



Los Angeles Community Action Network

**Life on Industrial Avenue:
A Profile of an Urban Encampment
In Downtown Los Angeles
With Ten Policy Recommendations**

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Forward

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We would like to extend a very special thanks to the 71 homeless people who responded to the survey. What follows is a glimpse of their stories told in statistics and prose, informing us of what they need and want. It is our responsibility not only to listen, but also to act upon their voices not our stereotypes of what we think homeless people desire.

Summary

The size of the homeless population in Los Angeles County remains at a shockingly high level, estimated at approximately 85,000 people on any given night (Shelter Partnership 1995).¹ Despite the region's prolonged economic prosperity, homelessness has failed to wane, creating tension among homeless people, social service providers, advocates, community residents, and business owners. These tensions emerge out of concerns for the human and civil rights of homeless people as well as the general public's perceptions of potential negative impacts of high levels of street homelessness such as increased crime, decreased safety, reduced property values, and interruptions of business activity.

On February 15, 2001 at a community meeting sponsored by the Los Angeles Homeless Services Authority, Los Angeles County Sheriff Leroy Baca offered a concept paper describing a Homeless Public Safety Center (HPSC). Sheriff Baca presented the HPSC as his response to the problem of persistent street homelessness in downtown Los Angeles. The proposed center would have a one-time cost of \$8 million for the purchase of land and construction of the facility. As Sheriff Baca states in the report, the center would serve as "...an open air shelter living environment with access to basic human, medical, and mental health needs..." for approximately 150 homeless people at any given time. Sheriff Baca describes the creation of such a center as a "...humane, simple, affordable, and ultimately cost saving response..." to the vast number of "service and structure resistant" homeless people living on the sidewalks and in the streets of Los Angeles County, especially those concentrated in downtown Los Angeles.

The Los Angeles Coalition to End Hunger & Homelessness (LACEH&H) and the Los Angeles and Hollywood Community Action Networks (CAN) welcome Sheriff Baca's desire to proactively and humanely respond to the "insanity" of homeless people living in squalor and hopelessness. However, we feel that it is critical to infuse the voice of homeless people into the debate on how they can be best served by public policy. Consequently, we have replicated a survey of homeless encampment residents in the downtown area conducted in 1993 by Dr. Michael Cousineau (1993), currently of the University of Southern California School of Policy, Planning, and Development. This survey of 134 people living in 42 encampments in central Los Angeles emerged out of a paucity of adequate information on this population and documented respondents' demographics; lifestyle characteristics such as sources of income; and needs and preferences for aid.

¹ Shelter Partnership's 1993-1994 estimate of the size of the homeless population is the most recent effort to enumerate the homeless in Los Angeles County. Since this enumeration, local service providers to the homeless have consistently reported increases in demand for their services to the US Conference of Mayors (2000). However, these reports are based on perceptions of growth and not actual counts. In the absence of a more recent systematic enumeration of the homeless in Los Angeles County, the 1993-1994 count is currently used often by the media, service providers, and government agencies including the Los Angeles Homeless Services Authority (LAHSA).

Sensing a similar gap in information on the current downtown encampment population underlying Sheriff Baca's proposal, we set out to administer a modified version of Cousineau's survey to residents of a sizeable and well known encampment on Industrial Avenue in the skid row district of downtown Los Angeles. On March 9, 2001 we collected 70 completed surveys from residents of the Industrial Avenue encampment, the results of which are presented in this report. Our goal in this research effort is threefold:

1. To serve as a needs assessment for the growing population of homeless people living on the sidewalks and streets of downtown Los Angeles. We hope to answer the following questions: What do encampment residents say they want and need? Why do some people "refuse to go inside"? Are they really "service resistant"? What are the housing preferences of homeless people that are currently living on the streets?
2. To assess how its target population would receive Sheriff Baca's proposed open-air shelter. We hope to address the following questions: Do encampment residents want a public safety center such as Sheriff Baca has proposed? Would the funds be better spent on other policy solutions?
3. To serve as a 2001 point-in-time gauge to assess some impacts of changes in social policy towards homeless people since the 1993 study. We seek to answer the following question: Are there substantial differences in the findings of these two studies conducted 8 years apart?

Summary of Findings From the 2001 Survey

- *Gender:* The large majority of encampment residents are male (71%) but there is also a significant presence of females (27%) and a single transsexual individual.
- *Age:* The ages of respondents range from 25 to 65 with a mean age of 44 years old. The largest group (48%) range in age from 41 to 50 years old. Next, 31% are 25 to 40 years old, followed by a smaller but substantial number of respondents ranging in age from 51 to 65 years old (20%).
- *Ethnicity:* Our sample population is overwhelmingly African American (87%), with small percentages of Latinos (7%), whites (3%), and other racial/ethnic groups (3%).
- *Marital Status:* A small group of respondents (13%) are married, while the great majority is either single (63%) or divorced/separated (23%).

- *Work:* A strong majority of respondents (73%) report that they work in some form of casual labor such as recycling of aluminum cans (42%), street vending (35%) and short-term work (35%). Only 14% of respondents reported to obtain income from panhandling.

Differences By Gender: Although nearly half of female respondents (47%) engage in casual labor, a significantly larger percentage of male respondents (82%) work in casual labor.

- *Public Assistance:* Nearly one-third of respondents (31%) receive food stamps, and slightly less (28%) receive General Relief (GR) cash benefits. Small numbers of respondents receive other forms of public assistance such as Supplemental Security Insurance (SSI) (10%), unemployment insurance (3%) and Social Security Disability Insurance (SSDI) (1%). In addition, (32%) of respondents report that they are no longer receiving General Relief (GR) benefits due to the implementation of strict time limits and program requirements by the County.
- *Loss of Food Stamps:* While nearly 40% of respondents who had not lost their GR benefits receive food stamps, a much smaller percentage (13%) of respondents who had been terminated report that they receive food stamps, even though many would still be eligible.
- *Sources of Food:* A majority of respondents (76%) report that they rely on missions or shelters for food. Additionally, 73% report using food lines or soup kitchens for food, while 22% purchase food at restaurants or grocery stores and 22% cook for themselves.
- *Help From the Community:* A majority of respondents (76%) report that they regularly receive some form of aid from another individual or community based organization. A majority of respondents (61%) receive clothing from these individuals or groups, while 35% receive money and 30% receive food.
- *Law Enforcement Harassment:* Over half of respondents (55%) report that either police or Business Improvement District (BID) private security bother them as they endure life on the streets. More than half of respondents (51%) report that they are harassed during street cleanings by police (27%), city workers (4%), or both (20%).
- *Disconnection From Social Service Agencies:* While respondents receive emergency aid from the community, only a small minority (20%) report that they are working with an agency to transition off the streets.

- *Distaste for Missions and Shelters:* A majority of respondents (61%) report that they have never stayed in a mission or shelter. When asked why they are currently not staying in shelters, 54% of respondents reported that they do not like the rules, and 31% feel that they are not treated with respect. Additionally, 27% of respondents state they cannot afford fees charged by some shelters.

Differences by age: While 86% of respondents aged 51 to 65 and 65% aged 41 to 50 report having stayed in a mission or shelter, only 36% of respondents below 40 report ever having stayed in mission or shelter.

- *Access to Showers and Toilets:* Most respondents (68%) report that they shower at missions or shelters and over one quarter use the bathroom at missions or shelters. Almost half the respondents (48%) use port-a-potties placed on nearby sidewalks by the City of Los Angeles while 28% report that they use the sidewalks and the street as toilets and 22% use toilet facilities in nearby businesses.
- *Drug Use:* Slightly less than half of respondents (48%) report that they used either an illicit or a legal drug in the past 30 days. The most common drugs were alcohol (45%) and crack cocaine (44 %) followed by marijuana (35%).

Differences By Age: Middle-aged respondents were more likely to have used crack in the last 30 days than younger or senior respondents. While 56% of respondents aged 41 to 50 report using crack, 29% of respondents ages 50 or older and 32% younger than 40 reported having used crack in the last 30 days.

- *Use and Access to Drug Treatment:* Only 12% of respondents report that they have been in drug treatment in the last year. A substantial group (19%) reports that they tried but were unable to get drug treatment in the last 12 months. This group included 10 of the 30 respondents that reported having used crack in the last 30 days.
- *Health Status:* Most respondents report to be in either good health (42%) or fair health (34%). A small but substantial proportion of respondents (17%) report that they are in poor health.

Differences By Age and Gender: Older respondents, especially those 51 or older, are more likely to be in poor health. While only 4% of those aged 25 to 40 are in poor health, 18% percent of those between 41 and 50, and 36% of those 51 or older are in poor health. In addition, women also tend to be in poorer health than men. While only 33% percent of males report having an ongoing health problem, 63% of females report having an ongoing health problem.

- *Lack of Access to Health Care:* A majority of respondents (76%) report lacking health insurance of one kind or another. Additionally, 34% of respondents report that they needed to see a doctor but were unable to do so in the last year.

- *Preferences for Aid:*

Housing

Housing Preferences: The first priority for the great majority of our sample (89%) is to have their own room or their own apartment or house. No other form of housing was chosen as a first priority by more than 10% of respondents. Only 8% of respondent state that their first housing priority is to stay in their current encampment, and only 1% of respondents report that moving to a proposed open-air public campground is their first housing priority. Missions and shelters were not a housing option acceptable to the overwhelming majority of respondents (85%).

Sheriff Baca's Proposed Center: Although only 1% of respondents report the proposed public camp as a first housing priority, over two thirds of respondents (67%) report that they would go to the public camp given no change in their current access to permanent or transitional housing. If the proposed camp were to be created, small groups of respondents say that they would remain in their current encampment (10%) or find a more hidden place to live (10%), most likely due to a fear of arrest by police.

Year Round Low Expectation Shelter: Nearly three-fourths of the respondents (73%) report that they would stay in facilities similar to winter or cold/wet weather shelters if they were available on a year-round basis. Again, these respondents expressed willingness to stay in these barracks-style emergency facilities given no change in their current access to transitional or permanent housing.

General Relief Housing Voucher Program: A strong majority of respondents (70%) report they would participate in a housing voucher program as part of the Los Angeles County General Relief program. More than half (56%) would use the voucher to stay in a hotel while only 16% percent would want to use the voucher to stay in a shelter.

Employment: The overwhelming majority of our sample (79%) reports that they would like to participate in employment services and more than half (54%) report a desire for job training.

Other Support Services: A substantial group of respondents (26%) express a desire for outpatient drug or alcohol treatment and 17% express a desire for residential treatment and/or sober living shared residential services. A quarter (24%) states that they have need for mental health counseling.

Street Cleaning: Nearly all respondents (96%) report that they would like the streets and sidewalks cleaned at a regular time during the day. Exactly half of the respondents would like the streets and sidewalks cleaned twice per day. Nearly all respondents (94%) report that they would like access to cans, brooms, and rakes to assist in cleaning up their area.

Policy Recommendations

1. Given that the overwhelming majority of respondents desire their own permanent housing and do not list the a public camp as a housing preference, we recommend that Sheriff Baca's proposed Homeless Public Safety Center be reconsidered. We greatly appreciate the Sheriff's willingness to use the independence of his elective office to advocate for new solutions and services for homeless people. However, we suggest that the funds and energy Sheriff Baca proposed to dedicate to the creation of a public camp should be transformed into solutions that emerge from an understanding of the needs and preferences of encampment residents in Los Angeles.
2. The simplest and most affordable alternative to the public campsite is to broaden the county's continuum of care by expanding the current cold/wet weather shelters to be year round, high tolerance and low demand programs. These facilities, located county-wide, must provide at least two healthy meals per day, as well as access to health care, mental health care, drug treatment, housing and employment search services, and job development programs, but not make willingness to participate in treatment or case management a condition for access. Non-profit organizations competitively selected by the Los Angeles Homeless Services Authority and funded with federal, state, county and city public funds should be contracted to operate the programs county-wide.
3. There are clear requirements for shelters to have known grievance procedures. These requirements are in the contracts of service providers funded by the US Department of Housing and Urban Development (HUD) and LAHSA to provide rights to guests and residents and a procedure for exercising these rights and resolving disputes. These grievance procedures are little known, little used and should be advertised and enforced countywide to increase confidence in shelters.
4. The Sheriff and other civic leaders should press the Los Angeles County Board of Supervisors to enact reforms to the General Relief (GR) Program so that people participating in the program are not "dumped" into homeless encampments. Time limits on the receipt of GR benefits should be eliminated when participants are cooperating with program rules, homeless persons' access to benefits should be improved, application procedures simplified, and the benefit amount should be increased to a level that would better allow recipients to avoid homelessness.
5. The Sheriff is strongly encouraged to continue and expand his pioneering casework and placement services that stabilize and assist low-income people about to be released from jail. The expansion of these services will help limit the number of recently released persons who are in effect "dumped" in downtown without resources or supportive services.

6. The Sheriff and other civic leaders should press the County Board of Supervisors to expand access to outpatient and residential drug counseling and mental health services. Strategic investments in emergency, transitional and permanent housing options for homeless women, including both single women and women with children should also be encouraged. These facilities need to be sited throughout the county and not concentrated in skid row.
7. Los Angeles City, County and the Business Improvement Districts should hire formerly and currently homeless people to form trained outreach teams on a countywide basis. A first priority should be given to convene a special meeting of all outreach programs in Central Los Angeles to develop a strategy of coordinating outreach efforts, regularly visiting urban encampments, and sharing best practices.
8. The street cleaning program in skid row should be expanded to twice a day at regularly set hours. This must be done without harassing homeless people. In addition, encampment residents should be given access to trashcans, trash bags, rakes, and gloves, so that they can help keep the neighborhood clean.

Given that nearly 90 percent of the respondents in both 2001 and 1993 stated that their housing preference was a room, apartment, or home of their own along with a job, we strongly recommend the following steps toward increasing the supply of and access to truly affordable housing in Los Angeles.

9. The newly elected Mayor and Los Angeles City Council should support and enact the *Housing Los Angeles* proposal for a \$100 Million Housing Trust Fund for the City of Los Angeles. This trust fund would allow the City to create affordable and subsidized multi-unit rental housing, as well as aggressively promote investments in affordable housing from the private and nonprofit sectors.
10. All community leaders and stakeholders should support and implement the Los Angeles Coalition to End Hunger & Homelessness' *Los Angeles Plan to End Homelessness*, a plan to end homelessness in the next decade. The "Plan" will be released September, 2001.

Introduction

The Homeless Crisis

On any given night there are between 50,000 and 85,000 homeless people in Los Angeles County² (Shelter Partnership 1995) who compete for about 13,000 shelter beds, several thousand nonprofit single room occupancy (SRO) rooms, and during the winter about 2,000 emergency “cold-wet weather” cots (Los Angeles Homeless Services Authority 2000). The tremendous gap between supply and need for shelter leaves the majority of homeless people to fend for themselves living on the sidewalks, streets, parks, abandoned buildings and in their own or abandoned cars in our community.

While there are homeless people in virtually every community of Los Angeles, the most glaring and visible testament to our failed social policies is in downtown, where there continues to be scores of homeless people inhabiting the sidewalks, including a rising number of homeless women and children (Rivera 1998). For decades, the skid row area in downtown has been the subject of numerous plans, blue ribbon panels, community forums, political posturing and hand wringing. The crisis surrounding the growing number of homeless people, especially women, children and those with mental health and substance use issues have generated a myriad of responses. These range from the Community Redevelopment Agency’s “Policy of Containment” of the 1970s and 1980s, to Mayor Richard Riordan’s Downtown Drop-In Center and aggressive panhandling ordinance, to the Business Improvement Districts’ private security forces in the 1990s.

The latest to enter this debate has been Los Angeles County Sheriff Leroy Baca.

Sheriff Baca’s Proposal

On February 15, 2001 at a community meeting sponsored by the Los Angeles Homeless Services Authority, Los Angeles County Sheriff Leroy Baca offered a concept paper describing a Homeless Public Safety Center (HPSC). Sheriff Baca presented the HPSC as his response to the problem of persistent street homelessness in downtown Los Angeles. The proposed center would have a one-time cost of \$8 million for the purchase of land and construction of the facility. As Sheriff Baca describes in the report, the center would serve as “...an open air shelter living environment with access to basic human, medical, and mental health needs...” for approximately 150 homeless people at any given time.

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Sheriff Baca describes the creation of such a center as a "...humane, simple, affordable, and ultimately cost saving response..." to the vast number of "service and structure resistant" homeless people living on the sidewalks and in the streets of Los Angeles County, especially those concentrated in downtown Los Angeles. Sheriff Baca sees this population as resistant "...due to their life experiences, misconceptions, mental health status, prior negative contacts, faith based requirement, and a perception they are overly structured. Therefore, if a person is not yet ready mentally or physically to enter a shelter, they fall off the precipice into the streets."

Specifically, the proposed HPSC would target encampment residents on Industrial Avenue, a subject of a February, 2001 *Los Angeles Times* article (Casillas and Hayasaki 2001), as well as others living on the streets of San Julian Avenue, and 5th and 6th Streets. In fact, the original site for the HPSC investigated for purchase by the Sheriff's Department was the plot on the corner of Alameda Avenue in downtown adjacent to the Industrial Avenue encampment.

LACEH&H, LA & Hollywood Community Action Network Response

The Los Angeles Coalition to End Hunger & Homelessness (LACEH&H) and the Los Angeles and Hollywood Community Action Networks (CAN) welcome Sheriff Baca's desire to proactively and humanely respond to the "insanity" of homeless people living in squalor and hopelessness. However, we feel that it is critical to infuse the voice of homeless people into the debate about how they can be best served by public policy. Consequently, we have replicated a survey of homeless encampment residents in the downtown area conducted in 1993 by Dr. Michael Cousineau (1993), currently of the University of Southern California School of Policy, Planning, and Development. This survey of 134 people living in 42 encampments in central Los Angeles emerged out of a paucity of adequate information on this population and aimed to elucidate the respondents' demographics; lifestyle characteristics such as sources of income; and needs and preferences for aid.

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Our goals in this research effort are threefold:

1. To serve as a needs assessment for the growing population of homeless people living on the sidewalks and streets of downtown Los Angeles. We hope to answer the following questions: What do encampment residents say they want and need? Why do some people “refuse to go inside”? Are they really “service resistant”? What are the housing preferences of homeless people that are currently living on the streets?
2. To assess how its target population would receive Sheriff Baca’s proposed open-air shelter. We hope to address the following questions: Do encampment residents want a public safety center such as Sheriff Baca has proposed? Would the funds be better spent on other policy solutions?
3. To serve as a 2001 point-in-time gauge to assess some of the impacts of changes in social policy towards homeless people since the 1993 study. We seek to answer the following question: Are there substantial differences in the findings of these two studies conducted 8 years apart?”

Methodology

The survey questions asked to encampment residents on the evening of March 9, 2001 emerged from the following process.

First, soon after Sheriff Baca presented his proposal in mid February 2001, LACEH&H staff and CAN members decided to ask homeless people living in downtown what they thought of this proposal. To that end, Pete White, community organizer for LACEH&H and CAN, assembled a packet for approximately 25 CAN members for their review and comment. The packet consisted of the 1993 Cousineau study and a survey of homeless people conducted more recently by the San Francisco Coalition on Homelessness. The purpose was to have CAN members make suggestions to delete, add, or change the questions targeting the homeless encampment on Industrial Avenue. After careful review, members decided to replicate the 1993 study, question for question, using exactly the same wording in order to ensure comparability. However, we decided to add four questions to probe respondents on their views surrounding two immediate issues: 1) street cleaning, an issue raised by the Mayor's Office in February 2001; and 2) Sheriff Baca's proposed public campsite.

Once the questionnaire (Appendix I) was finalized, the next step was to train ten CAN members to administer the survey. To ensure that the questionnaire was administered in an accurate, unbiased and professional manner, CAN members participated in three, five hour training sessions, for a total of 15 hours worth of training. These training sessions are seen as being highly successful since 71 complete surveys were collected on a single day.

To thank people for their time and participation in the survey, each respondent was given heavy blankets, personal hygiene products, and \$2.00 for participating in the survey. We administered the survey in the early evening since it was the consensus of the CAN members that we would most likely find the largest number of people in the early evening hours, thus increasing the sample size.

Findings

DEMOGRAPHIC CHARACTERISTICS

Gender: The large majority of residents of the Industrial Avenue encampment in our sample are male (71.0 percent). However, there is also a significant presence of females (27.5 percent) and a single transgender individual.

Age: Respondents range in age from 25 to 65 and have a mean age of 44.8 years old. Nearly half of respondents (48.6 percent) range in age from 41 to 50 years old. The second largest age group is those who are 25 to 40 years old (31.4 percent). Also, a substantial number of respondents range in age from 51 to 65 years old (20.0 percent).

Table 1 displays the age distribution of our sample by gender. Both male and female respondents are broadly distributed throughout the three age categories. However, in general, women tend to be somewhat younger than men in the encampment, with nearly 90 percent of women below 50 years old while approximately 75 percent of men are below 50 years old.

Table 1. Age Distribution by Gender (n=70, frequencies in parentheses)

<i>Age Category</i>	<i>Males</i>	<i>Females</i>	<i>Total</i>
25 to 40	30.6% (15)	36.8% (7)	31.4% (22)
41 to 50	44.9 (22)	52.6 (10)	48.6 (34)
51 to 65	24.5 (12)	10.5 (2)	20.0 (14)
TOTAL	100 (49)	100 (19)	100.0 (70)
Min./Max.	25 to 65		
Mean Age	44.8		

Ethnicity: In terms of racial/ethnic composition, our sample of encampment residents is overwhelmingly African American (87.1 percent), with small percentages of Latinos (7.1 percent), whites (2.9 percent), and other racial/ethnic groups (2.9 percent). A small percentage of respondents are married (13.3 percent), but the great majority is either single (63.3 percent) or divorced/separated (23.3 percent).

Table 2, below, is a comparison of the general demographic characteristics of our sample with the sample of downtown encampment residents taken in 1993. The most glaring differences between the two are that respondents in our sample are much more likely to be African American, older and somewhat more likely to be female.

Table 2. Comparison of Demographic Characteristics with 1993 Survey Respondents

	<i>2001 (n=70)</i>	<i>1993 (n=134)</i>
Percent Female	29.0%	18.7%
Percent African American	87.1%	58.0%
Percent Latino	7.1%	33.0%
Percent White	2.9%	6.7%
Percent <29	1.4%	13.0%
Percent 30-39	24.2%	41.0%
Percent 40-64	72.9%	39.6%
Percent 65+	1.4%	3.7%

While there are some differences between the sample populations of 1993 and 2001, the overall demographics are similar. Both samples are comprised primarily of people of color with the 2001 respondents overwhelmingly African American and much less likely to be Latino, probably due to differences in the populations sampled. The 2001 survey data was collected on one site in the skid row area that is heavily populated by African American men, while the 1993 survey was collected at a number of camps throughout the larger downtown area. Additionally, the 2001 survey found more women and respondents in the 40-64 year range than the 1993 survey. Even given differences in areas sampled, these results could possibly reflect a growing presence of women and seniors among the downtown homeless population.

LIFE ON INDUSTRIAL AVENUE

This section provides a glimpse into the nature of life on Industrial Avenue. On the date of the survey, the encampment was composed of individuals with varying lengths of residence. Length of stay ranged from one day to four years, with a mean length of stay of 7.3 months. Also, the survey data clearly demonstrates the existence of a communal lifestyle at the encampment. A great majority of respondents (74.6 percent) report that residents regularly engage in community activity such as cooking, eating, and socializing.

However, harassment, most often by police and Business Improvement District (BID) security, is also a regular feature of life for residents on Industrial Avenue. As can be seen in Table 3, more than half of respondents (54.9 percent) report that either police or BID security bothered them. Additionally, more than half of respondents (50.7 percent) report that they were harassed during street cleanings by police (26.8 percent), city workers (4.2 percent), or both (19.7 percent) during street cleanings of the area.

Table 3. Harassment (frequencies in parentheses)

<i>Does anyone bother you?*</i>	2001 (n=71)	<i>1993 (n=134)</i>
Yes	54.9% (39)	33.3% (44)
No	45.1 (32)	66.6 (90)
TOTAL	100.0 (71)	100.0 (134)
Have you been harassed during street cleanings?		
Yes (Police)	26.8 (19)	---
Yes (City Workers)	4.2 (3)	---
Yes (Both)	19.7 (14)	---
No	49.3 (35)	---
TOTAL	100.0 (71)	---

*All respondents who said that they were harassed and specified by whom stated that police and/or local Business Improvement District (BID) security harassed them.

As can be seen in the table, the general pattern of reported harassment of downtown residents has continued from 1993 until today. The larger percentage of respondents reporting to be harassed in 2001 is possibly due to the addition of Business Improvement District private security a source of harassment in the skid row area.

Work and Sources of Income and Aid

Work: The Institute for the Study of Homelessness and Poverty in Los Angeles (2000) estimates that between 25% and 50% of homeless people work. Cousineau's 1993 study similarly found that a substantial percentage (33 percent) of homeless people work either part or full time. Moreover, more than twice the number of people in the 1993 survey recycled cans, bottles, and other materials than panhandled for money. Findings from our sample also dispel the commonly held stereotype of homeless persons as non-working and service dependent. This section details the economic activity of residents of the Industrial Avenue encampment.

As can be seen in Table 4 below, a sizeable minority of respondents (18.3 percent) responded "yes" to the question, "Do you work?" Survey interviewers did not specify whether this question was asking about wage labor in the formal economy or broader definitions of work (such as day or casual labor). Therefore, respondents were allowed to determine themselves whether their economic activity was to be considered "work" or not. Respondents who responded "yes" to this question specified jobs such as short-term informal employment in manual labor loading trucks and warehousing as well as wage labor jobs such as maintenance and telemarketing.

However, when respondents were probed on specific sources of income, we found a substantially larger proportion engaged in work or casual labor as understood in broader terms. These sources of income include wage labor, day labor, and various types of “shadow work” such as collection of recyclable items, street vending, and washing windows. This categorization of “casual labor” does not include activities such as panhandling, sale of drugs, or prostitution. As can be seen in Table 4, a sizeable majority of respondents (72.9 percent) work in some form of casual labor. This finding sharply contrasts with most stereotypes of skid row encampment residents as idle, non-working, and entirely service dependent.

Table 4. Work and Casual Labor (n=70)

<i>Do you work? (n=71)</i>	<i>Percentage</i>	<i>Frequency</i>
Yes	18.3	13
No	81.7	58
TOTAL	100.0	71
<i>Casual Labor (n=70)</i>		
Yes	72.9	51
No	27.1	19
TOTAL	100.0	70

Differences By Gender: The cross-tabulation presented in Table 5 demonstrates that while nearly half of female respondents (47.4 percent) engage in casual labor, a significantly larger percentage (81.6 percent) of males work in casual labor.³

Table 5. Cross-tabulation of Casual Labor by Gender (n=68, frequencies in parentheses)

<i>Do Casual Work</i>	<i>Male</i>	<i>Female</i>
Yes	81.6% (40)	47.4% (9)
No	18.4% (9)	52.6% (10)
TOTAL	100% (49)	100% (19)

Pearson’s Chi²= 8.441, p=0.015

Work Activities: Table 6 provides details of the various non-public assistance sources of income for residents of the Industrial Avenue encampment. Similar to the 1993 study, the most common sources of income for our sample are: collection of aluminum cans (42.3 percent), street vending (35.2 percent), and short-term work (35.2 percent). However, there is an important difference between the sources of income reported in 2001 and 1993. The percentage of those recycling in 2001 is much less than in 1993 (63 percent). Also, the percentage of respondents reporting to panhandle in 2001 is 14 percent, as compared to 34 percent in 1993.

³ Tests of statistical significance on cross-tabulations are most commonly conducted through the use of Chi-square (Chi²) measurements and p values. The p value at the bottom of the cross-tabulation table indicates the probability that the distribution in the table would occur randomly, given the frequency distribution of the two variables in the table. For example, in the case of Table 5, the probability that such a sizable proportion of males (81.6 percent) in comparison to females (47.4 percent) would engage in casual labor simply by random chance is only 0.015. Therefore, we can say with 98.5 percent confidence that there is a systematic relationship between being male and engaging in casual labor among our sample population.

A very plausible explanation for the differing levels of use for these two sources of income is the emergence of Business Improvement District private security forces that discourage both of these activities.

Additionally, given the abject poverty faced by encampment residents, small but substantial numbers report engaging in desperate and sometimes illicit activity such as panhandling (14.1 percent), selling blood (12.7 percent), selling food stamps (9.9 percent), selling drugs (8.5 percent), and prostitution (5.6 percent). The likelihood of underreporting in these areas is obvious.

Table 6. Sources of Income (frequencies in parentheses)

<i>Source of Income</i>	2001 (n=70)	1993 (n=134)
Collect Aluminum Cans	42.3% (30)	63.4% (85)
Street Vending	35.2 (25)	---
Short Term Work	35.2 (25)	35.8 (48)
Panhandling	14.1 (10)	33.6 (45)
Selling Blood	12.7 (9)	3.0 (4)
Selling Food Stamps	9.9 (7)	---
Selling Drugs	8.5 (6)	---
Prostitution	5.6 (4)	4.5 (6)
Other	4.2 (3)	1.5 (2)

*Because respondents were able to select multiple answers, these percentages do not total 100%.

Public Assistance: In addition to casual labor and sometimes engaging in illicit activity, some respondents in our sample use public assistance benefits to subsist. As can be seen in Table 7, the most common forms of public assistance do not differ much from those reported by the 1993 sample.

In 2001, the major forms of assistance received by respondents are food stamps (31.0 percent), followed by General Relief (GR) cash benefits (28.2 percent). Small percentages of respondents receive Supplemental Security Insurance (SSI) (9.9 percent), unemployment insurance (2.8 percent) and Social Security Disability Insurance (SSDI) (1.4 percent). The sizeable percentage of GR recipients living in the encampment in skid row suggests that the cash benefit allotment is currently at a level (\$221 per month) that makes attaining and maintaining housing extremely difficult.

Table 7. Receipt of Public Assistance Benefits (frequencies in parentheses)*

<i>Benefit</i>	2001 <i>(n=71)</i>	<i>1993</i> <i>(n=134)</i>
Food Stamps	31.0% (22)	18.7% (25)
General Relief (GR)	28.2 (20)	17.1 (23)
GR (TERMINATED)	32.4 (23)	---
Social Security Insurance (SSI)	9.9 (7)	0.7 (1)
Unemployment Insurance	2.8 (2)	2.2 (3)
SSDI	1.4 (1)	---

*Because respondents were able to select multiple answers, these percentages do not total 100%.

While nearly a third of respondents report receiving GR cash benefits, a disturbing proportion of respondents (32.4 percent) report they were no longer receiving these benefits due to termination by the Los Angeles County Department of Public Social Services. Previous survey research has demonstrated the disastrous effect of annual time limits of 6 or 9 months on GR cash benefits mandated in recent years by the Los Angeles County Board of Supervisors and their role in increasing the likelihood of homelessness among the county's extremely poor (Moon and Hawes 1999, Shelter Partnership 1999).

While receiving GR cash benefits, employable individuals are eligible to receive up to \$127 per month in food stamps as long as they comply with all General Relief Opportunities to Work, G.R.O.W., workfare requirements. Because food stamps are a federally funded benefit, the time limits on GR cash benefits imposed by the County do not apply. Therefore, after the loss of GR cash benefits, former GR recipients can continue to receive food stamps for up to three months, in a 3 year period, without participating in workfare and continue as long as they complete 20 hours of workfare assignments weekly. However, as can be seen in Table 8, our survey found that while nearly 40 percent of respondents who had not lost their GR benefits receive food stamps, only 13 percent of respondents who had been terminated receive food stamps. This finding is consistent with both the Moon and Hawes (1999) and Shelter Partnership (1999) findings of high rates of loss of food stamps among people terminated from the GR program.

Table 8. Cross-tabulation of Receipt of Food Stamps and GR Benefits Terminated (n=71)

<i>Receive Food Stamps</i>	<i>GR Terminated</i>	<i>GR Not Terminated</i>
No	87.0% (20)	60.4% (29)
Yes	13.0% (3)	39.6% (19)
TOTAL	100.0% (23)	100.0% (48)

Pearson's $\chi^2 = 5.122$, $p = 0.024$

Community Aid: Respondents were also asked whether or not someone regularly helps them by bringing food, clothing, or money. Table 9 shows that the great majority of respondents (76.1 percent) regularly receive some form of aid from an individual or community based organization. A majority of respondents (60.6 percent) receive clothing, while 35.2 percent receive money and 29.6 percent receive food.

Table 9. Aid at Encampment (n=71)

<i>Does anyone regularly help you?</i>	<i>Percentage</i>	<i>Frequency</i>
Yes	76.1	54
No	23.9	17
TOTAL	100.0	71
<i>What kind of help do you receive?*</i>		
Clothing	60.6	43
Money	35.2	25
Food	29.6	21
Other	2.8	2

*Because respondents were able to select multiple answers, these percentages do not total 100%.

Disconnection With Social Service Agencies: As can be seen in Table 10, despite a sizeable majority of respondents receiving some form of material aid from others, only a small minority reports “case management” or working with an agency (19.7 percent), or an individual (15.9) to attain housing and self-sufficiency.

Table 10. Working With Agency or Individual to “Get on Own Feet”

<i>Are you working with an agency? (n=71)</i>	<i>Percentage</i>	<i>Frequency</i>
Yes	19.7	14
No	80.3	57
TOTAL	100.0	71
<i>Are you working with an individual? (n=69)</i>		
Yes	15.9	11
No	84.1	58
TOTAL	100.0	69

Housing

Housing in the Month Prior to Survey: Respondents report sleeping in a variety of housing arrangements during the month prior to the survey. This range of housing forms, displayed in Table 11, suggests the existence of two groups of encampment residents: one staying in the camp constantly throughout the previous month (25.4 percent) and another group that has either recently joined the encampment or that moves between two or more forms of housing throughout the month (74.7 percent). Sizeable groups of respondents stayed in other encampments (38.0 percent), missions or shelters (25.4 percent), and cold/wet weather shelters (19.7 percent). Somewhat smaller groups of respondents report to have stayed in an abandoned building (11.3 percent), their own (rented) room (11.3 percent), in hotels with a voucher (9.9 percent) or by pay (8.5 percent), or with family or friends (5.6 percent).

Additionally, a number of respondents report coming to the encampment from institutions such as hospitals or nursing homes (4.2 percent); prisons, jails or halfway houses (2.8 percent); or drug and alcohol treatment centers (2.8 percent).

Table 11. Where Else Slept in Last 30 Days (n=71)

<i>Where have you slept in the last 30 days?</i>	<i>Percentage*</i>	<i>Frequency</i>
Other Encampment	38.0	27
Mission or Shelter	25.4	18
Cold/Wet Weather Shelter	19.7	14
Abandoned Building	11.3	8
Own Room	11.3	8
Hotel (w/Voucher)	9.9	7
Hotel (Paid)	8.5	6
With Family or Friends	5.6	4
Hospital or Nursing Home	4.2	3
Prison, Jail or Halfway House	2.8	2
Drug and Alcohol Treatment Center	1.4	1

*Because respondents were able to select multiple answers, these percentages do not total 100%.

Missions and Shelters: Sheriff Baca’s proposal assumes that many people living on the sidewalks are “service and structure resistant.” Table 12 displays survey results about respondents’ experience staying in missions or shelters and compares 1993 to 2001 survey results. The results are very similar and suggest that in the past eight years very little has changed in homeless people’s perspectives on staying in missions and shelters. If anything, the larger proportion of encampment residents who report that they do not stay in missions or shelters because they don’t like the rules in the 2001 sample suggests that these rules may have become a more salient barrier to staying in missions and shelters.

In the 2001 sample, a majority of respondents (60.6 percent) report that they have never stayed in a mission or shelter. When asked why they are currently not staying in a mission or shelter, more than half (53.5 percent) report that they do not like the shelter rules, and nearly two thirds (31.0 percent) feel that they were not treated with respect. Additionally, over a quarter (26.8 percent) of respondents report they cannot afford fees charged by some shelters.

These answers provide a glimpse into the two sides of “service resistant” behavior. Surely, some responses reflect rationalizations of disruptive or non-conforming behavior on the behalf of the encampment residents. Others could reflect resistance to patronizing and restrictive atmospheres created by programs designed to help homeless people. Perhaps the rules are insulting and people are treated disrespectfully. Is the respondent “service resistant” or “dignity resilient”? Certainly not being able to afford a program fee or being unwilling to be separated from one’s significant other are rational economic and emotional reasons to choose the sidewalk. This survey does not begin to address the complex nature of the interaction between individuals and social service agencies. But it does cast into serious question the assertion that “service resistance” is a one-way street. As shall be demonstrated clearly later in this study, the overwhelming majority of respondents do not want to live outside. They resoundingly choose a home and a job over the sidewalk, suggesting a need for social service providers to reconsider current program access and restrictions.

Table 12. Missions and Shelters (frequencies in parentheses)

<i>Have you ever lived in a mission or shelter?</i>	2001 (n=71)	<i>1993 (n=134)</i>
Yes	39.4% (28)	41.0% (55)
No	60.6 (43)	59.0 (79)
TOTAL	100.0 (71)	100 (134)
<i>Why don't you currently stay in a mission or shelter?*</i>		
Don't Like the Rules	53.5% (38)	33.6% (45)
Don't Treat Me Respect	31.0 (22)	---
Can't Afford Fees	26.8 (19)	22.4 (30)
Don't Want to be Separated From Significant Other	8.5 (6)	2.2 (3)
Like Privacy and Independence	8.5 (6)	14.9 (20)
Fear Crime or Violence	5.6 (4)	14.9 (20)

*Because respondents were able to select multiple answers, these percentages do not total 100%.

The question does arise, however, of whether or not analysis of other variables such as age, gender, or ethnicity aid in understanding why some respondents do us not social service programs. For example, are women more likely to use the missions? Are African-Americans more likely to use the shelters? Are substance users less likely to use missions or shelters? While we examined all of these possibilities, the only demographic variable in which there were significant differences in mission or shelter use is age.

Table 13 displays results from a cross-tabulation of age category and experience living in a mission or shelter. Younger respondents are much less likely to have experience staying in missions or shelters. While 85.7 percent of respondents aged 51 to 65 and 64.7 percent of respondents aged 41 and 50 reported having stayed in a mission or shelter, only 36.4 percent of respondents below 40 had stayed in mission or shelter. This suggests that more vulnerable persons are likely to use a mission or shelter, while the younger population, with their youth as a buffer against the elements and the danger of violence, prefers to avoid these programs.

Table 13. Cross Tabulation of Age Category and Experience Living in Mission or Shelter (n=70, frequencies in parentheses)

<i>Lived in Mission or Shelter</i>	<i>25-40 years of age</i>	<i>41 to 50 years of age</i>	<i>51 to 65 years of age</i>
Yes	36.4% (8)	64.7% (22)	85.7% (12)
No	63.6% (14)	35.3% (12)	14.3% (2)
TOTAL	100.0% (22)	100.0% (34)	100.0% (14)

Pearson's $\chi^2 = 9.292$, $p = 0.010$

Food

Residents of the encampment subsist on food from a variety of sources. Table 14 displays these sources and the percentage of respondents that reported to utilize each source. While only a small minority of respondents relies on missions and shelters for housing, a large majority (76.1 percent) relies on these facilities for food. Nearly three quarters of respondents (73.2 percent) report using food lines or soup kitchens for food, while smaller but sizeable groups purchase food at restaurants (22.5 percent) or grocery stores and cook for themselves (22.5 percent). Friends and family (12.7 percent) contribute food to respondents, while a small group relies on food taken from the garbage (7.0 percent) to subsist.

Table 14. Sources of Food (n=71)

<i>Source of Food</i>	<i>Percentage*</i>	<i>Frequency</i>
Mission/Shelter	76.1	54
Food Line/Soup Kitchen	73.2	52
Restaurant	22.5	16
Grocery Store (Cook for Self)	16.9	12
Family or Friends	12.7	9
Garbage	7.0	5
Other	4.2	3

*Because respondents were able to select multiple answers, these percentages do not total 100%.

Access to Showers and Toilets

Respondents report relying on a variety of institutions in skid row to maintain hygiene and to go to the bathroom. Table 15 shows that more than half of respondents (67.6 percent) report to shower at missions or shelters and slightly over one quarter (25.4 percent) use the bathroom at missions or shelters. Small numbers of respondents shower (15.5 percent) and use the bathroom (9.9 percent) at hotels. Sizeable numbers of respondents use port-a-potties (47.9 percent), the street (28.2 percent) and nearby businesses (22.5 percent) for toilets.

Table 15. Where Respondents Shower and Use the Bathroom (n=71, frequencies in parentheses)

<i>Location</i>	<i>Shower</i>	<i>Bathroom</i>
Mission or Shelters	67.6% (48)	25.4% (18)
Hotels	15.5 (11)	9.9 (7)
Port-a-Pottie	---	47.9 (34)
Street	---	28.2 (20)
Nearby Business	---	22.5 (16)
Other	21.1 (15)	11.3 (8)

*Because respondents were able to select multiple answers, these percentages do not total 100%.

Drug Use

Although substance abuse is common among our respondents, it is not as prevalent as many stereotypes of skid row life may suggest. Slightly less than half of respondents (47.9 percent) report that they used either an illicit or a legal drug in the past 30 days. As can be seen in Table 16, the most common substance our respondents report using in the last month is alcohol (45.1 percent). A comparable percentage report to have used crack cocaine (43.7 percent) while slightly fewer report to have smoked marijuana (35.2 percent). Small numbers of respondents also report using more expensive drugs such as powder cocaine, opiates, sedatives, and heroin. As the table shows clearly, the drugs of choice among encampment residents differ slightly in the 2001 and 1993 samples. Alcohol use is much less common in the 2001 sample, while the use of crack and marijuana is much higher.

Table 16. Drug Use in Last 30 Days (frequencies in parentheses)*

<i>Drug</i>	<i>2001 (n=71)</i>	<i>1993 (n=134)</i>
Alcohol	45.1% (32)	72.4% (97)
Crack	43.7 (31)	29.9 (40)
Marijuana	35.2 (25)	26.1 (35)
Powder Cocaine	8.5 (6)	14.2 (19)
Opiates	4.2 (3)	4.5 (6)
Sedatives	2.8 (2)	5.2 (7)
Heroin	1.4 (1)	7.5 (10)
Crystal Meth	1.4 (1)	---

*Because respondents were able to select multiple answers, these percentages do not total 100%.

Drug Use and Age: Again, we were interested to see if there is any significant relationship between drug use and gender, age, or ethnicity. As with use of missions or shelters, drug use clearly varies by age. Table 17 displays the results from a cross-tabulation of crack use and age category. The results show that middle-aged respondents are more likely to have used crack in the last 30 days than younger or senior respondents. While 55.9 percent of respondents aged 41 to 50 reports having used crack, 28.6 percent of respondents 50 or older and 31.8 percent younger than 40 reported having used crack in the last 30 days.

Table 17. Cross-tabulation of Crack Use and Age Category (n=70, frequencies in parentheses)

<i>Used Crack in Last 30 Days</i>	<i>25-40 years of age</i>	<i>41 to 50 years of age</i>	<i>51 to 65 years of age</i>
Yes	31.8% (7)	55.9% (19)	28.6% (4)
No	68.1% (15)	44.1% (15)	71.4% (10)
TOTAL	100.0% (22)	100.0% (34)	100.0% (14)

Pearson's $\chi^2 = 4.417$, $p = 0.099$

Use and Access to Drug Treatment: As can be seen in Table 18, a small group of respondents (11.6 percent) have been in drug treatment in the last year. Disturbingly, a larger group (18.8 percent) reports that they tried but were unable to get drug treatment in the last 12 months. This group included one-third (10 of 30) respondents who report having used crack in the last 30 days. This finding, along with the static pattern of utilization and lack of access to drug treatment in the 2001 and 1993 samples, should raise serious concerns to policymakers and community based organizations about access issues for people with substance use problems who report that they are trying to become clean and sober.

Table 18. Drug Treatment (n=69)

<i>Have you been in drug treatment in the last 12 months?</i>	<i>2001 (n=69)</i>	<i>1993 (n=134)</i>
Yes	11.6% (8)	14.2% (19)
No	88.4 (61)	85.8 (115)
TOTAL	100.0 (69)	100.0 (134)
Have you been unable to get drug treatment in the last 12 months?		
Yes	18.8 (13)	22.4 (30)
No	81.2 (56)	77.6 (104)
TOTAL	100.0 (69)	100.0 (134)

Health

Health Status: As can be seen in Table 19, respondents report having varying health statuses, with most reporting to be in either good health (42.3 percent) or fair health (33.8 percent). A substantial proportion of respondents report to be in poor health (16.9 percent). However, only a very small proportion (7.0 percent) reports to be in excellent health. Although most respondents report to be in either good or fair health, a substantial number (42.3 percent) report having an ongoing health problem.

There is very little difference in the responses to health status questions from 1993 to 2001. If anything, there are slightly less self-identified healthy people on the streets in 2001 compared to 1993, with a much smaller percentage indicating "excellent" health status and a slightly higher percentage indicating a "fair" health status.

Table 19. Health Status (frequencies in parentheses)

<i>How would you describe your health status?</i>	2001 <i>(n=71)</i>	<i>1993</i> <i>(n=131)</i>
Excellent	7.0% (5)	22.9% (31)
Good	42.3 (30)	36.6 (48)
Fair	33.8 (24)	22.1 (29)
Poor	16.9 (12)	17.6 (23)
TOTAL	100.0 (71)	100.0 (131)
<i>Do you have any ongoing health problems?</i>		
Yes	42.3 (30)	34.3 (46)
No	57.7 (41)	65.7 (88)
TOTAL	100.0 (71)	100.0 (134)

Age and Health: Again, the only variable to demonstrate a significant relationship with health status is age. But, as we shall see below, gender is an important variable in looking at the prevalence of ongoing health problems of respondents. Table 20 shows the results from a cross-tabulation of health status and age category of respondents. These results show that older respondents, especially those 51 or older, are more likely to be in poor health. While only 4.5 percent of those aged 25 to 40 are in poor health, 17.6 percent of those between 41 and 50, and 35.7 percent of those 51 or older are in poor health.

Table 20. Cross-tabulation of Health Status and Age Category (n=70, frequencies in parentheses)

<i>Health Status</i>	<i>25-40 years of age</i>	<i>41 to 50 years of age</i>	<i>51 to 65 years of age</i>
Excellent	9.1% (2)	8.8% (3)	0.0% (0)
Good	54.5% (12)	47.1% (16)	14.3% (2)
Fair	31.8% (7)	26.5% (9)	50.0% (7)
Poor	4.5% (1)	17.6% (6)	35.7% (5)
TOTAL	100.0% (22)	100.0% (34)	100.0% (14)

Pearson's $\chi^2 = 11.299$, $p = 0.080$

Gender and Health: In addition to being somewhat older, respondents in poor health also tend to be female. Table 21 shows the results of a cross-tabulation of ongoing health problems and gender of respondents. While only 32.7 percent of males report having an ongoing health problem, 63.2 percent of females report having an ongoing health problem.

Table 21. Cross-tabulation of Ongoing Health Problems and Gender (n=68, frequencies in parentheses)

<i>Ongoing Health Problems</i>	<i>Male</i>	<i>Female</i>
Yes	32.7% (16)	63.2% (12)
No	67.3% (33)	36.8% (7)
TOTAL	100.0% (49)	100.0% (19)

Pearson's $\chi^2 = 6.629$, $p = 0.036$

Access to Health Care: Respondents were also asked whether or not a mobile medical clinic regularly visited their encampment. Slightly more than half of respondents (52.1 percent) report having access to a mobile health clinic.

However, the cross-tabulation of health status and access to a mobile health clinic presented in Table 22 suggests a dubious effect of such clinics on the health status of respondents. While a larger percentage of respondents with access to mobile health clinics report to be in excellent health (10.8 percent) than those without (3.3 percent), a larger percentage of those with access to mobile clinics report to be in poor health (24.3 percent) than those without access (10.0 percent). Although mobile health clinics undoubtedly provide critical health care services to skid row encampment residents, our results suggest that they more likely serve to increase residents' awareness about their health status rather than significantly improve them. This is more likely due to the difficulty in improving or maintaining health status for individuals living on the streets rather than any shortcoming of the mobile health clinics that serve residents of the skid row area.

Table 22 Cross-tabulation of Health Status and Access to a Mobile Health Clinic (n=67, frequencies in parentheses)

<i>Health Status</i>	<i>Mobile Health Clinic</i>	<i>No Mobile Health Clinic</i>
Excellent	10.8% (4)	3.3% (1)
Good	40.5% (15)	40.0% (12)
Fair	24.3% (9)	46.7% (14)
Poor	24.3% (9)	10.0% (3)
TOTAL	100.0% (30)	100.0% (37)

Pearson's $\chi^2 = 7.350$, $p = 0.007$

Barriers to Access to Health Care: Despite the demonstrated need for health care, many respondents display significant barriers to obtaining health care. A great majority of respondents do not have any form of health insurance (76.1 percent) including MediCal and veteran's health benefits. The lack of insurance and limited income were likely the key underlying factors causing a sizeable proportion of respondents (34.3 percent) to be unable to see a doctor despite the need to do so within the last year.

Table 23 displays survey responses on the length of time since respondents have received various forms of medical treatment. While many respondents report visiting a doctor or a dentist as recent as a day prior to the interview, many also respond that they have not received treatment in many years, suggesting a need to improve access to doctors and dentists. The mean time period since seen by a doctor is 10.5 months, while the mean time period since seen by a dentist is 3.5 years. Also, while many respondents report being tested for TB and/or AIDS as recently as the day prior to the interview, the mean time period since tested for TB (19.0 months) and AIDS (18.4 months) suggests a need to improve encampment residents' access to such tests.

Table 23. Time Since Last Had Medical Treatment

<i>Type of Treatment</i>	<i>Min.</i>	<i>Max.</i>	<i>Mean</i>
Saw by a Doctor (n=69)	1 day	8 years	10.5 months
Saw by a Dentist (n=68)	1 week	20 years	3.5 years
TB test	1 day	16 years	19.0 months
AIDS test	1 day	16 years	18.4 months

Seeing a Doctor: Respondents were also asked where they last visited a doctor. As indicated in Table 24, the most common response, both in 1993 and again in 2001, was the County Hospital (44.9 percent), followed by a free or community clinic (18.8 percent). A small percentage of respondents last saw a doctor at a mobile health clinic (10.1 percent). When considering the differences in usage of health care facilities in the two samples, it appears that the increased supply of free clinics and mobile units in downtown since 1993 has resulted in more reliance on these much needed facilities and slightly less reliance on the County Hospital. Since encampment residents often only seek aid at the County Hospital only when their health condition demands emergency attention, we hope that this finding reflects an increased access to preventative care.

Table 24. Where Last Saw a Doctor (frequencies in parentheses)

<i>Where did you last see a doctor?</i>	<i>2001 (n=69)</i>	<i>1993 (n=127)</i>
County Hospital	44.9% (31)	52.8% (67)
Free or Community Clinic	18.8 (13)	10.2 (13)
Mobile Unit	10.1 (7)	5.5 (7)
Clinic in Shelter	7.2 (5)	7.9 (10)
VA Clinic or Hospital	7.2 (5)	7.1 (9)
Private Doctor's Office	5.8 (4)	9.4 (12)
County Clinic	4.3 (3)	---
Other	1.4 (1)	3.1 (4)
TOTAL	100.0 (69)	100.0 (127)

PREFERENCES FOR AID

The general public, including many policymakers and elected officials, holds various stereotypes of encampment residents and the nature of their day-to-day lives—the most common image being of idleness, substance abuse, and disaffiliation. In the sections above, we presented survey data collected from skid row encampment residents that sharply contrast with these stereotypes. Our findings show that the great majority of respondents works and less than half of respondents use drugs. Additionally, the issue of encampment residents being “service resistant” has been called into question. In order to best inform policy measures addressed to this population, we decided to ask residents themselves what kinds of aid they think they would benefit from the most. These questions ranged on topics from the immediacy of street cleaning and emergency housing options to longer term housing alternatives.

Housing Options

Housing Preferences: We asked respondents to prioritize a variety of forms of housing. Overall, as shown in Tables 25 and 26, there appears to be no change in downtown encampment residents’ desire to live in permanent housing.

Table 25 displays the frequencies for each form of housing by whether it was a first, second, or third priority for respondents. These results show that respondents overwhelmingly prefer independent and self-sufficient housing arrangements. The great majority selected having their own room and a job (43.7 percent) or their own apartment or house (45.1 percent) as their first priority. No other form of housing was chosen as a first priority by more than 10 percent of respondents. Only 8.5 percent of respondents stated that their first housing priority is to stay in their current encampment, and only 1.4 percent of respondents reported that moving to a proposed open-air public campground is their first priority. Missions and shelters were not a first, second, nor third housing priority for the overwhelming majority of respondents (84.5 percent).

Table 25. Housing Priorities of Industrial Avenue Encampment Residents in 2001 (n=71, frequencies in parentheses)

<i>Form of Housing</i>	<i>First Priority</i>	<i>Second Priority</i>	<i>Third Priority</i>	<i>Not a Priority</i>
Own Room and Job	43.7% (31)	38.0% (27)	5.6% (4)	12.7% (9)
Own Apartment or House	45.1 (32)	43.7 (31)	4.2 (3)	7.0 (5)
Stay in Encampment	8.5 (6)	1.4 (1)	23.9 (17)	66.2 (47)
Open Air Public Campground	1.4 (1)	5.6 (4)	22.5 (16)	70.4 (50)
Mission or Shelter	0.0 (0)	2.8 (2)	12.7 (9)	84.5 (60)
Drug or Alcohol Treatment Facility	0.0 (0)	1.4 (1)	8.5 (6)	90.1 (64)
Other	0.0 (0)	4.2 (3)	18.3 (13)	77.5 (55)

Table 26. Housing Priorities of Downtown Encampment Residents in 1993 (n=134, frequencies in parentheses)

<i>Form of Housing</i>	<i>First Priority</i>	<i>Second Priority</i>	<i>Third Priority</i>	<i>Not a Priority</i>
Own Room and Job	75.4% (101)	10.4% (14)	5.2% (7)	9.0% (12)
Stay in Encampment	8.2 (11)	9.0 (12)	25.4 (34)	57.4 (77)
Open Air Public Campground	6.7 (9)	10.4 (14)	18.7 (25)	64.2 (86)
With Friends or Family	4.5 (6)	44.8 (60)	21.6 (28.9)	29.0 (39)
Drug or Alcohol Treatment Facility	3.0 (4)	8.2 (11)	10.4 (14)	78.4 (105)
Mission or Shelter	0.0 (0)	11.2 (15)	9.0 (12)	79.8 (107)
Other	0.0 (0)	2.2 (3)	1.5 (2)	96.3 (129)

Sheriff Baca's Proposed Open Air Encampment: We asked respondents what they would do if a proposed open-air public camp were to be developed on skid row. As can be seen in Table 27, a majority of respondents (67.6 percent) reported that they would go to the public camp given no change in their current access to transitional or permanent housing. Small groups of respondents said that they would remain in their current encampment (9.9 percent) or find a more hidden place to camp (9.9 percent) given a fear of arrest by police. We must keep this finding in perspective, however. As we saw in Table 25 above when we asked respondents to rank their housing responses, only a single respondent reported such a facility as a first housing priority. This clearly demonstrates the strong preference of encampment residents for permanent housing over a publicly funded campground.

Table 27. Action Taken if Open-Air Camp Facility is built on Skid Row (n=71)

<i>What would you do if an open-air camp facility were built on skid row?</i>	<i>Percentage*</i>	<i>Frequency</i>
Go to the Camp	67.6	48
Continue to Live in Current Encampment	9.9	7
Find More Hidden Place	9.9	7
Leave Los Angeles	2.8	2
Risk Arrest	2.8	2
Don't Know	14.1	10

*Because respondents were able to select multiple answers, these percentages do not total 100%.

City Ban on Industrial Avenue Encampment: While residence at Sheriff Baca's proposed site would be voluntary, we were interested to see what respondents would do if the City banned their encampment and threatened to penalize individuals that continued to camp on sidewalks in the area. As can be seen in Table 28, slightly less than half (49.3 percent) of respondents say they would go to a shelter if their encampment were banned. Surprisingly, substantial numbers of respondents report that they would resist such a measure by continuing to live in the encampment at the risk of arrest (18.3 percent), find a more hidden place to sleep (15.5 percent) or leave Los Angeles (7.1 percent). A sizeable group (21.1 percent) reports that they do not know what they would do if the City banned their encampment.

There are, however, differences in the responses from 2001 compared to 1993. The 2001 survey results show that a significantly greater percentage of that sample would go to a shelter and a smaller percentage would go to a more hidden place. The likely source of this shift in responses is the differences in the demographics of the 2001 respondents. Specifically, in 2001 there are more women and elderly, groups that are more vulnerable and hence more likely to turn to a shelter if their sidewalk encampment is banned.

Table 28. Action Taken if City Bans Encampment (frequencies in parentheses)*

<i>What would you do if the City bans your encampment?</i>	<i>1993 (n=134)</i>	<i>2001 (n=71)</i>
Go to a Shelter	24.6% (33)	49.3% (35)
Continue to Live in Encampment	20.9 (28)	18.3 (13)
Find More Hidden Place	26.8 (36)	15.5 (11)
Leave Los Angeles	9.0 (12)	7.1 (5)
Don't Know	5.2 (7)	21.1 (15)

*Because respondents were able to select multiple answers, these percentages do not total 100%.

Year-Round Indoor “Low Expectation” Shelter: In the absence of adequate employment services and independent housing and despite an expressed distaste for shelters, respondents report that they would stay in “cold/wet weather” shelters if they were expanded beyond their current 3.5 to 4 months time period (November-February) and made available year-round. Nearly three-fourths of the respondents (73.2 percent) report that they would stay in these barracks-style emergency facilities if they were available on a year-round basis. The openness to cold/wet weather shelters despite the distaste for shelters and missions demonstrated above is likely a result of the absence of the program restrictions and rules at cold/wet weather shelters that are felt by respondents to be common at most missions and shelters.

Differences by Age and Gender: The cross-tabulations with age category and gender, displayed in Tables 29 and 30, show that older and male respondents report the strongest desire to stay in cold/wet weather shelters. While 85.7 percent of those aged 51 to 65 and 79.4 percent of those aged 41 to 50 report that they would stay in the shelters if available, only 54.5 percent of respondents under 40 report that they would stay in the facilities. Additionally, while nearly 80 percent of male respondents respond that they would stay in cold/wet weather shelters, significantly fewer females (52.6 percent) report that they would use the facilities. This gender difference is likely due to a higher male openness to the dormitory and barracks-style arrangements common at the cold/wet weather shelters.

Table 29. Cross Tabulation of Stay in Cold Wet Weather Shelters if Year Round and Age Category (n=70, frequencies in parentheses)

<i>Stay in Cold Wet Weather Shelters if Year Round</i>	<i>25-40 years of age</i>	<i>41 to 50 years of age</i>	<i>51 to 65 years of age</i>	<i>TOTAL</i>
Yes	54.5% (12)	79.4% (28)	85.7% (12)	73.2% (52)
No	45.5% (10)	20.6% (7)	14.3% (2)	26.8% (19)
TOTAL	100.0% (22)	100.0% (35)	100.0% (14)	100.0% (71)

Pearson's Chi²= 5.693, Pr= 0.060

Table 30. Cross tabulation of Stay in Cold Wet Weather Shelters if Year Round by Gender (n=69, frequencies in parentheses)

<i>Stay in Cold Wet Weather Shelters if Year Round</i>	<i>Male</i>	<i>Female</i>
Yes	79.6% (39)	52.6% (10)
No	20.4% (10)	47.4% (9)
TOTAL	100% (49)	100% (19)

Pearson's $\chi^2 = 5.373$, Pr=0.068

General Relief Housing Voucher Program: We also asked respondents what action they would take if vouchers for housing (in hotels or shelters) were made available by the County through the General Relief program. Responses to this question also showed a preference for independent living arrangements over shelters. As can be seen in Table 31, more than half of respondents (55.7 percent) would use the voucher to stay in a hotel while only 15.7 percent would use the voucher to stay in a shelter. A small group of respondents (10 percent) report that they would prefer staying in their encampment than use the voucher; while slightly more respondents (15.7 percent) do not know what they would do if a voucher was made available.

Table 31. Action Taken if Housing Voucher Made Available Through GR Program (n=70)

<i>What would you do if a housing voucher were to be made available through the GR program?</i>	<i>Percentage</i>	<i>Frequency</i>
Use Voucher to Stay in Hotel	55.7	39
Use Voucher to Stay in Shelter	15.7	11
Stay in Encampment	10.0	7
Leave Los Angeles	2.8	2
Don't Know	15.7	11
TOTAL	100.0	70

Supportive Services: In addition to housing preferences and options, we asked respondents if they would participate in various types of supportive services if they were available. Our results, displayed in Table 32, demonstrate both an openness to aid as well as a preference for services that would lead to employment and self-sufficiency. The great majority (78.6 percent) reports they would like to participate in employment services and more than half (54.3 percent) report a desire for job training. A substantial number of respondents (25.7 percent) express a desire for outpatient drug or alcohol treatment and nearly a quarter (24.3 percent) report a need for mental health counseling. Respondents also express a desire for other supportive services such as residential drug or alcohol treatment (17.1 percent), shared housing (17.1 percent), and GED classes (12 percent).

Table 32. Supportive Services Desired (n=70)

<i>Supportive Service</i>	<i>Percentage*</i>	<i>Frequency</i>
Employment Services	78.6	55
Job Training	54.3	38
Out Patient Drug or Alcohol Treatment	25.7	18
Mental Health Counseling	24.3	17
Residential Drug or Alcohol Treatment	17.1	12
Shared Housing	17.1	12
GED Classes	10.0	7

*Because respondents were able to select multiple answers, these percentages do not total 100%.

Services and Gender: The distribution of respondents who would participate in employment services if offered by gender, displayed in Table 33, suggests that these services are somewhat more appealing to men than women in our sample. While 85.4 percent of males desire employment services, significantly fewer females (68.4 percent) desire these services. When considering the significantly higher prevalence of ongoing health problems among women demonstrated above, this finding suggests that this difference may be due to more women being physically unable to work rather than a stronger will to work among men in the encampment. It should be emphasized that despite a slight gender gap, a strong majority of female respondents report a desire to secure employment with the aid of employment services.

Table 33. Cross-tabulation of Participate in Employment Services if offered and Gender (n=67, frequencies in parentheses)

<i>Participate in Employment Services</i>	<i>Male</i>	<i>Female</i>
Yes	85.4% (41)	68.4% (13)
No	14.6% (7)	31.6% (6)
TOTAL	100.0% (48)	100.0% (19)

Pearson's $\chi^2 = 6.320$, Pr= 0.042

Street Cleaning: Among the most immediate issues facing residents of the sidewalks of skid row is that of street cleaning. We asked respondents about this topic specifically to help inform the options that Mayor Richard Riordan has considered in terms of frequency and other issues related to street cleaning.

As Table 34 demonstrates, nearly all respondents (95.8 percent) report that they would like the streets and sidewalks cleaned. Similarly, almost all respondents (93.8 percent) report that they would like the streets cleaned at a regular time during the day. Exactly half of respondents would like the streets and sidewalks cleaned twice per day. Nearly all respondents (94.3) report that they would like cans, brooms, and rakes to assist in cleaning up their area, reinforcing the finding reported above that encampment residents live in participatory and communal arrangements.

Table 34. Street Cleaning

<i>Do you want the streets and sidewalks cleaned? (n=71)</i>	<i>Percentage</i>	<i>Frequency</i>
Yes	95.8	68
No	4.2	3
TOTAL	100.0	71
<i>How many times per day? (n=64)</i>		
Once	32.8	21
Twice	50.0	32
More than twice	17.2	11
TOTAL	100.0	64
<i>Do you prefer that they be cleaned at a regular time during the day? (n=64)</i>		
Yes	93.8	60
No	6.3	4
TOTAL	100.0	64
<i>Would you like cans, brooms, and rakes to assist in cleaning up? (n=70)</i>		
Yes	94.3	66
No	5.7	4
TOTAL	100.0	70

Conclusion

In 2001, policymakers should heed the conclusion reached by Dr. Cousineau in 1993.

“The health and safety of the encampment residents notwithstanding, policymakers should exert considerable caution in formulating policies and programs to respond to urban encampments. Any efforts to dismantle camps such as police sweeps will likely result in people establishing new camps in other perhaps more secluded locations. Likewise, plans to dismantle and outlaw encampments and force people to go to shelters or government camps will at best have only a short term effect in reducing the number of urban encampments.

Many residents will not go to shelters or downtown missions fearing violence, or because they dislike rules and regulations... while many people said they would go to an urban safe zone or government camp, we believe that they would do so out of curiosity, desperation and in search of needed services. ”

Little has changed in eight years. As in 1993, the 2001 findings suggest that future efforts to assist skid row encampment residents should be designed to promote independent housing and self-sufficiency rather than a “shelterization” approach that serves to institutionalize people either indoors or outdoors. Given a choice, and despite mental health, substance use and other barriers, the vast majority of our respondents, want to have a life off of the sidewalk, in their own room and with their own job.

Policy Recommendations

1. Given that the overwhelming majority of respondents desire their own permanent housing and do not list a public camp as a housing preference, we recommend that Sheriff Baca's proposed Homeless Public Safety Center be reconsidered. We greatly appreciate the Sheriff's willingness to use the independence of his elected office to advocate for new solutions and services for homeless people. However, we suggest that the funds and energy Sheriff Baca proposes to dedicate to the creation of a public camp be transformed into solutions that emerge from an understanding of the needs and preferences of encampment residents in Los Angeles.

Targeted to: Los Angeles Sheriff Department, Sheriff Baca

2. The simplest and least costly alternative to the public campsite is to broaden the county's continuum of care by expanding the current cold/wet weather shelters to be year round, high tolerance, and low demand programs. These facilities must provide at least two healthy meals per day, as well as access to health care, mental health care, drug treatment, housing and employment search services, and job development programs, but not make willingness to participate in treatment or case management a condition for access. Non-profit organizations selected competitively and fairly by the Los Angeles Homeless Services Authority (LAHSA) and funded with federal, state, and local public funds should continue to be contracted to operate the programs county-wide.

Targeted to: Los Angeles Homeless Services Authority

3. There are clear requirements for shelters to have known grievance procedures. These requirements are in the contracts of service providers funded by the US Department of Housing and Urban Development (HUD) and LAHSA to provide rights to guests and residents and a procedure for exercising these rights and resolving disputes. These grievance procedures are little known, little used and should be advertised and enforced countywide to increase confidence in shelters.

Targeted to: Los Angeles Homeless Services Authority

4. The Sheriff and other civic leaders should press the Los Angeles County Board of Supervisors to enact reforms to the General Relief (GR) Program so that people participating in the program are not "dumped" into homeless encampments. Time limits on the receipt of GR benefits should be eliminated when participants are cooperating with program rules, homeless persons' access to benefits should be improved, application procedures simplified, and the benefit amount should be increased to a level that would better allow recipients to avoid homelessness.

The following reforms to the GR Program should be implemented:

- Raise the current GR cash benefit level from \$221 per month to its previous level of \$341 per month.
- Allow participants who fully participate in the program to receive month-to-month extension of their benefits past the five-month limit to enable them to complete job-training programs and find a job.
- Create a new classification for individuals eligible for GR but who do not fall neatly in the current “employable” and “unemployable” categories. An “administratively unemployable” classification would include those individuals who have not been screened out as mentally or physically unable to work, but are unable to compete for employment. A classification for this group would help steer them to vocational rehabilitation and training services and remove their barriers to employment or to be enrolled into the federal Social Security Insurance (SSI) program.
- Establish a GR housing subsidy program.
- Eliminate the “shared housing” penalty.
- Increase access of GR participants to domestic violence and substance abuse services.
- Develop and implement program components to meet the special needs of GR recipients over the age of 50.
- Create and implement an expanded and expedited program to enroll GR unemployables in the federal benefit program, Social Security Insurance (SSI).

Targeted to: Los Angeles County Board of Supervisors and the Los Angeles County Department of Public Social Services

5. The Sheriff is strongly encouraged to continue and expand his pioneering casework and placement services that stabilize and assist low-income people about to be released from jail. The expansion of these services will help limit the number of recently released persons who are in effect “dumped” in downtown without resources or supportive services.

Targeted to: Los Angeles County Sheriffs Department; Los Angeles County Department of Public Social Services; and the Los Angeles County Department of Mental Health

6. The Sheriff and other civic leaders should press the County Board of Supervisors to expand access to outpatient and residential drug counseling and mental health services. These services should be available on demand. Strategic investments in emergency, transitional, and permanent housing options for homeless women, including both single women and women with children should also be encouraged. These facilities need to be sited throughout the county and not concentrated in skid row.

Targeted to: Los Angeles Homeless Services Authority; Los Angeles County Department of Health; Los Angeles County Public Health Department, Los Angeles County Department of Mental Health; Los Angeles AIDS Program Office; Los Angeles Alcohol and Drug Abuse Administration

7. Los Angeles City, County and the Business Improvement Districts should hire formerly homeless and currently homeless people to form trained outreach teams on a countywide basis. A first priority should be given to convene a special meeting of all outreach programs in Central Los Angeles to develop a strategy of coordinating outreach efforts, regularly visiting urban encampments, and sharing best practices.

Targeted to: Los Angeles Homeless Services Authority; Business Improvement District Offices; Los Angeles County Department of Health; Los Angeles County Department of Public Health, Los Angeles County Department of Mental Health; Los Angeles AIDS Program Office; and Los Angeles Alcohol and Drug Abuse Administration

8. The street cleaning program in skid row should be expanded to twice a day at established times. This must be done without harassing homeless people. In addition, encampments should be given access to trashcans, trash bags, rakes, and gloves, so that they can keep their premises clean.

Targeted to: Los Angeles Mayor's Office, Los Angeles City Council; Los Angeles City Department of Public Works; and Los Angeles County Department of Transportation

Given that nearly 90 percent of the respondents in both 2001 and 1993 stated that their housing preference was a room, apartment or home of their own along with a job, we strongly recommend the following steps toward increasing the supply of and access to truly affordable housing in Los Angeles.

9. The newly elected Mayor and Los Angeles City Council should support and enact the *Housing Los Angeles* proposal for a \$100 Million Housing Trust Fund for the City of Los Angeles. This trust fund would allow the City to create affordable and subsidized multi-unit rental housing, as well as aggressively promote investments in affordable housing from the private and nonprofit sectors.

Targeted to: City of Los Angeles Mayor's Office and Los Angeles City Council

10. All community leaders and stakeholders should support and implement the Los Angeles Coalition to End Hunger & Homelessness' *Los Angeles Plan to End Homelessness*, a plan to end homelessness in the next decade. The "Plan" will be released September, 2001.

Targeted to: All locally elected public officials at the City, State and Federal level, as well as all public and private sector community leaders and stakeholders.

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