Self-Determination: The Conceptualization of Choice and
Decision-Making by Homeless Women

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THESIS
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This thesis is dedicated to my mom, Rita, who would have been so proud to see this accomplishment.
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SUMMARY

A qualitative study was conducted to determine the relevance and applicability of the concept of self-determination as viewed by individuals participating in a housing program for homeless women. In-depth, semi-structured interviews were conducted with 21 women. Women were asked to talk about their lives, their goals for the future, the housing program in which they were participating, and what self-determination meant to them.

Women defined themselves as self-determined. The viewed themselves as self-determined because they were independent, they made decisions, and they achieved their goals. Although women frequently made decisions from available options, to them, that required active decision making which is a sign of self-determination. Women talked about how their self-determination is shaped by personal and environmental forces, not all of which are readily apparent to them.

The concept of self-determination was chosen as the focus of the study due to the use of self-determination as an outcome measure by the US Department of Housing and Urban Development, the largest funder of homeless assistance programs in the nation. Having a greater understanding of what self-determination means to program participants gives women a greater voice in how the programs are designed, operated, and evaluated.
I. INTRODUCTION

A. **Brief Summary Description of Proposed Study**

The Department of Housing and Urban Development (HUD) of the United States federal government provides more than a billion dollars each year for the provision of housing and services for individuals experiencing homelessness. With this funding, HUD has established programmatic outcomes for all agencies providing services, one of which is that clients achieve self-determination. Currently, HUD does not define this outcome therefore individual agencies that operate programs are required to define this outcome for themselves – both in terms of what self-determination means and how to measure it. To compound the lack of guidance from HUD, self-determination is a broad concept with layers of meaning. Self-determination has neither a universal definition nor a standardized measurement tool. In addition, the applicability of self-determination to the experience of homelessness has not been explored. Thus, the purpose of this study is threefold: 1) to explore how homeless women in a HUD-funded transitional housing program define self-determination and what that concept means to them; 2) to explore how participating in a HUD-funded program impacts their perceptions of self-determination and their practice of it; and 3) to analyze the applicability and relevance of the current conceptualization of self-determination as it applies to homeless women.

I took a qualitative approach to the methodology. Individual semi-structured interviews were conducted with women from a purposive convenience sample, including a member check session. At the time of the interview, all of the women resided in a HUD-funded transitional housing program. The interviews focused on obtaining information about what self-determination means to homeless women, how they define it, and whether or not they view themselves to be self-determined. I used the qualitative software Atlas/ti 5.2 to code and analyze
the data. From those interviews, a general thematic induction analysis was completed and a conceptualization of self-determination as defined by homeless women has emerged.

B. **Description of the Research Problem**

   1. **Background: What do we know about the problem?**

      In the United States, between 2.3 and 3.5 million people experience homelessness each year (Urban Institute, 2001) and number of homeless women has been increasing dramatically since the 1980s (Burt, 2001). As there is no singular definition of homelessness and no one-way to count homeless persons, each numeric estimation as to the exact number of homeless individuals and families varies across studies. What is known is that the number of people experiencing homeless has been increasing dramatically since the early 1980s. Initially, homelessness was associated with the economic recession of the 1980s, but when the economy improved, homelessness did not abate, but instead continued to grow. This makes it difficult to claim one singular cause of homelessness. Rather, the majority of homeless literature today asserts that it is the intersection between individual characteristics and structural conditions that result in an individual experiencing homelessness. Women are particularly vulnerable to structural conditions and they are often the main source of income for the family as well as the main caretaker of children.

      The characteristics associated with homelessness are diverse; the only generalizable characteristic is poverty (Burt, Aron, Lee & Valente, 2001). According to HUD (2008), on any given day, people using homeless assistance programs are men by themselves (48% of the homeless population), women by themselves (17.5%), youth by themselves (3.5%) and households with children (31%). Of those households with children, 82% of those are single mothers with children. While predominantly found in urban areas, homelessness is prevalent in
suburban and rural areas as well. Sixty-two percent of the current homeless are members of a racial minority group and the homeless population is comprised of more children than elderly. It is estimated that 60% of the total homeless population have a substance abuse problem of some kind, including: 29% with a drug and/or alcohol abuse problem only and 31% with both a substance abuse problem and a mental illness. Only 15% of the homeless report having a mental illness but no substance abuse issues (Urban Institute, 2001). Very few homeless persons have regular employment; most are unemployed, sporadically employed, or self-employed.

Regardless of the income source (whether employment or income supports), homeless people do not have enough income to afford housing (Dolbeare, 1992). None of these characteristics are mutually exclusive; a homeless individual may have several of the descriptors listed. While the statistics provide a snapshot of who is homeless, they do not tell us why people become homeless or how best to address the issue.

The most widely accepted understanding of current homelessness identifies the intersection of personal issues with structural conditions in the United States. “Social structural developments put people at risk of homelessness; personal failings actualize that risk for specific individuals” (Wright, Rubin & Devine, 1998, p. xiv). The main structural condition that contributes to homelessness is the lack of affordable housing for low-income people. In the past 30 years, the availability of affordable housing for low-income households has decreased considerably. In the late 1970s, the federal government stopped providing support for the development of low-income housing by no longer offering 20-year building subsidies. These subsidies allowed low-income households to contribute only 30% of their income towards rent. Without these subsidies, households are often unable to afford housing. When the lack of affordable housing is combined with jobs that do not pay a living wage and the lack of a social
safety net, homelessness is often an unavoidable consequence for those who already have personal characteristics that make them vulnerable.

Poor women are particularly vulnerable to homelessness. The increasing gap between housing and income places additional stress on low-income women, especially those who are the main breadwinner for the family. The vast majority of homeless families are headed by women, and financial supports from family, former partners, and government is not sufficient to obtain stable housing (Anderson & Rayens, 2004). Given that most research on the homeless experience does not focus exclusively on women individually, there is much that remains unknown about how their struggles and efforts are supported or hindered by available programs.

HUD provides the majority of federal funding to address this problem. In 2009, HUD awarded more than 1.6 billion dollars to local governments and non-profit organizations to support the provision of housing and services to homeless individuals, youth, and families (HUD, 2009). Current funding for homeless programs is authorized through the McKinney-Vento Homeless Assistance Act, first enacted in 1987. Although amended several times since its original passage, the McKinney-Vento Act continues to serve as the foundation of funding for homeless programs across the country.

For its primary grant program (the Homeless Assistance Grants Program), HUD has established three overarching outcomes. Those outcomes are:

1. Clients obtain/retain permanent housing.
2. Clients increase skills and/or income.

For outcomes one and two, HUD provides quantifiable measures. Agencies funded by HUD complete an Annual Progress Report (APR) which asks for numerical counts of program
accomplishments related to outcomes one and two. For outcome three, agencies are required to define the meaning of the outcome and how to measure it themselves.

2. **Rationale: What do we need to know?**

   Self-determination is a vague concept with no standardized definition. In general, it is someone’s ability to make independent decisions and then implement those decisions. Throughout the literature, self-determination theories, conceptualizations, and examinations generally focus on four aspects: freedom/autonomy, capacity, personal psychology, and environment. Freedom/autonomy means that people are free from constraints that would prevent them from making their own choices. Capacity is a person’s ability to make reasoned, independent decisions. Capacity is influenced by knowledge, skills, and personal resources but also can be hindered by items such as a mental illness. Personal psychology is the self-awareness, internal motivation, and psychological drive to follow through on a decision once it has been made. Environment impacts self-determination in that it provides resources and opportunities that assist individuals in their decision-making, or environment can hinder people when needed resources are scarce and opportunities do not present themselves. Cultural expectations and interactions with human services organizations can also support or hinder self-determination by influencing individual behavior.

   These four items create a framework for understanding self-determination. However, the self-determination literature is often theoretical, and the empirical-based literature is most often focused on individuals who are developmentally delayed, have a mental illness, or are members of an indigenous population seeking the right and opportunity for self-rule. It is possible to review research focused on the condition of homelessness through the existing framework of self-determination. This includes: freedom and institutionalization (Wagner 1993; Wright,
1995); capacity, including mental illness (Belcher, 1988; Mowbray & Bybee, 1996),
income/employment (Balkin, 1992; DiBlasio, Belcher & Connors, 1993; First & Toomey, 1989),
and social networks (Johnson, McChesney, Rocha & Butterfield, 1994; Legiecq, Anderson &
Koblinsky, 1998; Marin & Vacha, 1994); psychological drive (Balkin, 1992; Wright, 1988); and
the environment (Dolbeare, 1992; Wong, Culhane & Kuhn, 1997). However, none of these
studies focus on self-determination—only aspects that appear to fit within the self-determination
framework.

Passaro (1996) and Wagner (1993) conducted qualitative studies with populations of
homeless persons. In their findings, they each discuss how homeless individuals make choices
within the context of their lives and with the options and opportunities they have available to
them. Both authors conclude that homeless people are aware of their own competencies, the
resources available to them, and the implications of their decisions. The data presented indicates
a clear connection between the homeless people studied and self-determination, but the concept
of self-determination is not the focus of either study nor do the studies examine what it means to
homeless persons to be self-determined.

The four aspects of self-determination described previously (freedom/autonomy,
capacity, personal psychology, and the environment) comprise a loose conceptual framework.
As this framework has not been empirically applied to the homeless population, nor has self-
determination been specifically explored within the homeless population, it is unknown if this
framework is appropriate for this population. Currently, there is no understanding of the concept
of self-determination as it applies to homeless women.
3. **Significance: Why is it important that we know it? Why now?**

Self-determination is the third outcome for all HUD-funded programs. As HUD does not define self-determination, there is no universal definition of self-determination among theorists, and no individual research study has examined what self-determination means to homeless persons; it is unclear what HUD’s programmatic outcome should achieve. Moving forward, it appears that HUD will remain a primary funder of homeless programs and that the third outcome will continue to be a part of homeless policy. Unless a comprehensive solution is developed and implemented, there is no reason to believe that homelessness will dissipate any time soon. This means that the concept of self-determination and its applicability to homeless persons accessing HUD funded programs will continue to be relevant into the near future.

There are several reasons it is important to explore how the concept of self-determination relates to the lives of homeless persons and what it means to them. First, this is a HUD programmatic outcome, without definition or measuring guide. Each year hundreds of thousands of homeless persons participate in HUD-funded programs. These people are all affected by a government social program with a prescribed outcome which is unclear in nature and undefined by HUD. Understanding what self-determination means to people experiencing homelessness could be used to assist program implementation and evaluation.

Second, current federal policy towards the homeless population continues to focus on individual issues of homelessness, rather than structural issues. If the ability of a homeless person to exercise self-determination is shaped by structural issues as well as personal ones, this research could contribute to the homeless advocacy movements that are trying to create structural changes in the areas of affordable housing and welfare assistance. Third, information obtained from this study could be used to provide the foundation of a self-determination measure
for homeless persons, and then be incorporated into program design and evaluation. This information could also be used in future research, including the concept of self-determination as it applies to other homeless groups or the agencies that serve individuals, youth, and family who are experiencing homelessness. Finally, the data collected would offer homeless women a meaningful voice in determining what the target outcomes of programs should be, how they should be measured, and thereby how programs are designed and implemented.

C. **Research Questions**

1. How do homeless women in a HUD-funded housing program define self-determination and what does that concept mean to them?

2. How does participating in a HUD-funded program impact their perceptions of self-determination and their practice of it?

3. What is the applicability and relevance of current conceptualizations of self-determination as they apply to homeless women?

D. **Conceptual Definitions of Variables**

HUD-funded program: A homeless assistance program funded by the Department of Housing and Urban Development which provides both housing and support services to people experiencing homelessness.

Homeless women: Those women who, without participating in a HUD program, would lack shelter. To participate in a HUD-funded program, women must also meet the definition of homeless as defined by HUD. This includes:

- Sleeping in places not meant for human habitation, such as parks, sidewalks, or abandoned buildings
• Spending a short time (30 consecutive days or less) in a hospital or other institution, but ordinarily sleeping in the types of places mentioned above

• Being evicted within a week from a private dwelling unit, having no subsequent residence identified, and lacking the resources and support networks needed to obtain access to housing

• Being discharged from an institution, having no subsequent residence identified, and lacking the resources and support networks needed to obtain access to housing

Self-determination: Understanding the concept of self-determination is the purpose of this study.

The initial conceptualization is comprised of four themes:

• Freedom/autonomy: The right to choose, free from constraints, to act according to one’s wishes and desires

• Capacity: Knowledge, skills, and abilities that allow one to make reasoned decisions and then implement those decisions

• Personal psychology: The self-awareness, intrinsic motivation, and psychological drive to make decisions for oneself

• Environment: Cultural expectations, external resources, opportunities to act, and human services organizations which affect how and when an individual is able to make decisions, and provide a context in which those decisions are evaluated

These four components comprise the initial conceptualization of self-determination. Final conceptualization is dependent upon the results of the study itself. For the purposes of the interview guide, self-determination is defined as making your own decisions and following through on them.
II. REVIEW OF THE LITERATURE

A. **Introduction**

Homelessness, once thought to have disappeared from the social landscape of the United States, reappeared in the early 1980s and has continued to grow since then, increasing in size and scope. What was once only associated with unemployed, single men with addiction problems, now includes women and children, the aged, those with a mental illness, and the employed. Homelessness is not limited by race, gender, location, or age. While there is disagreement regarding the solutions to homelessness, most scholars and homeless advocates agree on the current underlying causes of homelessness: macro/structural forces (such as the lack of affordable housing, the absence of social safety nets, and a shortage of living wage jobs) combined with micro/individual factors (including poverty, addiction, mental illness, lack of education and employment skills). As the problem of homelessness began to manifest itself more than 30 years ago, cities and municipalities were the original respondents to the problem, providing emergency shelters, food pantries, and supportive services. Early responses by the government approached the problem as a one-time emergency situation, rather than a long-term systemic problem. It was not until 1987 that the federal government, with the passage of the McKinney Homeless Assistance Act, began providing a more comprehensive approach to this pressing social issue.

The McKinney Homeless Assistance Act (since renamed the McKinney-Vento Homeless Assistance Act) continues to provide the majority of the federal dollars targeted at the problem, administered through HUD. Monies distributed through HUD are received by public and private entities, as well as non-profit and for-profit agencies. Funded agencies are required to report on specific outcomes to HUD, one of which includes a focus on self-determination. This literature
review explores the current problem of homelessness, the distribution of HUD funding, and the outcomes required by HUD, including the outcome requiring client self-determination. Literature from HUD, the Urban Institute, social work, social history, and sociology will be used to explore the issue of homelessness. Self-determination as a concept itself and how it can be applied to homeless persons will also be explored. Current and recent literature in the fields of social work, sociology, education, psychology and philosophy provide definitions and applications of self-determination.

B. **Homelessness as a Social Problem**

1. **History**

   While the prevalence of homelessness as a social issue has waxed and waned over the years, there have always been homeless people (Wright, Rubin & Devine, 1998). Early attempts to address the issue of homelessness can be seen as far back as the founding of the United States, as the availability of outdoor relief fluctuated with the presence of the poor house (Katz, 1996). Those who were unable to support themselves were either given charity in sympathy and support, or chastised to the poorhouse, where they were required to work to earn their keep and live, most often, in overcrowded, unsanitary conditions. Governmental financial support and assistance for people who were homeless came from local sources, including cities and municipalities. It was not until the Great Depression that the plight of the homeless population gained national attention and visibility, although not much sympathy (Rossi, 1989). As large numbers of individuals were unemployed and unable to afford housing, sizeable shantytowns (or Hoovervilles) consisting of tents and shacks made out of cardboard and scrap metal were established throughout the country, with one of the largest located in New York City. The scale of the homeless problem forced it into public consciousness as part of the
consequences of the Great Depression. However, after the Depression ended, World War II passed, and the United States entered into a period of economic growth, homelessness was not eradicated (Rossi, 1990). Homeless people were simply less visible.

Thus, when homelessness reappeared on the social landscape in the early 1980s, it was not a new phenomenon. It was simply once again becoming more visible. Early analysis of the problem tied it closely with the economic recession of the 1980s, which would correspond to other periods of higher homelessness (Jencks, 1994). This theory became less probable as the recession ended and the United States began one of the most unprecedented periods of economic growth in its history, yet homelessness did not dissipate. Rather, it continued to increase in scope and size. Academics, researchers, politicians, advocates, and service providers were forced to rethink how they understood homelessness. So while the visibility of homeless persons increased during a period of high unemployment and an economic recession, subsequent increases in employment rates and economic prosperity did not eliminate the problem.

2. **Defining homelessness**

At its most basic level, to be homeless means that someone does not have a home. Beyond that basic definition is a vast array of possibilities as to who should be included and defined as not having a home. If it is limited to not having shelter, than only those living directly on the streets would qualify. If anyone who does not have a permanent place to stay is included, then the definition of homelessness becomes more inclusive. It then includes people living in places not meant for human habitation (cars, abandoned buildings, or subway trains, for example), as well as those living in shelters, transient hotels, and doubled-up in apartments too small to accommodate all of their occupants. Anyone without a fixed permanent residence who does not have the resources to acquire one could be considered homeless. Defining
homelessness can be a complex and debatable issue. If the definition of homelessness is too broad, it may diffuse the problem and contain too many people (perhaps including anyone who is poor and/or precariously housed). If the definition is too narrow, however, it has the potential to focus only on the homelessness of the moment, and not address the problem in its entirety.

Without a standard definition of homelessness, no count can be definitive and counts cannot be compared. “Estimates of the total number of homeless will vary by orders of magnitude depending on how one handles the definitional problem” (Wright, Rubin & Devine, 1998, p. 19). Homeless advocacy groups may use a more encompassing definition in order to stress the magnitude of the problem; politicians may use a more limiting definition to justify allocating fewer resources. Disagreements over the definition of homelessness encompass larger issues about the goals of social welfare policy and society’s values regarding those less fortunate. “In the broadest sense, the issue is what constitutes the floor of housing adequacy and decency below which no member of our society should be permitted to sink without being offered some alternative” (Rossi, 1989, p. 12).

Current estimates of the number of homeless vary depending upon the source. On any given night, it is estimated that 671,859 people are homeless (Homelessness Research Institute, 2009). Estimates from HUD’s (2008) most recent analysis indicate that over the course of the year, 1.6 million persons sought shelter from emergency and transitional housing programs. That number does not include those in domestic violence programs, homeless programs not funded by HUD, persons living on the street or in their cars, or those that are doubled up. The total number of homeless could be much larger. Of the total homeless (not just those in HUD-funded shelters), it is estimated that families with children make up 37% of the homeless population at any one time (National Alliance to End Homelessness, 2009). However, families
are more likely to enter and leave homelessness during the year than unpartnered individuals and therefore represent a fairly large share of the annual homeless population (Burt, 2001). The numbers of homeless children increase if the definition also includes children in the foster care system, who may not be permanently housed. While defining the number of homeless people is complicated, understanding who becomes homeless and why is even more so.

3. **Typology of homeless persons**

To understand why people become homeless, it is necessary to know who is homeless. In the US, the characteristics of homeless people are diverse. Prior to the 1980s, the quintessential homeless person was the alcoholic, unemployed male living on skid row (“the bum”) or the mentally ill woman pushing a shopping cart (“the bag lady”). The current profile of a homeless person is no longer that simple. While some homeless people have a substance abuse issue and/or a mental health problem, not everyone does. The homeless population now includes families with children; people with physical disabilities; urban, suburban, and rural residents; victims of domestic violence; former foster care children; formerly incarcerated individuals; and the employed, unemployed, and self-employed. The only universal characteristic is poverty.

When examining the percentages given for the characteristics below, it is important to note that the homeless persons included in these studies are only those that researchers were able to identify, either through the use of homeless services or those they could identify on the street. Homeless individuals that are more difficult to find (like those hidden in New York’s subway system or those doubled up with friends and family) are not included in these estimates.

a. **Gender**

Both men and women are homeless. On any given day, according to HUD (2008), users of the HUD funded shelter system are: men by themselves (48%), women by
themselves (17.5%), youth by themselves (3.5%), and households with children (31%). Of those households with children, 82% are single mothers with children. One drastic change in the composition of the homeless population from the 1970s to the 1980s is the presence of women; the proportion of homeless women was much larger in the 1980s than it was in the 1970s (Rossi, 1989). However, women with children tend to enter and then exit the homeless system, whereas single men tend to remain homeless for extended periods of time. Over the course of the year, persons in families comprise 70% of the homeless population. Women with children are also more likely to be housed in homeless shelters and to receive assistance from service providers, increasing the likelihood that they will become housed and exit homelessness (Passaro, 1996; Rossi, 1989).

b. Location

While homeless people are located in rural and suburban areas, the majority of the homeless population is found in urban areas. According the Urban Institute (2001), 71% of those relying on homeless programs can be found in urban areas, 21% are in suburban or urban fringe areas, and 9% are in rural areas. What is striking about these statistics is that 61.5% of the poor are NOT located in urban areas; recent poverty statistics show that only 38.5% of the poor are urban dwellers (U.S. Census Bureau, 2007). Thus poverty itself cannot lead to homelessness.

c. Race

One of the greatest differences between the homeless population of previous years and the current homeless population is the racial composition; 63% of the current homeless are members of a racial minority group, including 40% African-American, 12% Hispanic, and 11% listed as other minority (HUD, 2008). As more minorities are located in
urban areas, and urban areas have higher rates of homelessness, this statistic is not surprising. According to Belcher (1992), “a major reason for the overrepresentation of minority groups, especially Afro-Americans, among the homeless is that more minorities in urban America live in sub-standard housing, are jobless, and are dependent on welfare.” Belcher asserts that these factors make minority groups vulnerable to homelessness. The discussion on the structural causes of homelessness address his assertions.

d. **Age**

One of the major changes from homelessness before the 1980s to now is the presence of homeless children. Although “the average age of a homeless person is in the late 30s” (HUD, 2008), as the number of homeless families has increased, so has the number of homeless children. While families make up a smaller percentage of the total number of people that are homeless at any given point in time, families enter and exit homelessness more rapidly and so over the course of a year, the number of homeless children is greater than at a point in time. HUD (2008) estimates that on any given night, 43% of the sheltered homeless are families. Annually, 70% of the homeless population is those in families, of which 43% are homeless children and 51% of those children are younger than the age of 6.

The elderly are underrepresented among homeless persons. In the US, 10.9% of the population is aged 65 or older, but only 3% of homeless persons are that age (U.S. Census Bureau, 2007). This discrepancy is a result of two factors. The first is the social supports provided to those older than the age of 65 by the United States government. Most elderly receive Social Security financial benefits and Medicare. These two factors provide a safety net of income and health care for most seniors, allowing them to avoid homelessness (Rossi, 1989). The second factor limiting the number of elderly homeless is that homeless individuals do not
live as long as the general population. Homelessness has a negative effect on an individual’s health, impacting longevity. Homeless individuals may have a life expectancy of up to 20 years shorter than their housed counterparts (Wright, 1988).

e. **Participation in the foster care system**

Participation in the foster care system as children is a common characteristic of participants in the homeless system. Individuals who participated in the foster care system are more likely to become homeless as adults than those who did not; 26% of homeless adults participated in the foster care system compared to 4.3% of non-homeless adults (Burt, 2001). Foster care participation was an indicator of participation in the homeless system at a younger age (Ronan & Wolff, 1995) and an increased number of days in the system (Park, Metraux & Culhane, 2005). For those children who age out, a lack of family and social support in transitioning into adulthood and independence can result in an experience of homelessness (Courtney & Dworsky, 2006). While this does not mean that those who participate in the foster care system will become homeless (as many do not), the “indication is that foster care has an impact on personal risk factors that may result in homelessness” (Ronan & Wolff, 1995, p. 1).

f. **Substance abuse**

Part of the stereotype of the homeless person includes the use of substances. There certainly are substance users who are homeless, making up 60% of the homeless population (12% reported alcohol problems only, 17% reported drug and/or alcohol abuse problems, and 31% reported a combination of mental health and substance abuse problems) (Urban Institute, 2001). This is significantly higher than the 9.1% of the general population that is estimated to have a substance abuse problem (Substance Abuse and Mental
Health Services Administration, 2006). It is also unclear if substance use is a cause, or a result, of homelessness (Jencks, 1994).

g. **Mental illness**

Fifteen percent of homeless persons report having a mental illness, and 31% reported having both a mental illness and a substance abuse problem (Urban Institute, 2001). A common belief is that the deinstitutionalization of those with a mental illness is greatly responsible for the increase in homelessness. That logic is flawed. First, much of the deinstitutionalization occurred before the rapid increase in homelessness and second, the percentage of the homeless population that has a mental illness has not increased substantially (Wright, Rubin & Devine, 1998). So while it may be true that some members of the homeless community who have a mental illness would have been institutionalized 40 years ago, institutionalizing them today would not solve the problem of homelessness. In addition, there have been arguments made that an increasing prevalence of mental illness (and substance abuse) generally has caused the increase in homelessness; this is also debatable (Wright, Rubin & Devine, 1998, p.5). Neither mental illness nor substance abuse has been increasing in the general population, and therefore cannot be singularly responsible for the rise in homelessness.

h. **Employment/income**

A common element of all homeless persons is the lack of sustainable income. Some homeless have virtually no income either from social welfare assistance or employment. Some studies estimate that perhaps as many as 44% of all homeless are employed in some way (Urban Institute, 2001). For those that are employed, whether in legitimate jobs, the black market, or self-employment (e.g., panhandling, recycling found material, or windshield washing), the amount of money they earn is so small that housing becomes prohibitively expensive (Balkin,
1992). For those that do receive government financial assistance (such as Social Security Disability Income or Temporary Aid to Needy Families), those amounts are also too small to be able to afford housing in most housing markets (Dolbeare, 1992; Berger & Trembly, 1999).

The discrepancy between minimum wage and the income needed to afford a market-rate apartment is tracked across the country by the National Low-Income Housing Coalition (NLIHC). In the City of Chicago, a worker making minimum wage of $7.50 an hour would have to work an impossible 108 hours a week in order to afford a two bedroom apartment and only pay the HUD recommended 30% of her income toward housing (NLIHC, 2010).

   i. Poverty

No singular quality defines homeless people: the only characteristic which can be generalized is poverty (Burt, Aron, Lee & Valente, 2001). In fact, Ji’s (2006) regression analysis indicated that poverty in US metropolitan areas had an independent effect on the rates of homelessness: the greater the rate of poverty, the greater the rate of homelessness. However, there are millions of poor people in this country. Why do some poor people experience homelessness, but not others? Additionally, there have always been poor people throughout US history, but other than the Depression (during which the economy really was the primary cause of the drastic increase), homelessness has not been a significant social problem. So, why is homelessness occurring to such an extent now? In the early 1980s, many blamed the rise of homelessness on the economy, but after the recession ended, and homelessness did not abate, such explanations lost their appeal (Jencks, 1994). Currently, the occurrence of two separate forces coming together has been considered the driving force behind the breadth and depth of the current homelessness problem. These two forces are macro-level, or structural factors, and micro-level, or individual factors.
4. **Causes of homelessness**

Structural (macro-level) factors are viewed as one of the two causes of homelessness. The first structural factor with perhaps the greatest impact is the decline in affordable housing (Dolbeare, 1992). The massive defunding of federal housing programs that took place in the 1980s has resulted in the decline of affordable housing units. The federal government began providing guaranteed mortgages to builders of low-income housing beginning in the 1930s. The building owners were then obligated to provide apartments at fair market price to people who met eligibility requirements. Those who obtained apartments contributed only 30% of their income towards rent and the government subsidized the remainder. The contract would expire after 20 years and at that time, the building owner was free to raise rent. When this occurred, the raise in rent would push most tenants out of the building, forcing them to find low-income housing elsewhere. As long as new contracts started as old contracts expired, there continued to be a stable stock of low-income housing. As this federal program was dismantled in the 1980s, low-income housing began to disappear (Caves, 1989). As subsidized buildings began to disappear, so did Section 8 vouchers. The Section 8 Rental Voucher Program was originally implemented as part of the US Housing Act of 1937. These vouchers allowed households to obtain an apartment, pay what they could afford, and the government would provide the remainder. The system allowed families to choose the neighborhood and building in which they lived. The decreased availability of these vouchers, in conjunction with fewer subsidized buildings, left those with low incomes to fend for themselves in the housing market.

The lack of subsidized housing units and affordable housing is only one piece of the structural puzzle. Subsidized housing would not be necessary if everyone had sufficient income
to afford market-rate housing. But the income supports provided by the government are not large enough to afford housing and other life necessities. These income supports include:

- **Temporary Aid to Needy Families**: It is well documented that welfare recipients cannot afford unsubsidized apartments (Jencks, 1994) and the argument has been made that if state legislatures simply made welfare payments high enough for recipients to afford housing, no child would have to be homeless (Berger & Trembly, 1999).

- **General Assistance**: For the most part, income assistance to single individuals (which are predominately male), is non-existent. While welfare assistance does not guarantee a person will be able to afford housing, having no assistance can leave one destitute.

- **Living Wage Employment for Unskilled Workers**: Before the current homeless crisis began, there were people who were extremely poor, many doing extremely low-skilled work for day wages. That small income was still enough to afford a room in a flophouse or rooming house (such as an SRO) in skid row (Wright, Rubin & Devine, 1998). Since that type of cheap housing has disappeared, an individual’s income must be higher to afford a room for the night. However, current minimum wage and the average wage for unskilled work have declined in real value over the past 40 years (Hardin, 1996). Unskilled workers are no longer able to obtain work that covers the cost of market-rate housing; there is an affordability gap (Dolbeare, 1992).

   Additional income supports would allow for low-income people to afford market-rate rent. Subsidized housing would allow for people to be housed, regardless of income. With both types of structural components missing, the fact is that many people cannot afford the available housing. “The net result has been more and more poor people and fewer and fewer units in which to house them, and that has spelled more homelessness” (Wright, Rubin & Devine, 1992,
However, many people in the United States live with these same structural factors and they do not become homeless. It is when these structural forces contact those who possess contributing individual factors that the potential end result can be homelessness.

Of all the low-income individuals and people living in poverty, micro-level or individual level factors decide who becomes homeless. The characteristics described in the typology section address a few personal factors that can lead a person to experience homelessness. These factors include substance abuse, mental illness, and poverty. In addition, there are other individual experiences or characteristics that are prevalent among homeless persons and can be considered risk factors. They include domestic violence, chronic illness, undereducated, unskilled, formerly incarcerated, too-early childbearing, participation in the foster care system, experience of homelessness as a child, and a lack of personal and social resources to provide individual assistance. As many people have these characteristics and do not become homeless, it cannot be these factors alone that lead someone into homelessness. The current understanding of homelessness intersects these individual factors within the context of our society. “In brief, social structural developments put people at risk of homelessness; personal characteristics actualize that risk for specific individuals” (Wright, Rubin & Devine, 1998, p. xiv).

Homelessness as a problem is not isolated to the United States, but can be found throughout the world. However, the origins and responses to homelessness in the US separate it from other countries. “In many countries, lack of resources can be blamed; in the US, choices regarding allocations from resources is culpable” (Hertzberg, 1992). How the US has responded to the problem of homelessness is instrumental in understanding what is being done to address the problem and the impact these programs have on individuals and their life choices.
5. **Women and homelessness**

   The structural conditions causing homelessness leave poor women particularly vulnerable. The lack of decent affordable housing, the pay between income and median rents, and the overall growth of households living in poverty greatly affect poor women. This effect is multiplied by the lack of economic and social inequities built into our society’s structure, as women have fewer skills for the job market and earn less than men. “Many homeless women have inadequate education, poor earning power, limited job opportunities, overwhelming child care responsibilities, and fragmented support networks” (Bassuk, 1993, p. 340). Approximately 90% of all homeless families are headed by women (Anderson & Rayens, 2004). The demands of parenting may restrict already limited employment possibilities and earning potential. For these single mothers, the amount of income required from employment is greater than for single women or two-parent households, as multi-room apartments and child care add additional financial burdens. Few women receive adequate financial or material support from family or former partners to meet the monetary demands of childrearing; the little aid from federal and state governments only compounds that problem. “The serious systemic ills plaguing the society virtually ensure that homelessness will continue to be a significant problem among poor women” (Bassuk, 1993, p. 345).

   The experiences of homeless women have only recently begun to receive individualized attention. Early studies of the homeless population were conducted with a male bias as many studies were frequently completed with residents in emergency shelters, who are predominately male (Geissler, Borman, Kwiatkowski, Nicholas Braucht, & Reichardt, 1995). Since then, homelessness has been examined either within a gender-neutral framework, or the experiences of homeless women have been subsumed within the larger context of homeless families (Wesely &
Wright, 2005). Studies have compared homeless women (primarily women with children) with housed controls and show that risk factors for women include childhood and adult exposure to violence, pregnancy, and substance abuse (Lehman, Drake, Kass, & Nichols, 2007). There is much that remains unknown about how their struggles and efforts are supported or hindered by the programs available to them. “It is important for research to focus specifically on women so that their particular characteristics and needs can be more thoroughly understood” (Geissler, et al., 1995, p. 66).

C. Responses to Homelessness

1. Local responses

The response to homelessness has grown considerably during the past 30 years. Initially, homelessness was viewed as a one-time emergency, and governments, churches, and service agencies responded by providing emergency shelter and food pantries to assist people for a short time period (Wright, Rubin & Devine, 1998). Funding was limited, with states and municipalities contributing what they could to what they considered a local problem. As it became clear that homelessness was not a local problem, but rather a country-wide social crisis, more comprehensive approaches were needed to address it. Currently, local jurisdictions have been developing plans to not just address homelessness, but to end it. The National Alliance to End Homelessness (2000) developed a 10-year plan to end homelessness which it encourages communities to adapt to their needs. The Chicago Continuum of Care (2000) has developed its own 10-year plan entitled Getting Housed, Staying Housed: A Ten-Year Plan to End Homelessness which was endorsed by the mayor in 2003. While the feasibility of these plans and their likelihood of success can be debated, they certainly provide a more comprehensive and coherent approach than in the early 1980s.
2. **Federal government response**

The original response of the United States government to the emerging problem of homelessness was similar to the local responses; it was a short-term, individualized emergency situation that needed an individualized, one-time response. The first funding for homelessness was funneled through the Federal Emergency Management Agency in 1983, providing individuals and families with one-time monetary grants to help them regain housing and obtain food (Burt et al., 2001). In the mid-1980s local governments began to understand that homelessness was not a one-time emergency situation, but a longer-term problem. While it may have been understood locally that more comprehensive responses were needed to address the issue, it was not until the late 1980s that the issue became one of federal importance.

One of the first recognized federal government advocates of funding programs to address homelessness was Representative Stewart B. McKinney (R-CT). McKinney advocated for comprehensive homeless legislation and in 1987, PL100-77 became the McKinney Homeless Assistance Act (since renamed the McKinney-Vento Homeless Assistance Act). The act has been referred to as landmark legislation. “It constituted a recognition by the federal government that homelessness was a national crisis, and it was an acknowledgement of federal responsibility in addressing the situation” (Foscarinis, 1996, p. 171). As the Reagan administration was known for dismantling federal assistance programs, the fact that new legislation was passed to address this social problem is a testament in itself as to the scope and gravity of the problem.

Passage of this bill was not an easy process. Congress began hearings about the issue as early as 1983, and between 1983 and 1987 the Banking, Finance and Urban Affairs Subcommittee of the House of Representatives held numerous hearings on the subject. Even after the bill’s passage in the House and Senate, the Reagan Administration was “reluctant” to sign the
measure (Fessler & Elving, 1987, p. 1452). The legislation was supported not only by members of Congress, but by homeless advocates, politicians, and administrators from urban areas. Part of their support included a night in March of 1987, when about a dozen legislators slept outside on the streets of Washington, D.C. to draw attention to the issue (Fessler & Elving, 1987).

While the McKinney-Vento Act has been modified and changed during the past 20 years, it is still the main funding source for homeless programs. The act provides a range of services within various government departments. The act includes the following:

- Title I: Definitions of homelessness
- Title II: Establishes and describes the functions of the Interagency Council on the Homeless, an independent entity within the Executive Branch composed of the heads of 15 federal agencies
- Title III: Authorizes the Emergency Food and Shelter Program, which is administered by the Federal Emergency Management Agency
- Title IV: Authorizes the emergency shelter, transitional housing, and continuum of care programs administered by the Department of Housing and Urban Development
- Title V: Requires federal agencies to identify and make available surplus federal property for use by states, local governments, and nonprofit agencies to assist the homeless
- Title VI: Authorizes programs by the Department of Health and Human Services
- Title VII: Authorizes programs administered by the Department of Education, the Department of Labor, and the Department of Health and Human Services
- Title VIII: Amends the Food Stamp program to facilitate participation in the program by persons who are homeless, administered by the Department of Agriculture
• Title IX: Extends the Veterans Job Training Act

The McKinney-Vento Act provides authorization for programs in several different government departments. The department that receives the majority of the funding is the Department of Housing and Urban Development.

3. **US Department of Housing and Urban Development**

   a. **Program availability and funding**

   The Department of Housing and Urban Development administers millions of dollars in funding for homeless services and housing programs across the country, and is the largest funder of programs for homeless persons in the United States. The main programs administered by HUD include the Emergency Shelter Grant (ESG) Program, the Supportive Housing Program (SHP), the Shelter+Care (S+C) Program, and the Single Room Occupancy (SRO) Program. Each program has different requirements in terms of populations served, the level of matching funds, and what type of entity is able to receive funds. In 2009, more than a billion and a half dollars were awarded through these programs to local governments and non-profit entities. In Chicago, almost 38 million dollars were received to support housing and services (HUD, 2009). All but the ESG Program are competitively awarded funds.

   HUD designed a competitive funding process in the mid-1990s as part of a strategy to prevent massive defunding of the department. Critics of the department had argued that the federal government was not in a position to effectively judge what types of homeless programs were needed locally. To continue operations, HUD redesigned its funding strategies by having communities decide what the local need is and what type of program response is appropriate (Bratt, 2003). The local community is referred to as a Continuum of Care, and local government,
service providers, consumers, and other interested parties (such as private funders, advocacy
groups, and researchers) are all encouraged to participate.

Each continuum is responsible for the coordination of homeless services. To receive
funding, each continuum must submit to HUD a plan outlining how it will address homelessness
and coordinates services. This requires governments and non-profits to work together to
determine need and appropriate responses to local conditions. “This change was made explicitly
to encourage systems integration in communities throughout the country” (Dennis, Steadman, &
Cocozza, 2000, p. 169). Instead of applying directly to HUD, agencies now apply locally within
the continuum, and each continuum ranks its programs in a competitive order. Through this
process, local continua can decide which programs respond best to community needs.

What a community may need, but what neither HUD nor the McKinney-Vento Act
provides, is the development of low-income housing or income supports. The federal housing
programs that were originally dismantled in the 1980s have not been restored, even through
funding for homeless programs. Other than ensuring that people experiencing homelessness are
eligible to receive food stamps, the act also does not address income support for homeless
persons. There are some funds available for housing subsidies, but these are limited and
reserved exclusively for individuals and heads of households who have some type of HUD-
defined disability. So HUD funding is available for services, and emergency and transitional
housing, but funding is not available for low-income housing development or income supports.

b. Program outcomes

Although HUD does not dictate to local continua what their community
priorities are, it does establish overarching outcomes for its funded programs. These outcomes
are:
1. Clients obtain/retain permanent housing.
2. Clients increase skills and/or income.

For outcomes one and two, HUD requests specific information to assess whether the outcomes have been achieved on the Annual Progress Report (APR) submitted by all funded agencies. For example, HUD asks the destination of each person that left the program, with certain destinations considered to be permanent housing. HUD is then able to assess if outcome number one has been achieved. HUD also asks the income at entry and exit, allowing a determination to be made if clients are exiting the program with more financial resources than they entered, thus addressing outcome number two. Both outcomes one and two are quantifiable and easily measurable. According to the Office of Management and Budget (OMB), the Homeless Assistance Grants program is one of the highest performing government programs (OMB, 2005). This program met or exceeded each of the established housing performance measures, including:

- More than 70% of formerly homeless persons will remain housed in HUD permanent housing for more than six months
- Sixty percent of households leaving transitional housing will move directly into permanent housing
- The employment rate of persons exiting HUD homeless assistance programs will be 10 percentage points greater than the employment rate of those entering

The performance measures that the OMB evaluation examined focus on housing and quantifiable goals. The report does not address outcome three—clients achieve self-determination. For agencies, HUD does not specify any particular outcome. Agencies are able to decide for themselves what this outcome means and how to measure it. How HUD then
evaluates whether the outcome has been achieved is unclear and not addressed in either the OMB PART report or HUD’s Annual Performance Plan (HUD, 2004). How recipients of homeless services are to become self-determined is not identified. In addition, the rational behind the choice of self-determination of an outcome is not available. Research regarding HUD policies and program implementation, inquiries to HUD as well as other homeless advocacy organizations, and review of congressional hearings regarding the issues of homelessness and program performance provided no information regarding the origins of the outcome, its intended purpose, or the rationale for its continuance.

D. **Self-Determination**

1. **Introduction/conceptualization**

   Self-determination has no singular definition. *Webster’s New World Dictionary* defines it as “determination or decision according to one’s own mind or will, without outside influence” (1986, p. 1217). Cook and Jonikas (2002) refer to self-determination as the right of individuals to have full power over their own lives, encompassing concepts such as freedom of choice, civil rights, and independence. “Self-determination connotes free choice or self-direction” (Rothman, 1989, p. 599). These simplistic definitions are not without controversy however. The many limitations, caveats, and circumstances applied to self-determination lead some theorists to doubt its existence. Perlman (1975) wondered if self-determination was “an illusion” (p. 65). In contrast, Salzberger (1979) insists that it is not self-determination itself that can be lost, but simply the opportunity to exercise it. Thus, “some writers claim that self-determination exists, at least as a possibility, although it is rarely expected to exist in a pure state” (Levy, 1983, pp. 907).
Assuming that self-determination can exist, to understand how it can be applied or understood, it becomes necessary to identify what factors or elements comprise self-determination. Writings on self-determination reveal many layers to this concept, and many factors have some bearing on the availability or exercise of it. Depending upon the field of thought, different facets receive greater importance when defining the concept. In great generalization, philosophers discuss freedom as the underlying tenet of self-determination, psychologists emphasize individual drive and ambition, educators stress individual capacity, and social workers highlight the influence of and opportunities within the social environment. These four concepts (freedom, psychology, capacity, and environment) comprise the main principles behind the concept of self-determination and each will be discussed separately.

2. **Freedom/autonomy**

The freedom or autonomy to be self-determined connotes free choice and the power to decide. For Biestek and Gerhig (1978), the right of self-determination is self-directed. As a human being he has the responsibility of living his life in such a manner as to achieve his life’s goals, proximate and ultimate, as he conceives them. Corresponding to this responsibility, he is endowed with a fundamental, inalienable right to choose and decide the means for the prosecution of his own personal destiny (p. 37).

Self-determination is personal and individualistic. It is often seen as a right—each individual should be free to chose and free from outside constraints. Freedom is the most straightforward of the principles and is most often discussed in the negative. To not have the freedom to be self-determined means that there exist formalized laws or codified policies that prevent an individual from exercising self-determination. “Negative liberty is merely the absence of constraints or
barriers to one’s control over decisions and actions whereas positive liberty is the presence of assurances (such as legislation) for choice and control” (Gilson & DePoy, 2004, p. 5).

Laws or limitations on behavior that prevent people from causing harm to others are not considered violations of self-determination. Self-determination itself does not give unlimited license for one person to act in a harmful way or to undermine the self-determination of others (Beistek, 1975). “There are well canvassed limitations to the exercise of the right to self-determination that relate to self or other harm” (Furlong, 2003, p. 178). While there do exist laws that prevent someone from doing something he may deem a self-determined behavior, if that behavior would have infringed upon the right of someone else to be self-determined, than that limitation is acceptable to self-determination theorists. Examples of laws that address this include anti-discrimination and fair housing laws. In principle, these laws focus on preventing groups from excluding people who are different from themselves of participating in certain activities or completing certain acts or behaviors. They are laws that prohibit specific behavior. In practice, however, they allow other groups to exercise their self-determination. The behavior that limited their self-determination is eliminated by the law.

Self-determination as an undeniable individual right may be limited to, or at least highly associated with, Western cultures. McDermott (1975) refers to the rights of individuals to make their own decisions as “one of the cornerstones of the moral framework to which democratic Western societies are committed” (p. 1). Through most of the self-determination literature, the right of the individual is referred to as the primary component of self-determination, without which none of the other components are possible. In opposition to this perspective, Ewalt and Mokaua (1995) contend that self-determination can be part of a shared group identity and consideration. They argue that separating oneself from the group is not always appropriate and
that “decision-making is more complex than separating into exclusive categories what is in other people’s interest and what is in one’s own” (p. 172). They also claim that self-determination can be viewed differently for people from lower socioeconomic class and oppressed cultures. Those with fewer rights and resources may view self-determination differently than those who have what they need. Thus, when exploring self-determination, it should be kept in mind that “larger ideological and cultural conditions encountered within a given site will determine whether a positive value is given to self-determination” (Furlong, 2003, p. 185).

Freedom and autonomy are only one piece of self-determination. “The concept of autonomy relates to the power to decide; self-determination relates to the power to decide and the action which follows” (Spicker, 1990, p. 222). The action which follows is highly influenced by someone’s capacity.

3. **Capacity**

The practice of self-determination “must be anchored on knowledge and skills” (Gilson & DePoy, 2004, p. 6). Knowledge and skills are part of person’s capacity. Capacity is a person’s actual ability to be able to make decisions and then act upon those decisions. It can be an internal ability, such as intelligence, education, understanding and skill-level. Leff, Conley, Campbell-Orde, and Bradley (2003) indicate that there are a number of skills and types of knowledge that have been theorized to enable persons to be self-determined. They include self-knowledge, choice making skills, self-observation skills, decision-making skills, goal-setting skills, and self-instruction skills. Weick and Pope (1988) articulate reasoned decision making as decisions “based upon knowledge of available options, the capacity for objective judgment, and an understanding of consequences” (p. 12).
More generally, capacity is a function of a person’s ability to make rational decisions and implement those decisions. Self-determination involves “the capacity to set one’s own goals, decide what one needs and wants; and control how goals, needs, and wants are to be actualized” (Gilson & DePoy, 2004, p. 6). Self-determination assumes someone is able to identify a problem, examine the options, weigh the consequences, and then decide on a course of action that represents the most satisfying result (Weick & Pope, 1988). People who have a severe mental illness, are developmentally disabled, or are impaired by substances are often seen as not having the capacity for reasoned decision making (Belcher, 1988; Kassel & Kane, 1980). It is when reasoned decision making is required as a function of human behavior that “a person’s right to exercise choice can be overturned by another’s judgment about whether these rational criteria [for decision-making] have been met” (Weick & Pope, 1988, p. 12).

For those who are viewed as incapable of reasoned decision-making, they begin to lose freedoms and autonomy, as seen through policies, laws, and regulations and the use of coercive and restrictive interventions, ranging from court-ordered treatments to seclusion and restraint (Cook & Jonikas, 2001). Tower (1994) argues against this, asserting that even those who are the most vulnerable and are commonly viewed as incapable of reasoned decision-making can often be their own greatest resources when given the opportunity to utilize their strengths. Regardless of the individual circumstance, Beistek (1975) contends that each person’s capacity for self-determination is constrained by the person’s mental and physical capacity to act, and that an individual cannot be pushed into self-determination beyond individual capacity.

Capacity can be limited in other ways as well. Personal resources can limit someone’s self-determination. Economics can be a formidable barrier to self-determination (Rothman, 1989). Someone who does not have the monetary resources to implement decisions is limited in
self-determination. Familial and social resources can be personal assets as well, if they increase a person’s capacity to act upon and implement decisions. Capacity alone does not ensure that a person will act in such a way that demonstrates self-determination; individuals must be aware of their own capacities. Self-determined people “use a comprehensive, and reasonably accurate, knowledge of their strengths and limitations to act in such a manner as to capitalize on this knowledge in a beneficial way” (Wehmeyer & Schwartz, 1997, p. 247).

4. **Personal psychology**

Self-determination also implies that a person is psychologically able to make decisions (Spicker, 1990). For Deci and Ryan (1985), self-determination is more than capacity, it is also a need. They assert that human beings have a “basic, innate propensity to be self-determining which typically has the benefit of developing competencies and of working toward a flexible accommodation with the social environment” (p. 38). For someone to be able to practice self-determination and act in such a way, the intrinsic motivation or psychological drive to make decisions and then act upon those decisions must be in place (Deci and Ryan, 2002). Personality attributes, including self-awareness, self-observation, positive attributions of efficacy and outcome expectancy, and internal locus of control are also seen as personal components influencing the practice of self-determination (Leff, et. al., 2003).

If someone does not have the necessary personality attributes or psychological components and believes herself to be incapable of completing an action or fulfilling a desire, she may not even attempt to do so. She is limited by her psychology and her personal views of herself. Mithaug (1996) argues that someone who lacks capacity and resources may not attempt new things or consider new opportunities simply because she is focused on retaining the resources that she does have. Ironically, the psychological component of self-determination is
built through the experience of self-determination itself. “Man’s exercise of choice rather than his coercion by his own blind impulses or the power of others is what builds in him his sense of effectiveness, of identity and selfhood, and of responsibility” (Perlman, 1975, p. 70). For someone who has never had the freedom, personal resources, or opportunities to make decisions, the concept of self-determination may be foreign. For those individuals, “the sense of autonomy, of identity, of self as center of self-government and social responsibility – these basic images and concepts of selfhood are often not part of their personal psychology” (Perlman, 1975, p. 74).

Self-determination is not to be confused with self-efficacy. Perceived self-efficacy, as defined by Bandura (1994) is “people’s beliefs about their capabilities to produce designated levels of performance that exercise influence over events that affect their lives” (p. 71). The level of self-efficacy that one has can evoke thoughts, feelings, motivations, and behavior. High levels of self-efficacy lead people to believe that they are able to affect things around them and then they act accordingly, low levels of self-efficacy lead to feelings of powerlessness and lack of effort towards accomplishing tasks. Self-efficacy is only a part of self-determination and how strong a component is unknown. Self-determination extends beyond how someone feels about themselves to include other psychological components.

The psychological components of self-determination are explored in great detail by Deci and Ryan (2002) in their work, *Handbook of Self-Determination Research*. For them, intrinsic motivation (including locus of causality and perceived competence) and external motivation are key psychological drivers in the practice of self-determination. Intrinsically motivated behaviors are those that are based in their inherent satisfaction of the behavior itself, not because of some external reward. Perceived locus of causality and perceived competence are the cognitive processes that impact intrinsic behaviors. The more people view themselves as having autonomy
and force regarding the outcome of the action, the more rewarding and intrinsically motivating the behavior will be. The same is true for perceived competence; the more people view themselves as competent, the more enjoyable they will find the task to be, increasing their intrinsic motivation. Extrinsicly motivated behaviors are those that are based in the reward or outcome that occurs as a result of the behavior. Intrinsically motivated behaviors demonstrate self-determination; extrinsically motivated behaviors can demonstrate self-determination, depending upon the action required and the regulation of that behavior.

While Deci and Ryan (2002) explore the concept in greater detail than others, common themes emerge regarding the psychological component of self-determination. Motivation, locus of control, perceived competence, positive self-efficacy, and previous experience all contribute to a person’s ability to be self-determined. What is unclear is how many of these psychological aspects are required to be self-determined, or if they all need to be present.

5. **Environment/opportunity**

The idea of understanding human behavior within the context of environment is not new to social work. The resources available within the environment, the client’s perception of the environment, and the client’s ability to interact with the environment can all sway client behavior. Individual practice methodologies, such as Person-Environment Practice (PEP) are designed to specifically assess and intervene with both the client and the environment. Within the self-determination literature, the role of environment is the least developed with only social work and disability literature including this aspect as part of their framework. There are two universal aspects of environment: social norms of behavior and available opportunities. For recipients of social services, interaction with the agency and social workers can be a third aspect.
The role of environment on the practice of self-determination will be explored within three areas: norms of behavior, opportunity and resources, and human service organizations.

a. **Norms of behavior**

As freedom relates to specific laws of a governed society, environment refers to social norms regarding patterns of behavior and expectations of current culture. Each individual is part of a larger society, and self-determination is limited within that web of human interdependence. “Self-determination is enmeshed in a complex network of social relationships which move the notion far from the simple level on which each client does what he wants to do, yields to his own impulses” (Berstein, 1975, p. 37). Many behavior standards and social expectations are not codified into law and there is nothing to prevent someone from conducting herself in a certain way. Yet knowing that the action would not be approved by others can be enough to limit behavior. Or, a behavior may be so ingrained into the way of thinking of people that it never occurs to them that alternates are possible.

In addition, cultures and societies create certain kinds of responsibilities, virtues and choices that construct individual behavior (Wilson, 1975). “People are expected to know the social rules and to direct their lives in accordance with them” (Weick & Pope, 1988, p. 15). Social expectations of behavior can have negative consequences for self-determination. In an area such as mental health, the social stigma of having a mental illness has been linked to decreased self-esteem, poor social adaptation, and consequently, less individual self-determination (Leff, et al, 2003). Societal factors can thus affect self-determination by influencing an individual’s and society’s perceptions of an individual’s capacities.
b. **Opportunity and resources**

Another aspect of the environment component addresses opportunity and/or the availability of resources. A person may have the freedom to be self-determined, but she also needs the opportunity to act. Opportunity can be viewed as a moment in time when the resources that a person has matches with the individual capacity to be self-determined (Mithaug, 1996). Opportunity can also be viewed in terms of available choices environment produces for the individual. Opportunities can be limited by oppression, exploitation, and scarce resources (Freedberg, 1988; Salzberger, 1979). The distribution of resources and available choices affect individuals and how they act. “Empowerment and self-determination are dependent not only on people making choices, but also on people having available choices to make” (Saleebey, 2002, p. 109). Part of the disability rights movements involves creating environmental opportunities (such as handicap accessible buildings and sidewalks) which provide greater opportunities for those with disabilities to act autonomously, increasing self-determination (Gilson & DePoy, 2004). Even Deci and Ryan, who define self-determination as a quality of human functioning, acknowledge that environment can provide opportunities to be self-determined. “We also emphasize that it [self-determination] can be either supported or hindered by environmental forces … implying that when the environment supports self-determination, the person will be more self-determining” (Deci & Ryan, 1985, p. 39).

c. **Influence of human services organizations**

Human services organizations and service staff can support or hinder the development of client self-determination. The National Association of Social Workers (NASW) includes the responsibility of social workers to respect and promote the right of clients to self-determination in its code of ethics (2008). This can be done by assisting “clients in their efforts
to identify and clarify their goals” (p. 4). The code of ethics also encourages social workers to “act to expand choice and opportunity for all people” as part of their responsibility to the broader society (p. 16).

For clients to be able to achieve self-determination, they must be viewed as being able to be self-determined. Tower (1994) views clients as having unique capabilities and that they “can be their own greatest resources” when provided the opportunity to advocate on their own behalf and have control regarding the services they receive (p. 191). Furlong (2003) disagrees with that sentiment, and describes the majority of service users as being in positions that have attenuated capacities for self-determination. “Persons in these groups tend to be more or less excluded, disenfranchised and disadvantaged” (Furlong, 2003, p. 178). However, most of social work self-determination literature views client self-determination as the ultimate goal (Freedberg, 1988).

Self-determination may be an idealized standard, but implementing it into a practice setting may be difficult. Spickler (1990) reminds us of the power dynamic in social work, and even in cases where the client is professed to have choice, in reality the client’s autonomy may be in jeopardy should the client make incorrect choices. “Social workers do not often have direct powers to control their clients, but they do in many cases have a degree of both influence and authority which will be used to control a person’s behavior” (Spickler, 1990, p. 225). Staff members can choose to advocate for resources or connect clients to needed services. Agencies and their staff control the services, thus controlling the clients (Freedberg, 1994). Even for those practitioners who support client self-determination, the effect of this on the client may not be uniform due to the many variations in service types, communities served, and characteristics of the individual service provider. In their qualitative study of 20 social workers exploring client decision-making and self-determination, Kassel and Kane (1980) found “enormous variation in
the application of the principle” (p. 161). NASW (2008) allows for limits to be placed on a client’s self-determination when “actions or potential actions pose a serious, foreseeable, and imminent risk to themselves or others” (p. 4). This determination can be made when, “in the social worker’s professional judgment”, that is likely to occur. Variations in the definition of risk can lead to inconsistencies on when it is appropriate to limit a client’s self-determination.

While self-determination can be viewed as an instrument of client improvement (Rothman, 1989) or an established outcome (like HUD), an organization’s ability to facilitate the development of self-determination is debatable. In their exploration of systems that support self-determination, Leff, et al. (2003) identify services and provider variables that have an effect on self-determination. Interventions that “encourage consumers to engage in self-advocacy and choice making and providers to support and respond positively to these behaviors” are believed to promote self-determination with consumers of services (Leff, et al., 2003, p. 167). Interventions are implemented by agencies, and agencies can be controlling simply by being an organization and establishing rules, standards, eligibility requirements and types of services provided. “The structure and nature of the service are often constrained by legal eligibility requirements – what clients may receive what services, the boundaries of the practitioner activities, and requirements placed on clients by their situation or program” (Rothman, 1989, p. 603). The very act of establishing an outcome of self-determination places an outside force on the client, thus theoretically diminishing self-determination.

E. **Homelessness and Self-Determination**

1. **Introduction**

While the third HUD outcome for its homeless programs is that clients obtain self-determination, not much is written specifically about this construct with this particular
population or the effectiveness of self-determination as a programmatic outcome. This is not surprising given that most professional writing regarding self-determination has been devoted to position papers, conceptual work, and qualitative descriptions of promising programs … research needs to be done in the areas regarding system performance, such as how many persons make how many choices in what life domains and how often these choices result in the actual attainment of goals and preferences (Leff, et al., 2003, p. 159).

Within the extensive available literature about homelessness, most studies focus on specific aspects about individuals experiencing homelessness and their lives. From these studies, we can begin to speculate on the relevance of the self-determination concept to those individuals. The self-determination framework can be applied to the current knowledge base, providing a starting point for understanding how self-determination intersects with the experience of homelessness.

The underlying current within the majority of homeless literature is the idea that it is preferable to be housed, rather than homeless, and that there must be a reason why someone is homeless (whether it be personal characteristics, structural forces, or a combination thereof). Much of the literature focuses on explaining why homelessness exists, describing who is homeless, and offering solutions to move people from homelessness into housing. The assumption is that it is better to be housed than homeless. This assumption then places value judgments on choices that do not lead to an exit of homelessness. While it has been insinuated that homeless people choose to become homeless, that is not widely accepted as an accurate statement within academic and advocacy groups. Anyone who chooses to become homeless does so when all the other options are worse than homelessness itself (Wagner, 1993). Self-determination theorists posit that choice between limited and/or unsavory options is not equivalent to choice associated with self-determination. Both of those positions remove
legitimacy from the choice to be homeless. The ability of a homeless person to make choices will be explored with each facet of self-determination as it is described in the literature.

2. **Freedom/autonomy**

   If the freedom to be self-determined means that someone has the power to make individual choices and is not constrained by laws or regulations, than many homeless would be considered free and autonomous. That only looks at the surface of the issue. Jencks (1994) refers to the “invisible homeless.” These include people in detox centers, mental hospitals, foster care, prison, and other institutions. Individuals residing in those institutions are not autonomous and are not considered free to make their own choices.

   Those that are not institutionalized are not always free to make their own choices either. According to Arnold (2004), the homeless are not viewed as autonomous citizens and are therefore subjected to surveillance practices by those who have more power and knowledge. Wright (1995) details a variety of laws enacted by cities and counties in the past 30 years to control the behavior of homeless people. Specifically, there are laws in jurisdictions across the country dictating to homeless individuals where they may not sleep, congregate, eat, or request assistance. These laws severely restrict the choices that people experiencing homelessness make on a daily basis. Examples of this include:

   - The State of Connecticut passed a law prohibiting someone from receiving welfare benefits during their first year of residency in an attempt to prevent the poor from moving into the state (this was deemed unconstitutional by the Supreme Court as it prevented individuals from traveling freely among the states).

   - Santa Barbara, CA, has an ordinance that prohibits any person from sleeping on any public beach during the period of one-half hour before sunset to 6:00 a.m.
• Thirty-five states and Washington, D.C., all passed anti-begging ordinances that criminalized personal solicitation.

• In 1993, Seattle, WA, approved an ordinance that makes it possible to fine and jail people for sidewalk lounging (sitting or lying on a downtown sidewalk in front of a business).

These examples show how laws can be designed to control the behavior of homeless people, diminishing their ability to be self-determined.

3. **Capacity**

   One theory of homelessness places the entirety of the problem on the individual’s personal characteristics; however, most homeless advocates and researchers believe that personal issues are only part of the picture (Wright, Rubin & Devine, 1998). Personal attributes are used as descriptive tools to understand who is homeless. These were outlined in the section describing the typology of the homeless population. Included in those descriptions are items that qualify as capacity qualities within the self-determination framework.

   a. **Mental illness/substance abuse**

   As it was described earlier, 15% of the homeless population have a mental illness, 29% have a substances abuse history, and 31% have both (Urban Institute, 2001). However, those statistics alone do not tell us who is so severely incapacitated by a mental illness or a substance abuse issue as to lack the capacity to be self-determined. It can be assumed that those who are institutionalized for a mental illness or have been hospitalized as a result of the substance abuse have had their self-determination limited, at least in some way. For those that are in homeless shelters, doubled-up with friends or relatives, or living on the street, the capacity issue is not as clear. For example, in a study by Belcher (1988), it was revealed that homeless service providers did not commit homeless people with a mental illness who were able to
demonstrate some sign of self-care (coming in from the cold, obtaining food). The mental health providers felt those individuals needed to deteriorate more before being committed, even though they were severely impaired and could not take care of themselves fully. In this situation, the mentally ill homeless “retained their rights to self-determination, but their ability to exercise those rights could be seriously questioned” (Belcher, 1988, p. 401). This demonstrates that a lack of institutionalization or hospitalization does not automatically mean that a mental illness or substance abuse problem has not limited an individual’s ability to be self-determined.

b. **Employment/income**

Employment skills and the ability to earn income could be considered key capacity issues. Financial resources allow individuals to act upon decisions they make if those decisions require money in order to be implemented. In the United States, monetary resources, and the acquisition of these resources, are supposed to occur through work. Social welfare policies in the U.S. that are tied to employment provide universal and non-stigmatized benefits; whereas social policies and financial benefits that are means-tested (and targeted to the poor) are generally more stigmatized and intrusive (Rank, 1994). As financial gain is supposed to occur through employment, it would lead that self-determination would increase through employment. Research concerning employment and homeless persons indicate that that may not be the case.

In their research, DiBlasio, Belcher, and Connors (1993) found that of the homeless people they studied, 24% worked full-time and 11% part-time. The authors speculated that for these employed people, individual deficits are not the cause of homelessness. Balkin (1992) concluded that self-employment is a common activity for homeless men, but the wage does not pay for housing. First and Toomey (1989) conducted a statewide study of 793 homeless men and found three groups: a quarter of men were severely disabled and unable to work or be
independent; a third needed a moderate range of services (moderately disabled but supports could allow them to be semi-independent); and the remainder were displaced from the work force but capable of independence. First and Toomey concluded that this final group is being squeezed out of the job market because their skills are marginal which leads to low-wages and periods of unemployment. Even when employed, the low wages cannot pay for the high cost of housing. Capacity for self-determination is threatened twice: first, employment does not create enough financial rewards to be able to obtain housing; second, individual skill level and knowledge base may prevent the homeless person from obtaining employment that does provide higher wages.

c. **Social resources**

The presence or absence of personal social resources is a capacity issue discussed in the homeless literature. It has been well documented that those experiencing homelessness are socially isolated with few friends and relatives (Rossi, 1990). Legiecq, Anderson, and Koblinsky (1998) had results that indicated that homeless mothers had smaller social networks, and perceived and received less social support than housed mothers. The homeless mothers that McChensey (1992) studied could be divided into two groups: those that had kin to assist them and those that did not. Often those that did not have kin had already exhausted the resources of their family or did not have any kin from which to request assistance. Marin and Vacha (1994) discovered that the doubled-up homeless population is much more numerous than the numbers of people living rough or in shelters and that extensive self-help exists among these poor households. While the data suggest that self-help plays a key role in offsetting homelessness in the community, this type of self-help is not possible without a social network of some kind.
Johnson, McChesney, Rocha, and Butterfield (1994) explored the characteristics of homeless and housed, poor families. One of their findings is that housed families are larger and have greater income which suggests the presence of another adult earner in the home. The authors concluded if a breakdown in a personal relationship results in the loss of the additional adult in the household that may be enough for a poor family to become homeless. Thus, programs and services should emphasize reconstituting and rebuilding families. These studies all imply that a strong, social connection and/or family support are types of personal capacity in that they provide additional resources for families.

For those that have enough personal resources, they can survive a few months of unemployment or a week in the hospital without becoming homeless. “For those with no savings, no safety net of entitlements, and no credit cards, losing a few days wages or catching a severe cold can mean losing a job, going without adequate food, or getting evicted” (Rossi, 1989, p. 9). Hudson (1998) theorized that a social disintegration model could be used to explain homelessness. He speculated that economic, social and psychological interdependent relationships sustain people, and then empirically tested the idea that the breakups of these relationships were directly related to an experience of homelessness. While the data only partially supported his model, it nevertheless underscores the perceived power of personal resources on sustaining people.

4. **Personal psychology**

According to Deci and Ryan (2002), individuals must have the internal motivation and a sense of self to be self-determined. Unfortunately, not much of the homeless literature focuses on self-awareness or the psychological drive of the homeless subjects studied. Drive as a psychological construct can be seen in Balkin’s (1992) assessment of homeless men, as he
indicates that self-employment is a common activity. It can also be seen in Marin and Vacha’s (1994) exploration of self-help as a strategy of doubled-up homeless families. When Wright (1988) examined the characteristics of the homeless population at that time, he determined that only 5% of all homeless people would be considered undeserving – that is able to work, but they do not. This then indicates that it is something other than lack of motivation that prevents people from exiting homelessness.

5. **Environment/opportunities**

Along with personal characteristics, structural forces are seen as part of the cause of the homelessness problem. It is widely accepted that one of the strongest underlying structural forces of the current homeless crisis is the lack of affordable housing (Burt et al., 2001). To understand how environment constructs homelessness and impacts those who experience it, the availability of resources in the community will be examined. In addition, the environment is created by cultural norms and accepted standards of behavior. The intersection of those items and homelessness will also be explored.

a. **Opportunity and resources**

To be self-determined, resources in the environment must also match with the capacities of the individual. Mithaug (1996) refers to this as opportunity. Homeless individuals suffer from extreme poverty, leaving them unable to afford market rate housing. However, if subsidized housing was available in the community, that would then provide them with an opportunity – meaning that their capacities matched the resources in the environment.

To choose to leave homelessness, a person must have the opportunity. Data clearly indicate that subsidized housing is linked with a substantially lower rate of readmission to the shelter system (Wong, Culhane & Kuhn, 1997). Dolbeare (1992) discusses the affordability gap between what
people can afford to pay and the actual cost of housing. This could be seen as a capacity issue (people do not have enough money) or an environment issue (the community does not provide housing at a price people can afford). Regardless, the fact that capacity does not match environmental resources creates a lack of opportunity, and thus limits the person’s self-determination.

Having enough money to afford housing can be viewed as both a personal resource issue (capacity) or an environmental resource issue. The current structure of the welfare system in the United States excludes many (single men, numerous working poor) and those programs that do exist do not provide an adequate amount of funds to survive. Rossi (1989), Blank (1997), Page and Simmons (2000), Burt et al. (2001), and others outline how the lack of a safety net combined with rising housing costs has contributed to the homelessness problem. If funds were available in the environment, it might provide homeless individuals (who lack the capacity to provide the funds themselves) the opportunity to afford housing.

The environment’s helping resources do not seem to substantially increase self-determination. Legiecq, Anderson, and Koblinsky (1998) found that homeless and housed families did not differ in the amount of help they received from professional support persons, such as social workers, shelter staff, medical personnel, and preschool/day care teachers. This indicates that it is not just helping professionals that are needed for homeless families to exit homelessness. In addition, Mowbray and Bybee (1996) concluded in their study that homeless participants who had a mental illness did not need skill building activities as they already possess the necessary skills to live independently. “What they needed were opportunities to apply them through environmental changes” (p. 141). The public policy implication is that local service
providers should not just assess client characteristics and needs, but should place equal attention on environment and overall resources available to the clients.

To a certain extent, HUD policy does address the role of environment in ending homelessness. The whole purpose of the continuum of care was to “reorganize the categoric and fragmented housing, health, mental health, substance abuse and social welfare services available at the community level so that people’s needs could be addressed more holistically and effectively” (Dennis, Steadman & Cocozza, 2000). However, policy only provides HUD so much latitude in addressing environmental deficits. Most of the McKinney-Vento housing money has been spent on marginal ameliorations of the worst aspects of the housing situation; very little is invested in adding permanent units to the low-income housing supply (Wright, Rubin & Devine, 1998). As a society that celebrates individualism and self-sufficiency, it appears that current homeless policy encompasses that ideal. With HUD money targeted on individual change rather than structural change, the monies do not address the environmental aspects that could also bear upon the self-determination and housing status of a homeless person.

b. **Norms of behavior**

Both Bassuk (1993) and Passaro (1996) examined gender roles and individual behavior. Bassuk concluded that homeless and low-income mothers are trapped by lack of economic and social opportunities which are inequities built into our society’s structure, including specific gender roles in which women are responsible for child rearing. Passaro learned that homeless women use their understanding of gender stereotypes to their advantage when engaging in such activities as panhandling or talking to shelter staff. Passaro also found that both men and women are locked in gender roles. For homeless women to escape homelessness, they must use gender standards of behavior to their advantage. Men who do not
live up to society’s expectations (who choose not to be the traditional male) are unsympathetic in a society with gender standards. They are seen as not being independent or providing financially for their families. They are also seen as violent and dangerous. In both cases, it becomes difficult for men to obtain assistance from the community as they do not meet cultural expectations for proper male behavior.

6. **Making choices**

A key item within self-determination is the ability to make a choice and then act upon that choice. Self-determination theorists assert that a severely limited choice or a choice between terrible options are not really choices. Self-determination “is also about having meaningful choice that relate to one’s preferences or wants” (Leff, et al., 2003). That being said, there are researchers who argue that homeless people are not simply passive acceptors of their fate. They do make choices, however limited in their options. “Homelessness results from a complex set of circumstances that can require people to choose between shelter, food, and other basic needs” (Pardeck, 2005, p.58). Passaro (1996) also asserts that for many homeless women, homelessness is a choice they make to escape from violence. Jenks even speculates that changing the conditions of shelters or making the streets more hospitable would entice those that are living on their own to choose homelessness as a way to save money (rather than spending it on cheap hotels) (Jencks, 1994). Gilson and DePoy (2004) argue that choice, of among an undesirable set of options, is simply selection and that true choice includes the development of desired options. For them, homeless individuals are making selections, not choices.

In his assessment of the homeless persons living in a large urban area in the Northeast, Wagner (1993) discovers that those individuals are not disorganized, disaffiliated, nor disempowered. Wagner sees them as making active choices within an environmental context.
When given the options of institutionalization, foster care, family abuse, poor treatment from employers, state intrusion into one’s life, or homelessness, homelessness may be the preferred option. Wagner asserts that the choice of homelessness is not understandable to those with middle-class lifestyles and values because their realities and environmental conditions are significantly different than those of people who experience homelessness. “Major bureaucratic institutions … so oppress and control poor people that many self-respecting individuals choose to retain their dignity and live on the streets rather than submit to a ‘degradation ceremony’ in which the cost is their freedom and personal control” (Wagner, 1993, p. 99).

Ruddick (1992) also dismisses what she refers to as the inevitability and victimhood of the homeless populations and that all homeless individuals acquiesce in the situation. She argues that homeless persons can be seen making active choices; if homeless people were powerless or completely oppressed, they could not act out in certain ways, such as by making their presence known in public places or panhandling. Many homeless individuals are forced to make a choice that most Americans cannot imagine. That choice is usually between different kinds of homelessness: living in someone’s home, in a shelter, or on the streets (Jencks, 1994, p. 106).

According to Wright, Rubin, and Devine (1998), there are three views as to the cause of homelessness:

1. People choose to become homeless
2. Various defects of homeless individuals are more or less failings of diseases that require diagnosis and treatment
3. Structural conditions destine some people to become homeless

Theory one places all of the responsibility for their condition on the homeless people themselves, and by doing so gives them complete self-determination as choosers of their fate. Both the
second and third theories strip homeless people of any choice-making ability or independent action. In these instances, they are victims of circumstance and not active participants in their own lives. The most common theory of homelessness—that it is a combination of structural and personal factors—still removes much of the ability of individuals to be self-determined. “The lack of ability to sustain stable housing is a final visible result of the culmination of catastrophic insults rendering the individual incapable of any level of self-determination” (Green, 2005, p.9). In contrast, there are those who argue that homeless persons are not simply passive victims, but rather make choices within their circumstances. Self-determination theorists argue that choices within a severely limited spectrum are not real choices, and thus people who experience homelessness, regardless of how many choices they appear to make, are not self-determined.

Given the lack of knowledge regarding the connection between homelessness and self-determination, it cannot be assumed that homelessness itself indicates a lack of self-determination, or that having housing does indicate self-determination. It also cannot be assumed that any individual who is self-determined would choose to become housed. Self-determination in general and self-determination within housing may be separate concepts. In fact, it is unclear from the literature if an individual can be self-determined in certain areas of his life, but not in others. Self-determination may not be an either/or construct, but one that is manifested within certain circumstances or environments. There is no disagreement that homeless people make choices; what is unknown is if making those choices allows them to be self-determined within the experience of homelessness. There is not enough information currently to make those types of determinations.
7. **Conceptualization summary**

In summary, the initial conceptualization is comprised of four themes:

- **Freedom/autonomy**: The right to choose, free from constraints, to act according to one’s wishes and desires
- **Capacity**: Knowledge, skills, and abilities that allow one to make reasoned decisions and then implement those decisions
- **Personal psychology**: The self-awareness, intrinsic motivation, and psychological drive to make decisions for oneself
- **Environment**: Cultural expectations, external resources, opportunities to act, and human services organizations which influence how and when an individual is able to make decisions, and provide a context in which those decisions are evaluated

The four aspects of self-determination described above comprise a loose conceptual framework. Currently, no existing theory of self-determination incorporates all four elements. As no conceptualization incorporates all four items, the relationship and interaction, if any, of these four elements with each other is unknown. The lack of a comprehensive conceptualization means there is no visual representation of self-determination incorporating all four elements.

As this framework has not been empirically applied to the homeless population, nor has self-determination been specifically explored within the homeless persons, it is unknown if this framework is appropriate for the homeless population as a whole, or for homeless women specifically. At this time, there is no understanding of the concept of self-determination as it applies to homeless women. The relevance and applicability of the four elements for the framework are incorporated into the research questions and will be evaluated using the data.
provided by women who are homeless. Currently there is no rationale for choosing one element as a primary determinant to self-determination, nor is it known if these four items are exhaustive.

Final conceptualization is dependent upon the results of the study itself. The framework designed from the literature review is the starting point for the analysis. From there, we can determine which parts of the framework are applicable and which are not, and what additional elements should be included in a self-determination framework for it to be relevant and applicable to women experiencing homelessness. Their voices must be present in the design of a self-determination framework if it is to be applicable to them.
III. METHODOLOGY

A. **Research Design**

A qualitative approach for this study is appropriate given the lack of certainty regarding the conceptualization of self-determination and the lack of input from women experiencing homelessness into current understandings of what it means to be self-determined. This is not surprising, as “within both this public debate about poverty and the social science literature, the voices of the poor are noticeably absent” (Wagner, 1993, p. 3). While the majority of homeless literature is based upon describing the condition of homelessness and its relative causes, there is a growing body of literature that begins to describe the experience of homelessness (Belcher, 1994; Brandt-Meyer & Butler, 1999; Butler, 1994; Gerson, 2006; Liebow, 1993; Passaro, 1996; Rew, 2003; Wagner, 1993). The qualitative studies that do focus on the experience of the homeless people “analyze the strengths of the homeless and very poor, and emphasize that they have very clear ideas as to what they want, what they need, and what will work for them” (Brandt-Meyer & Butler, 1999, pp. 54). Qualitative research provides the forum through which clients’ subjective points of view, as well as social forces affecting functioning and opportunity for clients, can be described (Gilgun, 2001). A qualitative approach is appropriate for this study because it allows knowledge to be constructed (Mason, 2002) and “it allows those who are marginalized to find their voice” (Reinharz, 1992).

Qualitative methodology utilizes an inductive approach to studying the phenomenon, focusing “on the complex social and personal forces that shape individual lives” (Gilgun, 2001, p. 346). Generic inductive procedures inform the plan of research for this study. Coding data, making comparisons, memoing, linking previous research and theory to emerging findings, and the gradual emergence of themes and patterns are typical of any inductive research (Bogdan &
Bilken, 1998; Gilgun, 2001). Theoretical sampling and constant comparison are additional qualitative strategies that can assist data collection and analysis.

The concept of self-determination is not completely undeveloped; however, the conceptual framework is only loosely developed and it is unknown if the framework is appropriate for the population of interest. To facilitate the identification of concepts and/or the emergence of theory, the researcher must enter the field and “be open to what the informants are saying” (Gilgun, 2001, p. 352). During the course of this study, the pre-existing loose conceptual framework of self-determination could have been disregarded as new concepts and theories emerge, it could have been used to help interpret the data gathered, or it could have been used to form the foundation of the findings. However the framework is not the focus of the study, but rather a tool to help understand how self-determination is understood by homeless women, and how their experiences of homeless, decision-making, and program participation influence their perceptions and practice of self-determination. To that end, this study used in-depth, semi-structured interviews to gather information. For each respondent, there were between one and two interviews each: An initial interview and a member check interview. Interviews were conducted within a five-month time period.

B. Sampling

Women who participated in the study were more than simply research subjects or study participants. They were partners in the work. The research could not have taken place without their knowledge, perceptions, and understanding of who they are and where they have been. While they were only involved in the actual research portion for a few hours, the months and years of their homeless experience laid the foundation for the study.
A purposive convenience sample of women was recruited from a transitional housing program funded by HUD. I chose a transitional housing program because, unlike some other HUD funded housing programs, it does not require women to have a HUD-defined disability (such as mental illness, history of substance abuse, developmental disability or chronic medical condition). Limiting the sample in that way would have decreased the heterogeneity of the sample based upon a characteristic whose effect on the concept under investigation is unknown at this time. In addition, in a transitional housing program, women are permitted to participate in the program for up to 24 months (as opposed to emergency shelters with 90-day limits), potentially decreasing the likelihood that women would exit the program and be unreachable for follow-up interviews during the course of the study. Women were chosen as the study partners because homeless women who are mothers are more likely to have their children with them than are homeless men (Urban Institute, 2001). The presence of children in and of itself may be an element that shapes self-determination. Additionally, the presence of children also increases the availability of social resources for women, which could be influential. While it is possible that neither the presence of children nor the availability of social resources could be of any consequence in the practice of self-determination, the current literature regarding self-determination indicates that those areas should at least be explored. Finally, as described earlier, poor and homeless women are especially vulnerable to systemic cultural barriers in the United States. Focusing on the experience of homeless women gives them a voice not often heard (either in research or in public policy) and provides a forum for them to be active participants in the description of such a pervasive cultural phenomenon.

Those potentially influential factors were used to guide the partner selection process. While the sample was a convenience sample in the sense that it is not a random sample and all
study partners were recruited from only one agency, there were criteria for sample inclusion, making the sample purposive as well. Due to the many potential factors that could bear upon the practice and perception of self-determination, certain characteristics helped guide the partner selection process in order to be as inclusive as possible. These characteristics included: presence of children, a mental illness, a substance abuse history, a criminal history, race, age, and the number of times a woman had been homeless. It was intended that at approximately halfway through the interview process, the characteristics of those already interviewed would be reviewed, along with information that had been gathered from the interview. If it appeared that certain characteristics were appearing more frequently than others, additional potential partners would have been screened with the intent of including those who have the characteristics not yet represented in the sample. The first round of partner recruitment resulted in 20 interviews, and at that time the characteristics were evaluated. Underrepresented in the sample were women younger than the age of 35 (only 3 of the 20 women). It was requested that case managers distribute the study recruitment flyer once again to women younger than the age of 35. Only one woman with that characteristic responded to the second request. Further requests were not made as case managers reported that they had presented the study information to all clients under the age of 35 and it appeared that they simply were not interested in participating.

The estimated sampling size was up to 30 individuals, with a final number of 21. If a greater number of women had been needed to ensure theoretical saturation (meaning that no new properties, dimensions, or relationships emerge during data analysis), the number of partners would have been increased (Strauss & Corbin, 1998). That was unnecessary as theoretical saturation was reached. Within a design incorporating theoretical sampling, a researcher typically conducts 20 to 30 interviews to saturate research categories (Creswell, 1998; Morse,
If additional informants had been needed, theoretical sampling indicated that successive cases would be chosen “on the basis of the likelihood that they will advance the development of findings” (Gilgun, 1994, pp. 117). Due to the underrepresentation of younger women, recruitment occurred for that population specifically even after theoretical saturation had been reached in order to have a more representative sample.

All study partners were drawn from a pre-determined agency serving homeless women and children. This agency is located in a major urban area and serves homeless single women and women with children in its scattered site permanent supportive housing programs. The agency serves more than 200 households each year, and has been providing supportive services for almost 30 years. This agency operates two HUD transitional housing programs, one for single women and one for women with children. The agency serves women from throughout the city. Overall, 85% of the clients served are African-American, almost 60% have a history of addiction, and between 40 and 50% have a mental illness. Women served range in age from 18 to late 60s. Each household lives in its own apartment and contributes 30% of the household income towards rent with the agency subsidizing the rest of the unit rental cost. Each household receives supportive services provided by the agency, with the anticipated outcome that the household will have become self-sufficient and will have obtained independent permanent housing when it exits the program.

Subject demographics closely mirrored that within the agency itself. A total of 21 women were included; 13 were participants in a program for individual women and nine were participants in a program for women with children. Of the study partners, 16 identified as African-American, two as Caucasian, one as Asian-American, one as Latina and one as other. Nine had substance abuse histories, and five had a mental illness. Five women had been
convicted of a crime and two additional women had been arrested (although other women who had not been arrested described illegal acts connected to drug use and prostitution). Of the 21 women interviewed, nine women had children in their direct care, four did not have children, and eight had children who were not in their direct care (either living with someone else or the children were adults). The majority of women served by the agency also tend to be older than age 40, which is represented in the sample demographics as well. Women had been homeless an average of 2.7 times, with four women indicating that they had been homeless more than five times, and the homeless experience averaged six years, with a range of four months to 25 years. Appendix B shows a breakdown of demographic information for each study participant.

Participation in the study was voluntary and compensation of a $15 gift card was provided. Recruitment occurred two ways. The researcher made a brief presentation at a program meeting to explain the study to women directly, and case managers provided a flyer with information regarding the study to program participants. To help them explain the study accurately, case managers received a short description of the study which they used as a script and read directly to women. In addition, case managers were asked not to provide information to women that they felt were incapable of providing informed consent. That included anyone who may be actively using drugs or alcohol, has an active mental illness and is currently unstable (e.g. not medication compliant, actively hallucinating), or developmentally unable to understand the risks of participation in this type of research study. As the program from which women were recruited is time-limited and focused on education and employment, the general characteristics of program participants made it very unlikely that any potential study partners would be unable to give informed consent.
Women who expressed interest were given more detailed information about the study and what participation would entail by the researcher directly. It was also made clear to women and staff that participation in the study was voluntary, all information was confidential, and choosing to or not to participate in the study would not affect a woman’s standing in the program. Women received a $15 gift card for the initial interview and would have received a $10 gift card for the second interview, had one been necessary. At the member check session, there was a raffle for a $25 gift card, a $15 gift card, and a $4 bus pass.

C. Data Collection

Data was collected through semi-structured, topical individual interviews with each study partner (Glesne, 1999). The researcher (who was the sole interviewer) conducted the interviews using an interview guide (see Appendix A). As accessing the point of view of informants and their experience is often a part of inductive research, open-end interviewing was appropriate as it solicits the points of view of participants (Gilgun, 1994). Individual interviews were chosen as the data collection method (as opposed to observation or focus groups) because of the focus on individual experiences and personal choices. Those could not have been ascertained through observation, and women may not have felt comfortable divulging personal information in a group setting. Interviews were recorded digitally when consent was given to do so. Of the 21 study partners, 17 gave permission to record. The interviewer also took notes during the interviews and a contact sheet was completed immediately following the interview. The contact sheet contained observations regarding the interview that were not directly related to what the respondent said (such as respondent mannerisms or non-verbal behavior). Basic demographic information of each woman was collected for sample summary statistics. The interview guide, including contact sheet, is included in Appendix A.
As part of a semi-structured interview, the interview guide was not a rigid script of questions, but rather a starting point for discussion. “Most qualitative interviews are designed to have a fluid and flexible structure and to allow the researcher and interviewee(s) to develop unexpected themes” (Mason, 2002, p. 62). The interview guide contained eight general questions, each with a list of potential follow-up questions. For example, the guide began with a “grand tour” question, providing women with the opportunity to talk about their experience of homelessness. The follow-up questions then asked for more specifics regarding items that were mentioned in response to the general question to help the respondent delve more deeply into specific areas. Follow-up questions were asked when the partner did not address the topic during her answer to the more broad questions. This degree of instrumentation helps “prevent the interviewer from collecting superfluous or irrelevant information and avoids overlooking important questions” (Goodman, 2001, p. 312). Questions were intended to elicit responses regarding how each woman makes decisions, what influences her decision-making, what resources she has available once she has made a decision, and her available options.

Each woman chose her individual interview location. Options included the administrative offices of the program, her own home, or a third location of her choosing (like a coffee house or park). Thirteen women chose the administrative offices and eight women chose their home. No respondents selected a third location as the interview site. As the program is a scattered site program, women resided in apartment units throughout the community. The interviewer then met the woman at her unit and conducted the interview in the privacy of the woman’s home. Interviews lasted from 46 minutes to an hour and a half, with most taking about one hour.
Due to the limited program size of the agency participating in the study, the interview guide was not piloted. Early on during the course of the interviews, the researcher realized that two potential areas of exploration did not have corresponding questions on the interview guide, so she added those questions for subsequent interviews. Those questions included asking women if they currently viewed themselves as homeless, and if they had a specific plan to accomplish their goals. Sixteen women responded to the additional questions.

Notes taken during the interview were typed within 24 hours of the interview. All recorded interviews were transcribed by the researcher. During the data collection process, constant memoing took place, allowing the researcher to retain ideas concerning coding and analysis (Strauss & Corbin, 1998). Once initial interviews were complete, follow-up interviews could have been conducted if necessary. The constant memoing process could have revealed potential areas of analysis that were not explored fully in the interviews; follow-up interviews would have provided the opportunity to explore those areas. The criterion for deciding who would participate in a follow-up interview would have depended upon what additional areas of interest needed to be explored. As described in the analysis section, each interview was coded. If a particular code (that represented an area of apparent interest not addressed in the interview guide) was absent from a respondent’s coded interview transcript, than that individual could have been selected for a second interview. This determination took place near the end of the interview process to ensure that there had been ample opportunity to identify themes unanticipated in early interviews. As it did not appear that there were areas of analysis that were not explored during initial interviews, follow-up interviews were not conducted.

Once the point is reached where new interviews or new pieces of data do not add additional codes, identify additional patterns, or add substantial depth to existing information,
then theoretical saturation is reached and interviews can be completed. This occurred after the eighteenth interview, as no new information was gathered. This was apparent as the analysis that occurred immediately following the interview did not produce new data codes. At that time, interviews 19 and 20 had already been scheduled and were completed in order to gather more data and ensure that no new information was forthcoming. Had theoretical saturation not been reached, steps would have been taken to include additional participants in the research project. The only additional interview that was scheduled after theoretical saturation was reached was that of the twenty-first study partner, who was recruited as part of the theoretical sampling process to include women younger than 35 years of age. Once interviews were concluded and initial analysis was complete, a member check session took place to allow all partners in the research the opportunity to provide feedback regarding initial findings from the interviews. A letter was mailed to all study participants and a follow-up phone call was made by the researcher 24 hours prior to the member check. Of the original 21 partners, four attended the member feedback session which took place in the conference room of the participating agency. Women were given an outline of the findings and discussed various points of analysis. As the researcher, I focused the conversation on points of the analysis that I had found surprising or contradictory in nature in order to ensure that I had understood their points clearly. The feedback they gave provided clarification of points from the initial interviews and confirmed initial conclusions of the analysis. I found the women to be engaged in the process, genuine in their answers and interested in the findings. They also appeared to be very comfortable discussing the analysis with each other and in agreement regarding the interpretation of various themes. How information obtained through the member check session was incorporated into the findings can be found in the results section, pages 85, 101, 105, and 152.
Several commonly utilized strategies used to enhance the rigor of qualitative studies were employed to address threats to trustworthiness and credibility. One involved prolonged engagement. By conducting lengthier interviews, the likelihood of reactivity connected to the researcher in the field and respondent bias is thought to be lessened (Rubin, 2000). Interviews were between a 45 minutes to an hour and a half in length. Miles and Huberman (1994) also suggest interviewing in a social environment, such as the respondent’s home, in order reduce the threat and exoticism of the researcher and thereby decreasing the potential researcher effect. Women were given the option of where they would like the interview to take place. Thirteen women were interviewed at the program’s administrative offices; eight women were interviewed in their homes. Interviews conducted at the office were done in private rooms. Triangulation, or the use of multiple methods and data sources, can increase the trustworthiness of the data. For a qualitative inductive study, Gilgun (1992) suggests that existing literature can be used as a second source of data and, if appropriate, be able to cross-validate findings and inform the development of a conceptual framework. As part of this study, the definition of self-determination as described by the agency from which respondents are drawn was included in the triangulation process. How the agency defines self-determination was included as a comparison to how women defined self-determination. The agency definition was obtained through its Annual Progress Report (APR) that it submits to HUD annually. Within the APR, HUD requires that each agency define how it is measuring self-determination.

Member checks, asking respondents to read and critique the conclusions of the researcher, is an additional strategy that was used in this study (Fortune & Reid, 1999). This helps to identify areas of error in the analysis. Member checks occur after data analysis is completed and initial conclusions have been made. All study partners were invited to attend a
group session, where they heard the researcher present the findings and then were able to give their reactions and opinions regarding the findings. This technique allowed those women from whom the information was drawn and about whom the conclusions were made to confirm the findings and provide areas of insight into the data that perhaps the researcher overlooked.

Glesne (1999) provides three reasons for conducting member checks. They include:

1. Verify that the researcher has reflected the view of the respondents
2. Inform the researcher of sections that could be problematic for either personal or political reasons
3. Help the researcher identify new ideas and interpretations

All of the above items contribute to the trustworthiness of the overall data analysis.

Examination of outliers can also help increase the trustworthiness of the data. Identifying outliers and searching for additional cases similar to the outlier can assist the process of theoretical saturation and ensure that representativeness of the sample has established (Miles & Huberman, 1994). Outliers are those cases that provide extreme responses in comparison to others or evidence that is contrary to the norm. Negative case analysis was also conducted. By identifying cases that do not fit interpretations, the trustworthiness of the research is increased because it has been demonstrated that all data has been included and considered during the analysis process (Rubin, 2000). Negative evidence is found when the researcher specifically looks at items that disprove the conclusions; outliers are extreme cases or contrary evidence found during the regular data analysis process. Outliers and negative evidence were not found in interviews when examining their totality; but rather within individual codes and areas of analysis. No one respondent was an outlier or provided negative evidence, but specific answers were. The researcher was also aware that not all information from respondents is trustworthy
and at times evidence may need to “weighed” regarding its accuracy and utility to the study (Franklin & Ballan, 2001; Miles & Huberman, 1994). Given the broad nature of the interview, the willingness of respondents to answer follow-up questions, and the emotion expressed during the interviews, it did not appear to the researcher that women were supplying intentionally fraudulent responses.

Leaving an audit trail of well-organized raw data stripped of identifiers allows others to use the data and see if the findings are reproducible and verified (Franklin & Ballan, 2001). To ensure that the larger concepts were applicable to the stories of the individual respondents, conclusions were compared to raw data in order to validate the findings. “Theory that is grounded in data should be recognizable by participants” (Strauss & Corbin, 1998, p. 161). The use of Atlas/ti 5.2, a computer software program, allowed for consistent data handling. The use of a clearly described methodology for data analysis contributes to the trustworthiness of the data and its conclusions (Franklin & Ballan, 2001). The specificity of data analysis techniques provides, in itself, a type of rigorous approach (Gilgun, 1994).

D. **Data Analysis**

The researcher completed a general thematic induction analysis incorporating various qualitative analysis techniques. One of the techniques was the simultaneous nature of data collection and data analysis. In order to begin to analyze data as it is collected, interviews were transcribed as they occurred. For completeness of the interviews, recordings were transcribed verbatim by the researcher into a Microsoft Word document. Each transcript was then checked against the original recording to ensure accuracy and completeness. All transcripts were stripped of identifiers. Once transcription occurred, the transcripts were assigned to a hermeneutic unit within the qualitative data management and analysis program, Atlas/ti 5.2. Once each transcript
was formatted for use within the Atlas/ti software, initial coding began. A list of Atlas Codes can be found in Appendix C.

Overall coding proceeded in the following order:

- **Initial coding:** The first stage of coding process, it involved assigning units of meaning to the information compiled. Coding allowed the researcher to differentiate between pieces of data. “Codes usually are attached to ‘chunks’ of varying size—words, phrases, sentences or whole paragraphs” (Miles & Huberman, 1994, p.56). There are two main types of initial codes:
  - Descriptive codes: A descriptive code simply summarized the content of the coded segment. This was a more surface level of analysis and occurred at the beginning of the analysis process.
  - Interpretive: Interpretive coding began to analyze the underlying meaning of the coded text. This occurred after descriptive codes have been assigned; interpretive coding began a deeper level of data analysis. These codes are more inferential in nature and begin to develop understanding of the data, rather than just describing the data. Interpretive codes began to appear after several interviews were conducted and the researcher could begin to identify recurring themes throughout the interviews.

- **Pattern coding:** This coding process grouped the initial codes into sets, themes, or constructs. “Pattern codes are explanatory or inferential codes, ones that identify an emergent theme, configuration, or explanation” (Miles & Huberman, 1994, p. 69).

Pattern coding can also help with data collection, as it helps to bring common themes and
processes into focus. Once initial coding was complete, families of codes were developed, grouping patterns and similar constructs into singular overarching concepts.

- Code revision: Codes were not stagnant. As analysis progressed, it was expected that codes developed early in the analysis process could become obsolete and others could be divided into smaller sub-codes. Additional codes were identified later in the analysis process as well. During this analysis process, there were initially too many codes that overlapped in their definition. Similar codes were combined; many were renamed to be more reflective of what they actually represented. In addition, multiple coders were used in order to ensure code clarity and usage. Two students in a social work school’s MSW program read the transcripts and coded them. The students and the researcher then compared coding. Differences in coding were discussed, and at the end of the process there was agreement on the codes and their definitions.

As the only researcher and interviewer, I spent a great deal of time on the coding process itself. Having coded four transcripts, I realized that the system I was using to code was inefficient and would not be effective as more transcripts were coded. At that time, I created a list of all codes that had already been used and began defining codes and grouping codes together that were similar. That allowed me to identify where duplication occurred and identify codes that overlapped in definition. Doing this early in the process was extremely helpful as the number of codes themselves was becoming overwhelming to me as a coder. Having too many codes that were similar in definition was also diminishing the utility of any given code as it was used too infrequently to provide much meaning. I kept all of my notes regarding the coding process to remind myself of what the first round of codes had been as well as how codes were condensed or changed.
Each of the four transcripts that had already been coded was then re-coded using the new list. This list was not stagnant, however. As I developed new codes, I first double-checked the list of previous codes to determine if a code had been eliminated or condensed earlier and needed to be returned to use. It also served to remind me how the codes were developing over time. After additional transcripts were read and new codes developed, I re-read already coded transcripts to determine if the new codes were applicable to those as well. This was key once I began noticing patterns in the data. Information pertaining to a pattern may not have been immediately identified in an early interview, but nevertheless could have been there. Each transcript was read multiple times to ensure a full understanding of the text. Once coding was complete, codes were grouped into families within the Atlas Ti system. These families represented larger themes and helped to identify how pieces of data were woven together within the larger context of homelessness and self-determination.

As part of their data analysis process, Strauss and Corbin (1998) recommend using a constant comparison method. During constant comparison, each new case is compared to previous material for the purpose of developing new insights and patterns. As data analysis occurs simultaneously as data collection, constant comparison is also helpful in identifying areas of further exploration and ensuring that theoretical saturation has been reached. Using the constant comparison method allowed for identification of a recurring theme that was not a specific question in the interview guide. Early on in the process, it was identified that many women were discussing the idea of no longer considering themselves to be homeless and it appeared to be developing as a pattern. Moving forward, women were asked specifically if they considered themselves to be homeless in order to ensure that the concept was fully explored in each interview. Constant comparison was also helpful in the identification of codes and ensured
that codes were used consistently between interviews. The use of the constant comparison method was a key reason why additional interviews were not necessary. For those themes that became apparent during the interview process but were not included in the interview guide, the interviewer ensured that those topics were addressed during future interviews. This then prevented those themes from being absent in subsequent interviews. If that had not been done and those topics had not been discussed during later interviews, then second interviews may have been needed for some respondents.

During the coding process, constant memoing also took place. Memos are ideas generated by the researcher, written to herself, regarding data codes, patterns, and concepts. They can be reflective or theoretical in nature. This part of the analysis was very useful in terms of developing initial conceptualizations and encouraging the researcher to continually look at the data in new ways (Charmaz, 2003). Memos included not just ideas for analysis, but also attempts at creating graphic representations of the data to assist in visualizing the analysis. Data analysis focused on the development, refinement, and interrelation of concepts, focusing on the processes, conditions, and consequences of the concepts (Charmaz, 2003; Gilgun, 2001). As it was appropriate, I constructed visual representations of the conceptualization to help illustrate my understanding of self-determination. Multiple visual representations of the data were constructed, all of which were modified in some way during the analysis process. I achieved a greater understanding of the relationships between the various aspects of self-determination by continually moving the data around and re-crafting the visualizations. As my understanding of the data changed, so did the visual representations.

During both the data collection and data analysis phases, I wrote memos. These memos not only served to capture ideas regarding future areas of data collection and analysis, but
allowed me to note how my own personal ideas of self-determination and its relation to homeless women changed during the research process. I entered the study having worked with the population of interest for more than 10 years. While this experience was beneficial in terms of developing rapport with interview subjects and understanding the conditions of homelessness in Chicago, it could have potentially introduced bias into the study. To ensure that this potential bias was not detrimentally influential, I wrote memos in order to capture my own thoughts and ideas about self-determination, homeless women, and the research process. By acknowledging my own thoughts and biases, I was able to identify the impressions that those thoughts and biases may be having on my interview techniques and data analysis focus.

I took on the position of a learner during the data collection process. This allows the interviewee to be the expert, or teacher, regarding the matter at hand. I viewed the women as partners in the study as they are experts about their own lives; their descriptions of their realities were not doubted. By taking the stance that the interviewee has the knowledge, I was working to remove my preconceived ideas of self-determination and the experience of homelessness from the research process and ensure that the data analysis reflects the views of the subjects. At times, I had to ask follow-up questions regarding terminology or a service used by the respondent because I was unaware of what it was or what it meant. By changing the overall power dynamic between researcher and subject, I was also hoping to decrease any intimidation that the interviewee may have felt, increase the overall comfort level of the interview, and increase the trustworthiness of the data. During the interviews, I also did not probe too deeply or push too forcefully for answers regarding inconsistencies in life stories or contradictions between statements and actions. I would ask for clarification, and if I felt that the respondent was becoming resistant or tense, I would move on. My role was not to be a case manager or social
worker. I accepted what women said as the truth of their lives and their reality. My role was not to question or change how they lived their lives, but understand the relationship between their lives and self-determination.
IV. RESULTS

A. **Self-Determination Definition**

Interviews were conducted in order to gain an understanding of the relevance and applicability of the concept of self-determination by homeless women. While the theoretical definitions of self-determination are varied and there are potentially many layers to the concept, respondents answered concisely and provided definitions similar to each other. Women were first asked if they knew that self-determination was an established outcome of the program. Eleven women answered affirmatively, nine either did not know or were non-committal in their response, and one woman replied, “Oh please, I already have that.” The follow-up question requested that they define the term self-determination. The definitions themselves are categorized in two primary ways: making decisions and then achieving them, and being self-sufficient. Within those categorizations is an underlying and more subtle theme of personal responsibility, which will also be explored.

The first common response when asked for the definition of self-determination included a reference to independence and/or self-sufficiency. Independence and self-sufficiency are used interchangeably by women throughout their responses and are therefore treated as a single concept for analysis purposes. Independence (not relying on anyone else for aid and support) and self-sufficiency (able to provide for one’s self) are repeated throughout the interviews as women describe their goals and their own perceptions of self-determination. The following are definitions of self-determination that include the concepts of independence and self-sufficiency:

- To be totally, like, self-reliant and dependent upon yourself; to be able to be totally responsible for yourself. (Bernice)
• Doin’ something for myself that I am determined to do… Yeah, that and just being self-sufficient, like I am. (Elnora)

• Leaning to be independent; learning to take care of and support yourself. (Janel)

• Being self-sufficient. It’s being … dependable, dependable that’s what I think it means. Being self-sufficient. (LaToya)

• To be determined to live on your own merits. (Nera)

• Being determined to do everything yourself, without the help of others. (Quanda)

The second definition commonly referred to by women is very similar to the overarching conceptualization used as the underlying definition for this study. Eleven women specifically cited making decisions and then following through on those decisions, although not in that specific language. Responses included:

• You got to move out and make an effort for yourself. Succeed is self-determination. And, you got to put some leg work for your dreams. (Anike)

• Self-determination means making decisions on my own. Havin’ my own opinion. Just doin’ the things I do in everyday life. It’s like … the goals that I make. Self-determination—I’m determined to make those goals. I write down on a piece of paper, I’m following the list, this is what I want to do by the year 2009. This is what I want to do, this is where I want to be at, this is where I want to live at. That’s self-determination. (Chanise)

• It means to look at yourself and to know that you can do whatever you set your mind to, but you have to know yourself and love yourself. (Diane)

• Basically … meeting your goals … or be determined to do something. (Harriet)
• Self-determination was actually reaching and achieving your goals. (Janel)
• I can make good decisions today. (Mary)
• Having your life take shape with your own hands; mold it yourself. (Pamela)
• Setting goals for myself and being determined to do them. There might be some set-backs but I won’t get stuck there. Just keep on striving for things that’s important to me. (Ruby)
• The determination to get what I want. The goals—what it means to me. Fulfilling those goals that I have. (Teone)
• Self-determination. [pause] Reasoning within one’s self what they want to do and then going out to achieve that or at least trying to achieve it. (Vanessa)
• Self-determination … to get it done. To strive for what you want because you’re determined to do it… To be determined to get all my wants and needs, everything. (Yolanda)

Personal responsibility, while evident in the initial definitions of self-determination, is not as prevalent of a theme throughout the interviews as the other two definitions.

• It means that, you know what, snap out of it and be responsible for you and your life and yes, you’re gonna make mistakes, but everybody does, get over it, and just start being responsible for your own life. Stop waiting for someone to come along and make a decision for you. (Anna)
• To be totally, like, self-reliant and dependent upon yourself to be able to be totally responsible for yourself. (Bernice)
• When I need to get up and do something, to do it and not procrastinate and keep myself on the road. (Martina)

• To be determined to live on your own merits. (Nera)

The idea of personal responsibility is not repeated as frequently as independence or decision-making, but does appear to be a strong influence of decision-making, and will be explored in the Primary Influences section of the analysis.

Three women were unable or unwilling to define self-determination themselves. Only one woman was both unaware of the programmatic outcome and unwilling to define the concept in her own words. With the number of women who did not provide a definition of self-determination and the number women who did not know that it was programmatic outcome, it is reasonable to infer that the program model or delivery system itself was not overly influential in women’s understanding of this concept.

A common thread throughout these definitions is the idea that self-determination is something that is affected only by the women themselves. The definitions do not mention outside forces or anything other than the women’s own actions that would influence the practice of self-determination. This is clear in a response by one woman who was asked if she was self-determined. “I am self-determined. I have to be because it’s up to me if it has to be.” This internal view will be repeated throughout the results section and is the foundation for how women responded to the interview questions as a whole. As the internal view of self-determination is strongly evident, the lack of a community connection or “critical consciousness” as described by Freire (1973) is also evident. Women reflect upon their experiences in personal terms, but do not connect their lives and everyday experiences to “events and conditions in the social and political environment” (Kemp & Scanlon, 2002, p. 241). On the whole, women do
not identify their current situation or the barriers they face as part of a larger oppressive environment. The internal view of self-determination manifests itself in how women make decisions and what they perceive to be forces on them, their lives, and their decision-making.

The primary definitions that women provided (independence/self-sufficiency and making decisions and then achieving them) will each be described in detail in terms of what the concept means to women. Each will be explored using examples that women give about their own lives. Comparisons of the definitions given and how women actually live their lives will provide insight into both their perception and their actual practice of self-determination.

B. **Perceptions of Self-Determination**

1. **Highly associated with independence and self-sufficiency**

   Throughout the interviews women frequently referred to the concepts of independence and self-sufficiency. While the interview guide did not ask specific questions regarding how independent or self-sufficient a woman was, women referred to these concepts as goals for themselves (becoming more independent and self-sufficient), to demonstrate that they are no longer homeless (living independently and providing for themselves), and to provide evidence that they are self-determined (making decisions without the help of others).

   Being responsible for oneself is a sign of independence. For Theresa, she said that she was self-determined because she is learning to be independent, learning to take care of and support herself, and learning to strive for better things. “I hate depending upon other people; I like to do it on my own.” This sentiment was echoed by Nera.

   I do know that I’m responsible of making my life the way I want it. Nobody can do that. So if I’m making it that way I want it, then … yes, yes, because I have to be comfortable with my decisions that I made today, because the consequences are from my actions, everything I do. That’s important for me to keep up front, that I am truly responsible for my decisions.
Janel feels similarly. She described self-determination both as reaching your goals, but also as learning to be independent and to take care of and support yourself.

For Quanda, self-determination is intertwined with being independent. When asked what self-determination meant to her, she responded, “Being determined to do everything by yourself, without the help of others. And I’m getting there. It’s, it’s, like I said I really don’t go for help unless I’m at my boiling point and I really, really need it. Most of the time, I will suffer until it’s like a dire need to ask someone.” At one point during the interview she talked about what areas of her life she still needs to address.

Actually being able to do things on my own, without always having to—if something happened and not always having to call somebody and tell them what’s happening, asking them what should I do about it. Actually, I just need to learn how to be my own person without someone else telling me how to do it.

She has a goal of becoming more independent.

Susan views herself as self-determined because “I’m just determined not to go back. I’m determined not to go back to where I came from. My goal is to move forward, to go forward. Not to take any steps back.” She stated that she is able to make her own decisions (“Oh yeah. I can do that.”) and that making her own decisions involves doing it independently.

When everything falls down, it’s just me. I don’t have my mom that I can go and run and stay with, like I said that’s down there in Kentucky. I’m not trying to go down there. So it’s pretty much me. When everything goes bad, it’s all me. I don’t have nobody that I can say well, if I get put out, I’m gonna go stay with Tasha or Nicky or another thing. No.

Independence in decision-making was repeated by other women. Anna said, “I think it has to be trial and error, because if I were to get guidance, it would again be me, depending upon someone to get me through life.” As it is for others, Harriet also makes her own decisions.

Interviewer: When you make plans or decisions, does anyone help you?
Harriet: No. No.

I: You’re pretty independent.

H: Yeah, very.

I: Do you have a support network or anyone like that?

H: My family, my church family—they’re very supportive. And, the women from—the counselors here.

I: So, do you ever go to them for advice, or guidance when you’re thinking about doing something?

H: Not really.

Even while living in shelters or the street, women valued independence. Even when she was living in an abandoned building and accessing soup kitchens, Nera did not ask for help.

I could still go by my mom’s or at this time my children are grown, I could still go by their houses and they would come and see me and be like, ’Mom, you all right? Do you need something? You know you don’t have to do this? Whenever you want to come you’re welcome in either of our homes.’ And I’m like, I’m cool, I’m doing this because I never ran to my parents or my family for anything.

At one point Quanda moved to the North Side of the City from the South Side in order to access services. She initially was resistant, but is now pleased she did so because she feels it increased her independence.

I’m kinda glad that I did move up here, ’cause the South Side was my comfort zone. That was—like I said—that’s where everything was at and maybe I needed to get away to learn to do things on my own without actually having that help there all the time. For most people when they know they always got someone there, they always just seem to latch onto that person whereas I have to actually only call on that person if I really, really need them. That would be like my last resort. But now, I see myself doing more stuff on my own by me being so far away instead of always depending upon those people that I always depended on.

For Pamela, being “free and independent” were always her dreams. “I always wanted to be independent.”
2. **Independence means “on my own”**

Independence means doing everything on her own. For the respondents, the notion of independence was not discussed within the context of interdependence or even within a relationship with another person. When asked if anyone or anything stands in their way of living the life they want to, the majority of women responded with a resounding “no.”

According to Martina, “Nobody stops me from living the way I want to. That’s like a no in my life. I don’t ever–how can I say–my life is mine, and I have a right to decide what is best for myself and that’s real important to me because I never exercised that before.” Teone also asserts that no one gets in the way of her living her life.

**Teone:** Now I’m a person that fulfills my own goals, yes. Now I’m a person that don’t let nothing get in my way. Yeah, people, ’cause that was a bad thing for me, letting people get in my way, but now I don’t. So yeah.

**Interviewer:** Could you tell me a little bit more about how people got in your way before?

**T:** Letting them make decisions for me. Being their follower. Not being their leader and standing up for myself.

**I:** …and this was mostly when you were using?

**T:** This is when I was using.

**I:** So, do you think having stopped using has allowed you to become less of a follower?

**T:** Yes, yes, ’cause I don’t listen to nobody that has that negativeness.

A few respondents did discuss support systems, but even those currently in relationships did not indicate that those relationships affected levels of independence. Bernice did mention that she thinks about her children (ages 17 and 23) when she makes decisions “because I worry about them and what they think of me” but ultimately they do not control her decision-making.
...like I was taking my brother, Anthony, around and my brother, Anthony, is one who was using and my son’s calling me on my cell phone all while I was gone. He was like, ‘Mom, what’s up? What you doing? Are you okay?’ I said, ‘Michael, don’t worry, I’m not doing that stuff anymore.’ I said, ‘My life is too good; I feel too good about myself to use or get high or drink or anything.’ I said, ‘So know what, it really makes me feel good that you are concerned like that, however, I’m okay.’ So, but, my decisions sometimes get ... I think about my kids when I make decisions ... but ultimately, it has to be about me from this point on because the past is the past and I’m still going to try to do what I can to be a great mom to them, but I’m not going to let them dictate.

While she is clear on the role of her children in her life, Bernice is less clear on the influence of her partner.

Bernice: And, then too, my girlfriend is a great support system and then she’s been in the military like 21 years and so she has a really good ... we kind ... we compliment each other a lot.

Interviewer: How so?

B: Because it’s like ... she’s enhanced my life to the point where she give me that... ‘Oh, everything is going to be okay.’ She gives me that support and continues to let me know and empower me to the point where ... she just continues to let me know that everything is going to be okay ... give me that push and support I need.

At the time of the interview, Bernice was planning on moving to Kentucky to be with her partner, who was moving for employment purposes. However, while she discusses her partner as a source of support, Bernice is clear that she makes decisions independently and not necessarily within the context of the relationship itself. When asked who helps her make decisions, she responded:

I make decisions independently, but I do ask for some help sometimes. I will go to the directors [of the program], or I’ll talk to my sponsor. I go to the director a lot of [transitional shelter]. And, my case manager here. I run some decisions past them quite often.

She did not mention her current partner as part of her decision-making process.
Some women did mention that it would be helpful to have another person to rely on, but this was specifically mentioned within a financial context. Theresa said that you “can’t count on anybody else.” She went on to add that it’s “always going to be money. If no husband to help buy the house–if one person loses job it’s okay–when you’re by yourself and you lose your job, then it’s harder to stay in the house–who pays?” Elnora described herself as completely independent, but when she was asked how she would be able to fulfill her dream of owning her own home and being able to travel, she responded:

Elnora: Well, my husband need to get himself a job. ’Cause he’s real good and he’s been in the army, so he’s a veteran, so we can get a VA loan if he could just get a job–he used to keep a job, for the last two years he hasn’t had a job.

Interviewer: So if he gets a job?

R: And I get a job, we could make it. Right.

She was not optimistic about her husband’s work prospects and blamed him, his unemployment, and previous legal troubles for making them both homeless. “He ain’t tryin’ hard enough to me. So, I don’t know that’s gonna work out but I wanna do for myself. I do not wanna depend on him. ’Cause, if I could depend on him I wouldn’t be in this situation I’m in now.” She does not want to depend upon him, but does not believe that her income alone will fulfill her dreams.

She was not the only one to feel that independence was needed after a damaging relationship. Anike left an abusive relationship where she described herself as having “formed a dependency upon physical love” and after she left she had to “learn now to take care of myself.” Mary also told a story about how she was damaged by a relationship.

Mary: Well they [her friends] told me to run for my life as far as the relationship. To get out, run, save my life. Because this person, this young lady that I was in a relationship with for three years, when I met her she had a job, she was okay to contribute to the bills and stuff and after she’d seen that I was a real trooper so far as go to work, pay bills … she became lacksical dasical. Like, she didn’t want to
do nothing. And, she lost her job. I couldn’t pay all the bills. And, then we became homeless but we went to an agency and they helped us to get another apartment. She said she was gonna do better, but I just had decided–I had five years clean – and I had just decided that I didn’t want to be with nobody that kept playing with their lives. So, my friends, my friends told me to run for my life.

Interviewer: Is that what you meant when you said that she wanted nothing out of life…

M: Yeah, she wanted someone to take care of her and I don’t want to be–I’m 43 years old, I don’t want to be involved with something that don’t take care of their lives. I’ve learned how to become independent and not co-dependent.

Again, the emphasis on independence leaves no room for interdependence and the idea that it is possible to be in a mutual relationship where two people rely on each other.

At the member check session, women discussed the lack of acknowledgement regarding interdependent relationships. Women understood what was meant by the concept, but thought that it was perhaps an ideal standard, and not one that fit the reality of their lives. In the past, mutual relationships had failed them, and it simply became “the norm to be alone and rely upon yourself.” The reality for them was that they simply do not have anyone else that they can rely upon and therefore must be independent. When discussing the lack of interdependence, they focused not just on romantic relationships, but relationships with other family members. Extended family members were often unable or unwilling to take them in, which once again forced them to rely only upon themselves.

3. **Impact of others on self-determination**

Part of being independent appears to be the ability to make decisions independently without the influence of others. Very few women consulted others for advice when making decisions, and those that did seek counsel made the final decision on their own. However, making independent decisions does not preclude the women from taking into account
the effect of their actions on others and allowing that knowledge to shape their own decision-making process. However, most women did not acknowledge that potential influence. Of the 21 study partners, three acknowledged that they made decisions with an understanding of how those decisions were impacted by, and impacted others. That understanding influenced the decisions that these women made. Of those, one woman stated that she could not live her life the way she in which she wanted because she currently had too many responsibilities and needed to take care of her children. These three women differ from the others because they acknowledge that relationships with others alter their decision-making. The other women interviewed stated that they made decisions completely independently (which, in further descriptions, appears to mean without the influence of others), many of whom then went on to share stories that demonstrated that in fact, they do make decisions that are influenced by the presence of others or by the effect that a decision potentially may have.

Quanda was clear about the effect her children have on her decision-making. She talked about making bad decisions.

Quanda: They were decisions not including my children. They was decisions about what was gonna make me happy.

Interviewer: And, so a better decision is one that you’ll think about them…?

R: I’ll think about them. Exactly. I’ll think about how that will affect them if I actually went on with the decisions. That makes a lot of sense.

She went on to say that she was not able to live her life the way she wanted.

I: Do you feel like you’re able to live your life the way you want to?

R: Not right now, no.

I: What’s stopping you?
R: Basically, having to get things done. I would like to be able to go out sometimes. I would like to be able to do a lot of things, pamper myself sometimes. I can’t do that because I have other things that I have to worry about. And, I really don’t have to celebrate. What am I celebrating?

She gave an example of how she did not really want to change her lifestyle (of living from place to place, shelter to shelter), but finally decided she had to because of the effect of homelessness on her children.

I can’t really say I was too serious about anything, ’cause I was just there and I thought if I went there I could get me some cheap housing or whatever. But, of course, I started having more kids. And, the more kids I had, the more I was like, ‘Okay, I’m tired of bringing them back and forth to shelters and tired of dragging them around all over the place.’ So, I had to make a decision within myself, to actually be like, ‘Okay, because my children was suffering in those shelters.’

Earlier quotes by Quanda show that she is working to become as independent as possible. So, while her desire to take care of her children influences her decision-making process, other family and friends do not. In fact, she is working to make decisions independently of those people.

The youngest interviewee, Yolanda, was the clearest when she discussed the relationship between her decision-making and the interest of those she cares about.

A lot of decisions I make, like if I would’ve moved out of town, like that did have a lot to do with my family too, because like everyone’s here. I would be leaving myself and to be totally by myself and I had a problem then with being by myself. Now that I moved in here, I had no choice but to become okay with being by myself ’cause I’m so far from everyone and then I’m here by myself. So, I definitely say friends and family do restrict me because – it’s a lot of stuff that I don’t do because of them. More like, if I do this, than this is what the outcome of this could be, and this could affect them in some type of way.

Compared to when she was using drugs, Teone now says that she makes better decisions. Her plans include her daughter. She asks herself, “How is it going to affect me? How is it going to affect my child? Is it going to better us? Is it gonna hinder us? How is it gonna come out?
What is the outcome of all this?” She still sees herself as living the life that she wants; it is simply within the context of her relationship with her daughter.

The three women above indicated that their independence and decision-making are intertwined with the lives of others. These women acknowledge that they can be independent, but consider the ramifications of their decisions on family and friends. The other study partners equated independence with making decisions completely independently and not allowing others to influence the decision-making process. A few respondents told stories that indicated that they made decisions based upon a child or children needing them, but yet they maintain the notion that they make decisions completely independently of anyone else. Theresa said that she was self-determined because she is learning to be independent by learning to take care of and support herself. She also said that her children keep her going—she has to provide for them, and work for things such as food and new shoes. Regardless of the influence of her children on her life or the obligation she feels towards them, she does see herself as completely independent.

Two women, who stated clearly that they are completely independent, told stories about how they stopped using drugs and changed their lives completely based upon a child needing them. LaToya said this about her 2 year old: “Just looking at him give me strength. Just looking at him… Just knowing he there, that keep me going. Knowing I got to do this, to make him, to be strong for him. That keep me going right there.” LaToya had four older children, ages 29, 23, 18, and 16. Her mother raised the elder three children, and her sister, at the time of the interview, had custody of the 16 year old. LaToya said that while she was using, she never worried about her children because her mother was there to take care of them. At the time she became pregnant with her fifth child, her mother had died and there was no one that could take responsibility for him. So, she decided to stop using drugs so she could raise him.
Similarly, Harriet also made a conscious choice to stop using drugs for her youngest child. Her eldest is 29 and raised by her mother; Harriet voluntarily gave up her 12 year old to her sister when she went to the penitentiary several years before. She is raising her youngest son, and says that “he keeped me focused a whole lot” and that all she wants “to do is take care of myself and my son.” These women made active decisions based upon the needs of someone else. So while they may view themselves as independent and describe themselves as making decisions without the influence of others, it is clear that their decision-making was not always done independently of someone else. Other people do influence the decision-making process. The next sections will provide additional examples of factors that influence independence and decision-making that are not always acknowledged by the women interviewed.

4. **Self-described limitations on self-determination**

Of those interviewed, only five (24%) indicated that while yes, they were self-determined, their self-determination was limited in some way. It is not that they lacked self-determination entirely, but rather that their exercise of self-determination was qualified in some manner. Limitations mentioned included fear, employment (and money), and a lack of experience in being self-determined. It should be noted that these limitations on self-determination are focused on personal characteristics, not external forces. While women may not be able to make the decisions they want or be as independent as they want, all limitations are focused on their personal barriers. External barriers are evident in the stories they tell about their lives (and are outlined in Sections G), but none of those barriers that surface in their life stories are mentioned when discussing limitations on self-determination.

Anna said she was not as self-determined as she would like. Her fear was preventing her from being more active in searching for employment. “And, I have to say, to be all truthful, that
I’ve been a little bit lazy about it. Maybe because, on some level, it’s easier to say I can’t find something than to go find something and to say I can’t do that.” When asked if she was free to make her own choices, her response demonstrates a lack of experience in decision-making.

Ya know what, I am, and that’s part of the problem because I am not so used to being able to make my own choice that I’m not very good at it. Yes, I can go where I want, I can see who I want to, I can engage in any sort of activity that I want to, I can get any kind of job I want to. The fact that I don’t know how to do any of that stuff is beside the point, but I’m free to go and do it. I can stay home if I want to, I can stay out as long as I want, I can get up whenever I want to, but I do know that I make choices based on what I know how to make. I go to the grocery store, me and my sister have talked about this, I don’t know what to buy.

When asked if she was self-determined, Ruby said, “not as much as I would like to be, but it’s still early and like I said, I’ve just got 16 months so it will get better as I get better in the program.” For Pamela, her experience of homelessness had been so much about survival that she was unable to plan for the future. Being in the program now, she can start to think ahead and plan things out more. A couple of years ago, her thinking was much more “temporary.” She “didn’t think ahead because there was no room” when she was focused on how she was going to obtain food and diapers for her child. From day to day, unexpected things would happen that she would have to address, making it difficult to plan for the future. She did not have previous experience setting goals and then achieving them, leaving her to doubt that she could.

Money plays a role in how Elnora views her personal self-determination. “I’m not able to live my life right now ’cause I’m not working. It takes money and it takes … it’s just something I keep bringing up about money, but if you ain’t got no job, not doing nothing, how could you?” Quanda says she cannot live her life the way she wants to because of the responsibilities of her children and money constraints. An example she gave was giving up her car. She had really wanted one, but upkeep and maintenance were too expensive. “So felt like
that was a good decision of me giving away something that was actually putting me in debt even more, because I just wanted something.” A lack of experience also limited Quanda. Since she has not been self-determined about everything in her life that she needs to be, she can say that “I’m half-way getting there.”

Fear, employment (money), and experience were the only acknowledged limitations on self-determination. While there are other limiting pressures apparent in the stories women tell about their past experiences, their current lives, and their future dreams, these factors were not identified as influences to self-determination. Women do mention resources and experiences that shape their lives (described in Section F), but these influences are not discussed as having an effect on self-determination. There are unidentified forces explored in Section G, but these forces are not listed as influences on self-determination either.

Limitations on self-determination were discussed independently of life’s environmental realities, as if the two are mutually exclusive. That appears to be why these influences are not mentioned or included in the discussion of self-determination limitations. In addition, these limitations did not preclude women from having some type of self-determination. Limited self-determination is not non-existent self-determination.

5. **Experience as an indicator of self-determination**

Some women indentified a lack of experience in making their own decisions as a limit on their individual self-determination; others cited the experience of living independently and making their own decisions previously as evidence of their self-determination. For these women the experience of surviving and exiting homelessness was all the proof they needed to know that they were self-determined. In each case, whether it be living independently or surviving homelessness, it is the experience that validates the feelings of self-determination.
Ruby was extremely fearful of living on her own simply because she had not done so.

Ruby: I left home at 19. Married, for 16 years, ‘cause my husband died, that’s the father of my children. He ended up dying from an aneurism of the brain and three years later I remarried again, and that was for several years. So, I’ve always lived with someone. So, I knew this time I had to live by myself and the fear starts setting in ’cause I think I used men to validate me instead of enhance me.

Interviewer: What kinds of fears did you have of living by yourself?

R: Um… I had never done it.

I: Just the unknown.

R: Right. Exactly. I didn’t know it could be so beautiful as it is. [laughter] I mean, I didn’t even know how to put up a toilet paper–I must’ve dropped a screw in the toilet what about five times before I got it in right. But, the accomplishments now that I can make on my own without the use of a man. I’m proud of myself for that.

She proudly states that she is self-determined and knows this because of what she has accomplished.

Martina learned from her past experiences that she will always find a way.

Martina: One of my relatives gave me a sewing machine and I thought I had one before when I was way younger. I thought maybe I could make some stuff. I don’t know. There’s always something.

Interviewer: Are you confident that you’ll find something? That you’ll figure it out?

M: I feel so. I feel that I’ll figure out something. I don’t feel like, ‘Oh, what am I gonna do?’ And, I’m gonna be without anything. I don’t feel like that at all. I always find a way.

She survived previous experiences, and has developed the confidence to know that she will “always find a way.”
Other examples of respondents using past experiences to help them move forward and accomplish larger goals are Bernice and Diane. Bernice told a story about how upset she was when her son totaled her car.

Bernice: It represents me and something that I’ve worked hard for. It’s like a major… It’s a major accomplishment. But, I’ve always had cars, I sold my car when I went to [the recovery home] so I wouldn’t drive and get in trouble because … we couldn’t have cars at [the recovery home] so I sold it and my son’s license was wicked and I was too. I just got my license back um … just last week actually. And that’s a major accomplishment. [shows interviewer her new license]

Interviewer: This is a pretty good picture.

B: I went and got my license and everything is straightened out so, you need small goals as you go. If you tear up … if you break down, damage some things in your life, you’re able to accomplish some goals and get some things done and so that’s what I like about this program, they support you in anything you want to do.

For Diane, her acceptance to culinary school was an example of what she can accomplish when she is determined to do so.

Interviewer: So what prompted you to go to culinary school?

Diane: Well, when I was … you have to work for food stamps. I had applied for food stamps in November of 2005 and… I went to work at a nursing home for the food. You know, it wasn’t the greatest, I had never been on food stamps or anything. It was just something I needed to do. Well, you’ve got to do this if you’re going to survive. And, the cook told me about [a culinary program] run by the [local food pantry]. He went there. And it’s free, it’s a short, intensive culinary class that any … and you learn everything that every chef from Emeril Lagasse to Wolfgang Puck has to learn in four short months.

I: That doesn’t sound like very long at all.

D: No, it isn’t but it’s every day, five days a week. Very intense. It’s a lot of fun; I had a lot of fun. It’s just really the basics, sauces, meats, slicing, and cutting, you know. But he told me about it and so I went down there and I have to be interviewed for that. And I got accepted for that.
I: So, you couldn’t just walk in and do it, you had to prove to them that this was something you wanted to do.

D: Yes.

I: So, then it was for you? You wanted to do it?

D: Yes, I love to cook. And … it was just like wow … and I went down there and had an interview and all that and had to do the background check and drug test, hepatitis, all of that. It was rigorous and I got accepted. Out of … I think she interviewed for each session over 200 people and there’s only 24 people in the class.

I: So, you must’ve been very pleased to get in.

D: I was. I was determined. I’m a very determined person.

For some women, the very survival and/or exit of homelessness was a key factor in knowing that they were self-determined. When Quanda was asked in what types of things she was self-determined, her response was “not going back to the shelter. Keeping my job no matter what happens there. Making sure my bills are paid. Making sure my children are takin’ care of. That’s about it.” Janel completely agreed, saying that she “never wanted to go back there [to homelessness]”. Reflecting upon the homeless experience, Bernice acknowledged that my self-worth is much more greater than it was. Much more confidence in myself and my ability to be successful. I have a better outlook on life and it sets you up to have a future and give you a surrounding thing that you know that you are not alone. So, it’s like, it’s so much better than before because you see everything clearer. You’re able to make better decisions as far as, f-in and run, or okay there’s a solution.

Diane’s ability to remain who she was while she was homeless helped her survive the experience.

I was in a situation that I wasn’t used to. I was in a situation that I felt that I shouldn’t be in but I was there, but I knew that I had strength in me and I knew that I was going to get through it without … I didn’t know … I really didn’t know … but I knew that I was gonna be the best me that I could be in that situation.
She also saw the homelessness experience as a growth factor. “It made me stronger; it made me know that I can take care of myself … I knew that I had strength that I didn’t know I had.”

Martina sees herself as self-determined because of the things she does for herself now, which she did not do before. “I really do try to do a lot for myself, even though I’m limited. Like, I’ll do my own marketing. I go and pay my bills. I budget the money. Sometimes, I have a difficult time, like if I get behind. But I learned to, to pay my own bills. When I’m determined to do something I do it.” LaToya also mentions paying her bills and maintaining her housing as key indicators of surviving homelessness and becoming self-determined.

The difference is I have responsibility now. I’m a reliable person now. There’s something that I have to do now instead of, in terms of what I want to do, there’s something that I have to do. I have to pay bills now to keep a roof over my head. You know, I got a roof over my head now. My whole … my whole … it’s like I’m living productive. It’s like I’m living productive now.

Susan believes that her experiences have helped her become the self-determined person she perceives herself to be.

Just that I think … people should give women, mothers, singles mothers, a little bit more credit for the things that they go through, things that they have to do and put up with to make sure that theirselves as well as their children are safe and brought up well. I don’t think that we get enough support or we get enough credit for the things that we do or the things that we have to put up with. I think that tends to make us the strong people that we are.

The study partners defined self-determination as setting and fulfilling their goals, and being independent/self-sufficient. To varying degrees, they all perceive themselves to be self-determined. These perceptions are supported through various beliefs, including self-identified independent lifestyles and self-identified previous experiences of goal accomplishment. The common thread throughout the definitions and examples given of self-determination is that they are very focused on the individual. The next section will focus on self-determination and its
application to the lives of women through the stories they tell, not just their own identified areas of self-determination.

C. **Independence as Self-Determination**

1. **Program as independent**

   For the women in its transitional programs, the participating agency provides a two-year HUD funded housing subsidy and an array of supportive services. At the end of the two years, a woman can either remain in her unit and assume responsibility for the lease, or she can find another place to live. For the women interviewed, the receipt of a government funded subsidy did not limit their feelings of independence nor diminish the view of themselves as an independent. Many women referred to the fact that they still pay rent and pay other bills, regardless of the housing subsidy.

   Both Harriet and Mary acknowledged that they are not paying the full amount of rent, but for them, having their own apartment means that they are no longer homeless. When asked if she considered herself to be homeless now, Harriet responded “No, no, ’cause I pay legal according to your income. Even though I’m not paying market rent, no. I pay rent, light bill, cable, insurance, gas, food, clothes.” Mary responded similarly to the same question.

   Not at all. I love my apartment. I work 2 to 10 and when I get off now I got an apartment to go to. My light is on. My gas is on. I got food. I got a nice apartment. I have nice things. No, even though it’s a housing program–no, that’s my crib. It’s just that I’m fortunate enough to not pay all what I would pay if I wasn’t in the program.

   Teone also sees having responsibilities as an indication of her independence.

   Interviewer: So, now that you’re in the program, do you still feel like you’re a homeless person?

   Teone: No.
I: What’s changed?

T: I have responsibilities. I didn’t have them then. I have to pay bills … then, I didn’t have a care in the world. So it’s better.

Elnora definitely viewed herself as self-determined and self-sufficient. She described self-determination as “Doin’ something for myself that I am determined to do. Finish, like the GED, and I keep putting it off for years and years. I say every year, I’m gonna get my GED, I’m gonna get my GED. Yeah, that and just being self-sufficient, like I am.” She sees herself as self-sufficient because she pays rent. When she learned that some women in the program do not like that they have to pay rent, she was amazed.

Oh well, maybe they don’t. But you don’t have to pay—what you pay? Thirty percent. That’s not bad. I mean, come on, you can’t get nothing for free. [laughter] Oh, please. They must not want to work … but you gotta understand they helpin’ you. Even Section 8 you got to pay rent if you’re working.

The sentiment that you have to pay rent no matter where you are is echoed by Susan.

I don’t even look at it as a program to be perfectly honest with you. I just look at it as if I just have an extra support system pretty much. They’re not haggling over you, knocking on you door every day—what are you doing? Or, anything like that. Pretty much as long as you are on your Ps and Qs, you have your own life. They don’t try to interfere with your life or anything like that, but there are things that you have to do, things you have to take care of in order to remain here and that’s pretty much anywhere. I don’t have a problem with it.

Chanise talked about how even though she is in a program, she is a more responsible person now than when she was using drugs.

I wouldn’t open my mail box—I had stopped openin’ my mail when I was on drugs. I didn’t care anymore. I just took it as it came and I got so depressed I couldn’t stand it and I just wouldn’t open it. And, today…if something happens—which it does sometimes—but I pay my bills. My bills are paid. And, if they don’t get paid, they’ve got to [inaudible] it’s gonna get paid. My lights never got shut off, my gas never got shut off, I haven’t got kicked out of an apartment. Of course, I just been on my own, again, for over a year now, but it’s okay, I can deal with it.
When she realized she was still technically homeless by HUD standards, LaToya was shocked.

“’Cause like I said I just found out that I’m in a shelter. [laughter] That blew me away when I found that out.” She reflected on how she is different now than when she did consider herself to be homeless.

LaToya: I always thought homeless was like being on the street, you know what I’m saying? Being on the street and living on the street, so when you say am I any different …’cause I actually did that. I’m not on the street. I’m not on … panhandling out there, asking for change. I’m not living from one house to the next house. I might be homeless but I’m homeless in a program now. That’s a big difference to me.

Interviewer: How is it different? What are the differences to you?

L: The difference is I have responsibility now. I’m a reliable person now. There’s something I have to do now instead of, in terms of what I want do do, there’s something that I have to do. I have to pay bills now in order to keep a roof over my head. My whole … my whole … it’s like I’m living productive. It’s live I’m living productive now. That’s the only way I can sums that up.

Regardless of the subsidy, each woman is responsible for payment of rent and other bills in order to retain her housing.

Bernice describes that even with the flexibility of the program, she is responsible for her individual rent.

Bernice: This is not considered being homeless because you’re still paying your own rent. You’re still paying your way. It’s way different from being homeless, much more different than being homeless ’cause you’re paying rent, you’re paying bills, you’re taking care of yourself, you’re buying your own food. Then … I mean … this is a great program, I mean, because right now … I’m off work on medical leave … and I don’t have to pay rent for this month or next month so, I mean, it’s a good program and I guess you can still say, be considered homeless, but it doesn’t feel like it.

Interviewer: It’s more like a subsidized housing program?

B: It is a subsidized housing program. And, they go by your income, and um, things happen in people’s lives which, it is, I’m kinda contradicting myself but…
I: That’s okay.

B: [pause] This is, I’m glad that I’m in the program right now, because if I wasn’t, then I would be getting put out. I would be trying desperately, or I would be fearful that I would be evicted because of my financial situation. I would be very fearful but I went to … the director, and I let them know, hey, you know I only get so much amount of money in my check and we worked out a payment plan and when I got released from my job on the 11th, we worked out a payment plan for this month and then when I went back the next week … I went … I was released… Okay, I went on the 8th and made up a payment plan then I went … I was released from my job on the 12th … so … my case manager came over the next few days or so, and we worked it out where I don’t have to worry about my rent because they know that I’m getting ready to leave. I’m going to Kentucky anyway. But I still left the option open, if I decided not to leave, that I could still have my apartment because I got my unemployment coming in. I’ll still be able to get back on a payment plan, and pay my rent and stick to my payment plan.

Only two women acknowledged a reliance on the subsidy in negative terms. “After my two years here I’m gonna be on my own where I’m gonna be paying my rent and I won’t have this—sorta say crutch—’cause right now this is what this program is, it’s a crutch to me right now because I’m leaning on them because they’re paying my rent until I get right on my feet.” Although acknowledging that the program does assist her, Teone does state that she makes her own decisions. “I make decisions on my own.” Anna made a comment that she is “living off [the participating agency],” but does state that she is “free to make her own choices.”

Women acknowledge that they are in a program and receiving a rent subsidy, but that subsidy does not mean that they do not have other responsibilities, such as rent and other bills. Janel said that the program allows you to “live a normal life.” Paying rent and being responsible are how women described independence. If independence is strongly connected to self-determination, and the receipt of a housing subsidy does not decrease their perceived levels of independence, then it would also not diminish their perceptions of self-determination. In fact, many of them would like to receive a permanent housing subsidy.
2. **Permanent housing subsidy**

A permanent housing subsidy would provide women the opportunity to pay only 30% of their income for as long as they retain the subsidy. Just as the housing subsidy provided by the program was not viewed as a detriment to independence, neither is a permanent subsidy.

Teone would like a permanent subsidy, even though she knows she would still have other bills to pay.

Interviewer: If it was available, like a subsidized apartment forever, do you think that would help you out, or would you want to be independent and pay your own rent from now on?

Teone: Even if I had a subsidized apartment, I’m pretty sure that I would have bills, so I still would have a responsibility. And, I got my daughter so I have a responsibility there. So, who wouldn’t want to have a place to live in forever and not have to pay rent or low rent? That would be nice.

This woman was very clear on her view of herself as self-determined. When asked if she was self-determined, her response was “Now, yes. Now I’m a person that fulfills my goals, yes. Now I’m a person that don’t let nothing get in my way.” For her, a subsidized apartment does not decrease her ability to be independent.

A permanent subsidy would give Ruby a sense of security for the future. She indicated this when asked if there were any changes she would make to the program:

Ruby: Let me stay here forever. I don’t know if that’s realistic or not. They let the ones with children stay a lot longer than single people.

Interviewer: You’d really like some type of subsidized apartment.


I: And, how do you think–how would continuing to have a subsidized apartment, how would that impact your life? Would it make it better? Would it make it easier?
R: Right, because then I wouldn’t have to worry about so much if my hours got cut short to still maintain that rent, no matter what. Or, if I got out of work. I wouldn’t have to worry about being put out because they would go by income and if you don’t have none, you don’t pay none.

While Ruby does say that she is self-determined, she also said that she would like to get better at making decisions by herself (not seeking advice from others) and that would help her become even more self-determined. The subsidy itself does not limit her self-determination.

In addition to the financial benefits, Susan mentions safety as a prime reason for wanting a permanent housing subsidy.

…this probably was the break that I needed ’cause considering the fact that if you’re not getting Section 8 you’re paying almost 6, 700 dollars a month depending upon where you want to live. If you want to live somewhere nice it’s more. If you’re just willing to accept anything, if you’re in the ghetto with the gangs and stuff—I’m not saying they’re not everywhere but—you are so … it’s actually a benefit. A very good plus.

Susan says that she is self-determined because she is “determined never to go back.” A housing subsidy would help her not return to homelessness.

Martina believes herself to be self-determined because when she sets her mind to something, she is determined to achieve it. She always finds a way to do things and nobody stops her from living her life the way she wants.

I always felt like–still feel like this–when I need to get up and do something, to do it and not procrastinate and keep myself on the road. And, I feel like I’m not in that space yet. And, I believe that I’ve been … ummm … the program has… They tell me that they’ve okayed my case for long-term housing, and so I feel that for myself, personally, that I want to be that way, self-determined. Meaning that when I … I live by myself and I have a job and I support myself, that I would be able to keep on going and not fall back.

Martina received acceptance into the agency’s permanent supportive housing program, meaning that she will receive a permanent housing subsidy and case management services for as long as she needs them. She perceives herself to be self-determined and independent, even with the
permanent housing subsidy. HUD would not define her as independent. When Martina leaves the program, her exit will be reported to HUD as “other subsidized housing” as opposed to “independent housing.” According to HUD reporting standards, independent means non-subsidized.

At the member check, when confronted with the potential conflict of being both independent and reliant on a government subsidy, women were unmoved in their conviction that they could have both. The idea that even within a subsidized program, you are “doing what you need to do” was reiterated by women who attended. Those women defined paying rent and maintaining your apartment as indicators of independence, and they were doing that, regardless of the amount of the rent that they were paying. The women who attended the member check firmly supported the conclusions derived from the analysis: that you can have a housing subsidy and still be independent.

In contrast to this idea of independence, one woman at the debriefing questioned whether anyone was truly independent. Her example was that even the Ford family was dependent on people buying cars. Women understood what interdependence was, and they were clear that they did not want to be interdependent with another person (personal interdependence). Not enough women acknowledged any type of societal or environmental interdependence (such as relying on others in a business sense as in the Ford family example) to know if there is any substantial difference between how personal and environmental interdependence were viewed by the women and if it could be an area for further exploration. What is known is that the subsidy does not diminish women’s view of themselves as independent, but relying on friends or family (personal interdependence) certainly does.
3. **Different than relying on friends or family**

Having the participating agency, Section 8, or another similar program be responsible for paying rent did not infringe upon women’s sense of their own independence. Relying on family and friends to support you did infringe on being independent. It is easier for women to receive assistance from an abstraction or from people they did not know personally (social service staff), than from people they were connected to on a personal level (friends and family).

Janel had been living with her brother, sister-in-law and their children for a year when space became an issue. She eventually left because you “can only stay and live off of someone else for so long.” Anna talked about how living with her sons or other family members was not allowing her to move forward in her own life. “We do have two wonderful boys and eventually from homelessness to homelessness to family members who love me very much and are there for me … but it was either live with them and be a burden in their life, or try to make my own life, which is what I wanted.” Later in the interview, Anna did mention that she would like to be more independent, as she is “living off of [the participating agency],” but did not equate living off of the agency to be the same as living with family. Living with family was less autonomous and independent to her. “I had no means of support so it was always based on: Will this person, will this family member take me in? and so I am just now coming into more autonomous decisions.”

As described earlier, LaToya was shocked to find out she was still considered homeless by HUD standards. She considered herself to be homeless when she was living on the streets and with other people. Harriet made it very clear that she did not want to be dependent on family members as it left her beholden to them.
Well, I say being homeless is when you don’t got keys, nothing saying this is your apartment or anything. But I just didn’t like the idea with staying with nobody, period. Family, ’cause I’m at the age where, you know, not the [inaudible] didn’t make me grown. I’m at the age where, you don’t want nobody telling you what to do or … I mean, I was just at the age where … I couldn’t live with nobody, or I tried. I lived with a man just to keep a roof over my head or … and I always go back to family but I didn’t want to do that ’cause I had to follow rules.

She was still homeless when living with someone else because in her view the space was not hers. This is a common sentiment shared by other women: unless you have keys and the lease is in your name, you are homeless.

“So, anytime your name is not on the lease, you’re homeless,” said Mary. When asked if she considered herself to be homeless today, Nera replied,

Today I can say no. Because I was always taught to believe, through my treatment process, that when you’re homeless you don’t have a set of keys to your own apartment. And your name is not on anything. That’s when you’re homeless. I learned that living off of somebody else’s couch, I’m homeless, so today I’m not.

Martina was released from jail on bond and awaiting trial for three years. During that time she was in denial about being homeless. “I was actually homeless. I was very far from admitting that I was homeless to myself; I was in denial. So, I stayed wherever I could at that time, with my relatives, my daughters, my friends.” She acknowledges that “if it wasn’t for the program, I would be homeless.” With her own apartment (and now her permanent housing subsidy), she has an independence she otherwise would not have. Bernice was also in denial about her homelessness when she was moving from place to place, living with friends and family.

I was homeless, however, it’s hard for me to just truly say and admit to being homeless. It’s denial set in. You never really want to put yourself so low as being homeless. But it’s the facts, and you’re not paying rent anywhere, you don’t have any deeds, you don’t have a lease, you know. You can’t say, ‘This is mine because I’m paying rent.’ It took me a while for that to sink in.
Diane also did not want to depend upon anyone else. While she currently does not view herself as homeless and considers herself to be independent while in the program, living with family members was not an option for her because she did not want to depend upon anyone else.

She [mother] was like, ‘You can just come stay here with me and your grandmother, I don’t care.’ She was like, ‘But, you can’t do that [enter a homeless shelter].’ She almost said, how dare you, my kids too… My son who lives in [a neighboring town] ‘Mom, can you come out and stay?…’ ‘No, no that’s too far. And, no thank you.’ ‘But how can you do that?’ Yeah… I had to do it … I had to … and I really didn’t know what would happen, but I had to find out what. Yeah, I did.

Bernice talked about not feeling personally responsible for herself right now because her girlfriend is paying her rent.

No, not right now I’m not. I can be honest about that. Yeah, because … um … I hurt myself on my job, and my girlfriend practically taking care of me. I have a little bit of income coming in, but you know, shit … excuse my language … but the last two months she paid my rent. And, but … on the good side, you know, I’m not using, I’m not drinking, I’m not doing anything to harm anyone. I’m being a loving mother, a good friend to my friend, I’m being responsible and checking in with whoever I need to check in with. I’m doing what I need to do to maintain my life to the best of my ability. I’m comfortable … I’m okay with the way things are going for myself because… With the job, I couldn’t help hurting my back, so you know…

Bernice described herself as independent while receiving a housing subsidy. For her, being in a subsidized housing program is not reflective of a lack of independence, but having someone else pay her rent is a reflection of her lack of independence.

This was an additional point of discussion with which women were in complete agreement at the member check. When asked what the difference was between receiving assistance from family members versus receiving assistance from the government, the response was clear. When family members assist you, it creates a power differential. They are “giving” you something and “doing you a favor,” which then makes you obligated to accept mistreatment
and abusive behavior. Abusive behavior “hurts more living with someone you know than someone you don’t know.” Receiving resources from a government entity or a program is “less personal” and women would not “take mistreatment from shelter staff personally.” They also said that it was easier to obey the impersonal rules of a stranger than of a family member; in a shelter, “blanket rules apply to everybody.” From these responses it is clear that not only do women feel less independent (and also less homeless) when they are receiving assistance from friends and family, but that they also depersonalize the assistance that occurs through the receipt assistance from shelter programs or government agencies.

4. **Active choices within the program**

   In addition to having to pay bills and rent, women see themselves as having choices about their lives while they participate in the program. According to LaToya, “They have opportunities here. They have opportunities that I talked with … they help me … and my case manager she tells me, you know, about things that they can direct you to, to help you.” To them, the program is not prescriptive nor is it forcing them to do anything they do not want to do; they are free to make their own choices about how to live their lives. “One thing about the program, they not hard on you. They allow you to make choices,” Mary said. She went on to say:

   So, being in this program, they give you the power of choice to make decisions. They put the decisions in front of you. Okay, we have a dental program, you can then make appointments. Here’s a GED class right around the corner from your house, you can then … make decisions. We have a yoga class here, if you can make it. Here, we have a breakfast class. So, they put things in front of, but they allow you to make the self-determination if you want to be part of this.

   Bernice stated that “you’re totally independent to make your own choices, your own decisions about work. Right now, I’m off work for medical leave, ’cause I hurt my back. But
you are your own decision maker. You decide your own fate.” This was reinforced by Elnora:

“They suggest, you know. This is not working for you—maybe you try doing something else.”

When asked if the program makes choices for clients, Harriet said,

Whatever choices you make, they just stand behind you and help you. No, they
don’t make choices for you. No, they just … if you need help in whatever choice
you done made, if they can help you they will. But they don’t make your choices
for you—tell you what to do, what to think. They might make suggestions if they
see you just not doing nothing.

The idea that case managers give suggestions was repeated by LaToya. “My case
manager don’t tell me what to do. They don’t, no. In fact, I do make my own choices and they
give me leads on things. Never tell me what to do. They give me leads. They give me
suggestions.” According to Martina,

The organization never tells women that they have to do anything. They present
it in the manner that it’s a program to help us, to help get us stabilized, so we can
get on with … on our own feet and be able to be self-sufficient. But they don’t
never tell us you have to otherwise you’ll be … put out. They don’t treat us that
way.

When asked if her participation in a job training program was her choice, Teone replied, “Yes,
that was my decision. They … whatever that you want to get into, they don’t stop you or
anything or interfere. They’d be all for it. And I like that.” Anna even thought that perhaps she
had too many choices, too many options.

Yes, I can go where I want to, I can see who I want to, I can engage in any sort of
activity that I want to, I can get any kind of job I want to. The fact that I don’t
know how to do any of that stuff is beside the point, but I’m free to go and do it. I
can stay home if I want to, I can stay out as long as I want to, I can get up
whenever I want to…

Only Vanessa was unhappy with the program and felt confined and restricted by program
rules. She emphatically said that she did not have choices in the program, and when asked if
there was anything she would change about the program, she responded:
Vanessa: Um … well, what I had told my case manager just a few visits ago, rather than she or this program being dictor … dicta … ah…

Interviewer: Dictatorial?

V: Dictatorial, maybe you all should start asking your client when you first meet them, what is it that you want to do? Do you have any thoughts of your own life? Because what’s happening is, is I told her, I said, when I got the papers just to fill out the papers for this program, I said, ‘Wow. This is’–what did I call it–you’re on parole. Well, you got to report in, you got to let everybody know your every move and so on and so forth. And, maybe you need to understand that you are working with real people who had lives before all of this stuff happened.

This client represents a contrary view to the others interviewed, indicating that not all clients feel that they have choices within the program.

Overall, the receipt of a housing subsidy and participation in a housing program does not diminish their view of themselves as independent. As independence is seen as a component of self-determination, women who believe themselves to be self-determined would also believe themselves to be independent. Throughout the interviews, other than the outlier listed above, respondents did not qualify the level of their independence. Regardless of the subsidy or the need for a housing subsidy, the respondents see themselves as independent. For Anike, even multiple forms of government assistance did not dampen her independent spirit. “You gotta do something. You can’t live for free. So, I think I’m a good candidate to encourage people that are homeless to do all you can for yourself. Don’t just rely on the government.” This woman receives a housing subsidy, food stamps, Medicaid funded mental health services, and college tuition assistance. Regardless, she lives by herself, pays her bills, and is employed, and therefore views herself as independent and self-determined.

The overarching idea is that living with someone else, and not having your own lease or keys, are indicators of homelessness and dependency upon others (be it family or friends). That
then logically leads to the opposite conclusion: Having your own place, lease, and keys would lead you to not be homeless and not dependent upon others. The payment of rent for one’s own apartment, regardless of whether or not it is subsidized, is a primary indicator of independence. In addition, if receiving a subsidy that does not diminish one’s ability to make one’s own choices in an independent manner, then the subsidy does not diminish independence. As independence is a key indicator of self-determination, women who perceive themselves to be independent would also perceive themselves to be self-determined.

D. **Self-Determination as Decision-Making**

1. **Short- and long-term goals**

   In addition to independence and self-sufficiency as evidence of self-determination, women also described decision-making and follow-through. Women talked about how they are self-determined because they make decisions on their own and they are determined to achieve their goals. Getting things done, meeting goals, and being determined to succeed were common threads regarding self-determination. These threads are similar to the overarching definition of self-determination used in this research project. However, the stories that women shared in regards to their experiences and abilities to set goals and achieve them indicate that each woman’s self-perceptions of self-determination are different than their actual practice of self-determination. The study partners believe that they set their own goals and make their own decisions, and this can be seen in their examples. The contradiction appears in the implementation of those decisions and the achievement of those goals.

   Many of the goals women set for themselves and much of their decision-making revolve around short-term goals. These goals focus primarily on fulfilling basic needs, such as money and employment, housing, food, and bills. These goals align themselves closely with the lower-
level needs outlined by Maslow in his hierarchical framework of human needs. Those lower level, survival and physiological needs include food, clothing, shelter, and medical care (Maslow, 1962). At the time of the interview, Pamela’s goals were focused on immediate needs. They included getting food stamps, having her case transferred, getting child support, getting glasses, seeing a doctor, and getting child care. For Anike, short-term goals included obtaining an apartment (housing) and retaining her job (employment).

Short-terms goals for Janel were housing and employment focused as well. Long-term, she wants to be more financially stable and independent, with her own apartment and a full-time job. Education and employment were the primary goals for Mary.

Mary: Well, the first thing I want to do, I want to get this GED. I want to get the GED.

Interviewer: How will getting a GED help you? What will it do for you?

M: It will look better on my resume. [laughter] ’Cause a lot of jobs they want GEDs.

For Nera, employment equaled money, and money equaled self-sufficiency.

Nera: And, now my goal is to save money, to be able to in two years, be able to be truly self-supporting.

Interviewer: And, by self-supporting, you mean you’ll graduate from the program and be able to pay your own rent?

N: Pay my own rent.

I: And, how do you think you’re going to get to that point?

N: Saving my money. And continue to work.

Staying clean and retaining custody of her daughter were Ruby’s short-term goals. Susan’s goals were to do what she was currently doing. “Working and saving my money and trying to go to school and find me a better job. That’s pretty much all you can do.”
The short-term goals of Chanise flow into her long-term goals, and there is little separation between the two. She said this when asked what she expected her life to be like.

I expect to be through with my GED. I expect that I’m not always going to be [working a] security [job]. I don’t know what, at this point, I don’t know what it will be, but I will be in something better. It’s just like my AA meetings that I go to. The different things that I volunteer at, I speak in front of a group. I don’t know what I might be. I know I’m gonna be with the public; it’s maybe it’s something better maybe it pays—I don’t know. I might take some college courses; that’s not my goal right now. I think about that. Once my GED is completed, I might take some college courses, maybe go into something like… I always wanted to be a counselor after I went into treatment. And, that’s helping other people. I always wanna help other people. So, hopefully I’ll be in that position someday, to help other people do something better. And, at the same time, my income increases. And, I can have more things that I want and still be on a budget. I don’t care how my means grow, I want to still have a budget and not overdo my means because that’s why I get in trouble ’cause now, I done overspent, where am I going to get this money from… I don’t ever want to worry about where I’m going to get money to pay bills. I don’t want to ever worry about that.

She also talked about wanting to own her own home (as a long-term goal) and to simply be the best person she could be (“me, only better”). Chanise was not the only woman whose long-term goals seemed similar to her short-term goals.

Long-term goals also focused on items related to basic needs and not having to struggle to survive. Pamela said that she simply wanted a peaceful life with no drama, and to get a job and save some money. Teone stated that her future goals were to have a good job and own her own home. When asked if they were reachable goals, she responded,

Yeah, yeah, they’re reachable. I don’t know about the house part, ’cause homes is kinda expensive, and I’m up in age, so I don’t know if the home part is in the plan, but the part about having a nice place and a job and being comfortable, me and my daughter yeah, I’m reaching for that. And, I’m gonna get it.
Both Martina and Susan said that their long-term goals were a good job with medical benefits. Martina said, “And, my long-term goals ... is ... I just want to have a job. I want to have a job with some medical so that I can be self-sufficient. That’s real important.” Susan said,

Long-term goal would be to find a job where I could have a pension. A pension— that’s really what I’m working for—a pension. I’ve been working since I’ve been 14 years old and it’s time for me to start getting a job whereas I know when the time comes my end I will have something that shows what I worked for. A pension, some type of medical care.

Even Elnora, who was unable to describe what her future could be, included employment as an item in her future. “I can’t expect it [the future] to be anything right now. I’m not moving. I’m stuck in one spot right now. So, once I get stuck out this spot, maybe I can look for the future. [pause] I guess I can, ’cause eventually I guess I’ll find some type of job.”

Alpa said that for her whole life she had no work and was always hungry; it was so hard. Her long-term goal is to work hard, save money, and have a comfortable life with money in the bank. Anike said, “I want to take care of myself.” Harriet has dreams of “I want just enough to pay bills and clothes and food, just necessities that you need every day. A roof over your head.” While LaToya’s dreams were grander than most women interviewed, they still focused on housing and employment.

Not a house, I want a condo. I just imagine me and my son in a condo, big enough for my other kids to come over when they want to come and my own business. I been thinking about going into, well me and my co-worker ’cause she’s in recovery too, and we been thinking about trying to get into a recovery house ourselves. So, and it’s just a thought ... or and I always thought-I used to work at McDonald’s years ago and McDonald’s make a lot of money. You can put shares here and there, and I always thought about opening my own McDonald’s one day.

For Diane, one of her goals is to move up in her career “I’m going to, you know, move up in my job,” but other than that, “I like it [my life] just like it is.” However, Diane was unique in
the sense that she also had a goal not connected to housing or employment: Travel. “I want to travel. I’m going to Jamaica, maybe twice. I don’t know within the next five years ’cause I love Jamaica, and I went in 2002. My girlfriend got married and I went to the wedding and yeah, I’m going back. Want to go to Vegas. Just want to do things that I want to do.” Her ability to look beyond her job and housing may be reflective of her stable job with the local public school system and the living wage she receives from it. As so few study partners did have jobs that paid well, it is unknown if greater housing and employment stability would lead to increased goal formation beyond immediate needs.

These women all share future goals that mimic immediate goals focused on employment (and education to obtain employment), housing, and basic needs. This is noteworthy for two reasons. It coincides with the first two outcomes established by HUD for its homeless assistance programs (clients obtain/retain permanent housing and clients increase skills and/or income). Study partners want to be self-sufficient and independent, and they envision that as having their own apartment (regardless if it is subsidized) and paying their own bills (which requires an income). The goals of the women interviewed mirror the first two goals of HUD. In addition, the focus on basic needs underscores the lack of social safety nets within the United States. There are no public programs in place to guarantee that basic human needs are met for all people. Women are concerned about losing housing and not being able to feed their families if they do not have a job and some type of income. Were housing, food, and some type of monetary income guaranteed, perhaps not all goals would be focused on those items.

2. **Planning as part of decision-making**

As part of the interview guide, women responded to questions regarding their goals and future life. Specifically, conversation focused on plans of how to achieve short-term
goals or accomplish future dreams. Many of them did not have plans, or their plans lacked specific details. When asked how she was going to achieve her dream of having a good job and a comfortable life, Alpa replied, “I make a plan—to go to work and not sit and ask for help. I can work.” She said that she needs to go to school, especially if she wants to be a mortgage broker, but did not know where to go or who could assist her. She was also unable to articulate the specifics the tasks and activities of a mortgage broker.

A common interview question asked women if they had a plan for what they were going to do once their two years in the program had ended. Martina, who has been approved for a long-term subsidy, responded, “No. I didn’t have, didn’t think about it.” Mary, who suffers from seizures, believes that she is disabled and should receive a permanent subsidy, but does not know how to go about obtaining one.

Mary: And, in two years I have to leave. And, I just think that, by me being a recovering drug addict, I have seizures, I just think that I was going to find a way to stay in the program a little longer, too. I mean, I’m gonna have seizures the rest of my life. It’s like, is there any type of program I can get in?

Interviewer: So at this point, do you have a plan of what you’re gonna have to do once the two years is done?

M: I don’t have a plan yet but I’m gonna have to start talking to my case manager about it because somebody was telling me that I should have a doctor to write a note saying that I have seizures and I might look healthy but seizures affect the brain.

Elnora wants a job. Repeatedly throughout the interview she said that employment was the main thing she needed right now.

I gotta find me a job. Even I can’t find … or just volunteer somewhere. Do something. That would make me feel better. Least I can get up, but the thing about that is you have to have carfare. And, there’s a lot of agencies–like right down the street–I ask if they give out any bus passes or anything like that. And, she says you gotta do something with the program; they didn’t have no room or something. So, I don’t even stop in there any more. [pause] There was one lady
that was telling me about it, I asked her about it, like she didn’t really want to give me the information. But she said that you have to join a program, but I have to look for work.

Instead of a plan to increase her education, employment, or vocational skills, Elnora plans to lie on her resume.

Elnora: I just updated my resume, better reference. Now, that was one lacking. I had … just worked at Greenwood, it’s a rehabilitation center. And, I like it ’cause I liked their calling them not patients but residents. But I takin’ somebody else’s place and then at Jewels—I think I had put Jewels on there but then I got fired but I didn’t say that I had got fired on my application, but I guess that was just messin’ me up. Why wasn’t I there a longer period of time? So now, I have my husband, one of his friends is a doctor, he does like scientific things, and then he has—his wife has—two clinics, one in Terra Haute, Indiana and one here on 51st—like in Hyde Park— for people like him with diabetics, stuff like that— high cholesterol. They have a clinic like that. So, I’ll use him. I put him on there.”

Interviewer: As?

E: As I was workin’ for him. Just to fill up, to have a good reference. ’Cause I need a job.

Anna had plans that were missing details. She would like to be a receptionist, but admits that “Well, I don’t know what skills a receptionist needs.” Anna was one of the few women who admitted that her self-determination was limited. For her, fear was a big limitation and that fear prevents her from planning her life as life overall.

Interviewer: We’ve talked about what you would like your life to be like. What do you expect your life to be like, in like five or 10 years? And, do you have a plan to get there?

Anna: Um, actually, no I don’t have a plan. I pretty much, unfortunately, I don’t know how to make plans for the next five years. Um, and, I would like for it to be better. I would like for it to be better than this. I just have no idea how to get it that way. I wouldn’t even know where to start. And, by better than this, I mean a 40-hours work week and a regular paycheck and that kind of thing. But I have, but I have no plan, because ya know, if I make a plan and I don’t know how to accomplish that plan, then somehow I’ve failed. Ya know, it’s the standard if you don’t try [you] don’t fail, I never liked those people who always said, ‘Those that don’t make mistakes are the ones that never try.’ Well, okay, I want to be one of
those. One of those that don’t make mistakes. [laughter] Ya know, I know that’s not the way to live life, but in some form it’s a habit because it’s worked so far. ’Cause, ya know, the making a plan thing didn’t work out so well. I planned to be married ’til the day I died and that didn’t work out so well, so I don’t know. I don’t know how I see my life in five years from now. Five years, is what 2008, 2009, 2010, 2011, 2012, 2013. 2013. I have to say, I would like to be a lot more independent. I would like to be a lot more brave. And, I don’t know geographically where, but I’d like to be a lot more independent, which is really kind of funny because I’m making no efforts in that direction. I’m living off of [the agency], and living on what I know is inadequate instead of just going out there and trying to get something more adequate.

Not only does she not have a plan, for the things that she does know she wants to do, she is not attempting to achieve them. Both decision-making and follow-through is not apparent. Given that her definition of self-determination was “snap out of it and be responsible for you and your life and yes, you’re gonna make mistakes, but everybody does, get over it, and just start being responsible for your own life. Stop waiting for someone to come along and make a decision for you,” leads her to contradict herself when she does say that for the most part, other than fear, she is self-determined.

Just as Anna would like to be a receptionist but does not know what skills are needed, Ruby would like to be a court reporter, but is just as unprepared. When asked what she needed to do to become a court reporter:

Go to school. Check out the financial—’cause I never—I only graduated out of high school. I never went further than that. So, I don’t know nothing about financial aid and how that goes and all that stuff. So, I’m gonna have to investigate that aspect of it, loans or whatever you have to do, how I would put it in. ’Cause I have to work, ’cause I have to support myself and how to keep my program up first or I won’t be able to maintain none of that. I have to fit it in with that schedule some type of way. No matter how long it takes; I’m not in a hurry, so if it’s only two classes a week that’s fine, but I don’t even know how long it takes to do it. I don’t know if it’s a two-year course or a four-year course or what. I just know that it’s always been a desire of mine and it’s getting stronger and stronger so. I type about 75 words a minute anyway … so to have something to back that up other than just knowing how to type would be great.
For Ruby, the idea is there, but she only has vague notions as to how to achieve that goal.

Quanda indicated that she had a plan, but it is difficult to determine how concrete a plan it is. It involves many steps, but she describes it in a scattered and roundabout way as to diminish its credibility.

Quanda: I want to be a registered nurse and I was thinking of going to [a local college] ’cause I heard that’s like a pretty good school for nursing. And, it’s right around the corner from my house, so that would be very convenient. And, I’m also trying to get the night shift at my job, which is 11 to 7 so that I can go to school during the day. And, they’re giving me a hard time with that but I’m not going to worry about it because I know it’ll happen one day.

Interviewer: So once you go to [local college], do you have a high school diploma? Do you need to work on that first?

Q: No, I do not have a high school diploma. I am working on that at the moment. I was supposed to be–well, actually, I did have a high school diploma, it was at [religious institute], but most schools do not accept that diploma and I’m like so upset because I paid $150 for that class or whatever. So, it was a learning lesson, so like whatever, I’m not gonna let that stop me either. Right now, I’m supposed to be able to take the test, the GED test on the 8th and 9th of July, so right now I’m studying for that—to actually take that test.

I: And once you get that, you can actually go enroll in [local college].

Q: And, they was telling me, I have called up to [local college] and asked her a couple of questions. And, they was telling me that there’s a lot of things that I have to do before I’m actually able to get into the nursing program. Like I have to take a math class, a chemistry class, and another class I have to take to actually show that I am ready to take the nursing class. But I have … I’m studying for that, well not right now, but I have skimmed through a book. I have a medical assistant book, and I was planning on taking medical terminology while I was taking those other classes, so the medical assistant book is really helping me some too. I’m not really too much focused on that right now. I’m trying to get the GED thing together, but once I get through the GED I’ll be more focused on the medical assistant book that my sister, well not my sister but my children’s father sister, had let me borrow ’cause she knows what I’m trying to do also.

This plan has many facets, not all of which are explained in a linear order nor are all aspects of the plan within her control. While she has given specifics, her explanation makes it difficult to
assess if she has a clear understanding of what is required for her to achieve her goal of becoming a nurse.

Vanessa believes she has a plan, but the plan she has does not involve active steps for herself. The plan relies not on her, but on God.

Vanessa: Right now, I am believing … and this may be completely off the wall for the norm… Right now, I am believing that I am going to be delivered from this whole mess. And, I have, as of yesterday I went to church, and one of the things the minister at church was asking, ‘What do you want God to do for you?’ And, then he had us write it down. And, I’ve been saying this for a long time now. I want to be completely delivered from this whole mess of homelessness by August 31 of this year.

Interviewer: I don’t know what that means–to be delivered. That’s why I’m using air quotes. I don’t know what that means.

[laughter by respondent]

V: Completely out of. Being back on my own in whatever capacity that I can. Not being connected with a social service agency, not living in an apartment that I call a storage area ’cause I don’t consider this my apartment. This is just the apartment. Being disconnected from any social service agency that has anything to do with homelessness. Being back on my own. Either in my own apartment or married or something. Okay. So this is what I’m looking for by August 31 of this year.

I: So is this something that God does for you? Or, do you do it? Or, is it a combination?

V: It is a combination and that’s a very long story and very difficult and complicated and I understand where you comin’ from and where you tryin’ to go with this, but I can’t really explain it. The only thing that I can say is … I … my prayer, as I prayed about my mother, you know, ‘Lord, you got to put her in the hospital’ or something … and a few days later she was in the hospital.

I: So, do you feel like you make active choices or decisions in your life, or are you just living a life that God presents to you?

V: I make decisions … but I don’t create the outcome. If I make a decision and I go forth and try to do that, then if it doesn’t happen, then I look at it is maybe that’s not where God wants me to do.
For some women, the lack of planning results in instinctive or “gut reaction” responses to situations. Throughout their stories, women reflected upon how they make decisions and decisions they had made in the past. Frequently, women made references to decisions they had made instinctively, not based on a foundation of information or thought out to any degree. For example, Theresa was trying to purchase a house, but lacked the credit to do so. A realtor told her that they could change her tax return to show a higher income, she would then be able to qualify for a loan. Theresa decided not to move forward with the house because “it didn’t seem right” and that it not feeling right meant that it was not the right time to buy the house.

At one point during her stay in the program, Martina was told that she may have to move to a different apartment. “At the time I was really being panicky but … I was telling them ‘I’m gonna leave the program. I’m gonna leave.’ I was … I thought it was my way … I feel real secure where I’m at. It’s real important to feel safe and I felt that I was being threatened.” She was threatening to leave the program at that time, even though she did not have a plan for when her two years in the program were complete. Mary does not have a plan for after her time in the program, but has received an offer from her daughter that she may accept.

See, after the program, I probably, I might leave Chicago. My daughter is 23, she has my first grandbaby. She live in Silver Springs, Maryland and she’s gonna get transferred to Georgia and the military gonna buy her a home out there. And, she asked me, she said, ‘Ma, do you want to go?’ And I said, ‘Yeah.’ So, I might. I been here 17 years–I’m ready to go.

She did not have a plan but was provided with an opportunity that she accepted based upon the feeling of being ready to leave the city.

Prior to program entry, LaToya was living in a transitional shelter. She was reaching her time limit at the shelter, and while she had been accepted into the program, she could not officially enter as she was only wait-listed for a unit. Staff at the shelter encouraged her to find
an apartment so she would have somewhere to go once her time had ended and she was required to leave. She made an appointment to see an apartment.

I got on the bus and it was close, near my daughter. And, I got on the bus and got down there and I changed my mind. I changed my mind. And, it’s like God said, ‘Now wait. Wait. She say the program gonna call, you know you can’t afford this, so just wait.’ So, I lied to the man—the rental man at the building. I didn’t see no man out there to show me the apartment so he didn’t get the rent. I say I didn’t see him out there. But I didn’t go. And, sure enough, the next day the program called. So, I think I made the right decision by waiting on that.

While it was a decision, it was not a planned decision. Even for Anike, who has accomplished her short-term goals and has specific long-term goals, her decision-making also relies, in part, not to her own reasoning, but to her gut instinct on what seems right. She said that when she has a problem, she tries to “solutionize.” She talks to her case worker, her therapist, and her psychiatrist. When asked if those individuals determine her solutions or she creates them herself, she responded, “Remarkably so and miraculously so, after dealing with their minds and listening to their advice, the right solution comes.” Learning to plan as a method of achieving their goals may not be intuitive for some women. Many women may not have had an opportunity to create a plan as they were forced to focus on immediate needs. Without a planning component, it may be more difficult for women to achieve their goals and demonstrate self-determination.

3. **Goal achievement**

For some women, but not all, both long-term plans and short-term goals seem difficult to accomplish. There are a variety of reasons why women are unable to complete the action steps of their plans. Sometimes, they themselves are fearful or do not have the necessary job skills; other times it is an external influence that stops them. Regardless, women who described themselves to be self-determined were often unable to meet both their own and the academic definition of self-determination.
Alpa said that her plan was to go to work and not sit and ask for help. She was working part-time as a certified nursing assistant (CNA), but did not like it. She wanted to be a mortgage broker. When asked what she needed to become a mortgage broker, she said schooling, but did not have any further details about how to attain more schooling and did not know if there were people to help her find out. Alpa did say that she was determined because she makes more decisions now, but she does not have detailed plans as to how she will implement her decisions (such as go to school). Ruby (who wanted to be a court reporter but was unclear as to how one became a court reporter) believes her goals to be attainable, but then gives an example of something she did not accomplish.

I’m not one that shuns against abilities because of lack of an ability. I think I’m easily self-taught, motivated, and once I jump into something, look, I’m gonna be able to handle you. I get enthusiastic about it. Yes, it’s very much attainable. It’s just I’ve never had the money to do it because of my drug use. Even with the security thing, I was in my madness at that time. And, I stopped using for a week and a half to take care of this and then went back to using and I never pursued at any time getting back into the program.

She moved from expressing a belief in herself to giving an example of an unaccomplished goal. Whether it was the lack of money from using or the using itself, something interfered with her goal accomplishment.

Losing interest in something she starts does not diminish Yolanda’s belief in her ability to accomplish her goals. “If I really want to do it, I’m just gonna do it.” What is not evident is her efforts at formal schooling.

Well, I was just currently at [local business college] last September, or this past March actually. But I like, I like everything as far as schooling, but nothing really interests me there either. I’m confused on what to do with school, ’cause all I can think about is singing. So, I was probably thinking about going to ah … musical school or something maybe, ’cause, like, all through high school I did have like concert choice, I know how to read music and write it and everything. So, I’m like, ‘I think I should probably think about going to something like that, because
that’s the only thing that really interests me.’ I be focused on it for a while, but then months later I’m like whatever, it’s gone again.

She did outline a plan to focus on a music career.

I just met a friend not too long ago and she’s, like, she’s in the industry as well. And, she raps and she comes to the conclusion that it’s not gonna work for her, her group, so she’s looking more into producing now. So, she’s like ‘I got money, you just gotta hurry up and get in here. Just do it. I’ll invest in you. I’m telling you you’re an investment and I’ll do it.’ So, I kinda have someone that’s gonna help out, but it is still gonna take, I’m quite sure, for me to give some money up as well. So, I would definitely have to be working at the same time. Some part-time, if I really want to be serious about it.

When discussing what self-determination meant to her, Elnora talked about being determined, like she was, but then mentioned that she has not accomplished her goal of getting a GED. “Doin’ something for myself that I am determined to do. Finish, like the GED, and I keep putting it off for years and years. I say every year, ‘I’m gonna get my GED, I’m gonna get my GED.’ Yeah, that and just being self-sufficient, like I am.” She continued on to say that she does not follow-through on self-care items.

Everybody—even when I come up here like [Patient Navigator]—she’s helps me with like, I haven’t been to the dentist yet because I want to have brighter smile and I need a tooth pulled because I have a hole in it. And, so I really used to keep a piece of candy or gum in my mouth, ‘cause it’s a hole and if you eat—right—but they changed the program. So, anyway, I’m still wantin’ on that but they send me to, like, the free clinic, you know, get a free pap smear. And, I was supposed to, it’s my fault, I was supposed go to [local hospital] and get a mammogram ‘cause I’m over 40. Didn’t go. I didn’t go. I don’t know if I was scared or what.

LaToya takes ownership of what she has not been able to accomplish. “They have opportunities here. They have opportunities that I talked with … they help me … and my case manager she tells me, about things that they can direct you to, to help you. It’s just me. I haven’t followed through yet. It’s just me. I haven’t followed through yet.” While she admits that fear holds her back sometimes, she also believes herself to be self-determined in the most
important thing in her life, raising her son. Overall, however, she has difficulty following-through on decisions or completing tasks that would assist her in becoming independent.

LaToya: That I’m working on? I put it off. I ain’t gonna lie. I ain’t gonna sit up here and lie. I do know that’s one thing about me, I procrastinate. A lot. I put off on … getting back into computer. That’s something I wanted to do. It’s always ‘I want.’ It’s never … I guess I’m kinda afraid of being … or failing … or ‘cause I’m always feeling like I ain’t gonna be able to do it. That’s what holds me back sometimes. I feel like I ain’t gonna be able to do things. I wanted to … I went to computer school. I graduated from computer school, but if I get on a computer now, I don’t remember what I did.

Interviewer: So, that was a long time ago that you did this?

L: This was … maybe … maybe about two years ago. Not that long ago. It shouldn’t be like if I get on a computer I wouldn’t know what … I mean if I play around with it I probably would know–get into it. But just to sit down and go right to it, I wouldn’t know what … and I did so much on the computer. And, I can’t remember. It’s like, my memory is… what is it? Long-term, short-term … something. I always wanted to–that’s what I wanted to do when I was in school. I always wanted to fix computers when they break down, like a field technician, something like that. But, then I didn’t finish school … and then I can read, but certain things I don’t comprehend. I might mess up. I feel like that, instead of doing something about it.

I: So, then, you don’t do something because you might fail at it?

L: Sometimes I don’t. I let it ride. I let it pass, I put it off. I’m gonna get to it, I’m gonna get to, I’m gonna do it. Just like with another job. The job I have now, I been at two years, and I done get comfortable with that job, but it’s not paying a whole lot. I want more money, you know what I’m saying? The benefits is good, and sometime we get bonuses, but I done get comfortable right there with that job. And, I … but I don’t wanna do it, It’s not a job that you can have a career out of. And, that’s what I want–something with a career, that I can make a career out of.

I: So, to get that job that you can make a career out of, do you have a plan in place?

L: I don’t have no plan in place; no I don’t. I don’t have a plan in place.
Martina describes her self-determination as “when I need to get up and do something, to do it and not procrastinate and keep myself on the road.” To that end, she contradicts her claim of self-determination when she described the number of items she is unable to accomplish.

Martina: I know that [the participating agency] helps me and that, but I feel like for me, I don’t know how long it’s gonna take for me to keep on … and that’s part of taking care of myself. Sometimes, I really don’t do it like I should. And it isn’t ’cause I don’t want to it’s just that … I guess because I never really did it before…

Interviewer: Take care of yourself.

M: Take care of myself in every mannerism like making sure that I go to the doctor’s. It’s been recent because I was like this with my knee for quite a while before I went to the doctor. And, then henceforth, I got a mammogram which I hadn’t gotten since I was in prison. And, things like that. Following through.

I: So, who’s helping you take care of yourself?

M: [The program] has helped me, encouraged me, and given me access to the health care program that they provide and support. And, also my friend who’s a doctor, psychiatrist. She helps give me a lot of support and resources and calls me and because sometimes I put it off and don’t call and make appointments.

Harriet had been participating in various programs within the agency for almost five years, having started in a program for single women and then transitioning into a program for women with children. She said that one of her goals was to get a better job, and when she was asked what she needed to do to get that better job, she replied:

First of all, get the waiver and get my background fixed to where the employer, they can’t look in your files. I need to get that fixed. I really need to get that fixed while I got people willing to help me. ’Cause right now, I worked out the housing, private duty, but I couldn’t get a job in a hospital until I lied on the application and then who knows? So, I know I need to fix that, but you can work in these little nursing homes whereas the sideway investigating the nursing homes and that type of stuff, and there a little slum. Well, I’m not going to say slum. You can work them type of places. I want to have a choice of where I wanna work, like a hospital or something.
She understands the benefit of obtaining the waiver and assistance is available, yet there is still something that prevents her from accomplishing this goal.

As Bernice said, “You push your dreams aside sometimes. I pushed them aside.” She said she stopped going to school in order to take care of her son when he came to live with her. Her goal of going back to school has been put on hold, but she hopes to get back to it. She described what she would need to do in order to fulfill her goal.

As long as I don’t let anything get in the way and start putting it off. ‘Cause I put it off and I keep putting it off and put everything else before myself. I love like that. My family and my friends. Anything else. I just try to be as helpful as I can. Now is the time where I need to really get back to me, because I try, I try. Little Marcus he wanted to come home with mommy, so I let him, see if things would work out, I changed everything around. It really hurt me that I changed everything around and it didn’t work ’cause I was ready and willing to go to school. And, I had my books and everything and I had to go take everything back and whatever because… I didn’t see … I couldn’t see myself not being here for him when he gets home from school, especially with us being apart for so long. I’m like, if I work and go to school, where would I have time for parenting? And, mending the gap. I wouldn’t have any time so I decided to put it off, but I’m getting ready to go back.

She was not the only woman to have obstacles prevent goal accomplishment. For Susan, she frequently deferred her long-term goals in order to address immediate needs and the realities of everyday life.

I never really got around to completing high school, so I’ve always planned on trying to get my high school equivalency, but employment has always been the number one goal for me. Just being on somebody’s time clock. I figure once I get a good job and I’m comfortable and I’m stable then that will allow me time to go back to school and get that and therefore I can get a better job. But right now, it’s putting food on the table and a roof over our heads. That seems to put the education to the back burner. And I hate that, but sometimes you have to do what you have to do to keep afloat.

She has not accomplished her long-term goal of school because fulfilling basic needs (which are not provided as part of a social safety net) has been a higher priority.
This is not to say that all study partners did not demonstrate the ability to follow through on their decisions. Some women gave examples of decisions they made and then the accomplishment that followed. Anike had the goal to obtain a CNA license, which she did. She took the necessary classes from a local community college, completed an internship at a local hospital, and received her license from the state. She completed her short-term goal. Her longer-term goals are to go back to the local college and receive an associate’s degree in nursing and biology, earn a bachelor of science in nursing, be a nurse for seven years, and then teach physical education. Diane had completed culinary school and achieved her goal of becoming a cook in the local public school district. She was one of a few women to outline her future plans in such detail and to show previous examples of goal accomplishment. Janel had a detailed plan as to how she was going to increase her skills to become a receptionist (return to a career manager, increase typing skills, increase database skills, assess the job market, and go to interviews). It is unknown if she was able to accomplish these goals.

Both the respondents’ definitions and the theoretical conceptualizations of self-determination include making decisions and then implementing those decisions. According to their own descriptions, study partners demonstrated difficulty both in the planning and completion portions of the decision implementation process. That difficulty does not seem to be relevant as they describe themselves as self-determined and believe that they are reaching their goals. One possibility appears that their belief in themselves as self-determined is greater than their actualization of self-determination. Again, this is not true for all women, but the majority of study partners had some impediment to their goal achievement, whether it was in the planning stages or the follow-through. Another possibility is that women did not include goals related to exiting a shelter, accessing their own housing unit, achieving and maintaining sobriety, or
reuniting with their children as examples of goal accomplishment. Neither the definition of self-determination used in this study nor the personal definitions developed by study partners incorporate the idea of attempting to accomplish a goal, but falling short in that effort. Self-determination appears to be intertwined with goal accomplishment leaving no possibility for risk-taking and failure. That strict definition limits the interpretation of whether or not an individual is self-determined.

E. **Choices Made from Available Options**

1. **Safety net**

   When women talked about making decisions regarding their housing, employment, and lives in general, they frequently made decisions between a set of available options. They did not create these options; these are the choices within the framework of their lives. Women talked about making choices among options and regardless of the quality, the ability to make decisions regarding the options contributes to an internal belief of self-determination. Limited options were not limitations on self-determination.

   The women provided examples of choices that they had made based upon the presence of, or lack there-of, a social or financial safety net. A safety net, whether it is provided by the government, community, or family members, is something that guarantees that basic human needs are met. It is a means of protection from hardship or loss. Many women described accessing the homeless system because they did not have friends or family with which to live; they had no other options. Some had originally resided with others, but eventually that was no longer an option. The lack of a safety net to meet the basic need of housing frequently forced women to enter the homeless system or live with a man simply to have someplace to stay.
Anna’s safety net for housing was taken away from her by her mother when she was a young adult. Her mother told her that if she moved out, she would not be welcome back. As a result of not having this safety net, Anna viewed marriage as her only option.

Anna: I didn’t want to marry him. I wasn’t in love with him. I didn’t even like him…

Interviewer: Then why did you?

A: ’Cause … well, my mother said, ‘If you leave this house, you can’t come back.’ Because my brother would leave and come back and leave and come back and be very disruptive. … So when she said, if you leave here, you can’t come back, my safety net was gone, my mistake-proof option was gone. So, I knew that I needed some sort of a safety net, because I knew I didn’t have skills to go out and live in a big city. I’d never done it before. I didn’t know how to get an apartment or a job–where do you go to look? And so, ya know, so I literally saw my options as either go to the city and be homeless for who knows how long and I didn’t know how to be homeless ’cause I’d never been homeless or marry this man who, we were dating and having sex anyway, so and I was Catholic so I figured at least if we have sex I won’t go to Hell. So, um, I literally saw that as my two options.

The lack of a safety net limited her options, steering her to make a decision she may not have made otherwise. She reinforces the idea that she chose to marry in order to not be homeless.

When I was in high school, and then I went to college ’cause you’re supposed to. And, that didn’t work out so well, but I really wanted to come to the city and live and I realized that I had no skills to live in a big city because we lived in a small town. We were from the suburbs of the city and then moved to Smallville, which is a very small town in [a neighboring state]. And, I realized I had no skills to live in a big city and that terrified me, so I decided to marry the first man who asked me, to avoid being homeless in the city.

As a former drug user, Bernice knew how influential the drug use of other people could be. She describes having to leave the family environment because of rampant drug use. While she could have remained there and not been homeless, the house could not be viewed as a housing safety net due to the drug use of family members. Finally, she decided not to return, but to stay in the city and become homeless, rather than repeat what had happened previously.
It was always going back to the same old environment which kept me falling off the wagon, so I decided this time, to stay up north. Which I’ve been living in the city off and on since 1994. So, but I would always go back to my hometown which is a small town over near [small city] and be around my family. My mom, I love my mom dearly, but I would also go back to try to help and rescue and be with my mom. But, I have siblings that use so, therefore I chose not to go back. And, I still love my family dearly, but I just didn’t want to be in the environment.

She lost a housing safety net because she did not want to be in that environment. Without Bernice in the house to help pay the mortgage, her mother eventually lost the house through foreclosure and thus that particular housing option is now lost for all family members.

Quanda was kicked out of her mother’s house when she was 18 because she did not “get along” with her mother’s boyfriend. She lived with her own boyfriend for a while, but left when she caught the boyfriend’s mother using crack when she was supposed to be watching Quanda’s baby.

I didn’t go straight to a shelter; I went to a friend first. Actually, it was the guy that I was with. I went to try to go live with him and his family, but then his mother was on crack. And, how I found that out when I left my baby with her, and I came back and she’s doing it right in front of her. Yeah, so, that like blew me off the rocker and so I ended up leaving and the first shelter I went to was called [shelter].

After that she bounced from shelter to shelter until she entered the current program.

Interviewer: Did you have any other places you could’ve gone instead?

Quanda: No. I didn’t. But I was being really stubborn, but after a while, I was like, you know what? I can’t be picky. My children need a place to stay, I need to get my kids back. I just went for it.

She had no other options and therefore saw the current program as the only choice.

Diane was offered places to stay, but because of circumstances surrounding each location, none of them were acceptable to her. They included living with her son, but he lives in an outer ring suburb which was too far away. Her mother offered her space, but because she
lives in a senior apartment building, she was not allowed to have other people living with her. Diane did not want her mother to lose her housing. She even tried living with her sister, but that did not work out either. She really saw the homeless system as her only option.

You know, ’cause I was basically alone, which was fine, and I had no other resources. I had no money or an apartment or security to get one and I didn’t want to live with a man or anything like that. That’s not my style. So I decided, and I thought about it, and everyone in my family was against it. Oh, no, why are you doing that? and blah blah. Well, this is a choice that I have to make because maybe I can get some help, you know.

Having to leave the program in two years is a daunting prospect to Mary. Even though she is in the program, due to her seizures she feels that she needs continued housing support.

Mary: And in two years I have to leave. And, I just think that, by me being a recovering drug addict, I have seizures. I just think that I was going to find a way to stay in the program a little longer too. I mean, I’m gonna have seizures the rest of my life. It’s like, is there any type of program I can get in?

Interviewer: So at this point, do you have a plan of what you’re gonna have to do once the two years is done?

M: I don’t have a plan yet but I’m gonna have to start talking to my case manager about it because somebody was telling me that I should have a doctor to write a note saying that I have seizures and I might look healthy but seizures affect the brain.

She would like a safety net for housing—something to guarantee her a place to live—once the program is complete.

Elnora accessed the homeless system because her safety net options were so poor that they were unacceptable. When she first came back to Chicago, she stayed with her sister, but decided to leave because her sister was verbally abusive. After which she entered the homeless system. When asked where her husband was living at this time, Elnora talked about his mother’s house. She described it as filthy and unsanitary, filled with rotting garbage and animal feces.
Interviewer: So your other option, if you didn’t want to be homeless, was living with your abusive sister or living in unsanitary conditions.

Elnora: Right. Exactly.

I: Or being homeless. Those are three fantastic choices.

E: Right, and I thought about it when I get off the expressway. I was like … ’cause that’s where I usually go to spend time is my mother-in-law’s house—I can’t do it. I didn’t even want to do it this time. I was like, uh-huh, I [inaudible] But I could’ve stayed there, but it really is unsanitary.

Elnora was still upset that her grandmother had sold her house, so that was not available to her.

“She sold the house, because they had … which I think she should’ve said something to me about before she sold the house. She just went and sold the house.” Because she had no other options, she entered the homeless system.

As a consequence of not having a safety net, women frequently mentioned living with a man in order to have housing. As part of her experience of homeless, Harriet said, “I lived with a man just to keep a roof over my head.” When discussing why she moved in with her abuser, Martina lowered her voice so much it was difficult to hear her. The memory seems to haunt her.

What I still have nightmares about is when I moved in with my abuser. That was horrible. That was horrible. I felt trapped. I didn’t have a job to pay my rent where I was living anymore, and I didn’t really want to move in with him but I felt it was a place to go. I wanted to, but I really didn’t want to. I wanted to have my own place. I remember how I felt. It was so awful; I didn’t really want to go, but I did. I went against my own self and that’s what I did. I moved in.

After she was released from prison, Martina would have liked to have moved in with any of her family or friends, but they did not want her to stay with them. That was hard for her to accept. “I had a real difficult time accepting that ’cause I felt rejection. I felt really hurt.” As a result of there not being some type of public program or family member to assist with meeting the basic human need of housing, she entered the homeless system.
Several women entered the homeless system after exhausting their existing safety nets without having additional options available to them. After her seizures and spending two months in a coma, Janel lived with her brother and sister-in-law for an entire year. She felt that after utilizing that resource for so long, she needed to access services that would help her become independent. In fact, she could not wait to leave. She would tell herself, “I cannot wait to get out of this house.” For her, the safety net her brother had offered her was only sufficient for a period of time and after that it was no longer adequate.

Yolanda left her mother’s home when she was 14 and had been living on and off with friends. One February, her friends had invited her to stay with them.

Come December, they were talking about, there’s not enough room for you. I’m like, ‘Ya’ll knew this before you asked me to stay here! It’s the same room that’s here when we moved here.’ How did you…? I’m just like, whatever, I’m leaving. I don’t have enough time for like. So yeah … in the middle of school and everything you’re gonna tell me that you want me to leave. I’m like, okay.

Yolanda did eventually leave and found her way to the current housing program.

In addition to housing safety nets affecting their living situation, women, specifically drug users, made drug use and child care decisions based upon a family member’s willingness and ability to take care of their children. As Harriet said, “I got three kids. I never really, I mean I took care of them, but I was kinda young and my mom was living, so she was a big help. But now, my son now, there’s nobody, just me.” After being released from the penitentiary, Harriet was alone raising her child, and this fact helped her remain drug free. She said that she remains self-determined “’cause I got to take care of my son, my child. I ain’t got the mother around and other people.” She also indicated that she used drugs and was homeless because that was what she wanted at the time. “But I got to say, when I was out there, I was out there by choice.”
Nera’s two oldest children were raised by her mother from birth, but her youngest remained with her ex-husband until he was imprisoned. At that time, her youngest daughter came to live with her, but Nera’s lifestyle (drug use and prostitution) was not good for a child.

When she made 10 years old, her father went to the penitentiary, [before that time] because his family was kinda scared, they would sneak her up here for me to visit with her. So, when she made 10 years old, his mother was beating her for some money that was missing, so she ran away to a fire station. So, they saw the whips on her, now days if its violence when you get whipped like that, so they called up here and said, ‘We have [name of child] and she wants to come where her mother is.’ Her daddy was in the penitentiary so he couldn’t really do nothing to stop it. So, she came here… I got an apartment and I took her in with me. But being with me, I was working at some place I went to work at, and the guy that I had at the time, he was using. He was using or whatever, but I decided to let her go stay with my mom, which she really didn’t want to stay with my mom. She wanted to be with her mom. So she stayed with my mom for, until she was 17.

The mother as a safety net or guarantee for child rearing means that that Nera does not need to alter her own behavior for her children.

LaToya specifically said she never worried about her children when they were with her mother and it was not until her mother passed away that she made the decision to stop using drugs.

LaToya: So, I was using drugs while I was pregnant with him and ah … we was in the hospital afterwards, and ya know, I just knew I had to do something with my life then. You know, I wanted my baby. Yeah, I had my son there with me. I always had my son and he’s still with me right now today.

Interviewer: What do you mean when you say you wanted him with you?

L: What I mean was … what I mean is that DCFS became involved and it was then that I made a choice that I wanted my baby and I had to do something about it, you know. This addiction I had … to raise him, and I didn’t want him to be in the system. And, I called him my savior child because he … God and him helped me … helped me save me from myself. At 41 I had him, at 41. So that was a blessing right there. See my mother had raised the rest of my kids. My mother passed on in 2000. So I figured this was my chance, to you know, do the right thing and get a relationship with my other kids. So that’s what I mean by I
wanted my son with me. I didn’t want no one to have him. I want to be the one to step up and raise my baby.

I: So, he was really a turning point for you in terms of your drug use?

L: Yeah, very much so.

I: Do you think without him you would have made the same choice to stop?

L: [pause] Not at that point, no I don’t think so. No, I don’t think so. I think that was the point right there that God was telling me to wake up. It’s time, I’m getting too old. It’s time, it’s time to change. That was my turning point right there. I don’t think I would—I don’t think I would have if I wouldn’t have had him—I don’t think I would have. And, I had a choice to either, you know, let him go and get in the system and let somebody else raise him or do I want to raise my baby or do I want to continue being on the street. I chose to raise my baby. I did it so long, it was time, it was time to sit down. It was time to sit down and be the person that I’m here to be.

I: So he’s 4, now?

L: He will be 4, July 3.

I: How old are your other kids?

L: I have a 29 year old, I have a 23, 18 and 16.

I: Okay. So they’re a lot older.

L: Yeah.

I: Do you think there’s something special about this last baby that made you change your ways—’cause it sounds like with the other ones you didn’t.

L: Yeah. Yeah. It have to do with my mother—’cause my mother was there. I was there in the house with my mother when I had my first child. And, um … that’s when I started getting … you know, going in the street, partying, after I had my first one. And I’m knowin’ that everything’s okay ’cause my mom will take care of my babies.

I: So, she was like a back-up plan?

L: Yeah. And there was a lot of times … I didn’t just … at first in the beginning it was just fun, hangin’ out. I was like … 17 when I had him but I didn’t really start goin’ out ‘til I was like 20. And so … partyin’—I just got a taste of partying
and going out, going clubbing. And, it was okay for me to go out because my mother, because on the weekend I was still at home with my mom and my baby, but on the weekend it was okay 'cause she a keeper. And, then I had ... as time went on I had three more kids. The last two ... um ... I used. And, my mother, well, my mother got one of them. My youngest daughter, my sister got her out of the hospital. My sister have her ever since. So I always felt like, well, and I turned my rights over to them, 'cause I figured that they better off with them 'cause I know I was goin' back and gettin’ high. Then in jail and all that, so really I was okay with them being with my mom and my family 'cause I knows they’s was gonna be okay. And, who’s to say? If my mother was still livin’ now, you know, when I had him, might’ve been the same thing. I don’t know. Everything happen for a reason.

Having her mother as a safety net for her children (ensuring that their basic human needs were met) affected her decision-making regarding drug use and child care.

For Bernice, her safety net for her children not only included her mother, her grandmother, and her youngest son’s father, but also the child welfare system. At one point, she felt that her children were better off entering the system than staying with her.

Because when I was using, and the beginnings stages, the really dangerous part of my using... I took it upon myself, which I knew nothing about how to do it... I took it upon myself, I gathered up a couple of pairs of clothes with my boys, and took them down to DCFS. I knew nothing about DCFS. But I know that they needed to get away from me. So, I took them and I took them to DCFS and I told the people, ‘You know what? I need to send my kids somewhere. Because ... they’re not good with me right now. I can’t continue to hurt ’em like I’ve been doing.' And it was like, ‘Bernice, you can’t do that that way. You have to, you know, we have to find a placement for them. So, you go back home and we come up with a solution.’ So, I sent him over with, my youngest son, with my grandmother. Michael’s father was deceased; he died when he was 7 months old so I was a single parent with Michael for a long time. And then, you know, ... DCFS came in and they stayed with grandparents for a little while and then they came home with me in '94 when I, 'cause I went to treatment and I did everything they asked me to do. And, then there was a time when they were getting ready to come home, and I used. And, they were about to come home in a week, and I had just got, I got a Section 8 apartment and everything. And, I used and I tore the place, I wrecked the place. I was paying like $6 a month in rent. Very nice apartment, two bedroom, but I used. I stressed out. I just ... I couldn’t bear the thought of being a parent, of being responsible. I don’t know what happened actually. Honestly, I don’t know what happened, but it didn’t happen.
At that point her oldest son remained with her grandmother and the youngest son went to live with his father in another state, where he was still living at the time of the interview. Regardless of her drug use status, Bernice knew others were available to assist her with her children during times when she was unable to care for them herself.

While Teone was actively using drugs and living on the streets, her mother was taking care of her daughter. Both Teone and her daughter were living with Teone’s mother when her mother forced Teone out of the house (removed her safety net), and retained custody of her granddaughter. That was a significant turning point for Teone.

Teone: Homeless was really the rock bottom, because before then I was living with my mom. So, I was alright before then. I, being an only child, it was just me and my mother. I was alright and when I became homeless, that’s when things started to change for me.

Interviewer: Would you say it was the kick in the pants you needed to maybe change your life?

T: Yeah, yeah that tough love from my mom. Because, like I said, it’s just me and her. And, when she turned her back on me, then I had to rely on the people on the streets, and yeah, that was the kick right there. I wasn’t allowed in the house. I wasn’t allowed to even come over there. That was something else.

Once Teone lost the safety net of her mother’s home as a result of her drug use, she did not have any others to provide her housing. She explains:

Interviewer: How did the drug use impact you?

Teone: Because I lost a lot. I mean, before then I was living with my mom and throughout the drug use she couldn’t take no more. So, she put me out and that’s how I became homeless. In the process of using the drugs, it turns away a lot of people. You break and burn a lot of bridges, so to speak. And that’s what had happened. So I had nowhere else to turn but to be out in the streets.

I: So it wasn’t your choice to leave; she threw you out.

T: It wasn’t my choice, no. But I guess I had done so much damage that … you know to her, so that’s why.
I: So, when she kicked you out, where did you go?

TR: I just lived in the streets and then from friend to friend like that, but mainly I was in the streets. Because a lot of people, they don’t really want you staying with them, but if you not paying any rent or anything or carrying your weight. So, you might be able to stay there maybe a night or two, but other than that, no. Back in the streets.

While living on the streets, Teone found that “I missed my mom. I missed being her baby. I missed being treated like she used to treat me. And, then when she turned her back on me, it wasn’t supposed to be like that.” It was then that she decided to enter treatment and become clean. “I changed my life.” She now has a positive and supportive relationship with her mother.

The previous examples show how the women’s decision-making was influenced by the presence of a safety net that would assist them meet their basic human needs. Women would choose entering the homeless system or living with a man as a result of a lack of a housing safety net in their lives (meaning nowhere else to go). Women also made decisions, specifically concerning their drug use, based upon whether or not there was someone else to care for their children. While the presence of a safety net appears to be of great bearing in decision-making, women overall do not feel limited by its presence or lack there-of. They still see themselves as self-determined.

2. Active choices

For the women, decision-making often meant making choices from available options. Sometimes these choices were made from undesirable options. Regardless of the options themselves, women still viewed them as options, saw themselves as making active choices within those options, and gave little to no acknowledgement of the limitations of these options.
For women living in abusive situations, their options were either living with the abuser or entering the homeless system. For Theresa, life with her husband was very constrained. She stayed awake until he fell asleep for fear that if she fell asleep before him, he would kill her. One day she made the decision to leave. She found shelter listings in the phone book, called three of them but they were full, and “decided to call one more.” She thought to herself, “If I’m gonna be dead in one hour” that she should keep calling. She left later that day with all four of her children. Regardless of the fear she felt, she does see it as a choice she made to leave.

Anna viewed her choice to not fight her husband for the divorce he wanted and to leave an abusive situation as active decisions. Anna felt that marriage should be forever, regardless of the abuse she suffered, so a divorce was not what she wanted.

If I had decided to stay, he would have gotten a lot more violent and my children would have horrible memories of their mother and father being very physically violent with each other. So, I just understood that it was better not to push it—just to get out while I could. I was given the opportunity—instead of being killed—I was given the opportunity to choose to leave, so I thought it was a better decision to just leave.

However, from her perspective she made an active choice, regardless of the fact that it was a choice between an abusive marriage and an unwanted divorce.

When Alpa was asked if being homeless was better than being in a violent home, she replied that yes, it was. When the police came, she “couldn’t talk” and she “couldn’t eat.” She was mentally and physically sick. It was “better to be in shelter than to be with him.” Anike left an abusive husband to come north, where housing with her family was not an improvement.

Okay, so I came here, and I stayed with my aunt but her husband and her is in an abusive situation. And, he didn’t want me there. And, I went to my mother and she’s in an abusive situation so I asked her to take me to the police station and they dropped me off.
After arriving at the police station, a social worker helped her find space in a homeless shelter.

Repeatedly Anike is making decisions to remove herself from situations that are abusive, even if that results in entering the homeless system.

Elnora left her sister’s abusive household and entered the homeless system. She believes homelessness to be a better experience than living with her sister.

Elnora: I had—well I’m not gonna say that I didn’t have a choice to be homeless ’cause I could’ve kept staying with my sister and takin’ abuse from her, but I couldn’t do it. I don’t like to be talked to in any kind of way, especially because you don’t feel good today. The day that I was goin’ to the shelter, she said, ‘Well, you don’t have to go.’ And, I didn’t think I was going to go myself, I’m like, ‘Oh, please, I don’t know if I’m going to be able to do this.’ But I went on and when I got there … the atmosphere … I mean this place was just really, really nice.

Interviewer: Better than living with your sister?

R: Yes, 100% better… I just cannot live with her. She’s just that kind of person—if I have to live on the sidewalk I could never live with her again.

The debate could be had as to whether living in an abusive household or entering the shelter system are quality choices, but to the study partners, the quality of the choices appears to be irrelevant. They are still actively choosing, which makes them decision-makers.

A few women spoke of experiences in which they had to decide whether tolerating disrespectful living conditions in the shelter was better than the alternative. Susan described her experience in a homeless shelter:

You have these people who are supposed to help you with, you know, raise you up and stuff like that, and they just tend to belittle you. So it wasn’t a very good experience at all. You have to really bite your tongue a whole lot, take a lot just because of the simple fact that you are homeless and you don’t have anywhere to go and they use that as leverage, as power. It’s like they get off on treating you that way because they know as soon as you say something back to them—was that you and me was in the street and something like that and you was to say something to me and that would be something you would expect, a reaction back, but they know that if you act the way that most people would, they can get you put out.
She stayed because the other options were not acceptable to her.

It wasn’t your own, but … what can you do? It’s better than sleeping on the park bench or something like that. It’s a lot better than that, not that I’ve done that, but … it’s not a good situation but you have to do what you have to do to make sure that you and your child will not be outside.

Quanda’s shelter experience was also not a positive one.

By me being in the shelter, these shelters here is nothing nice. They make it seem like they care. Like the last one I was in, all they was caring about was the money, how much they was getting for each person that come in. How much donation, funding they was getting or whatever and they would use that for whatever. Like one shelter I was in, it was on [the South Side]—that was horrible too, ‘cause they would like give us the most disgusting food ever that they would not eat themselves. They’ll look at it and like turn up their nose and then they’ll give it to us. Why would you give us something that you know you’re not gonna take home to your family?

She said that she stayed because she “needed to get my kids back” who were living with someone else.

In addition to choosing to live in disrespectful shelter environments, women made active choices regarding their survival. “I obviously have the option to prostitute and I have thought about that,” said Anna. Both Anike and Bernice made active choices to not commit violent crime. This is what Anike said about discovering that her husband was having a sexual affair with her best friend.

I know we’re recording … but my first thought was that I wanted to kill him. But I said that I cannot kill because that is a violation of the will of God and a violation of the land. So I fled. Ya know, I took what I could get together and I got a bus ticket and I got here… I think that was the best thing I’ve ever done was to make the decision not to do anything that I would end up in prison.

Bernice said something similar about not hurting her partner, who had betrayed her as well.

Bernice: And, um … all I can remember is … the thing that really triggered me to get some help is the fact that I wanted to hurt her. I really wanted to hurt her and she knew that and so my mind was telling me—’cause when she went, she went for
the phone, the last time to call the police or whatever, so… It was a trip. I just grabbed her, grabbed the phone and grabbed her by the neck, and I’m like, just snatch the phone off the wall, and threw it or whatever. And, she sat down and I was looking, just looking around, thinking how I could just take her out…

Interviewer: What stopped you?

B: ’Cause she must have saw it or felt it or something. Because she was like, ‘Well, I know what you’re thinking but you shouldn’t do it cause, just remember that I didn’t make you do anything. I didn’t make you do this. I didn’t … It was your choice. Everything you did, you decided to do it.’ She said, ‘Whatever you’re thinking about doing, please don’t do it. Don’t do it.’ And I was like, you know what? I can’t do this anymore. I just … man, that was the turning point for me. That like, that was it, ’cause if I get so mad and in such a position to really want to hurt somebody and I’m just losing all sight of everything, I just lost it. So I was like, you know what, I gotta get some help because I’ve never been at the point where I really want to hurt someone and she was right. It was all my decision-making, all my choices, and I took myself to that point and I allowed myself to stay and be abused and be talked down to, and so, I was like, ‘Just leave me alone and let me rest and I’m leaving in the morning.’

These women made active choices to not commit crimes that hurt others and could have potentially resulted in a prison sentence.

3. **Accessing resources**

For many women, it is not simply that they are choosing between available options that make them self-determined. They identified those options. Women talked about navigating the shelter system on their own in order to obtain needed resources (such as food stamps or an employment program) and advocating for themselves in order to obtain information and apply to the current program. Even following program rules was an active choice that they made.

Accessing resources was something that Nera said she did while living in her car and abandoned buildings. “I knew to go to the kitchens, the soup kitchens, they feed you, and the pantries that give you food.” LaToya reinforced the notion that you have to find things out on
your own. “It’s a lot of opportunities around here if you just get in. If you put your … one foot in front of the other. Do what you have to do to get where you want to get.” Mary suffers from seizures and was receiving Medicaid assistance, which meant she accessed medical care from the county hospital system. Navigating that system is not always easy. “I, pretty much from 2001 to now, I probably only had three seizures, but I was telling my doctor like I gotta have a CAT scan of my brain in September. ’Cause I’m a county patient and you got to wait ’til they give you a date.”

When Theresa wanted to leave an abusive husband, she looked in the phone book for shelters and simply kept calling until she found one that had availability. Chanise also had to use a phone book to find help. Upon deciding to stop using drugs, she did not know how to get assistance with quitting. Not knowing anything about treatment or the assistance available to her, she was forced to decipher it on her own.

I abused alcohol and mind-mood altering drugs such as crack cocaine and different things like that and finally one day I just sick and tired of my life going the way it did and I sought help. I actually looked in a telephone book and I looked at enough programs on television to know that could find help somewhere. And, I looked in the phone book and I called several places and I was getting kind of discouraged because a lot of places wanted you to be detoxed. I didn’t understand what detoxed was. I was ignorant to that. I thought detox was they give you some medicine to clean you out and you detoxed. Come to find out I need to go to a place and just no use anymore and that was cleaning my system.

She was able to access a place for detoxification, and from there moved on to a recovery home.

Nera had to advocate for herself to enter both an employment program and her current housing program. She had been in a transitional shelter when she found out about an employment program from her roommate. When she could not convince her case manager at the transitional shelter to help her apply for the program, she returned to a support service organization that worked with prostitutes (where she had accessed assistance previously) and
enlisted the assistance of a case manager there. Once in the employment program, she decided to apply to her current housing program. When she asked her case manager at the transitional housing program for assistance, she discovered that the case manager only had an outdated application form and was not supportive of her application to the program. Nera asked an employee with whom she was working at the employment program to submit an application on her behalf. He did, and would contact the current program whenever Nera requested that he follow-up on the status of her application. Eventually, she was accepted into the housing program in which she currently participates and obtained her own unit. However, she firmly believes that if she had not done all of the application and follow-up work for first the employment program, and then the housing program, none of it would have happened.

…these people don’t come out and look for you. They don’t come out, knock on your door, and ask if you need some assistance. Do you need this here? You have to put in some efforts towards reaching out to the places. Nothing that I have or nothing that I’m achieving, they came and tapped me on the shoulder and say, ‘Nera, you need a job girl?’ … I had to apply myself.

Diane not only accessed an interim shelter on her own, but she also obtained information about the housing program on her own. In terms of the interim shelter:

Diane: I had heard about the community shelter and I … you have to apply and have an orientation and then you call every Monday to see if there’s a bed available. And, I did that for a month. And, in May 5, 2006…

Interviewer: So, you have to be pretty determined to get into that shelter as well.

D: Yes, you do. It wasn’t that hard to get into the [other emergency shelter] … Remember I told you I was working at this nursing home on the South Side to get food stamps and one of the guys that was working there gave me all the shelter information. Community shelter was on there, but I found out I had to do that, so I went down there. Yep, and I went through the orientation and whatever and I called every Monday for a month.

She had to do something similar to get into her current housing program.
Diane: I didn’t know and I asked the counselor um, Miss Smith at the community shelter about it because I heard women talking about it and so I asked her about it. And, she said that she would … that she would have to apply for me, and I’m like fine, but I needed to have been making $10,000 a year. And I had just started a part-time job while I was in culinary school at [local food pantry] and I wasn’t quite making $10,000. But then, when the class was over I started working more hours and I told Miss Smith that I think that I’m making at least that or a little more. So, we did the application and yeah, I got accepted.

Interviewer: So, you found this program. It wasn’t that someone at the community shelter said, ‘Hey, you should apply for this.’ This was your initiative.

D: Yes, it was. I had to have tenacity. Yeah, I heard some of the other women and I asked them about it. Yeah, they told me about it.

Not every social worker or homeless program case manager is aware of the participating agency’s programs, so Diane was not the only one who had obtain information on her own and then advocate to be accepted. For Anna, she had to work on her own to find a program.

When I was in the homeless shelter, the case managers never suggested anything. They never suggested how you get out of here, what can we do, how can we move you forward. Everything was based on what I had looked up and what I had done and what I had asked them to do or insisted they do or in this case, harangued her until she could get it accomplished. And, they didn’t seem very forthcoming with any sort of, well, there’s this program you can go into or there are these options, it was all very, on your own, do what you can and just … [housing program] apartments, my one case manager gave me the flyer that said that space was open so I went down there and filled out an application and they never called me, so what are you supposed to do? What am I supposed to think? Okay, so then this thing came open, so I figured at least I would not be in a homeless shelter.

Some women also refer to following program rules and regulations as active choices. For Chanise, she first made the choice to accept the rules at the recovery home, and then again once when she entered the current housing program.

That’s no different than your home. You make rules. Nobody’s gonna come in your home and disrupt your rules or they gonna have to go. So that’s … yeah, we had choices, you had the choice not to be there. You know what I’m saying? It’s just like this program. You have a choice. They have their rules. They get you this apartment and I mean-Sally, Sue, and Jane can’t live with you because this is not their program. You gotta get your own apartment if you’re gonna do that.
Bernice summed it up like this: “They don’t care what you do as long as you stay sober and pay rent.” She went on to say:

You come to these people’s program; they’re going to want you to do something. You don’t get something for nothing. [laughter] You gotta give up something to get anything. So, they want your time, they make sure that you maintain your sobriety, and making sure that you’re being independent and you’re doing what your supposed to be doing to maintain and, you know, be responsible. It’s cool and at the same time, you want your subsidized unit, but at the same time, you do it … it’s good for someone whose never been on their own to have this program and all that … all those people … and all those connections. But for someone like myself, okay, I’m thinking, just give me the apartment and leave me alone. I did what they asked and I’ll continue to do what they ask of me.

Theresa said that she was not concerned about what the program wanted her to do, but went on to make a statement that would show that she is following program rules. “I know that as long as I have a job and pay my rent, they’re not going to kick me out. I’m not doing anything wrong.”

Janel described the rules as similar to if she was renting her own apartment, including “no music up, no loud parties.”

Women clearly see the connection between maintaining their housing and following program rules. “I mean if you was in any program, you got authority. So right there there’s nothing here that stands out that you wouldn’t like,” said Harriet. LaToya gave an example of a program rule that she followed because she was in the program.

Interviewer: Can you give me an example of something that they make you do in the program that you don’t agree with?

LaToya: Hmmm … that they make me do? I can tell you that when I first got here there was something I didn’t like but I had to do it.

I: Let’s hear it.

L: That was making meetings with them. You know, they have their meetings on certain days and I didn’t like that. I wanted to go to my own meetings, but I did, if that’s what it took for me to get where I’m at now. So be it.
I: So even though you didn’t want to, you did it anyway. Why did you do it?

L: Because if I wanted to be in this program, and that’s their rules, I’m gonna follow those rules. I’m still in somebody program, so I have to follow rules. Things … it ain’t about what you want to do or what you don’t want to do, it’s about what you have to do sometimes.

I: And, the rules and regulations … do you think they’re reasonable?

L: Yeah, they are. They are.

Susan said that while she would not make any changes to the current program and felt that the program was fair, she did have negative things to say about the previous shelter she was in and how she had to choose between disrespectful staff and being homeless.

It was hard because you were so-you were independent and you used to walking to your own drumbeat and then you’re here and you come into this facility already just at the bottom of the bottom, pretty much. It was just your whole self-esteem, your emotions is-just everything is totally shot. And then you have these people who are supposed to help you with, you know, raise you up and stuff like that, and they just tend to belittle you. So it wasn’t a very good experience at all. You have to really bite your tongue a whole lot, take a lot just because of the simple fact that you are homeless and you don’t have anywhere to go and they use that as leverage, as power. It’s like they get off on treating you that way because they know as soon as you say something back to them-was that you and me was in the street and something like that and you was to say something to me and that would be something you would expect, a reaction back, but they know that if you act the way that most people would, they can get you put out.

By not following the rules and regulations, their only options could be a return to shelter living or having to rely on family and friends.

Vanessa was on the only one who expressed great dislike of the program, but she too followed the rules and regulations because her other option was to return to the shelter.

I don’t like it, at all. And, it could be because of the case manager that I have, she’s only been a case manager for this program for a year, just about over a year now, and she is very insensitive. She describes herself as being pushy. I don’t like that they don’t allow you to see the apartment because I had told them, I had said, ‘Well, with the first apartment you all didn’t let me see it until I was about to
move in, but at the time when you all did let me see it before I got my stuff out of
storage.’ And, I’m saying to myself, now you know how much stuff I had when I
brought it to the apartment, what is the problem that you all couldn’t let me see
this apartment? But you let me move in and then you call it a fire hazard. She’s
just said, ‘Well, Vanessa, I’m the lowest on the totem pole and you know those
are not my decisions and this is just how the program works…’ and so on and so
forth and all of that. So, I-I-I just don’t see it. You all are used to people who
have only a backpack and this is great for someone who only carries a backpack.
I don’t see no harm in letting someone see the apartment ’cause-but their thing is
you have no choice. It’s either you take it or you don’t take it. So if you see it
and you don’t like it, then this is all you get. But at least let people have that
choice. ’Cause with, when I was at [other shelter], and I was still at [other
shelter] a whole year before they closed. You know if you all had shown me the
apartment and I said, ‘Okay, that’s not gonna work for me, I’m just gonna go
ahead and stay at [other shelter].’ Okay, but they don’t see it that way. They just
see it as, well, we’re gonna put you in the program and you have no say so and if
you don’t like it you go back to a shelter. And, I’ve been told by my present case
manager here, you know, ‘Well, Vanessa there’s always a choice. You could go
out and pay market value rent or you can go back to a shelter.’ Okay. Sigh. That
is so insensitive ’cause they know if I could pay market value rent I wouldn’t
need them. And, they know I’m not trying to go backwards into another shelter.
So basically it’s na-na we got you, so what you gonna do about it?

Her experience with the agency is not positive and she does not care much for the program.

However, she understands that she cannot afford fair market rent and does not want to return to
the shelter, so she is adhering to rules she does not like and tolerating was she feels is
disrespectful behavior in order to not be homeless.

4. **Choices made from necessity**

Throughout the discussion of making choices, women are unable or unwilling to
acknowledge the limitations of their options. It may be that they cannot imagine their lives
differently. As discussed previously, future dreams revolved around the fulfillment of basic
needs which parallels their current shorter-term goals. That similarity could indicate that women
do not envision themselves as having more options available to them in the future. Choosing
from available limited options may simply be the reality in which women expect to continue to live.

Women discuss making choices from available options, even if what they choose is not necessarily what they want or an ideal situation for them. They are still actively making choices, even if it is not the choice they want to make. Anna would have preferred to have had an apartment on her own. “I was looking at homeless shelters because I knew I just couldn’t get an apartment off the bat … and HUD, from what I understood, Section 8 could be months, maybe even years on a waiting list.” Alpa states that she chose to enter into the program, but only after she discovered that her green card would not allow her to go to Canada. Her preferred choice was not available, leaving the program as the next best option.

Necessity sometimes dictated program access, rather than choice. Diane talks about accessing food stamps.

You have to work for food stamps. I had applied for food stamps in November of 2005 and … I went to work at a nursing home for the food. You know, it wasn’t the greatest. I had never been on food stamps or anything; it was just something I needed to do. Well you’ve got to do this if you’re going to survive.

Bernice participated in an employment program specifically for felons, even though she felt that she should not be obligated to because she only had one felony.

Also through [employment program] I started out in the program, which is … it’s a program for felons, people who have a felony. Ya know, I was like, I really didn’t deserve to be in the program because I only got one. That was like, my first time getting in trouble like that, but they decided–suggested-that I go through [program name] just to build up a work history or whatever again. But I worked all my life. I just went through it because I decided, I told myself just to do what the people that I get involved with this time, just do whatever they suggest so I was just following their suggestion.

Both Quanda and Susan did things that they did not want to do in order to escape homelessness. Each talks about their choice being a decision. They were not decisions that they wanted to
make, but rather ones they had to make. For Quanda, it was leaving her children with others so
that she could focus on herself and what she needed to do to in order to exit the shelter system.

Interviewer: Do you feel you made the right decision by leaving your kids with
their father and their grandma?

Quanda: Yeah, because when they was with me, I couldn’t look for a job. I
couldn’t get into school because most child cares close at 6:00 and have to have
them there at a certain time. That was pretty hard for me, especially on public
transportation. I had three babies at the time. They was 3, 2, and my youngest
was like about 6 months. So, that’s pretty hard to actually try to get them ready
and get them into school and me trying to go to school. I noticed when I left them
behind I was more determined to get them back, so I did everything I could to do
that, and I got them.

For Susan, it was tolerating disrespectful treatment from shelter staff. She did not like it, but felt
it was something she chose to do in order to remain housed and continue to work on her goals.

Susan: You just have to stay focused and try not to let anybody tear you from
what you’re goal was. You have a lot of that come through you’re way. Like I
said, a lot of staff trying to abuse their power. There’s always something. Trying
to get you put out knowing you didn’t have anywhere else to go, stuff like that.
But you have to stay on the right path. Keep focused and realize that you’re there
for a reason, and if you’re there for housing, that’s what you’re there for, and that
stuff you have to do to get, to gain housing, you have to bite the bullet.

Interviewer: Kind of jump through whatever hoops they put up for you.

S: Pretty much. Like a circus dog.

Elnora is clear that she had the choice to enter the current program, but other housing
choices are available to her—the choice is between the program and not having a place to live.

Interviewer: So [other shelter] told you about it. Did they give you other choices
of different programs you could go to, or was this it?

Elnora: Did they give me other choices? [long pause] No, not really. No, they had
like … Catholic Charities … and what other type of program? I don’t remember
no other type of program. It was basically you save your money and you don’t
have to pay them anything but you had to have your own bank account ’cause you
had to have your money to move in with. But you know, also maybe like
furniture or something like that so that’s how I furnished my little apartment.
I: So could you have said, ‘No, I don’t want to go to that agency?’

E: Oh yes, definitely. I know women that did, ’cause I guess they thought that they’d be comin’ into the apartment and whatever this, I was like, I don’t care, as long as I have me a roof over my head. I don’t have to stay with nobody else.

These were options that in other circumstances would have been unacceptable, and other choices would have been made. But within the circumstance of homelessness, the choice to live apart from her children, to tolerate disrespect, to access services, or even enter her current housing program became choices women made because other choices left them in the street.

Many women refer to making the choice to enter the current program, as they could have opted not to apply or even declined to participate once an apartment was offered. From their perspective, the decision to participate in the current program was a choice made as they navigated the homeless system. While women described other programs besides the current one that could have been or were viable options, women do not say that they chose a housing program instead of living independently in the community. For the women interviewed, “individual apartment” or “self-sufficient on my own” were not options for them. So it was not that they chose a housing program instead of leasing their own unit. Their options were limited by their own lack of personal resources (income to afford their own unit) and by a lack of community resources (no Section 8 or low-income units available).

Janel had been offered a spot in a housing program in an outer ring suburb, but declined it because transportation was an issue. The current program offered her a spot soon after and she took it. For her, she did make an active choice to turn down the first housing program, but she remained in the shelter until the current program contacted her. She did not turn down the first
shelter because she found something on her own. Anna’s logic in selecting the current program was that “so then this thing came open, so I figured at least I would not be in a homeless shelter.”

For Bernice, she chose the current program because she wanted to come to the North Side of the city, but she would not have been able to afford a unit on the North Side on her own.

Interviewer: Um, so how did you decide to enter the program?

Bernice: Because it was suggested by the director. They’re all connected with this program and that’s the housing program that they use most of the time. Actually, they’re one of them that they use, and then they have someplace on 18th Street, and there’s other housing for older women that’s senior living and stuff like that. So, there’s a number of different housing … I mean the list goes on and on, I just … I have a list that, it’s a list of housing opportunities that they give for us, so …

I: So this program is just one of them

B: I really love the lake too, so I wanted to come back to the North Side. I really like the diversity over here.

I: But if you had wanted to go to another housing program or if you had wanted to go to the South Side, would those programs have been options do you think?

B: I wouldn’t have found my own place on the North Side.

LaToya is candid about the fact the she needed a housing program and could not afford to live without a subsidy.

I was in the independent living program, and the funding for that particular program had come to an end so they had to get the womens into some place before a certain time. One of the ladies who worked there, like I said, she was telling me about different places you could go to but she also told me what would be a good place. Here, this program. My time was running out, so I just started working where I’m working at now, and my time was running out. They hadn’t called yet, this program hadn’t called yet. And, now I’m just looking for an apartment now, a studio or something for me and my baby. Couldn’t afford it.

Teone talked about choosing this program for a specific geographical reason.

By me being up here, up north, in the recovery home, and had begun to like the North Side and I didn’t want to go back south because I knew too many people
and that’s where I was homeless at. And, I didn’t want to go back that way. So, the recovery home said that there was a housing program up here that helped women that be in this area. So that’s why I choosed this program. But there was other places, Catholic Charities, but that was like out south. And, I didn’t want to go out south. So that’s why I choosed this program.

Again, she did not choose this program instead of living without a housing program.

After being accepted into the program, Pamela waited 18 months for a unit. Her other options at that time were the state park, her car, church, friends’ sofas, neighborhood motels, and a halfway house. She said, “This was a better choice—a much, much better choice.” She did not list her own unsubsidized apartment as an option. Quanda admits that she did not have other housing options, but still feels that it was a choice she made to enter the program.

Interviewer: Let’s start with how did you decide to enter the program? Like did you have a choice? Did they say here’s this program you could join? Or did they…?

Quanda: They was kinda like that. Here I have an application for you for housing. It’s up north, and when they first said up north, I’m like huh? I’m like okay, I’m still gonna do the application anyway, but I wasn’t planning on moving up here.

I: Did you have any other places you could’ve gone instead?

R: No, I didn’t. But I was being really stubborn, but after a while, I was like, you know what? I can’t be picky. My children need a place to stay, I need to get my kids back. I just went for it.

Only one woman interviewed said that she would have been able to afford an apartment without assistance. Her reasons for choosing to enter the program focus more on the supportive service aspect of the housing, rather than the subsidy itself. Chanise begins the quote describing what options she had upon leaving the recovery home.

You can get your own apartment on your own, or you can stay in the program and through [recovery home] they help you go through different organizations which this program is one of them. And, then they have the charity home programs. And, I chose this program because it’s another structural program. And, I wanted
structure, structure, structure. Not that I couldn’t do it on my own, it’s just that, I know they, they take drug … drug … drops at random and I like the possibility… I like stuff like that—somebody to interrupt me to make sure that I’m still on the right track. So that’s why I chose this program; so I had that choice. I could’ve got a job on my own—I mean an apartment on my own—because I make enough money to do that, and I did get discouraged. Don’t get me wrong. I did get discouraged along the way; nothing was happy every day. I got depressed, but you can’t feel sorry for yourself because then … you know, you’re back out there again. And, when I say back out there you’re using drugs all over again and you’re drinking again, whatever.

Later on in the interview, the topic of why she chose the current program was revisited.

Interviewer: You mentioned that before … that you really liked a lot of what they did at [recovery home] because it was so structured and also here there’s structure and requirements and … why do think that works for you?

Chanise: Because at the time I needed somebody … I needed somebody to tell me the right thing to do. Not that I didn’t know the right thing—I don’t know how to explain that—but I needed somebody in my life to tell me, “This is what you need to do in order to stay where you at.” As far as anything in my life, paying my bills, not just—it doesn’t have to do with just drinkin’ or druggin’ because I already know I can’t do that no more. So, now I need somebody to help me, to make sure it’s okay if I get overwhelmed in bills and I can’t pay them because there’s a solution to that. Ya know, don’t break down and go and drink because of that, because that’s what I used to do.

Chanise had the financial resources to obtain an apartment without a subsidy, but did not have the support system she believed she needed to maintain her sobriety and remain housed. It was not financial resources she lacked; it was a personal resource. Her options were living with support or without support; she chose support.

Overall, women view themselves as self-determined, and part of self-determination (as defined by them and by self-determination theorists), is making decisions and following-through on those decisions. Women see themselves as making decisions about housing and homelessness. These decisions are made upon the presence or lack of a safety net, abusive households, and shelter/housing options. Regardless of the quality and quantity of options,
women identify as making active choices within these options. When this conclusion was discussed at the member check, women supported the idea that they are making active decisions. They insisted that they had to be proactive to find out what options were available to them. Anna said that the situation was such that “I decided to go to the shelter.” [emphasis hers]

What is evident throughout these choices is that the women are not creating their own options. These are the options that are available to them. Even for options that they had to be proactive in finding, they found them; they did not create them. Women are making active choices when facing multiple options; frequently choices are between undesirable options and are based upon avoiding some other circumstance that is more unpleasant than its alternative. Within this structure, women do not view the lack of options as limitations. They did not speak of the few options as restrictive, nor lament the fact that only a few options were available to them. It was the choice among the options that was discussed.

F. **Primary Influences**

As women discussed their available options and their decision-making, several influences became apparent. There are six different primary influences that they report as shaping their decision-making and in their lives. Primary influences are strongly connected to the women as individuals; they are items that they can either control or can identify the direct impact on the individual herself. Women acknowledge these influences and are able to identify their effect on their lives. These are different than secondary influences, which are more environmental in nature and not as apparent to the women interviewed. Women also do not have direct control over secondary influences; they cannot change how those forces affect them. Primary and secondary influences were identified as separate entities by how women described them (being able to control them) and whether or not women identified them as an influence (acknowledging
the impact of the force). Women frequently talked about situations or circumstances in which some type of force affected their behavior in some way. If the force was acknowledged by the women and they described it as something they can control, it was categorized as a primary influence. If the force was not acknowledged and it was something that they cannot control, it was categorized as a secondary influence. Secondary influences will be discussed in detail in the next section. Primary influences include the causes and experience of homelessness, other people (family and friends), personal responsibility, survival instinct, income/money, and religious beliefs.

1. **Homelessness**

The life experience of homelessness can be difficult, and study partners discussed the emotional, psychological, and physical toll that homelessness had on them. That does not mean, however, that homelessness was the major problem in a person’s life. For some women, homelessness was just something that happened, something they had to endure before moving on to the next phase of their lives. Although a major life event, homelessness was not always the most significant influence for many of the women interviewed. For those addressing drug addition, abuse, or health problems, those issues seemed to have been more significant than the homelessness itself. For some, homelessness was simply a consequence of the other issues, and could be addressed once the other precipitating issues were addressed.

Anna put it this way: “It kinda came down to, if you’re going there, then at least go there with a smile on your face and your head up. Ya know, if you’re going homeless, then go all the way. Just go there—just do it and be done with it.” Homelessness for her was also better than relying on someone else for support.
I have to say living homeless would have been much better than living with Jim, my friend from high school again. Because it was pretty awful living with him, because I was mooching off a friend and very humiliating, and so, at least homelessness, at least I was homeless on my own terms.

For Nera, once she figured out how to survive, homelessness was not a problem.

I learned how to survive being homeless, so it wasn’t such a big thing. It was like normal or something, being homeless was like normal. They got things for you do to. You can go to places and they help you, get you clothes, something to eat, but nobody can really give you a job. That’s something you–that’s ’cause you don’t have any skills. I didn’t have any skills for a job.

For Nera, not having job skills was a more pressing issue.

After being in a coma for two months, Janel spent all of her money on medical bills. Her abilities are not what they were before the coma and she has had to relearn many skills. Until she is able to regain the employment skills she had before, she will not be able to earn enough money to support herself. For Janel, health issues and the cost of health care resulted in her experiencing homelessness. Homelessness was the result of a more significant issue and once she addresses the employment issue, she can resolve the issue of homelessness.

Alpa said, “Language is a bigger problem than homelessness.” When she was asked if being homeless was better than living with her abusive husband, she answered strongly in the affirmative. When she was with him she “couldn’t talk, couldn’t eat” and that she was “mentally/physically” so sick. She said it was “better to be in shelter than to be with him.” Theresa also said that it was “better to be homeless than with [an] abusive husband.” Yolanda left her mother’s abusive home and when she contemplated the possibility that being homeless was better than living at home, she said, “In a way, yeah. ’Cause it taught me about responsibility and it made me eager to get my own and make sure that I did everything that
qualified to be able to get what I want out of life.” Anike said that “at first it (homelessness) was terrible” but once she learned to live without her abuser, she can now “pray and appreciate life.”

Quanda became homeless when she left her mother’s house and her mother’s abusive boyfriend. While she does not indicate that being homeless was a positive experience, she does believe that homelessness is easier to move past than what she experienced with her family.

I’m just sitting here thinking about it and I mean, it was better than to be around someone that you love that constantly seeing you getting hurt and they’re caring so much more about their feelings instead of yours and this is coming from a mother’s aspect because I cannot. If me and my children’s father happened to break up today and another man come into my life, if my children don’t like you, and I know sometimes parents feel like, what about me? I need to be happy; I’ll do everything I can for you, blah, blah, blah. But my children are my heart. And, if my kids do not like you and you’re not making things better to have them like you, I would not pick you over my kids for anything ’cause my children are mine forever. Men come and go. Actually thinking about that—actually being in a shelter around people I did not know and having problems with them, I’m like okay, fine, I’ll get over it. Once I leave here, I’m not going to see you anymore. Whatever. To where as if stuff happened at home with your family they always stick you. When you think about it, it brings that pain back.

Ruby had been a drug user for years, but it was not until she was evicted by her son that she decided she needed to change. The change was focused on the drugs.

Ruby: My homelessness is a result of my drug usage. I never literally lived on the streets. I stayed with … I managed to maintain an apartment up to a certain point and this last one that I had I ended up staying with my son so I had … and I didn’t have a key, but I wasn’t physically on the street. My things were, like my furniture and whatever, ’cause my last one, I ended up evicted from my apartment and what I did was I put all my stuff in storage and I asked him if I could move in with him. Why I even started I don’t know. I think it was a people pleasin’ thing. My mother never used drugs; she drank a little. My father never used drugs; he drank a little. My stepbrothers, we all tried it. So somewhere along the line I crossed that line and it got overwhelming and overboard. This is the forth time I’m trying recovery and I have 16 months on the first and it’s the first time I’ve ever had minimum of a year continuous sobriety since I started using.

Interviewer: Well congratulations.
R: Thank you. And, the difference this time is I had a more willingness my bottom had gotten lower, I had never been evicted. I had lost jobs. I always had good jobs and I’ve lost them but I’ve always been able to get another one. So, that didn’t encourage me to come back as quickly, but being evicted and living with my son … kinda put me in a real low self-esteem place.

While homelessness was the impetus she needed to change her life, her life could not change until she addressed her addiction.

Chanise became homeless when she chose to stop living with family and friends and to enter a treatment facility.

Well, actually, to me, being homeless was a great thing. I can’t say I was homeless where I was homeless in the street. I never had to sleep in the park. I never had to sleep up under … I just never had to sleep where … now, I was never in that position. And, I see some homeless HOMELESS people that don’t have a roof over their heads. I was blessed enough to have a roof over my head ’cause I sought help.

Teone did not like being homeless, but her homeless experience was a direct result of the drug usage and her mother evicting her from the apartment. So, when asked how she was different now than when she was homeless, her response returns to her drug use.

Teone: I make better decisions. I don’t just act, I think. I plan things now.

Interviewer: Can you give me an example of something you’re doing right now that requires planning and thinking it through that maybe you wouldn’t have done before?

T: Going to school. That’s a big one there. Going to school and sticking with it. And, planning on getting a job and making plans with my daughter–she’s 12, she’ll be 13–making plans about graduation, thinking ahead like that. Before I wouldn’t have cared about that. Going to school, I wouldn’t have cared about that. Or finding a job, it wouldn’t have mattered.

I: Did you not care because you were homeless? Or, did you not care because of the drugs?

T: I didn’t care because of the drugs. I didn’t think I had—to me, I didn’t have the time.
I: Because you were too busy doing drugs?

T: Right. My life was circled around that. Everybody I knew, my friends, they was doing something. It wasn’t even on my mind.

For Mary, there is a clear connection between her long-term drug use and her experience of homelessness.

Mary: And, I had became homeless the first time because … after having my son, I had my daughters and I became addicted to heroin. So, I used drugs for about 15 years … and when you use drugs you don’t pay bills. Some people think they are functioning addicts. Well, at the end of the road, you would no longer function. So anytime your name is not on the lease, you’re homeless. So, I mean, I lived with people. Always lived with people and a lot of times I didn’t pay bills, I just had drugs. ’Cause if you got drugs, you can stay in somebody house for a little while, but when the drugs is gone, they be like, ‘What you waitin’ on?’

[laughter] So, I mean for a lot of years I was homeless … but I always had somewhere to stay ’cause like I say, I always had drugs. When you livin’ like that, you know you homeless and it was some nights I had to sleep in hallways. I’ve slept in cars, I’ve slept in the park, abandoned buildings. And, sometimes you be so addicted to drugs… I remember one time I was livin’ in a program off of Maryland and Cleveland. It’s a beautiful SRO building for women and women only. And I had got in that program…

Interviewer: Are you talking about [program name]?

M: Beautiful, beautiful. This was my last run from drugs and alcohol. I had made it to there. I had got clean again … and got involved in another relationship and … this person started to use drugs. Instead of my running for my life, I decided to use drugs with her. And [program name] is the type of place–they give women too many chances, to me. I would go on the South Side, like 52nd and Mathews, around there, and I would use drugs, all day, all night. Make it back to [program name] about 1, 2 in the morning. And, this is the disease of addiction. I would be getting high in abandoned buildings. And I told the girl who kinda like ran the abandoned building … told her one day, why I never get to spend the night? And that was the drugs. That wasn’t my clear thinking ’cause I wasn’t brought up like that. I wasn’t brought up around filth and dirt. I wasn’t brought up to be low-graded. [pause] And, she told me one night, you can always spend the night. And, I slept in an abandoned building–only one time in my life–but it doesn’t matter how many times. I slept in an abandoned building, no heat, no lights–we had candles–and the bed was nasty and dirty. And, I slept there.

[disdain in respondent’s voice]
I: It sounds like that really affected you, like you’re still really upset that you did that.

M: I’m not really upset anymore because I know it was a disease of addiction and when I’m not using drugs and alcohol, I am a productive member of society, like you and anybody else. But when I am consumed with drugs … drugs … it’ll make you do anything. And, I know I wasn’t in my right frame of mind. So yes, I slept in abandoned buildings, I slept in parks, in cars … and it’s always been because of drugs and alcohol.

She connects the homeless experience to the drug use itself, indicating that the origins of her homelessness could be found there.

Regardless of their other barriers or their root causes of homelessness, none of the women interviewed enjoyed being homeless. It was not an experience they wanted to repeat. For some women, it was the worst thing that had happened to them. This was especially true for women who became homeless for economic reasons and had no other issues to address (such as Diane and Susan). Of all women interviewed, regardless of their homeless experience, not one mentioned a hope, a desire, or a plan to return to the shelter system or be homeless again.

2. **Other people**

In addition to homelessness, women also discussed how other people in their lives influence them and the decisions they make. While many women assert that they make their own decisions, they do accept suggestions and ideas from others as well as use the opinions and information of others as considerations in their decision-making. Chanise said:

I base my life on suggestions I get. The suggestions that I make because just because they give me suggestions doesn’t mean that I follow what they say, but it helps to determine what I’m going to do or not. And, um … I’m not listening to someone who’s out there doing drugs. I’m listening to someone in here… ‘This is not going to hurt you. Go ahead and try it. You’re not going to get hooked on it.’ I believe them. So why not believe someone else that is trying to give me some criticism about other things that positive?

Chanise went on to describe how she thinks about other people’s suggestions.
They help me, yeah, when they give the suggestions that they give. Even the people… The AA meetings that I go to, just like this program, there still people in this program as like myself, not the people that work here, of course, but like myself that come here. Even if they doin’ wrong still out there, they might have a good suggestion for me and I’ll listen to them, just as well as people like yourself of the people that work in the program. They give me the same suggestions. I listen and weigh that. I’ll listen to that suggestion, whether it’s my own suggestion—I might be makin’ the right decision on my own and still—and they might be makin’ the right decision and that help me weigh out the possibilities of what I should be doin’.

Women were asked specifically if there was anyone who helped them make decisions or plans in their lives. To that question, Quanda replied:

Quanda: My mom and my boyfriend sometimes. My friends, I depend on them. My lunch manager—we’re really good friends and I’ve only known her a year. People that I trust, I’ll see that.

Interviewer: Do they offer suggestions to you? Or, do they just listen to you as you bounce ideas back and forth?

Q: I’ll ask them. ’Cause I’m a human being and everything … and everything that human being is … we all have our peccadillos and all that. If I wanted to seek someone’s advice, I’ll ask it. I have no problem with it.

I: But at the end of the day, do you feel like they’re telling you what to do, or you’re still making your own decisions?

Q: I never allow anyone to tell me what to do. I won’t allow it. I’m a grown up, not a child.

Knowing the characteristics of the people around them has caused some women to stop certain behaviors. Elnora does not seek guidance from her mother as much anymore. “And, sometimes I talk to my mother, but I guess she’s getting older, you know. And, then she hates to be worried, you can hear it in her voice. ‘Well, I’m so tired. I have to worry about Elnora.’ Ya know, and worry about me.” Anike described how her family sways how she feels about herself, so she cannot be with them because it brings down her self-esteem.
What is happening now is that I’m so different. Um, and I want to be, but they remain the same… And, so what is happening is that the energies from their personalities sometimes leaves me feeling down so I’m going to speak to my therapist and my psychiatrist and I might have to … ah … you know, just not be in company with them for a while.

She described her new approach to make sure that she is not affected by others: “So, if I meet somebody negative I just get away from them.”

For Martina, she made the deliberate decision to not spend time with certain family members because they influence her behavior in a way she believes to be negative.

A good decision I’ve made that affects my life is I distanced myself from a lot of my cousins. And, the reason I say that is because I only had one brother in our family and he’s passed, but all through the years I was always very committed to—I wanted to feel that I was part of a family and I attached myself to my cousins whom I grew up with most of them. They live here in the city. They were like my brothers and sisters but they’re toxic. They like to drink and smoke pot and do drugs. I was very dedicated to them and wanted to be with them all the time ’cause I did what they did. One of the things that I learned … is like before, if I wanted to get them sober, they would get me high before anything. And, so the decision I made is like, I have to get away from them. But it was really hard. Because that was like, those are the people that I was close to and I didn’t know what it was to have friends who didn’t drink and party and that. And, so that was a real difficult decision, but it was the right decision for me, to distance myself but I did it in the manner—’cause I thought it would be just like cutting off—but I did it in a graceful way. And, it worked out and I do see them every now and then. I go visit them, go see them ’cause they really don’t come to see me. They always was like that. My visit is, ’cause I do care about some, a lot of them, and my visit will be brief with them and then I move on and go back to my life. So it was really a good decision, and helpful for me. And, the way it went about, there was no hard feelings. No hard feelings and no feelings like I won’t be around them anymore. So they understand. I mean if they didn’t, if they do or they don’t, they accept and I feel most of them are happy for where I’m at in my life.

A couple other respondents made comments about not wanting to be in the company of certain types of people as it could lead to negative behavior, specifically drug use.

LaToya: And, it’s just so much to do out here, but you get stuck with this crowd and these people doing … things we are not supposed to be doin’. Over here, people going to work and being a productive member of society and over here is the night crawlers, the living dead, not worry or care about nothing.
Chanise: They think I don’t have the time to come and visit them like I used to ’cause I was always there. I was always at my family’s house. All the time. But I told them I can’t do that, I have my own life now. And, what they do … it doesn’t fit in my lifestyle. They drink, they smoke, not that it’s bad for them. I abused alcohol and drugs. I shouldn’t use drugs—that’s illegal anyway, but the alcohol. I used to come drink where I could casually drink. I messed that up for myself so I can’t do that anymore. They can do that, but I go over to my mom’s house it doesn’t bother me, my sister drink—my sister—you’re not supposed to tell nobody that they’re alcoholics. They got to say that and they have to know that, but I know the signs and she gets up in the morning, she has a drink in the morning, afternoon, and evening. She drinks. And, if that bothers me I can get up and go home. And, if I don’t want to be around it I don’t.

Bernice: Well, at that time … at some point in my sobriety times before, I wasn’t really maintaining, like going to meetings and keeping a support system. So I felt sure emotionally and mentally and my spirit was all wicked ’cause I would get upset because they would be around the house and ya know, me and my mom got the house for me and her and my son—my older son—and my nephew. And, then before you knew it, here comes a brother, two of my brothers and my sister and all three of them are actively using. So, I fell off and I got frustrated and I’m like, ya know what? If they can do it, I can do it too. And, I’m paying for everything so why not? But, anyway, I messed up, and I ended up selling and drinking and whatever else I decided to do.

Bernice said she finally decided to leave “because I needed a change. I wanted to save myself.”

To ensure that they did not return to drug use, some women preferred remaining in contact with those people who positively affected their behavior. Ruby said that her support network was on the North Side, so she will remain there once she finishes the program.

I’m gonna stay up north ’cause me network is up here. I got to stay close to my network. I like the North Side. No, I wouldn’t go back south. My sponsor lives out of [a close suburb]. All my sponsor sisters live in [this neighborhood]. You know I chair meetings in this area. My foundation is in this area.

Children, the prioritization of children, and the influence that children have on the lives of their mothers varies between women. Children could be viewed as a detriment to self-determination, as women talked of not being able to do what they wanted to do because of the presence of children. Quanda was being selective regarding which shelter
she wanted to reside in, but decided that she did not have the luxury of being choosey. “I was being really stubborn, but after a while, I was like, you know what? I can’t be picky. My children need a place to stay, I need to get my kids back. I just went for it.” Other women based other behaviors off of the needs of their children. Pamela began to re-establish a relationship with her own mother because she needed child care. Whether or not women viewed these influences on their behavior as a detriment to self-determination was not explicitly asked. If they do view children as a barrier to their own self-determination, it was not expressed as such.

As it was described in the “Safety Net” section, many women did not alter their behavior based upon the presence of children. Harriet, Nera, LaToya, Bernice and Teone all continued to use drugs despite having children. Their children were taken care of by other relatives or the child welfare system and because of that safety net, these women were able to continue to use drugs. Their children were not their priority, and therefore the children did not negatively impact their self-determination. That situation did change for LaToya and Harriet as they describe altering their behavior to take care of their children once the safety net was removed. Their youngest children had an influence on their behavior.

3. **Personal responsibility**

Women were also highly influenced by their own sense of morality and personal responsibility. Chanise would steal in order to fund her drug habit. She no longer uses and no longer steals. “I know it’s wrong to go and stick up a liquor store versus somebody tellin’ me what’s a better way to get money than steal or to get whatever you need and steal for it, so I know the difference. I mean, everybody doesn’t have that, I’m sure. But, I know right from
wrong.” Martina bases her decisions upon her principles. “I work out my decision-making and my… I base my decision making on the principles that I live by, and that’s like … I don’t make like quick decisions or irrational, spontaneous.” She understands that part of making decisions is “part of taking care of myself.” Theresa received the suggestion that she lie in order to receive more money in food stamps. She will not do that because that is not who she wants to be. Her philosophy is that if she lies today, possibly no one will help her tomorrow.

Through their stories, women not only defined themselves as personally responsible for taking care of themselves, but also took ownership of decisions that they had made in the past, regardless of the outcome of those decisions. Bernice referred to responsibility in her self-determination definition: “To be totally, like, self-reliant and dependent upon yourself, to be able to be totally responsible for yourself.” When Anna was living with a friend for a while, she knew that she was unable to pay rent. “I didn’t want to be a financial burden.” She entered the homeless system because she felt it was unfair to expect him to take care of her.

I didn’t really think it was fair for me to, ’cause he that if you’re going to continue to stay—’cause he moved apartments. He said that if you stay with me now, you’re going to have to start paying rent, and my job was not, ya know, if I was gonna pay rent, I was gonna get me own apartment and pay rent. So I knew my job was not going to allow me to afford rent, so ya know, I felt it was unfair for him, ya know, I felt that was a reasonable expectation and since I knew I couldn’t meet that expectation, I figured it was more fair for me to just go into the homeless system.

She is clear in her reasons for entering the homeless system. When asked if she had made any poor choices in her life, the interviewer specifically asked about her abusive marriage. “I take full responsibility for that decision. I don’t … I could’ve screamed at someone and said, ‘No, I don’t want to do this.’ So, yes, I take full responsibility for making that horrible decision.”
Harriet also takes responsibility for her choices, including using drugs. “I did ’cause I wanted to. Yeah, I came from a nice family, a good family, not parents on drugs or anything like that. So basically I did it ’cause I wanted to.” She went on to say that “I ain’t livin’ a bad life, I just made a lot of bad choices.”

Other women talked about personal responsibility through bill paying. “I’m just being responsible period,” said Ruby. “And, today...if something happens—which it does sometimes—but I pay my bills. My bills are paid. And, if they don’t get paid, they’ve got to [inaudible] it’s gonna get paid. My lights never got shut off. My gas never got shut off. I haven’t got kicked out of an apartment.” Teone referenced bill paying and responsibility as well. This is how she is different than when she was homeless: “I have responsibilities. I didn’t have them then. I have to pay bills … then, I didn’t have a care in the world.”

Along with Chanise, LaToya talks about paying bills as being representative of personal responsibility. “I have responsibility now. I’m a reliable person now. There’s something that I have to do now instead of, in terms of what I want to do, there’s something that I have to do. I have to pay bills now in order to keep a roof over my head.” She went on to say that she is now “living productive.” Being productive was echoed by Mary.

I have some stability in my life because I have … because I want some stuff in life. And, I work hard for everything I got–my recovery time, my health. The self-determination makes me want to be a productive member of society, make me pay my taxes, make me go out and march with people who are marching for good causes, make me run the 5K breast cancer walk-a-thon or run-a-thon. Self-determination is boosts my self-esteem, make me feel good about who I am.

Nera understands her responsibilities as well.

Because I do know that I’m responsible of making my life the way I want it. Nobody can do that. So, if I’m making it that way I want it, then … yes, yes, because I have to be comfortable with my decisions that I make today. Because the consequences are from my actions, everything I do.
That’s important for me to keep up front, that I am truly responsible for my decisions.

Nera described her personal self-determination as living by her own merits. When asked if she is currently able to do that, she responded with:

I have to say yeah. Like I said, today I figure out my bills, so that I can pay my bills, and like okay, oh that’s what I left out—I decided at first, I decided to pay my rent with my first check. You pay your rent with your second check, since my first check is 200 bucks, so my second check will be the normal five something, so I pay my rent. So, now what you do with the first check? It’s not yours to go have adventures shopping spree, you go pay on your light bill, and your cable bill, and get your bus pass for the rest of the week, ’cause I have to buy a bus pass for two weeks. So I do it every two weeks, so that’s what you do with your first check, and then your second check you pay your rent, and you pay off the rest of your cable and your light bill. So, yeah, I think so.

At one time, Ruby had stolen money from her mother. As part of taking responsibility for her actions, she returned the money as soon as she found a job and had an income. Ruby not only viewed it as her choice to take drugs, but it was her choice to steal from her mother. She also continues to feel responsible for the damage she believes she caused her son.

Ruby: I guess from their father dying from when they were 14 and 2, I had, I felt like I had to double up on that love to the 2 year old because of the lack of dad, and I had a lot a guilt about him [the younger son].

Interviewer: About not being there?

R: About … trying to make up for the father not being there. And, the way I did it was all wrong. I tried to do it more financially than anything. ’Cause when he was getting the Social Security check I would give him the whole check and made him style for things that didn’t have no morals to it. I mean the kid graduated; he was voted best dressed. Come on now. What kind of accomplishment is that and he was proud of that! Not anything academic or … but I take full responsibility for that.

While women may not have been swayed by a sense of personal responsibility in the past, acknowledging the consequences of their previous actions and being personally responsible for themselves influences their decision-making moving forward.
An exception to this is Vanessa. Vanessa describes herself as a moral person.

I did everything that … the normal good person is supposed to do. I graduated from high school, graduated from college, started my, my, my career in the field of social work. I’ve always been in church. I’ve never been out in the world. I have no vices: never drank, never smoke, never doped, never caroused, never did any of that stuff.

She sees herself as not having done anything that should have caused her to become homeless.

Her behavior as a moral person should have protected her, but it did not. As she does not view herself as responsible for her homelessness, her plan to exit homelessness is to pray to God “to be delivered from this situation.” Her belief of non-accountability supports her choice to not look for employment, attend job training, or formulate an action plan. “I did not do this to myself. There is no reason in the world I should have been homeless. And, I did not do this to myself, therefore why am I having to try to climb out of this hole that somebody else put me in?”

Vanessa is an exception to the idea of personal responsibility.

4. **Survival instinct**

In addition to morality, survival itself is highly influential in the decision-making process. Diane talked about accessing resources as an act of survival.

Well, when I was … you have to work for food stamps. I had applied for food stamps in November of 2005 and … I went to work at a nursing home for the food. You know, it wasn’t the greatest, I had never been on food stamps or anything. It was just something I needed to do. Well you’ve got to do this if you’re going to survive.

Throughout her homeless experience, she did what she felt she needed to do.

I was in a situation that I felt that I shouldn’t be in but I was there, but I knew that I had strength in me and I knew that I was going to get through it without … I didn’t know … I really didn’t know … but I knew that I was gonna be the best me that I could be in that situation.
Pamela also did what she felt she needed to do. She began living on the street at age 14 and was 21 at the time of the interview. She had only been stably housed in the program for six weeks. Prior to that, she had been continuously homeless–living in youth shelters, friends’ couches, and other places not suitable for habitation. She “had no one to help her, no place to go, had to stay on street.” She “had to do what other people did to survive” even though she “didn’t want to.” She “wanted to do other stuff but couldn’t access resources without ID or papers and stuff.” Based on other information Pamela gave, the interviewer believes her to be alluding to possible criminal activity, but that was never confirmed. It was “hard on the street–even the cops harass you.”

As Harriet stated, “I don’t want nothing bad to happen to me ’cause you make bad choices sometimes, you could shorten your own days.” Not hurting herself was key in a decision made by Anike. “So to make a long story short, in order to not do something destructive to hurt myself, I fled to this city from [another state].” Theresa had become homeless as a result of fleeing an abusive situation. She now takes care of four children by herself: “It’s hard, but you do what you have to do.”

Nera not only learned how to survive living in abandoned buildings and other uninhabitable places, but she learned how to survive being a prostitute.

Nera: I was really snorting cocaine, snorting heroin, and stuff like that, but the hard core, you know injecting heroin and sleeping in cars and abandoned buildings and stuff, so I end up doing that kind of stuff with him.

Interviewer: Sleeping in cars and abandoned buildings?

N: Sleeping in cars and well … I remember we went into this place where we lived and there was big rats all over the bed and stuff and I’m like, ‘Oh my God, oh my God.’ And, he’s like, ‘Girl, shut the fuck up. Those are just some rats. You gonna let some rats run you out of your house?’ And, so I’m like, ‘Wow, if he can do it I can do it.’ So, I had got the mentality to get a big 2x4, and be coming
in the door you hit at the rats with that. Even to the point where we were sleeping in the bed and I can feel the rat crawl on top of the covers so I just slung the cover back and I heard the rat and he said “eek eek” when he hit up against the wall. So, that ended up being normal for me. It ended up being normal, to sleep in a car and to have a gallon jug of water in the car, so you take a rag and you pour the water and put you some soap on there, and you wash up and change clothes. All this kind of stuff became normal to me because I had never experienced it, but I prided myself on being a diehard. Whatever you can do, I can do it also. So I prided myself on being a diehard. So even to the intravenous drug use, I had to try that too. Because you’re doing it; you’re still living. It must not be as bad as everybody say it is. So let me do that too.

So I went on this … and I still have the love for my family. I could still go by my mom’s or at this time my children are grown, I could still go by their houses and they would come and see me and be like, ‘Mom, you all right? Do you need something? You know you don’t have to do this? Whenever you want to come you’re welcome in either of our homes?’ And I’m like, I’m cool, I’m doing this because I never ran to my parents or my family for anything. So I’m doing this and I don’t understand because I knew to go to kitchens. The soup kitchens they feed you and the pantries that give you food. I went to those places and I got really comfortable with doing that and I couldn’t for the life tell you how come I got so comfortable doing those things. But it was like I was surviving. I’m really surviving. I’m surviving in the raw. I’m surviving in the raw. I’m doing this. I can open up a can of something and get a bowl and a car and stir it up and get some mayonnaise and stir it up and get some crackers and I can survive. So, forbid me from having to be in the wilderness, I could kill an animal, skin it, cook it. I’m a survivor now. This is where I’m at. So eventually the guy I was with, he decided that he wanted to go be clean. And I’m like, okay…

I: Can I ask, were you still being pimped out at this time?

N: Yeah, by him, yeah. This was my lifestyle. I didn’t know anything different but that. I always knew that prostitution always gonna get you some money. You’re never gonna not be without money as long as you can sell your body. Somebody’s gonna buy it; I don’t care where you at. Someone’s gonna buy it. That’s just a commodity. So, yes, the person that I was with, he decided that he wanted to be sober and I’m like okay, whatever. So I was so set on that idea of being sober because I did kinda know being sober, I couldn’t do that lifestyle. I couldn’t do that lifestyle being sober. And, I pretty much knew that.

Martina almost lost the battle for survival.

I was in an–abused woman–I was in abusive relationships. It was a pattern in my lifestyle and I was in a really bad relationship at it … ah … What happened is my abuser tried to take my life … and there was a struggle and the abuser got killed.
My abuser got killed. And, I got convicted and I was sent to prison. Actually, at that time, I thought it was the end of my life even though I survived the attack, but it really was the beginning of my life. While I was in the prison, I began to … think of ah … it’s such a horrific place to be. I’d never been arrested in my life—and so … what I did is I took advantage of every opportunity that I had while I was in there to learn about what I needed to do to change my life and what brought me there.

She realized through her experience in prison that it was worth the effort to keep going, to keep surviving.

I recall when I went to prison, when I went prison, I went to the white prison and then I was transferred to [medium security prison]. And, when they took me to the unit and I went in the unit there and there’s a 100 women, live in the unit, 20 women in a dorm, so you’re like right on top of each other. And, when they close the doors—there’s no doors and there’s that one door that they lock, when they lock that door, it seem like-like it was the end, to me. It was like, they were locking me out of everything that meant anything to me, my daughter, my youngest daughter. I just was at that threshold that I could either just give up or get up and there’s something inside of me that I wasn’t gonna give up because I had my life and I was there and even though it was so grim and so sad in that place, I guess my spirit, my spirit in wanting to live and my thoughts were of my daughters and my son and my grandchildren and a flurry of different things that brought me some happiness and that’s what it was. It was a hope.

5. **Money (through employment and education)**

All of the study partners had incomes that fell below the poverty line; if they had more income, they would not have qualified for the program. For them, income and money were items that severely impacted their lives, and many short- and long-term goals focused on obtaining a stable income, through education and employment. Lack of money or an income affected women in a variety of different ways. LaToya said that she needed to “get me more money … to be on my own.” “Need money to have a place to live and live comfortably,” said Alpa. Theresa said that if she had more in food stamps, then she would have more money for rent. She said it is “always going to be money.” Money and a job are necessary, and she lamented the fact that because she lived on her own, if she loses her job, then it is difficult to
stay in the apartment. At one point, Nera talked about living with a man because “he was on SSI [social security income] so he could pay the rent.”

Elnora experienced homelessness after she and her husband emptied their bank account to pay for legal fees, and since then neither one has been able to secure employment. At one point she was describing herself as “stuck.” When asked what she needed to do to “unstick herself,” she replied: “I gotta find me a job.” Not just any job would do, however:

Elnora: I need to find me a job. A job where I’ll be able to take care of myself.

Interviewer: And, what does that mean for you? To be able to take care of yourself?

R: Oh it’s a job—whew—making at least $9.00. I’m saying I could pay rent; I could get another studio or a one-bedroom, $545 or $600. You know you just have to learn how to budget. But I don’t have no job and I can’t make it on no $7.50.

She repeated her need to find a job several times. Not just any job would do; she needed a job that paid a certain wage. She was having problems purchasing all the things she wanted on her current income. “Look, bus fare is limited, you know. Some days I don’t have $20 every week to get a seven-day bus pass ’cause got to have toiletries, got to have toilet paper, ya know, soap, toothpaste, hygiene stuff.” She also wanted to have enough to send money to her daughters. “And, I have two daughters in college. I usually try to help them but how could I help them right now when I’m not working? So that bothers me a whole lot.”

Money was a concern even for those with a job. “It was minimum wage, and you know, you can’t get an apartment on…” said Anna. Not only is minimum wage not enough for an apartment, neither is unemployment insurance according to Diane. “They finally laid us off … and that’s why I was collecting unemployment insurance for that. And, that was enough to sustain me, but it wasn’t enough to get an apartment, 6, 700 dollars or so…”
Quanda is still trying to work off her credit card debt.

Quanda: Like right now I’m trying to get my credit together, build my credit up and get a better job. If I were nursing, that would really help out some. That’s about it. My credit plays a big part in it.

Interviewer: What happened to your credit?

Q: I had got a credit card back when my first daughter was born and, you know, I wasn’t working, I was 18 at the time. Not thinking, I charged up the most, and the credit card was only a $300 limit and I owe them $1600 now.

I: Because of interest and late fees and everything else?

Q: This is from 2002 and its 2008. So that’s really not that much, but it’s still like something I have to pay off. And, I’m doing that at the moment right now.

Money management, whether paying off debt or making strategic decisions about where to spend money, was mentioned frequently when discussing money and the need for it. Quanda made an unwanted decision as a result of not having enough money for everything she wanted.

Not too long ago I sold my car. And, actually that kinda hurt me ’cause that was my first car I ever had. I spent $2,200 on it and I only had it for like, two months before something was wrong with it. So, I already put like a $1,000 in that car and then something else-I got it fixed and then like two weeks later, something else happened to it. So, I’m like, am I going to keep spending money on this car? Or am I just going to get rid of it and use that money that I get for the car to pay off my–’cause I was actually behind on my bills because I was trying to get this car fixed. So, I felt like that was a good decision of me giving away something that was actually putting me in debt, even more, because I just wanted something.

The link between education, employment, and greater income was made by several women. Bernice summed it up like this:

Just by continuing to seek out ways to better my life, enhance my life. Because I know education has to be the number one thing for me from this point on because, without, without the education I’m only ever going to get entry level position jobs. I’m employable, I know somebody will hire me, but I’m always going to be making just enough money, just enough to get by. So I can’t, I can’t keep settling for that. I am determined to make my life better in a big way.

Not everyone is able to follow that path of education to employment, however. Susan said:
I figure once I get a good job and I’m comfortable and I’m stable then that will allow me time to go back to school and get that and therefore I can get a better job. But right now, it’s putting food on the table and a roof over our heads. That seems to put the education to the back burner. And I hate that, but sometimes you have to do what you have to do to keep afloat.

For her, the need for money now outweighed other choices she would perhaps like to make. She is making choices based upon necessity. Using Maslow’s hierarchy, she is prioritizing lower level needs (food and shelter) over her desire to have other non-essential items.

Sometimes employment can lead to more difficult decision-making. Nera was a prostitute for many years when someone convinced her to get a job. After difficulty finding one, she was able to obtain a position as a telemarketer, which she did not like.

Yeah. So I’m like this stuff here is not working. I get a job, finally somebody calls me. I go to one of these places that help you get jobs–I got there. They call; you got a job telemarketing. Something about this telemarketing job, drinking methadone, going to work, this is just not … this is not how it goes. I don’t know who said this is how it goes, but this is not how it goes. Because I’m missing something still. I don’t know what it is, but I’m missing something. And plus I don’t like selling these people this stuff over this phone, and telemarketing. I don’t like doing this. Okay, but do I like ho-in’ better? I mean, I can make more money ho-ing than I can just sitting on the phone talking to these people all day. I can be talking to some customers. So, I’m like this is not working.

She quit the telemarking job because it was easier to drink methadone and work as a prostitute than work as a telemarketer. Plus, she made more money as a prostitute.

6. **Religion/faith**

   God, religion, and faith were topics that were repeated throughout many of the interviews. For some women, their faith in God and religious beliefs strongly affected their lives, and for other women they are less prominent. Some women did not mention God or their religious beliefs at all. As religion and God were not specific interview questions, it is unknown what role, if any, they play in the lives of those women. However, had it been a highly-
influential factor, most likely it would have been mentioned. Given the ease of which women discussed drug use, mental illness, and criminal activity, should religion or God have been a factor for women, they would have mentioned it. For those that did discuss their faith, patterns emerged in how women use their faith throughout their lives and their homeless experience.

For some women, it gives them inner strength. Anike specifically said that while she makes the decisions in her life, God gives her the strength. “God … helps … but he gives you a lot of power to make your own decisions. So, I would have to say, I want to do it first, and then if I ask him, he gives me strength, but it’s something that I want to do. I want to help myself. I am helping myself.” The life outlook of Diane was very positive: “Just live and love God and love myself and nothing else can go wrong.”

For Elnora, when asked what helps keep her going, she replied, “My faith in my father.” To her, her faith was very important.

Elnora: Ya know, I was raised on the word, which I have read it anyway, from the beginning to the end. I was brought up in the church. So, believe in thy heavenly father and I know that he’s up there is real, that helps me a whole lot.

Interviewer: How so?

E: How can I put this? Just praying and believing. Waking up every morning–I wake up like thank you Lord, thank you Jesus for waking me up this morning. Just different things. I talk to him all day long ’cause once I do get up I’m like, doggone, he’s tell you don’t worry and I’m laying here–like this weekend, I got to get up out of that. And, if I was going more than …’cause he wants you to praise him. If I praise him more and do more, maybe I wouldn’t be laying up in the bed all weekend long, don’t answer the phone.

She believes that she could help herself more if she were to go to church more often. She spends weekends lying around, not leaving the house. Going to church would help her get past her inability to leave her house. “I said I was gonna start going back to church. I should’ve got up
yesterday and gone to church. That’s helps a lot, spiritually. I need to start prayin’ more.” For Quanda, God supports her through her struggles.

He kept me alive. That’s the only thing I could actually—’cause I actually—I believe in God, but I’m not really a praying person. I don’t go to church like that and that’s something that I’m battling with too. ’Cause I get reminded of that everyday. Okay, you are not the reason you are here, God is. You’re not the reason that you have this job, God is. Yeah, I made the steps, but who helped me make those steps? I’m being reminded that I’m supposed to go to Him, but I’m still stubborn on that too.

Ruby also views God as a support for her. “There’s a power greater than myself that I choose to call God that maintains me day to day.”

For some women, God was more than just a source of support; He was a form of accountability. They may have strayed off their path before, but being accountable to God help keep them on the right path now. “So, I pray a lot for God to guide me in the right direction that I need to take the steps that I need to do,” said LaToya. Anike, who stated earlier that God gives her strength but she makes her own decisions, also believes that with the support of God and others, she will stay on her path.

So what they put into me at [transitional housing program] and the psychiatrist and then what God has invested in me, I’m okay to stay on my path. Will I succeed? Yes, I will. Yes, I will. I feel that with Christ I will, and with my own doing, I will always stay focused to believe that if the mind can conceive it than in your heart you will achieve it. Yes, I will because I want to.

For Ruby, she has the capacity to make her own choices and set her own, but believes that the path God wants her to take is a better choice.

He does give me self will. I do believe that He has set out a path, but He also gave me self will. Do I want to go that path or do my own thing? Nine times out of 10 I don’t want to do my own thing. My own thing tear up something, destroy something, confuse something, but if I stay out of myself and do His will instead of my own chances are, I get through it.
Vanessa also believes that she makes her own choices, but that God has some bearing on whether or not her decisions work out for her. “I make decisions … but I don’t create the outcome. If I make a decision and I go forth and try to do that, then if it doesn’t happen, then I look at it is maybe that’s not where God wants me to do.” While it may not be that God has established a path for her, in her description God ensures that she is not able to stray off of the path that is acceptable to Him.

Many women talked about how God works through people and guides them through life. In both instances, they look for signs from God on how to live their lives and what decisions to make. As Harriet said, “You can’t question God’s work.” LaToya: “I never thought … I’d be like … it’s a lot of womens out here, and with kids, that are homeless. I was just blessed to be there. I was very blessed, and I feel that I still is very blessed.” She went on to say:

Harriet: God talk through people. It’s like, when I pray and I pray and I pray and I need God to guide me in a direction or right direction that I need to be in. It’s like a stranger on a street will say something to me that I’m going through. Don’t know me, and just pop up, and I’m like, that’s what I was talking to you about God. You givin’ me a message? You know God talk through people, so like I say, He show you signs everywhere. And, He do that for real. So … even at work … even at work peoples come up, they might say something to me that I’d a asked God about, talked to God about. And, they might say something. I’m like, hmmm … You gotta be aware. When you talk to God, you gotta be aware of what’s happening around you. Or what people’s saying to you. It might not hit me right then and there, but a few minutes later or an hour later, and I think about what I prayed about, I be like huh? Is that the answer? Or I might see something, something that somebody else going through, they talking about, similarities. God guide me a lot. All you got to do is ask for what you want and you’ll get it. And, He will show you somehow.

Interviewer: Do you think that you make choices? Or that God makes choices for you?

H: It’s not me. If it was my way it would be a whole ’nother story. I think that … ’cause I stayed prayed up. I stay prayed up. It’s God. It’s God. It’s God. I try to stay out of the way and let him guide me.
Ruby related a story in which she felt that God was instrumental in helping her access treatment. The story begins after a night where she was out using drugs, and it was difficult for her to return to her son’s house, knowing that he would know that she had been out using.

And, I was too ashamed to go back to his house, so what I did was, I went to the local hospital hoping that they would help me get into treatment but because I didn’t have any insurance they told me that I had to go to someplace like [free recovery center] or something where it’s free. And this was on a Sunday and I didn’t think you could get any beds on a Sunday, but they gave me a listing to call for that Monday to see if any beds was available. But to show you how God works, when I did get enough courage to knock on my son’s door, my mother answered my door-like I said she lives with him-and she was like, ‘What do you want? You’re not trusted here no more.’ And I was like, ‘I want to go into treatment. Please let me stay until Monday’ which was the next day. And, she said, ‘I don’t know what your son gonna say when he wakes up so you go on downstairs.’ So I went on downstairs and in the meantime she was calling that listing and [the free recovery center] told her that if I came within the next hour they had a bed that day. So I went right back out of his house.

Anike believes that her prayers have been answered by God and by others, and because her prayers have been answered, there is nothing to complain about.

I had prayed for change. But I guess I didn’t believe my own prayers. My therapist says that you had it in you all the time. And I guess, by meeting people who are concerned that it come out … it made the difference. It made the difference. So, I kinda …when I wake up every day in this apartment, that this program accepted me in, it’s like a dream. And, I don’t ever want the dream to go away. [laughter] You know what I’m saying? It’s wonderful… It was a leap of faith. [pause] It was like I always wanted my life to be … when I got here … and especially got an apartment … and then with my case worker… Just seeing the possibilities … it was like–hey, God answered your prayers and this program answered your prayers and [transitional housing program] answered your prayer. Now the [local university] is answering your prayer. What’s the problem? There is no problem.

For approximately 30 years, Nera was a drug user and worked as a prostitute. It was not until she entered treatment that she began to believe in a higher power, and now believes that she survived everything that she experienced because it was God’s will.
Oh my God. I found out that … the only really thing that was missing in my life was … I was spiritually bankrupt. Oh wow. It was like I was searching for validation of myself, my self-worth in other people, in other things. Being in treatment, I found out that I am such a valuable person. And that I am so loved by God, first of all. And, once I realized that God loves me more than anything in this world could love me. So when I found out that I have worth, and in treatment, I found out—’cause you did this moral inventory of yourself. Then you surrender and you actually know that I believed in everything else, other people, everything else, so it was my confrontation to know what do I really believe in? What is it that’s really wrong? Why do I accept so much abuse from myself? Homelessness, prostitution, drugs … why was I so acceptable of all these things? And it was because I didn’t know my self-worth. I was so busy needing to love other people to validate myself and when I went into treatment, I found out that if I can believe in all these things, why can’t I believe in a power greater? Why can’t I do that? So I had to sit down and ask myself, is this what you want to do? You want to believe in something greater than anything else you’ve ever imagined?

So yeah, I want to do that. I want to see what it’s like to believe that I have an unconditional love going on. I have a relationship that loves me so much. So in my treatment process, I start actually believing that. I start actually knowing that I deserve better things in life. So in that process I stopped wanting to be me and him—me and the guy, see I stopped wanting—’cause that was my goal now. I’m gonna get sober and I’m make back up with him, and we’re gonna have this good life going on. But in recovery I learned that I have to have a great life going on with myself before I could even concentrate on building a life with someone else. So this step that I decided I wanted to take, I wanted to go on the path of destiny for myself. You know what I’m saying? So that’s how my journey started… I start to realizing that when I get up in the morning, I am really responsible for my smile. I’m responsible for what my insides feel. I cannot go on how you feel today, shouldn’t have anything to do with how I want to feel today. So I’m a true believer.

Just as Nera believes herself to have a destiny and now looks to God to guide her as she continues on her path, other women also turn to God and look for signs for what they should do in certain situations. For some women, it takes the decision-making out of their hands and gives it to God. For LaToya, a sign from God in the form of a baby was what she needed to stop using drugs. “He didn’t just exactly change it, ’cause I wanted to stop, but I just didn’t know, ’cause I never thought a baby in my hand … ’cause you can’t question God’s work.”
Ruby gave an example of how God might tell her that she was making a right or wrong decision.

Ruby: It’s ultimately my decision … and then I pray on it and if I’m sincerely praying and God doesn’t want me to do it, it won’t happen. But if he open up the doors, I can’t be fearful of stepping through it.

Interviewer: So does God provide you then with the opportunity for you to make a choice?

R: Okay. For instance, if I decide to do this school thing and, of course, I’m going to need financial aid. If he allows that to happen then I grow stronger with my decision. Things of that nature. Or if I’m working from 9 to 5 and I get a schedule at school from 6 to 7, than that’s more confirmation that I’m doing the right thing.

To Nera, an overheard conversation on a bus was a sign that she should not accept a job, but instead try to enroll in an employment program.

Nera: They [employment service] sent me to [a chain restaurant], but while I’m on the bus there’s a young lady there and somebody else, she’s saying that she works at [the chain restaurant]. She don’t know nothin’ about me going there. She say, I work at [the chain restaurant] and I need a real job.

Interviewer: And, you’re thinking it is a real job.


For Vanessa, her faith in God and her religious community are very important to her. When she was experiencing homelessness she sought assistance from her church and believes that while she makes choices, God creates the outcomes. She said in a prayer, “Lord, you know, and I have to stress the fact, I said, I did not do this to myself. There is no reason in the world I should have been homeless. And, I did not do this to myself, therefore why am I having to try to climb out of this hole that somebody else put me in?” She also has great faith that her prayers will be answered.
Right now, I am believing … and this may be completely off the wall from the norm … right now I am believing that I am going to be delivered from this whole mess and I have, as of yesterday I went to church, and one of the things the minister at the church was asking, ‘What do you want God to do for you?’ And then he had us write it down. And I’ve saying this for a long time. I want to be completely delivered from this whole mess of homelessness by August 31 of this year.

For study partners, experiencing homelessness has not diminished their faith in God. In fact, for Anna, her experience has only made it stronger.

Anna: I would have to say the most significant way I’m different now is that my faith in God has just skyrocketed. [pause] It’s much more than it used to be. I am a practicing Christian and without … I will say, and I don’t know if this is gonna help you at all, but I’ll tell you because this is the truth. Fact of the matter is that my life is being planned out by God. He is leading me. He is working it all out. He is in total control. So wherever He has led me, has made me better to be a servant of His. And, I appreciate that very much. I would rather have a deeper faith, than money. And, so I would have to say that I am much more faithful. Not that I’m more faithful, my faith has grown because of where I’ve been and what he’s taken me through.

A lot of people would have said, ‘What kind of a God would put you in a homeless shelter?’ Well, He didn’t send me there, He went with me as far as I can see. And if I hadn’t gone through that experience … ya know, the one thing I was terrified of, if He hadn’t taken me there to see, it’s just another place on their earth, it’s just another situation. I had always been afraid of it. Now, I know, I’m not afraid of homelessness, because I’ve been there and I know how to deal with that now… I’d have to say that my faith in God is much deeper than if I hadn’t gone through what I’ve gone through. I really appreciate that and I, I’m a lot calmer. I panic a lot less, which is very good. And I tend to, instead of panicking, I have to say that, in some instances of my life, it was panic and run, you know panic and run to … when I came to Chicago it was panic because we were in a situation where we were … it was Chicago or homeless shelter and I panicked and chose Chicago. I have learned that panicking and running doesn’t ever work because when you panic, you can’t think straight. So, I’ve learned to just kinda breathe through the panic and let it subside. And then, wait on a … because the Lord usually provides a better decision.

Interviewer: A better decision? Or a better option? Because you’ve talked about making your own choices, and now you’re talking about how God has this pre-determined path for you. So, I’m not understanding how you can make choices and there can be this pre-determined path.
A: Oh, I mean, I mean compared to some other person making my decisions for me. I can’t look to some person to make my decisions and make my life better, because there isn’t any other person on the earth that can pick my life and me be okay with it. There’s always going to be something wrong with something they pick. [pause] But, I guess that I would rather follow God than … I would rather leave my life to Him, than to leave my life to other people. And He, He shows me … well, for example, the apartment … I thought about this … was it better to just stay homeless and to not take the apartment because I couldn’t afford the full rent? Is that fair, to not pay the full rent? I decided to just go ahead and take it because it was offered and that was an agreement that someone else was okay with making with me. So I see that as Him giving me this opportunity. I think that … [case manager] said the other day that the receptionist position—that there may be a receptionist position with this agency. I think that that is an opportunity brought to me by God. It is my decision to apply for that position or not. I obviously have a decision not to apply for the position.

Faith was a big issue for some women. Their faith in God was a positive asset in their lives. It gave them strength, and helped them navigate their lives. God was responsible for the opportunities they were given or even the outcomes of their decisions.

Women identified a number of different influences. Homelessness (or the circumstances such as drug use, health issues, or abuse that preceded the homeless experience), other people, personal responsibility, survival, income/employment, and faith are all forces that women identified as affecting their lives and their decision-making process. These primary influences are items that women can either control themselves or are able to identify the direct effect of those forces on their lives. Some of these factors (specifically items such as physical health and income/employment) directly affect an individual’s ability to be independent. While these items affect the women on a very personal level and can considerably decrease the ability to be independent, they were not viewed as diminishing self-determination. These primary influences were also cited as factors in decision-making, but not as an influence in self-determination. It may be that there are factors that affect decision-making, but as long as the women make the final decision themselves, they continue to see themselves as self-determined. The extent to
which these primary influences limit the decision-making process or diminish the availability of options does not appear to be a factor in how they view their personal self-determination. As women are making active choices, regardless of the strength of the influences that shape the decision-making process, women view themselves as self-determined.

G. **Secondary Influences**

Throughout the interviews, women discussed a variety of topics. In addition to the primary influences that they discussed, women made mention throughout their stories of other items that shaped their decisions as well. For the most part, the items listed below are not emphasized by women as being strongly impressionable. Most of the comments were in passing or not the focus of what they were saying at the moment. That is not to say that women do not see the items as being important. It simply appears that, unlike the primary influences, secondary influences have less of a direct impact on decision-making, but rather sit in the background and create an environment in which decisions are made.

1. **Community resources**

The availability of community resources is an item that has bearing upon decision-making. Community resources include anything from localized support networks to employment programs to health care. For Elnora, the amount she receives in food stamps affects where she shops. “I’m eating because I get food stamps, and that’s not even enough. They don’t last no more, especially up here. Certainly not. Now south a little bit, it’s cheaper, you got Ultra, well they got Aldi’s here. But Aldi’s even getting high.” Diane tried living with her sister and participating in an employment program, but she found the program to be ineffective.

I went through an employment agency for some training but you know, it just took so long and I was homeless. This is when I was living with my sister, no I
didn’t have my own … I went though that and they sent me to these courses that were really just a waste of time because it wasn’t enough … it just wasn’t enough.

She eventually entered the homeless system and began living in a shelter with the hopes of accessing additional services.

I know me, because I made the decision to do that. I wasn’t forced, I didn’t have to live in the street. I saw resources that were available to me because that’s the way it was. I didn’t fight it. I went there not knowing a lot, but I knew that I would learn when I was there. So, yeah, and I just decided that I would go and find out what resources were actually available to me. So that’s how that started.

The health care system played a role in women’s lives. For Ruby, her lack of insurance forced her to go outside of the hospital system for treatment. “I went to the local hospital hoping that they would help me get into treatment, but because I didn’t have any insurance they told me that I had to go to someplace like [the free recovery center] or something where it’s free.”

Martina feels limited by her medical issues and lack of health insurance.

I have a physical. I have some medical issues right now. And I have-I’m awaiting some, to get into county hospital—which is a long wait—because I have a tumor in my bone, which is benign in my knee. And, I have a lot damage to my knee, like rips and tears in my muscles, my ligaments, my tendons, my cartilage. I have bad arthritis. So right now, I’m at a standstill because the type of work I do, I stand. I’m at a standstill because I don’t have any kind of medical card and no income at this time. So I’m not eligible for being disabled and I’m trying to see if I can find me something to do without if affecting my … my physical impairment.

Mary can relate to frustration with the health care system. She needs to obtain verification of her disability from a doctor before she can obtain a permanent subsidy. Because she receives Medicaid, this will require time. “Pretty much from 2001 to now, I probably only had three seizures, but I was telling my doctor like I gotta have a CAT scan of my brain in September ’cause I’m a county patient and you got to wait ’til they give you a date.” Elnora says that she is unable to work because of her leg, but is unable to see a doctor to have the issue addressed. “I was workin’ before I hurt my leg, my knee, and then when they told me I couldn’t
work there, I had to get a doctor’s statement. I went to the county, I took my MRI. They haven’t called me for my appointment to see the orthopedic yet and it’s been like almost two months.” Without addressing her knee issue, she will not be able to work or do other things she wants to do. Lives are affected by not being able to access health care in a timely manner.

A lack of resources was something that Susan found irritating. “At times it made me a little bitter, being homeless and stuff like that. I’m figuring like golly–I’m working and paying taxes and what is the city doing with my tax money? Here for times like this you want it.” Alpa was also shaped by a lack of community resources, but in a different way. She looked for assistance and employment in her ethnic community, but they “could not help” because her husband “was crazy.” The best they could do was to listen to her cry, but offered no other assistance. Now she “won’t go back,” not even for celebrations. She had to find assistance elsewhere after fleeing her abuser. Pamela had also wanted to access resources but stated that “there’s not a lot of places to go, especially for youth when you’re not a ward of the state.”

As discussed previously, many women would like a permanent housing subsidy, whether as a subsidy for individuals with disabilities or a Section 8 voucher. The low availability of these subsidies makes it difficult for women to find affordable housing. Women made housing choices based upon this scarce community resource. For women who become homeless as a result of economic reasons—they simply did not have enough money to pay fair market rent—subsidized housing could have been enough to prevent homelessness. For the women in the program now, more subsidized housing could help provide them the safety net (a guarantee of housing) they need to not return to homelessness. However, as subsidized housing does not exist, women will have to make decisions without that community resource.
2. **Inconsistent and underemployment**

The availability of jobs is tied to women’s self-sufficiency. Women frequently discussed how they needed to increase their skills through employment programs or education and how they were looking for jobs. Those factors place the onus of job acquisition upon the individual. Job availability, inconsistent employment, and underemployment were included as items that influence employment. Alpa reported looking for a job, but simply was not able to find one. Anna was underemployed. “I ended up being homeless anyway because then I went back into banquet serving which is seasonal and part-time, at best.” The hours were also inconsistent.

The job I have right now is very … well, for example, this week I’m only working one day this week. Because there are … after holidays there aren’t any parties… I don’t know why it works that way, but it does. I also heard that Fourth of July will probably be slow. So I don’t work a 40-hour week. I haven’t worked a 40-hours week with these two companies that I’ve worked with.

For years Diane had been living under the threat of layoffs from the postal system. When it finally happened, she was not able to collect enough in unemployment to sustain herself.

They finally laid us off after promising, promising. They were threatening on closing that facility down and blah blah and that’s why I was collecting unemployment insurance for that. And, that was enough to sustain me, but it wasn’t enough to get an apartment, 6, 700 dollars or so…

Susan had found employment, but was laid off soon after receiving the position.

Actually, I was able to find employment through a janitorial service, a private janitorial service. And, that wasn’t a very good–the job itself was fine, but the company itself wasn’t on the up and up. They lost their contract with the county clinic. So that landed me back in the unemployment field, just as I was like, it’s time for me to start getting together, and then this is what happened.

She did what she was supposed to do–get a job–but unless she was able to obtain consistent employment, she would not be able to escape homelessness.
Living with changing hours and changing income as a housekeeper is something with which Nera has also had to learn how to cope.

Nera: Yes, it’s five hours a day. Two weeks ago I was only getting four hours because they sold an office or somebody moved out of an office, so that cut my hours. Then for all last week I didn’t work because I was going through a transition period with where I work at and there was no work for me because I had been in the building for about a month and a half I had been in this one building. And, the person whose place I was taking–because we’re called floaters–the person whose place I was taking decided they was coming back to work. But they came to work and they worked two days, and decided they think they want to draw disability or something. So the supervisor of that building, she calls me back. God works through people. She calls me back and she was on her way to Cancun, Mexico, and she called me, she said, ‘Are you working?’ I said, ‘No, I didn’t work any this week.’ She said that didn’t I tell you that if something came up in my building, that I wanted you back there. She says I want you back to work Monday, back in the same job you had, but I want to give you another hour so you can have your five hours. Because five hours a day, it’s okay income. It’s an okay income, you know I get paid every two weeks, and at $575 or something every two weeks, I can pretty much…

I: Survive.

N: Yeah, I can pretty much survive. So that was my goal.

I: Could you survive if you didn’t have a subsidy–if you had to pay rent all by yourself?

N: This rent? I’m not sure … well now I’m in a position where I’d be able to, yeah, because at first it was like, I don’t know what building you’re going to be in or floating, but now I’ll be in a position to, but at first, no ma’am.

I: Because at first the income wasn’t stable, it wasn’t enough hours?

N: Yeah.

Theresa would like a new job that paid more, but says “not right now because it’s hard to find a get a job.” People are losing their jobs, and “even if I get a new job, those are the people fired first.” The job market affects her decision to look for a new job, but she does not list the job market as something that shapes her decision-making. For Janel, working at a department
store part-time was not enough. She only works two to three days a week, and “the hours change each week so the money changes.” She said that the conditions “make it hard to budget” and that it is “not enough for an apartment.”

Martina worked in a restaurant for a while, but “they had let me go because in the … in the … when it starts getting fall and winter. It was getting really slow, and they let me go, and it’s kinda seasonal, and so now it’s picking up and I’m anxious to go back to work.” Unlike the others, Quanda made a choice to remain working part-time in order to attend school. The result is that she has less money, and is less able to support herself. “I stayed part-time, even though I knew that I was having a hard time with my bills and my children and trying to get my credit together, but I stayed part-time only because I wanted to better myself and go on to school.”

Yolanda is bothered by not working a “normal 9 to 5 job” as well. She wants to save money but is unable to because of the structure of her current job.

This is like one of the first jobs that I got that pays a lot more than I normally get paid, but they have those restrictions were you can either work 7 to 1 or 1 to 5:30. So it’s like I can’t come in at 9 and work 9 to 5 which would be an actual 9 to 5 job. I’m just stuck with the 1 to 5:30 but that’s ‘cause they’re paying $15 an hour. They’re just trying to be slick about it.

While women need to obtain employment in order to have more money to live their lives the way they want, inconsistent employment and underemployment also affect their ability to become independent and self-sufficient once employment is obtained.

Women understood (with the exception of Vanessa) that obtaining a job was their responsibility; no one was simply going to hand them one. As Teone explained, “You have to go out and look and hunt and put yourself out there. No $95,000-a-year job just comes and knocks on your door and says, ‘Here, if you want me come take me.’” Even for those women that have employment skills and the motivation to work, jobs are not always available, and those that are
do not always provide a living wage. The continued emphasis on the individual, and what the individual is able to achieve, ignores the role of the overall environment: The availability and sustainability of jobs. There is lack of critical consciousness and community connection as study partners do not see their personal employment issues as related to larger societal forces.

3. **Safety**

   Safety was also a concern for women. Elnora had been working second shift at a grocery store but stopped when she hurt her knee. Even if she were healthy enough to work there again, she is not interested in returning to that position.

   And, so I can’t go back there which I don’t really want to go back there because I was working night at 12:00, I get off at like 12:30 a.m. in the morning, that wasn’t gonna work. ‘Cause it’s gonna get warm and it’s up here on Stewart. I can’t do that; I’m by myself. I’m on the train. I don’t even want to take that chance. It’s nuts out here. If I was gettin’ in a car so I could zoom on off, maybe it’d fine, but I’m on foot.

   While she does not explicitly say it, her references to the street which has gang activity and violence, her reference to the weather, during which time criminal activity increases, and her reference to it being “nuts out here” all indicate that she is concerned for her safety. Safety would also affect Susan’s choice of housing.

   I probably–this probably was the break that I needed ’cause considering that fact that if you’re not getting Section 8 you’re paying almost 6, 700 dollars a month depending upon where you want to live. If you want to live somewhere nice, it’s more. If you’re just willing to accept anything, if you’re in the ghetto with the gangs and stuff–I’m not saying they’re not everywhere but–you are so … it’s actually a benefit. A very good plus.

As a runaway youth, Pamela rarely felt safe. At one youth program, she ran away because she did not feel safe. Specifically, a male worker asked if her parents knew where she was; she was afraid that he would contact them. She wanted to participate in the program, but chose not to do so because she was fearful of the outcome.
A reason for not living on the streets, according to Diane, is safety. “I’ve noticed some of the homeless people like being in the street. They love that. I guess they feel a sense of freedom and independence. I needed to feel safe, period, because I’ve always felt that way.” She went on to say that she did not have problems living in the shelter “’cause I’m not afraid of people.” So concern for her safety did not prevent her from accessing a shelter, but it did prevent her from living on the streets. Concern for the safety of her things prevented Vanessa from entering an emergency shelter. “…and they had this—it was like a big rack—and that’s where you put your stuff, so it’s like anybody can go and get your stuff or whatever. And ’cause they were telling me if you got a cell phone, keep it on you, this kind of stuff, so I just felt, I couldn’t live here.”

Implicit in this section are the housing decisions women made who were living in abusive relationships. Those have been explored in other areas. Many women left abusers after years of abuse and, in the case of Martina, was sent to jail after her abuser was killed. Alpa can never return to her ethnic community because her abuser remains a member. She said that she did not insist on pressing charges against him because she was afraid that once he was released, he would kill her. Concern for safety affects decisions on where to live and when to leave. Safety is a gendered issue. Homeless women are at increased risk of experiencing violence and that appears to be reflected in their views of their environment.

4. **Laws**

Autonomy is a main component of self-determination. The actual right to make choices underlies further discussion of the concept. Some women did mention that the decisions they make had to be done within the confines of the law. Diane said it in a light-hearted manner, implying that she was not concerned that any of her decisions or actions were unlawful. “Self-determination to me is just … you’ve got to want it. Yeah, you’ve got to want it; you’ve got to
do whatever it takes to get it. What’s in the law.” [laughter] For Alpa, the law was not so funny. She was unable to move to Canada due to issues related to her green card. When asked if she makes her own decisions, her reply was, “If there is no rule. If there is a rule, then I can’t.”

Anike believes that one of the best choices she made was something that did not result in her going to prison.

I said that I cannot kill because that is a violation of the will of God and a violation of the land. So I fled. Ya know, I took what I could get together and I got a bus ticket and I got here… I think that was the best thing I’ve ever done was to make the decision not to do anything that I would end up in prison.

After her experience with her abuser, she does have fear in her life, but the existence of laws seems to provide some comfort. “And, if you do have the problem you have the law. You have the law. So it’s amazing. All of that fear I had in me, came from abuse. Every bit of it. And it was an illusion. It was never something real.”

Bernice has a criminal record. She described it like this:

Bernice: I messed up, and I ended up selling and drinking and whatever else I decided to do.

Interviewer: Is selling what got you the felony?

B: Yeah. Because it’s quick money. It’s easy money. But, ya know, you don’t think about how you’re destroying people’s lives and how you’re messin’ up and takin’ a risk and losin’ your freedom and things like that. So, I have to be honest, fear brought me in this last time, because I didn’t want to go to jail and they told me that if I messed up while on probation, I was gonna go to jail for two years.

I: So, after you got the first felony, they didn’t send you to jail at that point.

B: I was in jail for about eight days and [my] boyfriend came and got me.

I: And, then you were put on probation?

B: And, then I was put on probation. Yeah, so after being in jail and getting out I made a vow to myself not to use again. But I slipped up and I used, but it was like the beginning stage of my probation and my probation officer, I hadn’t really
seen, and I just talked to him and everything and so, fear really set in and I was thinking, ‘Man, if they drop me, if I ever get caught drinking or using, then I’m gonna go to jail.’ So I’m thinking, I can’t risk my freedom and so, it’s like, I just couldn’t bear the thought of being locked up anywhere.

The fear pushed her to seek treatment and she had been clean for 16 months at the time of the interview. The threat of going to prison forced her to make a choice that sent her life in a different direction.

The issue of the law was not theoretical for women with prison records. Harriet has difficulty obtaining employment due to her felony record and if she lies on her application, she then risks getting fired.

I know this is … ’cause I lost a job with my background ’cause I lied on the application, said I never been convicted. And, then I was wondering what day will I go in and get terminated. That was hard to work like that, knowing that one day, you don’t know when, you gone, and it’s a possibility. So it happened eventually. And right, that’s how you depend on paying your bills and stuff. And then you go in and you’re terminated. So people I’m with now, they know my background and all of that stuff. I don’t have to worry about going in and getting terminated.

She was not the only one whose felony record interfered with employment. LaToya was also negatively affected and believes that her background holds her back.

With job wise, stuff like that. That’s a … some peoples they tell me they hiring here, they hiring there, and they paying 10, 11 dollars an hour and the first thing that pop up in my mind-do they hire ex-offenders? You know ’cause I have a background. I always-that’s a fear of something too. And I’m always saying, ‘I’m not going to worry about that because what God has for me, He has for me, can’t nobody take it away, but I do.’ I still let that keep me from going, from filling out that application, but I know I got to sell myself. That was like in ’94, ’95, something like that, but they still look at that.

Nera was unable to move from a temporary to a full-time position due to her felony background. Her previous prostitution conviction was a barrier to obtaining employment as well. For Mary, in addition to getting her GED, she thinks, “I might try to get my record expunged, get a couple
of thefts off my record.” She thinks both earning her GED and having her record expunged will help her get a better job.

For the women whose job prospects are diminished because of their criminal records, and if self-determination is closely tied to being able to support oneself (being self-sufficient and independent) or achieving one’s goals (employment is a common goal for the women interviewed), it would lead to the conclusion that their criminal records affect their ability to be self-determined. None of the women interviewed made that connection.

In a contrary position, Martina, who has a conviction for a violent offense, viewed prison as a great opportunity. “I went to every class they had available in that prison, that they had let people come from the outside to volunteer, from self-esteem, healing trauma, sexual abuse … and I participated in completing every single class.” She credits everything she did while in prison to helping her move onto a path of peace and hope.

5. **Transportation**

Transportation affects women. Decisions are made around the availability, affordability, and timeliness of transportation.

This was the week before last, I went for a job fair. And one man, they did call me, called me twice, but the problem is [I] had no way to get there. Only had a bus pass and you had to take the commuter train. You couldn’t take the public transportation—it was in [far suburb]. Okay, so there was no other way and I’m like, even if I did get the job I couldn’t afford to pay no way, no commuter train fare and public transportation fare every day. That’s a lot of money.

This job was not even an option for Elnora due to its location and the lack of affordable transportation to get there. Anna talked about living in the city:

It’s just a place on the earth, ya know. It’s just a geographic place on the earth. It’s not any more fun. And it’s a little bit less fun because my family is really far away. Only because they live in the south suburbs which is not as far, but I don’t have a car, so I can’t just run down on the weekends.
Janel turned down a housing program in an outer ring suburb because transportation would become an issue if she moved out of the city. When she first entered the program, Anike spent a large percentage of her income on transportation.

I thought it was a bad decision to spend maybe 75% of my check riding the commuter train and the public transportation system—getting the month passes and stuff like that, but I wouldn’t be where I am today if I hadn’t vested myself. What I did, ya know, remember before we had minimum wage of $6.50 and then it went up a dollar? Okay, but I was having so much fun with the train that I didn’t realize that I was spending over half of my check until later on … this program reimbursed me, not reimbursed me, but they gave me a month pass. You know, I was well into the program. That wasn’t a bad decision, but a lot of people need to get this: If they get anything out of this interview they need to get out that—if you don’t help yourself, nobody else will. I was in a program, and I was actually paying half, almost all my salary for the monthly pass costs. Oh, let’s see a monthly public transportation pass is $80 and then the commuter train is about $90 now so it’s about $150 dollars and then I looked at it and said I barely making it. But hey, and then after I started there was other things that opened up. So, it was not a bad decision, but at first, it hurt, because nobody’s gonna help you, you gotta help yourself.

Susan also turned down a housing program due to transportation complications.

There was another housing program, but they were all like out in [town to the south], [town to the west], and [another state]. And, they were providing you like Section 8 and stuff like that, but I just told them that I didn’t want to move out of a city where there is—even though there is not great vast employment here, but you can find a job. But if you have a job and don’t have transportation, public transportation allows you to get around—and all these areas that they were offering you, they were offering you areas where you would just be a sitting duck. If you don’t have a car, how can you get around? So, if you don’t have a car, how can you go to work? How can you get gainful employment? So, I was just like, I couldn’t do it. I needed to be somewhere where if somebody was to call me and say, ‘Could you work?’ I could be like, ‘Yeah.’ Not ‘Can you work?’ and I be like, ‘Well, I don’t have a car’ and then they go on to the next person.

Chanise is fine with not having a car (as she knows it is an expense) and that does not concern her, but using public transportation can be bothersome. She was late for the study interview because she was waiting for the bus.
My trip over here, even waitin’ on the bus this morning, I was so angry ’cause I was downstairs—it only takes five minutes to get here on the bus from where I was at—because I was downstairs at 7:30 and I was so frustrated … well see that’s why I allow myself time to get where I’m going so I should’ve treated this the same way, the same amount of time.

Even with her lateness that day, she insists that using public transportation does not bother her.

Right now I don’t have a car. That doesn’t bother me. My sisters … at one time it would, that’s why I’m talking about it. I had a car, it’s not like something I haven’t had. I’m on the bus, public transportation is fine. A lot of people that has money, they’re on the bus commuting back and forth because they don’t want to drive because of the gas prices or whatever. But I want to make sure that I’m able to pay my insurance, pay my car note … the upkeep of a car and things like that. I don’t wanna … I like shopping too much. So somethin’ I’m gonna have to give up in order to get this car or this truck. My goal is to get a truck. I want a truck. Not just any truck; I want a nice truck. I gonna get that one day but that’s the last thing on my list because I have a bus card and I can go anywhere I want in the city and even outside to the suburbs if I know the commuter train. Wherever I can go I can go. So I don’t worry about those things. I have friends, a lot of friends that have cars. ‘When you gonna get a car? When are you gonna get a car?’ I’m not worried about that. I’m here with you now. You tell me you want me to be somewhere, I tell you that I’m gonna be there, I’m gonna do the best I can to do there. I’ll make sure that I get that bus route or train route or whatever. And I’m happy with it. So it’s okay.

She says that she is fine with that, but she frequently arrives at her place of employment two hours early because she gives herself an extra travel time in order to not be late. Her life is affected by the availability, reliability, and timeliness of public transportation.

6. **Child care**

In addition to the availability of public transportation is the availability of child care. Combined, they were a difficult combination for Quanda. “Because when they [her children] was with me, I couldn’t look for a job, I couldn’t get into school because most child cares close at 6:00 and have to have them there at a certain time. That was pretty hard for me, especially on public transportation.” Pamela left her son with her mother because she did not
have a lot of choices–no family to rely on and friends were not able to help. Her mother was her only choice for day care. She said that she needs child care because she “can’t have her kid with her everywhere she goes”. Susan would like a driving job, which was not possible when her child was younger.

I really would like to find a driving job. I don’t know why; I just like to drive. So I’ve only had my license a little under two years and the state requires three years. I figure well, after my third year I can begin to start putting in for driving. Kim’s getting a little bit older and it’s really–makes it more easier for me to work any schedule as opposed to when she was younger. I would have to work a schedule that allowed day care. If there was no day care than I wouldn’t be able to work.

Having older children in the house provided Theresa with in-house child care. Her older daughter has a babysitting job and she watches her younger sister at the same time.

7. Assumptions of others

As part of the interview, women were specifically asked what assumptions other people had about them. Assumptions of Others was part of the original conceptual framework within the Environment section – Norms of Behavior (page 37). There exist social norms regarding patterns of behavior and expectations of current culture. Using the qualitative studies of Bassuk (1993) and Passaro (1996), it was speculated that gender stereotypes were the norms of behavior that would directly affect the self-determination of the study participants. If women changed their behaviors to remain in the shelter or accessed resources based upon gender, homelessness, or economic status stereotypes, that could be viewed as a behavioral influence and have a bearing on the practice of self-determination. This study provides no evidence to support that possibility. Women do not appear to be consciously changing their behaviors based upon the assumptions of others and, for the most part, are not concerned with the opinions that others may have of them. Many of the responses are based on another individual’s personal opinion of
them, rather than societal stereotypes that could sway general perceptions based upon gender, poverty, or homeless status. Overall, women responded to this question as they did to many others: in an individualistic, personalized manner.

The question was: What kinds of assumptions do you think people make about you? Included below are some of the responses that focused on individual personalities and relationships with others.

**Alpa:** Because of the language issue, people cannot count on me.

**Chanise:** If a person come in contact with me, they listen to me talk, they see what I do, they shouldn’t really have no bad assumptions of me. If anything, they should have good assumptions of me. Unless they just hate me period. Some people hate on you just to be hatin’ on you, ’cause you have something better than them … and a lot of times I find people to havin’ bad assumption because … they might have a home, they might have a car, they have a good job, and then they lookin’ at me, they hatin’ on me because I might, I’m just happy all the time. I mean, whatever, I don’t know why, but if, if, they think about and say, ‘Well, damn, I got a car and I got a home I got something better than her.’ If they think about it that way. I don’t—if I had those things I wouldn’t look down on a person like that, but I don’t think … I never have time to think of assumptions that people might have on me.

**Elnora:** I don’t know; I really don’t have any friends.

**Harriet:** Well, I know a lot of people think I’m a nice person. Right, crazy, but a lot of people cuss me and… They like my company. Right.

**Janel:** People make good assumptions about her and she gets along with people.

**Martina:** I think people generally, I think the impression that people generally think I’m a nice person. And, and that, that they don’t feel me as no threat in any way. And, I usually have good rapport with people. I always do.

**Quanda:** I never have thought about that because I don’t care. There was a time to where I did care what people thought about me, but … once I put it in my mind that you don’t pay my bills and I don’t have to come home with you, I don’t care. So you can make any assumption that you want to make, I don’t tell you my business so you don’t know anything about me for you to make your assumptions. If you want to judge me by what you see on the outside, then go right ahead, but you still don’t know who I am.
Ruby: You know what, I don’t know about that. Theresa: Maybe yeah–like she shops at Walmart and so maybe some people think she’s nothing.

Yolanda: Honestly, when I tell them I stay on Dutton and Fero, everyone thinks I have money, they all think that. They’re like, ‘You stay up north? How much does that cost?’ And I’m like, ‘Honestly, it really doesn’t cost me anything, but, the cost is enough.’ Or um, if they just see me out, I have no idea. I wouldn’t want to think something bad, yeah, I wouldn’t want to think something—I would just pretty much say everyone thinks I have money, and I’m very fashionable, and I love to dress up so girly, girly it’s ridiculous. So people are always like, ‘Oh, where’d you get those from? How do you have a BCB shoes?’ Oh, girl, you got no idea how much I got these for. So, I would say that they think I’m rich.

In an attempt to narrow the focus of the response to each woman’s current circumstance, a follow-up question was asked regarding the assumption of people once they find out the respondent is homeless or in a homeless program. That question resulted in responses that were specific to the individual circumstance as well. It appears that the questions did not convey a broad enough tone to elicit the desired responses regarding specific stereotypes. Or it may be that overall, women really are unconcerned as to the opinions and beliefs of other people. Martina said, “Not unless they know. But if they do, well, I can’t do anything about it. It doesn’t change who I am.” Even responses that included generalized stereotypes about homeless people focused only on the relationship with the individual.

Anike answered the question first with a generality, but then moved to focus on herself.

Yeah, people have attitudes about homeless. I dealt with it at the nursing home as I told my therapist … people that have homes, and supposed to have an okay life, but they act like they mentally ill and homeless. So, I bet a lot of people … I stopped telling people, and they … I told my teachers at [local college] … and they had compassion. But get this: I worked harder and I achieved better to prove to them that I could do it. See, and therefore I won their respect. So, I don’t want to be homeless to get a free hand. It was not intentionally that I wanted to be homeless. I never thought that I would be homeless. But since I am homeless, I have worked hard to prove that I can be in society and function. See homeless make you dysfunctional, but leaving to this city made me … ya know, I had to grow up.
Bernice answered in a similar manner to Anike, by acknowledging that there are stereotypes about homeless people and then describing how those stereotypes affected her personally.

Well, everyone has a stereotype thought about people that are involved in certain programs. However, when I went over to Starbucks, the human resource knew that I was referred by an employment agency. So, in the door I have to prove myself because, “Oh, she’s from the [employment] program, you know. They’re addicts, you have to watch them, okay.” and then they give you the pat on the head, you’re doing well but ... we really need you to step it up, alright. That was so… Ugh! It’s like, anything happened, they would look at me, ya know, and I work with a group of young girls, young people that didn’t really care about the job because it’s Starbucks, a coffee shop. They didn’t care, but it depends on who you’re around and who knows.

In terms of personal opinions about the homeless, Mary referenced her family and their opinions about people who experience homelessness. She indicated that people make assumptions about her because she is homeless.

Oh yeah. Yeah. Most definitely. My family, because I come from a family like, one of my sisters is a detective, one of my sisters has a master’s or a BA or something and she’s top, top, top in a casino back in our hometown ’cause she’s always telling me--even though by me being homeless, I never been to the penitentiary. I have some misdemeanors, ’cause you have to steal, so I had some thefts, some misdemeanor thefts. I don’t have any felonies on my background. So my sister, my one sister, well we did talk, we didn’t communicate a lot at first, she’s always saying--you come home and clean yourself up. I can get you a job at the casino, paying you 12, 15 dollars an hour. And, my brothers went to the Navy. I didn’t come from a family that just didn’t do nothing. They don’t have PhDs, but they surviving in life. I have one cousin, he did go to Stanford and he did graduate with a PhD. So I got some peoples in my family that went to college and did things. I don’t have just a bunch of family members in jail for triple murders and all that. People do judge you when you’re homeless, most definitely.

Women are aware of the negative assumptions about homeless people, but only see those assumptions as affecting them through interactions with others.

Many women are unconcerned about what other people think about them. LaToya was unable to answer the first question regarding assumptions people make about her (“I don’t know.
I can’t answer that one.”). When asked the follow-up question if people made assumptions about her because she was homeless, her response was “I really don’t care.” Diane was also unconcerned about what others thought of her.

Diane: Yeah, I’m not ashamed to tell people that I was homeless. I don’t just blurt that out to people ’cause that’s nobody’s business but if so, if it goes there then it goes. I have no problem with sharing that.

Interviewer: You don’t think they think negatively of you, that maybe you’re lazy or they assume that you’re a drug user or that you’re mentally ill? You know, the stereotypes that go along with homeless people.

D: I don’t worry about that because I’m none of those, so, if it doesn’t apply, let it fly.

Teone does not worry about the assumptions of others, especially because those individuals do not fully understand her personal experiences.

Interviewer: Do you think people make assumptions about you since you’ve been homeless?

Teone: [long pause] I’m pretty sure that they do. I’m pretty sure that they do, but it’s never been brought to my attention, but I’m pretty sure that everybody does if they knew that–sitting around and gossiping, catty and stuff like that, so I’m pretty sure, but it’s never been brought to my attention.

I: What types of things do you think they would think about, if they knew you were homeless?

T: Was she on drugs or something–I don’t know. What is she doing? How could she stay in a shelter with her daughter? Probably stuff like that. Until you’re in my shoes, you really can’t say, you can’t really judge me …’til you walk my shoes and you know my background, you only can–like you said, you don’t really know what’s really, truly going on.

Since the assumption questions were unable to elicit more general responses about homelessness and/or gender stereotypes, information regarding the respondent’s beliefs of society’s perceptions and assumptions must be found elsewhere. Throughout the course of the
interview, some women did make statements regarding broader societal stereotypes. According to Susan,

Just that I think … people should give women, mothers, single mothers, a little bit more credit for the things that they go through, things that they have to do and put up with to make sure that theirselves as well as their children are safe and brought up well. I don’t think we get enough support or enough credit for the things that we do or the things that we have to put up with. I think that tends to make us the strong people that we are.

Bernice also talked about the assumptions that others make about homeless people in general.

One thing people should know is being someone like myself, don’t stereotype them. And don’t say, “Oh, you poor baby” or don’t look down on them, on individuals like myself because no one asked to be … you got professors, you got doctors, you got lawyers … you’ve got the biggest and the best of people who become homeless. So it doesn’t mean the lower class of people always become homeless, it just means that people have run into something in their life that ’cause them to become this way and it’s up to that individual to get out of the rut and get out of that homeless status. And, it doesn’t stick with you forever. You find your way out if you really want to make it. My thing to society is, don’t have the stereotyped thoughts about people like myself and don’t feel sorry for us and try to help us in any way you can if you can. If you can’t, that’s fine too, but don’t put people down like myself because a lot of people do have this stereotype.

Neither of these comments about general stereotypes was in response to the question about assumptions, but imply that women are aware of how society may view them. Not enough information is available to determine if all women are aware of the general stereotypes of people who experience homelessness.

Among the women interviewed, there was a difference in stereotypes of the homeless population between two women who had very similar circumstances. Both Diane and Janel became homeless due to economics. Diane lost her job, and Janel spent her life savings on medical bills related to her coma. Diane did not view herself differently from other women in the program. When asked if she did, she responded, “I sure don’t.” Even when participating in activities with women with addiction histories who would talk about their experiences, Diane
still did not see herself as different. “I could appreciate that they [other women in the program] could talk about it so freely and they were easy with themselves. They seemed grounded. I didn’t feel any different. We’re all human.” Janel did view herself as different. She said that there is a difference between her and the people who “never try to pay rent or live without help”. While neither woman fits the homeless stereotype of a substance abuse or mental health problem, Janel holds those stereotyped views of homeless people, even though she herself has experienced homelessness and does not fit the homeless profile.

The questions in the interview guide were developed from studies of the homeless experience that indicated gender roles shape the behavior of homeless women as they seek resources and assistance from shelter staff. While some study partners had positive experiences while in emergency or interim housing facilities, several did not. Women described poor treatment from staff and alluded to potential assumptions that shelter staff could have had about people accessing homeless services.

Quanda described shelter staff that looked down on her for not being a good mother to her children. They implied that she did not care about her children.

They did that to me. I hated them for that. How dare you? If I had somewhere for them to go where I know they can eat anytime they want to, they can have fun, you know what I’m saying? They can be somewhere clean and safe, instead of being here and being miserable, and for them to actually through that in my face every time it came about where I felt like the money should have been over with them, instead of here with me, and me giving it to you. They was like, ‘Well, you need to bring your kids here, you’re a bad mother, I can’t picture a mother doing that.’ It was like, very hard for me, so I ended up joining the employment program while I was there. And, the employment program is what got me my job and what got me the housing that I’m in now. So actually going there was a good thing, but the experience was so horrible because I had to be reminded of every day or everybody looking at me like a bad mother.

When she first became homeless, Diane accessed a religiously-based emergency shelter.
It was just awful. It’s … a … Bible-thumping, tormentors. I stayed there a week. It was in this church, or I don’t know what it was, it was just awful. Awful, awful, awful. The first night I got there I slept on the floor in like the church part of it, and there were women sleeping on the pews and I was like, ‘Oh well.’ I wasn’t afraid or anything, ’cause I’m not afraid of people. And I didn’t really know what to expect so I abided by that. During the day, you had to … after you eat your breakfast … first of all, you have to get up at 4:00 in the morning, which is fine, then you have to leave if you’re not going to stay for the church service. You must just leave the building. If you stay for the church service, then you have to leave after that. Then, if you come back, all these women are just herded into this chapel for Bible classes and we’re all sitting on pews. And, then at night they hold a lottery to see whose going to get a bed. And, they have all these sleeping clothes, underwear that they pass out and you must take a shower, it’s like you’re herded like cattle to the shower every night.

Theresa was required to take certain classes or leave the homeless program in which she was participating. This was not a problem for her because she knew about the classes before arriving at the program. However, it could be viewed as an assumption of the program that she needed those specific classes based upon her circumstance. The description of shelter life given by Susan could be a result of negative assumptions of shelter staff.

You have these people who are supposed to help you with, raise you up and stuff like that, and they just tend to belittle you. So it wasn’t a very good experience at all. You have to really bite your tongue a whole lot, take a lot just because of the simple fact that you are homeless and you don’t have anywhere to go and they use that as leverage, as power. It’s like they get off on treating you that way because they know as soon as you say something back to them—was that you and me was in the street and something like that and you was to say something to me and that would be something you would expect, a reaction back, but they know that if you act the way that most people would, they can get you put out.

Women are able to identify poor treatment by staff, but not connect that poor treatment to negative beliefs that staff members hold. These examples potentially demonstrate assumptions regarding homeless women or of homeless people in general, but are not referenced in response to the specific question about assumptions. The individual perspective that permeates the
answers to all questions leads women to overlook experiences in which societal stereotypes of homeless people could have affected them, such as with the behavior of shelter staff.

Throughout the interviews there is no connection between individual circumstance and general social policy, and that holds true for assumptions as well. The assumptions that society has about poor and homeless people are inherent in social policy and thus can support or hinder the availability of resources and services. Women did not make that connection. It is possible that the question itself led women to give individualized responses and so no definitive conclusion about the women’s understanding of societal stereotypes, social policy, resource availability, and individual behavior can be made. However, the individualized responses to the questions regarding assumptions support the overall conclusion of a lack of collective thinking and community connection of study partners.

9. Primary/secondary influence layering

As previously described, primary and secondary influences were identified as separate identities by how women described them (being able to control them) and whether or not women identified them as an influence (acknowledging the impact of the force). As women described their lives, they frequently talked about situations or circumstances in which some type of force affected their behavior in some way. If the force was acknowledged by the women and they described it as something they had control over, it was categorized as a primary influence. If the force was not acknowledged and it was something that they did not have control over, it was categorized as a secondary influence. Neither the primary nor the secondary influences have an effect on women singularly. These forces occur simultaneously, with any given force having a greater impact depending upon the circumstance. These two types of factors appear to have a layering effect on the individual. Primary influences are represented in the circle below. It is not
that any individual influence is stronger than the rest, but rather that they are all identified by the women as having a direct role in their decision making.

Figure 1: Primary Influences

The circle in Figure 2 represents the secondary influences. The influences also have an effect on decision making, but they are not as evident to the women interviewed and not perceived to be a direct force on their lives.
As described earlier, secondary influences are not as evident to the women interviewed as primary influences, but they do have an impact. As secondary influences are more environmental in nature, they can be seen as items that are in the background of the women’s lives. Women may not be able to address them directly (in the same way that they can personally control some of the primary influences), but they are there nonetheless. How these two circles interact can be seen in Figure 3.
The primary influences circle is placed in the middle of the secondary influences circle, showing that they are both evident and occur simultaneously. As secondary influences are not as evident to the women and seem to create an environment in which they live their lives, those influences are placed in the background and in grayscale. In this way the primary influences are stronger and more evident, but the secondary influences continue to be present. The interaction of the primary and secondary influences has a layering effect. The primary influences have the greater visibility whereas the secondary influences are in the background, where they are not as evident but still significant as they create the environment for decision-making as a whole.
Self-determination is a complicated concept with many layers. Women are clearly defining it and believe themselves to be self-determined. They see themselves as independent, as self-sufficient, and as achieving their own goals. Having their own apartment and paying their bills is a key reason for their independence. The receipt of housing subsidies does little to dampen their feelings of independence. Self-determination also relies on the ability to make decisions and then follow-through on them. Study partners believed that they were able to make decisions and follow-through on those decisions. While they claim to be determined to achieve their goals, their goals are based on immediate needs, often lack specific planning, and frequently are not achieved.

Women do make decisions, but they make them from available options. The options in their lives could be considered “undesirable” to those on the outside, but that is not relevant to them. They are making active choices from the available options, and that is what is important. The options available and the decision-making process are often swayed by identified and non-identified forces. Regardless of what aspect of determination is under review, women focus on those items over which they wield some type of control: Themselves and their actions. They cannot control what is in the environment and what options are available to them. So definitions and influences of self-determination are focused on themselves, what they can control, and the direct effect on the individual. The individualistic view of self-determination leads them to ignore environmental, social, and political influences, and to place all the ability to be self-determined within themselves. Because they view themselves as having control regarding the various influences of self-determination, they conclude that they are self-determined.
V. DISCUSSION

The results show a congruence in the definition of self-determination as described by homeless women, but a disconnect between their perceptions of themselves as self-determined and their actual practice of self-determination. Women view themselves as independent and self-sufficient, which then matches their definitions of self-determination. The definitions also included accomplishing personal goals, which closely matches the underlying study definition. When goal accomplishment was examined closely, it was apparent that while women see themselves as having accomplished their goals, many of them could not articulate goal accomplishment. Future goals lacked details. Women relayed stories about identified and unidentified influences in their lives, but did not view these as limiting their self-determination. These points are essential when answering the research question posed by this study.

A. **Research Question 1: How do homeless women in a HUD-funded housing program define self-determination and what does that concept mean to them?**

Women defined self-determination in a similar fashion to the underlying definition within the interview guide: Making decisions and then following through on them. Women discussed being determined to do what they wanted to do and then achieving their personal goals. They also referred to independence and self-sufficiency as components of self-determination. Examples of how women were independent and self-sufficient were given to support their claims of self-determination. The goal is to be self-determined, whether it be in the form of independence or decision-making. Personal responsibility was also an articulated theme, and was evident as an influence in how women made decisions. Self-determination was viewed positively, and for all but four women, it was something that they saw themselves as already fully possessing.
B. **Research Question 2: How does participating in a HUD-funded program impact their perceptions of self-determination and their practice of it?**

Participating in a HUD-funded program has no bearing on the overall definition of self-determination. Ten women were unaware that self-determination was a programmatic outcome and four women were unable to define it. The agency utilizes substance abuse and mental health services as methods to increase client self-determination. Its measurable self-determination objectives, as listed in the FY09 Annual Progress Report to HUD are:

1. 70% of clients with a substance abuse history will maintain sobriety
2. 70% of clients with mental health issues will avoid hospitalization

None of the definitions provided by women for self-determination specifically reference substance abuse or mental illness. Participating in this particular HUD-funded program has not shaped how women define the concept. However, it should be noted that the questions were not asked of the women if they knew how the agency defined self-determination or if their personal definitions were influenced by the agency’s definition.

Women view themselves as self-determined, in part because of the independent nature of their program. Women defined themselves as homeless (and not independent nor self-sufficient) when they were living with friends and family, or living in a homeless shelter. They did not view themselves as homeless currently, as they had their own apartments, signed sub-leases with the agency, and possessed keys to their units. They paid rent and were responsible for their other bills. In their minds, they were not homeless. To HUD, however, they are homeless.

For this study, women were recruited from program models that HUD refers to as transitional housing. Program participants have two-year time limits. As the assistance is not permanent and women must leave the program after a specific time frame, HUD considers
participants in this type of program to still be homeless. Locally, the Continuum of Care has converted all of its program models to conform with a Housing First approach. A Housing First approach supports the movement from homelessness to permanent housing as quickly as possible, minimizing the amount of time spent in emergency or transitional shelters. In order to continue to access HUD funding and comply with regulations, as well as incorporate the Housing First approach, the local Continuum of Care instituted a Permanent Housing with Short-Term Support housing model. This model continues to utilize HUD money and remains a two-year program. It does this by providing a subsidy for households to live in their own apartments in the community and then provide supportive services. At the end of the two years, women assume responsibility of their leases and the services are no longer provided. They never have to leave the housing; it is permanent. Only the services are temporary.

Universally, study partners did not view themselves as homeless. The fact that they are participating in a HUD-funded program and receiving a housing subsidy did not diminish their sense of personal independence. They are doing what they need to do, and the housing subsidy is simply a form of assistance that they have been able to access. Neither in the interviews nor in the member check did the women feel that a housing subsidy limited their sense of independence or self-determination.

So regardless of how HUD would define them, women do not view themselves as homeless. This may speak more to the program model than the source of funding. The program model provides them with individual apartments (as opposed to congregate living), it does not force them to move at the end of the program (they can remain in their units), and they pay 30% of their income towards rent (just like a Section 8 voucher or other housing subsidy). The program structure allows them to live independently, which is key to their perception of self-
determination. HUD provides the housing subsidy, which does not diminish their perception of self-determination. The program model gave them their own apartments, which bolstered their perception of self-determination. If independence is a component of self-determination (and a housing subsidy does not contradict that), then their practice of self-determination is congruent with their personal perceptions of it.

This particular program model was introduced within the local Continuum of Care as part of its Ten Year Plan to End Homelessness. The local plan will not officially complete its 10 years for another two years, and of those regions that have plans, very few continua across the country have completed the 10 years. Therefore, it is difficult to determine how successful these plans were in ending homelessness. However, as the permanent housing with short-term support model appears to be influential in how women perceive themselves, their homeless status, and their self-determination, evaluation of the effectiveness of the local plan may need to not just focus on HUD’s definition of exiting homelessness, but also on the definition of program participants and how they define success.

Part of no longer viewing themselves as homeless is the belief that they had exited homelessness. For these women, exiting homelessness and not returning is a goal for them, which they believe they have accomplished. Goal accomplishment is the other factor of their self-determination perception. If their goal was to leave the shelter system and exit homelessness, then the program assisted them with achieving that goal. Beyond that, women were almost all in agreement that the program allows them to establish their own goals and then decide how best to achieve those goals. Women have choices within the program. Thus, participating in a HUD-funded program supports their personal perceptions of self-determination and allows them the freedom to practice self-determination to the best of their abilities.
C. **Research Question 3: What is the applicability and relevance of the current conceptualizations of self-determination as they apply to homeless women?**

There were four identified areas within the conceptualization of self-determination. These areas were derived from a variety of disciplines, but none had been examined specifically with homeless women. The applicability and relevance of each area will be examined. The literature review laid the foundation for each section of the conceptualization; those details will not be repeated here. For a qualitative inductive study, Gilgun (1992) suggests that existing literature is an appropriate triangulation tool to cross-validate findings. The comparison of the conceptualization (derived from existing self-determination theory and literature describing the experience of homelessness) to the data is the only form of triangulation that I completed.

1. **Freedom/autonomy**

   Freedom and autonomy is the absence of laws or other formalized constraints that prevent someone from acting according to her will. This is a key starting point for many self-determination theorists (Beistek, 1975; Beistek & Gerhig, 1978; Gilson & DePoy, 2004; McDermott, 1975; Spicker, 1990). For many women, this was a non-issue. In fact, a discussion of laws or regulations preventing them from acting of their own accord or forcing them to behave in a certain way did not occur during many interviews. Freedom and autonomy are applicable to all people and their practice of self-determination; being homeless does not make the concept any more or any less applicable than it would be to someone who is not homeless.

   The exception was for women with criminal backgrounds. Imprisonment impedes a person’s ability to choose and the relevance of this concept was much more evident for those individuals. Not adhering to the law, whether through drug use, prostitution, or manslaughter, resulted in a prison or probation sentence for seven women. Losing their freedom or autonomy
had negative consequences, as prison records limited their ability to obtain employment. So while the women may have had opportunities to make different choices at the point in time that they committed crimes (which is in and of itself a debatable point), they were unable to exercise that same ability while in prison and their choices remained limited once their prison stays had ended.

Only two study partners (Anike and Bernice) gave examples of choices they made specifically not to break the law. The consequences of breaking a law had some bearing on their actions. It is impossible to know if they would have harmed another person regardless of the law. Self-determination theorists would say that a law that prevents someone from causing harm to someone else is not an actual infringement on an individual’s self-determination as it protects the self-determination of people as a whole. Also, the temporary loss in freedom from imprisonment may not mean a complete loss of self-determination. Martina chose to attend support and educational groups while in prison and to maximize her opportunities. In order to understand how institutionalization (prison, mental hospitals, detoxification centers) changes the individual practice self-determination, it would be necessary to interview those currently in those particular situations. It may be that self-determination is limited, but not eliminated.

Self-determination theorists argue that the concepts of freedom and autonomy are the cornerstone pieces of self-determination, and without them self-determination is an impossibility. Thus, it is an applicable concept to everyone, not just homeless persons. However, it is also something that is more relevant to women who have temporarily lost it, as codified laws and the consequences for breaking those laws were discussed by women with criminal records.
2. **Capacity**

In the initial conceptual framework, capacity was defined as a person’s skills, abilities and knowledge that allow for reasoned decision-making, and the personal resources that assist in the implementation of decisions (Beistek, 1975; Gilson & DePoy, 2004; Leff, et al., 2003; Tower, 1994; Weick & Pope, 1988; Weymeyer & Schwartz, 1997). Given the nature of individual interviews, it is impossible to definitively determine someone’s capacity. Women did not complete a standardized measure to assess their capacity or their use of skills during the decision-making process. That is not to say that these items were not relevant.

In the interviews, women articulated both short- and long-term goals, and then described how they would achieve those goals. Goal achievement focused on individual traits and personal resources. In order to achieve their goals, women needed additional income. This could occur through additional schooling or a vocational program that would give them the skills to obtain employment, or a different job that would provide a greater income. Money and employment were constant themes throughout the interviews. Financial resources were included in the conceptualization as a personal resource that would assist individuals in implementing decisions. For women that were employed at the time of the interview, they needed additional income to support themselves. To obtain housing without a subsidy, they needed greater income. Women acknowledged that fact and were aware of their jobs as personal resources, the greater the income, the greater the level of independence and the greater the level of self-determination.

Of the study partners, nine were former substance abusers and five had a mental illness of some kind. Those issues shaped how women made decisions. They described scenarios where they made choices based upon needing to obtain drugs or choices made while actively using drugs. Women with a mental illness talked about being in certain frames of mind when they may
have made poor decisions. While substance use and mental illness affected their decision-making, women did not describe themselves as lacking self-determination during those periods of time. Substance abuse and mental illness may have altered their realities, but to the women interviewed, they were still making active decisions within those realities.

Personal social resources were explored within the conceptual framework. The presence or absence of personal social resources can be a capacity issue—those that are homeless have fewer social resources (in the forms of friends and family, and thus assistance and resources from them) than those that are not homeless. These are different from environmental resources in the fact that these resources are cultivated through personal relationships. For the study partners, decision-making included available personal resources, but these resources did not preclude them from becoming homeless. For some women, the resources available from friends and family were inconveniently located, forced the respondent to rely on someone else, or required the respondent to tolerate disrespectful behavior. Five women became homeless when family members refused to assist them, two because of drug usage, and three were forced out due to a family disagreement. Women made it clear that they wanted to be independent, and relying on friends and family for assistance would undermine that quest. So while availability of personal social resources can affect women’s decision-making, individual goals of independence led them to exclude those resources and work toward self-sufficiency. Personal social resources influence their decisions, but women were clear that their own self-determination can only occur when they do not depend upon someone else. Independence and self-determination were equated with doing everything on their own.

Using descriptions of the capacity construct from the conceptualization, reasoned decision-making can be reviewed by how women make decisions, the understanding of what is
required to fulfill each decision, and how the decision is then implemented. Women make decisions though the combination of their own personal desires and the options available to them. As indicated in the results section, women frequently made decisions from available options. Women often described situations in which they made “gut instinct” responses. Examining short- and long-term goals indicates that those decisions are grounded in the desire to fulfill basic needs, such as housing and income. Many women did not have plans for accomplishing their goals and plans that did exist were often vague and lacked specific steps. Previous plans were not implemented and goal accomplishment did not occur.

Women gave descriptions regarding self-determination that focused on independence and decision-making. These items are strongly connected to individual capacity outlined in the conceptual framework, indicating that the capacity portion of the conceptual framework is relevant to the study partners and is applicable to their own descriptions of self-determination.

3. **Personal psychology**

The personal psychology to be self-determined includes internal motivation and sense of self. Factors included in this are self-awareness, self-observation, positive attributes of efficacy and outcome expectancy, and internal locus of control (Deci & Ryan, 2002; Leff, el al., 2003; Perlman, 1975; Spicker, 1975). Women believed themselves to be capable of making decisions and then implementing them. Only four study partners described limitations on their self-determination. Even then, those women indicated that they were still self-determined, just not as fully as they would like to be. Women described themselves as being able to achieve their goals; they were confident in their abilities. They had a positive sense of self-efficacy and believed that good things were to come because they would make them come. A key example
was exiting homelessness. All of the women had set their minds to exit homelessness, and they believed that they had accomplished that goal.

When describing their decision-making and self-determination, women focused primarily on their personal attributes. They focused on what they could do and how they would do it. For some, the only entity that had more control over their lives was God. Women frequently talked about following God’s path, looking for signs from God, or God controlling the outcome of their decisions. But even for those women, when asked if anyone or anything stopped you from living your life the way you want, the answer was no. It is unknown how much of this belief in their own abilities is an accurate portrayal of how they view themselves, or how much of this belief or self-report is socially constructed. It is possible that the cultural perception of the “strong black woman” influences their views of their own abilities. The belief that success is possible through increased efforts and determination, despite adverse conditions and a lack of resources, could lead women to conclude that they are able to be self-determined if they have enough tenacity and drive to be so. Women may identify themselves as self-determined because that, to them, is the only socially acceptable response. How much of their belief in themselves originates from social constructions is unknown; however, women were clear in their belief that they are self-determined.

While women believed themselves able to accomplish their goals, they gave contradictory examples. Not only did women not have detailed plans on how to accomplish their goals, they frequently gave examples of unattained goals. As described previously, there are individual and environmental factors that prevent women from accomplishing their goals that they do not acknowledge. Lack of subsidized housing prevents women from obtaining permanent housing subsidies; inconsistent and underemployment prevents women from earning
enough money for an unsubsidized unit; difficulty accessing health care impedes receiving proper care for health issues, etc. These impediments are external. As most of their discussion of self-determination focused on individual traits, it is not surprising that they do not acknowledge the external factors as influencing their self-determination. Their personal orientation was very much internal, indicating an internal locus of control. This occurs whenever “reinforcements (both positive or negative) are perceived by the individual as being the result of his or her own behavior, efforts, or relatively permanent characteristics” (Phares, 1994, p. 347). An internal locus of control is a contributing attribute of self-determination. The complicating factor is these environmental forces exist regardless of their beliefs about them.

There is a disconnect between what study partners believe themselves capable of and their actual accomplishments. It is not to say that they do not have the capacity needed to accomplish their goals or that they will not accomplish their goals in the future, but based upon information given, it is known that many previously set goals have not been accomplished. Both personal barriers and environmental barriers prevent goal accomplishment. While self-efficacy may be high and women may believe that they are in control of whether or not they accomplish their goals (strong internal locus of control), they often times are not. External influences have an effect on the lives of women and their goal accomplishment, but this is not acknowledged. This lack of observation and self-awareness may be preventing them from being able to create detailed, realistic plans and understand what is needed to accomplish them. If women do not know what is stopping them, they cannot address it or make plans that incorporate those factors.

This was not true for all women. Anike and Diane gave examples from their lives of goals they had set and how they had accomplished them. They also had future plans with specific details. But for the majority of women, what they believe themselves capable of was
inconsistent with what they have been able to accomplish previously. This self-belief seems to come from the perception that they had exited homelessness, so they had all accomplished that goal. Whether as participants in a housing program for homeless women they had actually exited homelessness is a debatable point. They believed themselves to have accomplished that goal, and that is a strong foundation on which they based their personal beliefs of goal accomplishment. In fact, many of these women have persevered despite facing great difficulties and hardships. They have been resilient in face of adversity and have survived domestic violence, drug addiction, mental illness, incarceration, family disputes, and homelessness.

It appears that personal psychology, as explored within the concept of self-determination, is more than just a belief in oneself and motivation to succeed. It is the previous practice of self-determination in one’s life (such as the achievement of a previously established goal). It is an awareness of one’s own limitations and the environmental factors that affect decision-making and goal attainment. For the women interviewed, personal psychology is applicable and relevant, because they believe in themselves and their capabilities. They believe that if they are going to succeed, they need to be motivated and determined.

Self-efficacy appears to be a strong component of the personal psychology aspect. Perceived self-efficacy, as defined by Bandura (1994) is “people’s beliefs about their capabilities to produce designated levels of performance that exercise influence over events that affect their lives” (p. 71). The level of self-efficacy that one has can evoke thoughts, feelings, motivations, and behaviors. High levels of self-efficacy lead people to believe that they are able to affect things around them and then they act accordingly; low levels of self-efficacy lead to feelings of powerlessness and lack of effort towards accomplishing tasks. The women interviewed believe themselves capable of accomplishing their goals. The majority of the study partners claimed that
they are determined, independent, and self-sufficient. They believe that they are able to change their lives and view themselves as having already accomplished much. That sense of accomplishment is a key factor in self-efficacy. Experience of success in overcoming obstacles through individual actions and effort is one factor in the development of high levels of self-efficacy (Bandura, 1994). Women viewed themselves as having achieved the goal of exiting homelessness and that is a main factor in their personal assessment of self-determination. Those views can also be used to support an assessment of personal self-efficacy.

Beyond that is the question of their actual accomplishment of said goals, not just the belief that those goals can be accomplished. Study partners believe that they can accomplish their goals. However, many previous goals have not been fulfilled. Not achieving previous goals should be an indicator of low self-efficacy in an individual, but in this case it is not. Women believe themselves to be capable of goal achievement regardless of their experience of not achieving previous goals. Given the ideological underpinnings of social policy in the United States, including the self-reliance and the “bootstrap” mentality, it is unknown if women are expressing their true beliefs or are simply repeating beliefs that are socially acceptable, perhaps even required. As self-efficacy was not evaluated using a formal measure, the only available data regarding women’s belief in themselves comes from the interviews. Based upon that, there is a disconnect between women’s beliefs in what they are able to accomplish, and their experience of actual accomplishment. It may be that the exit of homelessness has such a powerful effect on one’s personal belief system that it overpowers negative experiences, including lack of goal achievement. For these women, while their self-efficacy and belief in their own self-determination may be strong, their practice of self-determination is not as evident.
From a broader perspective, so many psychological concepts could be applied to the perception and practice of self-determination, that none may be useful at all. To include motivation, self-efficacy, locus of control, self-awareness, self-observation, and resiliency may add a layer of unnecessary complexity as each factor would need to be taken into account. As is evidenced by the women interviewed, psychological factors could also counteract one another (a high level of self-efficacy is possible due to limited self-awareness). The perception of self-determination and its actual practice are not the same and it may be possible to have a perception of self-determination but not the actualization. It may be that the perception must precede the practice, so the practice is impossible without the perception.

Overall, the psychological drive component does not provide much information regarding the ability of homeless women to make and then implement decisions. The personal psychology piece may be able to provide insight into how people become self-determined and the underlying psychology of self-determined people, but it does not appear to be relevant as an indicator of actual self-determination.

4. **Environment**

Three aspects of the environment were outlined in the original conceptualization: norms of behavior (Berstein, 1975; Wick & Pope, 1988; Wilson, 1975), opportunity and resources (Freedberg, 1988; Gilson & DePoy, 2004; Mithaug, 1996; Salzberger, 1979; Saleebey, 2002), and the influence of human service organizations (Freedberg, 1994; Furlong, 2003; NASW, 2008; Rothman, 1989; Spickler, 1990; Tower, 1994). Norms of behavior were discussed by women when examining their participation in their current housing program. Many women referred to it as living the same way you would if you had your own apartment. They
had to pay rent, pay their bills, not have additional people living with them, and take care of other responsibilities. They see themselves as just following the rules of society.

Women frequently made choices from available community resources. When they were homeless, they described obtaining information about and accessing needed resources from community programs. These included shelters, food stamps, recovery homes, detoxification centers, soup kitchens, health care, and employment programs. Many women talked about their wish to have a permanent housing subsidy. Women accessed programs that were useful to them. While it was not explicitly stated, if additional resources were available (such as low-income housing or housing subsidies) they would have swayed the decision-making process. Other environmental factors played a role as well. Women described the availability of consistent employment, child care, neighborhood safety, and public transportation as items that shaped decision-making.

One key aspect of the environment is opportunity. When the resources of the environment match the capacities of the individual, then the individual has the opportunity to be self-determined. People make decisions based upon what their opportunities are. One aspect of the discussion regarding self-determination and people who experience homelessness centers around the quality of opportunities from which homeless individuals make their choices. The quality of the choices seems to be determined by the person making the assessment; what might not be an acceptable option from a middle-class and housed perspective may be a preferred option to someone who is not housed or housed in an abusive, unstable environment.

The second aspect of opportunity can be explored by what opportunities the environment provides beyond resources themselves. Study partners lived in an environment that not only provided limited resources, but also established barriers which prevented them from potential
opportunities. These barriers are difficult to overcome and an individualized focus means women view their situations through an internal rather than external lens—for example, the unemployment/underemployment experience. Study partners understood the necessity of money, and that in order to obtain money, they needed to be employed (see primary influences). What was not as obvious to them was how the availability of employment and the lack of living wage employment directly affected them as well. They articulated their individual barrier (not having a job), but did not connect their lack of employment to an external barrier (job market). Women also did not make the connection between the negative assumptions that society has regarding homeless individuals to current public policy and the availability of social resources, such as low-income housing or subsidized child care. This is a lack critical consciousness, as women do not see themselves as connected to the larger community and are unaware of how societal policies and systems directly and indirectly affect them. Case management and service delivery may play a role in this perspective.

Agency support service staff received information regarding the initial findings of the study and they discussed the individualistic perspective. Staff was in general agreement with the conclusion that women lacked critical consciousness. However, their response was that even if women understood the effect of macro-level forces on their lives and tried to discuss that with staff, it would serve no purpose. They explained that because neither they nor the client can change society, they must focus on what can be changed: Client behavior and skills. One case manager said, “Even if a client was right that all these other things were affecting her life, I would still say to her, ‘But what are you doing to change your life?’” (emphasis hers). The case management approach used at the agency participating in the study focused on the individual. That approach may limit case manager advocacy efforts on a client’s behalf, impacting the
availability of community resources for that client. If this is pervasive throughout the agencies with which respondents interacted, an individualized understanding to their problems may have been the only one supported by staff.

An individualized focus may not be only from a lack of identifying or understanding society’s relationship with them, but it may also a coping mechanism to assist survival. Individually, maybe a woman cannot change society, but she can change herself, and maybe that is the only possibility at this time. However, for there to be systemic change, there needs to be action, which comes through the “social analysis of conditions and of people’s role in changing those conditions” (Carroll & Minkler, 2000, p. 24). Over the years, the efforts to assist homeless people have been coordinated by homeless advocates; actual homeless people have not been the driving force for change (Arnold, 2004). That does not mean that there have not been advocacy efforts conducted by homeless persons, or that agencies have not been supportive or encouraging of the empowerment efforts of the homeless individuals they serve. The level to which agencies support advocacy efforts can vary greatly. Some may be very supportive of clients’ efforts to change homeless and other related policies. Some may focus more on individualized approaches to service and do not encourage advocacy efforts by either clients or staff. The connection between service delivery, advocacy, and collective consciousness would need to be further explored to fully understand the interactions of these forces.

The environment does have some bearing on the practice of self-determination through the provision of resources and/or opportunities. So while an individual may have the personal capacities needed to be self-determined, if the environment does not provide needed resources or the opportunity to practice self-determination, then self-determination may be limited. To understand self-determination, it may be necessary to understand how the individual (with their
personal characteristics and the presence of primary influences) and the environment (with its resources and the presence of secondary influences) work together to support or hinder the practice of self-determination.

An environment that has restrictive laws, lacks resources for individuals, and limits opportunity would be weak in its support of self-determination; a strong environment would be more permissive of individual behavior, and provide resources and opportunities for people. A person who has knowledge, skills, and abilities would be strong in their potential for the practice of self-determination, and someone whose personal capacities lack the characteristics needed would be weaker in potential for the practice of self-determination. The actual practice of self-determination is then shaped by how these two factors come together. An individual’s practice of self-determination is not reliant on one factor or the other, but rather the interplay between the two. So someone who has strong personal characteristics but lives in a restrictive environment would have a weaker practice of self-determination than someone who is strong in both. The same rationale would apply to someone who lives in an environment that supports the practice of self-determination, but lacks the personal capacities to do so.

The lack of support for self-determination in either the person or the environment leads to a practice of self-determination that is weak. It is not necessarily non-existent. Study partners were clear that as long as they could make a choice between options, no matter how poor those options were, they were self-determined. So self-determination is not an either/or concept, but it can be weaker or stronger depending upon the personal and environmental factors that influence it. When an individual has strong personal characteristics and lives in an environment which supports self-determination, this leads to a strong personal practice of self-determination.
At this time, these proposed interactions between personal and environmental factors and how they relate to the practice of self-determination are theoretical in nature. Future research of self-determination could create personal and environmental measures that allow for a more sophisticated analysis of their interplay. Understanding more specifically how these two forces interact would provide greater understanding of the practice of self-determination.

5. **Making choices**

It has been argued that making selections from undesirable options (such as an abusive household, living in a shelter, living on the street, being hospitalized, etc.) are not legitimate options and people who experience homelessness cannot be self-determined as they are not creating their own desired options. Others argue that homeless persons are not simply passive acceptors of their fate, and that the choices they make given their circumstances are so foreign to those that have never experienced homelessness that they cannot understand. Study partners understood that they are making selections from limited options, but to them, that did not limit their self-determination. It did not limit it because many of these options had to be sought out; those options were not immediately apparent and it required effort to even know they were available. Women were making active choices. While the debate could continue among theorists as to what qualifies as a desirable option, and whether or not homeless individuals are making choices or just selecting from available options, the opinion of study partners is clear. They are making choices and that fact means that they are self-determined. A limited number of choices does not limit their personal views of self-determination.

They are not alone in that perspective. There are scholars who believe that an abundance of options can be detrimental as it provides too many possibilities and can psychologically immobilize some. In his book, *The Paradox of Choice: Why More Is Less* (2004), Barry
Schwartz outlines how current culture in the United States and other industrialized nations has created an almost unlimited world of options. This vast array of options is not providing us with greater happiness, but rather an onerous sense of responsibility regarding the choices we make. The greater the number of possibilities, the more responsibility the chooser has to make choices wisely. Choices that lead to poor results are the fault of the chooser only. Schwartz compares different studies examining the well-being of people across cultures and reaches the conclusion that “substantial differences between cultures in the consumption opportunities they make available to people have very small effects on people’s satisfaction with their lives” (p. 96). Thus people with more choices are not happier than those with fewer choices. Those with only a few options do the best they can given their circumstances. While existing arrangements may not be ideal, it allows them to adapt to conditions and be grateful for what they have.

Study partners are not bothered by their limited options. If it is true that across cultures, people with more choices are not happier than those with fewer choices, it suggests that women with few options regarding housing and resources are not less happy than those with multiple housing and resource options. If women are happy, there is no reason to complain about limited options. This line of reasoning requires a number of assumptions, but serves as a possibility as to the satisfaction of making active choices among limited options.

D. **Social Justice Implications**

The problem of homelessness in the United States is not due to a lack of resources; it is the inequitable distribution of those resources that contributes to the problem. An experience of homelessness often forces individuals to focus on immediate needs. That is evident in the goals that women set for themselves based upon shelter and income. To address immediate needs (such as housing, food, or safety), women made certain choices (accessing the shelter system,
going to food pantries, leaving abusive homes). The focus on immediate needs corresponds to the focus on the individual and her abilities and limitations. This lack of collective consciousness prevents women from making the association between their lives and the distribution of social resources. It would be difficult to fight against social inequity and advocate for greater resources for the poor and homeless if each day is a struggle to survive.

For women focused on immediate needs, self-determination may be less about planning and more about making choices. They may be as self-determined as possible given their situations. While making choices from limited options may be a legitimate form of self-determination, there are large segments of society that have a greater number and variety of options from which to choose. Beyond having more choices, the more resources a person has may afford her the ability to create options and additional opportunities for self-determination. The inequitable distribution of resources potentially allows certain segments of society greater opportunities to exercise self-determination.

Self-determination may not be an either/or situation. Women believed themselves to be self-determined. Given the limiting nature of homelessness, combined with the personal traits and environmental forces that shape decision-making, women may be exercising self-determination to the best of their abilities. Limited areas of personal capacity and strong environmental forces can create a situation in which women have limited options, but they are still making their own decisions regarding those options. Self-determination theorists would likely disagree with the assessment that a woman can have her self-determination be limited in certain respects but still be self-determined; to be limited in some way means that you do not have self-determination. Study partners disagree. They believe themselves to be self-determined, and that is what is important to them. If self-determination is more of a continuum
(rather than an either/or), then it is possible to have greater or lesser self-determination depending upon the circumstance. The underlying issues then becomes why someone’s self-determination is limited in a given situation. For the partners in the research, it was not just personal capacity, but often the lack of available resources that limited their self-determination. Limited self-determination as a result of the inequitable distribution of resources and opportunities demonstrates a lack of social justice for the poor and homeless of our society.

E. **Limitations of the Study**

As the researcher, I made every effort to design a rigorous study with few threats to transferability and generalizability, and to ensure the trustworthiness of the data, a few limitations do exist. The rationales used for sampling data may have been either too broad or too narrow, diminishing the transferability of the results. For example, there may be a characteristic of decision-making that contributes to women participating in a transitional housing program (instead of remaining on the streets) which then prevents the findings from being transferable to all other homeless women. That would mean that the sampling rationale was too narrow. The sampling rationale could also have been too broad. Not selecting participants based upon a common homeless characteristic (such as mental illness or domestic violence) could have diffused the data and allow too much variability to obscure findings unique to a specific population. While various characteristics were all represented in the sample of study partners (history of substance abuse, criminal background, mental illness, presence of children), the few number of young women participating could have affected the results. Only five women younger than age 40 participated. The participating agency only serves a small percentage of younger women and their lower participation in the study may be a reflection of that. The sampling pool of younger women may be less due to a greater availability of resources for
younger women; they have not yet exhausted their personal network of support. Younger homeless women also tend to have children with them which makes them less likely to enter the homeless system. How those factors (and others that perhaps limited their participation in the study) influence self-determination would have been informative to the research. Future research should be more inclusive of younger homeless women.

In addition, racial demographics were not evenly distributed. Of the 21 women, 16 were African-American. While this corresponds to the racial composition of clients within the agency participating and the urban homeless population overall, non African-American women were underrepresented in the sample. Due to the large proportion of urban homeless that are African-American, a more racially representative sample may also need to include suburban and rural homeless as well. Finally, the sample may have been shaped by case managers during the study information distribution process. It was requested that case managers not distribute information to clients who they determined lacked the capacity to give informed consent. That could have potentially limited the pool of potential respondents.

The questions on the interview guide were an additional limitation. The interview guide was reviewed and revised several times in order to ask questions that were understandable to the study partners while still incorporating various aspects of theory and current conceptualizations of the construct. It appears that not all questions were successful in doing so. Questions regarding other people’s assumptions were included because previous studies of the homeless experience indicated that homeless women were more likely to receive services and assistance when they conformed to gender stereotypes. The question regarding assumptions attempted to address that potential issue. However, responses did not address that particular notion at all. Thus, for the study to have explored decision-making or behaviors based upon gender or
homeless stereotypes, the questions asked were not appropriate and should be modified for future studies. In addition, the question was never specifically asked if respondents knew how the agency defined self-determination, so it cannot be fully determined if the agency’s definition had any type of impression on the individual definitions of self-determination.

The trustworthiness of the findings may be limited by minimal data triangulation. Interviews were the primary source of data. As the purpose of the study was to explore how homeless women define self-determination and what the concept means to them, interviews were appropriate. However, it is possible that using interviews only obtained a partial picture of the situation. Respondents may have provided inaccurate or incomplete information regarding their decision-making processes. Having additional information from case files or program notes could have supported information given by respondents, or illustrated areas in which client reports differ from agency information (e.g. payment of rent). In addition, the methodology chosen could have swayed the findings. Different types of information may have been obtained if group interviews, anonymous questionnaires, or anonymous phone interviews had been the primary method of data collection. Also, if I were someone who had been homeless or had similar characteristics to the women interviewed, that may have elicited different information.

Researcher bias may also have had an effect on the trustworthiness of the findings. While specific steps were incorporated into the research design to decrease the possibility of researcher bias (such as a member check), as the researcher I entered into the study having worked extensively in the field. My own perceptions of the problem of homelessness and policy responses to it could have unconsciously swayed my data collection and analysis activities. My personal background is college-educated and middle-class with an awareness of social policy. These characteristics could have swayed my perceptions of what it means to make decisions, to
implement decisions, and how the influence of others can shape personal decision-making. I tried to ensure that my own perceptions of individual ability and goal achievement did not affect data collection. This was accomplished by asking questions directly as they were written in the interview guide, rather than rephrasing which could have included a hidden bias in the wording.

As data collection and analysis progressed, my personal biases became evident to me in two areas. The first bias involved my judgment on the lack of self-awareness on the part of the women interviewed for not seeing their lack of accomplishments. They described how they were able to accomplish their goals, but then gave examples of what they had not been able to accomplish. The second area of bias concerns religious beliefs. As a non-believer, it is nearly impossible for me to understand why an individual would put faith in God to guide her when it appears that her God-guided life had been so difficult. As a non-believer and a social worker, it is frustrating to me when women describe their lives as God-given or talk about being on a path from God. This line of reasoning places the causes of economic, political, and social inequalities with God, rather than people. During the interview process, I tried to acknowledge my biases, identify where they might present themselves, and re-think how I could approach the task at hand such that the biases did not hinder the research process. Discussions with fellow researchers, social workers, and those completely independent of the research helped me expand my ideas and provided new ways to think about the information gathered. It is through these efforts that I attempted to minimize researcher bias.

E. **Implications for Social Work Practice, Policy, and Education**

The field of social work could use this study in a variety of ways. This study provides additional pertinent information not only to help develop the current conceptualization of self-determination, but provide information regarding how homeless women view the concept and
how they define themselves as self-determined. For those individuals working directly with homeless women, understanding what it means to them to be self-determined can be incorporated into the work of individual practitioners and give them an additional understanding of what it means to make decisions as a person who has experienced homelessness.

It is currently unknown how the HUD outcome of self-determination affects program participants, as HUD does not measure it and no systematic studies have been completed to date. While this study does not address the implementation of that outcome at the agency level, or what the outcome means to agency staff, it does explore what the outcome means to those participating in the program. This information could provide a starting point for understanding the impact of this outcome, if any, on the lives of program participants. Knowing how homeless women view self-determination can assist agencies in program design (what activities lead to increased self-determination for clients) and program outcome measurement (how to determine if clients have achieved the outcome). Knowing that women view goal achievement as an indicator of self-determination, the agency could change its understanding and measurement of the outcome to match that of the women served (i.e. 75% of women achieved one personal goal).

This study is timely for HUD. Congress has recently re-authorized the McKinney-Vento Homeless Assistance Act. It has been renamed Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act and was passed into law last year. HUD has yet to establish regulations regarding funding and programming. As the current outcomes of the homeless programs have demonstrated success, it is unlikely that HUD will change them (Steve Berg, personal communication, July 27, 2008). Information from this study could assist officials in the establishment of specific measures for the self-determination outcome for funded agencies.
Current federal policy towards the social issue of homelessness continues to focus on individual issues of homelessness rather than structural issues. As the ability of a homeless person to be self-determined appears to be shaped by structural issues as well as personal ones, this research could contribute to the homeless advocacy movements that are trying to create structural changes in the areas of affordable housing and welfare assistance. Support for these efforts is timely given the current economic conditions and potential increase in the number of homeless individuals and families nationwide. The data collected during this study offered homeless women a meaningful voice that could be incorporated in the determination of what the target outcomes of programs should be, how they should be measured, and thereby how programs are designed and implemented. Social workers should include all these factors as they advocate for policy change at the federal level and implement those policies on a local level.

Part of social work education is to inform students how macro-level social policies affect people individually. This study shows a disconnect between policy and reality of the homeless experience. Current federal policy expects homeless persons to become self-determined when in fact many structural barriers exist that work to prevent self-determination. Also, it is assumed that homeless people lack self-determination (the outcome says achieve); women did not see themselves as lacking self-determination. Thus the assumption imbedded in social policy that homeless persons lack self-determination is incorrect and perhaps elitist in nature. This study provides insight into how homeless women evaluate their available options and then make active decisions. Those who lack financial and social resources make decisions using a different set of criteria. Thus it is inappropriate to apply middle-class values when judging the decisions and actions of the poor and homeless. By using the voices of the poor and homeless themselves, this study gives social work students a personal perspective of the homeless experience.
F. **Recommendations for Future Research**

Part of the rationale for conducting a qualitative study examining the concept of self-determination as it applied to homeless women was the knowledge gap regarding the definition of self-determination and its applicability. This study is able to add information to the body of literature regarding self-determination and to contribute to the development of a universal framework. Most of the empirical studies regarding self-determination have focused on those with developmental disabilities, those with a mental illness, and members of indigenous populations. This study explores this concept with a new population and helps to provide a foundation for additional studies concerning self-determination and the homeless population in general and/or homeless women specifically. Further studies could expand this research. Additional qualitative studies could be conducted to expand upon the findings in this study. Homeless women in other types of housing programs, formerly homeless women, homeless men, or any other sub-group of the homeless could be interviewed and knowledge gained from those studies could contribute to the understanding of self-determination.

This study also begins to develop the notion of perceived self-determination versus the practice of self-determination, a distinction that is absent in the current literature. A longitudinal study comparing individual’s perception of her self-determination and her ability to accomplish goals over an extended period of time could be conducted. This would help to determine if perceived self-determination and actual self-determination are separate constructs and if so, the interplay between the two. This study could be used to provide the foundation of a self-determination measure for homeless individuals. Information from this study could be incorporated into the research design and outcome establishment for programs serving homeless
women. Program evaluation could then determine if programs that set self-determination outcomes support or hinder the practice of self-determination for the women participating.

Further research would refine the understanding of primary and secondary influences, what elements are included in those factors, and the layering affect between the influences. The visual representation could change as a result of new data or be modified to reflect the experiences of other populations. Additional research could also help to define the relationship between environmental and personal characteristics. Being able to measure the level to which environment and personal characteristics lead to or hinder the development of an individual’s self-determination would have social policy and programmatic implications.

By incorporating the definition of self-determination as understood by homeless women in program design and evaluation, women become more represented within the program. It gives them a greater voice in how the program is conceptualized and implemented. This type of participation and representation within the program could potentially increase a participant’s overall personal self-determination. Not only would this increase a program’s ability to achieve a programmatic self-determination outcome, but more importantly, it provides an avenue of achievement and empowerment for the women participating. Additional research could not only measure changes in the practice of self-determination for women participating in these programs, but an analysis of changes to program design (such as the incorporation of empowerment or collective advocacy techniques) could be conducted as well.
APPENDIX A

Homeless Women and Self-Determination Study Interview Guide

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<tr>
<th>General Questions</th>
<th>Follow-up Questions</th>
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<tr>
<td>To start off, could you tell me about the things that happened in your life that brought you to the place you are right now? Can you tell me your story?</td>
<td>What else contributes?</td>
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<td>Listen for cues regarding specific situational challenges and follow-up with:</td>
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<td>How does your ______ impact your life?</td>
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<td>How does being homeless impact your life?</td>
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<td>Was there ever a moment during that time when being homeless was better than something else? Can you tell me about that time?</td>
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<td>What would you like your life to be like? How will you get there?</td>
<td>Listen for cues regarding personal or environmental resources and follow-up with:</td>
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<td>How would having __________ help you?</td>
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<td>Do you think you can get ________? How?</td>
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<td>How does not having ______________ hurt you?</td>
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<td>How did you decide that ____________ was something you needed?</td>
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<tr>
<td>What do you expect your life to be like in five or ten years?</td>
<td>How will you get there?</td>
</tr>
<tr>
<td>How close are you to that right now?</td>
<td></td>
</tr>
<tr>
<td>Can you tell me a little about the program you are in right now?</td>
<td>How did you decide to enter this program?</td>
</tr>
<tr>
<td>What kinds of choices do you have about what you do?</td>
<td></td>
</tr>
<tr>
<td>Can you give me an example of something that you have to do that you don’t agree with? What happens if you don’t do it?</td>
<td></td>
</tr>
<tr>
<td>How would you like this program to be?</td>
<td></td>
</tr>
</tbody>
</table>
APPENDIX A (continued)

<table>
<thead>
<tr>
<th>Question</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>How would those assumptions be different if you were a ___________?</td>
<td></td>
</tr>
<tr>
<td>What types of assumptions do people make about you because you’re homeless?</td>
<td></td>
</tr>
<tr>
<td>In what ways are you different now than before you were homeless?</td>
<td></td>
</tr>
<tr>
<td>During the really tough times, what helps you keep going?</td>
<td></td>
</tr>
<tr>
<td>Did you know that one of the goals of this program is that clients achieve self-determination? What does the term self-determination mean to you?</td>
<td></td>
</tr>
<tr>
<td><em>If asked what self-determination is, ask respondent to make a guess, and then give very basic definition – that it is making your own decisions and then following through on them</em></td>
<td></td>
</tr>
<tr>
<td>What does that mean to you?</td>
<td></td>
</tr>
<tr>
<td>Do you feel like you’re able to do what you want to do? Are you able to live your life the way you want to?</td>
<td></td>
</tr>
<tr>
<td>Who helps you make plans or decisions? How does __________ help you?</td>
<td></td>
</tr>
<tr>
<td>Does anyone or anything stop you from living your life the way you want? How so?</td>
<td></td>
</tr>
<tr>
<td>Can you give me a specific example of a good decision you made? A bad decision?</td>
<td></td>
</tr>
<tr>
<td>How much does this term “self-determination” relate to you?</td>
<td></td>
</tr>
<tr>
<td>Would you say you are self-determined? In what ways? What makes you think that?</td>
<td></td>
</tr>
<tr>
<td>We’ve talked about a lot of different things today. Is there anything you would like to add that you haven’t had a chance to say yet?</td>
<td></td>
</tr>
<tr>
<td><em>If asked for examples, reply with:</em> Anything else you would want people to know about what it’s like to be you and how you make decisions and future plans.*</td>
<td></td>
</tr>
<tr>
<td>How was this interview for you?</td>
<td></td>
</tr>
<tr>
<td>What would have made this a better experience for you?</td>
<td></td>
</tr>
</tbody>
</table>

**Summary stats:**

<table>
<thead>
<tr>
<th>Race:</th>
<th>Year born:</th>
</tr>
</thead>
<tbody>
<tr>
<td># of children:</td>
<td>Age of children:</td>
</tr>
<tr>
<td># of times homeless:</td>
<td># of months/years homeless (this episode):</td>
</tr>
<tr>
<td># of months/years homeless (total):</td>
<td># of months/years in program:</td>
</tr>
</tbody>
</table>
APPENDIX A (continued)

Homeless Women and Self-Determination Study Contact Summary Sheet

Date: _________________________  
Respondent ID: ________________

<table>
<thead>
<tr>
<th>Topic</th>
<th>Researcher’s Thoughts</th>
</tr>
</thead>
<tbody>
<tr>
<td>Respondent’s responsiveness, comfort level, demeanor, body language during interview, etc.</td>
<td></td>
</tr>
<tr>
<td>Environment – conditions of the room that may impact interview</td>
<td></td>
</tr>
<tr>
<td>Areas that were not fully explored due to time, respondent reluctance, or other constraints</td>
<td></td>
</tr>
<tr>
<td>Potential analysis ideas</td>
<td></td>
</tr>
<tr>
<td>Summary thoughts of the of the interview process</td>
<td></td>
</tr>
</tbody>
</table>
# APPENDIX B

## Characteristics of Study Participants

<table>
<thead>
<tr>
<th>Name</th>
<th>Age</th>
<th>Race/Ethnicity</th>
<th>Drug History</th>
<th>Mental Illness</th>
<th>Criminal History</th>
<th># of Times Homeless</th>
<th>Total Time Homeless</th>
<th>Presence of Children</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alpa</td>
<td>57</td>
<td>Indian</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>1</td>
<td>2 years</td>
<td>No</td>
</tr>
<tr>
<td>Anike</td>
<td>59</td>
<td>Black</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>&gt;5</td>
<td>59 years</td>
<td>No</td>
</tr>
<tr>
<td>Anna</td>
<td>45</td>
<td>White</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>1</td>
<td>4 years</td>
<td>No – 2 adult sons</td>
</tr>
<tr>
<td>Bernice</td>
<td>43</td>
<td>Black</td>
<td>Yes</td>
<td>No</td>
<td>Arrest</td>
<td>1</td>
<td>1.75 years</td>
<td>No – 1 adult son; 17 yr. old son w/father</td>
</tr>
<tr>
<td>Chanise</td>
<td>48</td>
<td>Black</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
<td>1</td>
<td>2 years</td>
<td>No – 2 adult children</td>
</tr>
<tr>
<td>Diane</td>
<td>52</td>
<td>Black</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>1</td>
<td>6 months</td>
<td>No – 2 adult children</td>
</tr>
<tr>
<td>Elnora</td>
<td>44</td>
<td>Black</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>1</td>
<td>4 months</td>
<td>No – 3 adult children</td>
</tr>
<tr>
<td>Harriet</td>
<td>45</td>
<td>Black</td>
<td>Yes</td>
<td>No</td>
<td>Conviction</td>
<td>2-3</td>
<td>3 years</td>
<td>Yes – 2 year old son 1 adult child; 12 year old son w/sister</td>
</tr>
<tr>
<td>Janel</td>
<td>52</td>
<td>Black</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>1</td>
<td>unknown</td>
<td>Yes – 17 yr. old dau. (&amp; grandson)</td>
</tr>
<tr>
<td>LaToya</td>
<td>46</td>
<td>Black</td>
<td>Yes</td>
<td>No</td>
<td>Conviction</td>
<td>&gt;5</td>
<td>23 years</td>
<td>Yes – 3 year old son 3 adult children; 16 yr old son w/sister</td>
</tr>
</tbody>
</table>
# APPENDIX B (continued)

<table>
<thead>
<tr>
<th>Name</th>
<th>Age</th>
<th>Race/Ethnicity</th>
<th>Drug History</th>
<th>Mental Illness</th>
<th>Criminal History</th>
<th># of Times Homeless</th>
<th>Total Time Homeless</th>
<th>Presence of Homeless</th>
<th>Presence of Children</th>
</tr>
</thead>
<tbody>
<tr>
<td>Martina</td>
<td>61</td>
<td>Latina</td>
<td>Yes</td>
<td>Yes</td>
<td>Conviction</td>
<td>2-3</td>
<td>7.5 years</td>
<td>No</td>
<td>No – 4 adult children</td>
</tr>
<tr>
<td>Mary</td>
<td>44</td>
<td>Black</td>
<td>Yes</td>
<td>No</td>
<td>Conviction</td>
<td>2-3</td>
<td>10 years</td>
<td>Yes</td>
<td>Yes – 18 yr. old dau. 3 adult children</td>
</tr>
<tr>
<td>Nera</td>
<td>54</td>
<td>Black</td>
<td>Yes</td>
<td>No</td>
<td>Conviction</td>
<td>&gt;5</td>
<td>25 years</td>
<td>No</td>
<td>No – 3 adult dau.</td>
</tr>
<tr>
<td>Pamela</td>
<td>23</td>
<td>Asian</td>
<td>Yes</td>
<td>Yes</td>
<td>Conviction</td>
<td>&gt;5</td>
<td>12 years</td>
<td>Yes</td>
<td>Yes – 1 year old son</td>
</tr>
<tr>
<td>Quanda</td>
<td>25</td>
<td>Black</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>2-3</td>
<td>2 years</td>
<td>Yes</td>
<td>Yes – 5 mo. old son, 3, 4, &amp; 5 yr. old dau.</td>
</tr>
<tr>
<td>Ruby</td>
<td>54</td>
<td>Black</td>
<td>Yes</td>
<td>No</td>
<td>No</td>
<td>4-5</td>
<td>1 year</td>
<td>No</td>
<td>No – 2 adult children</td>
</tr>
<tr>
<td>Susan</td>
<td>31</td>
<td>Black</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>2-3</td>
<td>1.5 years</td>
<td>Yes</td>
<td>Yes – 11 yr. old dau.</td>
</tr>
<tr>
<td>Teone</td>
<td>48</td>
<td>Black</td>
<td>Yes</td>
<td>No</td>
<td>Arrest</td>
<td>2-3</td>
<td>10 years</td>
<td>Yes</td>
<td>Yes – 12 yr. old dau.</td>
</tr>
<tr>
<td>Theresa</td>
<td>39</td>
<td>White</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>2-3</td>
<td>3 years</td>
<td>Yes</td>
<td>Yes – 10 &amp; 16 yr. old dau., 14 &amp; 17 yr. old sons</td>
</tr>
<tr>
<td>Vanessa</td>
<td>51</td>
<td>Black</td>
<td>No</td>
<td>Yes</td>
<td>No</td>
<td>2-3</td>
<td>3 years</td>
<td>No</td>
<td>No</td>
</tr>
<tr>
<td>Yolanda</td>
<td>21</td>
<td>Black</td>
<td>No</td>
<td>No</td>
<td>No</td>
<td>2-3</td>
<td>7 years</td>
<td>No</td>
<td>No</td>
</tr>
</tbody>
</table>
APPENDIX C

List of Codes and Families

**CODES**
- Abuse
- Abuse, impact of
- Accountability
- Age
- Ambition
- Assumption of others
- Child care
- Children, not taking care
- Choice, good
- Choice, bad
- Control
- Credit
- Criminal history
- Decision-making, isolated
- Decision-making, morals
- Decision-making, getting help
- Decision-making, gut instinct
- Decision-making, learning
- Drug use
- Drug use, choice
- Drug use, consequences
- Drug use, environment
- Education
- Employment
- Employment, history
- Employment, options
- Employment, training
- Employment, inconsistent
- Family
- Fatigue
- Fear
- Forgiveness
- Future dream
- Goal, long-term
- Goal, short-term
- God
- Guilt
- Happy
- Health
- Homeless avoidance
- Homeless experience
- Homeless definition
- Homeless identification
- Homelessness assumptions
- Homelessness, identification of
- Homelessness, impact of
- Hope
- Housing options
- Housing, subsidized
- Independence
- Independence, achieving
- Influence of God
- Influence of others
- Influence of society
- Isolation
- Knowledge, lack of
- Language
- Life change
- Mental health
- Money
- Money management
- Morals
- Motivation
- Obligation
- Opportunity
- Opportunity, God provided
- Path
- Path, pre-determined
- Peace
- Personal responsibility
- Plan, lack thereof
- Plan, short-term
- Plan, learning to
- Positive outlook
- Program assistance
- Program compliance
- Program structure
- Program, choices within
- Program, encouraging independence
- Program, flexibility
- Regret
- Relationship with children
- Relationship with family
- Relationship with others
- Resources, community
- Resources, family
- Resources, financial
- Respect
- Safety
- Safety net
- SD definition
- Self-confidence
- Self-defeat
- Self-directed
- Self-esteem
- Self-perception
- Self-preservation
- Self-reflection
- Self-preservation
- Self-follow through
- Sexual orientation
- Shame
- Shelter assistance
- Shelter life
- Shelter structure
- Skills, lack thereof
- Social rules
- Stuck
- Support network
- Transportation
- Voice
- Volunteer

**CODE FAMILIES**
- Decision Making
- Homelessness
- Influences
- Planning Resources
CITED LITERATURE


VITA

Andrea L. Dakin

EDUCATION

Ph.D. 2011  University of Illinois at Chicago, Chicago, Illinois
Jane Addams College of Social Work
Dissertation: Self-determination: The conceptualization of choice and
decision making by homeless women

A.M. 2000  University of Chicago, Chicago, Illinois
School of Social Service Administration
Concentration: Administration
Thesis: Use of outcome measurement as an evaluation tool for the United
Way/Crusade of Mercy

B.A. 1998  Kalamazoo College, Kalamazoo, MI
Major: Psychology; Minor: Spanish; Concentration: Women’s Studies
Thesis: Emotional intelligence as a framework for understanding violent
behavior in victims of childhood abuse

ACADEMIC AND PROFESSIONAL POSITIONS

Housing Grants Director  AIDS Foundation of Chicago, Chicago, IL 2010-present

Government Relations Director  Housing Opportunities for Women, Inc., Chicago, IL 2004 - 2010

Teaching Assistant  Jane Addams College of Social Work, University of Illinois at Chicago
Spring 2008, Class: Research II: Participatory Action Research
Spring 2009, Class: Practice II: General Practice with Task Groups,
Communities, and Organizations

Research Assistant  Jane Addams College of Social Work, University of Illinois at Chicago, 2004 to 2006
  ● Group approach to addressing issues of substance abuse, mental
    illness, and physical and/or sexual abuse of formerly incarcerated
    women.
    Researcher: M. Patricia O’Brien, Ph.D., Associate Professor
  ● Prevalence of mental illness among Cook County probationers
    Researcher: James Swartz, Ph.D., Associate Professor

Consultant  YWCA of Evanston/North Shore, Evanston, IL 2005
Grants Manager Housing Opportunities for Women, Inc., Chicago, IL 2000-2004

PUBLICATIONS


PRESENTATIONS

March 2010, “History of Homelessness and the Chicago Plan to End Homelessness”, Invited speaker, “Introduction to the Chicago Continuum of Care”, sponsored by the Chicago Alliance to End Homelessness


PROFESSIONAL AFFILIATIONS

Chair, HUD McKinney-Vento Committee, Chicago Continuum of Care, 2007 to present.
Member, 2001 to 2007.

Member, Chicago Plan to End Homelessness 2.0 Steering Committee, Chicago Alliance to End Homelessness, 2011

Grant Reviewer, Health Resources and Services Administration, U.S. Department of Health and Human Services, 2008 to present

Member, National Association of Social Workers, 2004 to present.

Member, Council on Social Work Education, 2005 to present.

Member, Board of Directors, Tangerine Arts Group, 2003 to 2006.