognized the benefits of this practice to the researcher and the reader. The researcher followed Seidman's suggestion and included participant profiles in Appendix C.

#### Limitations

There are several important limitations to this study. The researcher's focus was on a sample of men. It would be beneficial to do a similar study at the shelter with women who have successfully transitioned from homelessness to self-sufficiency. It would be a mistake to generalize the findings of this study to women for several reasons. Women have factors in their experiences that are quite dissimilar to men. Many women have children for which they are responsible. Options for employment for women are

complicated by childcare challenges. Most men at the shelter do not have young children for whom they are responsible.

Women have access to housing options covered by government programs that are not as available to men and so the pathway to self-sufficiency can be much different. The perceptions of women who have successfully transitioned from homelessness to self-sufficiency may cast a different light on factors that supported their successful transition. Studying this group might prove quite valuable.

This study has illuminated the perceptions of 10 men who have successfully transitioned from homelessness to self-sufficiency. A holistic synthesis of their perceptions into a composite voice is valuable because it helps the researcher transfer insights gained to others as to what works and what does not work in facilitating a successful journey from homelessness to self-sufficiency. The researcher cannot say that what worked for the men in this study will work for others. However, the insights gained from this study inform those service providers who would design programs to help other men successfully transition from homelessness to self-sufficiency.

The executive director of the shelter conducted this study. The shelter was the temporary home of the participants in this study while participants participated in the shelter's mentoring program. The mentoring program is the brainchild of the researcher. Despite the researcher's best efforts, it is likely that biases have influenced the findings. The researcher has tried to expose the logic used for research design and the processes used to accomplish the research. The researcher has attempted to leave behind a roadmap by which the reader might critically evaluate each process decision and each conclusion and interpretation about the data.

The researcher learned a great deal about interviewing as the research progressed. In grounded theory research (Gibbs, 2012) and even in conventional content analysis (Hsieh & Shannon, 2005) interpretation of findings begins early on during data gathering. Despite extensive reading and preparation, there are things the researcher will do differently the next time around. Spending time immediately following each interview to listen to audio files and journal thoughts about themes and meanings as suggested by Kvale and Brinkmann (2009) would have been helpful. The researcher actively engaged with interview participants during the interviews. When interviews were over and participants had left, the researcher treated recorded interviews like data that had been collected for later analysis and waited until later to listen to audio files and begin to journal thoughts about emerging themes and categories. The researcher recommends the work of Kvale and Brinkmann for researchers preparing to use interviews for data collection. The researcher highly recommends the practice of a time of reflection immediately after interview sessions followed by a careful logging of thoughts about impressions, themes, and meanings.

A final limitation of note, the researcher conducted coding of themes and categories as a singular coder. Resources did not permit the researcher to employ the use of multiple coders. Denzin (1989) strongly supported the notions of a variety of methods, multiple observers, and multiple theories to compensate for the intrinsic bias that comes from single-method, single-observer, and single-theory studies. For the purpose of this study, the researcher made use of colleagues to provide triangulation for methods by taking and commenting on the survey and interview instruments (p. 307). Colleagues also

provided independent input on coding of themes and meaning units, but not as independent or collaborative coders.

### Summary

The researcher used qualitative methods based on exploratory interviews for data collection accompanied by continuous comparative content analysis to answer this study's research questions. The researcher designed the research questions and the methods used to answer them to illuminate a better understanding of the perceptions of those who have experienced episodes of homelessness and have successfully transitioned to self-sufficiency. The researcher continuously reflected on biases and other threats that might harm the trustworthiness of data collection, analysis, and interpretation of meanings. The researcher meticulously recorded conclusions and interpretations about data and adjustments made to methods along the way. The researcher recorded these proceedings and findings in the next chapter.

## CHAPTER IV

### FINDINGS AND CONCLUSIONS

#### Introduction

The purpose of this multicase study was to explore the perceptions of a sample of homeless men who had successfully transitioned from homelessness to self-sufficiency. The researcher hoped to draw from these perceptions a better understanding of how participants were able to make this transition. Chapter I touched on the scope of the problem of homelessness and reviewed an important gap in the literature. The literature includes a description of factors associated with homelessness and the demographics of those who have experienced episodes of homelessness. However, it is missing the voice of those who have been homeless and have successfully transitioned to self-sufficiency.

Chapter II reviewed the important literature related to the problem of homelessness. Researchers identified trauma, loss of social support, substance abuse, the loss of affordable housing, and the deinstitutionalization of mental health patients as some of the key factors related to the phenomenon of homelessness. Chapter II also included some successful strategies for addressing homelessness through critical time intervention, coordination of social services, and mentored access to job training and employment opportunities. Strategies to prevent homelessness in young people through counseling and tutoring to decrease high school dropout rates were also discussed in chapter I

Chapter III was a review of the rationale for choosing a qualitative approach to answering the research questions associated with this study. Interviews and interview transcripts subjected to conventional content analysis provided the best means to discover the lived-experiences of men who were homeless and subsequently escaped that life by finding a pathway to self-sufficiency. Both Moustakas (1994) and Creswell (2013) noted that phenomenological inquiry is the best approach for discovering and describing participants' live-experiences. By teasing the meanings and themes from interviews and synthesizing these meanings into a holistic picture, the researcher sought to illuminate participants' lived-experiences and thoughts about their lives before, during, and after experiencing the phenomenon of homelessness. The researcher also sought to discover participants' perspectives on what was helpful and not helpful in their quests to achieve economic self-sufficiency. Creswell stated that the purpose of a phenomenological study is to create a "composite description of the essence of the experience" studied (p. 76). In illuminating the perceptions of homeless adult males who have successfully transitioned to self-sufficiency, the researcher hoped to help those who would seek to make this same transition. The results of this research may also provide valuable insights to those who provide services to homeless men.

The researcher used a combination of manual methods and computer-aided qualitative data analysis software to facilitate data analysis. The researcher used NVivo 10 software to facilitate word count queries and frequency counts. More importantly, the NVivo 10 software made it easy to organize emergent meanings and themes into categories and nodes, easily retrievable and sorted by category and participant during analysis and coding.

## Findings

The researcher conducted this phenomenological study using aspects of grounded theory methodology and conventional content analysis (Gibbs, 2007). Specifically, the researcher performed continuous comparative analysis (Robson, 2002) throughout data collection in order to ensure that interview questions encouraged participants to discuss their lived-experiences and perceptions as these experiences and perceptions related to the research questions. The researcher analyzed interview content for themes and categories of words, phrases, and meanings. The researcher coded themes and categories as they emerged during the iterative analysis of verbatim transcripts of participants' responses to open-ended questions in semi-structured interviews. The researcher identified a purposeful sample of 10 participants from a population of 154 men who had participated in a homeless shelter's mentoring program at a shelter for the homeless in a medium-size Midwestern city. The researcher analyzed and coded the transcripts from open-ended interviews with the study's 10 participants and organized data by research question. Three research questions provided the framework and direction for this study:

1. What is a sheltered homeless adult male's perception of his life experiences and circumstances before, during, and after his experience with homelessness?
2. What is a sheltered homeless adult male's perception of actions he took that helped him move from homelessness to self-sufficiency?
3. What is a sheltered homeless adult male's perception about the help he received from others and particularly from the shelter's mentoring program on his journey from homelessness to self-sufficiency?

These three research questions were satisfied by the iterative analysis methods described in Chapter III. By *satisfied* the researcher means that analysis of the interview transcripts revealed a number of common themes. The iterative reading and re-reading of transcripts accompanied by coding of themes and meanings and questioning of these codes throughout multiple readings, resulted in a thick, rich description of participants' perceptions related to the three research questions (Denzin, 1989; Leedy & Ormrod, 2010). This is not to say that the researcher's descriptions and interpretations of themes and meanings are the only possible interpretations. This notion is not the objective of qualitative analysis. The researcher does believe, however, that the study's findings draw a clear and descriptive picture of the lived-experiences and perceptions of formerly homeless men who have succeeded in becoming economically self-sufficient. Three major findings emerged from this study:

1. All of the participants mentioned the loss of social support as an influential aspect of their lived-experiences. An overwhelming majority of participants tied the experience of loss of social support to their own abuse of alcohol or controlled substances. More than half of the participants related the trauma of divorce, either their parents' divorce or their own as life changing experiences. A similar number of participants reported the death of a parent or spouse as major traumatic events in their lives. Half of the study participants described incarceration in jail or prison as an important lived-experience. Some study participants had a history of treatment for mental health issues and mentioned this as an influential lived-experience. All participants in the study had attained a high school diploma or a General Equivalency Diploma (GED).



2. All of the participants in this study tied successfully transitioning from homelessness to self-sufficiency to obtaining a dependable income stream. All 10 participants also recounted aspects of their own faith (discovered or rediscovered) as important in providing a sense of hope and strength for perseverance. An overwhelming majority of participants cited personal perseverance and personal work ethic as important contributors to a successful transition to self-sufficiency. A majority of participants cited employment as their primary source of income. Three study participants cited Supplemental Security Income (SSI) as their primary source of income.
3. All 10 participants cited the social stability of a clean, safe, encouraging environment as a major factor in having an opportunity to make a plan to secure an income stream. All participants recounted important help they received from others that enabled them to make a successful transition from homelessness to self-sufficiency. An overwhelming majority of participants referenced the availability of the emergency shelter as an important facilitator of their successful transition from homelessness to self-sufficiency. A majority of study participants mentioned the effective coordination of services between agencies as an important facilitator of a successful transition from homelessness to self-sufficiency. Most participants provided individual assessment of the shelter's Personal Success Plan mentoring program. Participants also provided input on how service providers might improve upon current practices.

Data for phenomenological studies are the verbatim quotes that represent the perspectives of study participants (Moustakas, 1994; Miles & Huberman, 1994). In this

study, themes and categories emerged from the transcripts of interviews. Table 3 provides an overview of emergent themes and categories and provides a sampling of illustrative quotes from participants that document and describe these categories and themes.

Table 3

*Illustrative Verbatim Quotes*

Theme and Category	Illustrative Quote
Social Support (Loss of)	“Um I mean me and my dad were pretty close um taught me a lot of things you know how to play basketball how to be [. . .] young man [. . .]. We did everything together. My dad is my best friend I mean he passed away when I was 12, pancreatic cancer. So for those years we were pretty close.” (Vindell)
Dependable Income (Securing)	“I started doing the right thing and from then on I just worked. See my mind kind of like I don’t know I guess I became ambitious cause like I wanted to have things so all I focused on was work, work. I didn’t pay attention; all I cared about was making a dollar. Because being broke and not having nothing, being on the streets and not having nothing . . .” (Kelvin)
Stability, Safety, Encouragement (Securing)	“Coming out of prison, I had the drive to build a life. That threw me for a major loop. I mean I didn’t know where I was going to sleep that night. I didn’t know where I was going to sleep the following night. I had no clue. I was totally disoriented, terrified, fearful, sad, as you could imagine.” (Bud)

*Note:* Names of participants are pseudonyms.

Following is a discussion of findings, themes, and categories that emerged from the content analysis of interview transcripts. The researcher sought to draw out the participants' perceptions to create a composite description of the essence of their experience (Creswell, 2013). Moustakas (1994) noted the importance of creating a climate in which the "research participant will feel comfortable and will respond honestly and comprehensively" (p. 114). The researcher, with input from participants, chose a comfortable and private location for interviews and took pains to prevent interruptions. Interviews began with some casual social conversation and each participant was encouraged to treat his interview as an opportunity to tell his unique story.

Husserl (as cited in Moustakas, 1994) stressed the importance of minimizing the effects of researcher bias through bracketing or intentionally suspending presuppositions about participants' perspectives (p. 90). The researcher took pains to do this by critically listening to ensure questions were not leading questions. The researcher practiced bracketing during all analysis of transcripts and coding of themes and categories.

Creswell (2013) stressed that researchers should explicitly reveal their philosophical assumptions and biases. This researcher collected data and analyzed the phenomenon related to this study with a bias toward a Christian worldview. In addition, the researcher is invested in the success and reputation of the shelter that is the bounded location of this study. The researcher kept these assumptions in mind throughout each interview and subsequent analysis and revealed in the findings instances where these assumptions may have influenced the researcher or participants. Table 4 summarizes the major categories and themes that emerged from content analysis.

Table 4

*Emerging Categories and Themes*

Participant	Loss of Social Support	LSS Incarceration	LSS Death Family	LSS Divorce	LSS Education	LSS Mental Illness	LSS Substance Abuse	Securing Income	Safety, Stability, Encouragement
Bud	X	X	--	X	X	--	X	X	X
Will	X	--	--	X	X	--	X	X	X
Kelvin	X	X	X	X	X	X	X	X	X
Vindell	X	X	X	--	X	--	X	X	X
Cliff	X	--	X	X	X	--	--	X	X
Scott	X	--	X	X	X	X	X	X	X
Dennis	X	--	X	X	X	--	X	X	X
Don	X	X	X	--	X	--	X	X	X
Kevin	X	X	--	--	X	--	X	X	X
Jim	X	--	X	--	X	X	X	X	X
n = 10	10	5	7	6	10	3	9	10	10
Percent	100%	50%	70%	60%	100%	30%	90%	100%	100%

Participant	Securing Income Employment	Securing Income SSI	Coordinated Services	Emergency Shelter	Faith, Hope	Support from Others	Work Ethic
Bud	X	--	X	X	X	X	X
Will	X	--	--	X	X	X	X
Kelvin	X	--	X	--	X	X	X
Vindell	X	--	X	X	X	X	X
Cliff	--	X	X	X	X	X	--
Scott	--	X	X	X	X	X	X
Dennis	X	--	X	X	X	X	X
Don	X	--	X	X	X	X	X
Kevin	X	--	--	X	X	X	X
Jim	--	X	X	X	X	X	X
n = 10	7	3	8	9	10	10	9
Percent	70%	30%	80%	90%	100%	100%	90%

*Note:* LSS = Loss of Social Support

Following is a discussion of supporting data and explanations that document the findings of this study. The three research questions provide the framework for this discussion.

#### Finding 1: Research Question One

What is a sheltered homeless adult male's perception of his life experiences and circumstances before, during, and after his experience with homelessness?

##### Loss of Social Support

Loss of social support emerged as an important theme during content analysis. The theme *loss of social support* emerged as a category during the second round of coding. It became clear that loss of social support often related to the participants' chronic abuse of substances, incarceration due to crimes connected to substance abuse, the death of a parent or spouse, divorce of parents or from a spouse, or mental health issues so the researcher placed these themes in the general category of *loss of social support*.

The phenomenon of homelessness brought on by a loss of social support related to addictions, family instability, mental illness, and a history of incarceration is consistent with the findings of Jencks (1994), Van Laere et al. (2009) and others. This finding challenges the findings of other researchers (Rossi, 1989; Snow & Anderson, 1993) who tied the phenomenon homelessness largely to the lack of the availability of affordable housing. However, to be fair, these authors focused mainly on the factors contributing to the rise of homeless rates in the 1980s. Snow and Anderson affirmed the notion that inadequate income and loss of familial support was related to an individual's first episode of homelessness.

The finding that all participants achieved a high school education is interesting and suggests the possibility that those who successfully transitioned from homelessness to self-sufficiency may be those who were better educated before ever experiencing homelessness. This is consistent with the findings of Caton et al. (2000) who found that lack of a high school education coupled with the loss of family financial support were key contributing factors to the first episode of homelessness in homeless men and women with no history of mental illness. It is possible that completion of a high school level education by all of our participants' was an important contributing factor to their success in achieving self-sufficiency. Caton et al. recommended high school equivalency programs for homeless individuals who had not completed high school. The usefulness of this intervention strategy is an area for future study.

The primary and overriding finding in this study is that all of the participants mentioned the loss of social support as an important aspect of their lived-experiences. Participants related their lived-experiences through several other emergent themes including strategies or factors related to the reconstruction of some semblance of effective social support through participants' own efforts and through the support of others. In addition, participants shared other lived-experiences or themes that the researcher, informed by the work of other researchers (Jencks, 1994; Caton et al., 2000; Taylor & Sharpe, 2008; Amato & McDonald, 2011), chose to connect with the major category loss of social support. These themes were substance abuse, death in the family, divorce, incarceration, and mental illness.

## Loss of Social Support and Substance Abuse

Nine of 10 participants (90%) mentioned their abuse of alcohol or drugs connecting this phenomenon to loss of social support and their eventual experience with homelessness. Participants expressed their experiences in the following ways:

I had an apartment, barely keeping it . . . and then I got to the point where I had lost that. I was living out of my car but I still had a job and then that's when I finally lost the job. Then I got back . . . on the streets finding any kind of way to, ya know, sustain. I got to a point where I met a few people. I got into the, what you would call selling it [drugs], ya know actually being a door man and everywhere ya know. Somebody come to the door, [I'd] let um, in . . . they give you product, you go around back out the door. I worked for a drug house for a little while and that got old. Fooled around and lost a guy's product a few times, I almost lost my life from that. (Kevin)

Of course I was filtering a little bit of money from the bar . . . to fund my cocaine habit, which didn't go over too well with the owner and I mean people aren't stupid, I was stupid you know . . . so I lost my job and I mean basically to me if you're doing drugs, and especially cocaine, cocaine's very expensive and not only that . . . there's never enough from the addict's point of view. You do what you have to do and you run out of options, you know. I ended up going back home to mom and dad. (Dennis)

Substance abuse was present in an overwhelming majority of this study's participants. Behaviors related to their substance abuse often led to a series of events that in turn contributed to a loss of familial support.

After going back home and experiencing a series of jobs and firings due to his drug use, Dennis became full-time caretaker for his mother who was dying of cancer. While she was ill, Dennis recounted, taking her pain medication himself. His mother's passing was a tremendous trauma for him and left Dennis riddled with grief and guilt. He fell into a cycle of drug use and stealing money from family members to buy drugs. This resulted in the loss of emotional and financial support from his family and a series of events that started with stays in substance abuse rehabilitation centers and eventually, after several failures there, sent him to the streets and homelessness. Dennis described this:

I was on my way. I didn't care if I lived or died. Um, I was in self-destruct mode after my mom passed. Um, I didn't care period about anything, anybody . . . This all ended when I stole my dad's credit card . . . I spent about \$3,000 in about three weeks and eventually they found out . . . My dad, my brother and sister, you know. I was called everything but a white man of course and probably rightfully so. (Dennis)

Seven other residents reported struggles with substance abuse. Will's long history of alcoholism eventually led to his divorce and his attempted suicide. When he left the hospital, he had nowhere to go so he came to the homeless shelter. Another participant, Jim fell into alcoholism following the passing of his wife and was unable to find work. No longer able to afford the home Jim and his wife supported jointly, he fell into a deep depression and wound up in a local hospital's psychiatric ward. After hospitalization, with no social support, he found his way to the shelter. Still another participant, Scott was



ostracized by his family after repeated bouts of alcoholism. Scott stayed in a motel for a while until his savings ran out, found himself homeless, and came to the shelter.

Bud is another study participant who struggled with substance abuse. Bud's drug use eventually led directly to the loss of his familial social support system:

My family . . . I tended to disassociate from because of my drug use. Even on holidays, I would disappear on holidays and holiday periods, just because of drugs. I was sorta self-medicating, I can't say it was the underlying cause, what have you, I wasn't molested or anything like that, but I surrounded myself with negative people, drug using people. That was my entire life for many years. (Bud)

In addition to substance abuse, the experience of a death in the family emerged as a theme related to the loss of social support:

#### Loss of Social Support and the Death of a Parent or Spouse

Seven of 10 (70%) participants reported the death of a parent or spouse as a major traumatic event in their lives. Participants connected the passing of a family member with a string of life experiences related to their own experience with homelessness. This is consistent with the findings of other researchers (Kennedy, 2007; Taylor & Sharpe, 2008; and Kim, et al., 2010), who found a connection between trauma in families and episodes of homelessness.

I put my mind on to succeed. I wasn't always like that. I was also a troublemaker, but I'm not gonna get into that. But I start at the point where I start thinking and seeing things clear like I want to succeed and I want to make it, become something, become somebody. I started studying in college and as soon as I had that mentality that's when everything went bad. My mother passed away and

when she passed away, I had to drop out of college . . . she was in the ambulance and I was like please God I don't want her to die. I don't want her to die and it was like I felt that too. I felt it like a peace and a love like it wasn't that she was going to a bad place it was like she you know it was just her time to go like something good was happening and ah she passed away and I mean I was in shock. I couldn't believe it. I was like my mother's gone. All my life I been with my mother. I was a momma's boy from the beginning to the end. My mother was always there for me. When she was gone it was like my whole family, my whole life was taken away complete. I always depended on her. I always trusted her when any situation . . . I could always count on her. When she was gone it was me. I had no one else. I was all by myself. (Kelvin)

Kelvin saved some money and flew from Puerto Rico (where he had lived with his mother) to the United States to find the father who left his mother when he was very young. He flew into a large city in the Midwest intending to walk to the neighboring city where his father was last known to live. It was winter and cold. Unfamiliar with winter Kelvin had only T-shirts that he layered to stay warm. A stranger spotted him, listened to his story and provided him with bus fare. He found his father and grandmother, but after a short stay with them, he was told he could not stay there. Kelvin found work and an apartment in a crime-ridden part of town. After his inexpensive car was stolen, he missed work, lost his apartment and became homeless. He found his way to the shelter.

Vindell lost both of his parents when he was young. These events happened eight years apart and led to a string of other events that eventually contributed to a loss of social support and homelessness. His words tell part of his story:

She [mother] died when I was four . . . Um I mean me and my dad were pretty close um, he taught me a lot of things you know how to play basketball how to be a young man and . . . we did everything together. My dad is my best friend I mean he passed away when I was 12, pancreatic cancer. So for those years we were pretty close I guess I have to say I was in shock for a while and then reality set in and then I began to think about things that we would never do together again you know. What to do on my first day, my first football game, my first basketball game. Nobody cheering for you. He won't be there for my prom when I got in high school and you know if I ever got married. (Vindell)

What followed for Vindell was a year in foster care followed by adoption. He left home when he was 19 years old and came to a city in the Midwest to find some half-siblings from his mother's first marriage. This connection did not work out and Vindell was homeless. He moved in with a woman, 15 years his senior who he met at a social service job-training agency. After some months, the women suggested he move out. "We got tired of each other," Vindell said. This is when Vindell came to the shelter.

Cliff, Scott, Dennis, and Don all recounted the death of an important supportive parent. In each case, the death of a parent removed a safety net that had provided support that may have provided a place to stay or a means of obtaining temporary domicile and prevented episodes of homelessness. Jim's loss of his wife to cancer took away his partner who shared half of their expenses. The loss of her economic resources added to Jim's related depression and alcoholism contributed to his eventual homelessness. This is consistent with the findings of Jencks (1994) who discussed the importance of the loss of

family financial support as an important contributing factor to the first episode of homelessness.

In addition to substance abuse and the experience of a death in the family, the phenomenon or lived-experience of divorce emerged as a theme related to the loss of social support:

#### Loss of Social Support and Divorce

Six of 10 participants (60%) related as important life experiences the trauma of divorce, either their parents or their own. Bud, Will, Scott, and Dennis each noted that chronic substance abuse was an important contributing factor to their individual experiences with divorce. Cliff indicated that his divorce happened because his wife was not happy with his lot in life, “What it was, she had you know how sometime ah, a lady get a big head and they believe better than you and all this so we ended up as [just] friends.” Relating how this affected him Cliff stated:

Yeah it tore me apart because I been a person like this, I never wanted to be by myself. I always wanted a family because I feel as though when my mother had passed I was lost. I was like, I was all by myself and my wife she was the closest thing to me. We was close. Even my mother was thrilled about me, every time you look around over at my mother-in-laws house it was just like I should have been her son . . . Ah man, I was tore up. I said wow I’m just back like I started. You know and then it seemed like it triggered back to when mom passed away. Ah God, what did I do? What did I do to deserve this you know what I’m saying?  
(Cliff)

Cliff talked about his father and mother and, although there was no divorce involved, Cliff shared, “. . . my mom and my father they wasn't no marriage thing. See I was an *outside child*. See my father had another family and my mom was my mom *and* my dad . . .” Throughout this portion of his interview, it was clear that sharing this portion of his life story was important to Cliff. This suggests that the absence of a father in his life was an important part of his life experience.

Kelvin's story about his father's absence also emerged from a question that asked him to describe his childhood:

Okay, um when I was young my parents they got divorced. I was around seven maybe eight. My mother and I um, I stayed with my mother. I chose my mother over my father . And ah, we were just basically living from [day to day]. She had like a nursing home, not a nursing home, but like, her job was like to live in with people and take care of people and that's what she would do for a living so we would move around alot. And um, cause in California there is a lot of violence and gang violence and stuff. Well it was really bad over there [in California] so what happened is she decided to move to Puerto Rico. (Kelvin)

In addition to substance abuse, the experience of a death in the family, and divorce, a history of incarceration emerged as a theme related to the loss of social support:

#### Loss of Social Support and Related to Incarceration

Five of 10 participants (50%) described incarceration as an important life experience. This theme emerged without the interviewer asking a specific question about

incarceration. In each case, participants characterized incarceration as a roadblock to employment or education opportunities. Their own words follow:

I kind of screwed it up cause my main focus was being dumb. I was more in and out of jail; my best years got kind of ruined because I was in jail. I spent a year and a half from 17, my whole . . . well from 18 to 19 ½ I was in jail and before that when I was like 16 to 15 I was also in jail . . . I got into it [altercation] with some police at the police station which really wasn't smart, but from there on I ended up doing a year and six months. (Kelvin)

Don shared experiences with stealing. This practice led to several stays in the county jail. Don describes some of his experiences:

Oh um I used to go into M----- [department store] with a very bulky winter jacket and I would cut a little slit on the inside and all that I'd be shoving CD's in there. CD players, Walkman's, tapes, so I'd walk out of there, every time I left there with about two to three hundred dollars' worth of stuff . . . I mean I would steal money from people and then go to school and just buy things for people and all that in hopes of hey maybe they'll start liking me and all that and they acted like they were, but come to find out they weren't real friends they were just there until the stuff ran out . . . Years later, um instead, I mean it was in the dead of winter, this is how I got to my wonderful record . . . [it was winter and cold] some of the pine trees were snow covered, branches would droop down, but it would hold all that snow, no wind no nothing was getting in there and it was all dry underneath, I would slip up underneath those and it wouldn't be warm, I mean not that warm, but at least no air and all that getting to me but then it started getting colder and

colder and colder and this is when I got my first felony. I broke into somebody's house and it wasn't, I didn't steal or anything it was just to warm up and at the time I didn't know somebody was in the house and he came down the stairs, came in the kitchen asked what are you doing and I'm just like shivering and all that in the corner. I was just trying to warm up and he immediately left, I knew he was calling the cops so I just like come get me. And they did. So that was my first charge. Ah, the way I got food was getting into people's vehicles. I mean whatever spare change I found or bottles laying on the side of the road, that's how I ate cause I heard about the places giving food away here and all that but it was all a pride thing with me. I didn't want to lower myself to that, cause I never used to be that way. I was always used to everything I needed being right there so.

(Don)

Kevin's experiences with getting into trouble started when he was very young. His serious run-ins with the law came when he was deeply into illegal drug use. He shared some of his experiences:

Well on a typical day as far as using and when I woke up in the morning I would ya know think about where I could go in the neighborhood to either steal something or manipulate my way into getting some money one way or the other ya know. A lot of time, back you know we would do the town in [Midwestern city] there wasn't a whole lot of stuff really to do ya know. You could manipulate somebody out of money . . . you could do it and it was either stealing from somewhere or like that ya know, go on into a business if you could break into a house ya know, get anything of value and take it to the pawn shop and get money

off of it. When I moved back up here I think, I got in trouble down there I did some time in prison ya know, in and out of that most of my life . . . mostly county jail time I think and I did 18 months in a minimum-security camp prison. (Kevin)

Bud got money for drugs by breaking and entering into houses and selling what he stole. He was arrested and convicted; and spent over five years in prison. Bud noted that his criminal behavior and incarceration affected his family. He shared, “My oldest daughter is perfect; both my kids are wonderful kids. I mean thanks to their mother, not myself. My youngest daughter still is not speaking to me, hasn’t spoken to me in six years . . . totally disassociated herself from me, wants no contact with me because of my incarceration and drug abuse and just my past self.” He went on to explain what his daily life was like before his arrest:

I would get up in the morning and would start scoping houses out. I couldn’t go to the grocery store without trying to pattern [look for opportunities to steal]. I’m not saying I’m more intelligent than some people, but I’m just using my mind. ‘Well that truck’s not there then it’s there at 3, well that might be a house to hit between 9 and 3.’ I would pattern stuff. I was a brazen thief. I would wave at the neighbors while I was kicking a door down, and even to this day when someone’s sneaking, you get a sense, you get an awe, you get a feeling of ‘flirtiness’, you know what I mean? I was a brazen thief. I would be up in the morning, 9, 10, or 11, but during the day. I never stole at night and I would break into houses until I had enough to get me what I felt was enough drugs for the day. A lot of times, the merchandise I stole wouldn’t even make it to my house. It would go straight for



the dope house. The dope neighborhood, someone would buy it. I would do that every day, every day. (Bud)

Bud also shared the disorientation he experienced on the day of his release from prison:

My sister picked me up at Freeland prison. The morning she picked me up, my understanding was that she was going to drop me off at the parole office, they were taking me to a halfway house where I could live up to a year while I got my life together with their assistance. The reality was, here's a bus pass, here's \$20 clothing voucher, the mission [shelter] is that way . . . I mean it's like you're a property offender, drug offender . . . here's a clothing voucher, here's a bus pass. You can either go to my brother's keeper or the shelter, or wherever you want. No supervision, just 'bye' . . . total disorientation. Totally lost. I mean I had a plan. I wanted to build a life. Coming out of prison, I had the drive to build a life. That [no transition assistance] threw me for a major loop. I mean I didn't know where I was going to sleep that night. I didn't know where I was going to sleep the following night. I had no clue. I was totally disoriented, terrified, fearful, sad, \_\_\_\_\_ of emotions as you could imagine. (Bud)

Vindell's history includes a felony conviction and incarceration. He noted:

I wanted to go to the military but that [felony conviction] kind of stopped me . . . if I hadn't went to jail I wouldn't be in this situation . . . but it was the availability of the jobs and you sometimes have to have a college degree or so many years of experience so that kind of really held me back. (Vindell)

Participants, whose life experience included incarceration, connected that life experience to a loss of social support and a barrier to employment or education opportunities. This suggested a need for better intervention for those with a history of incarceration and those who may be facing release, but have no known social support system. Half of our sample included men with histories of incarceration. Other researchers (Amato & McDonald, 2011) found a smaller incidence of homeless men with a history of incarceration. Snow and Anderson (1993) found only 2.7% of their sample of homeless individuals in a large ethnographic study in Austin, Texas reported any involvement with criminal activity. Their study included both men and women living in the streets, which may have caused some underreporting. Nevertheless, for those seeking to transition to self-sufficiency, a criminal record presents a noteworthy barrier to employment and sometimes to reconnecting with the social support of family.

In addition to substance abuse, a death in the family, divorce, and a history of incarceration, a history of mental illness emerged as a theme related to the loss of social support. This is consistent with the findings of Jencks (1994) and others (Amato & McDonald, 2011) who also tied a history of mental illness to a loss of social support and the phenomenon of homelessness.

#### Loss of Social Support and Mental Illness

Four of 10 (40%) participants mentioned a history of treatment for mental health issues. Participants' experiences with mental health issues seemed intertwined with their experiences with substance abuse. In a study of 189 men at a large shelter, Amato and McDonald (2011) found a relationship between substance abuse and homelessness and mental illness and homelessness. When considering these two contributing factors, the

authors found a stronger relationship between a history of substance abuse and episodes of homelessness. The researcher was unable to disentangle these experiences as contributing factors to loss of social support. Interestingly, participants with a history of mental health issues enjoyed better access to outside services for eventual housing and income assistance than those with no history of treatment for mental illnesses.

Scott connected with government supported community mental health services on his own while at the shelter. Jim and Will gained access to community mental health services as the result of hospitalizations before coming to the shelter. Kelvin gained access to these services following a hospitalization after coming to the shelter. The community mental health agency assigned caseworkers to Scott, Jim, and Kelvin. These caseworkers provided assistance with psychological counseling appointments, medications, and eventually with access to housing away from the shelter in regular apartments in the community. Will chose not to follow up with this agency. He seemed to want to distance himself from his attempted suicide event, not wanting to identify himself as a mental health patient.

The perceptions of study participants that emerged from interviews provided insight into their lived-experiences with mental illness. Scott's words best capture the challenges of mental illness, the effects on an individual's social support, and the interconnectedness between mental health issues and substance abuse:

I gotta go back to basically, well I was on a rollercoaster. When I was up I was really up and I was good and things were going good, but then when it would come back down, I'd crash and burn, you know and through my own actions and just surrounding circumstances one job would end and I'd transition into a new

one, you know. And sometimes it would happen quick. Other times, not so quick, depending on how far down I went and how long it took me to kinda come back up out of the valley. You know so it was just a combination of the bipolar you know. I would try different medications and they would work for a while. Then they would start to not work so well and then I'd go off the med, start hitting the sauce [alcohol] again and then I'd be back down in the valley, you know. Lose a job, move back home, pull myself up, get back out there, find another job, do good for a while. It just got to be a pretty vicious cycle. (Scott)

Scott described the effects of his mental illness and addictions on his relationships with women:

Two marriages, both ended in divorce and almost a third marriage and again, key word almost a third marriage, but it didn't go through and that child was put up for adoption, private open adoption and I have absolutely no regrets about that you know. We did what was best for our daughter . . . no job, no income, not even the smallest roof over your head even if it was just one room in a rooming house, that you don't even have the capability to provide just the most essential, basic needs for yourself you know . . . it didn't feel good...didn't feel good at all.

(Scott)

Jim tied his mental health issues, in part, to losing his childhood best friend to an accidental shooting at another friend's house:

It was the first day of deer season in 1971 . . . him and another kid were playing around with guns they shouldn't have been at the other kid's house and the gun

went off and it shot my friend. Bullet went right up his nose and into his brain. I had to deal with that for years. I couldn't talk about it without breaking up. (Jim)

Kelvin's mental health issues are deep-seated. He indicated that he still "hears voices" sometimes. Kelvin matter-of-factly noted, "I have another personality. He actually talks to me." Even so, Kelvin functions very normally most of the time. He attributes keeping the voices at bay to "faith in Jesus" and prayer. Kelvin is able to hold down a job at a local manufacturer.

A few other study participants recounted their experiences. Cliff reported no history with mental illness even though he reported that a community mental health worker helped him get his monthly SSI benefit. Don reported many episodes of physical abuse from his father when he was young. According to Don, no one reported this abuse to law enforcement or other authorities and Don did not report receiving counseling or medical attention for trauma associated with this abuse.

When Kevin was in elementary school, his parents arranged for him to meet with a psychiatrist once a week after getting into trouble regularly at school and setting a fire in the family home on two occasions. Kevin recounted this while answering the question, "What was life like for you growing up?" As an adult, Kevin did not seek services with community mental health services and does not consider mental illness as one of the challenges he faces. For this reason, the researcher did not include Kevin in the data as a participant who had a history of treatment for mental illness.

Finally, as part of research question one, the researcher asked participants open-ended questions about their aspirations, hopes, and dreams. An important objective of this study was to hear and describe the *voice* of this study's participants. Patton (2002)

stressed the importance of careful listening and accurate description in qualitative analysis. The researcher followed Patton's thinking in drawing out participants' aspirations, hopes, and dreams before and after their lived-experience of homelessness. Following is a review of participants' perceptions around this theme:

#### Aspirations, Hopes, and Dreams

Seven of 10 (70%) participants spoke openly about their aspirations, hopes, and dreams. Participants shared perceptions from childhood, from adulthood before their first episodes of homelessness, and from today, after achieving a successful transition to self-sufficiency. Following are some of their responses:

When I was a kid it was all about the money. It's like all I wanted to be since I was eight till about I'd say 16, 17 was be a basketball player. I loved playing basketball. I'd be probably about the only kid in the area that would go outside. It would be like a blizzard outside, whatever and I would shovel the little patch underneath the basketball hoop and I'd be in shorts and a t-shirt while it's snowing outside playing basketball and all that. I wanted to be an NBA player and make the millions, or either that or I wanted to be a veterinarian but neither one worked out. (Don-childhood)

Don also shared his hopes and dreams for life going forward from where he is now. He still wants to find a partner and perhaps get married, but lamented, "I can't talk to women. I freeze up." He shared more:

I don't know it's just I mean a dream is just to be happy. To keep the job that I got going, doesn't necessarily have to be this job, maybe get another job, but I mean just to be able to live for myself for once. Be able to provide what I need and not

have to depend on anybody else like I did for quite a long time like about almost 30 years of my life. (Don-today)

One study participant reflected on his aspirations from his childhood. He spoke of his talents related to this dream, but that he never took the time to line up the official credentials to use these skills to make a living.

I always wanted to be a Master mechanic, not just a mechanic and I'm pretty good now but by being on total disability, you can't mess around with the cars. See I can tinker with the motors and cams and all that stuff. I know some stuff. I just don't have the papers you know. (Cliff-young man)

One participant shared a longing to find a wife and have children:

There are a lot of positive people that I always be around that I see what they got in life and I wanna get that. I still want to get married. I still want to settle down. I'm still looking for my mate. Ya know those are the things that keep me going and I know if I pick back up that that will not happen. I wanna settle down with somebody in my first house. Get that paid off and possibly get another one and just kick back and settle back. The one thing that I did find out, and I'm still kind of, they say it's never too late, but if I did I would I'd probably if I was in the position I would adopt, but I still wanna have some kids but I know it's kinda late in the game for me right now. I know, I know. I want to find somebody that ya know, if it is possible that I could at least see um grow up. I wanna see him grow up ya know. But those are the things that's keeping me going that I wanna see happen. I want to see all this happen. (Kevin-today)

Still another study participant yearns to restore his credibility with family, friends, and the world. A four-year degree in social work is in Bud's plans and he is actively working in that direction. He shared his aspirations:

I want credibility. I want to change programs there are now [as a social worker]. I want to start a program, maybe here [as a leader at a shelter]. Individual programs, you know not a macro but a micro program where you focus on each man. I mean, literally I told you this before, but you go up to each guy and sit and talk to them. What is your issue? What resources have you explored? Because like I said before, there is a solution to everybody's problem. You just have to find it. A lot of these people, myself included, I was lost for a moment. And when I got here, I didn't know what direction to turn. Thank you God, I found that path, but there is a path for everybody here. (Bud-today)

One participant had always hoped to be like his father and even more so, like his grandfather. He admired their work ethic. He wanted to have a good job and take care of his family in a responsible way. Will has a great work ethic. However, he sabotaged his childhood dreams with substance abuse. He wants to correct this. He shared that his faith in God fuels his resolve and provides hope:

The first and foremost thing that was in my mind was to be like my dad okay. Um, but then also to be like my grandpa \_\_\_\_\_ okay, but then with all that being said then my life's ambition since 18 years old, 21 years old is to be grandpa \_\_\_\_\_ so my education sorta was there but I wasn't really focused on college per say in that early 80's I was more less wanting to work to do financially to get the



things that 18, 19 year old kids wanted like motorcycles, jeeps, toys and stuff like that so. (Will-childhood)

Um, well first and foremost my um is continually to make sure that the Lord Jesus Christ is put first and foremost. Okay that is my ultimate goal and the relationship I've built with him will never be jeopardized and to make sure that my children and my wife . . . they get to know my Lord the way I know him. Um they, he has reunited us together and they see something, they see a complete different dad um as far as um the way that I conduct myself daily okay. They, I say grace at every meal and prayer as a family which we never did before um we um are an um a lot closer. We've always been a close family but we're a lot closer and they actually trust me. They actually, they actually believe that um there is a difference. (Will-today)

Jim's income source is his monthly Supplemental Security Income (SSI) benefit. Nevertheless, he wants to be productive. He aspires to a daily routine of doing what he can to serve,

Well I'm gonna come back here and volunteer at [the shelter], I have already to a certain extent. Um ah I also have another place I can volunteer at if I want to and I'd like to go back to school maybe to theater or something at the University . . . (Jim-today)

Vindell had big hopes of life with his father before his father passed when Vindell was 12 years old. He shared his childhood dream and his aspirations today going forward:

Um the only thing I was in was football so I was playing football at the time and I just wanted to play football for the rest of my life and my dad was my biggest fan basically you know. Um, I still wanted to play football at the time but it kinda seemed like I distance fantasy really. I had to deal with reality. I still hoped for it but it kinda lost its luster you know. Ah then I started . . . I changed my mind no at the time I wanted to be a Veterinarian. I still want to be a vet tech, a veterinarian technician first and then see if I like it and see if I want to go to Veterinarian School. (Vindell-childhood/today)

This researcher's findings related to the lived-experiences of participants and their aspirations, hopes, and dreams are consistent with the findings of other researchers about the hopes and dreams of those who have experienced homelessness (Snow & Anderson, 1993; Boydell, et al., 2000). These researchers described a continuing reworking of a concept of self in people who are homeless and the notion that their hopes and dreams may still be useful motivators toward sustained self-sufficiency.

The researcher's findings related to research question one showed that participant perceptions about the factors that contributed to their homelessness are consistent with the findings of other researchers (Jencks, 1994; Caton, et al., 2000; Van Laere, et al., 2009; Amato & McDonald, 2011). Loss of social support is a major theme and contributing factor related to episodes of homelessness. Underlying and related factors suggested by participants in this study and supported by the research literature are substance abuse, death in the family, divorce, incarceration, and mental illness. Research question one explored the perceptions of participants about life before, during, and after experiencing the phenomenon of homelessness. Research question two explored

participants' perceptions about what they personally did to facilitate a successful transition from homelessness to self-sufficiency. A discussion of this follows.

#### Finding 2: Research Question Two

What is a sheltered homeless adult male's perception of actions he took that helped him move from homelessness to self-sufficiency?

The researcher sought to draw out participants' perceptions about what actions each of them took to successfully transition to self-sufficiency. All 10 participants identified securing a dependable income stream as a key facilitator in transitioning from homelessness to self-sufficiency. Seven of 10 (70%) participants have jobs that provide income. Three of 10 (30%) participants receive SSI related to disabilities.

A number of researchers studied strategies related to education and job training designed to reconnect homeless men and women to a source of income. Cook et al. (2001) studied the vocational outcomes of 4,778 formerly homeless severely mentally ill individuals enrolled in the Access to Community Care and Effective Services and Support (ACCESS) program funded by various departments of the United States government. Cook et al. concluded that job training and job placement services to the homeless mentally ill are nearly as important as housing and clinical treatment.

Goetz and Schmiede (1996) researched the effectiveness of job training and integrated case management in reconnecting homeless individuals with mainstream society. Goetz and Schmiede sought to demonstrate the effectiveness of this program that included jobs-skills training, job search assistance, agreements with local contractors to hire qualified graduates, and intensive case management to address food, housing, medical, and psychological services. Eighty-one percent of the study participants found

jobs with local contractors after 10 weeks of training. Sixty-five percent of the graduates who found jobs also found permanent housing after the 10-week study.

The work of these researchers (Cook et al., 2001; Goetz & Schmiede, 1996) provided insights into vocational training programs for homeless individuals, but did not add to our understanding about the perceptions of homeless individuals who have lived the experience of trying to secure a dependable income stream through employment. This study's findings help to fill this gap.

#### Securing Income: Employment

Bud works as a self-employed handyman. He clears brush, builds decks and docks, cleans gutters, pours cement sidewalks, and hangs and finishes drywall. Bud hustles to make ends meet. Bud shared, "Success then was [just] being able to pay my bills. Success now is being in a position others look up to me for help and guidance. Does that make sense?" He went on:

I started going forward the day I got out [of prison]. Well the second day, the day I got out was shock, but the morning I got up the first day here, I never sat [in the day room at the shelter] . . . I never sat there all day, not once. There are guys [at the shelter] still sitting here who were sitting there the day I got there, but not one day did I sit here all day. You have to go find life . . . life will not find you. (Bud)

Bud does not receive government assistance other than what he receives from the Veterans Administration (VA) as a military veteran. Bud received assistance in order to rent-to-buy a small home. He is pursuing a degree in social work using his education benefits.

It's called the VRAP program. There's a Montgomery Bill. There is a Post 911 Bill. There is a Standard GI Bill and they just started the VRAP, Veteran's reeducation assistance program is what it's called. We can focus on reeducating and won't have to worry so much about paying our bills while we do it. A resource, it's not abuse either, I served my country. (Bud)

It is important to Bud that he not abuse government assistance. He stressed this point and shared his formula for success in securing a dependable income:

I have the luxury now of some months, counting my bills, my bills come to \$573 a month, depending on my water, and it fluctuates between \$60 to \$90, I'm quite frugal, I'm gonna be bank rolling a lot of my GI bill over the year, for a lean month, but work, work, work, work. I can find jobs between classes. If I see someone raking a yard, if I see someone cleaning up a roofing job, I'll stop and ask. There is opportunity, I can walk out of here and make \$20 somewhere. (Bud)

Another participant, Dennis found a job while still at the shelter at a local fast food restaurant, owned by a financial supporter of the shelter. He was hired as a sanitation worker at a large church in the area and impressed the administrative pastor. The pastor told this researcher, "If I had two like Dennis, I wouldn't need the staff of four that I have!" Based on his reputation for good attendance and quality work, Dennis was recommended for a job at a major corporation in the area. He was hired and continues to work 40 hours per week, earning enough to maintain an apartment, transportation, and to pay all of his other bills without government assistance.

Dennis shared his perspective on the challenges and what it takes to secure a dependable income stream through employment and what efforts a person has to make to

make it work. He answered the open-ended question, “What advice would you give someone trying to accomplish what you did?”

I would say to them [those who think they can't become self-sufficient], I don't care if you save \$20 buck a week, you have to have a bank, [and save to] get transportation. Riding the bus ain't fun, but I did it, I used to ride the bus to work. I rode the bus to Tim Horton's. I used to do Your Ride but that was all part of God's plan, I believe that. It's teaching you patience and teaching you that it's perseverance. You can get it done, there is a way. How bad do you want it? How bad are you willing to do this? You cannot give up if you've thrown in the towel you're saying I'm not worth it, God's not worth it, I give up. That's sad . . . I mean I don't see that. I can't . . . I'm not that person and I don't ever want to be there again, you know. I was there you know when I didn't care; I just don't want to be there again and I know why I'm where I'm at now and I have purpose. Um, every day is not a bowl of roses and cherries, it's just not that way, that's not life but you know; it could be a whole lot worse. (Dennis)

Will, Kelvin, Vindell, Don, and Kevin also shared life-experiences that attributed their own securing of a dependable income to perseverance, industriousness, and a fear of returning to homelessness. Here is a representative quote:

I can enjoy the freedom of doing you know whatever I want to do . . . [with an income from my job] so this is my responsibility. You know be able to keep my space clean, pay my rent. That feels good to know that I've done it and I've worked so hard for it that I finally got. You have to try you can't sit back and expect people to give it to you. You have to go out and work for it. (Vindell)

One participant spoke of the personal effort it takes to secure an income through employment and sustain employment. He defined success this way:

It's pretty much where I'm at. I mean it's mine. I did it, I done succeeded. I mean it's not getting in trouble any more. Done retired from that part of my life. I got two stable jobs, a roof over my head and I pretty much succeeded. I mean compared to where I was at in the past and where I'm at now, there's pretty much nothing I can complain about. (Don)

Don mentioned that he did not want to go back to the streets. He referred to having a new mindset, "I have a good job [and intend to keep] a pit-bull lock on it."

Kevin related:

Success for me is leaving the street alone. Success is me being a functional person in society. Success for me is fulfilling what I should have fulfilled somewhat at that back down the road I had acquired me a house to stay in . . . being free of the obstacles that were holding me back . . . that's success. (Kevin)

Bud, Will, Kelvin, Vindell, Dennis, Don, and Kevin, all gave voice to what they personally did to transition from homelessness to self-sufficiency. Bud's words represent the perceptions of participants regarding the importance of self-effort in securing a dependable income stream as a key factor in transitioning from homelessness to self-sufficiency.

I'm gonna go down swinging. I'm not going to sit and wallow in pity and I'm 50 and I'm not going to get there [a return to homelessness] . . . no! I'm making it. I wasn't even out of prison this time last year. I was still in prison. I've done a lot in a year. I'm saying it can be done. (Bud)

Three of this study's participant secured a monthly income through successfully applying for SSI. Their perceptions about this experience follow:

#### Securing Income: SSI

For some of our study participants, employment was not an option to secure a dependable income stream. This was the case with Cliff, Scott, and Jim. Each of these men has physical health limitations. Scott and Jim have mental health limitations. These three men applied for SSI benefits after coming to the shelter and received approval. While the shelter staff encouraged them to apply as part of their Personal Success Programs, each received direct assistance from a local community mental health agency, including Cliff. How Cliff received assistance from this agency remains a mystery to Cliff and the shelter staff.

See [the community mental health agency] is a funny thing, funny place. If you ain't got no real serious, severe problem, you got to almost be a nut in order to get in their programs. So I'm telling myself I know I ain't crazy, crazy, why would you have to go through some stuff like that so I said wow. I sit back, first they had me over here at [another agency]. Ah man they just going, they were playing mind games with me. I quit there and then went to [the community mental health agency], I went to one \_\_\_\_ and they had me, I went there Thursday and they had fill out all the paperwork, papers and stuff and I come back there Friday, they told me I was approved. (Cliff)

No one in the history of the shelter has been approved for SSI benefits that quickly, but Cliff indeed receives SSI benefits and uses them to pay his monthly bills for



food, shelter, clothing, and other expenses. Cliff also receives food stamps, a small monthly allotment of government-supported assistance for food.

Jim indicated that his monthly SSI benefit was approved because of his physical disabilities related to heart failure and kidney failure. He went on to say, "I'm not sure what it's [his SSI benefit] based on. Ah I can tell you its \$698 a month." Similar to Cliff and Scott, Jim received assistance from the local, government-funded community health services agency to apply for SSI benefits. As Jim put it:

It went very smoothly. It was approved on the first time around and that's almost unheard of because for one thing I had all the right documentation. The girls at the [mental health] agency got all the documentation from all the doctors, which would have been mind boggling if I had to do it. Ah, but she got all that and backed all that up and they just approved me the first time around and I applied for Medicaid when I was in the hospital. The social worker came down because I didn't have any insurance at the time and he said, 'well what we're gonna do is we're gonna set you up, try and apply for Medicaid and try and back date it to the first of the year because they will do that sometimes.' And I'll be darned if about four, five months later I get a call from one of the people at CMH and she says you know I was on the computer and you know you got Medicaid . . . then the next day I got a letter from Social Security that says I was approved. I was in shock. I was in shock for a week because I was like really I can't believe that.

(Jim)

Jim continued and described his budget and how he covers his bills from month to month:

My rent's \$316 which is great. Ah, my consumer's bill is only about \$75 or \$80 a months and then my cable is about \$50 a month. So anything up and above that I don't have any bills, I don't have a car, which is fine and I don't care. (Jim)

Cliff, Scott, and Jim each reported faster than normal approval of their SSI applications, though Scott's approval came after several months compared to several weeks for Cliff and Jim. Each relied on SSI benefits to achieve self-sufficiency. Each receives government-funded food assistance and Medicaid health insurance. Cliff and Jim affirmed that without these benefits it would be very difficult to be self-sufficient. Scott indicated that he would look for work "I'd be out there hustling. I'd be out there working somewhere. I would have no choice." Scott also admitted, however, that he found it very difficult mentally to sustain employment. He shared:

It's a combination of physical issues as well as my mental and emotional issues, ah and I'd again I'd tried working more than once even in these last you know going on four or five years and it just hasn't worked out . . . (Scott)

Other strategies participants implemented to become self-sufficient included taking the initiative to seek help. Vindell said:

I just started asking everybody . . . I thought it was impossible to get an apartment . . . I didn't know how . . . where to start you know, but I just started asking around . . . people at work helped me find a place . . . and slowly to find furniture . . . just ask people. I found out how much [money] I needed and saved 30 percent of my check and got an apartment. I do have a strong work ethic, nothing to brag, but I have a pretty good work ethic. I have people at work that recognize I have a strong work ethic. That's how I get a lot of overtime. (Vindell)

Don mentioned learning self-control at work in order to preserve his job. He recounted:

Then he [his boss] told me one more time, you're gonna be getting suspended [for harsh treatment of co-workers]. I'm like 'okay.' I enjoy cooking and I, at that time, I already had the job for about six months so I didn't really want to lose it. And I didn't want to let the people down that believed that I could do it. So it's like, 'alright suck it up and just keep my mouth shut.' (Don)

At the time of his interview, Don had kept his job at a local restaurant for almost two years and still worked there.

Two other participants mentioned actions they had personally taken to achieve their individual goals. Kevin expressed pride over working toward earning an associate's degree in electrical work. Bud is completing a social work associate's degree and has plans to transfer to a four-year program. All 10 participants in this study referenced personal perseverance as a factor in their successful transition from homelessness to self-sufficiency. All 10 participants referenced their faith in God as a source of hope and strength making perseverance possible.

Will described growing up with a Christian grandmother, but his faith was not his own. He began reading a Bible daily after he came to the shelter and continued reading the Bible daily as a part of his Personal Success Plan. Will stated:

Jesus wants me to succeed . . . he doesn't want me to fail, but he also wants me to be humble and that's what he did was he humbled me on that walk from the hospital to here and opened the gateway for me to get to know him. (Will)

Will attributed his sustained self-sufficiency to the strength and peace he draws from his faith in God. He also shared about the mentoring he received at the shelter, “When I came here to the shelter . . . and the love and the openness and the honesty and the non-judgmental Christian people that work here . . . flooding me with that it’s okay to be yourself.”

Research question two addressed perceptions study participants held about strategies they personally employed to successfully transition from homelessness to self-sufficiency. Participants’ perceptions suggested that homeless men who are able and willing to take initiative to secure a dependable income stream are likely to be more successful in becoming self-sufficient and sustaining a life free of homeless episodes. Those who have disabilities and who apply for SSI benefits will likely benefit from integrated case management between the individual, the shelter, and local community mental health and other service agencies. This is consistent with the findings of Goetz and Schmiege (1996) who researched the effectiveness of integrated case management in reconnecting homeless individuals with mainstream society.

Research question two explored participants’ perceptions about strategies they employed to facilitate a successful transition from homelessness to self-sufficiency. Research question three addressed perceptions participants held about help they received from others in making this transition. The next section discusses findings related to research question three.

### Finding 3: Research Question Three

What is a sheltered homeless adult male's perception about the help he received from others and particularly from the shelter's mentoring program on his journey from homelessness to self-sufficiency?

All study participants cited support they received from others as an important contributing factor to their successful transition from homelessness to self-sufficiency. The stability, security, and encouragement of the shelter environment and the Personal Success Plan mentoring program emerged as important themes with participants offering noteworthy constructive criticisms and suggestions for improvement. Nine of 10 (90%) participants referenced the availability of a clean, safe shelter as important in providing a home base from which to reflect, plan, and begin their transitioning from homelessness to self-sufficiency.

Eight of 10 (80%) participants indicated that coordination of social services played an important part in their successful transitions and a few participants mentioned their experiences with lack of coordination of services and offered suggestions for improvement. Following is a discussion, including illustrative quotes, that cast light on the perceptions of participants about the help they received from others and in particular the shelter's mentoring program.

#### Support Received from Others

All 10 participants described support they received from others as an important contributing factor to their successful transition from homelessness to self-sufficiency. Support came from the shelter and its staff, local agencies, local churches, federal assistance programs, and family and friends. All participants cited the stability, safety,

security, structure, and encouragement of the shelter environment as an important facilitator of their ability to transition to self-sufficiency. A few participants' quotes follow to represent this emergent theme:

Since I came to [the shelter] I knew I had a place to sleep, eat and at least get re-established, put my feet back on the ground and get the fuzziness out of my head, and [staff mentors] told me about Jesus and about how he wants me to succeed, he doesn't want me to fail. So it was a start of a new journey and a new adventure when I first started the PSP [mentoring] program and they introduced it to me the first and foremost priority was to get to know the Lord Jesus Christ and to put him number one and then to um, further your [my] education and to work and serve . . . I have applied [this] to my life and I have been completely blessed . . . the love and the openness and the honesty and the non-judgmental Christian people that work here flooding me with that it's okay to be yourself and to let Him [God] shine. (Will)

Jencks (1994) suggested that shelters should be clean, safe, and orderly. Jencks also recommended requiring contributions from residents to encourage a sense of dignity. Jenks also recommended a movement away from multiple-bunk type shelters to provide more privacy, but acknowledged the high cost of doing so.

A participant shared his perceptions about the environment at the shelter, which included a focus on structure, cleanliness, and safety:

They're [the shelter] giving you . . . they're offering you direction. They're giving you; you know the means to get your resume'. They're giving you the means to get work, a good work ethic, to be responsible, to follow rules, to have structure.

Um, they're also giving you a warm bed, a place to be clean, not having to worry about that is huge. Um you don't have to sleep in the abandoned house. You don't have to worry about some guy sticking you in the back or robbing ya or sleeping over at the warming center. (Dennis)

Another participant spoke about his experience with the Personal Success Plan mentoring program at the shelter. One thing Jim found valuable was having the opportunity to reflect, think, and begin to make a plan to restructure his life:

I was on the pre-PSP program for a week to 10 days and then I was on the full PSP. Went to all the classes, ah really enjoyed them. They [staff] were very insightful and they really teach you how to think again because when you're homeless you're just kinda numb, numb psychologically because it's like what am I doing, what direction am I going in. This kind of helps you calm down and think about restructuring your life . . . it [PSP program] was a real help . . . Bible study, current events ah critical thinking and I'd say it gets you into thinking and to restructure your life. It gets you thinking about your future. (Jim)

Goetz and Schmiede (1996) demonstrated the value of mentored case management related to employment and housing outcomes for homeless individuals. Kim, et al. (2010) found that outcomes improved for homeless individuals who were provided with mentored long-term continuity of care over one-time crisis intervention.

Vindell noted the existence of a mentoring program at the shelter and that the help offered goes beyond simply providing food and shelter:

Um overall I guess it's just a great program [PSP] because there are some homeless shelters that you're gonna have your bed you're not gonna get you a hot

meal every night. You don't have structure and everything else. I forgot the name it's just down the street next to the soup kitchen down there. I walked by it and it just looked run down you know. Um but this place [the shelter and PSP program] it instilled something's in me that I still have my work ethic. (Vindell)

Participants were encouraged to be open and honest as they shared perceptions and in particular, their perceptions related to the shelter and the Personal Success Plan mentoring program. Some of their perceptions follow as criticisms and suggestions and provide important information from which shelter leadership and others can plan program improvements.

#### Criticisms and Suggestions for Improvements

Participants offered criticisms and suggested improvements for shelter programs and particularly the PSP mentoring program. Participants seemed to respond comfortably to the researcher's request to be candid—that their candor would improve the value of the research. One participant pointed out that beyond the safe environment of the shelter and the friendly people, the program was not instrumental in facilitating his successful transition to self-sufficiency:

The PSP plan for me did not do a lot for me other than some classes. The critical thinking class, I loved it. Um, the positive influence of you all, I loved it, but it didn't particularly get me going in any particular direction because I was left of my own devices and I had to find my own. The PSP, I came up here and had a meeting with yourself, I saw [staff member] and other than that, it was a piece of paper. There wasn't enough follow-up, I feel. (Bud)



Another participant pointed out some inconsistencies in accountability in the PSP mentoring program:

Yeah it's just I mean cause you can't treat one person one way and then treat the very next one a whole different way while they're doing the same identical thing. It's like you gotta . . . like if you did something [rule infraction] and then somebody else did the same exact thing and they don't get nailed and then all of a sudden they tell you hey you gotta go for 30 days. It's like wait a minute what this person's allowed to stay here and I'm not. (Don)

Still another participant suggested an improvement stating that there was so much on-campus work required at the shelter as part of the PSP program that participants in the program did not have sufficient time to look for work outside the program.

From my time, um I guess it would be like a little bit more time to work. You know I could understand helping out around here, but like I need to go to \_\_\_\_\_ looking for jobs. I need to pay attention to getting some income. (Kelvin)

Participants' constructive criticisms of the mentoring program provided valuable insights into potential improvements. The researcher addressed these findings and participants' suggestions in the final section of this chapter covering conclusions and recommendations. Participants also shared their perceptions about services received from other agencies in the community.

## Support Received from Community Sources

Participants cited support from other sources outside the shelter and PSP mentoring program. These sources included social service agencies, churches, family, and friends. In their words, participants described some of these sources:

There is resources for everybody. Whatever your underlying condition is, because we all have, that's the reason we're homeless. With mine, VA saved my life and school obviously. For mental issues, CMH [community mental health services] can be your resource, but there is a solution for every one of our problems out there, you just have to find them. For me, it was education and the Veteran's Administration, saved me. (Bud)

Dennis received support from a member of a local church who hired Dennis at his business based on a recommendation from a mentor at the shelter. The business owner later recommended Dennis to the church for a job there based on Dennis' good work performance. Later the church pastor and the business owner recommended Dennis to a local pharmaceutical company that hired Dennis to a fulltime position with benefits:

God knows what he's doing. I mean [the business owner] from Tim Horton's a member at the Nazarene Church . . . Pastor Steve there, the shelter staff who went out on a limb and recommended me. Um, it's I just say it happened exactly the way it was supposed to . . . it also involved faith, but it also involved having the right people as I went. God put these people in my life. (Dennis)

One resident received support from a local government-funded job-training agency. It was unaccredited for electrician training, but provided skills and impetus for further education at an accredited school:

I had heard about the Section 3 program that they had goin on with helping dislocated workers and I had missed out on a couple of the sign up times where you could go in and get into the class and everything and then there was a guy that told me man you need to go back down here to Road to Freedom there they starting up classes again and I think that was late 2010, 2011 when I did that. And that was when I decided it's either the streets or sustaining my life to where I could be useful in society and I opted to go to sign up for the section 3 program. I cut everything dealing with drugs out of my life ya know. I decided I was gonna go on my will to go get help from my Savior up stairs and I did it. Without going to rehab or anything because I had been in and out of rehab so much ya know and for a while it would help me and then I would revert back . . . My mom's there and I told them I was graduating and they made it down [to graduation from the job-training program] there ya know. They was happy to see me do that ya know. My dad was real happy . . . ya know she [mom] was happy I told them that I hoped they could make it [to the graduation ceremony] I'd sure like to see you there and they made it . . . Another success and a real big success will be when I finally get my associates degree in electrical. That's gonna be a really big success! And just overall like being free of any obstacles that's gonna be holding me be. That's success. (Kevin)

Another participant recounted getting help from a board member at the shelter and a local orthodontic surgeon to and provide him with dentures:

I got my teeth fixed. I've heard a few people say it looked like I'd been chewing on dynamite at times. I mean it's and the way that other people would look at it

away from here, they always came up with ah it's okay he's a crack head and he's a druggie or whatever, but that wasn't the case but they didn't want to hear that.

I've even had cops when my teeth was like that call and oh you're a dooper, you're this you're that. I'm like, no I'm not I never touched the stuff. I mean it's all some of the stuff that they accused me of doing. But ah then I got my teeth done it's like immediately after that, the day after was when I started the job at Mongolian Barbecue. Then it's like after that everything just started getting better and better.

(Don)

Jim, Kevin, and Scott commented on the value of the services received from the local community mental health services. Jim said, "I was surprised that they were even open because it was a Sunday. It was the first day of the year and I'm thinking there not gonna be there. How in the hang . . . and it's a holiday and its Sunday. They were there and I told them what was going on [mental health breakdown] and they talked to me and called an ambulance and took me right to the hospital."

Kelvin shared something similar about the local community mental health services:

I was a patient at the hospital [psychiatric unit after a breakdown] in the beginning and then became a [community] mental health [services] patient. Then they . . . that's how I ended up getting my caseworker. She started coming over here. She started helping me out. (Kelvin)

Scott also referenced support he received from the local community mental health services, "I really have to say primarily personally supportive was my son's mother [Scott's ex-wife], my dad's been supportive, but primarily were the people involved at

the shelter and community mental health [services], it's that local support network that really pulled me up." Jim, Kelvin, and Scott each described important coordination of services provided by caseworkers through local government-funded community mental health services.

#### Coordination of Services

Rosenheck et al. (1998) studied the effectiveness of service integration in helping the homeless mentally ill gain access to services and housing. The authors found that integration of community services improved transitions to a greater degree of self-sufficiency for homeless mentally ill individuals. Because of these findings, the researcher took note of participants' perceptions about the coordination of community services designed to help homeless individuals. Eight of 10 (80%) of the participants in this study commented on the coordination of community services. The following quotes represent the perceptions of participants in this study:

Ah I attribute to well one is the general manger there, when I mentioned the shelter, he ask me if I knew John [staff person] and I'm like yeah. He's like well what do you think he would say about you and all that and I'm like pretty much good. I don't think he would say anything bad about me. He's like well when you leave here go in and have him call me and then we'll talk and all that and then I'll call you back out for whatever and let you know. (Don)

Jim spoke of what he considered an extraordinary effort by the local hospital he found his way to during what he described as his "breakdown." He also referenced the coordination between the hospital, local community mental health services, and the shelter:

Ah the ah therapist or counselor at the hospital brought in the navigation team from CMH and they're kinda like a transitional thing to get you back into life and so they're the ones that brought me to the shelter. That's actually the first sparkle of the thing, well there's somebody here that wants to help me, that's great. It felt really good. (Jim)

Bud was impressed with the help he got from local government service offices and helping agencies, but noted that most of the coordination he did on his own and a person should do most of the work to access services:

Every one of us has a resource. Like I said there is mental health guides, there is CMH [community mental health services] and for the drug guys, there's New Paths [pseudonym for a local addiction rehabilitation center], go through the program, they will help you find the resources! (Bud)

One participant offered that the shelter and local agencies could do a better job of working together to deliver services:

I'd say the one component that I found fairly frustrating was ah in terms of ah the employment component. Ah I mean yeah, you know, it being a pretty brand new program at the time ah I just kinda felt that maybe there should have been a little bit more kind of assistance in you know in kinda evaluating each person. I felt like we were all just kinda thrown into the same category and say okay it's we're back to the boot straps and go out and find yourself a job. You know?" (Scott)

This study's findings are consistent with the findings of other researchers regarding the importance of the coordination of local services. Hopper (1991) described the homeless as societal victims in need of societal interventions such as affordable

housing, housing assistance, quality physical and mental healthcare services, and appropriate social services and benefits. Jencks (1994) suggested that being born disadvantaged, coupled with lack of support leads to the streets. Jencks recommended increased welfare payments or subsidized housing for families; a day-labor market supported by government and private sources for working adults; and social services and intervention for the mentally ill.

The findings of Seidner, et al. (1990) support the position that homeless adults are not a homogenous group and so the perceptions of individuals from various demographics are important. Service providers interested in coordinating services must understand the needs of different sub-groups of homeless individuals. The needs of homeless families differ from those of homeless individuals. Homeless women have different needs than homeless men. Women with children have different needs than women with no children. Other researchers (Nuttbrock, et al., 1997; and Van Laere, et al., 2009) also described the benefits of coordinated services for homeless individuals in achieving better outcomes related to self-sufficiency.

Findings for this study are categories and themes that emerged from analysis of interviews with individuals who have successfully transitioned from homelessness to self-sufficiency. This study focused on homeless adult males. The researcher sought to draw out, understand, and faithfully describe the perceptions of the men in this study regarding their lived-experiences with homelessness and their successful transitions to self-sufficiency. The next section reviews the researcher's thinking regarding decisions made, and actions taken throughout this study to address researcher bias and to support credibility during analysis and documentation of findings.

## Bias and Credibility

The researcher invited participants to share openly and honestly about their lived-experiences and perceptions while responding to open-end interview questions. As the executive director of the shelter, the researcher became acquainted with each of the 10 participants during their stays at the shelter. In order to minimize the potential effects of *pleaser bias*, the researcher followed the suggestions of Seidman (2006), and explained the nature of this study and urged participants not to try to please the researcher with their answers. The researcher assured each participant that his answers, positive or negative, would in no way affect his standing at the shelter. The researcher explained to participants that this research would give voice to their experiences and possibly help other homeless men successfully transition to self-sufficiency. Their insights might also help improve programs at this and other shelters.

The researcher practiced reflexivity (Patton, 2002) during interviews, throughout analysis of interview content, and throughout the writing process. In qualitative analysis, the writing process is part of the ongoing reflective research as thinking and reflection continue to mold the researcher's understanding of themes and categories. The researcher took pains to let the text of interview transcripts speak. The researcher allowed major themes and categories to emerge during content analysis consistent with grounded theory (Strauss & Corbin, 1990 as cited by Gibbs (2012)). This reduced the risk that the researcher would coax meanings from the text that might artificially cast the shelter and its programs in a favorable light. Participants shared criticisms and suggestions for improvement related to shelter programs and in particular, the shelter's Personal Success Plan mentoring program. The researcher discussed these findings in the preceding



sections and interpreted these findings in the sections to follow by discussing their implications.

Miles and Huberman (1994) defended qualitative analysis as a means to get at the richness of the human experience. For the authors, the key to credibility of qualitative research is for the researchers to be aware of and expose their biases: “Our aim is to be explicit about our biases, not to persuade anyone their superior virtue or even their reasonableness” (p. 4). The researcher’s objective is to capture the perceptions of “local actors” from the inside (p. 6) and to create an environment that encourages a deep understanding of the thoughts and experiences of these actors. The researcher must suspend preconceptions and listen to participants attentively, recording specific words and phrases that reflect thoughts, themes, and meaning units. Words and phrases of participants make up the data of qualitative analysis.

It is important for qualitative researchers to disclose bias systematically and candidly (Gibbs, 2012). This researcher is biased toward the value of the mentoring program at the shelter. However, the researcher also nurtures a strong commitment to continuous improvement and learning. The researcher intentionally reflected on this objective throughout data collection, analysis, and writing. The transcripts were transcribed verbatim by a third party and verbatim quotes from participants were included in presentation of the data to demonstrate that interpretations are grounded in the data as described by Denzin, (1989) and Gibbs.

Denzin (1989) posited that one way the qualitative methods researcher can enhance credibility is through a systematic search for negative cases or cases that do not support the evolving patterns or themes. Properly performed and documented, this

method demonstrated to the reader and other researchers that the qualitative researcher has worked hard to be open-minded and to let the data tell the story. The researcher noted the emergence of a theme related to child abuse in the case of Don. Don related:

My dad would literally throw me down the stairs or kick me down the stairs, throw me in trash cans and all that and I mean I would never hit him back. I never hit my dad. I mean it's like I just more less just let him do what he had to do but talk about dysfunctional I mean that's I guess you could consider that dysfunctional. (Don)

Don also related an incident with his mother after his father passed away in which his mother, inebriated, asked Don to sleep with her. "She asked me to sleep with her, but not in just sleep kind of mode and that more or less severed the line between me and her." The researcher did not include this as an emergent theme because it involved only one participant. However, Kim, et al. (2010) examined the impact of physical and sexual trauma on a sample of 229 homeless men. The authors found a link between early trauma related to physical and sexual abuse and subsequent mental illness and homelessness in men. This could be an important theme. Although it did not emerge as a theme in this researcher's study, it is possible other participants may have experienced similar early-life trauma, but did not feel as free as Don did to discuss it.

Denzin (1989) strongly supported the notions of a variety of methods, multiple observers, and multiple theories to compensate for the intrinsic bias that comes from single-method, single-observer, and single-theory studies. For the purpose of this study, the researcher made use of colleagues to provide triangulation for methods by taking and commenting on the survey and interview instruments. Colleagues also provided

independent input on coding of themes and meaning units. Finally, the researcher made use of a number of theories, not relying on one particular classical qualitative methodology.

The researcher is also biased toward the notion that faith, and particularly the Christian faith, is of value in nurturing hope and motivation to construct and execute a positive plan grounded in personal responsibility and work. Consistent with Denzin (1989) and the practice of looking for rival themes or explanations, the researcher intentionally looked for data that did not support the notion that participants' faith was helpful in their journey from homelessness to self-sufficiency. Responses of some participants who included mention of their faith as an important factor in the lived-experiences seemed genuinely their own.

In a few cases, the researcher sensed that participants may have mentioned their faith, God, and Jesus to connect with the researcher. However, since faith is such an intensely personal experience the researcher must let participants' responses stand on their own without interpreting the genuineness of those responses. The researcher intentionally avoided leading questions that might encourage participants to share responses consistent with the researcher's bias related to faith as an important lived-experience and motivator for successfully addressing issues such as addiction, social support, work ethic, or specific aspirations, hopes, and dreams.

### Conclusions

This multicase study explored the perceptions of formerly homeless adult males about their lived-experiences before, during, and after homelessness. The researcher also explored with participants their perceptions about factors they employed to achieve a

successful transition from homelessness to self-sufficiency. Finally, this study explored participants' perceptions about the help they received from others to assist them on their journey from homelessness to self-sufficiency. Through exploring participants' lived-experiences, the researcher sought to understand better the phenomenon of homelessness in adult males and in particular, homeless males who had successfully transitioned from homelessness to self-sufficiency. Patton (2002) exhorted qualitative researchers, "Do your very best with your full intellect to fairly represent the data and communicate what the data reveal given the purpose of the study" (p. 432). Bloomberg and Volpe (2008) described the objective of qualitative analysis as, "...portraying a holistic picture of the phenomenon under study to understand the nature of the phenomenon—which is usually extremely complex—within a given specific context" (p. 134). The researcher sought to draw out, understand, and describe for readers what it has been like to live the lives of this study's participants. The researcher also sought to help readers hear the individual voices of each participant and to a construct from participants' perspectives, consistent with the thoughts of Creswell (2013), a composite voice of all participants.

The findings of this study suggest that loss of familial social support and the regaining of some measure of reconstructed social support characterize the lived-experiences of adult males who have successfully transitioned from homelessness to self-sufficiency. The conclusions suggested by this study follow the research questions and the findings and, therefore, address three areas: (a) the loss of social support characterizes the lived-experience of the homeless adult male. Factors such as substance abuse, death in the family, divorce, incarceration, and mental illness contribute to the loss of social support experienced by homeless men; (b) behaviors consistent with personal

perseverance, initiative to secure a dependable income stream, faith in God and a sense of purpose, and strong work ethic characterize homeless adult males who have successfully transitioned to self-sufficiency. Securing a dependable income stream is an important personal objective of homeless men who successfully transition to self-sufficiency. Adult males who have successfully transitioned from homelessness to self-sufficiency retain hopes and dreams that may provide motivation for sustaining self-sufficiency, and (c) factors such as a safe, supportive shelter environment and effectively coordinated services are important for reconstructing a social support system critical for a homeless adult male's successful journey from homelessness to self-sufficiency.

Following is a discussion of the major findings and conclusions from this research, organized by research questions. The discussion is followed by some thoughts on the implications of this study with recommendations.

#### Conclusions Related to Research Question One

What is a sheltered homeless adult male's perception of his life experiences and circumstances before, during, and after his experience with homelessness?

##### Loss of Social Support.

The findings of this study suggest that homeless adult males who have successfully transitioned to self-sufficiency believe that the loss of social support explains their descent into homelessness. Taken together their voices tell us that the factors that contributed to their loss of social support were substance abuse, death in the family, divorce, incarceration, and mental illness. The composite voice of this study's participants indicates that reconstructing a system of social support is an important strategy for achieving a successful transition to self-sufficiency. The homeless adult male

retains aspirations, hopes, and dreams that he may have revised along the way, but remain a potentially potent source of motivation for achieving and sustaining a life of self-sufficiency. The homeless adult male who has successfully extricated himself from the streets recognized along the way that initiative on his part was necessary. This was the focus of research question two.

#### Conclusions Related to Research Question Two

What is a sheltered homeless adult male's perception of actions he took that helped him move from homelessness to self-sufficiency?

##### Securing Dependable Income.

The findings of this study suggest that homeless adult males who have successfully transitioned to self-sufficiency believe that achieving a dependable source of income is the most important personal objective. This income may come through employment or some type of government benefit or assistance such as Supplemental Security Income (SSI) or Veterans Administration (VA) benefits. While study participants perceive this as their most important personal objective to support a successful transition to self-sufficiency, they acknowledge the value of support from others. This was the focus of research question three.

#### Conclusions Related to Research Question Three

What is a sheltered homeless adult male's perception about the help he received from others and particularly from the shelter's mentoring program on his journey from homelessness to self-sufficiency?

### Securing Stability, Safety, Encouragement.

This study suggests that the availability of a stable, safe, and encouraging home base is an important facilitator to an adult homeless male's ability to begin to make and execute a plan designed to achieve self-efficiency. Shelters must strive to provide such an environment. Coordinated services by service providers are nearly as important. Lennon, et al., (2005) found that active assistance that guides a homeless person's use of services decreases the likelihood of future homeless episodes. One explanation may be that this active guidance provides the social support that was missing early in the life of a homeless male and has continued to be absent. Participants in this study reinforced the notion that a secure place to sleep, with access to one's own locker, and showers is an important facilitator to making and executing a plan to search for employment or attend job-training school. The composite voice of participants also stressed the importance of an accountability partner or mentor in making and executing a plan, clearing barriers to employment, providing a positive reference for employment, and navigating local social services. Leaders of shelters with mentoring programs should listen carefully to this voice. Leaders should consider emphasizing effective coordination with community services outside the shelter in order to help mentees reconstruct a prescriptive network of social support, secure a dependable income stream, tie into the support of a church or other faith community, and access services to address addictive behaviors and mental health care.

The conclusions offered above led to the implications and recommendations that follow. The researcher synthesized these proposals after carefully listening to the voices of homeless adult males who have successfully transitioned to self-sufficiency.

## Implications and Recommendations

### Safe, Secure, Encouraging Environment

The composite voice of those who have successfully navigated the journey from homelessness to self-sufficiency supports a strategy centered on the reconstruction of a social support system. The foundation of such a support system must be a safe, secure, encouraging environment that respects the dignity of those who are desperately seeking help and provides a home base that provides storage for possessions and a culture of acceptance, advocacy, and personal responsibility for those who are hurting.

### Coordinated Services to Address Underlying Factors.

A shelter program designed to help must address the underlying factors that contributed to the loss of social support for those who are homeless. Shelter leaders should ensure that mentors are informed about local services to address addictions and mental illnesses and ensure good working relationships are established with community service agencies to provide for effective coordination of services. Access to services to provide counseling to help residents deal with issues of family dysfunction and past trauma is especially important. Shelter leadership should become educated on private resources and government-subsidized benefits available to access these services. If shelters have the resources and choose to have in-house services, then these services must be professional and effective and coordinate with outside services to help residents when they transition out of the shelter into the community.

### PSP Program Improvement: Securing Income through Employment.

One of the important objectives of the PSP mentoring program at the shelter is to facilitate mentees' access to education to gain knowledge and skills especially job-related



skills and to connect mentees with jobs in the community. The program should develop better connections with local business and organizations as potential job sources.

Financial supporters of the shelter who own businesses or run organizations may be more willing to help in this area if the shelter communicated with them more effectively. A strong relationship between the leadership of the shelter, the shelter's PSP mentoring program, and local employers would increase the likelihood of securing employment for mentees with a history of addictions, incarceration, or mental illness based on the shelter leadership's endorsement of a mentee. PSP mentee schedules should include specific time slots dedicated to job searches and opportunities to meet leaders at job sources who have agreed to collaborate with the shelter to consider PSP mentees as job candidates.

#### PSP Program Improvement: Mentor Knowledge for Coordinating Services.

Shelter leaders should train PSP mentors to be subject matter experts regarding local addiction rehabilitation services, local job training services, and local mental health services. If resources permit, the shelter should consider hiring a social worker trained in accessing local private support services and government subsidized serves. The shelter should establish a better connection with local services that have a good track record helping truly disabled homeless individuals successfully obtain SSI benefits.

Alternatively, the shelter may be able to contract with an attorney—if resources permit—who specializes in SSI applications or establish a group of attorneys who would perform this service pro bono.

#### PSP Program Improvement: Churches as Social Support.

At the shelter, Personal Success Plan contracts should be prescriptive, respecting the individual aspirations, hopes, and dreams of mentees. Shelter leadership should

establish better connections with local churches to support the spiritual growth of PSP mentees and to provide opportunities to develop social support outside of the shelter.

#### PSP Program Improvement: Mentees' Personal Responsibility.

Shelter leadership should continue to focus on the personal responsibility of mentees in PSP contracts. Encouraging and requiring personal initiative is essential for achieving and sustaining self-sufficiency. Personal initiative is essential in reconstructing and sustaining an effective social support network if homeless individuals are to prevent future homeless episodes. The researcher believes that homelessness is both an individual and a societal problem. Motivated homeless individuals must take personal responsibility in order to successfully transition away from dependence and toward self-sufficiency.

#### Communities, Shelters, and Solidarity with Homeless Individuals.

James the brother of Jesus said, "Suppose a brother or a sister is without clothes and daily food. If one of you says to them, 'Go in peace; keep warm and well fed,' but does nothing about their physical needs, what good is it? In the same way, faith by itself, if it is not accompanied by action, is dead" (James 2:15-17, NIV).

Members of a community should be good neighbors and provide the social supports needed to help homeless individuals survive, get their bearings, make their own personal prescriptive plan, and execute that plan being careful not to nurture unhealthy dependency. Members of a community, in solidarity with each other, have the responsibility to help the helpless. This requires discernment and an objective assessment of a homeless individual's current state and abilities. Well run shelters that provide a safe, secure, encouraging environment and a facilitated pathway to self-sufficiency for homeless adult males is an effective means of doing this. In order to optimize such a

strategy, the community and shelters must listen to and understand the voice of homeless men who have successfully transitioned to self-sufficiency. It follows that those providing community services for homeless women and families should listen to their voices as well—especially the voices of those who have successfully transitioned to sustained self-sufficiency.

#### Recommendations for Future Research

This study answered some questions and raised some additional ones. What are the perceptions of homeless women who have transitioned from homelessness to self-sufficiency—and what about homeless women with children? We are also left with no insights about whole families who have navigated the journey from homelessness to self-sufficiency. This study did not address their unique lived-experiences so more research is needed. This study raised questions about the role of physical, mental, and sexual abuse in the lived-experience of participants. Kim et al. (2010) and Taylor and Sharpe (2008) found this to be an important question. The sensitivity of this area caused the researcher to wonder if participants might suppress this information in an interview. It may have proven fruitful to dig deeper into the literature in this area, but this will have to be reserved for future research by this researcher or others.

The researcher recommends some other areas for future research. Additional studies using similar methods with more and different participants would add to the richness of the composite voice of homeless men who have successfully transitioned to self-sufficiency. As was mentioned, similar research with women and families would fill a gap in the literature that has been present for all groups, including men up to this point. The finding that all men in the sample used for this study had a high school diploma or a

General Equivalency Diploma intrigues the researcher. It would be interesting to study a purposeful sample of homeless men who have successfully transitioned to self-sufficiency who do not have a high school education. The researcher recommends that shelter leadership routinely gather data for all PSP mentoring program graduates at exit and for several years if possible to draw out their perspectives and to study the long-term relationship between education level and resilience to achieve self-sufficiency.

### Concluding Remarks

The body of research on homelessness now includes the voice of a group of men who found a way to extricate themselves from the streets and navigate a pathway to self-sufficiency. Of course, no one is truly self-sufficient when we broaden the definition of that term beyond the definition used for this study. We rely on food growers and truck drivers, wholesalers and retailers to bring food to our neighborhoods. We rely on employers and customers in an exchange of resources that provides us with a dependable income stream to pay our bills. We could continue to map out our web of interdependence and doing so would be informative and quite humbling.

The men in this study humbled themselves and shared their stories with us. They shared their aspirations and dreams and provided us a window on their lived-experiences. Through circumstances and behaviors both within and beyond their control, they experienced a loss of social support and found themselves homeless. Through their own initiatives fueled by fear, faith, and trust in others, they reconstructed a social support system that they used to achieve and sustain a life free of episodes of homelessness. I hope their stories inspire and equip you the reader as they have this researcher.

## REFERENCES

- Abdul-Hamid, W., & McDonald, J. (2009). The mental health needs of homeless people: A trans-Atlantic comparison. *International Journal of Culture and Mental Health*, 2(2), 109-117. doi:10.1080/17447140903205366
- Amato, F., & McDonald, J. (2011). Examining risk factors for homeless men: Gender role conflict, help-seeking behaviors, substance abuse, and violence. *Journal of Men's Studies*, 19(3), 227-235. doi:10.3149/jms.1903.227
- Anderson, N. (1923). *The hobo*. Chicago, IL: The University of Chicago Press.
- Bloomberg, L., & Volpe, M. (2008). *Completing your qualitative dissertation*. Thousand Oaks, CA: Sage.
- Boydell, K. M., Goering, P., & Morrell-Bellai, T. L. (2000). Narratives of identity: Representation of self in people who are homeless. *Qualitative Health Research*, 10(1), 26-38. doi:10.1177/104973200129118228
- Caton, C., Hasin, D., Shrout, P. E., Opler, L., Hirshfield, S., Dominquez, B., & Felix, A. (2000). Risk factors for homelessness among indigent urban adults with no history of psychotic illnesses: a case-control study. *American Journal of Public Health*, 90(2), 258-263. doi:10.2105/AJPH.90.2.258

- Cook, J., Pickett-Schenck, S., Grey, D., Banghart, M., Rosenheck, R., & Randolph, F. (2001). Vocational outcomes among formerly homeless persons with severe mental illness in the ACCESS program. *Psychiatric Services, 52*(8), 1075-1080. doi:10.1176/appi.ps.52.8.1075
- Creswell, J. (2013). *Qualitative inquiry & research design: Choosing among five approaches*. Thousand Oaks, CA: Sage.
- Denzin, N. (1989). *The research act: A theoretical introduction to sociological methods*. (3rd ed.). Englewood Cliffs, NJ: Prentice Hall.
- Gamache, G., Rosenheck, R., & Tessler, R. (2001). The proportion of veterans among homeless men: A decade later. *Social Psychiatry and Psychiatric Epidemiology, 36*(10), 481-485. doi:10.1007/s001270170012
- Gibbs, G. (2012). *Analyzing qualitative data*. Thousand Oaks, CA: Sage.
- Goetz, K., & Schmiede, C. (1996). From marginalized to mainstream: The HEART project empowers the homeless. *Family Relation, 45*, 375-379. doi:10.2307/585166
- Hsieh, H.-F., & Shannon, S. E. (2005). Three approaches to qualitative content analysis. *Qualitative Health Research, 15*(9), 1277-88. doi:10.1177/1049732305276687
- Hombs, M. & Snyder, M. (1982). *Homelessness in America: A forced march to nowhere*. Community on Creative Non-Violence, Washington, DC.
- Hopper, K. (1991). Homelessness old and new: A matter of definition. *Understanding homelessness: New policy and research perspectives*. Fannie Mae Foundation.

- Hwang, S. (2011). Mortality among men using homeless shelters in Toronto, Ontario. *Journal of the American Medical Association*, 283(16), 2152-2157.  
doi:10.1001/jama.283.16.2152
- Jencks, C. (1994). *The homeless*. Cambridge, MA: Harvard University Press.
- Kane, M., Green, D., & Jacobs, R. (2010). Perceptions of students about younger and older men and women who may be homeless. *Journal of Social Service Research*, 36(2), 261-277. doi:10.1080/01488376.2010.493845
- Kautz, B., & Cochran, T. (2010, December). A Status Report on Hunger and Homelessness in America's Cities. Retrieved from <http://www.usmayors.org/pressreleases/uploads/2010HungerHomelessnessReportfinalDec212010>
- Kennedy, A. (2007). Homelessness, violence, and school participation among urban adolescent mothers. *Journal of Community Psychology*, 35(5), 639-654.  
doi:10.1002/jcop.20169
- Kim, M., Ford, J., Howard, D., & Bradford, D. (2010). Assessing trauma, substance abuse, and mental health in a sample of homeless men. *Health and Social Work*, 35(1), 39-48.
- Kvale, S., & Brinkmann, S. (2009). *InterViews: Learning the craft of qualitative research interviewing*. Thousand Oaks, CA: Sage.
- Leedy, P., & Ormrod, J., (2010). *Practical research*. Upper Saddle River, NJ: Pearson.
- Lennon, M., McAllister, W., Kuang, L., & Herman, D. (2005). Capturing intervention effects over time: Reanalysis of a critical time intervention for homeless mentally

- ill men. *American Journal of Public Health*, 95(10), 1760-1766. doi:10.2105/AJPH.2005.064402
- Malcolm, B., (2004). Evaluating the effects of self-esteem on substance abuse among homeless men. *Journal of Alcohol and Drug Education*, 48(3), 39-61.
- Meadows-Oliver, M., Sadler, L., Swartz, M., & Ryan-Krause, P. (2007). Sources of stress and support and maternal resources of homeless teenage mothers. *Journal of Child and Adolescent Psychiatric Nursing*, 20(2), 116-125. doi:10.1111/j.1744-6171.2007.00093.x
- Miles, M., & Huberman, A. M. (1994). *Qualitative data analysis*, Thousand Oaks, CA: Sage.
- Miller, K., Bunch-Harrison, S., Brumbaugh, B., Kutty, R., & FitzGerald, K. (2005). The meaning of computers to a group of men who are homeless. *American Journal of Occupational Therapy*, 59, 191-197.
- Mills, C., & Ota, H. (1989). Homeless women with minor children in the Detroit metropolitan area. *Social Work*, 34(6), 485-489.
- Moustakas, C. (1994). *Phenomenological research methods*. Thousand Oaks, CA: Sage.
- Nuttbrock, L., Ng-Mak, D., Rahav, M., & Rivera, J. (1997). Pre- and post-admission attrition of homeless, mentally ill chemical abusers referred to residential treatment programs. *Addiction*, 92(10), 1305-1316.
- O'Flaherty, B. (1996). *Making room*. Cambridge, MA: Harvard University Press.
- Patton, M. (2002). *Qualitative research and evaluation methods*. Thousand Oaks, CA: Sage.



- Persaud, S., McIntyre, L., & Milaney, K. (2010). Working homeless men in Calgary, Canada: Hegemony and identity. *Human Organization*, 69(4), 343-351.
- Phelan, J., Link, B., Moore, R., & Stueve, A. (1997). The stigma of homelessness: The stigma of the label "homeless" on attitudes toward poor persons. *Social Psychology Quarterly*, 60(4), 323-337.
- Robson, C., (2002). *Real world research*. Malden, MA: Blackwell.
- Rosenheck, R., Morrissey, J., Lam, J., Calloway, M., Johnsen, M., Goldman, H., ... Teague, G. (1998). Service system integration, access to services, and housing outcomes in a program for homeless persons with severe mental illness. *American Journal of Public Health*, 88(11), 1610-1615. doi:10.2105/AJPH.88.11.1610
- Rossi, P. (1989). *Down and out in America*. Chicago, IL: The University of Chicago Press.
- Salkind, N., (2009). *Exploring research*. Upper Saddle River, NJ: Pearson.
- Seidman, I. (2006). *Interviewing as qualitative research: A guide for researchers in education and the social sciences*. New York, NY: Teachers College Press.
- Seidner, A., Burling, T., Fisher, L., & Blair, T. (1990). Characteristics of telephone applicants to a residential rehabilitation program for homeless veterans. *Journal of Consulting and Clinical Psychology*, 58(6), 825-831. doi:10.1037//0022-006X.58.6.825
- Shlay, A, (1993). Family self-sufficiency and housing. *Housing Debate: Fannie Mae*, 4(3), 459.
- Snow, D., & Anderson, L. (1993). *Down on their luck: A study of homeless street people*. Berkeley, CA: University of California Press.

- Sturges, J. E., & Hanrahan, K. J. (2004). Comparing telephone and face-to-face qualitative interviewing: A research note. *Qualitative Research*, 4(1), 107-118. doi:10.1177/1468794104041110
- Taylor, M., & Sharpe, L. (2008). Trauma and post-traumatic stress disorder among homeless adults in Sydney. *Australian and New Zealand Journal of Psychiatry*, 42, 206-213. doi:10.1080/00048670701827218
- Tessler, R., Rosenheck, R., & Gamache, G. (2002). Comparison of homeless veterans with other homeless men in a large clinical outreach program. *Psychiatric Quarterly*, 73(2), 109-119.
- United States Department of Housing and Urban Development. (2010). *Annual homeless assessment report (AHAR) to Congress*. Retrieved from <http://www.hudhre.info/documents/2010HomelessAssessmentReport.pdf>
- Van Laere, I., de Wit, M., & Klazinga, N. (2009). Pathways into homelessness: Recently homeless adults' problem and service use before and after becoming homeless in Amsterdam. *BioMed Central*, 9(3). doi:10.1186/1471-2458-9-3
- Yankowski, M. (2010). *Under the overpass*. Colorado Springs, CO: Multnomah Books.
- Zima, B., Wells, K., & Freeman, H. (1994). Emotional and behavioral problems and severe academic delays among sheltered-homeless children in Los Angeles County. *American Journal of Public Health*, 84(2), 260-264. doi:10.2105/AJPH.84.2.260

APPENDIX A

Phase I Survey

Coded I.D. \_\_\_\_\_

Date: \_\_\_\_\_

### Phase I Survey

Thank you for agreeing to participate in this study. I am going to ask you a few brief questions. This discussion will last 10-30 minutes. Please relax and answer honestly. The purpose of this exercise is to find out how Personal Success Plan participants are doing since they left the shelter. Information collected in this survey is confidential and will be used to randomly select ten former Personal Success Plan participants for in-depth interviews.

1. My age is \_\_\_\_\_.
2. My race/ethnicity is:
  - White
  - African American
  - Asian
  - Hispanic
  - Native American
3. I stayed at the shelter from \_\_\_\_\_ to \_\_\_\_\_.
4. I was in the Personal Success Plan (PSP) Program from \_\_\_\_\_ to \_\_\_\_\_.
5. What is your current weekly (or monthly) income? \_\_\_\_\_
6. Describe where you are living. \_\_\_\_\_
7. How are you covering your monthly costs for room, food, and clothing?

8. Have you had any episodes of homelessness since you left the shelter?

9. Who are you closest to and whom can you count on?

10. Describe what parts of the Personal Success Plan you're still doing:

○ Daily Prayer \_\_\_\_\_

○ Daily Bible Study \_\_\_\_\_

○ Education \_\_\_\_\_

○ Service to Community \_\_\_\_\_

11. Would you be willing to participate in a 60-90 minute interview about your experiences?

Thank you for completing this survey. I very much appreciate it and your input may help others who are future PSP participants at the shelter

APPENDIX B

Phase II Interview

Coded ID: \_\_\_\_\_

## Phase II Interview

Date:

Time Start:

Time Finish:

Location:

Thank you for agreeing to participate in this study. I am going to ask you a series of questions. This discussion will last 60-90 minutes. Please relax and share your heart. The purpose of this exercise is to understand what it has been like to be you on your journey from homelessness to self-sufficiency. Information collected in this survey is confidential and will be used exclusively for professional purposes. Your perceptions may prove quite valuable for others who have not yet made your journey and for helpers who seek to help others move from homelessness to self-sufficiency. Your identity will not appear on any documentation for this study. Instead, a coded name will be used. I very much appreciate your willingness to participate and want you to feel comfortable and know that you can stop the interview at any point in time. Your responses will in no way impact future services you may want to access at the shelter.

Warm Up: Purpose, protections, appreciation. Questions: age, marital status, children, employment, domicile

### **Research Question 1:**

*What is a sheltered homeless adult male's perception of his life experiences and circumstances before, during, and after his experience with homelessness?*

**Before Homelessness:** What was your life like before you ever experienced homelessness?

1. Tell me about the people you knew: family, friends, enemies
2. Describe a “good father.” “Good mother.” “Good son.”
3. (If he seems willing), ask about his father, mother, siblings, other significant family members.
4. Who in your family went to school? How far did they go?
5. What are your thoughts about your experiences with school? Your successes? Disappointments? Regrets?
6. Tell me about where you grew up? Who did you play with? Tell me about them.
7. Tell me about the jobs you’ve had. Successful ones? Disappointments? Regrets?
8. What were your hopes and dreams when you were a boy?
9. Describe your feelings about those early dreams and your dreams today for the future.
10. When you were young, what did you think “success” was?
11. Today how would you define “success?”

**During Homelessness:** What was life like for you while you were homeless?

1. Describe what homelessness means to you and your experience with it.
2. How long were you homeless? How many times?
3. What was your life like before you came to the shelter?
4. Describe the circumstance that led up to you coming to the shelter.
5. Where were you living just before you came to the shelter?
6. What was it like there?
7. Have you ever spent nights on the street? If so, how long?
8. What was that like? Describe how it felt to be homeless.
9. What were your thoughts just before you came to the shelter?
10. How easy or hard was the decision? What did you expect to find? To achieve?

**After Homelessness:** What has your life been like since you have been out of the shelter and on your own?

1. What is each day like for you?
2. How has your life changed?
3. What is your job like?
4. Who are your friends/support group?
5. Who is your mentor? Accountability partner?
6. What is your relationship with your family?
7. Who would miss you if you were to pass away?
8. What is your outlook on life?
9. Tell me about your relationship with God?
10. Describe how you are continuing your education.
11. Describe how you are serving those who have needs.
12. What are your current hopes and dreams? Plans?



### **Research Question 2:**

***What is a sheltered homeless adult male's perception of actions he needs to take to prevent future episodes of homelessness?***

1. What do you know now that will keep you from being homeless in the future?
2. If you were to become homeless again, what do you think would cause it to happen?
3. To whom do you look for help?
4. Do you have a friend or friends who you need to help you succeed?
5. Tell me about who in your family you can trust. Rely on.
6. Tell me about the things, situations, or people you need to avoid.
7. Tell me about the things, situations, or people you need to stay close to.

### **Research Question 3:**

***What is a sheltered homeless adult male's perception about the help he needed from others to facilitate his journey from homelessness to self-sufficiency?***

1. What people or things helped you most along the way to self-sufficiency (not being homeless, providing for your own needs, getting a keeping a job and a place to live)?
2. What groups, agencies, or services were most helpful to you? Describe the ways they were helpful.
3. Describe some things that got in the way of your progress from time to time.
4. Describe what you can about the Personal Success Program.
5. Tell me how the program was helpful to you.
6. Tell me about the people you worked with.
7. What did you learn?
8. Do you still have a personal success plan?
9. While a PSP (Personal Success Plan resident), did you improve your faith life? Describe that?
10. Tell me about how you improved your education? Your employability?
11. What went well? Describe that.
12. What did not go well? Describe that.
13. How would you improve the program for future participants?
14. What advice would you give to a man who is homeless?
15. What advice would you give to young boys and men that might help them to never become homeless?
16. Is there anything else you want to share? Ask?

I want to thank you for taking your time to talk with me. You provided some great insights that just might help others. I want to remind you that your name will not be on documents that record this interview and your identity will be kept confidential. I am going to transcribe (put in writing) the recording of this interview. I will provide you a copy and review it with you if you like and you will have an opportunity to correct anything that I did not capture accurately. Again, thank you so much for spending this time sharing your views with me. I value them.

APPENDIX C  
Participant Profiles

## Participant Profiles

### *Bud*

Bud is 50 years old. He is a White male. He has a graduation equivalency diploma. He is divorced and the father of two daughters. He was addicted to drugs and funded his habit through stealing. He was arrested, convicted, and served over five years in prison. Upon release, he found himself absent of social support. He came to the shelter. He is a veteran. His VA benefits are helping him to work toward 2-year degree as a social work technician. He aspires to complete his bachelor's degree and become a licensed social worker. He wants to work with the poor. His faith in God sustains him daily. He works as a *handyman* and gets plenty of work by word of mouth. He appreciated the encouraging environment of the shelter and the spiritual environment helped him find his faith. However, the PSP mentoring program did not help Bud in his view in that his efforts to get his VA benefits and find work were the result of his own efforts. He kindly offers that the PSP program could provide more help in this area.

### *Will*

Will is 48 years old. He is a White male. He graduated from high school. He is reconciled to his wife and living with his wife and son. Alcoholism and prolonged episodes of drunkenness caused his wife to give him an ultimatum—family or alcohol. Will moved out and attempted suicide. He was hospitalized and upon discharge was homeless and came to the shelter. Mentors in the PSP mentoring program introduced him to the Christian faith which provides Will a sense of meaning and purpose and provides hope. He works as a maintenance man at the shelter even though he could work

elsewhere because of his many skills and work ethic. Will indicated that the shelter environment keeps him centered and accountable.

### *Kelvin*

Kelvin is 28 years old. He is a Hispanic male. He has a high school diploma. Kelvin's parents divorced when he was very young. He was raised by his mother who had moved with Kelvin and an older sister from the United States to her native Puerto Rico when Kelvin was in junior high school. His mother died before he was 20 years old and it was not long before he could not maintain his mother's house. He found his father in the United States, but was unwelcomed there. A series of jobs, job losses, living in the streets, and bouts in hospitals for mental health issues he found his way to the shelter. Kelvin found help through Community Mental Health Services (CMH). A CMH caseworker helped Kelvin find an apartment through *Section 8* housing [provide background and citation]. Kelvin pays rent with income from a job at a small manufacturing company. "The shelter saved my life. I had nowhere to go." "I became obsessed with work. [I was tired] of being broke and not having nothing, being in the streets and not having nothing... I'm not going to survive without God. If I hadn't believed in Jesus Christ I probably would even be dead or [have] killed somebody." Kelvin has been free of episodes of homelessness for over two years.

### *Vindell*

Vindell is 23 years old. He is a Hispanic-White male. He has a high school diploma. Vindell's mother died when he was four years old. His father, who did not remarry, was Vindell's caretaker and "best friend." Vindell's father enjoyed sports and was Vindell's biggest fan, attending all of his football games. Vindell dreamed of

becoming a professional football player. His father died of pancreatic cancer when Vindell was 12 years old. “I was in shock for awhile. Vindell stayed in a group home for a year before he was adopted by a family. He began to smoke marijuana. He broke into houses and cars, stealing selling things to support his smoking habit. He was arrested , convicted and served time. Vindell attributed difficulty getting into college (he graduated from high school a year late) and in getting a good job to the felony on his record. He was chronically unemployed with no income. He wound up at the shelter after living with several women and often in the streets. He found structure in the PSP mentoring program at the shelter and there he “developed a work ethic.” He is employed by a small manufacturing company and uses wages to pay for his rent and other bills.

### *Cliff*

Cliff is 62 years old. He is an African-American male. He has a high school diploma. He grew up very close to his mother, but with no father present. His father was never married to his mother and had other children by other women. Cliff worked most of his adult life and at some point became unemployed then chronically unemployed. He experienced a difficult divorce that was initiated by his wife. He became homeless and came to the shelter after being in and out of homeless shelters for several years. He entered the shelter’s PSP mentoring program. He connected with local community mental health services and despite no history of mental illness that he has shared, the agency helped Cliff successfully apply for SSI benefits. His benefits and government-subsidized rent allow him to meet his daily needs and he has had no homeless episodes for over two years. He is a member of a local church where he sings.

*Scott*

Scott is 49 years old. He is a White male. He has a high school diploma. For most of his adult life he has been employed and jobs that paid well, but lived a cycle that included alcohol abuse and related job loss. His family became disillusioned by his behavior and refused to enable this cycle. Scott made his way through addiction rehabilitation and ultimately wound up at the shelter. He joined the PSP mentoring program and benefitted from the encouragement offered and the program structure. He was disappointed with what he described as a lack of a real bridge to self-sufficiency. He found this through an external agency and local community mental health services who helped him apply for SSI and government-subsidized housing. Scott stays connected with a son from one of his several marriages. He has reconnected with some other members of his family, especially his father. He pays his bills with his SSI benefits.

*Dennis*

Dennis is 56 years old. He is a White male. He has a high school diploma. He got into drugs in high school. He was married for a number of years and moved around the country working for a major manufacturing company. He lost his job because of drug use. He cared for his sick mother when she was dying of cancer and stole her pain medications for his own use. He stole money from his father. Dennis came to the shelter after losing another job at a rehabilitation center because of his drug use. He hit rock bottom and was homeless with no place to go and came to the shelter. There he joined the PSP mentoring program and used it to develop a cadence for work. His reputation gained him a strong reference to an employer where he performed well. One good recommendation for performance led him from job to better-paying job and today he

works for a large company as lead sanitation person. He pays his rent and his other bills with income he earns. He maintains fellowship and attends a local church where the members were important supporters for most of Dennis' job promotions.

*Don*

Don is 35 years old. He is a White male. He has a high school diploma. He began shoplifting in junior high school in order to make money and share things with people to "make them like me." He was homeless living mostly in the streets and occasionally with family and friends from the time he was 18 years old until he was 31 years old. He broke into a house to get warm and was arrested for breaking and entering. He came to the shelter, left because he did not like the rules, then decided to return. He joined the PSP mentoring program, receiving help finding a job and got denture to replace his largely missing or rotting teeth. Don has been employed at a local restaurant for over two years and pays his rent and other bills with the wages he earns.

*Kevin*

Kevin is 52 years old. He is an African-American male. He has a general equivalency diploma. He was always in trouble in school despite coming from what he described as a very typical family with a good father and mother. He got into drugs in schools and later into stealing to fund his drug habit. He moved to Kansas City as a young man and had a series of jobs one after another always losing jobs related to his drug use. He spent 18 months in prison, lived with family off and on, then in the streets as he distanced himself from his family because of his drug use. Kevin was in and out of the shelter for a decade. He finally decided to get his life right after a narrow escape with death due to drug-related violence. He simultaneously attended a job-training program

and lived at the shelter and became one of the first mentees in the shelters PSP mentoring program. Kevin is working on his associate's degree to become an electrician and works odd jobs and as a home care worker to pay his rent and other bills.

*Jim*

Jim is 56 years old. He is a White male. He has a high school diploma. Jim worked in the restaurant business and was married. He and his wife drank socially and heavily and Jim became addicted to alcohol. Jim's wife was diagnosed with cancer and Jim cared for her full time as she declined and passed. Her passing led to a deep depression, alcohol use, and ultimately hospitalization for a mental illness. Because they depended on both spouses income and Jim's wife's benefits after Jim quit work to care for her, Jim was unable to keep their house. He was left homeless with no social support and came to the shelter. He worked joined the PSP mentoring program at the shelter and found help through a team of community mental health worker who helped Jim successfully apply for SSI benefits. Jim uses these benefits to pay for his rent and other bills. He volunteers with local non-profits.