An Assessment of Homeless Individuals’ Perceptions of Service Accessibility in Downtown San Diego

Criminal Justice 540 & Public Administration 497 • Spring 2016

Instructors: Dr. Megan Welsh, School of Public Affairs & Dr. Mounah Abdel-Samad, School of Public Affairs
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Sage Project Staff

Jessica Barlow, Program Director
Jasper Cruz, Graphic Design
Philip Combiths, Editing
Javier Inzunza, Social Media
About the Sage Project

The Sage Project is a partnership between San Diego State University (SDSU) and a city or government entity in the San Diego region. The mission of the program is to engage students from across the University in assisting a local government with projects that address their smart growth, quality of life, and sustainability goals. In the Sage Project, students have the opportunity to engage in meaningful real-world projects and make positive contributions to a community in SDSU’s service area. The program’s vision is to connect SDSU students and faculty with high-priority, high-need community projects, thereby generating interest and fresh ideas that create momentum and provide real service to the community. The Sage Project embodies the University’s commitment to serving local students, engaging alumni, and contributing to the public good by focusing thousands of hours of course-based student involvement with high-impact activities.

The program is based on the highly successful and award-winning Sustainable City Year Program at the University of Oregon and is a part of the Educational Partnerships for Innovation in Communities Network. The City of San Diego is one of the Sage Project’s 2015-2016 partner cities. Participating courses come from Public Administration, Criminal Justice, and Political Science.

About San Diego

San Diego is the 8th largest city in the nation and the second largest in California. It is well known for its beautiful weather that draws people from all over the world. San Diego has over 1.3 million residents, and it covers a large area. It shares international borders with Tijuana, Mexico’s 6th largest city. The City of San Diego has been facing increasing challenges when it comes to its homeless population. San Diego typically ranks among the top five American cities having the largest number of homeless people, yet it ranks far lower in the amount of federal funding it receives to address homelessness, relative to other cities.¹ To understand this problem from the perspectives of the people who experience it directly, the City of San Diego commissioned research through the Sage Project at San Diego State University.
Course Participants

Special thanks go to the students of Criminal Justice 540 and Public Administration 497 (Spring 2016) who collected the data and engaged with the homeless population with respect and compassion.

Criminal Justice 540 students:

Gilbert Aguilera       Kendrick Mathis
Eric Alizade           Na’im Mcgee
Joyce Alvarez          Kristen Medina
Leslie Amaro           Gerardo Mejia
Melissa Arzave-Trujillo Samer Nuhaily
Ryan Bajer             Oscar Nunez
Tyler Bajer            Riva Oraha
Bianca Cardenas        Stephanie Perez
Sarah Conner           Jovannah Ramirez
Katharine Debus        Jamie Ridgway
Brandon Diaz           Jacob Ross
Sebastian Estrella     Ariana Salazar
Celena Fisher          Farah Saleh
Sinthia Garcia         Antonio Santiago
Jennifer Gutierrez     Andres Saucedo
Jacob Handler          Cynthia Saucedo
Sara Henry             Juan Soto
Beatriz Hernandez      Samantha Stirratt
Sergio Hernandez       Stephanie Tavares
Vanessa Hernandez      Vince Velarde
Brittany Jackson       Kayla Walls
Dakota Kettler         Jermara Watkins
Michael Laventure      Matilda Wildey
Enrique Lazcano        Jeffrey Wilkinson
Phillip Lomax          Richard Marquez
Joslynn Lopez
Kelsey Magill
Richard Marquez
Public Administration 497 students:

Rogelio Diaz                              Chadd Mungia
Nashwan Dooda                             Susan Nguyen
Ruby Godinez                              Berenice Pineda
Mustafa Karama                            Taylor Reid
Lauren Miranda                            Carmina Ruelas
Andrea Morrison                           Charmaine Strayhorn

Executive Summary

This report details the findings of research commissioned by the City of San Diego and carried out by student-researchers at San Diego State University on the issue of homelessness in downtown San Diego. We provide a snapshot of the perceptions of the homeless residents of the East Village neighborhood of downtown San Diego in Spring 2016. The East Village is home to a large and growing population of homeless individuals.

We interviewed the homeless residents of the East Village regarding the services they access, their desire to obtain permanent housing, and their interactions with law enforcement—both the San Diego Police Department (SDPD) in general and the SDPD’s Homeless Outreach Team (HOT).

Our findings indicate that access to permanent housing for homeless individuals remains low. Major barriers to housing include: difficulty meeting requirements, such as delays in qualifying for and receiving Supplemental Security Income; the expense of housing in San Diego and the dwindling availability of single room occupancy facilities; the lack of safety in some temporary housing options that serve as a pipeline to permanent housing, including shelters and transitional housing; and the inability of current housing options to deal with issues of addiction, especially for active drug users. Our research participants vocalized a need for more sensitivity on the part of the City and the SDPD in general to the various circumstances which precipitate homelessness, rather than a blanket assumption of deviance. Our participants also vocalized the need for safe outdoor spaces, lockers, and bathrooms for those living on the streets while awaiting housing. While there is ample awareness among homeless individuals of the HOT’s presence, the team faces an array of obstacles in connecting homeless individuals in need with available resources. Barriers, including coordination across diverse service providers and a dearth of skilled nursing facilities in the local area, and recommendations for the HOT are discussed.
Introduction

Homelessness is a chronic issue that affects hundreds of thousands of people in the United States.\textsuperscript{2,3} Debates about homelessness typically center around whether its causes stem from individual failings or systemic disparities. In urban areas, homelessness is a particularly visible and thus often politically charged issue, with a range of stakeholders—including homeless rights activists, social service providers, law enforcement, city government officials, local business owners, and housed residents—who often hold conflicting views about how to address the issue of homelessness.

Less often do we hear from homeless residents themselves, both about their experiences of being homeless and their perceptions of how to improve their quality of life. This report details the findings of research commissioned by the City of San Diego and carried out by student-researchers at San Diego State University (SDSU) on the issue of homelessness in downtown San Diego.

The homeless residents of one downtown San Diego neighborhood were interviewed regarding the services they access, their desire to obtain permanent housing, and their interactions with law enforcement—both the San Diego Police Department (SDPD) in general, and the SDPD’s Homeless Outreach Team (HOT), which is comprised of SDPD officers as well as a Psychiatric Emergency Response Team (PERT) clinician and a County of San Diego Health and Human Services specialist. The HOT actively patrols parts of the City of San Diego with high concentrations of homeless individuals and attempts to connect them with an array of services. It is important to note that this research only examined the perceptions of homeless individuals in San Diego. It did not evaluate what the City or the not-for-profit sector are doing to assist the homeless. It did not examine policies initiated by the City or any other governmental entity.

According to the most recent annual point-in-time count conducted by the Regional Task Force on the Homeless (WeALLCount),\textsuperscript{4} there are approximately 8,692 homeless individuals in San Diego County. This includes 3,752 “sheltered” homeless individuals—those living in some form of temporary housing, most frequently emergency shelters and transitional housing—and 4,940 “unsheltered” homeless individuals. Notably, while the number of sheltered individuals county-wide decreased by 18.2% between 2015 and 2016, the number of unsheltered individuals increased by 18.9%.

A large number of homeless individuals have been making downtown San Diego their home, with the heaviest concentration being in the East Village neighborhood. This area includes historical buildings, new high-rise condominiums, tourist destinations (e.g. the Petco Park baseball stadium), trolley stations, and many retail businesses, making the East Village a focal point for the issue of homelessness.\textsuperscript{5}
Table 1. Changes in downtown San Diego homelessness by census tract, 2015 to 2016.

<table>
<thead>
<tr>
<th>Census tract</th>
<th>2015</th>
<th>2016</th>
<th>% change</th>
</tr>
</thead>
<tbody>
<tr>
<td>51</td>
<td>314</td>
<td>400</td>
<td>+27.38%</td>
</tr>
<tr>
<td>52</td>
<td>126</td>
<td>94</td>
<td>-25.39%</td>
</tr>
<tr>
<td>53</td>
<td>151</td>
<td>276</td>
<td>+82.78%</td>
</tr>
</tbody>
</table>

I. Objectives

The objectives of our Criminal Justice 540 and Public Administration 497 classes were to:

- Assess what the homeless residents of downtown San Diego’s East Village neighborhood perceive to be their most urgent needs and the barriers they encounter to accessing services to address these needs.
- Examine homeless residents’ perceptions of the SDPD in general and the HOT more specifically.
II. Method

SDSU faculty and students, in collaboration with the City of San Diego and the HOT of the SDPD, developed a study to identify homeless individuals’ perceptions of service accessibility in downtown San Diego. The study was designed to assess homeless people’s awareness of what types of services are available to them, what services they have been receiving, the quality of those services, and what services they think would help resolve their problems and acquire permanent housing. During the study, students interviewed a total of 108 homeless individuals on three separate outings in late February and early March of 2016. Interviews lasted approximately 15–20 minutes each and were conducted in three different locations near homeless encampments in the East Village neighborhood of downtown San Diego (see Figure 2).7

The sampling site in the East Village was selected to maximize the number of homeless individuals interviewed. As noted earlier, the East Village is home to more than half (approximately 494) of the 908 homeless residents of downtown San Diego.8 Located directly east of the Gaslamp commercial district, adjacent to the southeast corner of Balboa Park, and bordered by Interstate 5 to the east, the East Village is a rapidly-evolving neighborhood. Building cranes are readily available as new high-rise housing developments are constructed, and a proposal to construct a new football stadium and convention center annex will be on the voting ballot in November, 2016.9

Figure 2: Data collection sites.
Sixty-three student researchers, working in pairs and threes, collected the data. This allowed each research team to conduct at least three interviews each so that all students were able to benefit from this learning experience. Interview participants were told during the consent process that they did not have to answer any question that made them uncomfortable, and that they could stop participating at any time. Participants received a small incentive for participation: a choice of either a $10 McDonalds or Subway gift card or two public transit day passes.

We asked individuals about their perceptions of service provision to the homeless population in the area, including interactions with the police, but did not ask any questions about potentially damaging, embarrassing, or incriminating information about participants’ own behavior. We recognized that asking participants to reflect on their experiences of being homeless could elicit some anxiety, frustration, or embarrassment. Prior to data collection, student-researchers underwent rigorous training on not only human research subjects’ protection protocols, but also on in-depth interviewing skills, such as active and empathic listening.

We also included the number of a crisis hotline in our consent materials, should anyone subsequently want or need that resource to further discuss anything that may have troubled them during the interview. Additionally, our student researchers carried handouts with a list of the names and addresses of the HOT and local service providers (housing, health, mental health, substance abuse, etc.), should our research participants wish to seek these services. Although no sensitive or identifiable information was asked of participants, we made every effort to protect participants’ privacy. To the extent possible, student researchers conducted interviews out of earshot of other people. Lastly, to better understand and contextualize the issues raised by our research participants, the faculty leaders of this research met with members of the HOT during the research process.

Figure 3: Students interviewing a homeless resident of East Village.
III. Results

The findings presented here focus on interview participants’ self-reported service utilization, quantity and quality of interactions with police, and awareness and perceptions of the HOT. When it comes to institutions’ interactions with the homeless, we find that community supervision agencies (parole or probation) play almost no role in assisting the homeless in finding housing. We also find that there is substantial variation in homeless residents’ perceptions of the police. Lastly, we find that the HOT is highly visible and known by homeless residents of the East Village.

Sample demographics

The demographic composition of our sample is roughly consistent with that of the most recent point-in-time survey of homeless individuals in San Diego County:\textsuperscript{10}

- Approximately 75\% of our research participants were male.
- 43\% were White, 31\% Black, 17\% Mixed or Other, 7\% Hispanic/Latino, and 1\% Asian.
- Ages ranged from 18 to 81, with an average of 45 years old.
- Just under 20\% reported being veterans of the military, though only 57\% of these veterans reported that their veteran status had helped them receive services.
- When asked where they have slept most frequently in the past month, about 47\% reported sleeping in a sleeping bag or on the street; about 20\% each reported sleeping in either a tent or “other.”
- Only 10\% reported having slept most frequently in a shelter in the past month.

Service utilization

The majority of the homeless residents we spoke to have taken steps to support themselves in some way. As shown in Table 2, a large number reported applying for and benefitting from public assistance in the form of cash aid, food stamps, and Supplemental Security Income (SSI) as well as medical assistance, though nearly a quarter (24\%) reported being in current need of medical care.

<table>
<thead>
<tr>
<th>Service</th>
<th>Percent reported utilization</th>
</tr>
</thead>
<tbody>
<tr>
<td>Public assistance (cash aid, food stamps, SSI)</td>
<td>83% reported having applied; 67% reported it being helpful</td>
</tr>
<tr>
<td>Medical</td>
<td>67% received; 86% said it was helpful; 24% in current need of medical care</td>
</tr>
<tr>
<td>Housing</td>
<td>29% had received some form of help; 11% were in the process of moving into permanent housing</td>
</tr>
</tbody>
</table>

Table 2. Self-reported service utilization within the past year.
Housing

While housing may be the most important need for homeless individuals, less than a third (29%) of our respondents reported receiving some form of help on this issue in the past year, and only 11% of respondents reported being in the process of moving into permanent housing. The most frequent barriers to permanent housing cited by participants included:

- **Difficulty meeting requirements**: lack of documents (e.g., ID card) to complete an application or lack of rental history to qualify for an apartment; or delays in qualifying for and receiving SSI—the primary way homeless individuals can move into affordable permanent housing.

- Relatedly, the **long, tedious process**, including years-long waitlists, to obtain subsidized permanent housing is off-putting to many. Moreover, as one participant noted, time spent waiting to obtain housing can sometimes lead to a relapse into or a deepening of drug or alcohol addiction; as he put it, “idle time gets you in trouble.”

- **The expense of housing in San Diego**: as one participant put it, “I could get a one-bedroom apartment for the price we pay for a single room (at a single room occupancy hotel).” It is important to note that single room occupancy hotels are dwindling in San Diego. As another participant put it, “There is need for more affordable housing, that’s what it’s all about, but they want us to just go to shelters like Father Joe’s.” It is also important to note that San Diego regularly ranks among the top five most expensive American cities for housing. By one recent estimate, the average rent for a one-bedroom apartment is $1,411.

- **Lack of safety/uncleanliness** of some temporary housing options, including shelters and transitional housing, led many of our interview participants to prefer sleeping on the streets unless the weather is bad. One participant, for example, told us that he does not like to go to the shelters because people get robbed in the bathrooms.

- **Inability of current housing options to deal with issues of addiction**, especially for active drug users.

Obstacles to housing access

We also found that just under one-fifth (18%) of our sample faces both external and internal barriers to accessing housing. These individuals’ reluctance to seek and accept help is primarily caused by mental health/substance abuse, a preponderance of logistical barriers which discourage people from accessing help, and the belief that the pursuit of housing is a personal responsibility.
When examining the characteristics of these individuals, we found the following:

- Of those who stated that they are not ready to obtain housing, 33% (n = 6) disclosed that they have issues with substance abuse, mental health, and/or logistical issues that have discouraged them from pursuing permanent housing options. One participant told us that she gave up looking for housing when she lost her driver’s license and then had difficulty obtaining her birth certificate; another participant explained to us that he is simply “not ready” to stop using drugs and knows that subsidized housing is thus off-limits to him. As he put it, “the process is very hard and long because the wait list is backed up. I’m also a current drug user, and I can’t use drugs when living in permanent housing.”

- Another 20% gave responses indicating that they believe that it is their own responsibility to get out of homelessness, without external assistance. One participant, who had been living on his own since the age of 14, stated that he did not need help and that he “just need[s] to look harder.” This is a clear example of how some people are socialized to believe that whatever situation they are in is caused by their own doing and only through their personal efforts can they get out of it.

- Others believed that housing is very expensive and they cannot afford it, or did not explain why they do not need housing help at this point in time.

Community supervision

About 12% (n = 13) of our sample of homeless individuals reported being on some form of community supervision—either parole or probation. Of these participants, all but one reported having seen their supervision agent within the last two weeks. However, it is notable that most (n = 12) also reported that their supervision agents had not helped them to find housing. As one participant told us, “parole won’t help me; in order to get their help you have to be on Social Security, and I’m not.”
Gender

The women in the sample had a higher percentage of temporary shelter occupancy and were more likely to seek medical help than men as well as to report benefitting from it. In addition, women applied more for housing and had a higher level of success.

<table>
<thead>
<tr>
<th>Service</th>
<th>Men</th>
<th>Women</th>
</tr>
</thead>
<tbody>
<tr>
<td>Usage of temporary shelter</td>
<td>16%</td>
<td>6.71%</td>
</tr>
<tr>
<td>Seeking medical help</td>
<td>76%</td>
<td>66.67%</td>
</tr>
<tr>
<td>Benefitting from medical help</td>
<td>64%</td>
<td>58%</td>
</tr>
<tr>
<td>Applying for housing</td>
<td>36%</td>
<td>27%</td>
</tr>
<tr>
<td>In process of moving into permanent housing</td>
<td>16%</td>
<td>6.17%</td>
</tr>
</tbody>
</table>

Table 3. Self-reported service utilization by gender.

Encounters with police

This study examined police encounters with the homeless for two reasons:

- Police agencies typically bear the brunt of responsibility in dealing with issues of homelessness, with police officers often serving as the first and main point of contact that homeless individuals have with the government.

- The HOT is a program of the SDPD, and we therefore wanted to assess the extent to which homeless residents are aware of the distinction between the HOT and the SDPD more generally.
Frequency of police encounters

Interviewees were asked how frequently they had interacted with the police in the past year. A majority (63%) reported fewer than five interactions with the police, while another 20% reported more than 20 interactions; 10% reported between five and nine interactions, while 4% reported between 10 and 20 interactions.

![Pie chart showing frequency of police encounters](image)

*Figure 4: Reported frequency of police encounters in the past year.*

Police helpfulness

Participants were asked how helpful they perceive the police to be on a four-item scale. 44% perceived the police as “not helpful at all,” 8% as “a little helpful,” 31% as “somewhat helpful,” and 14% as “very helpful.”

![Pie chart showing police helpfulness](image)

*Figure 5: Reported perceptions of police helpfulness.*
Perceptions of encounters with police

Nearly half (47%) of interviewees stated that the police do not harass them “at all,” 13% felt harassed “a little,” 16% felt harassed “somewhat,” and just over 20% felt harassed “very much.”

Safety and the police

About 41% felt that the police do not ensure their safety “at all,” while about 17% felt that the police ensure their safety “a little,” 21% stated “somewhat,” and 15% felt that the police ensure their safety “very much.”
The Homeless Outreach Team

When asked if they know what the HOT is, the vast majority (94%) responded affirmatively; the HOT is very visible in the area and there is strong awareness of what the HOT does. As one participant described it, the HOT “help[s] the homeless find housing.”

Regardless of whether or not participants had received assistance from the HOT, their perceptions of the service were generally positive. For example, one participant described the HOT as “the ‘good’ police […] very helpful.” Another participant said, “They are on our side […] very good about telling about resources.”

Notably, however, only about 20% of our sample reported having received some form of assistance from the HOT. While this figure is likely impacted by the fact that individuals who had successfully been connected with services might no longer be on the streets and thus not participating in this research, the most common reasons our interviewees cited for not having successfully received help from the HOT are noteworthy. The most common barriers to receiving assistance included:

- The housing linkages the HOT is able to make to local shelters and transitional housing are temporary. Consequently, some individuals are hesitant to accept this help and others who do may still cycle in and out of the shelter system without obtaining a long-term housing solution.

- The housing referrals the HOT is able to make for permanent housing are contingent upon the individual qualifying for and receiving SSI. While not always the case, the SSI application process can be lengthy, and individuals do not always qualify.

Role conflict for the HOT

The work of the HOT is complex, as it constitutes one piece of broader efforts to address the issue of homelessness in downtown San Diego. Overall, the HOT’s recognition among the homeless population is very high. However, some of the other complexities of the HOT’s work are worthy of discussion.

The HOT is comprised of police officers, social workers, mental healthcare professionals, and health and human services employees who collaborate to connect homeless individuals with an array of services. It is important to note that the HOT is not a service provider but rather seeks to connect people with services. In order to understand the HOT, it is essential to understand how their role is perceived differently by the different stakeholders in the broader issue of homelessness. There are at least three distinct perceived roles:
1. To support the police department by relieving patrol officers of some of the burden of addressing homelessness-related issues
2. To facilitate order maintenance by addressing homelessness-related issues in communities with a large homeless population
3. To assist the homeless in connecting with services and moving off of the streets

*Ease burden on police (institutional perspective)*

Because working with the homeless population can take a long time and requires specific knowledge and a specialized network, untrained police officers can spend extensive time dealing unsuccessfully with these issues. The HOT’s role, therefore, is to take over most police interaction with the homeless population, thus releasing police resources to perform other duties in their communities. Indeed, HOT staff members emphasized the inefficacy of dealing with homelessness through law enforcement and the importance of open lines of communication.

*Facilitate order maintenance (community perspective)*

The second perception of HOT’s role stems from the general population and institutions working with the homeless. These groups tend to believe that the HOT is responsible for the homeless population; the HOT is often asked to target specific locations based on citizen complaints of homeless activity. For example, institutions, such as hospitals, might release homeless individuals and ask the HOT to deal with them. However, the HOT has no resources to offer the homeless; its role is only to connect individuals with service providers. In this way, the HOT can only be as effective as the service providers to which it can refer people; if those resources are inadequate, either in their quality or quantity, HOT may be perceived as ineffective.

*Assist with connection to services (homeless individuals’ perspective)*

The third perception of the HOT comes from homeless individuals themselves. The homeless population seems to believe that the role of the HOT is to provide them with assistance. However, the HOT can only connect individuals to assistance services; it has no legal power to force a service provider to accept an applicant.

*Obstacles facing the Homeless Outreach Team*

The HOT faces an array of obstacles in connecting homeless individuals in need with available resources:

- The lack of skilled nursing facilities makes the HOT more reliant on hospitals to provide medical help for homeless individuals who should be referred to specialized professionals.
• The rules of service providers regarding who they will and will not serve often severely constrain the HOT’s ability to connect people with services. A notable example of this is that many service providers refuse to work with people convicted of sex offenses.

• Most service providers are also not open at all hours. A homeless individual may be ready for help at 10pm but may have moved elsewhere and is unable to be located by the time a facility opens at 8am.

• A more taxing obstacle is dealing with homeless individuals who have some type of severe and persistent mental illness (SPMI). These cases present a substantial drain on public resources and are also very challenging for the HOT to successfully address. For example, the HOT might take an individual with an SPMI to receive medical treatment, but they are later released back into the community with nothing but direction to take their medications. This lack of continuity of care limits the success of the intervention, and the HOT will often have to deal with them again.

**IV. Discussion**

This report provides a snapshot of the perceptions of the homeless residents of the East Village. Our data show that, although the homeless population is benefitting from public and medical assistance, their access to permanent housing remains low. Moreover, institutions such as parole and probation are providing minimal housing support to the people they supervise, hence shifting this responsibility disproportionately to other institutions.

**Police**

Given that homeless individuals are more likely to interact with police officers, it is not surprising that these individuals are wary of the police. Training all police officers to effectively interact with homeless individuals, especially those with mental health and substance abuse issues would be costly and time-intensive. Hence, the HOT constitutes a smart alternative, allocating a select group of officers and mental health workers who are well-equipped to interact with the homeless population.

One factor that we did not measure in this research is how homeless individuals are perceived by the police and the community. In general, there are two perceptions: a) that homeless individuals are victims of circumstances and b) that homeless individuals are responsible for their situations. In both cases, the homeless population is often treated in a paternalistic way, either by telling them what kind of assistance they need and faulting them for not accepting it or by requiring them to take the first step, which can often be daunting to these individuals.
The Homeless Outreach Team

Our research indicates that the HOT is well-known by the homeless population in the East Village. The team is also perceived to be helpful in general. However, the HOT is not operating in an ideal resource environment, with an inadequate array of service providers to which it can connect people in need, particularly on the matter of permanent housing. The HOT have to deal with a challenging population with high levels of mental health and substance abuse issues. This population is time-consuming and resource-intensive, detracting from other outreach work that could be done.

The HOT works with a complicated population, often under psychologically taxing conditions, and the team would benefit from a well-defined role amongst the various other institutions involved in the issue of homelessness. The multiplicity of stakeholders and their perceptions of what role the HOT should play is confusing to both the array of stakeholders benefitting from their work and the HOT staff members themselves.

V. Recommendations

Recommendations from homeless residents

When asked what additional things the City might do to help those who are living on the streets, the two broad themes that emerged revolved around perception and resources.

Perception: Consistent among the vast majority of the people we spoke to was the sense that they are perceived as the “other” by housed residents and the police. As several participants put it, “treat us like human beings.” For the police in particular, participants spoke of a need for understanding that not all homeless people are deviant. As one participant stated, “We’re all not the same. We’re not all drug addicts, mentally ill, and we can’t be bunched and classified into one group. We all have different situations.”

Resources: Participants noted that the following resources would improve their safety and general quality-of-life while living on the streets:

1. Safe, well-lit locations where people can live. Due to the many barriers to obtaining permanent housing noted above, some of the people we spoke to advocated that the City set aside a public space where people can live while awaiting housing. This already occurs spontaneously throughout the East Village in the form of homeless encampments. However, setting aside a dedicated space, as some of our participants pointed out to us, could save on police resources spent regulating and, at times, cleaning up dispersed encampments. It would also provide homeless individuals with a consistent location to call home while awaiting housing.
2. **Lockers.** Participants noted the difficulty of always having to stay with their belongings or risk having them stolen or otherwise removed. This is especially a concern for those seeking or trying to maintain employment. Public lockers would enable people to store their possessions when they cannot carry them around.\(^{14}\)

3. **Restrooms.** Several participants also noted the need for more public restrooms that are well-lit and otherwise safe.

**Recommendations for institutional support of HOT**

First and foremost, we note a profound lack of continuity of care among medical, housing, and social service providers, which limits the HOT’s ability to connect people to services that will keep them permanently off of the streets. Until this continuity is improved, the HOT will continue to see a large portion of “return customers.”

As noted above, the HOT would benefit greatly from additional staff and resources. This is especially important if the HOT is to provide successful outreach to those homeless individuals we have termed “service reluctant.” Our data support the argument that many such individuals might benefit from persistent, sustained outreach, especially those who have been homeless for many years or who have had negative experiences with attempted outreach in the past. Assigning additional police officers, Psychiatric Emergency Response Team clinicians, and social workers to the HOT would allow HOT members to do such outreach.

We also suggest an exploration of new measures of success for the HOT. For example, the number of contacts with the homeless population may not be the most accurate indicator of the important work the HOT accomplishes. Given the long process of connecting a homeless individual with permanent housing and other services, a more longitudinal measure could better capture the impact of the HOT’s work.

Future research should examine:

- More accurate measures of the HOT’s efforts and impact
- The extent to which the existing array of service providers adequately addresses the needs of the homeless population
- The viability of the recommendations made by the homeless individuals we spoke to—most notably the dedicated encampment space proposition
- How to provide better outreach to men, who comprise the majority of homeless individuals, given that our data indicate that women may be more inclined to seek help than men
• Shelter usage, reluctance to use shelters, and alternatives to the shelter model

• Ways to make the City’s current array of homeless services more holistic, including adequate follow-up once the initial connection is made, and continuity of service that is consistent across various service providers.
Endnotes


3) Nationally, homelessness is an evolving issue: in recent years, the number of people sleeping on the streets has declined, the number of people sleeping in emergency shelters and transitional housing has increased slightly, and the number of people living “doubled up”—living with family or friends but not as lease-holders or home owners, has increased substantially. As the National Alliance to End Homelessness notes, “these are a group of people who are housed, but not living independently in their own homes. This is not a positive development and is a symptom of the affordable housing crisis in this country, as is homelessness.” See: http://www.endhomelessness.org/library/entry/media-resource-trends-in-homelessness.

4) See: http://www.rtfhhsd.org/pitc/.


7) Every effort was made to minimize the possibility of interviewees participating in more than one interview. The faculty supervisors of the research monitored interview participants to identify any duplicates. However, we cannot say with certainty that there were no duplicates, only that if there were, they were a very small number.

8) However, by one more recent estimate, the homeless population of the East Village is closer to 865. See: Halverstadt, L. (August 16, 2016). Gentrifying East Village is also seeing a large spike in homelessness. Voice of San Diego, http://www.voiceofsandiego.org/topics/nonprofits/gentrifying-east-village-is-also-seeing-a-large-spike-in-homelessness/. 


13) We use the term “service reluctance” here deliberately, to distinguish from the typical term “service resistant” to describe difficult-to-serve individuals.

14) We note that there is a provider of lockers in the downtown area. The Transitional Storage Center, run by the advocacy organization Think Dignity, offers 304 lockers and 130 bins for use by homeless individuals. However, as of September 5, 2016, there is a waitlist to use this resource. See: http://www.thinkdignity.org/transitional-storage-center-tsc. That there is a waitlist is unsurprising, given that the current homeless population of the surrounding area has most recently been estimated at 865—more than double the number of available lockers. See: Halverstadt, L. (August 16, 2016). Gentrifying East Village is also seeing a large spike in homelessness. Voice of San Diego, http://www.voiceofsandiego.org/topics/nonprofits/gentrifying-east-village-is-also-seeing-a-large-spike-in-homelessness/. 