



Negotiating Freedoms: Women Experience Homelessness in Eugene, OR

Violet Fox*, Anthropology

ABSTRACT

This research includes a literature review, historical background and policy overview, as well as three interviews with women experiencing homelessness, and two interviews with shelter staff in Eugene, Oregon. The purpose of this research is to inquire into the unique nature of women's homelessness using feminist ethics and urban anthropological methods. Notable facets of existing research include postfeminist and neoliberal perspectives, issues in defining "homelessness," worthiness, mental health, domestic violence, and much more. This paper offers a place-based approach that is meant to lead to more specific and achievable local change for women in the Eugene homeless community. The findings include a rich and diverse array of stories that indicate the spectral nature of women's homelessness, as well as highlight flaws in the current bureaucratic structures which are meant to support women out of homelessness both locally, and nationally. Stories and experiences within this paper include themes of resistance, addiction, victimhood, and relationships. The conclusions and recommendations indicate the need for more transitional housing, "wet" shelters, prevention and intervention initiatives, and increased opportunities for healthy relationship and skill-building.

1. INTRODUCTION

Recent scholarship and federal counts of homelessness show that the number of homeless people has been steadily increasing since the 1980s. The growing class disparity has left working-class people increasingly vulnerable to homelessness, causing a previously unprecedented influx of women and their children being unhoused (Wright, 1989). Research from Europe, Canada, and large U.S. cities shows the insecurities that women face living on the streets are different than men's, and in the last 10-20 years, frameworks have emerged to better understand their lives (Koegel, 1986; Savage, 2016; Gonyea, 2017). Oregon, however, has one of the largest homeless counts in the United States, currently ranking fourth in the nation in unsheltered people, yet, despite this, has little to no targeted qualitative or ethnographic research on women.

Women's unique social vulnerabilities and responsibilities make their experiences an important

*Violet Fox graduated from the University of Oregon in June 2019 with a B.S. in cultural anthropology with minors in queer studies and ethics. She is currently considering a masters course at the University of Sussex in Gender, Violence, and Conflict, and will later be applying to New York University for a doctorate in Anthropology. Outside of academics, Violet is an avid artist, backpacker, and skier with a love for science fiction and cats. Please direct correspondence to vfox@uoregon.edu.

site of study in order to understand the causes of homelessness, as well as to offer pragmatic solutions, which is why I have chosen to look into the particularities of women's homelessness in Eugene, OR.

Why should women be prioritized in the study of homeless people? Contemporary feminist thought implores us to consider the most vulnerable women in society as a priority for radical action.¹ The idea is that all people will be free once the most oppressed have been liberated. Homeless women occupy the intersection of extreme poverty and womanhood, which contains themes of violence, trauma, lack of education, vulnerability, and dehumanization. In the 1990 study, *Homeless Women and Men: Their Problems and Use of Services*, researchers Benda and Dattalo found that homeless women are considerably more likely to blame themselves for their situation as opposed to men who blame external factors. A lifetime of sexist indoctrination from society undermines women's ability to feel competent and capable, which puts them in a position of passivity when coping with trauma and high-stress events (Benda & Dattalo, 1990). The difference in opportunities between men and women makes it so that women have less access to well-paying jobs and/or education, and with the responsibilities of child-rearing, they are more likely to lose even those routes out of poverty (Benda & Dattalo, 1990). In lower-paying jobs with little to no higher education, women not only have no ability to secure childcare for their work hours, but they are also more easily taken advantage of, or let go and replaced. In instances of domestic violence or addiction, women are often punished more harshly by family members, friends, and jurisdiction decisions than men due to social expectations of women to be passive, innocent, and "good mothers" (Benda & Dattalo, 1990). It is not hard to see how homeless women are positioned precariously and in need of direct intervention and prevention initiatives.

This research is relevant to our current socio-economic climate as working-class Americans have become increasingly exposed to homelessness through rising housing costs and stagnating wages. For example, in the last year, the government shutdown under the Trump Administration put around 800,000 federal employees out of work or working without pay, making thousands increasingly vulnerable to homelessness. On top of that, tens of thousands of people working for federal contractors were out of work as well (Kaufman, 2019). As working-class people experience homelessness and (hopefully) successfully emerge out of it, our society needs to be held accountable for understanding the reasons and conditions in which they experienced being unhoused. Women, with their multitude of socially imposed responsibilities and barriers to success, are central in the mission to eliminate unsheltered homelessness. I chose to title this research "Negotiating Freedoms" because that is exactly what women must do to navigate different systems of oppression in both housed and unhoused worlds.² Having a roof over your head and living outside each bring different sets of compromises and sacrifices for women that constrain their ability to act autonomously.

My research includes a) an examination of the current climate and policy surrounding homelessness drawing from government publications, news articles, and an extensive literature review; and b) original ethnographic material from the Eugene Mission Women's Center, including interviews with three shelter personnel in Eugene, Oregon. This research was conducted for three main reasons: to explore women's experiences of homelessness in Eugene, elaborate on any patterns

found within the data in an effort to supplement existing policy and/or contribute to future research and legislative action, and inform the public and destigmatize women living in shelters and on the streets.

The following section provides a brief summary of history and policy surrounding homelessness in the United States, Oregon, and Lane County, followed by an in-depth literature review covering neoliberalism and postfeminism, definitions of “homelessness,” the “hidden homeless,” worthy vs. unworthy homeless, domestic violence, gender performance, shelter life, mental illness, and relationships. Then, after a methods overview, the body of the paper includes the following sections: “The Eugene Mission” contains a description of the shelter I volunteered at to conduct this research as well as a discussion of the Women’s Center and its various rules; “Findings” looks at the different subgroups of women that emerged from a large shelter environment and examines what is advantageous about these separations; and the sections “Conclusions” and “Recommendations” summarize the findings and contain some informal policy recommendations.

1.1. HISTORY AND POLICY

THE UNITED STATES:

In the 1970s and ‘80s, a new homeless population appeared on the streets that did not consist of the typical lone adult male working through addiction and/or mental illness. In a study of 12 large US cities, low income and emergency housing dropped 30% from 1970 to 1980, and during that same time, the population of homeless or at-risk homeless increased 36% (Wright, 1989). Theories about the mass defunding and deinstitutionalization of permanent mental health facilities permeated the attitudes on homelessness, as many ex-patients were released to the streets with nowhere to go. In reality, however, only about 30% of the homeless population deals with severe chronic mental illness. As the ‘90s rolled around, the number of unhoused women and families increased, and the average age of these women dropped as people in their 30s started becoming homeless, which many scholars contribute to drug use (Golden, 1992). In 1960 homeless women were less than 3% of the total population, then 25% in 1980, and around 30% in 1990. From 1981-89, Reagan-era politics painted a picture of homelessness as an avoidable choice and something unhoused people would leverage in order to take advantage of welfare programs without having to work (Wright, 1989). These sentiments then informed policy and consequently made life much more difficult for homeless folks. Economics scholars have since shown that the severity of homelessness is dictated by housing affordability and rent increases, *not* personal dysfunction. That is not to say personal circumstance does not play an important role, but rather that it is not typically the driving factor.³ In Wright’s study conducted in Chicago in 1990, the number of people who could become unhoused at any moment was about 50,000, whereas those who were literally homeless was around 3,000. For perspective, as of 2018, Eugene had around 1,600 homeless folks, which is just over half the count for the city of Chicago in the 1990 census. Now Chicago reports around 5,400 homeless but estimates the actual number of people living in housing insecurity is more like 80,000 (Olumhense, 2018). This comparison exemplifies how previous systems for estimating homeless counts are inaccurate if the goal is homelessness prevention. If prevention were more in the forefront, the estimates concerning at-risk population would be more alarming, and the counting

system would include those who are housing insecure but not necessarily living on the street.

After such an unprecedented increase in homelessness, the '90s brought on a policy shift from "recovery first" to "Housing First" initiatives, which were characterized by the prioritization of providing housing over providing mental health treatment. This stimulated an increase in affordable housing units that would be made available for low-income adults and families to get them housed quickly, and this model has been called "rapid rehousing." In 2007, right at the beginning of the Great Recession, the Department of Housing and Urban Development (HUD) created the Point in Time count (PIT), which is a volunteer-based count of the unhoused population in an attempt to generate a number of all the people in emergency shelters, transitional housing, safe havens, as well as on the sidewalks, under bridges, abandoned buildings, camping, or any other places deemed "not meant for human habitation" (End Homelessness Organization, 2019). This count is conducted on one night in January each year, and many homelessness organizations consider it to be largely unrepresentative of the actual amount of people experiencing homelessness, as it completely misses people living doubled up, in the homes of friends and family, or in any other, less obvious living situation.⁴ PIT counts produce many challenges as counting methods change between regions, and they are typically low and miss hard-to-find populations (as mentioned before); they rely on unverified self-reporting, and language barriers often prevent full accuracy. Keeping this information in mind, from 2007 to 2018, the total number of homeless people nationally has decreased from 647,258 to 552,830, which is approximately a 100,000-person difference. It is impossible to know the full accuracy of these counts, but they show averages over time and attempt to track states, cities, regions, and counties to look at what areas are fluctuating in what ways, which ideally sets up policymakers to enact targeted prevention and remediation legislature.

Currently, the 10 states with the highest counts are California, New York, Florida, Texas, Washington, Massachusetts, Oregon, Pennsylvania, Colorado, and Illinois. Combined, these states make up 67% of the nation's total homeless population. Nationally, close to 39% are women, and while white Americans are the largest racial group at around 50%, Black and Native American people are grossly overrepresented in PIT counts when comparing their proportion to the general population. Women experiencing homelessness increased by three percent in the last year compared to one percent of men, which was broken down into a two percent increase in shelters and four percent unsheltered. It is also important to note that there was a staggering 22% increase in trans people experiencing homelessness in the last year, albeit not something that is investigated in this research. New York, Hawaii, Oregon, California, and the District of Columbia have the highest rates of homelessness (which is measured differently from the PIT count) and unsurprisingly, some of the highest housing costs in the country as well.

OREGON:

Looking at national averages and numbers on homelessness is a helpful tool to gauge the larger climate surrounding unhoused people, but it does not tell the entire story. When we take a closer look at the numbers, it is clear that while the national count is going down steadily, individual states show an alternative trajectory of growth. According to the 2018 HUD PIT report, Oregon is second

only to California for having over half the overall homeless population being unsheltered at 61.7%, and it has had one of the largest increases in homeless since 2007 (12.8%), and even in the last year (6.8%). This puts Oregon in the top five states for the highest unsheltered count, the highest rate of homelessness, the highest increase in the last 10 years, as well as the highest increase in the last year.

Within those percentages is a plethora of demographic information that parses out which populations are impacted by homelessness the most. HUD primarily looks at families with children, individuals, veterans, unaccompanied youth,⁵ and chronically homeless folks. If we take a look at the demographics captured in *this* report, we see that out of the unsheltered population, Oregon has the highest rate for families in the nation (54%) and is third for unaccompanied youth overall (53%). Additionally, Oregon has experienced one of the largest increases in chronic homelessness (28.6%) in the last year, as well as in the last 10 years (41.9%), putting it in the top four states. However, the rates of homelessness fluctuate from year to year, and while Oregon has had consistent overall increases, there are also statistics that indicate the rates have gone down. For example, from 2010 to 2018, the overall rate of homelessness in Oregon decreased by 25.7%. Fortunately, homelessness counts have declined since the Great Recession generally, but in the last four years, unsheltered and chronicity numbers have increased.

EUGENE:

With almost double the percentage of unsheltered homeless compared to the Portland area (69% of the homeless are unsheltered in Portland and 39% in Eugene), Eugene has a tense relationship to homelessness, as residents, business owners, policymakers, and homeless folks each have a different stance on what should be made the priority in getting people housed. A recent protest by homeless people camping out downtown shook Eugene as it came in response to a federal appeals court ruling that the criminalization of people sleeping or camping in public when they have nowhere else to live violates the 8th Amendment of the U.S. Constitution (Badger, 2015). However, the city of Eugene fines homeless people instead of jailing them and maintains that this does not fall under true “criminalization” and that they are, therefore, not violating federal law. A Register-Guard article by Christian Hill, in October 2018, covered the potential lawsuit that was forming in retaliation to the fining. One Eugene resident said, “The bums have more rights than the business owners,” and that city leaders were fostering a “no-responsibility community” by making extra accommodations for the homeless (Hill, 2018). In March of 2017, Oregon Business ran an article stating that the homeless population downtown is “killing businesses,” mentioning the dog ban that the city of Eugene had passed, which has been routinely critiqued as a backhand attempt to ban homeless folks (Buskirk, 2017). The idea that homeless folks have essentially ruined downtown is not an uncommon perspective from Eugene residents. The evidence for this can be found in both the comments section of the above-cited news articles, as well as everyday casual conversation concerning the downtown strip. It has been additionally exacerbated by the fact that approximately 130 people per month are becoming newly homeless in Lane County. The county’s poverty rate compared to other regions and the national average is unusually high, as shown in the below table:

TABLE 3: ESTIMATED POVERTY RATES, U.S. CENSUS

Geographic Area	Poverty Rate
Lane County	18.3%
United States	12.7%
State of Oregon	13.3%
Marion County, OR	13.6%
Multnomah County, OR	14.2%
Portland, OR	16.9%

This table was created by the Technical Assistance Collaborative (TAC), a Boston-based consultant company, which assembled a report through documenting homelessness and formulating potential solutions for the county. The 2018 report noted the complete lack of low-barrier shelter beds as well as the fact that 43% of the people on housing waitlists are bumped off due to high demand. Additionally, even if they receive permanent housing, 20% of these people return to the streets within two years. The 2018 TAC report contains 10 recommendations for both Lane County and Eugene city leaders,⁶ which is estimated to cost tens of millions of dollars of public funds to implement (Hill, 2019). They consider this cost acceptable as it is considered an investment away from all the public spending currently allocated for emergency homeless services.

One of the key systems in evaluating and servicing the homeless in Lane County is the VI-SPDAT, which stands for Vulnerability Index - Service Prioritization Decision Assistance Tool. It is the scoring system that measures the vulnerability of homeless individuals and families and translates this into their ranking in the housing waitlist. The higher their vulnerability score, the higher they are on the housing waitlist. The score ranges from 1-16, and the client receives more points for the number of years they've been living outside uninterrupted as well as for factors like disability and trauma.

Out of the three interviews I had with shelter personnel in Eugene, the use of the VI-SPDAT came up as a site of contention in all of them. At ShelterCare, a local program for homeless folks that helps them find permanent housing, I spoke to the Assistant Program Manager, Risa Holden, about the Coordinated Entry Process.⁷ This is when nonprofits serve as Front Door Assessors, which is a title for organizations that score homeless individuals and families upon entry to services. Then, they are appropriately sorted into the centralized housing waitlist according to said score, and finally, they are referred out to a housing program.

However, this process belies a tremendous service gap. Housing programs pull from the top of the centralized waitlist, and according to the previously mentioned score criteria, the majority of the highest scoring people are single adult men. This is in part because $\frac{2}{3}$ of the homeless population are men, but it also indicates a disconnect in gendered experiences of homelessness. It is men that

are the most likely to be living outside for years on end, and it is men that are most likely to be veterans with brain trauma and physical disabilities, and therefore, it is men that tend to be at the top of this waitlist. Women more readily stay with family and friends, drug dealers, abusive partners, etc., or sleep in their cars to avoid living in the streets, making them less likely to score highly on something like the VI-SPDAT (Paradis, 2009; Klodawsky, 2006; Mayock, Bretherton, & Baptista, 2016; Savage, 2016; Bretherton, 2017). Another facet of this conundrum is that if someone is situationally homeless and has found themselves on the street for the first time, the system is set up in such a way that they may never make it onto the centralized housing waitlist. For instance, if a single mother and her two children just became homeless after the death of the earning partner, they may never qualify for the housing waitlist as opposed to a single, disabled man who's lived outside for 25 years. This does not mean that people who have been living outside for 25 years are less deserving than someone who is newly unhoused, but it reveals a flaw in the system that systematically under-prioritizes situationally homeless folks.

Ultimately, there is an incredible amount of policy information from the federal to city levels that involve highly complex bureaucratic loopholes, formulas, strategies, and barriers. For the purposes of this paper, I cannot address all of them but hope to have included the most relevant and pressing policy concerns in a summarized format that indicates some of the legislative webbing homeless folks must navigate through to gain resource access.

2. LITERATURE REVIEW

NEOLIBERALISM AND POSTFEMINISM:

Neoliberal and postfeminist perspectives are fairly common points of consideration in the contemporary literature on women's homelessness in American and European contexts.

Neoliberalism as a framework for government and society considers power to be attainable through individual choices, as opposed to structural ones, putting an enormous amount of pressure on the single subject. Postfeminist thought implies that, after the 1970s, the major goals of feminist action have already been addressed; therefore, sexism or gender-based discrimination is not a widespread societal concern anymore. These ideologies ultimately impact women experiencing homelessness negatively and do not allow them to consider their situations as multi-faceted structural failures that have left them in positions of heightened vulnerability. A considerable number of the women researched experienced their homelessness as an individual defeat, which renders the "structural foundation of homelessness invisible" (Watson, 2016, p. 257). Notions of neoliberal individuality paired with concepts coming from postfeminism position the single woman's "ability to choose" as a remedy to gender-based discrimination and victimhood. This leaves women with the idea that they are ultimately responsible for what happens to them and should be able to avoid the subject position of "victim" (Watson, 2016; Gonyea, 2017).

Unfortunately, a framework of this kind posits victimhood *against* narratives of success and thus contributes to the ignorance of the highly complex negotiations within intimate relationships in which homeless women necessarily engage. Existing oppressive power structures play an enormous

role in their journey in and through homelessness, but due to the indoctrination of neoliberal individuality and postfeminist discourse, the women often adopt and internalize these ideas, causing them to blame themselves and their peers for being homeless on account of laziness and irresponsibility. This is a perspective that the general population tends to adopt as well. Even problems such as domestic violence, substance abuse, and mental illness are considered avoidable and symptomatic of individual dysfunction (Gonyea, 2017).

Welfare services are additionally critiqued by neoliberal agendas that argue “handouts” de-incentivize those receiving them to contribute to the capitalist economy (Ralston, 1996). In a five-year study with 20 interviews, Ralston (1996) found that taxes that fund welfare programs are thought to punish those who should be rewarded for their compliance with capitalist economic growth and reward those with little value or initiative in society. Ralston does, however, note that many homeless women agree with neoliberal critiques of the welfare state in that it not only pays better (with benefits such as health care) than some jobs, making it an attractive alternative to working, but also allows the government to police and control people’s individual choice—such as with food stamp restrictions, time monitoring, childcare, etc. Therefore, the relationship between women experiencing homelessness and welfare is complicated in the sense that many women have internalized neoliberal beliefs about who deserves help from the government and who does not. The women in Ralston’s 1996 study seemed to simultaneously express the need for more access to resource support (disability payments, housing vouchers, etc.) as well as resentment towards homeless peers who appeared lazy or unmotivated.

DEFINING “HOMELESSNESS”:

One of the main challenges found in literature about homelessness was the changing definition of the term “homeless” over time. James D. Wright notes in his 1989 book, *Address Unknown: The Homeless in America*, that homelessness cannot be properly understood by any one definition or example; therefore, it should be determined by the ability to choose one’s housing situation. In other words, do they have any other options besides their current environment? If someone is renting a motel room three out of four weeks of the month and then the fourth week is spent in a shelter, are they homeless? What if they are living in an abandoned building or their car? Or, most common among women, what if they have been moving from house to house between friends and family and have never actually been on the street? Wright (1989) posits that the majority of people that are homeless are periodically so, and they move into more or less stable housing for a while, only to end up in unstable situations again.

The bulk of the research on homelessness was done from the late ‘80s to the mid ‘90s, and people who were experiencing this kind of periodic flux of unstable housing became referred to as “episodically homeless,” meaning they were not able to secure permanent stable housing and drifted in and out of homelessness (Brown & Ziefert, 1990). The other two categories that developed around this time were “chronically homeless” and “situationally homeless,” which is also occasionally called “transitionally homeless”⁸ (Savage, 2016). Chronic homelessness is sometimes characterized as being without a permanent home for over a year or having experienced at least four episodes of homelessness in the last three years where the combined length of time homeless in those occasions

is at least 12 months. In a 1990 article, *A Feminist Approach to Working with Homeless Women*, researchers Brown and Ziefert found that most chronically homeless women had trouble with the basic elements of participating in the housed world. Lease agreements, paying rent and bills on time, housework and maintenance, application processes, rental history, etc. were all foreign and taxing responsibilities that could rarely be managed independently due to learned street-adaptive behaviors. These behaviors might include unwillingness to commit, distrust, aggression, and difficulty with regular communication.

Chronically homeless women were found to be highly distrustful of others from past exposure to violence or trauma of some sort, paired with a long history of relationship loss⁹ (Brown & Ziefert, 1990). Episodic homelessness is differentiated from chronic homelessness by the desire to find and secure housing, as well as a general competence in the shelter system and other social services. However, these episodically homeless women are often still living with mental illness, addiction, and behavioral volatility. They may struggle with independent living as these facets of their lives are strong factors in their housing instability. This is in contrast to those who are situationally homeless, who find themselves out of housing due to an acute crisis such as loss of a partner, sudden unemployment, or perhaps an expensive medical emergency. It is usually their first time being unhoused, and often they just need to find affordable housing quickly. Situationally homeless women typically come to shelters after exhausting all other outlets (car sleeping, friend or family homes, motels), and they are the most receptive to social services and housing programs as their housing situation usually stabilizes after a quick and early intervention (Brown & Ziefert, 1990; Savage, 2016).

Interestingly, there has also been some discussion about shifting the terminology from “homeless” to “houseless,” as the emotional and psychological implications of being without a “home” may feel inaccurate to people who have created homes in non-traditional spaces such as camps, cars, shelters, or the streets (Savage, 2016). This language shift particularly affects women experiencing homelessness as their gendered relationship to the word and concept of “home” is highly complex and deep-rooted. Ultimately, there is a lot of material to research in the formation of language around homelessness, houselessness, or even “rooflessness,” as some have coined it, as none of these terms are without certain connotations and social meanings. For the purpose of this paper, I will primarily be using “homelessness” as that is how the women I have worked with refer to their situation. However, the consequences of such an unclear system is that we encounter a categorical issue where there are no truly accurate counts of homelessness due to these differing definitions and boundaries, which disproportionately impact women due to their being, what many scholars have called, the “hidden homeless” (Savage, 2016).

WOMEN ARE THE “HIDDEN HOMELESS”:

The aforementioned definitions of homelessness have historically been so restrictive that they exclusively meant literally not having a roof over your head. These criteria made women’s homelessness “invisible” as women are at a much higher likelihood to experience inadequate or insecure housing as opposed to solitary street-living due to their socio-cultural positionality (Paradis, 2009; Klodawsky, 2006; Mayock, Bretherton, & Baptista, 2016). Contemporarily, there is

a greater understanding of insecure housing, but much of the research available is from the '90s, which uses the limiting definitions. Whereas homeless men are often pictured as failed men and given less compassion or "hand-outs" on account of their situations, homeless women are viewed as being more vulnerable and victimized; therefore, they often find themselves in and out of shelters, as well as the homes of friends and family (Savage, 2016; Bretherton, 2017). A topic of great interest in the late 1980s and '90s was the underrepresentation of women on the streets. At the time, many researchers writing on the topic wondered why there were fewer homeless women than men when women were statistically making less money through their jobs and were poorer overall than men. What they discovered was that women are much more likely to find, and secure familial and community support when faced with homelessness before ending up on the streets, thus making them more "hidden" (Klodawsky, 2006; Mayock, Bretherton, & Baptista, 2016).

It was in the 1950s and '60s when "hidden homeless" became a term associated with homeless women, as the socioeconomic realities women faced at the time were stark. This is because women usually had little to no education or job training beyond domestic work, and they were unlikely to remarry after losing a partner, which at the time may land them in rough waters if they did not have family to take them in. In the mid-1970s rapid deinstitutionalization set in as mental hospitals and permanent care facilities started shutting down,¹⁰ and in the '80s came the influx of younger, single mothers becoming homeless in tandem with the War on Drugs¹¹ and the surge in crack cocaine usage and access to prescription drugs (Golden, 1992). Golden (1992) notes in her book *The women outside: Meanings and myths of homelessness*:

The breakdown of our two permanent systems of care- that is, of the stability and permanence of marriage and of the state hospital system- by creating such numbers of visible homeless women, betokens real structural flaws in a society where the childish dependency of women has its complement in the parental authority of men. (p. 187)

Drawing on four years of experience in a shelter, Golden (1992) found that women were far more likely than men to seek out, and exhaust, informal supports (partners, friends, and family) before seeking formal support systems such as welfare services. This is supported over 20 years later in *Reconsidering Gender in Homelessness*, a study from the United Kingdom, in which researcher Joanne Bretherton (2017) examines gender and agency in the homeless world. She speculates that exhausting all social resources over living outside is a choice that arises out of complex negotiations, such as trying to avoid the possibility of children being taken away and occurrences of violence and sexual assault on the street or in shelters. However, as the above quote from Golden (1992) insinuates, women's historic struggle to contact welfare resources also indicates a toxic passivity that immobilizes more dependent women. In some ways one could say that women "benefit" from their social standing as passive or weak subjects in this case, but as Bretherton (2017) states in *Reconsidering Gender in Homelessness*:

The idea here is that women are seen as non-threatening and are more likely to be perceived as victims in need of support due to cultural constructions of women as more 'vulnerable' than men. Also within this of course, is the possibility that sexual exploitation can be used to barter for somewhere to sleep. (p. 8)

Sexual currency, or the body as currency, is a frequent theme of discussion in the literature on not only women's homelessness, but also between homeless women themselves. It was not uncommon to hear women discussing prostitution or strategic sexual relationships at the Mission as they recounted experiences or discussed other women they knew. Although trading sexual acts for a roof over their head can at once protect women from the unknown dangers of the street, it can also open a door for cycles of domestic violence to occur. This will be analyzed at length in the *Domestic Violence*, and *The Sexual Subject* sections of this literature review.

WORTHY VS UNWORTHY HOMELESS WOMEN:

In studies that involved popular understandings of homeless women, the framework of worthy versus unworthy homeless people came up frequently. Different criteria emerged through the neoliberal lens concerning who was deserving of government assistance, petty cash, or welfare benefits of any kind; unsurprisingly, homeless women with children figured prominently in this discussion. Meabh Savage found in her 2016 study, *Gendering Women's Homelessness*, that homeless mothers were divided into "deserving" and "undeserving" based on whether they still had custody of their children. Homeless women that had been separated from their children felt judged and that they were not "good mothers" because they could not keep their children with them; conversely, homeless women accompanied by their children felt powerless as a parent from keeping their children out of homelessness. These kinds of social stigmas and double-binds that surround motherhood often motivated women to stay out of welfare systems for fear of losing their children and incurring judgment on their ability to parent (Savage, 2016).

Wright (1989) found that housed people considered *worthy* homeless to be children, lone women, families, elderly, physically and/or mentally disabled people, veterans, and homeless people with jobs that were trying to help themselves. *Unworthy* homeless people were single, middle-aged men, addicts, and people that are not looking for work or taking visible steps to try and help themselves. Further, Wright noted that this "unworthy" homeless person only matched up with about 1 in 20 homeless people. The idea that there are all these homeless people out there that have chosen to become isolated and unhoused and are not looking to improve their situation is absurd, and the roots of this idea can be found in the era of the previously mentioned War on Drugs¹² and the myth of the "Welfare Queen," who gets rich off government assistance checks. What we then see is the enforcement of neoliberal, individualistic values on people who have been let down by numerous structural failures in society. Hopper (1998) states in his article *More than passing strange: Homelessness and mental illness in New York City* that:

...what is arguably the most intriguing thing about the social response to homelessness [is] the degree to which it has consistently embodied the tension between providing sanctuary for the helpless and disciplining the unruly. (p. 163)

This dynamic has been shown again and again in research on shelters, as staff police the homeless on moral grounds, almost as if punishing them for being unhoused (Koegel, 1986). Ironically enough, as Paradis (2009) points out, "the status of 'deserving' is contingent on accepting a label of incapacity," which creates yet another double-bind where the homeless person is put in a situation

of having to perform or prove certain levels of disability to receive benefits, only to be socially disciplined for this and realize those same benefits still keep them under the poverty line (p. 160).

DOMESTIC VIOLENCE:

Unfortunately, a unanimous finding is that massive amounts of women experiencing homelessness have been victims of domestic violence and often childhood sexual violence. As the culture changed around women's rights with more women entering the workplace after the 1970s and 80s, and awareness grew around the Battered Women's Movement,¹³ a flood of women found themselves escaping abusive partnerships and fleeing to either domestic violence-specific shelters or all-encompassing women's homeless shelters. In a study conducted in 2012, with around 430 sheltered homeless women in Los Angeles, Harold Green found that abuse in adolescence leads to women forming risky social networks later that contained less stable support people. These "risky networks," combined with other factors associated with homelessness, such as poverty or mental illness, made them much more vulnerable to losing secure housing. Another important finding was that intimate partner violence¹⁴ and drug use are both often resultant of experiencing childhood abuse, and that those risky social networks that women made as adults replicated toxic relationships from their childhoods (Green et al., 2012). Historically, however, homeless women experiencing intimate partner violence are barred from battered women's shelters. This has tragic irony as domestic violence is one of the leading causes of homelessness for women; therefore, to refuse shelter to this population is antithetical to supporting survivors (Green, 1991). This point is reiterated by Savage (2016) when she states the:

...lack of support led some homeless women to return to abusive relationships from where they subsequently re-emerged into homelessness again, and were separated from their children, who were placed in the care of the state (p. 45).

This kind of cyclic relationship trauma has proven to be unique to the position of episodically homeless women, where domestic violence, motherhood, and childhood abuse intersect and prevent women from being able to form secure and healthy attachments.

Juliet Watson's 2016 article *Gender-based Violence and Young Homeless Women: Femininity, Embodiment and Vicarious Physical Capital* employs Pierre Bourdieu's framework of social capital to the complex, intersubjective negotiations homeless women engage in to protect themselves, calling it "vicarious physical capital." Watson (2016) explains that vicarious physical capital captures the phenomenon of women leveraging the value of male bodies that can be "transferred to female bodies symbolically through intimate relationships," thus obtaining a less vulnerable position (p. 257). However, it becomes a precarious trade-off where the protection gained from the intimate male(s) is only available for as long as the relationship is maintained, requiring the women to sacrifice their dignity, safety, and security in other ways. She states:

...intimate relationships that involved vicarious physical capital were marked by instability and could be a source of violence. They also undermined access to other resources such as stable accommodation and support from friends and family. Despite this, as this

study revealed, even a relationship that involved intimate partner violence could be perceived as a viable context-specific option to manage the external violence of homelessness (Watson, 2016, p. 257).

What emerges from this study is the fact that women experiencing homelessness are forced to navigate street dangers and social attachments to men through a variety of contextual strategies that both expose and protect women from certain kinds of violence. This becomes particularly relevant in the following section as traditionally, women who use their bodies as currency and leverage their sexuality in interpersonal relationships have been considered exclusively in terms of oppression and victimhood. Alternatively, these findings complicate the idea that women are passive participants in their struggles, instead suggesting that there is a sizeable amount of empowered decision-making in the series of measures, strategies, and sacrifices that are made to protect themselves.

THE SEXUAL SUBJECT AND GENDER PERFORMANCE:

For women experiencing homelessness, it does not take long for them to intuitively realize that they must perform gender in highly strategic ways that the housed population does not experience on a day-to-day basis. Much of the earlier research had investments in providing ways for homeless women to feel more feminine as a method of improving their lives by helping them feel more “normal” (Koegel, 1986). This is certainly an important facet of homelessness research concerning women, but many women experiencing homeless that I spoke with were not interested in discussing gender performativity and their expressions of femininity (or masculinity) in straightforward terms. Rather, the women consider gender performance in relation to their techniques of avoiding dangers of the street and navigating the disciplining bureaucracy of social services. Gender performance becomes a central tool for women in making their way through dangerous situations on the street and in shelters, but also through interactions with welfare agents and law enforcement (Passaro, 1996; Golden, 1990; Paradis, 2009; Watson, 2016). What emerges is a system where women dress as men, and “make themselves as undesirable as possible” in order to survive the streets, which is then juxtaposed by the elaborate performance of femininity to gain access to increased services (Passaro, 1996, p. 11). Support organizations, whether governmental or religious, police gender by withholding resources and aid to those women who do not conform to dominant feminine ideals. This is exemplified by restrictions on things such as volume when talking and laughing, swearing, sexual content of conversations, parenting choices, and visitations from men. If the women do not abide by the rules to act, look, and behave as women are supposed to, they may be made to leave a shelter (Passaro, 1996).

The fact that gender-based violence, poverty, and social exclusion affect homeless women so strongly proves their exposure to circumstances in which their survival could be obstructed or furthered through gender performance (Watson, 2016, p. 262). By living on the margins of society, the dangers of uncontrolled female sexuality become increasingly potent. Golden (1990) states:

...any woman whose sexuality appears unregulated must perforce become marginal in order for society to feel safe. In fact, all forms of the female marginality collapse into this one

issue, which comes to define any female deviant. Thus, any single homeless woman is immediately suspected of promiscuity, since thanks to the blurring effect she becomes virtually indistinguishable from a prostitute. (p. 2)

Regulation, in this case, demands that women be in a heteronormative relationship and that they comply with social expectations of acceptable forms of female sexuality. Women, by consequence of being homeless, immediately deviate from traditional femininity as women's value is ascribed strongly to concepts of home; they become objects of great societal consternation. Passaro (1996) makes an additional point that the conceptualization of gender as performative is a powerful analytic stance that is "capable of capturing the contextuality and ephemerality of the many gendered acts any subject performs;" it can implicate more freedom of choice than is actually present (p. 11). Marginalized communities often experience gender as a mandatory performance, which can be hidden by this framework.

She eloquently elaborates that "Each of us may choose at different times and in different contexts, from among the performative dances of gender that are available and apprehensible to us, but dance we must" (Passaro, 1996, p. 11). The stakes of this "dance" are considerably higher for homeless women whose access to resources may depend on it.

Homeless women that are specifically targeted for expressions of non-normative sexualities are mothers and homosexual women. Single mothers receiving welfare are heavily monitored and subjected to mandatory intrusions by government agents within their private homes, so one can imagine the amount of increased attention garnered when they lose housing (Paradis, 2009). Following Watson's previously discussed incorporation of Bourdieu's notion of social capital, society places so much value in expressions of heteronormative femininity through complex cultural reward systems that it can easily be understood as a form of capital itself. Thus, femininity is a "potential source of capital accrual" for women experiencing homelessness making "gender performativity inevitable" (Watson, 2016, p. 261).

SHELTER LIFE:

Like how homeless women are a heterogeneous mix, so too are shelters, each unique. Keeping in mind the different categorical terms used to understand different kinds of homeless women (chronic, episodic, situational), the fact that they all often end up in the same shelter system has been amply critiqued since each group has drastically different capabilities and needs (Golden, 1990). The studies done on shelter life found that many guests relied emotionally on the shelter, and it was the relationships they made with other homeless women inside that dominated their perceptions of the shelter as a home (Hill, 1991). This meant that the women were very observant of new faces and personalities that may upset their balance, finding disruptive guests to negatively impact the "quality of their home life" (Hill, 1991, p. 304). Hill (1991) states that situationally and episodically homeless women, who tend to have more stable backgrounds, were found to be much more resentful of the shelter rules and restrictions of personal freedom that accompany communal residency, whereas chronically and episodically homeless women, with instability and abuse in their past, found the structure understandable or even comforting (p. 305).

One of the major observations by researchers on the topic of shelter life is that shelters tend to be understaffed and underfunded. During a two-day colloquium in 1986, sponsored by the National Institute of Mental Health, Program for the Homeless Mentally Ill, dozens of researchers whose work centered on women's homelessness discussed different facets and themes of their findings. Paul Koegel (1986), who cataloged these discussions, noted that "Colloquium participants were unanimous in their belief that those who serve the homeless—particularly those who staff shelter programs—often lack the knowledge, skills, and attitudes which underlie the effective delivery of services" (p. 44).

What they found was that shelter workers mirrored societal values about the homeless, which understand homeless women as unpredictable and that "one should not make it 'too easy on homeless individuals,'" as they are deserving of only the most basic level of care (Koegel, 1986, p. 46). Alternatively, one researcher commented that they encountered "a sense of acknowledgment of society's responsibility for the homeless mentally ill" during their research in France and that the ways in which we train, pay, and educate staff of shelters betrays the moral ambivalence American culture holds towards our homeless (Koegel, 1986, p. 50). It should be additionally noted that many staff enter the field with generous and humanistic intentions, but due to emotional burnout, find themselves unable to offer compassionate care. Emotional exhaustion from social workers and therapists working with sexual abuse survivors can be especially high when it is in conjunction with mental illness (Mennen, 1990).

In the 1990 study *Housing Homeless Women: A Consumer Preference Study*, researchers Goering, Paduchak, and Durbin asked what the women would prefer for their housing situations; they stated that they wanted independent apartment-style living and that the primary support they needed was money, furniture, transportation, tools for crisis avoidance, finding something to do with their time, and friends. One point where women were willing to put up with increased structure and regulation was if it would promise them adequate security against aggressive behavior and violence from outsiders. All women involved in the study strongly desired stable housing environments. This did, however, become rather ironic to the researchers as the women expressed that they did not want to live with anyone struggling with substance abuse, disruptive mental health issues, criminal charges, or aggressive/negative behavior. If the housing unit they wished for were to discriminate against tenants on the above stated grounds, most of those women would not be allowed to live there either (Goering, 1990). This showed more than anything the women's desire to live in a normalized environment, despite having speckled records themselves.

MENTAL ILLNESS:

In one of the previous sections, *Women are the "Hidden Homeless,"* I mentioned that, after the 1970s, many permanent care facilities for people with mental illnesses were shut down and the residents were released, sometimes into the streets. This is frequently dramatized and overrepresented in the discussion on how homelessness has changed over the decades. Even in the 1990s, 10 to 15 years after deinstitutionalization, only around 30% of homeless women had been accurately diagnosed with a mental illness. Interestingly, another 20-30% exhibited similar symptoms due to their stressful context; however, many of those behaviors have been shown to be

adaptations towards their highly volatile environment (Koegel, 1986; Brown & Ziefert, 1990; Paradis, 2009). Golden (1992) notes that there are certain gendered elements as well to the idea of the crazy homeless person, and she states:

...deinstitutionalized mental patients have played a role in perceptions of the homeless out of proportion to their actual numbers... [they are] more helpless, but also more fearsome, to the degradation of poverty these homeless added the mystery of madness- a quality particularly potent in women (p. 162).

Considering homeless women as deranged and dangerous negates the realities of street living and the isolation and violence that can accompany it. Occasionally, intensive treatment plans were conjured up to try and address mental illness in homeless women, but these strategies proved to be ineffective at best, and psychologically damaging at worst, as what the women truly needed was continued emotional support and safe housing (Koegel, 1986, p. 33).

Koegel (1986) adds to this perspective a compelling line of questioning:

Were they chronically mentally ill or were they simply reacting very sanely to the enormous stress of an insane situation? Was the fact that they wore four pairs of pants during the summer a reflection of an inability to properly identify weather-appropriate clothing or was it a highly conscious strategy aimed at frustrating potential rapists? Was their confusion a function of psychopathology or was it the result of longstanding sleep deprivation? Was their poor hygiene the result of poor self-management skills or their restricted access to sinks and showers?... The enormous difficulty of sorting out these factors suggested that the question of who is and who is not chronically mentally ill was not a meaningful one. (p. 30)

Ultimately, the lived experiences of homeless women are vastly different from the lives and maladies of housed patients. Therefore, it is not absurd that healthcare professionals would be diagnosing homeless women with all kinds of pathologies that may be entirely context dependent. This pattern of misdiagnosis indicates a need for more client-specific services targeting the needs of the homeless. For the homeless women who *do* deal with mental illness, their psychological condition has been shown to be correlative to untreated childhood sexual abuse amongst other traumas of adolescence, often presenting itself as severe depression, anxiety, and dissociation (Mennen, 1990). Studies have concluded that early therapeutic intervention is the most effective in the healing process for survivors of sexual abuse; otherwise, it can easily manifest into greater social and behavioral issues when paired with other stressors such as extreme poverty, pre-existing mental health conditions, and other forms of abuse (Koegel, 1986; Mennen, 1990).

RELATIONSHIPS:

From women who have been isolated on the streets for years to those who have recently left their lifetime home seeking refuge from domestic violence, all share in the need for secure attachments and emotional support. Recent research on intersections of gender and class found that women tend to “seek and mobilize social support,” particularly during periods of stress, and that this is one of

the greater differences between adult men and women. In other words, women exhibit “preferences for affiliation over power” (McGinn, 2017, p. 85). However, what we see is that economically stable, middle-class women tended to report secure and strong relationships of trust with friends and family, whereas economically vulnerable women and/or women in extreme poverty had heightened reliance on themselves and distrust of outside relationships (McGinn, 2017, p. 86).

Due to the social expectations and indoctrination of feminine ideals into girls from a very young age, homeless women, unsurprisingly, gave great value to relationships in which they were able to take on a nurturing role. In Judith Gonyea’s 2017 article on older homeless women’s perceptions of self, all the women spoke strongly of their experiences taking care of family members and fellow shelter residents. She elaborates that:

By sharing these nurturing or caring narratives, the participants lodged claims as valued persons who are living meaningful lives. Although the participants lacked hearths, their nurturer narratives, largely perceived as an extension of the feminine role, affirmed their “goodness as women.” (p. 80)

This phenomenon was common in research on women’s shelters, and it was noted that women often identified as caretakers and nurturers despite being categorized as “single” women by shelter personnel, implying that they were without families. Visitations from partners, children, or friends reinforced their self-worth as women, even if economic factors made them unable to fully care for their children or stay with their partners and families (Koegel, 1986, p. 24).

This recurrent theme made it clear that opportunities to give and receive emotional support are central to women’s ability to survive in such an isolated and often dehumanizing environment. The relationships formed inside women’s shelters may have been some of the most impactful in the women’s lives in terms of healing from the effects of homelessness. Community becomes a crucial reason to stay inside as relationships, friendships, and just basic human contact over time leads to the stabilization of many homeless women (Golden, 1992).

Much has been said about the necessity of support groups and feminist-informed therapeutic groups that would help women understand the roots of their trauma as symptomatic of a multitude of structural failures, as opposed to personal failures. Most women who report feeling stuck and immobilized see group engagement as a way to becoming “unstuck” (Benda, 1990; Paradis, 2009). However, it has also been noted that “Psychotherapy will not feed a hungry woman; rental subsidies will not address the rage and fear of an incest survivor,” for example (Harris, 1991, p. 193). This is also to say that there is no one solution to homelessness, but rather a complex web of resource assistance and prevention work that needs to be done before we as a society can even begin to tackle it.

SUMMARY:

Research on women’s experiences may be a newer addition to the study of homelessness, but there are many avenues in which to take it. At the crossroads of class, gender, and race, many women fall through the cracks and end up on the streets, and each researcher cited has done their part to

advocate for, describe, and explain the conditions of those women's lives. However, there is so much more research that can be done with topics such as gender performance, sexual/bodily currency, effects of extreme poverty on gender identity, social isolation and mental health, etc., with particular attention paid to those who are most marginal in these groups, i.e. women-identified and trans people of color.

Through conducting research that is place-based and thus allows for more multi-faceted subjectivities to be heard, my aim is to contribute smaller-scale and community-based knowledge that can be applied to the local struggling population more rapidly. Utilizing ethnographic research methods to target smaller groups of women allows for quick mobilization within communities as opposed to overarching plans that may take a generation or longer to work through federal bureaucratic structures, only then to trickle back down into towns and cities. The above sections of literature review and history demonstrate that while many generalized government initiatives are at play, the various homeless populations would benefit from a more specialized approach.

3. METHODOLOGY

3.1. THEORETICAL FRAMEWORK

This research study was designed using urban anthropological methods with particular attention to feminist and community psychology ethics. Urban anthropology is a subset of cultural anthropology that examines the sociocultural experiences and practices of urban people within their larger socioeconomic and cultural contexts (Basham, 1978; Hannerz, 1980). These frameworks are important to the success of this project as research of vulnerable populations (notably the extremely poor, people of color, LGBTQ folks) has a history of being extractive and, at worst, misrepresentative towards the studied group(s). Therefore, it became my epistemological undertaking to work with the women and portray them in ways that felt accurate to both of us. Through reading Emily Paradis' (2000) article, *Feminist and Community Psychology Ethics in Research with Homeless Women*, it became clear that there are many ways to conduct research unethically with this particular population. Particularly, Paradis (2000) warns against participating in the legacy of literature around homelessness that posits it as reflective of an individual's moral and personal deficits. She states "...research resembles a colonial economy when researchers enter uninvited into the world of participants, extract a resource called data, process this resource into a product called theory, and use the product only for their own ends" (Paradis, 2000, p. 2). Taking this warning to heart, I attempted to find ways to make the research a mutually beneficial project for the women and myself by going out of my way to have interactions with them that were not research related, such as by participating in Art Night (explained further in the *Compensation* section). Even something as small as titling the research in a way that would not capitalize on our popular understanding of homeless women as sad, broken, and disempowered became an important part of my process. By not assuming that every homeless woman is necessarily broken, I hoped to allow the women to describe their conditions without fear of judgement. Paradis (2000) mentions this and says, "...transforming exploitative aspects of the traditional model can yield research that promotes the interests of marginalized people and advocates for changes to an oppressive social system" (p. 2). Therefore, I adopted many of her theoretical and practical approaches in this research in an effort to

continuously “transform” the power dynamic of researcher-researched so that the women would remain the experts on their lives despite their potentially distressed mental states.

Irene Glasser’s (1999) book, *Braving the Street: Anthropology of Homelessness*, was similarly formative in my theoretical construction of this research as she was one of the pioneers of using ethnographic field methods with the homeless population. Glasser (1999) states that ethnography allows a researcher to use participant observation, interviews, and simply time spent with the population to observe, interpret, and describe cultural phenomena. She places great emphasis on the need to attain and include many different perspectives on the topic of homelessness, including those of policymakers, housed residents, shelter staff, and the homeless themselves. This is why I chose to incorporate interviews with different shelter personnel as well as women experiencing different stages of homelessness.

3.2. SETTING

This research was conducted in the city of Eugene, which has a population of approximately 168,916 people and is the second largest city in the state of Oregon. Eugene is home to the University of Oregon, as well as a major train station and a small commercial airport. The Willamette River runs through the middle of the city and the weather is largely agreeable to someone living outside, minus the frequent rains. A range of emergency, transitional, and rapid rehousing services are provided by the Eugene Mission, ShelterCare, St. Vincent de Paul, Looking Glass, Catholic Community Services, Laurel Hill, Hosea Youth Services, and WomenSpace, with the Eugene Mission being the largest. This research is set in the Eugene Mission Women’s Center, which is located within the seven-acre Eugene Mission campus in the industrial neighborhood. It is also a rapidly gentrifying portion of the city. The city of Eugene also has what many people refer to as a “homeless problem,” which is to say that the people experiencing homelessness are visible to the housed population as there is an unusually high unsheltered homeless count. The HUD Point-In-Time count of homeless people from January 2018 reported 1,642 homeless people, with approximately 1,135 of those people being unsheltered.

THE EUGENE MISSION:

The Eugene Mission is the largest of the sheltering programs in the city, serving over 700 meals a day, sleeping 350 to 400 per night, and assisting around 3000 people each year.¹⁵ The campus is in the heart of the industrial neighborhood, which is a rapidly developing part of the city with one of the trendier restaurant strips in Eugene, just a 10-minute walk down the road from the Mission. Turning down the dead-end road, the smoke yard is on the right with a chain link fence and a covered tent with picnic tables; tulips and daffodils bloom alongside it in the spring. Across the road and on the left is the Women’s Center, attached to the Women and Children’s Center. Neither permit men inside unless they are staff. Then, as you near the middle of the stretch of road, there are administrative offices on the left, and tiny homes for veterans on the right. Lastly is the Men’s Center (which contains the dining hall downstairs and is four times the size of the Women’s Center), and across the road from that are residents of the Life Change program, which is a more intensive faith-based rehabilitation program that residents must apply for. Other buildings on the campus include

donation warehouses and places where visiting nonprofits can set up shop.

The Mission itself is a non-denominational Christian nonprofit dedicated to getting homeless folks back on their feet. In the last few years, they underwent a massive rebranding and structural shift from being a temporary emergency shelter to a “Wellness Center” for the homeless. This is exemplified through their combined overnight and day services such as haircuts, foot care, pet assistance, showers, meals, and case management. These services exist in tandem with the other nonprofits the Mission hosts on their campus such as Goodwill job connections, Pro-Bone-O, St. Vincent De Paul, and more. All residents must be “safe, secure, and sober” to stay at the Mission, which means they are drug tested upon entry and cannot be in active crises during their stay nor exhibit violent, aggressive behavior. What makes the Mission unique is that they receive no funding from the government and very little from grants, which enables them to avoid changing their services in accordance with outside institutional agendas. About 80% of their donations are from individual community donors, 8% from churches, 6% from businesses, and the remainder comes from grants and miscellaneous sources.

THE WOMEN’S CENTER:

Out of around 50 women, approximately 20 lived at the Mission the entire course of my time there, another 15 to 20 would come and go sporadically through the weeks and months, and the rest only stay a night, or a week. Lights are on at 5:45 am every morning and curfew is at 7 pm every night. Each volunteer shift starts at 4 pm, and every day when I walked up to the front gate of the Women’s Center, I found myself surrounded by about 10 to 15 other women within 10 minutes from ages 18 to 65. The Mission is closed from 1 to 4 pm, and all residents must go out into the world to get some fresh air, so at 4 pm, they line up for reentry. The outside gate and interior door can only be opened by the front desk person who sits facing both doors as well as a computer monitor that shows security videos of both. Only the female residents are allowed in the building, so buzzing people in also means recognizing around 40 to 50 different faces. My duties were to run the “hygiene station,” which supplied menstrual pads, razors, deodorant, brushes, combs, toothbrushes and toothpaste, and the occasional shampoo and conditioner or hairspray (each shower was equipped with those already). I also ran the shower schedule, which was a time map showing the loosely scheduled times during the day that certain women had requested to have shower time based on work schedules or preference. All women had to shower once a day. The buzzing system and the gates protect the women from stalkers, predators, and ex-partners, and all windows facing the street have the blinds closed. They were allowed three pieces of baggage, which were locked in a storage closet so they didn’t have to worry about theft; however, food could only be stored in the Women’s Center kitchen if the women had doctor’s note for special dietary needs. No cooking was allowed in the kitchen for liability reasons, and the dining hall served breakfast, lunch, and dinner at 6:30 am, 11:15 am, and 5:15 pm.¹⁶ However, if the guests were not in the mood for Mission food, some could use their food stamps to buy processed and/or packaged food on their own since they could not prepare any food in the center’s kitchen.

Additionally, each resident had a 1-hour daily chore that helped keep the communal living space clean and comfortable. Some of the entry-level chores were doing the dishes, cleaning counter and

bathrooms, taking out the trash, and baggage check-in. Then there was a senior team that controlled laundry, and this group of women never changed as it was the most complex and high-responsibility task. The laundry women held somewhat authoritative roles in the Women's Center, and many times I overheard them communicating with staff about which women were not doing their part, such as bed-making, sheet-stripping, or moving their laundry through in a timely fashion. The staff then served as middlemen to relay this info to the slacking women, creating an interesting power dynamic where the laundry team often served as additional enforcers to the Women's Center staff in order to maintain obedience and compliance with the rules. This, however, was not entirely uncommon, as many women depended on the rules for structure and had no problem reporting their fellow residents for non-compliance. Typically, this was not a dramatic affair unless it involved theft.

Every evening, chapel service is available from 7-8pm. This service is volunteer-led, so if there are no volunteers available to lead a religious service, it does not happen. Some volunteers, I included, used this time to lead other activities such as yoga or arts and crafts. Many women strongly desired more opportunities to express themselves creatively through crafting and art. Others just wanted to find activities to distract themselves to take up time in the evenings since the curfew was so early. In a discussion I had with an older transgender woman, Jenny, and one of the interviewees, Robin, we laughed at how the only other people with curfews at 7 pm were 14-year-olds on school nights. They expressed the thought that some of the rules at the Mission felt like they were meant to restrict, rather than protect, them.

3.3. STUDY PARTICIPANTS

WOMEN EXPERIENCING HOMELESSNESS:

The women self-selected for the interviews by signing up with a staff member at the shelter, where the staff members determined the women's ability to participate in the research without the possibility of reexperiencing trauma or agitation to an existing mental health issue. The only requirements were that the women be above 18 years of age, able to consent to research participation (as deemed by themselves and familiar shelter staff), and at the time of the research being performed, were living at the Eugene Mission Women's Center in Eugene, OR. I often use the phrase "women experiencing homelessness" because not all of the women consider being homeless a large part of their identity and would not elect to be labeled "a homeless woman," particularly because many of them have never actually lived on the street, but rather in cars, friends' houses, abusive partner homes, or went straight into the shelter system after losing housing. Of the women I interviewed formally, two of them identified as white and one as Hispanic with undocumented Native American ancestry. All three were between the ages of 40 and 50. The dominant majority of all the women I spoke to during my time there (both in interviews and casual conversations) were between 40 to 70 years of age, white, and heterosexual. It is important to note that nationally Black Americans and Native Americans are excessively overrepresented in the homeless population. This is not reflected in my research findings, as at any given moment in my eight months of volunteering, there were five or fewer people of color staying at the Women's Center. This research is not meant to be representative of all homeless women, but rather a focused look at the women at the Eugene

Mission Women's Center.

SHELTER STAFF:

I conducted open-ended interviews with four senior staff at various sheltering organizations in Eugene that directly serve homeless individuals and families. These interviews were intended to be supplemental to the interviews of the women as well as the literature review. They are meant to provide a well-rounded approach to the topic of homelessness since other resources will be policy outlines, state and federal reports on homelessness, scholarly/theoretical articles, and interviews with homeless women. The staff were contacted directly via email and informed of my research project and request. The interviews lasted approximately an hour each and did not need follow-up discussion. They were recorded and transcribed, and all data was kept on a flash drive. All shelter personnel were given an option to remain anonymous, but none found that necessary. These perspectives became particularly valuable in understanding the ways that homelessness is approached in Lane County, where Eugene is located, and more generally, how it is handled in Oregon.

3.4. PROCEDURE

Due to an increase in research that has shown the effectiveness of ethnographic research of marginalized populations in the last 30 years (Koegel, 1986), I chose to use this framework and began volunteering at the Eugene Mission Women's Center weekly for 3 months before starting interviews with the women, meaning I worked at the shelter for a total of 8 months, starting in September 2018 and ending in May 2019. This was an important pillar of the research as my regular time spent with the women allowed me to form positive and trust-based relationships with them on their terms, as well as observe naturally occurring dynamics between the women, staff, and space. This was done in tandem with shelter personnel interviews, as well as the relevant literature review. Therefore, both direct investigation (recorded interviews) and non-direct investigation (participant observation, casual conversation, and a literature review) were used in this research to better capture a full picture of the women's situations. Permission to conduct research on-site was granted by the director of the Women's Center and Eugene Mission and the University of Oregon Research Compliance Services office approved the research plan as exempt from the full Institutional Review Board (IRB) process prior to me starting to volunteer in September 2018.

RECRUITMENT:

There were many challenges and considerations in the recruitment of study participants as homeless women are a very vulnerable and marginalized group. I chose not to recruit women off the street directly due to the likelihood of drug use, incoherence, or ethical conundrums should the women reveal information that, as a mandatory reporter, I would be compelled to take to the Department of Human Services or the police, such as child/elder abuse, sexual and/or domestic violence, etc. Additionally, without access to comprehensive emotional and mental health care, I was concerned that interviews might re-traumatize some women on the street and consequently leave them worse off. Even then, a sizeable element of this research is the mutability of "reality" and

“truth” in these women’s lives. Walking the line between accepting their life stories as truths versus questioning their experiences became an unavoidable theme in our interactions. Therefore, by recruiting women from a shelter, I knew they were at least much more likely to have the resources they needed after a sensitive conversation, as well as access to case managers and law enforcement if necessary, whereas women on the street may struggle to benefit from those encounters.

COMPENSATION:

Due to the financial and material insecurity of the women, it became clear that compensating them for their time in the interviews would be inappropriate. Offering money, food, gifts or even smaller privileges such as a ride to an appointment were considered unethical to use in the recruitment of the women by the Institutional Review Board (IRB) as many of them may have felt pressured to agree to an interview exclusively for the benefits.

Therefore, no compensation was offered. To give back to the women in a way that would not be considered persuasive for them to participate in my research project, I led “Art Night” every Thursday evening from 7 to 8pm where I would bring my personal art supplies and we would all try different art projects and mediums. This was relatively well-attended as 5 to 10 women would participate each week, which was considered normal for activity attendance.

INTERVIEWS:

There were three formal recorded interviews, countless casual, non-recorded interviews with the women at the shelter, and three formal interviews with shelter personnel in Eugene. For the interviews, I met the women one-on-one in the employee office at the Eugene Mission Women’s Center during the inside hours after 7 pm, after they had done their chores and eaten for the evening. Their interviews were recorded with their permission through the signing of a comprehensive informed consent document. I read the document allowed to the women while they looked it over as their literacy and educational backgrounds varied, then employed the teach-back method.¹⁷ Additionally, the informed consent document was written in simple and succinct language at a 9th-grade reading level for increased comprehension. The purpose of these interviews was to allow the women to speak about the aspects of homelessness that affect them the most and that they consider the most formative or impactful. The information they provided was analyzed to look for patterns in tandem with the casual conversations, participant observation, staff interviews, and literature review, but it is ultimately meant to bolster our understanding of women’s experiences of being homeless in this era and area. The formal, recorded interviews were each under an hour as many of the women felt more comfortable sharing naturally over multiple days or conversations. They were first prompted with questions about demographic information (age, sexuality, education level, race, etc.) and then were asked open-ended questions. The tone was conversational and was meant to help the women feel like they were having a discussion with a peer rather than an interviewer.

PARTICIPANT OBSERVATION:

A research journal was kept during the duration of my time at the Eugene Mission that allowed

me to take comprehensive notes describing relationships, interactions, and casual conversations with the women. No identifiable information was used in this note-taking process, and a flyer detailing my research was posted on the door to the women's baggage room that ensured they would see it multiple times a day, no matter how long they had been staying at the Mission. The flyer stated my name, photo, university affiliation, and intention to observe the women in their daily activities for research purposes without the use of their identifiable information. The data gathered from these notes were invaluable in capturing and observing the uninhibited daily lives of the women.

4. FINDINGS

In my time at the Eugene Mission, what struck me the most in my observations were the different groupings and social relationships that developed between the women. Physical disabilities, mental illness, histories of abuse, age, class backgrounds, addiction, and sexuality were among the many pathways of differentiation and identification that women made to find or avoid other residents. Some divisions were strong enough that they were rarely breached, and it became clear that many women preferred the separation. Small cohorts formed most strongly along lines of addiction, "realism,"¹⁸ and class, but all of these identity categories overlapped, clashed, and contributed to each unique woman. What became clear through these divisions was the need for different shelter spaces for women going through radically different paths of homelessness. Below are some of the most prominent separations that I observed through my volunteer shifts as well as the interviews with the women.

4.1. FROM NO RULES TO ALL RULES

One resident that I became close with was Rogue. She was easily one of the more rambunctious women at the center and her tricky personality always brightened up my volunteer shift. Every Wednesday, she would come over and sit next to me at my hygiene station and ask what goods I had that day, as she knew that at the start of every shift, I would sort through the many drawers of donated hair ties, nail files, razors, toothbrushes and pastes, deodorants, etc. and organize them. This was a strategy I had developed to not only make my life easier when women would come asking for a specific product, but also because I knew certain women were always looking for certain items, and sorting the products thus allowed me to develop a circuit of communication with those residents by letting them know when we had those items in available. One woman was always looking for floss, another for little lotion bottles. Rogue, particularly, was always on the hunt for cute accessories like hair ties and pins, makeup, and nail polish.

Over the many months that I volunteered at the Women's Center, Rogue learned about my research project and was excited to help, so much so that she was the first to sign up for an interview. She was 42 years old, white, with eyes like a hawk and a killer sense of style, always taking the time to color coordinate her eye makeup with her outfit and various accessories. She and another woman, Nico, were the dynamic duo of the Women's Center with their raunchy humor, distinctive laughs, and uninhibited style. One of my main interests in speaking with Rogue was to find out how someone so opposed to "the system" was handling such a restrictive space like the shelter. Rogue, who was a self-identified rebel and rule-*breaker*, regularly waxed on about the overbearing rules of

the Mission, but she had been living there for around 8 months by the time I interviewed her. Her story revealed a series of compromises and sacrifices that demanded she stay put for a while:

Rogue grew up in San Bernardino but had lived in Eugene for the past 22 years. She moved because there had seen three drive-by shootings on her street, and she knew that she had family in Oregon and took that as a sign to change scenes. Her mother had moved to Bend and had two other children by another man, but Rogue was 19 years older than one and 23 years older than the other. Since Rogue's mother was involved in her own family's life, she migrated to Eugene instead of joining her parent and half-siblings. Rogue's daughter had been in foster care for the last two years, and Rogue was currently in drug treatment trying to get her back. The previous summer when she lost her housing (for what seemed like the second time), she lived under a bridge and then on an island in the Willamette River.

Two years ago, when she lost her daughter to the state, two drug dealers who were supposed to be staying for two weeks in her house of 15 years decided that they were not going to leave. When I asked her what kind of drugs she was using, she mentioned meth, which is how she knew the dealers, and it turned out her boyfriend at the time was involved with the drug dealers as well. Rogue became homeless when she asked them to leave, and they threatened to kill her and shoot her five-year-old daughter. After 5 months she told them she was taking her daughter and that they were just going to abandon the house, but that night DHS came and took her daughter away. Rogue then locked herself in her room for 14 days and stopped using meth. She ended up having to give up the house to prove that she was no longer associating with "that kind of life."

At the time of the interview, she was supposed to graduate from treatment in three months. Eugene Mission was the only shelter she had ever stayed in and she didn't much care for the other women staying there besides Nico. She had contempt for the "old ladies" that got \$800 a month from welfare checks but would not get up and move out to make room for other women who needed serious help getting off the street. Rogue mentioned that she only worked part-time as an event security guard because she had so many treatment, case management, and counseling appointments, but that if she were getting \$800 checks, it would only take her a matter of months to get out of the Mission.

In a discussion about the structured environment of the Mission, she led with, "I fucking hate rules." Among her protestations were the 5:45 am wake-ups, as well as the mandatory outside time from 1 to 4 pm. She mentioned, "It would be nice to get some rest sometime" as she hadn't "had a nap in fucking months." Rogue felt like even if women were sick with pneumonia, they had to leave from 1 to 4 pm. She'd rather be back on her island, where privacy was no concern, and she could have sex if she wanted to, instead of constantly being surrounded by "petty bullshit" from other residents and unable to lie down in her bed when she wanted a break. But she had no choice, because in order to get her daughter back, she had to prove herself to the state, and as she said, they wouldn't release a child to a homeless woman. Rogue struggled with her speech being monitored, not being able to cook for herself, and not being allowed to have guests—all these rules that she never had to deal with before,

particularly since she was coming from living on the street.

As the interview went on, Rogue revealed that she had actually been in a shelter before when she ran away for about a week at age 13. Her father was a drug dealer, so she was exposed to that lifestyle from a young age to which she attributed her anti-authoritarian attitude and disdain for rules. She still talks to her mother and father over Facebook messenger a couple of times a week, and she sees her daughter every Monday for two hours, supervised by someone from Willamette Family, which handles people with substance abuse issues. The father of her daughter is out of both of their lives, as he abused Rogue for 10 years until she finally got a restraining order when her daughter was two years old.

When she spoke of her time outside, Rogue said that for her it was liberating, and she felt empowered and confident in her ability to defend herself, but when I asked her about the other homeless women she knew, she did not sound so enthused. Apparently, many of the women Rogue knew had sex with men for drugs, and she said when you're homeless you're always cold and hungry or too scared to sleep, but alcohol and drugs erased those feelings.

What we see from Rogue's story is that there are some women who end up in the shelter system because they have a strong goal and understand that compliance with rules is mandatory to achieve them. Without the desire to get her daughter back, Rogue would never have chosen to stay at a shelter. Compared to her previous lifestyle, anything other than complete freedom felt like an overly structured and oppressive environment. Therefore, what follows is a population of homeless women who find the rules too drastic a change from their life on the street and can't manage the tight scheduling, monitoring, and policing that happens at dry shelters. The Mission, for instance, has "safe, secure, and stable" requirements for all residents, so many people who have become accustomed to street life and have developed adaptive behaviors, such as hostility, yelling, stealing, etc., do not assimilate easily. Others find the threshold of compliance insurmountable and would rather take their chances outside.

In an interview with the Assistant Program Manager for Permanent Support Housing at ShelterCare in Eugene, I asked what kinds of obstacles women face trying to get access to housing and other resources. She replied that solving homelessness is so much more complicated than getting someone into a house and expecting them to be alright. Living outside has its own complex cultural system of rules and relationships that don't just go away when you manage to get under a roof. Learning to abide by the rules of the "normal" housed world can be an impossible task for someone who has become assimilated into the isolation and relative lawlessness of the streets. Therefore, the next step is to invest in some low-barrier shelters in addition to the existing ones that allow for homeless people to come as they are without immediately having to adjust to the web of social expectations and rules that accompany high barrier shelters.

4.2. ADDICTION RECOVERY

A recurring theme in many of the women's stories was drug use and addiction, whether it was their own experience or that of a partner or family member, drugs always seemed to make their way

into the picture. Most notably, meth was the drug that caused the problems. In the 2000s, Oregon experienced a spike in meth-related deaths until policymakers made one of the key ingredients—pseudoephedrine, found in nasal decongestants—illegal without a prescription. However, it seems that it only caused a brief decline as the death toll went up again in 2016.¹⁹ Oregon has unfortunately become known nationally for its meth problem. Take Nico for example, who grew up in Salem, Oregon and started using meth at around age 17 when she began dating a drug-dealer twice her age. She came from a stressful and low-income family and found the community around meth preferable. Nico lived with this group for years, but when she broke up with her boyfriend, he stole her trailer that she was living in. This led to her staying in a shelter for the first time, but she managed to keep her job. Now, she's been sober for about 5 months.

What is important to look at in this anecdote is that while drugs certainly decreased her quality of life and made her more susceptible to homelessness, meth was not the explicit reason she ended up in a shelter. It informed her choice of relationships, living situation, and health, and in the end, one of these precarious pillars of her life came down and she ended up without a home. Plus, since there are no wet shelters²⁰ in the area, she was forced to sober up. Many stories I heard had this relationship to drugs. Meth, alcohol, and occasionally heroin would work their way into women's lives, and then for one reason or another, they would end up without a place to live. To get into the Mission, women like Nico, had to get clean and work with case managers to enroll in rehab or support groups with sponsors to keep them on track. These women found community in one another and were able to offer guidance to newcomers that were on the recovery track. They shared stories, experiences, and even recommendations of doctors or services in town as many women working through addiction were often working through mental illness.

One of the women I communicated with the most was Rhonda. She had a thick, sleek, black bob with deep, black eyes framed by large glasses and a stocky body that was typically supported by a walker due to a car accident a number of years prior. She was 44, Latina, and had never been to college but made sure to mention that she had finished high school. Her story, while particularly tragic, captured the ways in which drug use can be intertwined with an already unstable situation.

Rhonda was born in California but raised in Eugene after she and her sister were removed from their mother by DHS. Apparently, their nanny had been hitchhiking on I-5 with them at the ages of one and two, and this was the cause of their separation and consequent adoption. Rhonda was adopted separately from her sister and reunited with her biological mother in 1996, then moved back to Eugene in 1997 and lived at the Mission for the first time. From the age of 19, Rhonda was episodically homeless after getting pregnant and kicked out of her mother's house, but she lost the child due to malnutrition in the third trimester. She had also been doing meth with her boyfriend before she knew she was pregnant but did not consider this a reason for the stillbirth.

After the loss of her first child, Rhonda moved to California and then to Florida with her boyfriend and became addicted to cocaine and meth until her boyfriend cheated on her with their cocaine dealer. The next time she became pregnant, she lost her child again from her abusive partner kicking her in the abdomen during a fight. Her water broke, and she was

rushed to the hospital, but the infant's neck had been broken by the impact. After birth, he was alive only for a matter of minutes. Rhonda never reported the incident out of fear of being killed, but she reminded me that there's no statute of limitations on murder.

Her next relationship was with another abusive man who was a part of the Aryan Brotherhood and a motorcycle gang. They were together for 8 years, but after spending a night in jail for fighting him in their home, she decided to leave him, which was her current reason for staying at the Mission. She was trying to locate her birth certificate so she could file for divorce, get Social Security Income (SSI) payments, and renew her license, but between two adoptions and being born in California, it was a struggle.

At the time of the interview, Rhonda was mostly concerned with taking care of her adoptive mother who was suffering from Alzheimer's and getting her things back from her abusive husband's house. She regularly communicated with her many siblings (half, full, and adopted) but almost never with her adoptive father, who she revealed had also been abusive. At the Mission, she often stood up for other women and got along well with the staff; she struck me as a simultaneously sensitive and fierce woman.

When I asked her about how women experience homelessness, she got frustrated and mentioned how many women just don't have "street smarts" and end up being taken advantage of. While all her past relationships had been characterized by violence and drug addiction, she had been clean for the last 11 years and was very protective of other women going through the recovery process. One of her main issues was the proximity of the needle exchange program put on by the HIV Alliance,²¹ which was often set up right down the road from the Mission. Drug users could get rid of their used needles and pick up clean ones, as this was a method of preventing the spread of bloodborne pathogens such as HIV or Hepatitis C. Rhonda's concern was that it was dangerous for the people trying to become sober (not to mention the kids that stayed at the Mission) as well as the fact that it made it look like all homeless people are drug addicts. She didn't want the residents at the Mission to be lumped in with the users of the needle exchange and said: "Not all of us homeless people are nasty...we shouldn't be treated like shit 'cause we're homeless."

Rhonda's story shows the complex ways in which drug use may be wrapped up in a host of other contextual hardships and not always present as the obvious reason for someone becoming unhoused. However, it is important to note that drugs are the main cause of homelessness for many people, or at least, make up a larger part of their identity than in Rhonda's case. The women at the Mission who had more severe experiences with drug addiction were largely uninterested in sharing their stories with me. Mission staff and the women that *did* speak with me thought that their avoidance of sharing was due to the amount of shame associated with substance abuse.

Women at the Mission became friends through group therapy, bonding over the difficulties of getting clean, or missing certain parts of their past, and cliques formed to chat about what medications they were on and who was going to group later. These women were able to band together because of shared trauma, or rather, shared recovery, but they acknowledged that not

everyone can make it to that stage without the presence of a wet shelter. Cold weather nights²² are the only times you do not have to pass a drug test to stay at the Mission. Therefore, if you want to get into the shelter, you have to start the recovery process on your own, but many women do not want to go through withdrawals on the street, potentially leaving them and their belongings vulnerable to predation. While requiring sobriety for residence is surely a strong motivator for some, it completely alienates others. Consequently, women who have not been living outside for very long (or at all), may find this sacrifice worth it to have a roof over their heads, whereas women who have been living on the streets for months or years and have become adjusted to that lifestyle may not find the reward of shelter for sobriety compelling enough.

4.3. VICTIM VERSUS REALIST

It was a rather muggy September day in Eugene, and it was my first day volunteering at the Mission. Upon entering, a young woman with light brown skin and black hair pulled into a bun pushed a purple stroller to the front desk. Her round face held two large, dark, round eyes and quickly enough matching large tears were streaming down from them. She had been harassed three times that day by the same man in a white pickup truck who had been cruising the blocks surrounding the Eugene Mission campus all day. He looked around 60, had a reddish-white beard, and among other things had offered to buy her a car seat for her daughter if she'd get in his truck and go to the beach with him, an offer that he had apparently given to a number of other women staying at the Mission with or without children. She said that this triggered her PTSD from similar incidents with men, and that she was afraid for her daughter. Her daughter, meanwhile, laid on her back in the stroller, gurgling or squealing occasionally, and vaguely looked around with the same dark, round eyes as her mother. The woman listening from behind the counter was the only staff member in the Women and Children's Center at the time, as oftentimes each staff member worked either by themselves or with a volunteer at any given moment. After taking down the details of the incident to make a police report and to prepare an announcement to the other residents, she asked the young woman if she could do anything else for her, and most importantly if she was okay. Her reply was "I could really use a hug."

Over the next few months, it became clear that it was not only common for these kinds of incidents to occur, but also something residents had to learn to live with. Beyond the predators that came to the Mission campus to target women, there was also the Men's Center, which was down the street about 100 yards from where the women stayed. A couple women on separate occasions expressed anxieties over running into men that had been previously jailed for violent crimes or sexual abuse.²³ Countless times the women would make remarks in passing about walking down to dinner in packs or verbally defending themselves from the men that lingered on the sidewalks and trailed women as they walked the stretch of road between the cafeteria and the Women's Center. Certainly not all the men had spent time behind bars, and many of the women were good friends with some of the residents at the Men's Center, but it seemed to be an unspoken rule that if they approached you first, you should be suspicious. Dinner started each night at 5:15 pm for the women, and any men that were present during this time had to be approved as being a partner or related to the women in some way.

One evening, over a plate of salad and hard-shell tacos, Rogue, Nico, Robin, and I passed around Rogue's personal hot sauce and gave the tacos a few ample dashes. Spices were a rarity in the Mission meals, as they had to accommodate hundreds of people each night with all kinds of dietary requirements.

"Oh it's so bad, it's so bad, some of these women don't know who they're datin'..." Nico said in more-or-less hushed tones, "they date these dudes from the Men's Center and they won't even look 'em up to see what they've done."

I leaned in, and asked her to elaborate, curious at this remark. Nico went on to tell me that much of the time men would approach women staying at the Women's Center and want to date them, but sometimes they were con artists or just plain dangerous. The women, however, enjoying the attention and company, would refuse to run their names on the internet as a sort of informal background check, something Nico and Rogue swore by to avoid "rapists and murders." Then the conversation quickly took a turn as another woman entered the dining hall. "There she is! Now she's got a whole other thing going on with some dude on the internet, always messaging and sayin' they're gonna meet up." Nico looked side-to-side and said, "Some of these ladies just don't have any street smarts..."

What followed was a long discussion of being victim to your own fantasies as suddenly the three women each took turns recounting stories about women who had fallen for internet catfishing scams,²⁴ sold on the idea that they were in love, and ended up being cleaned out of what little money they had and never meeting the "man" on the other side. The women would meet these people on forums or chat rooms and soon be wiring them their Supplemental Security Incomes (SSIs). It was only a month or so before this conversation that I had been chatting with Fran during my volunteer shift, who told me that she was engaged and about to leave the Mission. Fran struggled to see out of one eye and walked with a cane. Heat-damaged grey hair framed her long face and crooked smile, although she had been particularly sad lately as her little dog had been put down by the person watching it. Excited for her engagement, I asked where she would be moving and when, and tried to stifle my shock at her reply.

"Oh, he's already gotten me a Lamborghini, he asked what color I wanted and I said, 'I don't know, red!' He owns two yachts and a cruise ship, so maybe I'll live on one of those, he said I could have whatever I wanted...I'm just waiting to hear back from him, and then I'm out of here, he's going to take care of me."

I smiled from a mix of discomfort and confusion, and in an attempt to carry on the conversation normally, I asked how they had met.

"Online...yeah...but we are going to meet up, I'm just waiting to hear back from him."

After Fran had left and was out of sight, I slid over to the front desk and leaned over its mottled grayish counters with my eyebrows raised, "So Fran is leaving the Mission for a man who got her a red Lamborghini?"

The two attendant staff pursed their lips and furrowed their brows in different iterations, the one

closest to me rolled her eyes slightly and said, “It happens all the time, they get messaged from guys on the internet about buying them stuff, traveling, whatever, and then when it comes time to meet up no one is there... Ruth over there, she’s supposed to be moving to Miami with some dude she’s never met... We try to tell them to be careful, but there’s nothing we can do, sometimes they give up their beds here thinking they’re gonna get on a train or something, but no one ever comes, and they come right on back. They keep sending them money for this or that, ‘Oh, I couldn’t make it ‘cause my car broke down, can I borrow some money?’ or ‘Oh, my daughter is really sick and I can’t come to visit you until I pay for her treatment can you send me some money?’ They don’t listen, they get angry when we try to tell them.”

My heart sunk remembering that conversation as I sat in the dining hall with Rogue, Nico, and Robin, because the woman they were stealing glances at was Ruth. She awkwardly lumbered through the line with her heavysset body, and then sat down alone. Even Fran came back after a few days and found many of her previous friendships were broken upon return. Distraught, she confided in me that she didn’t understand why it mattered who she was dating, that it was none of their business, even if it was a scam. She felt like no one would talk to her anymore, and she was angry at the other women for abandoning her. Ruth perhaps learned from Fran’s isolation and kept her “relationship” largely quiet, but the loss of the friendships was devastating to both women after returning to the shelter with yet another excuse from a made-up man.

It was clear that these catfished women were considered victims by the others; no “street smarts,” low self-worth, and living in a fantasy despite the warning signs. The victims frustrated the realists terribly; they were haunted by the strength of these fantasies. They thought, how could it be that these disabled, older homeless women were somehow so “lovable” that they managed to secure a billionaire? Rogue looked seriously at me across the table and said that there was no way anyone was going to want an old homeless woman, let alone some guy with five yachts. The real lie, she seemed to imply, was that homeless women were desirable at all.

I was moved by the tenacity of both groups. The victims, steadfast in their illusions of radical class-jumping, sailing the world with diamonds draped around their necks and a man by their side, when they could hardly afford a fast-food dinner and needed to sleep with an adult diaper, and the realists, angrily pressing for the truth, embracing the harshness of their situations and fired up by the impossibility of such fairytale nonsense. Just the thought of being swept away from this place was like a drug for some women, and they were willing to pay to keep the high. Older women, who had grown up in a society with far fewer options than we have today, found themselves homeless and alone. They were stripped of their positions as nurturers and sexual beings through the channels of homelessness and time, and yet these women held tightly to conventional social ideals. In the eyes of traditional society, a woman who is neither desirable to a man nor needed by her family is not a real woman, and these women desperately needed to feel real.

Many months prior, I was speaking with a woman in her mid-70s who had taken the last name “Lamb” due to the close relationship she felt with God and her ability to communicate with angels.²⁵ She had just made it to the top of the housing waitlist and was in the process of being approved for an apartment, and I congratulated her wholeheartedly as we walked around the Women’s Center,

looking at empty spaces on the walls that might benefit from her artistic touch. She was a painter, and we were discussing the possibility of her creating some art for the walls once she got settled into her new apartment. When I returned for my volunteer shift the following week, she had already moved out, but when I asked the staff how her transition out of the shelter went, they told me she did not end up moving into the apartment. Confused, I inquired more and found out that Ms. Lamb had met a man who had offered her a place to live with him instead, and that she turned down the apartment she had waited months and months for to move in with practically a stranger. Whether it be dating a dangerous man and refusing to ask him about his past, paying for affection online, or simply choosing partnership over stable housing, these kinds of relationships show us that homeless women are particularly vulnerable to predation.

4.4. “RAISED” OR “NOT RAISED”

Most of the women who formed friendships with me were women who would be considered situationally homeless and were experiencing homelessness for the first time. This could be read several ways. Perhaps they felt more comfortable than other homeless women did about talking to a college educated volunteer, or maybe they felt that they had little to hide and more to prove about why they were experiencing homelessness in the first place. One of the women I spoke with over dinner one night was Jane. She was a white woman, about 45 years of age, and she had bright blue-green eyes with tousled caramel-colored hair and had moved to Eugene from Palm Springs, California. We chatted about life over a boiled vegetable medley.

She had gone to college for agricultural economics and had wanted to help developing countries with food production, and so we talked about travel and research and all sorts of school-related topics. I found myself a little shocked by the conversation, and maybe a little guilty as well for being so surprised. There were in fact a number of women at the Eugene Mission who were college educated, but I had been operating under the assumption that casually discussing educational backgrounds was inappropriate, as it is true that the majority of the women had never been to college. As she asked me about the research, I mentioned how I had been reading about the frequency of staff burnout in high-stress workplaces and inquired if she had ever found that to be true at the Mission. I expected her to mention something about staff exhaustion or rigid discipline, but she expressed deep appreciation for the staff who she found to be very supportive, kind, and patient. Upon reflection, it was often the chronically homeless women who struggled with the staff, and even then, their struggles were primarily with the rules. When I questioned her about life at the Women’s Center, she stated the importance of maintaining her “inner balance” when so many energies in one space are hectic and chaotic. “You can’t control the external,” she said with a slight shake of her head. I never did find out why Jane was at the Mission and how she had gotten there, but I appreciated our discussion nonetheless.

Robin, however, was a resident I maintained regular contact with. The first time we met, I was leading Art Night and had brought dozens of old magazines to be made into collages. Robin sat at the table, but instead of cutting the magazines up, she started reading National Geographic. As the activity ended, and I cleaned up, she stuck around, and we started talking. She revealed that she was interested in archaeology and was learning Hebrew as well. This was the start of our friendship as

her mellow attitude and curious nature led us to have pleasant conversations about life, the Mission, and more. Robin, like many women at the Mission, did not *look* homeless. She dressed well, had beautiful long silvery-blond hair and smiled frequently.

Once, on a walk on Skinner's Butte, she told me that she was looking for bald eagles and when she happened upon other walkers she asked if they had seen any. Their reply was that there weren't eagles around anymore because of the homeless. She was shaken by this, asking herself "Do they know I'm homeless? Can they tell?" and she confessed that these kinds of interactions with fellow Eugene residents were not uncommon. Robin was humbled by staying at the Mission and found the other women largely amicable, but she resisted the identity of "homeless." Her story below is revealing as to what many situationally homeless women go through in their journey to becoming unhoused:

Robin was born in Colorado and lived in the Bay Area for a while before moving to Redding, California for many years. She was 56 years old at the time of our interview, never married or had children and said she had been living in Eugene for the last 20 or so years after coming up to be closer to her mother. She went to school to become a massage therapist and later entered a pre-med program, but she ended up working with Amtrack and later doing field work for a drug abuse and mental health study through Duke University for the National Household Survey on Drug Abuse (NHSDA), coordinated by the Health and Human Services Department. She bought a house in 2003, had two dogs, and lived a fairly regular life.

Along the way, Robin had undergone a series of highly traumatic surgeries including a botched hysterectomy, removal of intestinal blockage cysts, and operations to correct a congenital heart defect. All these procedures had to be done in Redding because she had MediCal insurance. But in the last couple of years, when she tried to file for disability, the doctors denied that any medical procedures had been performed. They claimed they had no record of it.

When Robin went down to California to get an MRI and to try to retrieve her medical files to get the procedures confirmed, she moved in with her previous roommate from Redding who had been a long-time friend. What she found out when she arrived was that her friend had become addicted to meth, as had her ex-boyfriend, whom she had been communicating with about her return to California.

After developing a skin disease in her nose from the amount of cat urine and feces in her roommate's house, she took a position as a caretaker for her ex-boyfriend's brother who was getting out of the hospital for broken ribs and pneumonia. This enabled her to move out of the meth house and obtain employment. Sensing that she might be in Redding for a while, Robin found a renter for her house in Eugene and came back up to clean up and move out her things. During her journey, the man she had been hired to take care of in Redding passed away from an aggressive form of cancer that had been previously undetected in his hospital visits.

Saddened by the death and wanting to support her ex-boyfriend, who had just lost his only remaining family member, Robin returned to Redding to help with the funeral. Upon her return, she stayed with the ex, but he became abusive. He threatened to “bash [her] head into the wall,” but she was terrified of becoming homeless, so she stayed. She expressed that it was an incredibly difficult situation for her, “If this is what the person who supposedly loves you is like, what is it going to be like on the outside? Sometimes we have to put up with abuse just to have a roof over our head.” Robin did eventually move out and started living with another old friend in Redding, but during the wildfires around 2013, the woman’s house burned to the ground along with all the medical files and paperwork Robin had been amassing over the last few years. At the time of the fires, Robin had been in Eugene getting surgery for an obstructed bowel and got the news that she had been evicted by her friend, meaning she wouldn’t be able to file with Federal Insurance and Mitigation Administration (FIMA). During our interview, she explained that she had *just* gotten her birth certificate back.

Realizing there was no reason to return to Redding, she got a job at the Springfield Country Club but was not doing well after the surgeries. Then she got feedback from her manager that her mouth smelled, and after going to the doctor, she found out her wisdom teeth were rotting. Now she was driving back and forth from Eugene to Redding for healthcare. After losing her job at the Springfield Country Club, she stayed at a Mission in Redding, but they were a low-barrier shelter, so no one was drug tested or screened for aggression and severe mental illness. The women she slept next to were often completely high on meth, wide awake for the night. After she witnessed four or five people die from laced drug use, she came back to Eugene to try to live in her house.

Robin’s house no longer had electricity, and while she managed to get disability payments of \$910 a month, the house payments were \$830; although she tried to save the house, it was foreclosed. Currently, she is trying to file Chapter 13 bankruptcy to retake the house, as well as file with Amtrak for permanent disability. When I asked her if this was the first time that she truly felt homeless, she stated that she had never actually lived on the street, but that she hadn’t had secure housing in years. After trying to live in her car when the house got too cold, she came to the Eugene Mission.

When I asked her about her family, she said her three half-sisters are over ten years older and do not like her. Her father passed away in 1999, and their mother is in hospice, and her half-sisters won’t let Robin visit her. She does not even know if they would tell her when she passes. The closest sister to Robin’s age thinks she’s a hypochondriac and that doctors and attorneys would never lie about medical records and procedures. Robin said sadly, “It’s easier for people to believe that I did something wrong, than that there’s something wrong with the system.”

In our discussion about the Women’s Center and her experiences at the Mission, she praised the friendly (though overworked) staff and the quality food from Food for Lane County, but she also had a few ideas for improvements. Namely, Robin thought there should

be more expressive activity opportunities. She mentioned that one resident plays the piano and harmonica and that her friend Jenny is talented at playing guitar, implying that some sort of musical group could be formed. She wants there to be a meditation or spiritual service more regularly and says there is a lot of anger at the Mission, and the women need to be able to redirect that energy. But mostly, Robin thought everyone could benefit from two different shelter spaces, she said, "...some of these women, I don't think they've ever been raised by somebody...nobody to say 'cover your mouth' when you cough." She thought that if there were a separate low-barrier facility for women going through drug issues, severe disabilities, and disruptive mental illness they could "better address" those issues, in a way that is not insulting or degrading. Robin elaborated that it is difficult to share space with so many women going through radically different issues and that it can be scary to be around people who are volatile, "You don't know what they're going to do." Her compassion for the other women was obvious, but so was her discomfort at having to share a communal space with women who didn't understand basic hygiene or perhaps could not practice it due to their various conditions.

Jane and Robin show us that there is a world of homelessness that is largely misunderstood by the popular imagination. These are the women who have college degrees, held jobs their whole lives, and then experienced some sort of series of traumatic events that upset the balance. Jane and Robin are good examples of the situationally homeless as they can seek out services and manage the responsibilities of the housed world. The issue is that due to unforeseen circumstances, they are without housing and find it difficult to get out of shelter life. The need for transitional housing for specifically situationally homeless women is clear.

5. DISCUSSION

There are many things to be said about women's homelessness in Eugene, and ultimately, I feel as though this research project has barely scratched the surface. The women I spoke to were certainly not the most diverse group, and only having time to work from a single shelter additionally impacted my findings and my ability to collect an accurate spread of data. That being said, my eight months working with the women at the Eugene Mission were invaluable.

The time and stories that the women shared with me made this research possible, and it was their tenacity, vibrancy, humor, and resilience that inspired it in the first place. The reader will notice that I have left a large gap in the research concerning homeless women who experience mental illness and severe disability. I have left this out intentionally as, due to my lack of training and inability to ethically and accurately advocate for those women, I came to the conclusion that it would be more helpful for me as a researcher to leave that to future professional inquiry. Other sites of study that should be investigated further would be single fathers' experience of homelessness, LGBTQ youth, immigrant homelessness, relationships between women in shelters, and the complex culture of living outside.

Until our society stops undervaluing women and socializing them to be dependent on men, we must accept and remediate the consequences of a capitalist patriarchal system that abandons

impoverished women. As Meabh Savage writes in her 2016 article *Gendering Women's Homelessness*:

In a society where the primary moral responsibility for providing love and care continues to rest with women, the salience of the affective domain for developing gender-sensitive approaches in homeless policy cannot be overstated. This is because the affective sphere is the most relevant site for understanding the importance of the more acutely gendered capitals and the role they play in influencing women's journeys into, through, and out of homelessness. (p. 56)

As Savage (2016) states clearly, if care continues to be offered within a service model that is designed to meet the needs of homeless men, this will be a great loss to humanitarian causes that aim to promote and implement equitable social practice.

On a smaller scale, with more immediate opportunities for change, the importance of healthy friendships and relationships should not be underrated, and the shelter is an excellent space to start these kinds of interventions. Groups that meet about healthy boundaries, expectations, and expressions of intimacy should be a regular occurrence. As it has been previously elaborated in the literature review, homeless women are often victims of both childhood abuse and domestic violence, and these kinds of discussions might help in helping women find stability and safety in their journey in, and through, homelessness.

Largely, it is most important to me that this project will allow for housed readers to consider the inherent value of these women and others like them in making informed and productive policy changes that could change the system of care entirely. The feedback offered from this project is another incentive for the city to provide low-barrier shelter access to the homeless population that will never be able to make the jump into places like the Mission without a transitory period in a lower-stakes environment. Homelessness is a spectrum of unhoused states; therefore, providing services that can meet people at these different levels is key to bridging the gap between the chronically homeless and the housed world. Public policy and ethnographic research have the potential to be powerful allies in the creation and implementation of effective care procedures, and as one of the women at the Mission has aptly said, "Nothing about us, without us."

6. RECOMMENDATIONS

SHELTERING FOR THE SITUATIONALLY HOMELESS:

As previously mentioned in the section on History and Policy in Eugene, the way Lane County utilizes the VI-SPDAT scoring system and centralized housing waitlist leaves situationally homeless women in an awkward position. They do not make enough money through unemployment, disability, or a job to find a house themselves, yet they never land atop the housing waitlist; this situation turns shelters into a purgatory space for situationally homeless women who cannot afford to leave but feel that they do not belong in a shelter. In an interview with another ShelterCare employee about what they had observed in their time working with the homeless, we discussed the potential benefits and drawbacks of combined sheltering for people experiencing all forms of

homelessness. A chronically homeless woman who is in deep psychosis and recovering from a meth addiction may share a bunk bed with a situationally homeless woman who has just entered the shelter to flee from an abusive partner. Is this advantageous to either women? In what ways? The interview revealed that while there were some cases of positive relationships being formed between a more stable woman and a less stable woman, the need for separate transitional housing for situationally homeless women was clear. Therefore, beyond providing more low-barrier shelters, there may also be value in transitional spaces for women experiencing homelessness for the first time, allowing those precious beds at places like the Women's Center to be filled by women who desperately need to get off the streets.

INTERVENTION AND PREVENTION:

In the larger scale issue of unsheltered homelessness in Oregon, and specifically in Eugene, it would seem that opening up beds in shelters to get people inside is the highest priority. While my previous comment about supplying transitional shelters for situationally homeless women is one potential way to free up shelters like the Mission for episodically and chronically homeless women, another solution would be stronger intervention and prevention programs. Interest-free loans for those who qualify or temporary assistance for women experiencing, for example, a medical emergency or the loss of a partner, could go a long way in keeping people housed while decreasing public spending on homelessness once they are on the street or in shelters. Prevention-focused organizations like Ophelia's Place are one way to intercept patterns of extreme poverty and homelessness through expressive, creative, and social outlets that allow young women to develop relationships with mentors and peers in healthy ways. These kinds of multifaceted holistic approaches to prevention and intervention are invaluable in the fight to end homelessness.

RELATIONSHIPS AND ACTIVITIES:

Without fail, all the women I spoke to at the Mission expressed their appreciation for Art Night, Yoga, and Chapel Services. Homelessness is dehumanizing enough, and not engaging creatively, spiritually, and socially on a regular basis was difficult for the women. Previous scholarship has unanimously shown that the ability to form healthy social relationships with other women as well as distract oneself from chronic stress and the daily battles of homelessness and communal living is incredibly formative in women's ability to recover, stabilize, and enter the housed world.²⁶ The first and easiest thing to implement at shelters would be an increase of available activities. If the issue is not enough volunteer labor, the women have a plethora of skills and abilities they could share. As Robin mentioned, these women are musicians, artisans, meditators, craftspeople, and more. Allowing women to have responsibility as activity leaders would undoubtedly raise their confidence and benefit the group as a whole.

ACKNOWLEDGMENTS

I would like to first and foremost thank Dr. Lamia Karim for being my faculty advisor on this project. She took a risk accepting me and my research proposal under her wing, and I would not have been able to do this without her support and guidance.

Thank you to the Eugene Mission Women's Center staff, and specifically Maria Cortez and Tabitha Eck, who had to create an entire research approval team after my request to conduct my project with the women at the Mission. Your patience, assistance, and support was invaluable.

Thank you to Matt from the Writing Lab in the Knight Library, helping me edit 52 pages of research may not be in your job description but without you, I would still be looking for typos.

Finally, the women at the Eugene Mission. You are truly some of the funniest, friendliest, and strongest women I have ever met, and I am in a lifetime of gratitude to you all for welcoming me into your space and sharing your lives with me for no other reason than to help me succeed.

Thank you.

REFERENCES

- Anderson, S. C., Boe, T., & Smith, S. (1988). Homeless women. *Affilia*, 3(2), 62-70. <https://doi.org/10.1177/088610998800300207>
- Basham, R. (1978). *Urban anthropology. The cross-cultural study of complex societies*. Palo Alto, CA: Mayfield Publishing Company.
- Badger, E. (2015, August 13). It's unconstitutional to ban the homeless from sleeping outside, the federal government says. *The Washington Post*. Retrieved from <https://www.washingtonpost.com>.
- Benda, B. B., & Dattalo, P. (1990). Homeless women and men: Their problems and use of services. *Affilia*, 5(3), 50-82. doi:10.1177/088610999000500305
- Bretherton, J. (2017). Reconsidering gender in homelessness. *European Journal of Homelessness*, 11(1), 1-22. doi:10.1057/978-1-137-54516-9_1
- Brown, K. S., & Ziefert, M. (1990). A feminist approach to working with homeless women. *Affilia*, 5(1), 6-20. doi:10.1177/088610999000500101
- Buskirk, A. V. (2017, March 9). Homelessness reaches crisis proportions in Eugene. *Oregon Business, Economy and Finance Magazine*. Retrieved from www.oregonbusiness.com.
- Combahee River Collective. (1986). *The Combahee River Collective statement: Black feminist organizing in the seventies and eighties*. Albany, NY: Kitchen Table.
- Donley, A. M., & Wright, J. D. (2017). The health of the homeless. *Sociology Compass*, 12(1), 1-12. <https://doi.org/10.1111/soc4.12550>
- Doyle, L. (1999). The big issue: Empowering homeless women through academic research? *Area*, 31(3), 239-246. doi:10.1111/j.1475-4762.1999.tb00088.x

- Dreher, A. (2018). Lane County 2018 sheltered and unsheltered point in time count: Full report [PDF file]. Retrieved from <https://lanecounty.org>
- Glasser, I., & Bridgman, R. (1999). *Braving the street: The anthropology of homelessness* (Vol. 1). London: Berghahn Books.
- Goering, P., Paduchak, D., & Durbin, J. (1990). Housing homeless women: A consumer preference study. *Psychiatric Services, 41*(7), 790-794. doi:10.1176/ps.41.7.790
- Golden, S. (1990). Lady versus low creature: Old roots of current attitudes toward homeless women. *Frontiers: A Journal of Women's Studies, 11*(2/3), 1. doi:10.2307/3346813
- Golden, S. (1992). *The women outside: Meanings and myths of homelessness*. Berkeley, CA: University of California Press.
- Gonyea, J. G., & Melekis, K. (2017). Older homeless women's identity negotiation: agency, resistance, and the construction of a valued self. *The Sociological Review, 65*(1), 67–82. <https://doi.org/10.1111/1467-954X.1236>
- Green, H. D., Tucker, J. S., Wenzel, S. L., Golinelli, D., Kennedy, D. P., Ryan, G. W., & Zhou, A. J. (2012). Association of childhood abuse with homeless women's social networks. *Child Abuse & Neglect, 36*(1), 21-31. doi: 10.1016/j.chiabu.2011.07.005
- Green, L. R. (1991). Homeless and battered: Women abandoned by a feminist institution. *UCLA Women's Law Journal, 1*(0), 169-190. Los Angeles, CA: UCLA. Retrieved from <https://escholarship.org/uc/item/obq2t8zz>.
- Hannerz, U. (1980). *Exploring the city: Inquiries toward an urban anthropology*. New York City, NY: Columbia University Press.
- Harris, M. (1991). *Sisters of the shadow*. Norman, OK: University of Oklahoma Press.
- Hellegers, D. (2011). *No room of her own: Women's stories of homelessness, life, death, and resistance*. Basingstoke: Palgrave Macmillan.
- Hernandez, L., & Radnovich, C. (2018, February 16). Oregon meth-related deaths higher than ever as opioid deaths decline. *Statesman Journal*. Retrieved from <https://www.statesmanjournal.com>.
- Hill, C. (2018, October 15). Curbside camping by homeless grows in visibility in Eugene. *The Register Guard*. Retrieved from <https://www.registerguard.com>.
- Hill, C. (2019, January 23). Ambitious plan aims to bring all local homeless on streets indoors. *The Register Guard*. Retrieved from <https://www.registerguard.com>.
- Hill, R. P. Homeless women, special possessions, and the meaning of “home”: An ethnographic case study. *Journal of Consumer Research, 18*(3), 298-310. www.jstor.org/stable/2489341.

- Hopper, K. (1988). More than passing strange: Homelessness and mental illness in New York City. *American Ethnologist*, 15(1), 155-167. doi:10.1525/ae.1988.15.1.02a00100
- Kaufman, E. (2019, January 03). Government shutdown: By the numbers. Retrieved from <https://www.cnn.com>
- Klitzing, S. W. (2004). Women living in a homeless shelter: Stress, coping and leisure. *Journal of Leisure Research*, 36(4), 483-512. doi:10.1080/00222216.2004.11950033
- Klodawsky, F. (2006). Landscapes on the margins: Gender and homelessness in Canada. *Gender, Place & Culture*, 13(4), 365-381. doi:10.1080/09663690600808478
- Koegel, P. (1986). Ethnographic perspectives on homeless and mentally ill women [PDF file]. Retrieved from <https://chodarr.org/sites/default/files/chodarro074.pdf>
- Kristina Smock Consulting. (2015). 2015 point-in-time: count of homelessness in Portland/Gresham/Mulnomah County, Oregon [PDF file]. Retrieved from <https://multco.us/file/42320/download>
- Lane County Human Services. (n.d.). Coordinate entry: Required training for all front door assessors [PDF file]. Retrieved from https://www.lanecounty.org/UserFiles/Servers/Server_3585797/File/Government/County Departments/Health and Human Services/Human Services/HMIS ServicePoint/Coordinated Entry/Coordinated Entry Front Door Assessor Training.pdf
- Liebow, E. (1993). *Tell them who I am: The lives of homeless women*. New York, NY: Free Press.
- Mayock, P., Bretherton, J., & Baptista, I. (2016). Women's homelessness and domestic violence: (In)visible interactions. In P. Maycock & J. Bretherton (Eds.), *Women's Homelessness in Europe* (127-154). doi:10.1057/978-1-137-54516-9_6
- McGinn, K. L., & Oh, E. (2017). Gender, social class, and women's employment. *Current Opinion in Psychology*, 18, 84-88. doi:10.1016/j.copsyc.2017.07.012
- Mennen, F. E. (1990). Dilemmas and demands: Working with adult survivors of sexual abuse. *Affilia*, 5(4), 72-86. doi:10.1177/088610999000500405
- Newnham, R. (2019, April 19). Once homeless, SOJC prof's experience now guides research. Retrieved from <https://around.uoregon.edu>
- Olumhense, E. (2018, October 24). Chicago says number of homeless people down for 3rd year, but advocates say figure may be much higher. *The Chicago Tribune*. Retrieved from <https://www.chicagotribune.com>
- Paradis, E. K. (2000). Feminist and community psychology ethics in research with homeless

- women. *American Journal of Community Psychology*, 28(6), 839-858.
doi:10.1023/a:1005115901078
- Paradis, E. K. (2009). A little room of hope: Feminist participatory action research with "homeless" women (Unpublished doctoral dissertation). Graduate Department of Adult Education and Counselling Psychology Ontario Institute for Studies in Education University of Toronto.
- Passaro, J. (2014). *The unequal homeless: Men on the streets, women in their place*. London: Routledge.
- Ralston, M. L. (1996). *Nobody wants to hear our truth: Homeless women and theories of the welfare state*. Westport, CT: Greenwood Press.
- Savage, M. (2016). Gendering women's homelessness. *Irish Journal of Applied Social Sciences*, 16(2), 1-23. doi:10.21427/D7KBoX.
- Tapogna, J. & Baron, M. (2019). Homelessness in Oregon: A review of trends, causes, and policy options [PDF file]. Retrieved from <https://www.oregoncf.org/Templates/media/files/reports/OregonHomelessness.pdf>
- Moses, J. (2019). Two ways of looking at it: How we evaluate homelessness numbers. Retrieved from <https://endhomelessness.org>
- Henry, M., Mahathey, A., Morrill, T., Robinson, A., Shivji, A., Watt, R. (2018). The 2018 annual homeless assessment report (AHAR) to Congress. Retrieved from <https://files.hudexchange.info/resources/documents/2018-AHAR-Part-1.pdf>
- Technical Assistance Collaborative. (2018). Lane County shelter feasibility study. Retrieved from https://www.eugene-or.gov/DocumentCenter/View/45881/TAC-Report_Final
- Watson, J. (2016). Gender-based violence and young homeless women: Femininity, embodiment and vicarious physical capital. *Sociological Review* 64(2), 256-73.
<https://doi.org/10.1111/1467-954X.12365>
- Wright, J. D. (1989). *Address unknown: The homeless in America*. Hawthorne, NY: Aldine de Gruyter.

NOTES

¹This is in reference to the Combahee River Collective Statement published in 1986 by Black feminists with a foreword from Barbara Smith. In short, their platform is centered on an intersectional approach that prioritizes poor Black women (particularly LGBTQ+) for liberatory action, as they are the most oppressed in our society. It additionally has a strong socialist, Marxist element that considers economic class instrumental in social movement mobilization. In the 2010s, there has been an increased academic and popular interest in Black feminist teachings.

²The other literature I was able to find on homeless women covered many topics such as addiction, sexuality, neoliberalism, postfeminism, mental health, and motherhood, but very little of it was focused on specific communities of homeless women with the explicit goal of remediate action.

³ HOMELESSNESS IN OREGON: A Review of Trends, Causes, and Policy Options, prepared for the Oregon Community Foundation, 2019. See references.

⁴ This is particularly important to note when we consider women experiencing homelessness as they have been considered the “hidden homeless” due to their likelihood to stay off the streets and exhaust all other housing situations first. This will be discussed further in the Literature Review.

⁵ This term is defined by HUD as an individual under 25 without dependents or family.

⁶ See Appendix

⁷ United States, Lane County Oregon, Lane County Human Services. (n.d.). Retrieved from [https://www.lanecounty.org/UserFiles/Servers/Server_3585797/File/Government/County Departments/Health and Human Services/Human Services/HMIS ServicePoint/Coordinated Entry/Coordinated Entry Front Door Assessor Training.pdf](https://www.lanecounty.org/UserFiles/Servers/Server_3585797/File/Government/County%20Departments/Health%20and%20Human%20Services/Human%20Services/HMIS%20ServicePoint/Coordinated%20Entry/Coordinated%20Entry%20Front%20Door%20Assessor%20Training.pdf)

⁸ From my understanding, this term seems to be used more prominently in European research on homelessness, therefore, I have chosen to stick with “situationally homeless” as it seems to be the standard in the US.

⁹ Brown and Ziefert mention that most of the women who participated in the study had been greatly impacted the removal of one or more children from their care.

¹⁰ It is worth noting that this has been overrepresented in the literature on causes for homelessness as well as in the dominant understanding of this nation’s homeless. However, this will be covered more in the section *Mental Illness* below.

¹¹ The War on Drugs refers to a US government-led initiative that aims to stop illegal drug use, distribution, and trade by creating harsher penalties for offenders. It started in the 1970s, and while it is often associated with US presidents such as Nixon and Reagan, it is still evolving today. It has also been the subject of thorough critique, as many of its policies blatantly target Black and Hispanic Americans, such as increased punishment for crack cocaine over powder cocaine.

¹² See footnote 10.

¹³ Women’s Advocates opened one of the country’s first documented shelters for battered women in 1974. By the end of the 1970s, there were about 250 shelters for abused women and now there are several thousand domestic violence organizations, some of which offer shelter.

¹⁴ I will be using the terms “domestic violence” and “intimate partner violence” interchangeably.

¹⁵ This information can be found on their website at <https://eugenemission.org/about/facts-and-financials/>

¹⁶ Men have separate meal times, typically right after the women.

¹⁷ The teach-back method is a way of checking understanding developed out of ethical healthcare practice that entails asking participants to state in their own words what they need to know from what was just explained to them- in this case consent forms. It is a way to confirm that you as the researcher have explained the data collection process in a manner the participants understand.

¹⁸ Some women described themselves as “realists,” as opposed to relying on faith or fantasy to comfort them.

¹⁹ Hernandez, L., & Radnovich, C. (2018, February 16). Oregon meth-related deaths higher than ever as opioid deaths decline. Retrieved from <https://www.statesmanjournal.com/story/news/2018/02/14/subhead-oregon-state-medical-examiner-blurb-here-dr-karen-gunson-said-2004-oregon-law-requiring-pseu/337093002/>

²⁰ “Wet shelter” meaning a low barrier shelter where you do not have to be sober to be a resident, as opposed to “dry shelter” such as the Mission requires sobriety to stay.

²¹ HIV Alliance. Syringe services & harm reduction. Retrieved from <https://hivalliance.org/prevent/syringe-services/#syringe-exchange>

²² Cold weather policy kicks in when the temperature at night is below 33 degree Fahrenheit, and the Mission brings out cots and sleeping pads to let men and women get inside from the cold. For these nights, they do not require sobriety.

²³ Finding a home after serving time in prison can be incredibly difficult, and many released inmates need to stay in shelters upon release before figuring out how to secure housing. This is certainly another avenue of potential research and policy change.

²⁴ “Catfishing” is a term used to refer to when someone misleads you over the internet about their appearance, identity, etc. It is often used in the context of dating apps, or in this case for money.

²⁵ This is in reference to the phrase “Lamb of God” which is sometimes used to refer to Jesus. Additionally, I do not feel that I am in a position to judge what is real or not real about these women’s stories, which is why I do not say “supposed ability to communicate with angels.”

²⁶ See Literature Review section, *Relationships*.

²⁷ United States, Lane County Oregon, Health and Human Services. (2018). Technical Assistance Collaborative Report. Retrieved from https://www.eugene-or.gov/DocumentCenter/View/45881/TAC-Report_Final

²⁸ <https://www.hudexchange.info/resources/documents/2017-AHAR-Part-2-Section-1.pdf>