Do Street Dwellers Dream?

A Phenomenological Study of the Chronically Homeless in the United States

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Thesis submitted to the faculty of the Virginia Polytechnic Institute and State University in partial fulfillment of the requirements for the degree of

Master of Science
In
Human Development

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December 4, 2012
Falls Church, Virginia

Keywords: Street Dweller, chronically homeless, dreams

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Abstract

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Chronically homeless individuals, or Street Dwellers, present unique challenges for clinicians and outreach workers who engage them when offering services like food, shelter, clothing, healthcare and mental health counseling including substance abuse treatment. This study examines Street Dwellers’ hopes, dreams and aspirations for a better life. Through thematic analysis of interview statements five themes emerged; Normal Life, Optimism, Planning, Helping Others, and From Rags to Respect. Study findings suggest that Street Dwellers dream vividly and often about a life off the streets while frequently forming and reforming plans to get there. These findings provide clinicians and outreach workers insight into the phenomenon of Street Dwelling that could be used to design more effective strategies to help this vulnerable population.
Acknowledgements

To Quiet Storm, Puppy, Jeb, Fox, Elvis, Jason, Robert and Drake; this study would not have been possible without you. Thank you for letting me get a glimpse into your world and the great challenges you face.

I would not have made it to this point in graduate school without the help of some very important people in my life. First, I would like to thank Annette Annechild and my sister Maura for encouraging me to go for it. They saw talents and abilities in me that I did not see in myself. To my sister Karen, the best writing coach I’ll ever know, thank you for your patience and guidance, and that “you can do this” attitude. For those times when I felt overwhelmed and stressed out, as all graduate students sometimes are, there was my brother Tim. You took me away to do what we love most and do better than almost everyone we know; play golf and fly fish in Western Montana.

I would also like to thank Dr. Angela Huebner, who until the start of her recent sabbatical was my thesis advisor. Angela was also my Research Methods professor. When I presented her with the initial concept for this study, she loved it instantly and encouraged me to follow my instincts. Angela, you provided me the clear direction and hard deadlines I needed to get my proposal done and IRB approved. But equally as important, you refused to let me get down on myself and lose confidence when you knew this “thesis thing” was very intimidating to me. You believed in me and kept telling me it would all work out, and it did.

Dr. Eric McCollum took the baton from Angela and he made himself regularly available to help me get this project over the finish line. But more than that for the past 3 years, Eric let me barge into his office on more than a few occasions when I needed someone to talk to. Thank you, Eric, for that. The third member of my committee is Dr. Mariana Falconier. Mariana was also my
clinical supervisor and the clinic director where I worked during my internship. She inspired me to be the best therapist intern I could be. As my professor, Mariana challenged me to question how I know what I know. Thanks to her, my world view is seen through a wider lens now, and I actually know what “epistemology” means.

Going to graduate school at Virginia Tech is a team sport and what a team I had. I wish to thank all of my cohorts, staff in the clinic and administration office, and faculty for making the past 3 years one of the most personally rewarding times in my life. I would especially like to thank Molly Brickel, Bonnie Culpepper, Eve Hornstein, Meghan Pugliese and David Steele. I will never forget your kindness and willingness to help me when I got stuck sometimes. But mostly, thank you for making me feel accepted.

Finally, I would like to thank the most important person in my life and the love of my life, Carolyn. Words cannot describe how grateful I am for the love and support you have given me during this journey. This journey had me coming home late most weeknights and relegated my weekends to focusing on schoolwork, and not you. Yet, through it all, you never complained. I feel so lucky to have met you in that parking garage 6 years ago.
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Chapter I: Introduction

The Problem and its Setting

Defining homelessness.

Homelessness in the United States exists on a broad scale effecting most rural and urban populations across the country (Department of Housing and Urban Development, 2010). The homeless population is not a homogeneous group but encompasses all ages, genders, and ethnicities. Understanding homelessness and its impact on American society is challenging due to differing definitions of the problem and ways of accounting for it (National Coalition for the Homeless, 2009). The Department of Housing and Urban Development defines a homeless person as “a person who lacks a fixed and night-time residence or whose primary residence is a supervised public or private shelter designed to provide temporary living accommodations, an institution accommodating persons intended to be institutionalized, or a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings” (The Department of Housing and Urban Development, “Summary”).

One method of quantifying homelessness in America counts the number of individuals who experience homelessness of any duration in a year. Based on this method, 5-year estimates of Americans who experience homelessness in any given year range from 2.3 million to 3.5 million (National Law Center on Homelessness and Poverty; National Alliance to End Homelessness, 2012). Another way to measure homelessness is by “point-in-time estimates” which add the number of shelter beds occupied to the number of homeless observed living on the streets. According to recent government surveys using this method, approximately 750,000 people are homeless on any given day in America of which one-third of them, or 250,000, are living on the streets (The Department of Housing and Urban Development, 2010).
This study focuses on a sub-group of the homeless population sometimes referred to as the “chronically homeless” (Meschede, 2010) or “Street Dweller” (Brandt, 2001). For the purposes of this study, Street Dweller is defined as any individual who has experienced one or more periods of continuous homelessness of one year or more except when forced into shelters for short periods of time during extreme weather conditions, or jails for committing crimes, or medical facilities due to illness.

Characteristics. Several studies focused on the physical characteristics, health, and demographics of the chronically homeless (Hibbs, et al., 1994; Meschede, 2010). These studies reveal that the chronically homeless are more often male with an average age of 50, and Caucasian. In addition, studies show that the chronically homeless get sick more often and live significantly shorter lives. One study found that the mortality rate of the chronically homeless in Philadelphia was four times that of the housed population (Hibbs et al., 1994). Among homeless men, an increased chance of death was associated with the use of injectable drugs, incarceration, and chronic homelessness (Barrow, Herman, Cordova, & Struening, 1999).

Costs. Significant federal, state, and local funding is spent to address the homeless problem (Congressional Research Service, 2005). Funding for programs for the homeless exceed $2 billion annually. State and local governments provide additional funding to address homelessness in the United States. In 2010, the U.S. Department of Housing and Urban Development (HUD) provided grants to over 6,445 local programs that exist to provide assistance to the homeless population in the United States (U.S. Department of Housing). HUD awarded approximately $10 billion in local funding to support housing and service needs of the homeless between January 2001 and December of 2007. It is estimated that Street Dwellers consume half of the resources targeted for all homeless persons. The chronically homeless
primarily rely on the most expensive and most inefficient medical service delivery systems, such as hospital emergency facilities, to attain healthcare (Kuhn et al., 1998).

Studies suggest that the homeless are less healthy, more costly to society, and live shorter lives than the general population. The D.C. Department of Human Services (Urban Institute, 2009) studied 537 homeless veterans sleeping in shelters, transitional housing, or on the street. Seventy percent of veterans living on the street and in shelters reported at least one major health problem, such as kidney disease, liver disease, heart disease, stroke or HIV/AIDS. The study found that most homeless veterans enter and exit hospital emergency rooms without proper long-term treatment leading to poorer health outcomes and higher healthcare costs. Living for years on the street comes with an incredible cost to the homeless and society. Homelessness exacerbates health problems, making it difficult to treat chronic illnesses such as cancer, heart disease, and cirrhosis of the liver (Cunningham, 2009). Studies indicate that twenty-five percent of inpatients in Veterans Administration hospitals and public hospitals are homeless (O’Connell, 2004; Rosenheck & Gallup, 1991). Studies suggest the society’s cost of ignoring homelessness exceeds the costs of intervening to provide food, shelter and healthcare (O’Connell, 2004; Rosenheck et al., 1991).

Causes and Predictors. Researchers have theorized that homelessness is the result of a broad spectrum of cultural, economic, and social problems (McCabe, Macnee & Anderson, 2001; Morse, Robertson, & Greenblatt, 1992; Shinn, Gottlieb, et al., 2007; Wakin, 2005; Wenzel, et al., 2001). Others make the case that homelessness is influenced by a host of personal characteristics such as low self-confidence, childhood abuse history, family of origin deficiencies, substance abuse, lack of education, poor work skills, mental health problems, criminal and legal issues, and personal choice (Burt, Aron, Lee, & Valente, 2001; Morse et al.,
Another study concluded that the loss of social support systems caused prolonged homelessness and reduced the likelihood that individuals would ever get off the streets permanently (Grigsby, Baumann, Gregorich, & Roberts-Gray, 1990). Overall, research suggests three major predictors to homelessness and several contributing factors (Burt et al., 2001; Meschede, 2010; Shinn et al., 2007). The three major predictors are mental illness, drug and alcohol dependency, and childhood and adolescent abuse.

Mental illness is a large component of chronic homelessness. In a study of 675 veterans admitted to two Veterans Administration hospitals, 44% were homeless (Austin, Mckellar, & Moos, 2011). Among this group, 89% met the criteria for alcohol abuse or dependency. Ninety percent met the criteria for drug abuse or dependency. Thirty-three percent met the criteria for major depressive disorder, 27% met the criteria for PTSD, and 27% met the criteria for psychotic disorders.

The pathway to homelessness differed between groups of mentally ill persons and non-mentally ill persons. One study showed that mentally ill homeless persons had experienced more childhood abuse, violence, trauma, and family instability (Sullivan, Burnam, & Koegel, 2000). One study found that when compared with the general population, mentally ill people were overrepresented in homeless populations. Sullivan (2000) concluded that the chronically homeless suffered compounding effects of poverty and histories of childhood violence, abuse, and family instability, making it more unlikely they will ever end their homelessness.

Some studies examined the relationship between social vulnerability factors and substance abuse as a predictor of poor social outcomes (Booth, Sullivan, Koegel, & Burnam, 2002). The study found that individuals who suffer from alcohol and/or drug dependency were more susceptible to homelessness. In addition, the study found alcohol-dependent only
individuals possessed different profiles than individuals suffering from drug dependency or both. The alcohol-dependent only participants in the study were more often older, male, and had experienced longer periods of homelessness. Family dysfunction and family substance abuse were also found to be contributors to homelessness.

Based on studies of chronically homeless adult populations, significant evidence suggests that out-of-home placement during childhood or adolescent life stages contributes to the likelihood of homelessness during adulthood. Foster care children are removed from their homes and placed in foster care primarily because of maltreatment and parental problems, such as incarceration and substance abuse (Garland, Landsverk, Hough, & Ellis-MacLeod, 1996). Studies have found that 10% to 26% of the adult homeless population has a childhood history of foster care (Koegel & Burnam, 1988).

**Identity.** According to Osborne (2002), many homeless, especially the newly homeless, face an identity crisis. Those who recently find themselves homeless often attempt to get off the streets by entering shelters. Osborne feels they get caught between a desire to be housed and the knowledge that shelter living can be stressful, even dangerous for them.

Many find it difficult to adapt to living in shelters (Dordick, 1997). Dordick’s study found that loss of identity, safety concerns, and overcrowding in shelters convinces many to exit shelters and return to living on the streets. When they do, Osborne (2002) suggests, this is a critical moment in the formation of their homeless identity. Osborne’s study found that the chronically homeless seek stable identities. As time on the streets increases, he suggests that their desire for stable identities solidifies their homeless identity producing a more positive perspective of living on the streets.
According to Zigler (2003), as acceptance of this new homeless identity occurs, new strategies to survive and subsist on the street develop. The longer a person stays on the streets, the more he feels rejected by society. The author suggests that once a person feels ostracized, they abandoned any kind of working class identity. This process results in a reduced desire to leave the streets and re-socialize. New homeless identities form which emphasize independence, self-reliance, and “romanticizes freedom and lack of responsibility which makes moving back into mainstream society more difficult and, at times, more undesirable” (Ziegler, 2003, p.4).

Studies suggest that the homeless construct their identities based on what society says about them and how worthy of respect they view themselves. Zigler (2003) explored ways in which homeless individuals express their dignity. Zigler defines dignity as “being viewed by others, as well as by oneself, as being worthy of respect and esteem—by investigating their place in society and their identities” (p. 2). The author found that non-homeless individuals, even those engaging the homeless to offer assistance, project negative stereotypes on the very people they are trying to help. These attitudes effect homeless persons adversely by promoting poorer self-image making it even more challenging for them to leave the streets.

Despite their difficult surroundings, homeless individuals find ways of coping with it. Osborne (2002) concluded that homeless persons form identities and build self-worth using certain strategies. These strategies include: “(a) incorporating the concept of homelessness into one’s identity; (b) disaffiliating from non-homeless others; (c) utilizing social comparison to assess one’s standing; (d) adaptation to current living conditions; and (e) migrating toward homeless environments that reinforce particular self-characteristics such as self-reliance, or being perceived as a fair trader” (p. 44). In the same study, a business owner who provides an area behind her store to the homeless as a permanent base camp argues that “in order to help the
homeless you have to get to know them well enough to respect who they are as a person and to operate and advocate at that level” (p. 44).

A qualitative study by Gramlich (2008) finds that the homeless are concerned with the impression they make on non-homeless. He calls this “Impression Management” (p. 143). However, the author concludes that the homeless’ decisions are more tactical than strategic. In other words, he suggests that the homeless focus more on immediate needs and wants, like attainment of food and money to survive, rather than trying to change society’s negative perceptions of the homeless.

**Intervention.** Should society intervene in the lives of Street Dwellers or should it avoid them out a respect for their personal freedoms? If society intervenes, what is the best way to do this? What outcomes should we strive for? Brandt (2008) insists that any intervention must include getting to know the Street Dwellers’ “viewpoints and attitudes, dreams and problems” (p. 89). This study attempts to fill this void in the research while contributing to the discussion about homelessness in America.

Many outreach programs targeting homeless populations set as an intermediary goal to re-institutionalize the homeless as a first step to reaching their primary goal of finding them permanent housing. But these programs may fall short of their stated goals when co-occurring psychiatric disability and substance abuse problems are present. Many homeless persons purposefully avoid shelters choosing instead to live on the streets (Burt, Hedderson, Zweig, Ortiz, Aron-Turnham, & Johnson, 2004). Burt’s study showed that individuals suffering from alcohol and/or drug dependencies often are required to complete lengthy drug/alcohol treatment programs before receiving housing, and they simply refuse to do it. Another study showed that lack of referral options and strict eligibility requirements that often exclude individuals with
criminal records force many homeless persons to return to the streets after receiving substance abuse treatment and other medical treatments (Meschede, 2010).

Consumer studies focused on the homeless who use shelters have found that from the homeless’ perspective independent living is the only lifestyle that is helpful to them. According to a study by McCrea (2008), the homeless feel many of the housing options offered to them are harmful, promote dependency, and negatively impact their dignity and self-confidence. Morse (1992) concludes that while many homeless individuals choose the streets over other options like shelters and boarding homes, “the choice to become homeless, however, is not an affirmation of any ideal lifestyle but a means to obtain a sense of self-control and dignity when faced with a lack of meaningful, safe, and viable living alternatives” (p. 13).

Significance

Much is known about homelessness in the United States and its demographics, social impact and causes. Research on homelessness tends to examine societal factors such as unemployment, racism, lack of affordable housing, and personal characteristics such as mental illness, drug and alcohol dependency, personal choice of lifestyle, and a childhood histories of sexual abuse. The dominant discourse in American society views Street Dwellers as a vulnerable, incompetent population without the resources or abilities to create positive change in their own lives. Outreach programs tend engage Street Dwellers using directive approaches. But does society know what is best for Street Dwellers? A review of the literature suggests that no clear insight into the phenomena of Street Dwellers’ dreams of their future exists. In fact, this study is the first one of its kind to describe the hopes, dreams and aspirations of Street Dwellers.
Rationale for Methodology

This study employs a qualitative, semi-structured interview approach to learn about the phenomenon: the essence of the Street Dwellers’ lived experiences including their hopes, dreams and aspirations. The interview questions are open-ended. The data collected is descriptive, text-based, and subjective. This study does not produce any generalizable results. Rather, it achieves its goal of describing and understanding a phenomenon. This qualitative inquiry enables researchers to produce higher-quality data with rich descriptions of the participants’ experiences.

Previous research of the chronically homeless population establishes that individuals with mental illness, low education, and/or substance abuse will likely be over-represented in the sample invited to participate. The chronically homeless as a group tend to be wary, distrusting, suspicious, and even afraid of strangers. Due to the personal characteristics of this segment of the homeless population and the research questions asked, it is this researcher’s belief that qualitative inquiry provides the most effective means to accomplish the study’s purpose.

Theoretical Framework

This study is constructed within a phenomenological theoretical framework. Phenomenological study describes the meaning for “several individuals of their lived experiences of a concept or a phenomenon” (Creswell, 2007, p. 57). According to Creswell, phenomenology allows researchers to reduce lived experiences down to their “overall essence” (p. 60). The description consists of what they experienced and how they experienced it (Moustakas, 1994). To identify and learn from Street Dweller dreams, this researcher attempts to set aside the judgments, opinions, attitudes and perspectives he brings to the study based on his own personal experiences and value systems. Additionally, the methods used to gather data minimize researcher impact and avoid coloring the results. By applying this non-biased
approach, the researcher increases the likelihood the study will uncover the “natural attitude” (Stewart & Mickunas, 1990) of the Street Dweller, as it relates to how they see their living conditions relative to the world around them and any desires they may have to live differently.

**Purpose of the Study**

Utilizing a series of open-ended questions, the researcher uncovers rich descriptions of the Street Dweller’s world. This study explores the Street Dwellers’ attitudes and intentions beyond their immediate concerns for food and shelter. These thoughts and ideas contrast their more practical thoughts of survival, such as finding a safe place to sleep or obtaining their next meal. These cognitions, or what one might call dreams and insights, reveal themselves in many forms such as desires for greater social status, better health, family reunion, reconciliation with a former lover, forgiveness, a closer spiritual connection with a higher power, or a chance to start over and do things differently.

The purpose of this phenomenological study was to discover if Street Dwellers dream and aspire to improve their living conditions and general welfare. This study characterizes Street Dweller dreams through thematic analysis. The knowledge gained from this study will be helpful to clinicians and social workers as they seek to design more effective intervention strategies to address the needs of Street Dwellers.
Chapter II: Literature Review

There may be no more ostracized group within American society than the Street Dweller population. Street Dwellers are an under-studied population (Zuffery & Kerr, 2004). This may in part be due to actual or perceived personal risks that must be taken by would-be researchers to study Street Dwellers, given the influence of mental illness and substance abuse and the Street Dweller’s behavior and communication skills. Stereotypes of Street Dwellers as soiled, smelling of urine, dangerous and unpredictable likely contribute to this phenomenon as well.

Therapists and social workers who provide services to the chronically homeless often set goals to meet the client where they are. This concept means to fully accept the client unconditionally and to do so from a non-judgmental and empathic stance. Meeting the Street Dweller where they are requires mental health clinicians and social workers to understand the Street Dweller’s beliefs and values; in other words, what makes life meaningful to them.

Research suggests that building a strong therapeutic alliance and client factors such as motivation, commitment to change, inner strength, and religious faith are important factors in therapeutic outcomes (Lambert, 1992; Sprenkle & Blow, 2004a; Sprenkle, Davis & Lebow, 2009).

To bring context to the study’s research question and purpose, existing phenomenological research is reviewed illuminating the life experiences of the Street Dweller. This research sheds light on their attitudes, values, and beliefs. Literature that explores how homeless identities are formed is reviewed. Additionally, literature which explores successful outreach and therapy techniques with Street Dwellers is examined. Lastly, literature that explores how attitudes and intentions predict behavior is reviewed.
This study contributes to the discussion and understanding of Street Dwellers by exploring their inner thoughts and revealing their hopes and dreams. This study illuminates the values and beliefs of this population and what makes life meaningful or would make life more meaningful to them.

**Understanding the Life Experiences of Street Dwellers**

Living on the streets requires individuals to develop strategies and skills to combat forces that oppose their efforts to live on the streets (“Another Suit Filed”, 2012). Street Dwellers have no claim to property and therefore wherever they reside makes them vulnerable targets for those organizations and communities that prefer them to be “out of sight and out of mind”. Even homeless individuals who find a place to bed down know it might only be temporary for at any moment police or other authority could arrive and force them to leave. Street Dwellers are regularly uprooted and displaced by city sweeps demanded by communities and carried out by police (Carter & Silver, 2008).

The choices of where to live are limited for Street Dwellers. Authorities tend to respond to citizen complaints about Street Dwellers seen near their homes or businesses resulting in their being pushed out of residential areas and toward service dependent ghettos (Dear & Wolch, 1987). Public attitudes of Street Dwellers as unsanitary, up-to-know-good law breakers make it risky for the homeless to reside almost anywhere. To survive, they feel compelled to hide from view in places like tunnels, sewers, and behind and in dumpsters. When noticed, Street Dwellers run the risk of being harassed, physically assaulted, or arrested.

Living on the streets is not easy and requires Street Dwellers to be resourceful and adapt in order to survive (Sumerlin & Norman, 1992). Vance’s study (1995) concludes that behaviors
such as stealing from others, panhandling and drug and alcohol abuse are adaptations to survive once Street Dwellers have given up all hope for a life off the streets.

McCabe (2001) studied 17 homeless people (mostly men) who had been living on the street continuously for more than a year. The study’s purpose was to identify what constitutes a satisfying experience for homeless people seeking healthcare services. The experience of being homeless was also examined and thematically analyzed. “Homelessness”, “health”, and “satisfaction” were identified as thematic categories as were several subcategories which informed on the current study. The study found that most homeless persons viewed homelessness as dangerous and unhealthy but they also saw some benefits to it. It also found that homeless individuals view themselves as experienced with the challenges of homelessness and therefore as a resource and support to other individuals living on the streets. Additionally the study found that participants valued being independent, different and self-sustaining. Some of those studied viewed their homelessness as an occupation that requires focus, savvy, and self-motivation. Two other themes that resulted from McCabe’s study, “trust” and “assumption-free”, are informative for the current study. According to the researchers, homeless participants of the study were reluctant to divulge sensitive personal information or to act on the recommendations of healthcare workers without some basis to trust them. The theme “assumption-free” reflected the importance that healthcare service personnel approach participants in a non-judgmental, caring way, without negative assumptions about their homelessness.

Another qualitative study of eight participants found that having an occupation while living at a shelter enable homeless participants to “keep busy” and feel productive (Chard, Faulkner, & Chubb, 2009). The same study found that chronically homeless individuals who
suddenly find themselves in shelters find it difficult to adapt to the loss of freedom. In particular rules designed to keep order in the facility and impinge on personal freedoms tend to aggravate shelter residents and push them out the doors. Another qualitative study of 35 older homeless men living in a shelter revealed similar themes but emphasized older shelter residents’ concerns for their safety and vulnerability to being physically assaulted as well as their desire to cohabitate with individuals they know (Elias & Inui, 1993).

Song’s study (2007) provides insight into the Street Dwellers’ fears and concerns about how they will die. Additionally, this qualitative study, which utilized focus groups and in-depth interviews, explored the concerns and desires for End of Life (EOL) care and planning. The study included 53 mostly male participants. The study concluded that homeless individuals frequently think about death, how they will die and what will happen to their bodies after they pass. Several personal themes developed, including that homeless individuals desired to be treated with dignity, wanted to be remembered by others after death, and feared being buried in a common grave without personal recognition. The study found that most participants had no desire to reconcile with their families before they died. This attitude coexisted with equally strong beliefs that their families had abandoned them. However, some of the participants wanted to avoid reconciliation with families to avoid the emotional pain of the experience and being a burden to them. Native Americans in the study hoped they would be taken to native lands for burial. The study linked the homeless’ desire for advanced care planning to a desire for more control over their lives. Another finding of this study was that participants viewed the appointment of a surrogate decision-maker and preparation of advanced care documents, such as living wills, as worthwhile.
The purpose, methods, criteria for participation, population size, and research questions of Song’s study differ from this study. Most of the participants in Song’s (2007) study would not meet the criteria for “chronically homeless” as defined by the current study. While the EOL study produced valuable insight into the desires and concerns of homeless individuals, its focus was limited to End of Life issues.

Identity Formation

Not all homeless people see themselves as homeless (Osborne, 2002). Some see themselves as temporarily displaced, in between residences, or just down on their luck. Negative experiences in shelter systems or while attaining other services like healthcare, food, or clothing discourage some from staying in temporary shelters or seeking medical or substance abuse treatment (McCrea & Spravka, 2008). New identities evolve as a result. Homeless individuals view shelter living as threatening to their personal safety, an assault on their independence, self-respect and dignity (Howie, 1990). Shelter living, for some homeless individuals, provides little benefit when compared to its costs. Howie suggests that as Street Dwellers become more entrenched in the identity of living on the streets, they begin to compare the costs of depending on others for shelter and security with the freedom and autonomy that living on the streets offers.

Some researchers have used Maslow’s Hierarchy of Needs theory as a frame of reference for understanding the experience of the chronically homeless (Maslow, 1970; Sumerlin & Privette, 1994). Sumerlin (1994) describes Maslow’s basic level of human needs as “food, clothing, and shelter” (p. 612) followed by “safety, love and belonging, self-esteem needs” (p. 612). The last level of need is self-actualization which, according to Maslow’s theory, is needed to live up to one’s maximum potential.
Maslow (1954) argues that until primary needs for survival are attained, self-actualization cannot be realized. According to Maslow’s original theory, people who are self-actualized attain self-fulfillment and possess realistic perceptions of themselves and their place in the world. They can be concerned with others and want to fix problems external to them. Self-actualized people at times have the capacity to appreciate what they have and view things around them with wonderment and awe. Viewed from this early perspective, most Street Dwellers would be presumed to be incapable of attaining self-actualization.

The current study suggests that knowing the intentions, values, or beliefs of the chronically homeless provides valuable insight and rich contextual data about the Street Dweller’s struggles to bring meaning and purpose to their world. Some researchers argue that basic human instinct includes a desire to possess some level of self-worth and personal dignity (Ansbacher & Ansbacher, 1946). Social scientists argue that to achieve any self-worth depends on the societal role one achieves. The chronically homeless are perhaps society’s most stigmatized group. Their opportunities for substantial social roles are extremely limited, so how do they build identities that include some measure of self-worth and dignity?

Research suggests that the personal identities of homeless persons evolve as they spend more time on the streets (Snow et al., 1987). For example, Snow and Anderson (1987) performed an ethnographic study of the process of personal identity development, specifically “Identity Talk”, in a street dwelling population. The researchers identified four components to “Identity Work” that build personal identity; “the procurement and arrangement of physical settings and props, cosmetic face work and personal appearance, association to other individuals or groups, and verbal construction and assertion of personal identities, or Identity Talk” (p. 1348).
The authors (Snow et al., 1987) identified three distinct patterns of identity construction: distancing, embracement, and fictive storytelling. Distancing refers to when individuals take on roles to engage people or institutions that are inconsistent with their actual social identity (Goffman, 1961a & 1961b). Embracement refers to “the verbal and expressive confirmation of one's acceptance of and attachment to the social identity associated with a general or specific role, a set of social relationships, or a particular ideology” (p. 1354). Fictive storytelling, which includes embellishment and fantasizing, refers to a narration of one’s past, present, and future experiences that have a fictive nature to them. The study examined how Street Dwellers who had been on the streets for six months, two to four years, and more than four years exhibited these patterns of identity construction. The study found that distancing was much more prevalent in those who recently entered the streets. Participants’ fabrications consistently touched on themes that included self-employment, money, attaining valued possessions like homes and cars, as well having sex with women. Embracement and fictive-storytelling were more prevalent with those who had lived on the streets between two to four years at the time the interview was completed. The study concludes that as individuals lived for longer periods on the streets they exhibited less distancing behaviors, less exaggeration in their stories and thought about their futures less frequently. Participants for this study have been homeless for varying periods of time. Snow and Anderson’s study examines how the homeless identity forms as more time is spent on the streets. Their study informs this study by providing more context to the Street Dwellers life experiences and the answers they provide to interview questions.

Another study examined the relationship of identification with homelessness, use of services, attempts to exit the streets, and self-esteem (Osborne, 2002). The study found that the longer homeless individuals spend on the streets, the less they identified with their previous roles
off the streets and more with being homeless. The study correlated Street Dwellers seeking fewer services with an increase in self-reliance and self-esteem. The study also found a correlation between stronger homeless identity and fewer attempts to exit homelessness.

**Outreach and Therapy with Street Dwellers**

Outreach is the critical process that engages the homeless individuals on the streets or elsewhere in an attempt to offer services they need like healthcare, substance abuse treatment, housing, or other social welfare.

Street Dwellers lack resources such as money and transportation to attain social services on their own (McMurray-Avila, 1997; Rog, 1988). Outreach workers when engaging Street Dwellers face several challenges. Street Dwellers suffer higher rates of mental illness and substance abuse. These conditions may effect their abilities and motivation to seek out the social services they need. In addition, prior unpleasant experiences by Street Dwellers when receiving services, may make it more difficult for outreach workers when engaging them.

It is generally accepted that outreach targeting the Street Dweller population has three primary goals (Plescia, 1997). Providing immediate needs such as medical care, clothing, food and shelter is the first objective. Secondly, efforts to engage Street Dwellers must build trust so they will continue accepting the help they need for as long as they need it (Plescia, Watts, Neibacher, & Strelnick, 1997; Marcos & Cohen, 1992). Most outreach programs have has as their ultimate goal to re-house Street Dwellers while integrating them into the community or social service agency.

The success or failure of Street Dwellers to attain services they need depends largely on the ability of social workers who engage in outreach activities to join with the Street Dweller (Erickson & Page, 1998). Engagement within outreach has two possible meanings. First,
engagement is used to describe the successful enrollment of targeted homeless individuals by outreach programs into social welfare service nets. It is one of the measures these organizations use to gauge success and justify their funding. Engagement can also describe the process of reaching out to Street Dwellers and forming positive, helpful relationships with them. For this study, the term “engagement” refers to the latter definition.

For outreach workers, Street Dweller engagement can be a time-consuming and frustrating process. According to one study, the average engagement stage lasts 3.9 months before Street Dwellers will gain enough trust to accept suggestions from outreach workers (Barrow, 1988). Successful engagement with Street Dwellers is essential for successful outreach (Morse et al., 1991). Engagement is a trust-building personal interaction similar to the joining process that takes place in therapy between Street Dwellers and mental health professionals.

Some suggest that in order to build a therapeutic relationship with vulnerable populations like Street Dwellers, service providers must first “strive to balance power between clients and staff with the understanding and acknowledgement of the existing imbalance of power. This is achieved by staff encouraging and valuing the opinions, ideas, plans etc. of clients” (Novotny, 2000, p. 387) This would require acceptance of a viewpoint contrary to many public ones that Street Dwellers are incapable of solving their own problems. This somewhat counter-intuitive perspective for engaging Street Dwellers is not unlike the basis for therapy that Carl Rogers suggests with his client-centered approach (Rogers, 1989). He states that “the individual has within himself or herself vast resources for self-understanding, for altering his or her self-concept, attitudes and self-directed behavior. These resources can be tapped only if a definable climate of facilitative psychological attitudes can be provided” (Rogers, 1989, p. 135).
Some homeless organizations use Rogerean client-centered principals to connect with homeless individuals and help them find solutions to their problems (Novotny, 2000). These principles (Rogers, 1989) include outreach workers’ genuineness, acceptance and empathic understanding. Genuineness when applied to helping Street Dwellers would include minimizing or eliminating any pretense that staff or clinicians know what is best for them. Acceptance means taking a non-judgmental stance and offering unconditional positive regard. Rogers suggests that empathic understanding is exhibited when a service provider working with Street Dwellers “senses accurately the feelings and personal meanings that the client is experiencing and communicates this acceptant understanding to the client” (Rogers, 1989, p. 136).

Attitudes, Intentions, and Behaviors

This study reveals the hopes, dreams and aspirations of Street Dwellers. Theories of behavior such as the Theory of Reasoned Action and the Theory of Planned Behavior (Ajzen, 1991; Ajzen & Madden, 1986) help explain the importance of understanding these human cognitions and their relationship to any potential for Street Dwellers to change their lives.

The Theory of Reasoned Action suggests that behavioral intentions exist before any behavior takes place (Ajzen et al., 1986). Some argue against this theory by suggesting that it only applies for behaviors that require little skill or assistance to accomplish (Bagozzi, Youjai, & Baumgartner, 1990; Liska, 1984). Critics suggest that if individuals who intend behaviors feel they are too difficult to accomplish or require too much help from others, they simply will not engage the behavior. Wright (1998) states “attitudes may produce intentions, but these intentions are difficult to enact as successful behavior” (p. 272). Ajzen and Fishbein (1980) propose that behavior is directly precipitated by intention to perform the behavior, and intentions are influenced by attitudes towards the behavior and “subjective norms”. Subjective norms are “the
perceived social pressure to perform or not perform the behavior” (Bagozzi et al., p. 439). Others suggest that intentions are not stable forces and over time the link between attitude, intentions, and behaviors becomes much weaker (Liska, 1984).

To address criticisms and concerns raised about the Theory of Reasoned Action, Ajzen and Madden (1986) amended the theory to include a dimension they called “perceived behavioral control”. This resulted in the development of the Theory of Planned Action. Perceived behavior control measures an individual’s assessment of the difficulty or ease one faces to accomplish any one behavior (Bagozzi, 1990). Research has found that perceived behavioral control significantly predicted intentions (Madden, Ellen, & Ajzen, 1992; Netemeyer, Burton & Johnston, 1991). Research also suggests that past behavioral experiences influence intentions (Triandis, 1977; Bagozzi, 1981; Bentler & Speckart, 1981; Fredericks & Dossett, 1983). Bagozzi theorizes that “past behavior serves as a type of informational input to the decision to act” (p. 439). Theories such as these provide a lens to examine Street Dweller cognitive processes that inform or may predict their behavior. Furthermore, guided by these theories of behavior, the results of the current study could be used to better understand Street Dweller’s potential for life course change if intentions to act exist concurrently with perceived behavioral control.

Conclusion

This study contributes to the conversation about Street Dwellers’ life experiences while learning from their hopes, dreams and aspirations. This literature review explored research about the life experiences of Street Dwellers, how they develop stable and positive identities living on the streets, and the elements of good engagement practices for therapy and outreach. In addition,
it provides a lens through which to examine how Street Dweller dreams may predict future Street Dweller behavior.
Chapter III: Methods

Design of Study

This qualitative phenomenological study collected data by audio-recording interviews with participants. No video equipment was used for this study. Questions were posed to identify and understand two phenomena: The participants’ experience of being homeless and an understanding of the participants’ hopes, dreams, and aspirations.

Study Participants

The study interviewed 8 male, chronically homeless individuals living near a homeless drop-in center in northern Virginia located a few miles from the nation’s capital. All participants selected exhibited enough English language skill, and intelligence to provide an informed verbal consent, as well as to understand the research objective, the researcher’s role and the essence of each question asked. Only male participants were selected who had been continuously homeless for one year at least once in their lifetime. Short periods of shelter living lasting a week or two, as well as brief periods of incarceration or hospitalization, did not preclude participation so long as all other criteria were met.

Procedures

The author contacted a number of homeless shelters located in the Washington D.C. area, including four in the northern Virginia area, seeking access to possible study participants. Of particular interest were those shelters and drop-in facilities that provided temporary shelter or basic services to individuals who had a history of living on the streets for prolonged periods of time. Recruitment postings were fixed to announcement boards within the facility instructing interested individuals to inform shelter staff of their desire to participate in the study. Social workers at these locations were consulted to identify qualified participants and in some cases to
make introductions to them. A private office within the facility was provided to complete the interviews. Participants were given a $20 food voucher for participating in the interview.

Prospective participants were asked a series of questions to determine if they met the study’s criteria which were (a) male, (b) 18 years of age or older, (c) had been continuously homeless for a period of 1 year or more at least once in their lifetime, and (d) had enough mental acuity to understand the questions that would be asked of them. The study was approved by the Institutional Review Board at Virginia Tech prior to any recruitment or data collection.

For those that met the study’s criteria, the author read the informed consent form and received verbal consent from each participant. The consent form included all appropriate notices according to IRB guidelines such as notices of confidentiality, procedures for withdrawal, researcher contact information and payment notifications. After demographic information was collected, the audio-recording device was engaged and the interview began. A series of open-ended questions were asked each participant designed to inform the study’s research questions. Active listening techniques were used sparingly to probe participants’ answers and uncover richer meaning. When all questions were answered, the author gave participants a chance to add to their statements if they felt so compelled.

Instruments

The study’s overarching question is “Do Street Dwellers dream?” Each participant was asked three sets of questions. The first and second sets brings context to the research question. The final set specifically addresses the research question “Do Street Dwellers Dream?” and asks participants to describe them.

Questions.

Set #1: “Can you tell me about the times before you ever became homeless?
“Where did you live?”

“Who was in your life?”

“What was that like for you?”

“When you think about your life before living on the streets what thoughts or memories come to mind?”

“If you could go back in time and change one thing about your life or make a different choice, what would it be?

Set #2: “How did you come to live on the streets?”

“How do you spend your time each day?”

“What is it about this particular part of the city that makes you want to live here?”

“What makes a good day?”

“What do you like about living on the streets?”

“What don’t you like about living on the streets?”

“Who are the most important people to you that live on the streets?”

Set #3: “What things do you hope to change in your life today?”

“When you look into the future what does it look like to you?”

“If you could make a wish, any wish, for anything, what would it be?”

“Do you ever let yourself dream? What are those dreams about? Can you describe them to me?”

“What would you like non-homeless people to know about your hopes and dreams?”
Proposed Analysis

After all interviews were transcribed, thematic analysis was performed on the data set as outlined by Braun and Clarke (2006). The author immersed himself in the data by reading and rereading the transcripts while simultaneously listening to the audio recordings of each interview. Preliminary coding was done by listing those data extracts the author found interesting and thought might develop into codes and themes later. Initial codes were assigned to selected extracts of data within each interview. Then similar codes were combined and applied consistently across all selected extracts. The coded extracts were then collated. A search for broad themes (Braun and Clark, p.92) was performed with a focus on those themes that informed the research questions.

In a collaborative effort to promote truthfulness and validity, the researcher and his thesis chair read over the transcripts several times to identify significant statements and begin formulating initial codes. To ensure validity for this research project, the methodological rigor included literature searches, collaboration with other coders, adherence to the accepted phenomenological methods, bracketing of past experiences, maintaining field notes, and interviewing until saturation of data was achieved (Meadows & Morse, 2001).
Chapter 4: Do Street Dwellers Dream? A Phenomenological Study of the Chronically Homeless in the United States

Abstract

Chronically homeless individuals, or Street Dwellers, present unique challenges for clinicians and outreach workers who engage them when offering services like food, shelter, clothing, healthcare and mental health counseling including substance abuse treatment. This study examines Street Dwellers’ hopes, dreams and aspirations for a better life. Through thematic analysis of interview statements five themes emerged; Normal Life, Optimism, Planning, Helping Others, and From Rags to Respect. Study findings suggest that Street Dwellers dream vividly and often about a life off the streets while frequently forming and reforming plans to get there. These findings provide clinicians and outreach workers insight into the phenomenon of Street Dwelling that could be used to design more effective strategies to help this vulnerable population.
Introduction

Homelessness in the United States exists on a broad scale effecting most rural and urban populations across the country (Department of Housing and Urban Development, 2010). The homeless population is not a homogeneous group but encompasses all ages, genders, and ethnicities. Understanding homelessness and its impact on American society is challenging due to differing definitions of the problem and ways of measuring it (National Coalition for the Homeless, 2009). Efforts to quantify homelessness in America generally attempt to measure all individuals who experience homelessness of any length during a year. The Department of Housing and Urban Development defines a homeless person as “a person who lacks a fixed and night-time residence or whose primary residence is a supervised public or private shelter designed to provide temporary living accommodations, an institution accommodating persons intended to be institutionalized, or a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings” (The Department of Housing and Urban Development, “Summary”). Based on this definition, estimates done over the past 5 years of Americans who experience homelessness in any given year range from 2.3 million to 3.5 million (National Law Center on Homelessness and Poverty; National Alliance to End Homelessness, 2012). Other ways to measure homeless by “point-in-time estimates” count the number of shelter beds used and people observed living on the streets. According to recent government surveys using these measures, approximately 750,000 people are homeless on any
given day in America of which one-third to 40% of them are living on the streets (The Department of Housing and Urban Development, 2010).

This study focuses on a sub-group of the homeless population sometimes referred to as the “chronically homeless” (Meschede, 2010) or “Street Dweller” (Brandt, 2001). For the purposes of this study, Street Dweller is defined as any individual who has had one or more experiences of continuous homelessness for periods of one year or more except when forced into shelters for short periods of time during extreme weather conditions, or jails for committing crime.

Most chronically homeless are male and Caucasian with an average age of 50 (Hibbs, et al., 1994; Meschede, 2010). Street Dwellers suffer from chronic illnesses more frequently, abuse alcohol and illicit drugs at higher rates and live shorter lives than non-homeless individuals (Barrow, Herman, Cordova, & Struening, 1999).

Society’s efforts to address homelessness are costly. According to statistics provided by the Department of Housing and Urban Development (HUD) in 2010, local programs for the homeless received over 6,445 grants. During a 6-year period between 2004 and 2010, HUD awarded over $10 Billion in local funding to support housing and service needs of the homeless. Most of the resources targeting the general homeless population are consumed by Street Dwellers (Kuhn et al., 1998). Some suggest that despite the high cost of outreach programs, which are often unsuccessful in their efforts to get the homeless off the streets, the cost of ignoring the homeless problem is far greater. Higher costs for medical and substance abuse treatment, the destruction of public and private property, and costs to enforce laws, investigate crimes and protect the general public must be taken into account to understand the true cost of the problem (O’Connell, 2004; Rosenheck et al., 1991).
The question remains, if society intervenes, what is the best way to do so? What outcomes should social workers and clinicians strive for? Brandt (2001) concludes that any intervention must be done only after getting to know the Street Dweller as thoroughly as possible, and that knowledge must include understanding their “viewpoints and attitudes, dreams and problems” (p. 89). Brandt argues that effective outreach targeting this challenging population has traditionally established re-socialization as its primary goal. He further argues that traditional outreach programs for Street Dwellers have assumed a “we know what is best for you” stance when perhaps those engaging Street Dwellers know very little about them. The author could find no research that specifically focused on understanding the hopes, dreams and aspirations of the chronically homeless population. Brandt suggests that understanding the Street Dweller’s hopes and dreams will enhance efforts to help them.

This phenomenological study fills a void in the research while contributing to the discussion about homelessness in America. The purpose of this study is to learn more about the inner desires and motivations of Street Dwellers beyond more primary needs of seeking food, shelter and security. This study provides insight into the Street Dweller’s hopes, dreams and aspirations for themselves. The knowledge gained from this study will be helpful to clinicians and social workers as they seek to design more effective intervention strategies to address the needs of Street Dwellers.

Therefore, this study is guided by the following research question:

1. Do Street Dwellers dream? And if so, what do they dream about and what can we learn from their dreams?
Methods

The author contacted a number of homeless shelters located in the Washington D.C. area, including four in the Northern Virginia area, seeking access to possible study participants. Of particular interest were those shelters and drop-ins that provided temporary shelter or basic services to individuals who had a history of living on the streets for prolonged periods of time. Prior to any interviews, the author visited the homeless facility and made notes of the conditions and human interactions he observed to bring context to the study’s results. Eight individuals meeting the study’s definition of “chronically homeless” were recruited to participate. Recruitment postings were fixed to announcement boards within the facility instructing interested individuals to communicate their desire to participate in the study to shelter staff. A private office within the shelter was provided to complete the interviews. Participants were given a $20 food voucher for participating in the interview.

Prospective participants were asked a series of questions to determine if they met the study’s criteria that they were (a) male, (b) 18 years of age or older, (c) had been homeless for a period of 1 year or more at least once during their lifetime, and (d) had enough mental acuity to understand the questions that would be asked of them. The study was approved by the Institutional Review Board at Virginia Tech prior to any recruitment or data collection.

For those that met the study’s criteria, the author read the informed consent form and received verbal consent from them. After demographic information was collected, each interview was audio-recorded. A series of open-ended questions were asked each participant designed to inform the study’s research questions. The following questions are examples of those asked each participant that inform the research questions: a) “If you could make a wish, any wish, for anything, what would it be?” b) “Do you ever let yourself dream? What are those dreams about?”
Can you describe them to me?”, and c) “When you look into the future, what does it look like to you?” Active listening techniques were used to probe participants’ answers and uncover richer meaning. When all questions were answered, the author gave participants a chance to add to their statements if they felt so compelled.

After all interviews were transcribed, thematic analysis was performed on the data set as outlined by Braun and Clarke (2006). The author immersed himself in the data by reading and rereading the transcripts while simultaneously listening to the audio recordings of each interview. Preliminary coding was done by listing those data extracts the author thought informed the research question and might develop into codes and themes later. Initial codes were assigned to selected extracts of data within each interview. Then similar codes were combined and applied consistently across all selected extracts. The coded extracts were then collated. A search for broad themes (Braun and Clark, p.92) was performed with a focus on those themes that informed the research question.

Results

Participants

All subjects chose fictitious names that were used to store interview data and report results. The study sample consisted of eight male adults living in and around the Northern Virginia area. Six were born in the United States (two were Caucasians and four were of African descent) and two subjects were born in the Philippines and Uganda respectively. Participants’ ages ranged from 26-63 years old. The average age of the sample was 43.89. All subjects considered themselves currently homeless. When asked the length of their most recent episode of homelessness, the participants reported an average of 6.75 years. One participant, “Robert”, reported living on the streets continuously for the past 22 years. After removing this statistical
outlier, the sample’s most recent onset of homelessness began 4.56 years prior to the study interview. Four of the subjects were unemployed. Four reported some part-time work usually day-labor for construction or landscaping businesses. Three of the eight were military veterans.

Table 1

Participant Demographics

<table>
<thead>
<tr>
<th>Fictionous Name</th>
<th>Birthplace</th>
<th>Age</th>
<th>Gender</th>
<th>Employed</th>
<th>Race</th>
<th>Veteran</th>
<th>First Experience of Homelessness</th>
<th>Most Recent Onset of Street Dwelling</th>
<th>Length of Most Recent Street Dwelling (years)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fox</td>
<td>Fairfax, VA</td>
<td>56</td>
<td>M</td>
<td>NONE</td>
<td>Asian</td>
<td>NO</td>
<td>10/1/2008</td>
<td>10/1/2008</td>
<td>3.75</td>
</tr>
<tr>
<td>Drake</td>
<td>Washington D.C.</td>
<td>26</td>
<td>M</td>
<td>NONE</td>
<td>African American</td>
<td>NO</td>
<td>1/1/2010</td>
<td>1/1/2010</td>
<td>2.50</td>
</tr>
<tr>
<td>Jeb</td>
<td>Fall Church, VA</td>
<td>38</td>
<td>M</td>
<td>NONE</td>
<td>African American</td>
<td>YES</td>
<td>5/1/2009</td>
<td>5/1/2009</td>
<td>3.17</td>
</tr>
<tr>
<td>Robert</td>
<td>Raleigh, NC</td>
<td>52</td>
<td>M</td>
<td>PT</td>
<td>African American</td>
<td>NO</td>
<td>6/1/1990</td>
<td>6/1/1990</td>
<td>22.08</td>
</tr>
</tbody>
</table>

Author’s Observations of Participants’ Reactions throughout the Interview Process

The author recorded several observations of participants’ behaviors and reactions while recruiting them to participate, while asking them questions about their experiences, hopes and dreams, and immediately after the interviews were completed. Prior to giving consent, participants asked several questions about the study’s purpose and use. Almost all requested details on the specific topics to be discussed and who would have access to the information they would provide. To soothe their suspicions and concerns, the author assured prospective participants that personally identifiable information, like their real name and social security number, would not be collected. The author framed the purpose of the interview simply as “I am
interested in hearing your story of living on the streets.” Some participants insisted the author evidence the $20 food voucher before they would agree to participate. Four of the eight had concerns that the information collected might be passed along to police. Three of the eight participants requested copies of the Notice of Consent to Participate previously read aloud by the author to take with them. One participant appeared disturbed when the door to the interview office was closed after he entered. Noticing this, the author offered to keep the door open. The participant accepted the offer and the office door remained open during the interview.

The most striking phenomena observed by the author occurred immediately after the interviews concluded. The general affect of all participants then was noticeably different then as compared to their affect at the beginning of the interview. All but one of the participants appeared relieved of their anxiety and suspicious nature. Most participants appeared energized by the process they had just experienced. All participants expressed their gratitude, some profusely, for the chance to tell their story. Three of the participants asked if the author would return to the homeless shelter to talk with them again. Four of the eight participants left the interview room before collecting the $20 food voucher they had earned. The author - noticing this - caught up with them and handed them the vouchers. It appeared to the author that these chronically homeless individuals were starved for human contact and the interview filled this void if only temporarily. In addition, it is the author’s view that participants found comfort in telling their story and in the knowledge that someone cared enough to ask them about it.

**Do Street Dwellers Dream?**

The following primary themes emerged through thematic analysis: *Normal Life*, *Planning*, *Helping Others*, *Optimism*, *From Rags to Respect*. 
Normal Life. All participants reminisced about their lives before Street Dwelling. Most of their stories described a life they equated to being normal or part of a normal life. Key touchstones of normalcy were described in identical terms by several participants, such as a “place of my own”, “a wife”, “kids”, “a job”, “a dog”, family connections and “money in my pocket”. For some participants, the memories of their once-normal lives underpin their goal of returning to them some day. For others, the memories reinforce internal doubts about their ability to succeed at that.

Fox, a 56-year-old Asian who has been living on the streets since October of 2008, talks about the comforts of his old life in contrast to the instability of Street Dwelling. He states: “It was comfortable for me. It was a comfortable life. A good life. Memories is cooking sometimes for my wife on the weekends, having good food like filet mignon and asparagus. That was it. Having good jazz music in the house and being comfortable. Just being married, you know? Being stable. You know what I mean? When you become homeless you become very unstable.”

Elvis, a 63-year-old Caucasian former government contractor who has lived on the streets since June of 2005, remembers his normal life before Street Dwelling, especially the camaraderie with family and friends. These memories seemed to trigger his feelings of regret and loss. Elvis states: “Those were good times. Those were good times. I never had a period that I recall that was traumatic. I enjoyed working, riding my motorcycle, visiting with my family in Birmingham. I went fishing – I don’t like fishing but shelikes it, so we went fishing. All in all, it was pretty good. I don’t think I appreciated it so much back then. Sometimes you don’t appreciate it until things are gone.”

Participants dreamed of attaining a normal life once they leave the streets, and some seemed satisfied to resume the life they led before. Jeb, a 38-year-old African-American and
military veteran who has been living on the streets since May of 2010, dreams of returning to the life he once had. He describes his dream this way: “Something that’s already occurred and reliving it, that kind of stuff. Working, women, drinking, smoking a little bit and just working. Just living in apartments and living in houses and just having the means to afford it, you know? Having the means to afford it and riding bikes and everything, driving cars and all the stuff I was doing. In school – in school, doing electronics. That’s about it.”

Other participants dreamed of a different and improved life after the streets. Puppy, a 30-year-old born in Uganda who moved to the United States 20 years ago with his father, links steering clear of unhealthy influences to building a better life for himself. He states: “If I had one wish, to get my own apartment and maintain myself and do something better for myself, have a better future planned so I can stay off the street, get clean and don’t get in trouble and stay away from friends who are trying to get me in trouble and try to get my education, you know?”

After life as Street Dwellers, Jason and Drake dream of participating in newfound communities where the mundane and the routine are cherished. Drake, a 26-year-old African-American who grew up in Washington D.C. area, states: “I want to be like a regular, normal American who goes to work and comes back home and sits down and watches the news and knows what’s going on.” Jason, a 27-year-old Caucasian who has lived on the streets continuously for over 2 years, emphasizes personal independence: “I hope to soon find a house soon, to have children, to have a wife. You know, to have a house. You know, to have a brand new car, brand new everything. Things that I can call mine that I don’t have to ask anybody for, that I can go out and afford myself. Those dreams, you know, having a nice car, wife, children. You know, a pool in the back yard. You know, nice neighbors, cookouts. Things like that that, you know, normal people can do nowadays.”
Puppy dreams of showing others he faced the challenge of Street Dwelling successfully by acquiring things he associates to a normal life. He states: “When I get myself together, I ain’t going to be homeless no more. I can tell them and say I’ve got my own place, I’ve got my own car, I’ve got a steady job, I’ve got kids now, I got married. Five years ago, you remember the dude that used to be homeless, sleeping out on your side porch or on the street? Now it’s amazing that he changed his life around, that he got himself together and he’s doing what’s best for him now, that he’s not panhandling any, he’s not bumming for money on the streets no more. To tell them that. And he’s working now, he got a job.”

**Optimism.** Despite the prolonged hardships of Street Dwelling that all of the participants acknowledged and seemed to accept as their current reality, seven of eight seemed to be surprisingly optimistic about their futures. Quiet Storm’s optimism stems from his realization that things could have been much worse for him and that he is lucky to be alive today. Quiet Storm, a 44-year-old African-American and former stock broker states: “Today I can say very, very bright. I have an opportunity to live today, and through all of the damage that I’ve done to my body by drinking, I don’t have dementia, I’m still in relatively good shape.”

Some participants seemed to possess optimistic visions of the future as if to motivate themselves to attain that future or to stave off depressive thoughts about their current circumstances. Drake’s optimism centers on his belief that education is a key component to achieving a life like the ones other Americans experience. He states: “I really see a bright future. I see myself graduating from school, having a degree, having a nice life, having a family, having a nice family and living life like other regular Americans, the way they live their lives.” Robert seems to accept his homelessness and deals with it one day at a time. He understands the importance of staying optimistic as a coping mechanism: “But don’t nobody really want to be on
the streets. But why am I out there on the streets? I’m trying to enjoy my day. I’m trying to make it through the day, to the next day. Basically trying to make it through the night to the next day. Then I praise the lord, help me through the night, help me make it through the morning. That’s it.”

**Planning.** All participants said they spend a great deal of time planning how to end their homelessness. Robert states: “I try to take the time out of my day to try to do something that’s going to benefit me getting off the street. That’s on my mind 24/7 is what I need to do today to get some resources where I can get some help to get off the street.”

All participants described actions or a series of events that they feel need to occur to accomplish plans of getting off the street. Subthemes emerged such as “Realistic expectations”, “Looking for a job”, “Having money”, “Making good decisions”, and “Getting clean and sober.”

Jeb’s plan is a relatively passive one and involves his family coming to get him so he can live in their home. Jeb states: “All I have to do is either get my father or my sister or one of my workers to come up here and pick me up and go to the location that they’re at. And it’s like one location, three locations. Three different locations I could go to. That’s all I have to do and my problems are really solved right now. My problem of being homeless would be solved.”

Other participants’ plans are more pragmatic and, while they rely on others for a jumpstart, also require the Street Dwellers to take active steps towards change. Puppy states: “The simplest thing I can do is take a shower, get some clothes, change up some clothes and go out there, try to work and save up my money and get my place and get out the streets. I want to live here is because I can start a whole new life and I see a little plan going for myself because I give myself enough time to get away off the streets and try to get into the shelter and get a bed. Hopefully if I do get a bed, I can work and get a part-time job or a full-time job, take me like two
or three months to save up my money and get a place. But they ain’t got no position opening, so I just got to wait until they have a position opening so I can work and get a bed up here.”

Elvis’s planning includes navigating the social safety net system: “It looks pretty hopeful actually because if I can get all my ducks in a row through the county and their provisions, the housing through CSB (Community Service Board), the SNAP (Supplemental Nutrition Assistance Program) program could help me get a job and in that case I could get shelter here at Bailey’s. I turned it down the other day because right now I don’t have a job. I want to reserve this for when I get a job prospect and get all my food stamps so I can optimize that 30-day window.”

All participants acknowledge the hardships associated with Street Dwelling and implementing plans to get off the street. Drake expresses the need to stay resilient and emotionally centered in the face of these challenges. He states: “But you’ve got to stay strong. You’ve got to stay really strong, because if you stay really strong that’s where you’re going to end up enduring it and making it to the top. Otherwise if you give up, you can end up going insane.” Elvis realizes his plan could fail: “I see it as there’s a chance that I could get out of this homeless thing but I’m not like banking on it like it’s a sure thing.”

**Helping Others.** Seven of eight participants report the desire to help others as a major purpose of their lives. Participants believe that even men as down and out as themselves have had experiences that enable them to be role models for others. Some dreamed of exclusively helping homeless individuals while others dreamed of helping non-homeless populations.

Robert, who as a Street Dweller currently relies on the generosity of others, would like to “pay it forward”, dreaming of winning the lottery and using that money to end all homelessness. Robert states: “Being rich. Get all the homeless people off the street. And everybody’ll be happy.
That would be my wish. Being not homeless. I’ve had dreams where I can dream like I hit the lotto, and I got all my homeless friends and I bought everybody houses. Everybody got off the street and I was the happiest man in the world. I will give you my last dollar if you need it. I will give you the shoes off my feet. I’ll give you the shirt off my back. It’s just I’d like everybody to know I was a nice guy, a kind-hearted person that gave to somebody that really needed it. Quiet Storm has more concrete dreams of being an educator, fulfilling what he sees as his true purpose in life. He views his educational profile, work experience and intellect as being more advanced compared to other Street Dwellers. On the street, he acts as an informal advisor to homeless adolescents, a role that he sees as helping them and himself. He states: “I find a lot of people gravitate to me. I have a degree; actually I have two degrees in business and finance. If they’re having problems filling out the information I help them with that so I don’t feel so downgraded when people come to me for help. There are a lot of 16-, 17-year-old teenagers out on the street. They’re important to me because they keep me from living a sinister life.”

Participants report helping others is personally satisfying in many respects. One participant reports it as a means of coping with the stress of Street Dwelling. Fox states that helping others is evidence to them that he’s not self-centered and has good personal qualities: “So I’d like to change it for me and other people; for me and other homeless people. I’d like to be an advocate for them. That one of being a millionaire so I can do something for homeless people. I want them to know that there’s good inside me, that’s it. That I’m not only thinking about myself. I’m thinking about other people too, you know?”

Puppy feels admired by those he helps: “Because they look up to me and they ain’t got nobody to look up to. They feel that I know how to get money by working, not selling drugs or
on the streets or selling marijuana or any beer or doing any illegal things that’ll try to get me in jail or locked up. Doing the positive things and doing what’s right and doing what’s good.”

Robert says helping others makes him feel good: “If I can give them advice, I give it to them. That really makes my day, you know? That really makes my day to see somebody else happy. And not even worrying about myself, just make sure I put a smile on someone’s face. Advice, do this, do this, you know? Basically just… just try to help someone else out. Not even thinking about myself, you know?”

**From Rags to Respect.** It was a dream of all participants to be a shining example that someone can succeed in going from, if not rags to riches, rags to respect. Participants report they have felt the stigma of homelessness, the loss of pride, and the judgment by others that they are “losers” at the bottom rung of society. All of these participants want to succeed in getting off the street, not just to have the accoutrements of normal life for themselves, but to be seen as successful by others.

Puppy’s success story is a tale of respect, not pity: “Well sometimes, most of my friends, they’d be embarrassed because when people walk by, they see them sleeping out in the street, they feel sorry for them. I can go out there and get my real self a real job and work. But if they see you sleeping out on the street, they think you nothing. You’re homeless, you’re a bum, that you don’t want to do nothing better with your life, that you’re hopeless. But you’ve got to prove to them that you’ll be willing and able to stand up for yourself and take pride in yourself. What I mean by pride is have a desire, something you’re interested in, something you can work and make good money so when people look at you, they can say I remember he used to be homeless but he’s not homeless no more. He got a better life now.”
Most of the participants showed they are acutely aware of how society views them. Acknowledging the derogatory stereotype seems to strike prideful chords and motivates participants to keep trying to better their life. Jason states: “Some people think because we’re homeless we just like to sit back and take the easy road. No way. It nothing like that. We’re all about finding a job and all about trying to get out of our situation that we’re in, out of homelessness. I’d like them to know that one day I will become like that. I will not be homeless.”

Fox’s success story involves going back to his birthplace after he exits the streets. Fox states: “I’d like to go home to the Philippines. That’s one of my dreams, for good. That will be one of my dreams out there once I fulfill what I have to do here in this country.”

Quiet Storm’s pride motivates his success story too. He desires to prove to others that he is not the person others think he is and acknowledges that stereotypes of the homeless have the potential to negatively influence Street Dweller behavior. Quiet Storm states: “I don’t like the stigma that you have, the way people talk to you, the way they look at you. Even though we’re on the streets, we still are humans and we do not have to act like animals or we don’t have to give into the portrayal that we are bad people. Just because we’re homeless doesn’t mean we’re not humans. So I try to let them see in me, without talking, that we can move on and become better people and that this is only temporary.”

**Discussion**

Prior to this study, little was known about the hopes, dreams and aspirations of Street Dwellers. The results of this study suggest that some Street Dwellers experience vivid and detailed dreams of how they would like to live. Understanding these dreams could open the door to new and better ways to offer them services such as food, shelter, health care, substance abuse
treatment and mental health services. Clinicians and outreach workers who take the time to assess Street Dwellers’ hopes, dreams and aspirations will learn more about their clients’ personalities, values, goals and motivations. In addition to learning about their clients, clinicians who ask about their dreams for a better life assume a non-judgmental, collaborative posture that might enhance efforts to establish positive bonds and trust with this otherwise distrusting and suspicious group.

Woven throughout this study’s description of Street Dweller experiences are five consistent themes that emerged from the data after thorough thematic analysis: **Normal Life**, **Optimism**, **Planning**, **Helping Others** and **From Rags to Respect**.

Some Street Dwellers access memories of the **Normal Life** they led before homelessness to construct dreams that express desires to return to the life they once had. These men described a **Normal Life** as including common elements such as “a car”, “a place of my own”, “money”, “a job”, “wife and kids”, and a “dog”, as well as a lifestyle free from the hassles of police intervention and court systems. But other Street Dwellers report they led lives before homelessness that they do not want to return to, perhaps including violence and abuse of drugs and alcohol. Their dreams of a **Normal Life** are different. This group seems to construct its dreams of the future based on dominant social descriptions of success rather than on something they have managed to achieve in the past.

The author was not surprised to find that Street Dwellers dream, but he did find the content of their dreams less fantastical than expected. Given a blank canvas to paint their dreams upon, the author expected Street Dweller dreams to emerge as imagination run wild with extravagant fantasies of great wealth, social status and sexuality. With the exception of Robert’s dreams of winning the lottery, most Street Dweller dreams reported were only a short distance
away from the realities Street Dwellers reported experiencing in their pasts. The essence of Street Dweller dreams reported involved acceptance by society and returning to normalcy. They take on a “I’m not asking for the world, just whatever everyone else has” tone. With few exceptions, participants’ dreams are not extravagant nor far-fetched. Instead they seem realistic and sensible and within reach.

Street Dwellers in this study reported that they frequently contemplate the steps they need to take to put an end to their homelessness and to start, or restart, a life off the streets. It appears that for most study participants, Planning becomes a daily focus and they are always mindful, it seems, of their ultimate objective - getting off the streets. Maslow’s (1954) Hierarchy of Needs for human behavior and cognitions would suggest that only after Street Dwellers attain basic levels of needs such as food, shelter and personal safety, are they capable of experiencing higher levels of human experience. However, participants of this study appeared to operate on multiple levels. While struggling to meet their basic needs they appear to be capable of feeling self-fulfillment, envisioning a path to a new way of life, forming problem-solving strategies and engaging them, and possessing realistic perceptions of the challenges they face. Other themes emerged from this study’s analyses that seem to contradict Maslow’s theory as well. The study found that some Street Dwellers, whose struggles must feel like an uphill climb to them after years living on the streets, express Optimism about their futures and a desire to Help Others, this despite years of living under extreme conditions frequently exposed to abuse, violence and disrespect by others. The author spent several days visiting the area where participants lived, observing their behaviors and interactions at different times of day. Very little social interaction was observed, and no readily-available sources of positive reinforcement were found. In fact, when not being interviewed, most Street Dwellers appeared to the author to be leading a
miserable life. Given all this, it is unclear how some Street Dwellers are able to maintain Optimism or from what spiritual source within them they find the desire to help others. But this study found that some Street Dwellers do.

Despite the many positive intentions that participants expressed, there were times the author found himself questioning the real intent or purpose of some of the statements made by them. Perhaps Street Dwellers express Optimism because that is truly how they feel about the future. Or Street Dwellers might use optimistic statements as a coping mechanism to keep, as one participant stated, “from going insane.” A third possibility is that Street Dwellers when interviewed express optimism because it fits the desired personal narrative that portrays to the interviewer the person they wish they were. Snow (1987) concluded that homeless individuals use language-based strategies such as role-distancing and fictive story-telling to maintain or build self-esteem and manage the impressions others have of them. Another possibility is that Street Dwellers are composing a message of encouragement they wished others would give to them.

Despite the enormous challenges they face, some Street Dwellers report being sustained by helping other homeless people on the streets and dream about giving back to the homeless community after they have successfully left the streets. The act of Helping Others may serve as a way for Street Dwellers to feel better about themselves. These findings support previous research into the identity formation of homeless persons (Osborne, 2002) and other research, which found that homeless individuals see themselves as a resource to other homeless individuals (McCabe, 2001).

Societal perceptions of Street Dwellers as uneducated incompetents and crime-committing vagrants, who are unwilling to work and prefer to live on the dole and on the streets,
do not go unnoticed by Street Dwellers. The findings of this study suggest that these common stereotypes impact how some Street Dwellers view themselves, plan their future and behave in the present. Contrary to those stereotypes, this study found a persistent Street Dweller desire to be employed and self-supporting. All participants expressed a desire to leave the streets and attain a **Normal Life**. In fact, within the study sample, four participants are working part-time or day labor jobs and all are actively looking for employment opportunities.

Public attitudes may be a source of motivation for Street Dwellers to get off the streets as well. Study participants’ drive to regain respect or to be seen as a success in the eyes of others suggests that some Street Dwellers are concerned with the impression they make on others. These findings support previous research on identity formation of homeless individuals (Gramlich, 2008; Snow & Anderson, 1987). Snow (1987) found that formation of homeless individuals’ personal identities is influenced by social identities imposed on them.

In this study, Street Dwellers reported that they feel the disdain, judgment and indignation directed towards them by others. They have lost their pride but they want it back. They want more than to just get off the streets and be housed. When some Street Dwellers dream of the future, those dreams often reveal their desire to be recognized by others as a success and prove naysayers wrong. Should any of them achieve their dreams, they might choose as the title of their re-authored life story: “FROM RAGS TO RESPECT.”

Street Dwellers in this study struggle to find meaning and bring purpose to their world - a world that by any measure is harsh, unjust, and dangerous. Through their dreams, Street Dwellers can reveal who they are, where they have been and where they want to go.
Limitations

There are a number of limitations to this study. First, by not actively seeking out other potential participants, the author may have missed interviewing Street Dwellers who did not share the characteristics of those who volunteered, and they may represent a unique subgroup of Street Dwellers. This group may have different perspectives on the experience of being chronically homeless. Additionally, only adult male Street Dwellers were interviewed for this study. While it makes sense to focus on adult males since most Street Dwellers are men (71%), it is a fact that homelessness today impacts every demographic group in American society today including female and adolescent populations. For example, it is quite possible that the hopes, dreams and aspirations of homeless women would be significantly different than those of men, thus producing different study results. Research on homeless populations suggests that Street Dwellers suffer from significantly higher rates of mental health illness and drug and alcohol dependency than non-homeless populations (Austin, McKellar, & Moos, 2011). Study participants were not asked to provide information about their use of drugs and alcohol or any mental health illnesses they suffer from, although most referred to problems they associated with these factors in their stories. Had detailed substance use and mental health information been collected from each participant, or from other sources, it might have added helpful context to the discussion on what we can learn from Street Dwellers’ dreams.

Future Research Possibilities to Learn More about Street Dwellers and How to Help Them

A natural extension of this research would be a longitudinal study that analyzes Street Dweller behavior over time. Do Street Dweller dreams translate into action later and, if so, how? Models of behavior such as the Theory of Reasoned Action (Ajzen et al., 1986) and the Theory
of Planned Action (Bagozzi, 1990) could guide researchers who wish to better understand how Street Dweller dreams predict their future behavior.

Research suggests that some clinicians negatively stigmatize homeless populations and this effects their willingness to help homeless individuals (Kincaid, 1995; Minick, 1998; Morrison, 2012). Brandt (2002) theorizes that society takes a “we know what is best for you” stance towards Street Dwellers. This is not surprising considering the social identity of Street Dwellers as mentally challenged, unmotivated and helpless. Working with Street Dwellers is demanding, time-consuming and frustrating work. It is understandable how outreach workers and clinicians could simply discount Street Dweller dreams as fantasy and nothing else. This study, however, suggests that some Street Dwellers may be homeless but they are not necessarily helpless. Research confirming the attitudes of clinicians and outreach workers towards Street Dwellers might be informative and suggest new ways to educate and train them for Street Dweller engagement. A question researchers might ask is “What attitudes and biases do outreach workers bring to their work with Street Dwellers?” If as the existing literature suggests, outreach efforts to help Street Dwellers often fail, understanding the attitudes and biases of clinicians and outreach workers about Street Dwellers might inspire better ways to relate to them producing more effective, collaborative solutions to their problems. Additionally, it might be useful to design a study that combines qualitative and quantitative analysis based on samples sizes large enough to draw generalized conclusions. And lastly, this study established a connection between Street Dweller dreams of the future and their past memories of life off the streets. Phenomenological research specifically focused on Street Dweller memories of their past could reveal new insight into how Street Dwellers are motivated to change their lives today.
Implications for Outreach and Mental Health Clinical Practice

Inquiring about and understanding Street Dwellers’ hopes, dreams and aspirations can be useful to clinicians who provide mental health treatments or outreach services like shelter, food or health care to Street Dwellers. Street Dweller dreams provide clinicians and outreach workers a glimpse into minds of Street Dwellers and inform them about who they are and the lens through which they see the world.

To be helpful to Street Dwellers, clinicians and outreach workers must first build relationships with them. Successful joining requires clinicians and outreach workers to overcome several challenges when working with Street Dwellers. These challenges include high rates of substance dependency and alcoholism within this population, Street Dweller distrust of others including those offering help to them, and societal attitudes and beliefs about Street Dwellers as a helpless, incompetent group. By asking about their hopes, dreams and aspirations, clinicians and outreach workers send signals to Street Dwellers that they are compassionate and view them without judgment. This is likely to encourage Street Dwellers to let down their guard and permit others to get to know them. Street Dweller hopes, dreams and aspirations may indicate how motivated they are to change. Active listening to their dreams of the future may validate the Street Dwellers’ viewpoints, promote their self-confidence and may encourage them to keep trying to improve their lives. Brandt (2001) argues that outreach workers would attain better outcomes if they took the time to understand Street Dweller “viewpoints, challenges, hopes and dreams” (p. 89). Brandt questions the effectiveness of outreach efforts based on directive approaches that make little or no effort to collaborate with Street Dwellers when forming strategies to help them.
Not meeting the Street Dweller where they are has adverse consequences. For example, here in the United States, outreach that engages Street Dweller populations to help them often proceeds on the assumption that re-institutionalizing the individual off the streets is the first step in a process that ultimately hopes to re-socialize the individual. However, Street Dwellers far too often refuse housing or are excluded from it because they refuse to complete lengthy substance abuse treatment. Far better therapeutic and outreach outcomes might be achieved if clinicians and outreach workers met them where they are and build client goals considering their hopes, dreams and aspirations.

Contrary to some stereotypes about them, some Street Dwellers tell us they loathe living on the streets, seek to improve their lives, and constantly form and reform plans to make that happen. Clinicians and outreach workers would do well to search their biases about Street Dwellers and bracket them. Clinicians and outreach workers may achieve more positive outcomes when engaging Street Dwellers if they acknowledge the Street Dwellers’ expertise and competence and take a more collaborative, less directive stance with them. Prior to agreeing to participate in this study, most participants were guarded and suspicious about the study’s purpose, the line of questioning, and how the information they provided was to be used. But by the end of the interview, participants seemed relaxed, energized and open to telling more about themselves. At a minimum, asking Street Dwellers to reveal their life experiences shows them someone cared enough to ask. Just the simple process of asking about their hopes, dreams and aspirations may promote therapeutic relationships with Street Dwellers while helping them feel better about themselves.
Conclusion

Some Street Dwellers dream vividly and often about a Normal Life off the streets. Street Dweller participants’ Planning exposes their focused desires to exit the streets while revealing realistic and informed strategies to get there. At least some Street Dwellers who have lived for long periods of time on the streets under enormous duress maintain Optimism and see their homelessness as a winnable battle. Despite the indignity that is inherent in Street Dwelling, some Street Dwellers turn to Helping Others to give them purpose, feel better and remind them they do not have to “act like animals” as some stereotypes would have them do. Clinicians and outreach workers should pay close attention to their biases towards Street Dwellers; not allowing biases to influence their approaches towards Street Dwellers, and steal their dreams. Some Street Dwellers are aware of how others feel about them. This can motivate some Street Dwellers to take back the respect they have lost and re-author their life story - From Rags to Respect. Street Dweller dreams bring context to efforts to help them by informing on their life experiences, values and goals. By asking about their dreams, clinicians and outreach workers assume a non-judgmental, collaborative stance which could build trust and pave the way to better outcomes with Street Dwellers.

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Appendix A
Informed Consent

Consent for Participants in Research Projects Involving Human Subjects

Title: Do Street Dwellers Dream?

Investigators: Dr. Angela Huebner (PI) and Matt Sughrue

I. Purpose: The purpose of this study is to learn about the experience of living on the streets. Approximately 8 to 10 male individuals who have a history of chronic homelessness will be asked questions about themselves and their lives. Individuals currently residing in shelters in the Washington D.C. Metro area who have a history of chronic homelessness will be invited to participate.

II. Procedures: If you agree to participate you will be asked a series of questions about your past and more recent experiences with homelessness. In addition, you will be asked about how you envision your future and if you ever dream about it. Private interviews will take place within the shelter facilities and last no more than 1 hour. Your interview will be recorded for analysis later.

III. Risks: Your participation could bring up unpleasant memories and sad feelings. If during the interview you become upset, overwhelmed or uncomfortable, you have the right to withdraw from the interview. If you need to seek professional help as a result of participation, neither Virginia Tech University nor this study’s primary investigators have the funds to pay for such services.

IV. Benefits: Study researchers make no promise or guarantee that you will receive any benefit from your participation; however it is possible you may gain some benefits. You may find it comforting to talk to someone about your past and current living conditions. You may also learn something about yourself as a result of this interview process and this could build feelings of self-worth and self-esteem.

V. Extent of Anonymity and Confidentiality: Study researchers promise not to divulge any information that could lead to your being identified as a participant of this study. In fact, neither your real name or social security numbers will be collected. A numerical coding system will be used to identify your recording. These codes will be stored in password protected computer files only accessible by the Primary Investigators. Once your recording is transcribed, the recording will be immediately destroyed. It is possible that the Institutional Review Board (IRB) may view this study’s collected data for auditing purposes. The IRB is responsible for the oversight of the protection of human subjects involved in research.

VI. Compensation: You will be compensated for participating in the study. You will receive a $20 McDonalds Gift Card even if you decide to withdraw before answering all study questions.

VII. Freedom to Withdraw: You are free to withdraw from the study at any time without penalty. You are free to refuse to answer any questions without penalty. If you withdraw from the study at any time for any reason, you will still receive the full amount of compensation as if you had answered all study questions.

VIII. Subject’s Responsibilities: You have to participate in the interview

IX. Subject’s Permission: “I have read the Consent Form and conditions of this project. I have had all my questions answered. I hereby acknowledge the above and give my voluntary verbal consent.”

If any subject has any questions about the protection of human research participants regarding this study, they may contact Dr. David Moore, Chair Virginia Tech Institutional Review Board for the Protection of Human Subjects, telephone: (540) 231-4991; email: moored@vt.edu; address: Office of Research Compliance, 2000 Kraft Drive, Suite 2000 (0497), Blacksburg, VA 24060.

Subject’s with questions about the study may contact the principal investigators, Dr. Angela Huebner at (703) 538-8491 or Matt Sughrue at (301) 807-1266 or msughrue@vt.edu
Appendix B
IRB Approval Page

MEMORANDUM

DATE:       June 18, 2012
TO:         Angela J Huebner, Matthew Brian Sughrue
FROM:       Virginia Tech Institutional Review Board (FWA00000572, expires May 31, 2014)
PROTOCOL TITLE:  Do Street Dwellers Dream?
IRB NUMBER:   12-534

Effective June 15, 2012, the Virginia Tech Institution Review Board (IRB) Chair, David M Moore, approved the New Application request for the above-mentioned research protocol.

This approval provides permission to begin the human subject activities outlined in the IRB-approved protocol and supporting documents.

Plans to deviate from the approved protocol and/or supporting documents must be submitted to the IRB as an amendment request and approved by the IRB prior to the implementation of any changes, regardless of how minor, except where necessary to eliminate apparent immediate hazards to the subjects. Report within 5 business days to the IRB any injuries or other unanticipated or adverse events involving risks or harms to human research subjects or others.

All investigators (listed above) are required to comply with the researcher requirements outlined at:

http://www.irb.vt.edu/pages/responsibilities.htm

(Please review responsibilities before the commencement of your research.)

PROTOCOL INFORMATION:

Approved As:        Expedited, under 45 CFR 46.110 category(ies) 5,7
Protocol Approval Date:  June 15, 2012
Protocol Expiration Date:  June 14, 2013
Continuing Review Due Date*:  May 31, 2013

*Date a Continuing Review application is due to the IRB office if human subject activities covered under this protocol, including data analysis, are to continue beyond the Protocol Expiration Date.

FEDERALLY FUNDED RESEARCH REQUIREMENTS:

Per federal regulations, 45 CFR 46.103(f), the IRB is required to compare all federally funded grant proposals/work statements to the IRB protocol(s) which cover the human research activities included in the proposal/work statement before funds are released. Note that this requirement does not apply to Exempt and Interim IRB protocols, or grants for which VT is not the primary awardee.

The table on the following page indicates whether grant proposals are related to this IRB protocol, and which of the listed proposals, if any, have been compared to this IRB protocol, if required.