

## Engaging with Unsheltered/Service-Resistant Individuals Experiencing Homelessness: An Annotated Bibliography from KnoxHMIS

### SOCIAL SERVICE AGENCIES

Duffield, B., Institute for Children, Poverty and Homelessness. (2016, October). *Are we creating chronic homelessness? The past, present, and future of federal homelessness policy*[Press release]. Retrieved from [www.ICPHusa.org](http://www.ICPHusa.org)

The Institute for Children, Poverty and Homelessness (ICPH) criticizes the compartmentalized federal “plan” to end homelessness by focusing solely on specific subpopulations of those who are experiencing homelessness. In 2009, HUD redefined chronic homelessness through the HEARTH Act to include the prerequisite of 12 months of uninterrupted, unsheltered homelessness and a confirmable disability (versus the more nebulous disabling condition). “The narrowness of this definition excludes many homeless single adults and even more parents and children [...] The original argument was that targeting resources to chronically homeless people will ‘free up’ resources to serve other homeless populations -- eventually.” This flat prioritizing leaves gaps in care for other populations experiencing homelessness even when those other populations have been identified as having more urgent needs. The HEARTH Act also introduced the term “functionally zero” which is defined as “the availability of resources in the community exceeds the size of the population needing the resources. Whether homeless people use those resources or are successful with them is not relevant.” ICPH stresses that targeting those who currently meet the criteria for chronic homelessness does nothing to prevent individuals from entering chronic homelessness. ICPH underscores that “housing is necessary, but not sufficient” because housing first frames homelessness entirely outside of its complex causes such as intergenerational “deep poverty, lack of education, lack of childcare, lack of employment options, *and* a severe shortage of affordable housing.”

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Donley, A. M., & Wright, J. D. (2012). Safer outside: A qualitative exploration of homeless people's resistance to homeless shelters. *Journal of Forensic Psychology Practice, 12*(4), 288-306. doi:10.1080/15228932.2012.695645

Donley and Wright pull their research from five focus groups with a total of 39 people who are currently experiencing unsheltered homelessness (an estimated 37% of those experiencing homelessness are unsheltered, “street” homeless, or otherwise living in places not meant for human habitation which is colloquially known as “sleeping rough”). Donley and Wright’s literature review found service resistant clients were more likely to be older, African American or Native American, current consumers of alcohol, armed service veterans, day labourers, or having had experienced court-ordered psychiatric treatment. The number of times experiencing homelessness, age, gender, incarceration history and medical history was not found to be significant predictors. Rather, previous experiences with service providers are the most likely indication of whether someone will attempt to engage with social services again. Core components of past characterizations include: infantilization, the idea that homeless agency staff know better than homeless people what services they need, what problems they have, how services are best delivered, being treated as a child, being subject to arbitrary rules, being treated disrespectfully by staff, experiencing objectification, being treated as a number or “thing,” the medicalization of homelessness. In summation, “staff and guests function as institutional agents whose job it is to govern ‘the homeless’ through a regime of surveillance, discipline, and personal enhancement [...] A ‘normal’ person is to be made by governing a ‘deviant’ homeless person.” Once again, the myth of self-sufficiency and the narrative of “bootstrapping it” “fixes blame on needy, dependent individuals rather than on broken or ineffective institutions or larger impersonal social, economic and political forces. The result is an often-bizarre system of victim blame and pious self-righteousness from which many homeless people ‘opt out’.”

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Garrett, S. B., Higa, D. H., Phares, M. M., Peterson, P. L., Wells, E. A., & Baer, J. S. (2008). Homeless youths' perceptions of services and transitions to stable housing. *Evaluation and Program Planning*, 31, 436-444. doi: 10.1016/j.eva;progplan.2008.04.012

Authors use both established literature and the qualitative interviews from 27 youth (either currently experiencing homelessness or had previously experienced homelessness). Authors also note that literature has established that “youth and young adults frequently underutilize available program.” With their research and interviews, Garrett and collaborators suggest that a young person’s stage within the lifecycle of youth homelessness affects use of services; young people new to the streets or young people in crisis or ‘disequilibrium are more likely to use services than their peers in “stasis” and who routinely dismiss services or interventions. The often interpersonal nature of these crises underscores the importance of the therapeutic relationship between client and therapist. In regards to utilizing services, respondents’ answers can be classed within what barriers are faced in attempt to utilize services and what barriers might prevent a youth from gaining housing. In regards to using services, themes of independence, self-reliance, substance use and the influence of peers. Other contributing factors include the (positive and negative) affections of staff, health and safety (violence, health concerns such as lice or scabies, the theft of personal effect, being separated from partners or families), “an inability or reluctance to [access services] because of service characteristics and limitations such as location, waiting lists, operating hours, maximum capacities and age restrictions). On the contrary markers for a successful exit from street living were noted to be “a gradual process [of the] accumulation of conditions, events, and feelings associated with street culture that propelled young people to consider leaving it all on the streets,” experiencing major life events such as a death, arrest, of pregnancy, reducing

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substance use, distancing themselves' from their street friends, and re-defining independence to include assistance from others.

Hoffman, L., & Coffey, B. (2008). Dignity and indignation: How people experiencing homelessness view services and providers. *The Social Science Journal*, 45, 207-222.  
doi:10.1016/j.soscij.2008.03.001

Hoffman and Coffey pull their research from over 500 transcribed interviews (housed within HMIS databases) from people experiencing homelessness. Interactions between clients and service providers are “predominantly expressed in sharply negative terms, with experiences of objectification and infantilization being commonplace.” Client disclosure was primarily angry, and “many simply opted out of the social services system in order to maintain a sense of dignity and self-respect.” Hoffman and Coffey underscore the importance of seeing clients’ decisions to “opt-out” are not due to personality failings or a desire to remain unsheltered but rather “a result of the power relations and social inequities in the provider-client relationship.” One suggestion for minimizing this provider/client rift is to “shift from questions about numbers served to one about *how* they are served.” Likewise, a mutually respectful dialogic relationship can strengthen personal rapport and self-worth. Within a climate of budget cuts and service reductions, providers are more likely to be trained “to be suspicious of clients, [...] assume there is fraud, and [a need to] maintain ‘social control’ and order.” This conceptualization of homelessness leads clients to engage in “terms of self blame,” attempts to “salvage the self,” and a resistance to being treated as a “case.” While staff state that clients are prone to “talking back,” Hoffman and Coffey are clear that state that there should be no implication made that “these narratives and their narrators are somehow able to step outside of power relations ‘to resist.’” Therefore, it is not uncommon for “clients” to maintain their own identity integrity by rejecting the process and the system all together.

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Jost, J. J., Levitt, A. J., & Porcu, L. (2010). Street to home: The experiences of long-term unsheltered homeless individuals in an outreach and housing placement program. *Qualitative Social Work, 10*(2), 244-263. doi:10.1177/1473325010369025

Authors conducted in-depth qualitative interviews with 20 long-term unsheltered homeless adults in New York City. Interviewees were involved in Street to Home (S2H), a housing-first initiative that does not the linear treatment of housing models which require “demonstration of ‘housing readiness’ via sobriety and psychiatric stability prior to permanent housing placements.” Themes for success were identified as 1). Negative perceptions of homeless services and service resistance, 2). Readiness to leave the street, 3). Believable housing options as triggers for change, 4). Adapting to new surroundings and discovering benefits, and 5). The importance of knowing supports are in place. Reasons cited for resistance to seeking or accepting help were defined as 1). Bureaucratic requirements, 2). The ‘rationing’ of limited resources, 3). Lack of knowledge about where to go for help, 4). Previous denial of services, 5). Encounters with unsympathetic staff, and 6). The waiting, confusion, and aggravation associated with applying for services and entitlements. Authors state the importance “that service resistance and lack of participation are better understood as a ‘social-rational choice’ in which individuals consider the costs and benefits of participating in particular services based on their previous experiences and personal situations.

Kryda, A. D., & Compton, M. T. (2008). Mistrust of outreach workers and lack of confidence in available services among individuals who are chronically street homeless. *Community Mental Health Journal, 45*, 144-150. doi:10.1007/s10597-008-9163-6

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Kryda and Compton conducted interviews with 24 people who have been homeless for more than a year and primarily reside on the streets or other locations unfit for human habitation (chronically unsheltered homelessness). “Reasons why these individuals refuse services include a pervasive mistrust of outreach workers and the agencies that employ them, as well as a prominent lack of confidence in available services. These findings suggest a need for an approach to outreach that incorporates giving individualized attention from outreach workers, using an empathetic listening approach, minimizing stereotyping, providing greater choices, and employing formerly homeless people as outreach workers.” Crucially, outreach cannot be effective if individuals have extreme amounts of mistrust and skepticism for the social services system or if individuals do not believe that services being offered would be applicable or “help” their unique situation. Specifically, outreach workers are characterized as being motivated by their paychecks and delivering empty promises (including the belief that outreach workers need to “maintain” the homeless population in order to retain their jobs). Shelters are characterized as unsafe and only “short-term solutions.” One respondent, a mid-40s African American male with a 5 year history of homelessness stated that “Jail is preferable to a shelter, [because jails] pay people to protect you.” Interviewees also complained that “hand-outs” of food and clothing are common but unhelpful because of their short-term impacts. “It is of critical importance to ask people who are homeless what their needs are rather than assuming what their needs are based on an outsider’s perspective.”

Perez, J. L. (2014). The cost of seeking shelter: How inaccessibility leads to women’s underutilization of emergency shelter. *Journal of Poverty*, 18(3), 254-274. doi: 10.1080/10875549.2014.923966

Perez illustrates the different barriers that may influence unsheltered women’s choices in regards to whether or not to seek services. There exists some literature that explores what

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keeps unsheltered women from seeking medical or health services. However, Perez focused on the reasons why women would be resistant to utilizing services. Reasons are cited as short-term “solutions” to long-term problems, the lack of available shelter beds, the perception that services are not helpful, physical access to emergency shelters is unavailable/inaccessible, the inability to sleep with their partner or animal, high financial costs associated with services, limited/decentralized services and provider attitudes which paint those experiencing homelessness in a negative light. “Although competing priorities are often discussed as a barrier to seeking health services, because of other barriers like service fragmentation, locating a shelter with attainable entrance requirements and vacancies may expel as many resources as searching for appropriate health care services.” Additional specifics include the negative responses women may feel towards male staff members, and transitional housing projects do not accommodate those who are unemployed or “single women with no mental health diagnoses or history of substance abuse.

Rogers, L. E. (2017). "Helping the helpless help themselves": How volunteers and employees create a moral identity while sustaining symbolic boundaries within a homeless shelter. *Journal of Contemporary Ethnography*, 46(2), 230-260. doi:10.1177/089124165603450

Rogers focuses her analysis on the borderwork that occurs at the intersection of clients who are receiving services and the staff and volunteers who provide those services. While the interactions between agency workers and clients is meant to aid in ameliorating the class and presumed moral divide between the two groups, the unintentional use of “rhetorical and physical barriers reinforce class boundaries and create an othered status for clients who are being served”. The divide between identities of those who help and those who need help “allows staff to feel good about themselves by helping clients who are seen as unable to help themselves without questioning the cultural schemas of the homeless as dirty, dangerous, and

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deviant.” What Rogers calls “class talk” and “cultural capital” illustrate the unspoken but deep cognitive differences between staff and clients. For example, the bulk of middle-class staff drive to and from the shelters, are fashionably groomed and outfitted, while they “carry other social status markers like expensive jewelry, [...] purses, and electronics” while speaking amongst themselves about expensive home renovations, international vacations, and “extras” such as massages and yoga. Similarly staff take personal value from “helping those who can’t help themselves,” despite statements that based on the number of volunteer hours they “deserve a medal of honor.” Likewise, women are seen as promiscuous and men as violent. Implicitly notes “another’s lower moral status[, allowing the observer to take] , occupancy of a higher one and vice versa,:

Stoops, M. (2014). *Food-sharing report: The criminalization of efforts to feed people in need*(pp. 4-29, Rep.). National Coalition for the Homeless.

The National Coalition for the Homeless (NCH) states that legislation across the country is being introduced “with the intention of restricting individuals and groups from sharing food with people experiencing homelessness.” Legislation often focuses on groups buying permits from the city for the use of public spaces, the granting of permission from businesses and private citizens if their property is being used, the use of a food service operation license for hot and cold food or only serving shelf-stable goods, the need of restroom facilities, and the levying of heavy fines for not adhering to new local legislation. NCH believes these laws are based on “unjust stereotypes” and “biases that victimize people who are experiencing homelessness.” Likewise, NCH states that faulty logic and myths motivate these ordinances such as “Sharing food with people enables the homeless to remain homeless,” “There are more than enough existing meal programs, and they waste unused food,” and “If you stop feeding them, they will disappear.” These myths ignore the need for physically accessible services for those who are

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disabled or immobile, the cutting of ancillary support systems (6% cut in SNAP benefits leading to an increase usage of New York meal programs by 30%), and the multi-dimensional precipitating factors to can lead to homelessness.

Thompson, S.J., McManus, H., Lantry, J., Windsor, L. & Flynn, P. (2006) Insights from the street: Perceptions of services and providers by homeless young adults. *Evaluation and Program Planning*, 29, 34-43. doi: 10.1016/j.evalprogplan.2005.09.001

Thompson and co-authors conducted qualitative interviews with 60 young adults who were currently experiencing homelessness. A unique sort of dual consciousness is reported from the perceptions of the respondents. On one hand, personal autonomy and a sense of personal responsibility are traits that are reported as positives. In contrast, the collectivist knowledge of where in cities to receive basic needs was considered to be a part of “personal autonomy” despite the tacit agreement to engage with some types of services. Likewise, respondents showed disdain for larger society’s views on homeless people as “drug abuse,” “just bad people,” and lazy. Again, on the contrary, “participants voiced disapproval for other street youth who were unmotivated to improve themselves and attempt to transition of the streets.” Respondents showed low interest in use of physical health care but showed high interest in case managers who were able to “speak with the ‘right little catchphrases’ [to] facilitate the process of referrals and arrangements with various service systems.”

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### COMMUNITIES OF FAITH

Beatchiste, K. (2007). Faith-based organizations and the pursuit of restorative justice. *Manitoba Law Journal*, 3(32), p. 27-59.

Beatchiste lays out ways in which members of communities of faith are able to participate within restorative justice communities and policies. Faith-based participants include lay volunteers (volunteering as private members of the laity), clergy (persons performing spiritual officers in the Church), congregations (groups of people collectively participating in religious activity), service agencies and nonprofits (either supporting financially or hosting programs), rcumenical and multi-faith coalitions, and secular partnerships. Forms of participation include education and information provisions on restorative justice, advocacy on restorative justice issues, training of restorative justice practitioners, hosting and running restorative activities and programs, and ministry which includes restorative justice. The aims of communities of faith include the healing of individuals and communities, making peace as a value of its own, ministering to both body and soul, participating in restorative justice as discipleship, participating in restorative justice as a witness, and working to achieve social justice.

“Big hearts, tiny houses combine to advance mission at Seattle church Madrona Grace Presbyterian expands homeless ministry with little dwellings” (2015, Aug 11). *States News Service*.

Seattle congregation Madrona Grace Presbyterian has partnered with local homeless case-management agency Mary’s Place. The church has a “tiny house ministry” which they call NIMBY -- Neighbor in My Back Yard. NIMBY houses six families experiencing homelessness and

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a Mary's Place staff person. The first tiny house will be constructed for staff housing. The second tiny home will be placed on a church member's property to house a homeless individual or family. It is unclear if the tiny home will be used as emergency or transitional housing. The tiny homes are being constructed by donated labor from the Wood Technology Center of Seattle Central College at a cost between \$12,00-\$20,000 depending on amenities. The school "is happy to have the work building tiny, houses, which is an emerging industry for their graduates."

Billings, J.T. (2004). Incarnational ministry and christology: A reappropriation of the Way of Lowliness. *Missiology: An International Review*, 32(2).

Billings argues that while incarnational ministry may be a worthwhile point of exploration, it is not robust enough to guide the mission of a church or missionary. Billings brings concern to questions of boundaries within incarnational ministry. Missionaries are meant not to simply do things *for* people, but to be *with* people in the depths of poverty and oppression. Billings argues that if one is truly *with* the oppressed there is no way for them to be in a position to do "the work of healing, breaking, demanding, giving, and imparting" that would be needed to truly be incarnate. Instead, Billings argues that scriptural calls for love and self-giving may be answered by an "ethics of lowliness" which recognizes that middle-class Western missionaries exist out of the "freedom to enter into relationships with persons who bring one outside of one's socioeconomic or religious comfort zone -- freedom to break bread with the outcasts, the poor, and all the other 'neighbors' that Christians are commanded to love." The challenge according to Billings is to find a balance between the oppression of an unjust sociopolitical state and the oppression of one's "own sin and need" which place the onus of responsibility on the macro systems of culture and the micro system of individuals.

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Billings, J. T. (2014, December). The problem with 'Incarnational ministry'. *Christianity Today*.

While primarily theological in nature, Bilings' argument does concisely confine what incarnational ministry is in regards to a mode of missiology. Bilings states that incarnational ministry moves "beyond ministry of a distance and to 'incarnate' and immerse themselves into local cultures." It is relational and cross cultural. Billings dismisses incarnational ministry because of its theological implications, but he also names categorical costs including high rates of burnout. His solution is a theological one, but the means behind the method are also relevant to anyone who serves the disenfranchised. Incarnational ministry operates from a central metaphor of *sending* and signaling which leaves little room from an emphasis on *gathering*. Both from a spiritual point of view and from a secular service sector, value can be gained from focusing on multigenerational community building and support versus a purely individualized relational emphasis.

Boylan, M. (2017, Feb. 24). Dirty vagabond missionary immersed in 'radical mission.' *UWIRE Text*.

Maddy Burns has a degree in social work and is the primary missionary of Dirty Vagabond in Steubenville, North Carolina. She describes her work as living the gospels and incarnational ministry and inviting the youth she serves into all aspects of her life including her home, family, and job. She states the primary difference between mission work and social work is the boundaries. Wherein social work has strict professional boundaries to be upheld, incarnational ministry is "about sharing yourself completely." Likewise, she states the work is "not always safe," but that she continues anyway. She describes the ministry as radical and life-consuming.

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Currier, J. (2013, Dec. 3). St. Louis health department cools burners on street church's homeless ministry. *St. Louis Post - Dispatch*.

The St. Louis Health Department closed the operations of Churches on the Streets because the group did not have a permit to serve hot food to the public. The church used the vacant lot of the old Cotton Belt Rail Depot. The church believes since the location was private property they did not need a permit. However, the environmental health supervisor for the city states that even though its volunteers are distributing food on private property, they are only permitted to distribute pre-packaged meals. To distribute hot and/or homemade food to the public, groups must purchase a city permit at either \$50 a day or an annual permit which ranges from \$130-\$300.

Miller, J. Y. (2002, March 30). City wants homeless ministry out of parking lot. *The Atlanta Journal - Constitution*, p. 1

Larry Lee, small business owner outside of Atlanta, GA, began serving hot meals to individuals experiencing homelessness in 2000. He and his volunteers consider the operation to be a "parking lot ministry." Lee is not affiliated with any church, but he does use the city-owned parking lot beside a church as his base of operations. City officials have enlisted city police to remove Lee from the lot because of litter in the lot stating that "it's cleaned at taxpayer expenses" and "that the taxpayers should not be burdened with having to pay the bill for repeated cleaning of the parking lot." Lee has been removed once at the time of writing. He stated that he had "no desire" to break the law, but that if he were asked to leave a lot, he would simply move to a different lot.

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Sunderland, R. H. (2003). The dignity of servanthood in pastoral care. *The Journal of Pastoral Care & Counseling*, 57(3).

Sunderland argues that the crux of spiritual care and ministry resides at the relationship and vulnerability of both giver and receiver of care. One of the key barriers to the delivery of care are the barriers individuals erect to support their own sociopolitical environments. Those who minister to those in the most need often struggle with how to enhance personal dignity without reinforcing these pre existing barriers. Sunderland illustrates that within an American context, individuals or families who “accept help” often view their situation as related to welfare and, in turn, take a blow to their self-esteem. Therefore, the division between those who extend and those who accept care be shifted to a relationship of authority. Rather than the minister being the authority for how to live a “good life,” the individual in need of care has the authority to accept care and to define what care they need to receive. Additionally, Sunderland argues that public ministry and pastoral care bring together the individual counsel and community organizing needed to liberate both the oppressed and the oppressor from the “false absolutes which inhibit both from acting for the good of all.”

Tapia, A. (1993, Oct. 29). They relocate to befriend poor. *National Catholic Reporter*, 30(2).

The Christian Community Development Association (CCDA) includes over 100 nationwide groups including over 5,000 middle-class adults who have moved from the suburbs to poor inner-city communities. These individuals cite both theological and secular arguments for their moves. Not only do they consider themselves to be practicing incarnational ministry, they explicitly state the need to “give up privilege” and “the luxuries, comfort and safety of the suburbs and share in the risk, vulnerabilities and hazards of the people.” More concretely, they also state a desire to help in rebuilding the inner-city tax base after decades of white flight.

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Relocation, redistribution, and reconciliation are the ideas which create the ‘three Rs’ which give the movement direction and mission. While the movement attempts to be explicit in its engagement of race relations and intersections of class, the program is criticised for being a form of “soul gentrification” that turns people into “clones” of the incarnational ministers . A local protestant minister of color described it as “the worst form of paternalism” and that for the movement to work “relocators must come in as peers, show deference to community leadership and work in partnership with them.”

Van den Toren, B. & Van den Toren-Lekkerkerker, B. (2015). From missionary incarnate to incarnational guest: A critical reflection on incarnation as a model for missionary presence. *Transformations*, 32(8), 81-96.

Van den Toren and Van den Toren argue that the traditional definition of incarnational ministry is no longer appropriate in a world postcolonialism and post-globalization. Incarnational ministry places unrealistic expectations on both the missionary and the host community, runs the risk of operating from a paternalistic framework, and also does not account for a nuanced and post-modern conceptions of culture. Missionaries are unable to remove themselves from their cultural history just as host communities are not homogenous in such a way that missionaries are able to “incarnate” an accurate version of the culture. Instead, the metaphorical framework of guests is more appropriate. Not only does it engender cultural humility within the missionary, but it also allows these cultural outsiders to exist within preestablished community roles. That is to say that cultures most often have predefined means for enacting with guests and visitors and vice versa that guests have specific means of interacting with the host community.

Walker, D. (2009, Apr.). Homeless ministry tends to feet and dignity. *Capper's*, 131(4).

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Atlanta ministry Church of the Common Ground offers a monthly podiatric spa for community members experiencing homelessness. The service is primarily modeled off the act of Jesus washing the feet of his disciples' feet. The service is not only symbolic in nature (mirroring Christ-like ministry and reflective of self-care and self-esteem), but it also serves a practical function by helping to prevent foot infections, calluses, blisters, and the spread of fungus. According to the American Podiatric Medical Association, 75% of Americans have foot pain. Foot infections are four times more frequent in people experiencing homelessness. When foot infections are combined with preexisting conditions like diabetes, results can include amputation or septic shock and death. The Church of the Common Ground partners with a foot clinic to refer any individuals with medical needs.

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### LAW ENFORCEMENT & POLICING

Iverson, B., McCormack, D., & Thomson, M.J. (2010). Colorado Springs police department's H.O.T. program - Providing Outreach to the Homeless. *CALEA Update Magazine*, 107.

Unsheltered individuals had used city greenways as the locus for camps. Police received complaints from community members which centered around safety concerns such as out of control campfires, e-coli outbreaks from the river being used for transporting human sewage, and large amounts of trash accumulating. Based on the success of peer communities, Colorado Springs began a H.O.T. program -- Homeless Outreach Teams. H.O.T. outreach focused on creating appropriate and accurate referrals to service providers, increasing rapport between law enforcement agents and unsheltered individuals, and strengthening community relationships between police and service agencies. H.O.T. identified case management and community buy-in as two of the greatest needs for success. H.O.T. also created consistent community procedures and guidelines for dealing with interactions with the unsheltered camps.

Plotkin, M. & Peckerman, T. (2017). *The variability in law enforcement state standards: A 42-state survey on mental health and crisis de-escalation training*. New York City, NY: CSG Justice Center.

This literature review illustrates the lack of cohesive training for law enforcement agents to deal with mental health crises appropriately and in a way that affirms the dignity and personhood of the client. Knowledge topics include signs and symptoms of mental illness, state laws and involuntary commitment, mood disorders and psychosis, suicidality, developmental/intellectual disabilities, cognitive disorders such as dementia, PTSD and trauma,

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substance use/abuse, the use of medications and pharmaceuticals, co-occurring disorders. Skill topics include nonverbal communication, officer safety, active listening, de-escalation strategies, responding to suicidal people, identifying behaviors associated with mental illness, and conflict management and mediation. The most common barriers to this type of training is time, staffing, perceived impact, and costs.

Rahr, S. & Rice, S. K. (2015). From warriors to guardians: Recommitting American police culture to democratic ideals. *New Perspectives in Policing Bulletin*. Washington, D.C.: U.S. Department of Justice, National Institute of Justice.

American law enforcement agents have become paramilitary groups outfitted with technology rather than community relations. Officers are trained as urban warriors rather than community guardians. Empirical assessments of trust and confidence in police reflect “that people don’t care as much about crime rates as they do about how they are treated by the police.” This finding is operationalized by the concept of procedural justice which focuses on “Perceived impartiality during interactions between police and the communities they serve, participation (“voice”) from the public during these interactions, fairness, and consistency of treatment ... to include equal treatment, non discrimination and nonpartisanship.” In more practical terms, procedural justice refers to “the set of procedures by which agents of social control such as police meet, or fail to meet, standards of consistency, suppression of bias, accuracy of information, mechanisms of rectification, and ethicality of standards in their interactions with the public.” This framework has been implemented as through through the LEED program (Listen and Explain with Equity and Dignity). “Using the LEED model, officers are trained to take the time to listen to people, explain what is going to happen and how to process works, explain why that decision was made so the equity of the decision is transparent, and leave the participants with their dignity intact.” In efforts to reframe trainings as integral to

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police culture, global attempts are being made to de-militarize training and leadership. Specific programming includes Blue Courage which is focused on shifting police culture towards a guardianship rather than warrior ethos, Justice Based policing including LEED training, Crisis Intervention Training focused on specific mental health needs, Tactical Social Interaction that teaches “specific, measurable actions that increase rapport between strangers and lead to positive social interaction,” as well as The Respect Effect which is focused on “the neuroscience behind the acts of respect and disrespect to either motivate or antagonize.”

Reuland, M., Schwarzfeld, M., & Draper, L. (2009). *Law enforcement responses to people with mental illnesses: A guide to research-informed policy and practice*. New York City, NY: Council of State Governments Justice Center.

When officers are called to “do something” in regards to individuals who are suspected as having some form of mental illness, often no crime has been committed. Rather, individuals are often “suspected of low-level crimes or exhibiting nuisance behavior.” These situations are relatively infrequent, but these situations do require a disproportionate amount of time and complexity. A 1994 survey of law enforcement interactions in Honolulu reported that 73% of police interactions with individuals suspected of having some form of mental illness were the result of either no criminal activity or the individual had “exhibited disorderly conduct” which includes loud or obnoxious behavior, untidiness, public drunkenness, and/or loitering. The same survey reported that 72% of these interactions did not result in either police custody or referrals to social services, but instead were “handled informally by ‘counseling and releasing’ the individual at the scene.” Specialized training, though, results in a decrease of harm to officers and an increase in the frequency of referrals which results “in greater access to needed crisis and non-crisis supports and services.” Additionally specialized mental health training resulted in a decrease of recidivism and reduced costs incurred by law enforcement agencies

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including high-cost SWAT responses. When crafting specialized training, communities should ask themselves: 1. What is the purpose for a change in training (decrease risk to officers? Increased efficacy of service providers? Community complaints?) 2. What characteristics such as race, ethnicity, religion, and/or geographic distribution of resources make a community unique in both its needs and its actions? 3. What mental health resources are available to the community?

Schwarzfeld, M., Reuland, M., & Plotkin, M. (2008). *Improving responses to people with mental illness: The essential elements of a specialized law enforcement-based program*. New York City, NY: Council of State Governments Justice Center.

Three core ideals create the best practices for law enforcement agents who engage with clients with mental illness. These include 1. To provide a new set of response options for frontline personnel that are tailored to the needs of people with mental illnesses, 2. Establish a link for these individuals to services, and 3. Law enforcement agencies with strong collaborative ties to mental health partners. Crisis Intervention Team (CIT) models include the Memphis Model which focuses on de-escalation and a reduction of force used and the co-responder model which pairs specially trained law enforcement agents with mental health professionals. The Department of Justice has listed ten essential elements to an effective and holistic CIT model. The ten elements are as followed: collaborative planning and implementation between service providers and law enforcement agents, addressing the root causes of suffering and barriers to care, including specialized training for CIT agents both in the field and as frontline communicators such as dispatchers and call takers, focus on de-escalation, stabilization and observation of the client, an established a concrete standard procedure for transporting clients, maintaining confidentiality in the release and exchange of client information, specialized partnerships between law enforcement agencies and treatment/support teams, macro

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organizational support from police culture as a whole as well as social from social service providers, and a direct goal of maintaining program evaluation and sustainability in regards to efficacy and sustainability.

