

UNDERSTANDING THE WORKFORCE SKILLS AND DEVELOPMENT
NEEDS OF THE HOUSTON SUBURBAN HOMELESS

A Dissertation

by

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ABSTRACT

This dissertation study was a qualitative, naturalistic inquiry study written in the form of a case study about the current workforce skills, skills development needs, and potential workforce skills development interventions to help assist Houston suburban homeless and at-risk homeless obtain living wage jobs. Qualitative research data was gathered from representatives from 13 different Houston suburban homeless service providers and a subset (24) of their clients using two semi-structured interview guides.

Homelessness has continued to be a problematic, often hidden, issue in the suburbs. According to the literature, one of the primary reasons for homelessness is unemployment or underemployment due to a lack of education and skills. Job training has been cited in the literature as a top need for the Houston suburban homeless.

This study contributes to the body of knowledge on homelessness by focusing on the suburbs, by honing in on Houston, and by examining the issue from a human resource development lens leveraging human capital theory. This study confirms similar themes in the existing literature about homelessness generally, such as the reasons for homelessness, the hidden nature of homelessness, the new face of homelessness in the suburbs, and the persistence of structural barriers to work for the suburban homeless.

The study adds to the body of knowledge in terms of what specific workforce skills that suburban homeless in Houston possess (healthcare, industrial and manufacturing, and general labor/construction/landscaping) due to location and also provides more information about what types of job skills assistance the Houston

suburban homeless desire (i.e., internships, apprenticeships, on-the-job training in vocational jobs, and mentorships) and need (route them toward the most in-demand vocational, middle skill job career paths in Houston). The study also provides specific recommendations grounded in the data for service providers, the Continuum of Care, Workforce Solutions, and the Department of Rehabilitative Services.

The study builds on human capital theory to outline different non-structural and structural human capital investments needed by many homeless and at-risk Houston suburban homeless to achieve living wage jobs, improve their health and productivity, and become self-sustainable.

DEDICATION

This dissertation is dedicated first and foremost to my Lord and Savior: I can do all things through Him who gives me strength (Philippians 4:13, The New King James Version). None of this—writing this dissertation, attending school while working full time and being a single mother—would have been possible without Him.

Secondly, this dissertation is dedicated to the Houston suburban homeless and at-risk homeless service providers and the Coalition for the Homeless of Houston/Harris County. The employees of these organizations are the ones who are truly on the front lines helping to combat homelessness all throughout Houston. To all the participating service providers and their clients, I sincerely thank you for your participation in this study. I hope you find the information in this dissertation helpful to you.

Finally, I dedicate this dissertation to my late grandmother, Rachele D’Avanzo Modliszewski, or Grandma “Rocky” to those of us who knew and loved her. Grandma Rocky accomplished many things during her 93 years on this planet (working full time, while parenting three children and going to school for her Masters at Brown University; earning the Rhode Island Teacher of the Year award in 1981) and she always inspired me to “do my best,” to reach for higher levels of excellence, and to invest in my own human capital.

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I would also like to greatly thank my family: my husband, Jeff, who supported me in so many ways throughout countless absent hours of writing and working in seclusion, and my son, Alec, who learned to share me with this dissertation for the last year and a half. You both are my Heart.

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CHAPTER I INTRODUCTION

“‘Business!’ cried the Ghost, wringing its hands again. ‘Mankind was my business; charity, mercy, forbearance, and benevolence, were, all, my business. The deals of my trade were but a drop of water in the comprehensive ocean of my business!’” (Dickens, 1843)

Introduction

This dissertation study was about a specific aspect of homelessness: the human development skills, needs, and skills-related interventions that will support Houston’s suburban homeless and at-risk homeless.

In order to provide some context for this topic, it is first helpful to understand the meaning of *homelessness*. There are several connotations of *homelessness* from the researcher’s perspective: 1a) a social meaning, 1b) a policy-related meaning, and 1c) a practical meaning.

From society’s standpoint, one author defines homelessness as “a social condition, a set of social relations that are about the structures of housed society as well as how society understands those who lack shelter, and how social relations are organized” (Mitchell, 2013, p. 933).

As the next chapter (“Literature Review”) describes, homelessness has a distinct cost to society, from the explicit costs of social services provided to the homeless (cost of food; cost of shelter; cost of treatment; cost to the legal, healthcare, and penal systems, etc.; Coalition for the Homeless of Houston/Harris County, 2016; USICH,

2013) to costs to the homeless individuals themselves (including decreased levels of health, cycles of poverty, and risk of increased mortality; Culhane, Metraux, Byrne, Stino, & Bainbridge, 2013; Lee, Tyler, & Wright, 2010; USICH, 2013).

In addition to a societal meaning, homelessness also has a formal meaning when it comes to the administration of federal, state, and local policies. This formal definition is important because it subsequently determines who does and does not meet the eligibility requirements of various programs and services for the homeless. According to the Congressional Research Service (CRS), there is not really one, single definition of *homelessness* [from a policy perspective], although the most-widely adopted definition currently is that put forth by the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act of 2009, which amended the previous definition put forth by the McKinney-Vento Homeless Assistance Act of 1987 (Baker, Billhardt, Warren, Rollins, & Glass, 2010; CRS, 2014; HUD, 2014; National Alliance to End Homelessness, 2008). (The operational definition of homelessness for this study is defined in the section later in this Chapter called “Operational Definitions”). A broader definition of homelessness for policy purposes is adopted by the U.S. Department of Education, which includes people living doubled up with families and friends and people temporarily living in motels (Shipley, 2015).

Finally, and probably most significantly to those who are homeless, homelessness has a practical meaning: To homeless individuals, it means that they do not have a secure place to sleep at night and either take advantage of the many safety net

type services offered by both the public and private sector, and/or operate on their own by sleeping under bridges, in streets, in cars, and in abandoned buildings.

Characteristics of the Homeless

It has been described that the homeless are not a uniform group (Lee et al., 2010) and the literature shows that the characteristic of homeless individuals may vary by factors such sheltered/unsheltered status, type of homeless (chronic versus transitional or temporary), and location/geography (Lee et al., 2010; Ferguson, Jun, Bender, Thompson, & Pollio, 2009). However, some general observations can be made about the homeless from the literature: Minorities, especially African Americans and Hispanics, are overrepresented in the homeless population (Burt, Aron, Lee, & Valente, 2001; Hatchett, 2004; First & Roth, 1988; Keuroghlian, Shtasel, & Bassuk, 2014; Lee et al., 2010; Nunez & Fox, 1999; Spellman, Khadduri, Sokol, Leopold, & Abt Associates, Inc., 2010; Ringheim, 1993). The number of homeless students and families with children continues to be problematic (Bidwell, 2013; Losinski, Katsiyannis, & Ryan, 2013; Sulkowski & Joyce-Beaulieu, 2014). Homeless families tend to be headed by women (Brown & Mueller, 2015; Coalition for the Homeless of Houston/Harris County, 2016; Culhane et al, 2013; Lee et al., 2010; Haber & Toro, 2004; Nunez & Fox, 1999), whereas homeless individuals tend to be male (Culhane et al., 2013). The chronically homeless are typically male (Lee et al., 2010) and many of the chronically homeless have mental health and/or substance abuse issues (Burt, 2003; Zuvekas & Hill, 2000). And the homeless tend to have low levels of work skills (Lee at al., 2010; Lei; 2013; Long, Rio,

& Rosen; 2007; Snow & Anderson, 1993) and education (Lei, 2013; Nunez & Fox, 1999).

Nature of Homelessness

There are three types of homelessness commonly cited in the literature: 1a) transitional/temporary, 1b) episodic, and 1c) chronic (Culhane, Mettraux, Park, Schretzman, & Valente, 2007; Lee et al., 2010). Transitional/Temporary homelessness is the most common (Culhane et al., 2007; Lee et al., 2010). Episodic homelessness characterizes people who have recurring episodes of homelessness (but not to the extent of chronic). Someone who is considered chronically homeless is someone who “has a disabling condition and either remains homeless for longer than a year or experiences four or more periods of homelessness over the course of three years” (TICH, 2012, p. 14). As of the annual Point in Time (PIT) count in January 2014, there were approximately 100,000 Americans who were chronically homeless (HUD, 2014). Many of these individuals struggle with mental, physical, and substance abuse issues (Burt, 2003; Lei, 2013; Zlotnick, Robertson, & Tam, 2002; Zuvekas & Hill, 2000), and research has found that it is these individuals who consume the majority of the homelessness resources (TICH, 2012).

Homeless people tend to be more visible in urban areas, where most homeless services tend to reside (National Coalition for the Homeless, n.d.). Homelessness in the suburbs has been referred to an invisible or hidden issue (Daiski, Halifax, Mitchell, & Lyn, 2012; Deam., n.d.; Lee, 2007). The annual point in time counts typically undercount the true number of homeless because they do not include people doubled up,

staying in motels, or mobile homeless (Deam, n.d.; National Law Center on Homelessness and Poverty, 2013).

Causes of Homelessness

Although homelessness is a complex issue with many underlying contributing factors, the literature cites an inability to afford housing/lack of affordable housing and unemployment/underemployment as key factors leading to homelessness (Coalition for the Homeless of Houston/Harris County, 2016.; Hill, 1994; Lei, 2013; TICH, 2012; Troisi, Ritalinda, & Stoll, 2012; U.S. Conference of Mayors, 2013). For example, the authors of a survey sponsored by the U.S. Conference of Mayors of 25 cities across the nation reported unemployment was the leading cause of homelessness by unaccompanied individuals (U.S. Conference of Mayors, 2013).

Background

The Extent of Homelessness in Society

Homelessness is a pervasive problem in the United States. And despite much progress in recent years by federal and community organizations and partnerships, homelessness is still a significant issue. According to HUD, on a single night in January 2013, more than half a million individuals counted as homeless in the United States, with approximately one-third of those counted under the age of 24 (HUD, 2014). It is important to note that this is a point-in-time count; the actual number of homeless at any given time as well as the number of people who experience homelessness over the course of a year in the United States may be much greater. According to one estimate, as many as 3.5 million Americans experience homelessness throughout any given year

(Mitchell, 2013). Although homelessness has been declining overall in recent years, according to the authors of the U.S. Conference of Mayors survey, homelessness increased in almost half of the cities surveyed (U.S. Conference of Mayors, 2013).

Texas is one of the four states in the nation with the highest percentage of homeless individuals, joined by California, Florida, and New York. In Texas alone, there were almost 30,000 individuals counted as homeless (THN, 2013), with one estimate citing that more than 90,000 Texans experiencing homelessness throughout the course of a year (TICH, 2012).

Homelessness is also a major issue in Houston, the fourth largest city in the United States. According to the Coalition for the Homeless of Houston/Harris County, the January 2014 Houston PIT homeless count found almost 7,000 homeless individuals in Houston (Coalition for the Homeless of Houston/Harris County, 2014; Troisi, 2014).

Although homelessness has been decreasing due to many focused, concentrated efforts and programs to serve the needs of the urban population, it has been on the increase in the suburbs (Lee, 2007; Samad, 2009; Spivak, 2007), particularly for families and students (CBS News, 2010; Silverberg, 2014). According to recent estimates from researchers at the U.S. Department of Housing and Urban Development, approximately 40 percent of the nation's homeless live in smaller cities, suburbs, or regional continua of care (HUD, 2014). A continuum of care is a network of homeless service providers, often led by a lead agency (such as the Coalition for the Homeless of Houston/Harris County in Houston) for HUD grant purposes.

This problem is also keenly felt in Houston. According to the *Houston Chronicle*, social service providers are seeing a consistent increase in the number of homeless on the streets and in shelters, and their resources are being tapped out (Lee, 2007).

Homelessness and Skills Development

Some homeless struggle with mental and physical health issues, along with substance abuse issues. These can be significant barriers to employment of the homeless (Radey & Wilkins, 2011; Shaheen & Rio, 2007; Zuvekas & Hill, 2000). Yet according to researchers, many homeless individuals desire to work (Lei, 2013; Long, Rio, & Rosen, 2007; Shaheen & Rio, 2007; Snow & Anderson, 1993), and even chronically homeless individuals and those with disabilities often can and want to work (Marrone, 2005; Rog & Holupka, 1998; Radey & Wilkins, 2011; Shaheen & Rio, 2007; SAMHSA, 2003; Theodore, 2000; Trutko et al., 1998).

Depending on the type of homelessness, a key need of many of the homeless is workforce development. For example, research sponsored by the Coalition for the Homeless of Houston/Harris County (2011) found that 40 percent of those homeless surveyed cited adult education and 70 percent cited job training as key needs (Fleming, 2011).

Although employment-related and economic issues are leading contributing causes, most of the literature uncovered by the researcher examines homelessness from sociological, psychological, demographic, legal, and policy-related lenses, and the research found did not delve deeply into the specific workforce skills and development needs of the homeless. For example, researchers affiliated with the Coalition for the

Homeless of Houston/Harris County (2011) cite a lack of adult education and job training as key service needs for the Houston population (Fleming, 2011), but there is not any more detail in this research concerning what specific types of workforce skills the population has, what particular types of training or workforce skills they need, and what the local community has seen to be most effective in terms of workforce-related offerings to the homeless.

Furthermore, although poverty and homelessness have been on the rise in the suburbs, the researcher was able to uncover only one peer-reviewed study specifically related to the needs of the suburban homeless, and this study was not focused on work skills and skill gaps of the homeless per se. The study was conducted on the homeless in Orange County, California (a suburb of Los Angeles) and compared the wants of the suburban homeless to the offerings of the suburban homeless. The study found that there is often a mismatch between the needs and the offerings of the suburban homeless (Crane & Takahashi, 1998).

Homeless Interventions

Most interventions for the homeless reviewed in the literature focused on housing first/rapid re-housing, and/or permanent supportive housing approaches with wraparound services, including potential employment and skills-related services. HUD has defined *rapid re-housing* as “a housing model designed to provide temporary housing assistance to people experiencing homelessness, moving them quickly out of homelessness and into permanent housing” (HUD, 2014, p. 2). HUD defines *permanent supportive housing* as “designed to provide housing and supportive services on a long-term basis for formerly

homeless people who have disabilities” (HUD, 2014, p. 2). Some of the persistent challenges reported in the literature with regards to homeless services a lack of integration across service providers/programs program, application bureaucracy (Radey & Wilkins, 2011; Shaheen & Rio, 2007; TICH, 2012) and a lack of trust by homeless clients of service providers (Shaheen & Rio, 2007). An additional challenge comes from less emphasis on programs for the non-chronically homeless, as well as not enough stress on the ultimate root causes of homelessness, such as lack of affordable housing, work skills, and education (Mitchell, 2013).

To help address the problem of homelessness, it is critical to conduct research aimed at understanding the workforce competencies, skills, and knowledge of the homeless. It is even more important that research involve homeless individuals and agencies working to help address the homeless problem, which drove the need for this study.

Statement of the Problem

As noted in the background of this study, homelessness remains a significant issue in the United States, in Texas, and in Houston. It has migrated in recent years from traditional urban and city centers to the suburbs. And the homeless in the suburbs appear to have different motivations and different needs—indeed, different faces. For instance, whereas the urban stereotype of homelessness involves typically males panhandling alone, in the researcher’s own suburb of Katy, Texas, one might see women or men accompanied by their pets and/or entire families by the local Wal-Mart begging for food and gas. As bemoaned by Marley’s ghost in Dickens’ classic *The Christmas Carol*, it is

the researcher's perspective that ignoring the plight of humankind in these conditions is not acceptable. If a lack of job skills and abilities leading to unemployment/underemployment of the homeless are indeed key contributors to the pathways into homelessness, then it would seem prudent to further investigate what types of skills and abilities the suburban homeless have currently, what they need, and ways that they can be aided in overcoming these workforce- and skills-related gaps in order to find living-wage jobs and more secure housing situations.

In essence, the research problem is that there is a population of homeless in the Houston suburbs who are unemployed, underemployed, and/or are currently working in jobs that do not provide a living wage, thus miring them in continuous homelessness. This homelessness has adverse repercussions on society and on the homeless clients themselves. This study sought to understand their current work skills, the skills gap, and skills-related interventions that might help them obtain living-wage jobs. Furthermore, there is a tremendous need in Houston for employees in middle skills jobs (typically jobs that require a high school diploma and some type of trade or vocational school, not a Bachelors degree); the Houston suburban homeless might be one potential feeder pool for these jobs.

Purpose of the Study

The purpose of this study was to establish the perceptions of staff members working for Houston suburban homeless service provider organizations and of their homeless clients regarding the clients' current workforce skills, workforce skills development needs, and potential workforce skills development programs and

interventions that might assist clients to achieve living wage employment. Therefore, the researcher gathered qualitative research data from two primary audiences: a) the suburban homeless service providers and b) the suburban homeless clients themselves.

Research Questions

Research questions addressed in the study follow:

1. What are the perceptions of staff members working for Houston suburban homeless service provider organizations regarding their clients' current workforce skills?
2. What are the perceptions of Houston suburban homeless service provider clients regarding their current workforce skills?
3. What are the perceptions of staff members working for Houston suburban homeless service provider organizations regarding their clients' workforce skills development needs?
4. What are the perceptions of Houston suburban homeless service provider clients regarding their workforce skills development needs?
5. What are the perceptions of staff members working for Houston suburban homeless service provider organizations regarding potential workforce development programs and interventions that might assist clients to achieve living wage employment?
6. What are the perceptions of Houston suburban homeless service provider clients regarding potential workforce skills development programs and interventions that might assist them to achieve living wage employment?

Theoretical Framework

The theoretical framework underlying this dissertation is human capital theory. In his paper discussing the mechanics of economic development, Lucas (1988) delineated two types of capital: 1) physical capital (such as machinery used in production), and 2) human capital (e.g., people's knowledge and skills).

Schultz (1961), one of the founding scholars of human capital theory, argued that the knowledge and skills of people gleaned via training and education are valuable types of capital expected to generate benefits, and that such capital is a form of intentional investment.

Becker (1993), another early contributor to human capital theory, discussed the rational process involved in people's decisions to invest in their own training and development, and also referenced the positive link between this investment and individual earnings.

McMahon's (2006) discussion of human capital with regards to education finance policy extends benefits of an investment in education to include "non-market" returns for individuals and society, such as better health outcomes, increased civic participation, better harmony between races, less unemployment and crime rates, and a wider dissemination of new technology.

Nafukho et al. (2004) provide a chronological review of the literature and how the definition of human capital has evolved over time. Ultimately, some key points across their reviewed human capital research are that people are as valuable a resource in the production of organizational goods and services as other kinds of organizational

assets, such as physical capital. Human capital theory considers the training and education of people as investments, and the benefits include increased individual earnings, improved organizational productivity, and benefits to society (Nafukho et al., 2004). A visual depiction of the key tenets of human capital theory is shown in Figure 1 below.

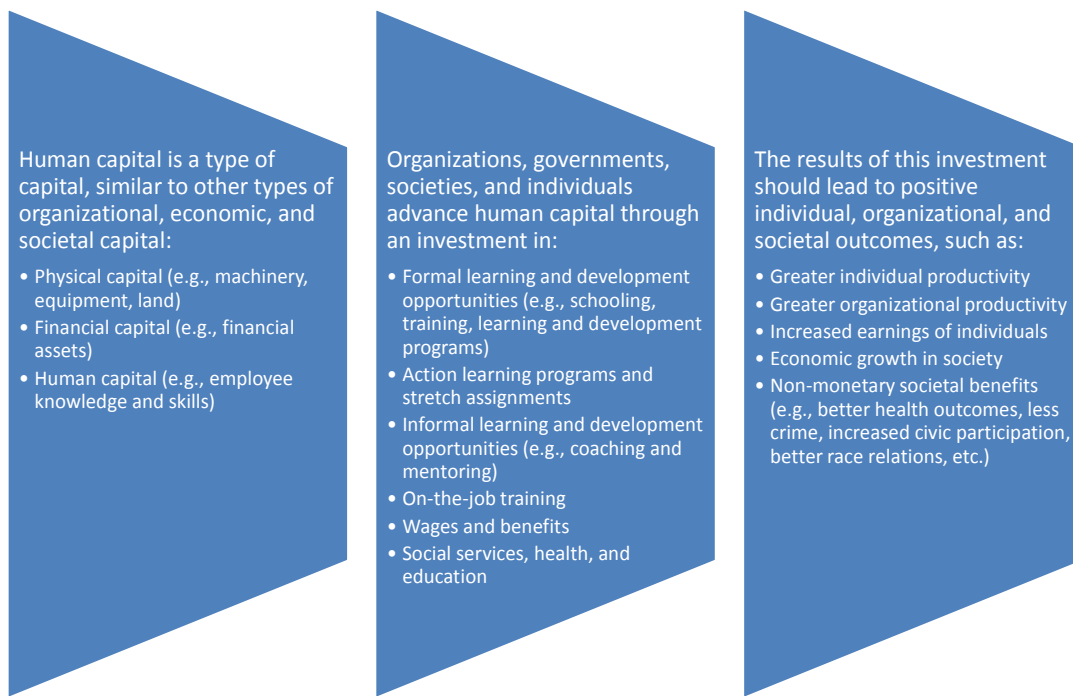


Figure 1. Key tenets of human capital theory.

This dissertation study was a study about work skills and skills development interventions of Houston’s suburban homeless and therefore lends itself to an economic

theory of human capital, such as human capital theory, as its primary underpinning. The researcher sought to build a case for the investment by service providers, employers, and society in human capital (in the case of this study, the Houston suburban homeless and at-risk homeless), and argues for the specific types of human capital investments that the Houston suburban homeless and at risk homeless most need. By investing in the skills and knowledge of the Houston suburban homeless, society and service providers help to increase productivity of these individuals not only for the good of the Houston homeless individuals but also for the greater good of the City.

Significance of the Study

This research addressed three perceived gaps in the literature: a) a study of the suburban homeless (opposed to urban, the traditional focus of studies of homelessness); b) understanding what are the current workforce skills and skills development needs of this particular location under examination (Houston suburbs); and c) examining the workforce-related issues of suburban homelessness from human resource development lens (opposed to the more traditional sociological, psychological, demographic, legal, and policy-related lenses) leveraging human capital theory.

The study results uncovered what work skills the Houston suburban homeless have, what skills that they need, and the potential workforce skills development interventions or initiatives to get them into better jobs that will help them exit homelessness. The stakeholders that should most benefit from the research include local Houston suburban service providers to the homeless (by helping them to more efficiently serve their clients and transition them out of homelessness), local Houston policy makers

(by helping them apply resources to interventions that work), and of course, the local suburban homeless and at-risk homeless themselves (by helping them exit or avoid homelessness through living-wage employment). The study findings also contribute to the body of literature on the topic of homelessness in the suburbs and homelessness and workforce skills development that future researchers can build upon.

Methods

The research was conducted according to naturalistic inquiry (Lincoln & Guba, 1985), conducted as a case study to primarily gather interview data from the Houston suburban homeless service providers and clients using two semi-structured qualitative interview guides.

Delimitations of the Study

Homelessness is a very broad topic that has already been researched from many angles (causes, pathways, phenomenon, interventions, policies, criminalization, homelessness by sub-population, etc.). However, this study focuses on the career- or human-development aspects of homelessness (specifically, workforce skills, gaps, and related interventions of the suburban homeless) and not on the general phenomenon of homelessness. Thus, the methodology is a descriptive case study methodology rather than ethnography or phenomenology on homelessness more generally speaking.

Limitations of the Study

The primary limitation of this study is a lack of generalizability due to the nature of the naturalistic inquiry qualitative data collection. However, the goal of naturalistic inquiry is not to generalize (Lincoln & Guba, 1985) but rather to examine and/or

understand the particulars of a specific situation, organization, phenomenon, and/or context. And it is the job of the researcher via this dissertation to provide enough thick description to allow the reader to judge the transferability of the information in the sending context (the current study) to the receiving context (that of the reader).

Operational Definitions

Homelessness is used in this study to refer to:

1. people who are living in a place not meant for humans to be living in (such as on the streets, in encampments, or in cars),
2. people living in shelters or in transitional housing or programs, or
3. people who are at imminent risk of losing their housing (e.g., at risk of becoming homeless and people in homeless prevention programs, where an eviction notice is a qualifier).

The term *suburbs* in this study refers to the surrounding smaller cities and neighborhoods surrounding the outside of downtown Houston (e.g., non-inner city), ranging from about 15 to 45 miles from downtown to the north, south, east, and west. Example suburbs include Baytown, Clear Lake, Conroe, Cypress, Humble, Jersey Village, Katy, Kingwood, Pasadena, Spring, Spring Branch, Sugarland, Tomball, and the Woodlands.

The term unemployment is self-explanatory; *underemployment*, however, for purposes of this study means clients are employed and earning income, but the income coming in is not enough to sustain them (e.g., pay rent, utilities, household bills, food, and other basic needs).

Finally, this study examines the workforce implications of homelessness in the suburbs of Houston by leveraging a *career- or human-development* lens rather than a sociological or anthropological lens. Career development is one of the three major legs of the discipline of human resources development, which in addition to career development spans training and development and organization development (Swanson & Holton, 2005).

Chapter Summary

In summary, this study's research was conducted in response to a perceived gap in the literature for academic research focusing on the workforce- and skills-related needs of the suburban homeless in Houston from the standpoint of a career- or human-development lens. Under an overarching umbrella of a pragmatic and transformative worldview, the researcher leveraged naturalistic inquiry and gathered data via interviews in order to write a qualitative case study to help aid the plight of the Houston suburban homeless from a workforce perspective. Like Marley's ghost in Dickens' classic tale, I believe that humankind is my business and part of my personal and moral responsibility to address.

This introductory chapter orients the reader to the topic and its significance, the proposed research questions and methodology, and the gaps in the literature that the research fills. Chapter 2 (Literature Review) delves in-depth into an exploration of pertinent aspects of homelessness as it relates to this study: definition; policy; strategy; statistics at the federal, state, and local level; statistics for the suburbs; existing research regarding homelessness and skills and education levels; and current skills gaps needs in

Houston. Chapter 3 (Methodology), details the study methods including paradigm; methods; researcher's role and assumptions; trustworthiness, credibility, and authenticity; limitations; and timeline. Chapter 4 details study results and key themes, and Chapter 5 addresses a discussion of the study findings, recommendations, and suggestions for future research.

CHAPTER II LITERATURE REVIEW

Introduction

Chapter 2, Literature Review, explores what is already known about the topic, informs the reader about past findings in the area of exploration, and grounds the research in the appropriate history and context. For purposes of this study, the literature review is organized into the following sections:

1. background;
2. recent relevant U.S. federal policy, programs, and strategy regarding homelessness, specifically regarding workforce and skills development;
3. homelessness in the United States;
4. homelessness in Texas;
5. homelessness in Houston;
6. suburban homelessness; and
7. homelessness and skills development.

The literature review illustrates the need for primary research on the current skills and skills gaps of Houston's suburban homeless that is addressed in this study.

Method

The literature review was conducted via a search of both scholarly and practitioner literature on the key subtopics listed above. Both an Internet search and a search of subscription databases leveraging the Texas A&M University electronic library

were conducted. The search terms varied by sub-topic. The table below lists some of the key search terms leveraged per sub-topic area:

Topic	Key Search Terms
Background and policy	Homelessness and law Homelessness and public policy Homeless legislation in the United States McKinney Vento Act HEARTH Act
Homelessness in the United States	Counts of homelessness in the United States Demographics of homelessness in the United States United States and homeless statistics
Homelessness in Texas	Counts of homelessness in Texas Homelessness and Texas Causes of homelessness in Texas Demographics of the homeless in Texas Texas homeless statistics
Homelessness in Houston	Houston homelessness Houston and social welfare
Suburban homelessness	Suburban homelessness Suburban panhandling Homelessness in the Houston suburbs Panhandling in the Houston suburbs Homelessness in Katy, Texas Panhandling in Katy, Texas Panhandling in the suburbs Homelessness in the suburbs Causes of homelessness in the suburbs Suburban homelessness and the recession
Homelessness and skills development	Education levels of homeless adults Skill levels of homeless adults Homeless and skills gaps Homeless and employment Homeless and employment training Homeless and skills training Skills gaps in Houston Workforce needs in Houston

Table 1. Key search terms by literature review sub-topic.

Background

“...homelessness spans a continuum of deprivation, from a lack of housing or stable dwelling over time or on any given night, to a lack of social and material resources necessary to acquire and maintain housing.” (Crane & Takahashi, 1998, p. 36)

Definition of Homelessness

Prior to engaging in a discussion of the literature as it relates to homelessness, and specifically literature regarding the current skills and skills gaps of the suburban Houston homeless, it is first helpful to understand what is meant by the term *homeless*. This definition is not only important to the academic discussion in this paper, but also determines who is eligible to receive various services for the homeless. According to the Congressional Research Service (CRS, 2014), the public-policy research branch of the U.S. Congress, there is no one definition of *homelessness*. Different entities have adopted different definitions, depending on their mission and customer base. However, the most-widely adopted definition of homelessness currently is that put forth by the Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act of 2009, which amended the previous definition put forth by the McKinney-Vento Homeless Assistance Act of 1987 (both Acts described in an upcoming section; Baker, Billhardt, Warren, Rollins, & Glass, 2010; CRS, 2014; HUD, 2014.; National Alliance to End Homelessness, 2008). Under the HEARTH Act, a homeless individual is defined as:

- a person who does not have a regular place to sleep at night and who typically sleeps in a public or private shelter, an institution, or a place not meant for humans to regularly sleep in;

- a person defined as *homeless* according to other federal programs (in specific circumstances);
- a person who is at looming risk of losing their housing; and
- a person who is trying to escape domestic or dating violence, sexual assault, stalking, or other dangerous or threatening situations in his/her current household circumstances, which includes instances where his/her children are also threatened (CRS; 2014).

Cost of Homelessness

Once a common understanding of what it means to be *homeless* has been attained, it is helpful to discuss why we care about homelessness. There are tremendous economic, community, and individual costs of homelessness. For example, according to the Coalition for the Homeless of Houston/Harris County, homelessness costs our society in terms of the price tag of healthcare treatment and hospital visits incurred by homeless individuals, the cost to the judicial system, the cost of police involvement, the cost of jailing the homeless, and the cost to run service provider organizations, among other costs. In fact, per the Coalition, approximately \$103 million total is spent in Houston every year in Houston on those classified as chronically homeless (Coalition for the Homeless of Houston/Harris County, 2016.).

The cost to run service provider organizations is not insignificant either; research on six communities selected for one study estimates the average monthly cost for people experiencing homelessness for the first time for emergency shelter, transitional housing,

and permanent supportive housing ranges from \$1,634 per individual per month to up to \$20,031 per family per month (Spellman et al., 2010).

In addition to the obvious suffering and deprivation from a lack of shelter and often other necessities, homelessness is costly to the individual himself/herself who is homeless: From an individual standpoint, research shows that the homeless have chronic illnesses and conditions more often than the general population, as well as a greater chance of dying at a younger age (Lee et al., 2010; USICH, 2013). Certain sub-populations of homeless individuals suffer even more, notably homeless children, who move schools more often, have higher rates of being absent from school, have lower test achievement scores, and are at higher risk of learning disabilities and behavioral issues than their non-homeless counterparts (Lee et al., 2010; Rafferty, Shinn, & Weitzman, 2004; Zima, Bussing, Forness, & Benjamin, 1997). Lesbian, Gay, Bisexual, and Transgender (LBGT) homeless youth also suffer more compared to their same-aged peers, with higher rates of mental health problems, substance abuse issues, suicide, victimization, and HIV (Keuroghlian et al., 2014). The cost of homelessness to society, communities, and individuals is tremendous.

A Brief History of U.S. Homelessness

It is also helpful to ground this discussion with a brief overview of the history of homelessness in the United States, and specifically when it came to the forefront of the radar of U.S. governmental policy makers. Prior to the 1970's, homelessness was typically personified by skid rows (e.g., run down parts of town) characterized mostly by individual, single, homeless males. But in the 1970's, homelessness became more

noticeable to the U.S. public, and started to look different: The homeless became more diverse by gender (encompassing more women and families), by age (with younger individuals becoming homeless), and exhibited higher levels of mental issues, substance (drug and alcohol) abuse, and unemployment. Therefore, U.S. Federal governmental attention began to directly target the issue of homelessness in the 1980s (CRS, 2014). Since that time, a number of laws have been passed by various Presidents to address issues of homelessness in the United States. The issue of homelessness was again raised to the forefront with the recent economic crisis of 2007 to 2008 (Lee et al., 2010).

Recent Major U.S. Federal Policy and Programs Regarding Homelessness

In March 2011, the U.S. acknowledged for the first time that rising homelessness implicates its human rights obligations and made commitments to the UN's Human Rights Council to reduce homelessness, reinforce safeguards to protect the rights of homeless people, and to continue efforts to ensure access to affordable housing for all (National Law Center on Homelessness and Poverty, 2012, p. 4).

The following summarizes some of the notable legislation from the 1980's onwards targeted toward alleviating homelessness.

McKinney-Vento Homeless Assistance Act of 1987

The Stewart B. McKinney Homeless Assistance Act of 1987 (originally named after the Connecticut Congressman who sponsored the Act), signed by then President Ronald Regan and later renamed the McKinney-Vento Homeless Assistance Act (also named after the Minnesotan Congressman Bruce Vento, a primary supporter of the act after its initial passage), was the nation's first law to comprehensively address the issue of homelessness in the United States (Coalition for the Homeless of Houston/Harris

County, 2016; Losinski et al., 2013; National Law Center on Homelessness and Public Policy, 2012; Stanhope & Dunn, 2011). The primary objective of this legislation was to increase services to the homeless in the United States, and today it provides a variety of federal financial grants and programs for the homeless, such as for food, shelter, education, and health care (CRS, 2014; Coalition for the Homeless of Houston/Harris County, 2016). The McKinney-Vento Act serves as landmark legislation for homeless students, providing access, support, and stability with regards to schooling, ensuring that homeless students have the same rights and benefits of non-homeless students, and removing barriers from them attending their original school (Gargiulo, 2006; James & Lopez, 2003; Sulkowski & Joyce-Beaulieu, 2014). For example, the Act requires schools to enroll homeless students regardless of whether or not they can produce the required documentation for enrollment, and mandates that they be provided with access to transportation to attend their original school if they would like to (James & Lopez, 2003). The Act also established the U.S. Interagency Council on Homelessness (USICH), a cross-federal agency whose objective is to coordinate the response to homelessness of the U.S. federal government (CRS, 2014), and which is required to create a federal strategic plan to end homelessness and update and report on it annually (National Alliance to End Homelessness, 2008). The McKinney-Vento Act has been amended and reauthorized multiple times over the years, but was most recently reauthorized by the HEARTH Act of 2009, signed by President Obama (Coalition for the Homeless of Houston/Harris County, 2016).

No Child Left Behind (NCLB) Act of 2001

Signed by President George H. Bush in 2001, NCLB was broader in scope than addressing just the issue of homelessness students, but it did update provisions of the McKinney-Vento Homeless Assistance Act, including new requirements that allow homeless students to attend their original school while they are homeless and that the schools provide them transportation to this school, if needed (James & Lopez, 2003).

Homeless Veterans Comprehensive Assistance Act of 2001

Signed by President Clinton, the Homeless Veterans Comprehensive Assistance Act of 2001 created programs to provide job training and assistance for homeless veterans who are exiting prison, long-term care facilities, or mental health institutions (CRS, 2014).

Runaway and Homeless Youth Act of 2008

Signed by President George W. Bush, the Runaway and Homeless Youth Act of 2008 provides funding for programs that help young homeless individuals who have run away from home, such as street outreach programs, facilities where homeless or runaway youth can drop in for the day for food and shelter, other programs providing food and clothes, and programs providing counseling (Keuroghlian et al., 2014).

HEARTH Act of 2009

In addition to amending the definition of homelessness and again re-authorizing the McKinney-Vento Act, the HEARTH Act of 2009 made other changes to homeless assistance programs, including expanding HUD's homeless prevention programs, offering new incentives for the rapid re-housing of homeless families, allowing families

to also be considered as chronically homeless for purposes of permanent supportive housing programs, offering additional flexibility and assistance to rural families, and increasing the importance of results and research in driving decisions regarding programs for the homeless. The HEARTH Act also reauthorized the USICH and instructed it with the responsibility to create a national strategic plan to end homelessness, which is to be revisited on an annual basis (National Alliance to End Homelessness, 2009). Houston is considered a priority community for purposes of the HEARTH Act, which requires the community (rather than service providers in the community) to show results for preventing and decreasing the level of homelessness in the community (Troisi, Ritalinda, & Stoll, 2012).

American Recovery and Reinvestment Act of 2009

Although the primary focus of the American Recovery and Reinvestment Act of 2009 was not homelessness (the Act was primarily a stimulus package to help bring the country out of the recession), this Act did contribute to the federal homelessness offerings by creating the Homeless Prevention and Rapid Re-Housing Program (HRPR). This program offers three to 18 months' worth of rental assistance, along with case management, to help prevent homelessness, as well as services to rapidly re-house the literally homeless and to work with them to attain housing (Fleming, 2011).

Violence against Women Act of 2005 and Reauthorization Act 2013

Signed by President Obama, the reauthorization of this act offers protection for and housing rights for victims of domestic and dating violence, sexual assault, and stalking, and prohibits denial of public housing assistance on the basis of a person's victimization. The Act also includes services to help victims obtain employment, job training, and workforce counseling (CRS, 2014). This Act actually originated in 1994, and in its 2005 reauthorization provided protection for victims by prohibiting evictions on the basis of a person's victimization (Baker et al., 2010).

Affordable Care Act of 2014

Signed by President Obama, the Affordable Care Act is comprehensive health care legislation designed to help those Americans who do not currently have health care coverage to obtain access to affordable healthcare. This Act also has important implications for the homeless, providing access to Medicaid for homeless adults via the Medicaid expansion component of the Act (Tsai, Rosenheck, Culhane, & Artiga, 2013).

Federal Programs for the Homeless

The CRS regularly publishes a comprehensive document that describes the current federal programs and legislation, many of which were established by the McKinney-Vento Homeless Assistance Act, related to homelessness and any recent developments in this area. According to the CRS, there are currently 17 major programs offered by eight U.S. Federal agencies that provide support to the homeless, summarized in Table 2 (CRS, 2014).

Federal Agency	Name of Program	Short Description of Program
Department of Education	Education for Homeless Children and Youth Program	Provides assistance to State Educational Agencies (SEAs) in order to offer homeless students equal access and rights to the same free public education that non-homeless students have
Department of Homeland Security/FEMA	Emergency Food and Shelter Program	Provides funding to local communities for homeless programs and prevention
Department of Health and Human Services (HHS)	Healthcare for the Homeless, Projects for Assistance in Transition from Homelessness (PATH), Grants for the Benefit of Homeless Individuals (GBHI), Runaway and Homeless Youth Program	Healthcare for the Homeless—Provides grants to nonprofits, state, and local governments to operate outpatient healthcare facilities for the homeless for their general healthcare and substance abuse treatment and prevention needs PATH—Provides grants to states for local organizations that provide services for those who are homeless with serious mental illnesses GBHI—Provides grants for substance abuse services for the homeless Runaway and Homeless Youth Program—Provides funding for services for runaway and homeless youth
Department of Justice	Transitional Housing Assistance for Victims of Sexual Assault, Domestic Violence, Dating Violence, and Stalking	Provides funding for housing and related services for victims

Table 2. U.S. federal programs to aid the homeless. (Congressional Research Service, 2014)

Federal Agency	Name of Program	Short Description of Program
Department of Housing and Urban Development (HUD)	Homeless Assistance Grants	Grant programs that provide housing and services for the homeless. These grants are organized into two programs: 1) Emergency Solutions Grants (ESG), and 2) Continuum of Care (Supportive Housing, Section 8 Moderate Rehabilitation Assistance for Single-room Occupancy Dwellings, and Shelter plus Care)
Department of Veterans Affairs (VA)	Health Care for Homeless Veterans, Homeless Providers and Grant Per Diem Program, HUD-VASH, Incentive Therapy Program, Compensated Work Therapy Program, Supportive Services for Veteran Families, Homelessness Prevention Demonstration Program	Healthcare for Homeless Veterans—Provides healthcare treatment and services at VA sites to homeless veterans Homeless Providers and Grant Per Diem Program—Provides grants to build or rehabilitate facilities for housing and services for homeless veterans, as well as funds services to homeless veterans HUD-VASH—Provides homeless veterans housing vouchers from HUD and services from the VA Incentive Therapy Program—Provides paid therapeutic work assignments for homeless veterans at VA medical centers Compensated Work Therapy Program—Prepares homeless veterans for employment and independent living

Table 2. continued.

Federal Agency	Name of Program	Short Description of Program
Department of Veterans Affairs (VA) continued		Supportive Services for Veteran Families—Provides supportive services for low-income veterans and their families to help them transition out of homelessness Homelessness Prevention Demonstration Program—A pilot program to help prevent veteran homelessness.
Department of Labor	Homeless Veterans Integration Program	Provides grants to states and nonprofits for employment programs for homeless veterans
Social Security Administration	SSI/SSDI Outreach, Access, and Recovery (SOAR)	Helps the homeless obtain social security income and disability benefits

Table 2. continued.

Each program clearly articulates what the permissible uses of funds are (and are not). While the area of emphasis of many of these programs is on housing (housing first, rapid-rehousing, and permanent supportive housing), many also offer other related supportive services, such as substance abuse and treatment, life skills training, and skills and employment related services. Regarding the latter, for example, the Healthcare for the Homeless centers may work to connect their homeless clients with job training services; HHS PATH grants may be used for job training services for the homeless; services under the Transitional Living Program (under the Runaway and Homeless Youth Program) may provide education and job preparation and job seeking assistance; and Emergency Solutions Grants may be used for ancillary services (in addition to shelter), such as for employment and education. There are also programs specifically

dedicated to workforce and skills training, such as the VA's Incentive Therapy Program, Compensated Work Therapy Program, and Homeless Veterans Reintegration Program.

Federal Strategy Regarding Homelessness

The U.S. federal government has made great strides over the last 35 years in its efforts to end homelessness, from the pre-1980's when there was little recognition of the priority of ending homelessness, to in 2011, for the first time in its history, recognizing and elevating homelessness to that of a human rights issue (National Law Center on Homelessness and Public Policy, 2012). As previously mentioned, the HEARTH Act of 2009 reauthorized the USICH (comprised of 19 Federal agencies) and mandated that this body create a ten-year strategic plan to end homelessness. The "Opening Doors" strategic plan was first published in 2010, and articulated five overarching themes for ending homelessness (with ten objectives and 58 corresponding strategies):

1. increasing leadership, collaboration, and civic engagement;
2. increasing access to stable and affordable housing;
3. increasing economic security;
4. improving health and stability; and
5. retooling the homeless crisis response (CRS, 2014; USICH, 2013).

Increasing economic security is one of the five themes in the federal strategic plan to end homelessness, and according to the 2013 update of "Opening Doors" the focus of this part of the strategic plan is "increasing meaningful and sustainable employment opportunities for all sectors of our society, improving access to mainstream workforce and income support programs to reduce financial vulnerability to

homelessness” (p. 25). But additional detail in the 2013 update shows the areas of emphasis are primarily regarding homeless veteran employment, certainly a deserving audience but representing only one portion of the homeless population that might require workforce and skills development support.

Homelessness in the United States

“While efforts have resulted in significant progress, the latest national estimates also remind us that hundreds of thousands of Americans each year are homeless.” (HUD, 2014, p. 3)

Characteristics of the U.S. Homeless

According to HUD, on a single night in January of 2013, there were over half a million individuals counted as homeless. Over two-thirds of these individuals in the count were sheltered, and the remainder unsheltered. One-third of the individuals counted were children (under the age of 18, 23 percent) or youth (aged 18 to 24, 10 percent). This information is gleaned from the 2014 annual “Point in Time” (PIT) count. According to HUD, “Point-in-Time Counts are unduplicated one-night estimates of both sheltered and unsheltered homeless populations. The one-night counts are conducted by Continuums of Care nationwide and occur during the last week of January of each year” (HUD, 2014, p. 2). Correspondingly, “Continuums of Care,” per HUD, are “local planning bodies responsible for coordinating the full range of homelessness services in a geographic area, which may cover a city, county, metropolitan area, or an entire state” (HUD, 2014, p. 2).

It is important to emphasize that PIT counts represent a snapshot of time; the actual number of homeless at any given time as well as the number of people who experience homelessness over the course of a year in the United States may be much greater. The HUD PIT count does not include people living “doubled up” with family and friends and is an estimate at best (National Law Center on Homelessness and Poverty, 2013). According to one estimate, as many as 3.5 million Americans experienced homelessness throughout the course of one year (Mitchell, 2013).

The demographics of homelessness vary depending on a number of factors, such as geography, age, gender, sheltered status, in families versus individual, chronic versus non-chronic, veteran status, etc. As Lee et al. aptly stated: “The homeless are not a monolithic or homogenous group; homeless men and women have different characteristics. Demographic composition also depends on context, with distinct profiles evident for street and shelter settings and across communities” (Lee et al., 2010, p. 505). The authors wisely note that the demographic characteristics of the homeless of any particular geography tend to reflect that of their local geographic surroundings (Lee et al., 2010). The face of homeless generally has changed over time, with more minorities and homeless families today than the previous picture of the “skid row” single, Caucasian male (Brown & Mueller, 2015; CRS, 2014; Crane & Takahashi, 1998; Culhane et al., 2013; Haber & Toro, 2004; Lee et al., 2010; Nunez & Fox, 1999; Rossi, 1989). Research has shown that today’s homeless families are typically headed by single mothers (Brown & Mueller, 2015; Coalition for the Homeless of Houston/Harris County, 2016; Culhane et al., 2013; Lee et al., 2010; Haber & Toro, 2004; Nunez & Fox,

1999), homeless individuals are generally male (Culhane et al., 2013), the chronically homeless are typically male (Lee et al., 2010) and many have mental health and/or substance abuse issues (Burt, 2003; Zuvekas & Hill, 2000), and that minorities are overrepresented in the homeless population (Burt et al., 2001; Hatchett, 2004; First & Roth, 1988; Keuroghlian, Shtasel, & Bassuk, 2014; Lee et al., 2010; Nunez & Fox, 1999; Spellman, Khadduri, Sokol, Leopold, & Abt Associates, Inc., 2010; Ringheim, 1993).

Although there is still much work to be done in the fight against homelessness, progress has been made in recent years, especially since 2010 (when the federal strategic plan, “Opening Doors” was first published), particularly with regards to the chronic homeless population (people with disabilities and who have either been continuously homeless for one year or more or have experienced at least three episodes of homelessness in the past four years, HUD, 2014, p. 2) and the homeless veteran population. The number of chronically homeless individuals has decreased by 21 percent since 2010, and the number of homeless veterans has decreased by 33 percent since 2010 corresponding with the first two goals of “Opening Doors”: 1) Finish the job of ending chronic homelessness by 2015 and 2) Preventing and ending homelessness among veterans. On the remaining two goals of “Opening Doors,” progress has been less significant but still headed in the right direction. In terms of preventing and ending homelessness for families, youth, and children by 2020 (Goal #3 of “Opening Doors”), the number of homeless people in families has decreased by 11 percent since 2010. And finally, with regards to setting a path to ending all types of homelessness (Goal #4 of

“Opening Doors”), overall homelessness has decreased by 10 percent since 2010 (HUD, 2014).

Reasons for Homelessness in the United States

In general, the leading causes of homelessness in the United States are a lack of affordable housing, unemployment, and poverty (U.S. Conference of Mayors, 2013). For women, children, and unaccompanied youth, the catalyst is typically domestic violence (National Law Center on Homelessness and Public Policy, 2012).

Federal Programs and Strategy for the Homeless

The federal programs and “Opening Doors” strategic plan were already described in the earlier “Policy” section. The evidence-based approach has primarily focused on Housing First and Permanent Supportive Housing Models. This is summarized by Lee et al. (2010):

The most recent turn in national policy has been toward housing-first models and away from the alternative, services first. The Housing first approach seeks to move homeless singles and families into permanent housing as quickly as possible (Locke et al., 2007). These placements are intended to be permanent and relatively free of restrictions. In most cases, wraparound services are part of the model but are not required. Housing first recognizes housing as a fundamental right of citizenship (p. 514).

As previously described, the most visible progress has been made in targeting veteran homelessness and chronic homelessness. The significant decrease in homelessness among veterans is largely attributed to targeted efforts and services by HUD and the U.S. Department of Veterans Affairs (these programs were described in the “Policy” section), including Permanent Supportive Housing (PSH) interventions (U.S. Conference of Mayors, 2013).

Much of the progress in the war on homelessness has been due to programs such as Permanent Supportive Housing and Rapid Re-housing, which were implemented in part due to evidence that these practices are a win/win from both a moral and cost/benefit standpoint. According to HUD, Permanent Supportive Housing is an intervention “designed to provide housing and supportive services on a long-term basis for formerly homeless people, who have disabilities” (HUD, 2014, p. 2). Rapid Re-housing, similarly, is “a housing model designed to provide temporary housing assistance to people experiencing homelessness, moving them quickly out of homelessness and into permanent housing” (HUD, 2014, p.2). Whereas PSH is geared toward chronically homeless people or families with disabilities, Rapid Re-Housing is primarily designed to serve homeless families (HUD, 2014).

Homelessness in Texas

Characteristics of the Homeless in Texas

Texas is one of the four states in the nation with the highest percentage of homeless individuals, joined by California, Florida, and New York. Together, these states represented almost half of the total homeless population in the United States, yet roughly only one-third of the entire U.S. population. Texas was also one of three states (joined by California and Florida) with significantly higher percentages of unsheltered homeless (USICH, 2013).

In Texas alone, there were almost 30,000 individuals (including 12,090 unsheltered) counted as homeless from the 2013 state PIT count data (THN, 2013). Recognizing that the PIT count represents a static point in time only, the actual number

of homeless in Texas may in fact be much higher. For example, one 2012 report cited that more than 90,000 individuals in Texas may experience homelessness throughout the course of a single year (TICH, 2012). The top three geographies in Texas by rate of homelessness per 10,000 are Amarillo, El Paso, and Tarrant County (Fort Worth area); Houston is # 7 on this list (THN, 2013).

There is a sizable percentage of homeless students in the state (according to the definition adopted by the Texas Education Agency, which is more broad than that offered by HUD): 1,168,354 homeless students were enrolled in Texas in school year 2011 to 2012, and Texas is one of the top four states in the country for homeless student enrollment (CRS, 2014). Of the total homeless population in Texas (per the HUD definition), approximately one-third of these households were comprised of at least one child, and most of these households were comprised of minorities and headed by females.

As a result of the heightened focus on reducing homelessness over recent years, the number of homeless at both the federal and state levels has been on the decline. HUD's 2014 *Annual Homeless Assessment Report to Congress* reports a decrease in homelessness in 31 states between the years 2007 to 2014, with Texas (a decrease of 11,293 people) being one of the five states with the largest decreases (joined by California, Florida, New Jersey, and Oregon; HUD, 2014). Texas has been very fortunate to not experience increases in homelessness on an aggregate level as a result of the recent recession. This may be due in part to the state's strong business economy (prior to the latest downturn in the oil and gas industry), as well as federal and state

programs emphasizing permanent supportive housing to end chronic homelessness (TICH, 2012).

Different studies in the research showed that the characteristics of the homeless can vary by factors such as geography, age, ethnicity, and type of homeless. For example, in El Paso, Texas, the majority of the homeless are Hispanic due to the close proximity to the Mexican border (Castaneda, Klaussen, & Smith, 2014). Researchers in a 2001 study of the homeless in El Paso noted that there were important differences of the homeless by ethnicity: Generally, the Hispanic homeless in the study were less educated, had a higher percentage in the migrant agricultural field of work, and had a higher percentage performing unskilled work than non-Hispanic homeless (Tan & Ryan, 2001). This picture of the average homeless individual in El Paso was confirmed by a study of the older homeless in El Paso, which found the population to be primarily poorly-educated, Catholic, Hispanic, with most identifying themselves as farmers or laborers (Hatchett, 2004). The researchers in a recent study of homeless youth in Austin found that homeless youth were primarily male and white, with high levels of alcohol and drug dependence (Ferguson et al., 2009). This demographic finding is similar to a different recent study of the unsheltered homeless in Fort Worth, where researchers found these individuals to be mostly male and Caucasian (Petrovich & Cronley, 2015).

Reasons for Homelessness in Texas

According to the Texas Homeless Network (2013), the primary causes of homelessness in Texas are unemployment and rent/mortgage costs that are too high, which is consistent with the primary causes at the national level (TICH, 2012). This is

confirmed by region and ethnographic-specific studies of homelessness in Texas. For example, Tan and Ryan (2001) found that the primary cause of homelessness in El Paso was job-related. Similarly, Castaneda et al. (2014) found that more than 40 percent of their surveyed homeless population in El Paso cited job-related factors as the reason for homelessness, and that the number one service reported that was needed but not received in the last year was job-seeking assistance. Hatchett (2004) found that the primary reason provided for homelessness among older adults in El Paso was the lack of a job. Petrovich and Cromley (2015) found unemployment to be a significant factor in homelessness in Ft. Worth.

Of course, a lack of jobs or employability is highly tied to skills and education levels. This truism plays out with homelessness in Texas. Tan and Ryan (2001) found that the Hispanic homeless population were poorly-educated and had low skill levels. Hatchett's (2004) study of the older homeless in El Paso found that almost half of his sample of 227 surveyed individuals had between one and five years of formal education, and 11 percent had no formal education at all. Unemployability is also confounded by other contributing factors to homelessness (and further unemployability), including substance abuse, mental and physical health problems, and criminal records, often leading to a downward spiral of continued unemployability and homelessness. For example, participants in Petrovich and Cromley's (2015) phenomenological study on unsheltered homeless in Fort Worth noted that their substance abuse had a negative impact on their maintaining employment and housing, in addition to causing them to get

in trouble with the law and serve time in jail, and further distance themselves from family and friends.

The reasons for homelessness in Texas may also vary by certain demographic characteristics, such as age or military service status. For example, according to the Texas Interagency Council for the Homeless (2012), the causes of homelessness for youth vary from the general homeless population:

Most youth become homeless as a result of family conflict, violence, or sexual abuse. In some cases, parents ask or force youth to leave the household. Some run away from home to escape untenable living environments. Other youth become homeless after aging out of foster care or exiting juvenile justice systems. (TICH, 2012, p. 29)

This is confirmed by a recent study of homeless youth in three cities (including Austin) by Ferguson et al. (2010), who found that stressful home lives, conflict, and abuse/maltreatment by the family were the primary reasons for homelessness by street youth. In terms of military status, as a percentage of the total homeless population (in comparison to the general population), Veterans are over-represented, and the causes of their homelessness are often attributed to PTSD, mental/physical/emotional health issues, substance abuse, and trouble re-integrating back into society (TICH, 2012).

State Programs for the Homeless

Texas has established a total of 17 programs offered by eight state agencies to help prevent and end homelessness. Table 3 below lists those that explicitly deal with helping the state's homeless with workforce and skills development.

State Agency	Name of Program	Short Description of Program
Department of Assistive and Rehabilitative Services (DARS)	Vocational Rehabilitation (VR) Program	Program assists individuals with physical/mental disabilities prepare for, find, and keep a job.
Department of State Health Services (DSHS)	Resiliency and Disease Management (RDM) Program	Program offers services such as housing support, case management, employment services, and job skills training.
Texas Workforce Commission (TWC)	Wagner Peyser Employment Services	Program provides employment services to all who are seeking a job (including homeless individuals) at no cost.
TWC	Senior Community Service Employment Program (SCSEP)	Program is a part-time, on-the-job training program for unemployed people who are 55 and over meeting certain income criteria, such as assessment and employment planning services.
TWC	Texas Back to Work Program	Program provides financial subsidies to employers who hire low-income first-time unemployment insurance recipients.
TWC	Workforce Investment Act (WIA) Program	Program offers employment services and housing assistance to all job seekers (including homeless individuals) at no cost.
TWC	Texas Veterans Leadership Program (TVLP)	Program provides referral specialists to help assist veterans find needed services.

Table 3. Texas workforce and skills-related programs for homeless. (TICH, 2012, p. 47-49)

The 2-1-1 help line is the state’s primary, centralized resource providing information for people either currently experiencing or at risk of experiencing homelessness (TICH, 2013). The 2-1-1 help line provides a myriad of services, not just for homeless Texans but for Texans needing help more generally speaking, including assistance with housing and shelter, food assistance, financial and legal matters, employment help, health services, mental health services, crisis and emergency matters, child care and education, aging and disability, and veterans’ assistance (Texas Health and Human Services Commission, n.d.).

State Strategy Regarding Homelessness

In response to the federal strategic plan to end homelessness (“Opening Doors”) as well as the U.S. Interagency Council to End Homelessness, Texas leaders have established the state’s own strategic plan (“Pathways Home”) and state interagency council (Texas Interagency Council to End Homelessness). TICH is comprised of representation from the following agencies: the Texas Department of Housing and Community Affairs; the Health and Human Services Commission; the Department of State Health Services; the Department of Assistive and Rehabilitative Services; the Department of Aging and Disability Services; the Department of Family Protective Services; the Texas Workforce Commission; the Texas Veterans Commission; the Department of Criminal Justice; the Texas Juvenile Justice Department; and the Texas Education Agency. TICH representatives are required by state law to provide annual progress reports on efforts to end homelessness (TICH, 2013). According to TICH, its nine statutory requirements follow:

1. survey current resources;
2. initiate an evaluation of future and current needs;
3. assist in coordinating and providing statewide services;
4. increase the flow of information among separate providers and appropriate authorities;
5. Develop guidelines to monitor the provision of services for the homeless and the methods of delivering those services;
6. provide technical assistance to the housing finance division of the department in assessing the need for housing for individuals with special needs in different localities;
7. coordinate with the Texas workforce commission to provide homeless individuals information to assist them in obtaining employment and job training;
8. establish a central resource and information center for the homeless; and
9. council responsibilities executed by other entities (TICH, 2013, p. 2).

Pathways Home is the state's policy framework and strategic plan to address homelessness in Texas (TICH, 2012). The plan is comprised of four major areas of focus (affordable housing and supportive services; homelessness prevention; data, research, and analysis; and state infrastructure) each with associated objectives and strategies (TICH, 2012). Generally, the emphasis of Pathways, similar to efforts at the national level, are to stress funding for housing (rather than emergency shelter beds), programs that offer services in combination with housing, and coordination of data and among various agencies and service providers (TICH, 2012).

Homelessness in Houston

Characteristics of the Houston Homeless

Similar to other major cities in the United States, Houston participates in an annual PIT count of both sheltered as well as unsheltered homeless individuals in Harris and Fort Bend Counties (the two major counties in and around the city of Houston), as required by HUD. This count takes place the end of January of every year, and in Houston engages the observation and interviewing skills of teams of individuals (citizen volunteers, researchers, community organization representatives, service provider representatives, and public officials) coordinated and project managed by the Coalition for the Homeless of Houston/Harris County (Troisi, 2014). The Coalition for the Homeless of Houston/Harris County is a nonprofit organization established in 1982 and is today the lead agency coordinating the city's efforts to reduce homelessness (Troisi et al., 2012). According to the Coalition (2014), the annual PIT count is "a requirement of HUD for the Houston/Harris County Continuum of Care funding process, and provides a snapshot of the state of homelessness in Houston on any given night." In 2014, the PIT count was conducted on January 30 (Troisi, 2014).

The 2014 Houston PIT homeless count found 5,351 individuals who could be classified as "homeless" according to HUD's formal definition of homelessness. This number increased to 6,876 when including homeless people in jail on the night of the count (Troisi, 2014). About 57 percent of the total were sheltered (e.g., staying in an emergency shelter, transitional housing, or a safe haven), and the remainder were considered unsheltered (staying on the street, abandoned buildings, in their cars, etc.).

The average age range of the sheltered (gleaned from interviews conducted both before and after the count) was 46 years old. Of the total 5,351, approximately 40 percent were believed to have mental health issues, 33 percent to have substance abuse problems, 14 percent were identified as chronically homeless individuals, and 13 percent were veterans.

The good news is that the total count of homeless individuals in 2014 represents a sizable decrease since the PIT count in 2011 (37 percent) and a smaller decrease since the PIT count in 2013 due to concentrated efforts in the city over the last several years to better understand and end homelessness in Houston (16 percent; Coalition for the Homeless of Houston/Harris County, 2014; Troisi, 2014;).

The Coalition also conducted a needs assessment of the homeless population in Houston/Harris County in both 2014 and 2012. This data collection effort was a convenience sample conducted via interview (n=561) of individuals residing in shelters. In terms of demographic characteristics of the Houston homeless, according to researchers in that survey, the average age of participants was approximately 44 years old (range of 18 to 80 years old), with 69 percent males, 30 percent females, and the remaining 1 percent transgender persons. The individuals surveyed were primarily single and 70 percent of them were African American (Troisi et al., 2012).

Reasons for Homelessness in Houston

From the 2012 needs assessment study, the biggest reasons reported by respondents for homelessness in this study were loss of a job (35 percent), followed by eviction, bills being higher than income, abuse, medical/mental health issues, and

incarceration (Troisi et al., 2012). This is consistent with the Coalition's sponsored 2011 needs assessment study, where researchers also found that the top cause of homelessness was related to job loss (Fleming, 2011).

Needs of the Houston Homeless

The 2012 needs assessment conducted by the Coalition found that the top three unmet needs of the Houston homeless were 1a) the need for permanent housing, 1b) the need for transportation, and 1c) the need for dental care (Troisi et al., 2012). The need for job training and employment were high on the list, ranking need #6 and #7, respectively, even before the need for food and medical care.

Researchers in the 2011 study also found high need for workforce related assistance by the homeless: "Vocational training and adult education are disproportionately needed services by people who are homeless. Of the people surveyed in the homeless needs assessment, approximately 40 percent cited adult education as a need and 70 percent cited job training as a need" (Fleming, 2011, p. 11; Troisi, Lee, & Stoll, 2011). "There is a lack of programs that provide in-depth vocational skill training and supported employment services" (Fleming, 2011, p. 12; Troisi et al., 2011).

Larger Houston Economic and Employment Context

It is helpful to situate this issue of Houston suburban homelessness within the larger demographic and economic context of the city. First of all, it must be noted that Houston is currently the fourth largest city in the U.S., and is expected to actually overtake Chicago within the next ten years or so as the third largest city in the country (Herskovitz, 2015). Houston is one of the fastest growing cities in the country, with

slightly lower unemployment rates as compared to the nation overall (4.9 percent for the Houston area versus 5.1 percent), although Houston unemployment has gone up recently due to the economic hit caused by the drop in oil prices and the associated impact on the Houston economy (U.S. Bureau of Labor Statistics, 2016). And yet despite Houston's relative economic prosperity, it has been estimated that one in five Houston households lives in poverty (Family Assets Count, 2015), and as previously stated, there were almost 7,000 homeless people counted in the 2014 PIT count. Houston's positive growth, economic opportunities, and relatively low unemployment rate, as contrasted to its continued struggle with poverty and homelessness (both urban and suburban), is an interesting dichotomy that the city continues to struggle with.

Homelessness in the Suburbs

“Increasingly, poverty in America is found in suburban communities, small towns, and rural areas.” (Tighe, 2013)

Definition of Suburban

This research study is not about homelessness generally speaking; rather, it is about the workforce skills needs and gaps of the *suburban* homeless. Researchers from the Brookings Institution have defined “suburbs” as the metropolitan areas that reside outside of the primary cities (Kneebone & Berube, 2013). In the “Methods” section of the dissertation, the researcher will describe what she considers to be Houston “suburbs” for purposes of this study.

Characteristics of the Suburban Homeless

There are several observable themes from the literature regarding the characteristics of the homeless and impoverished in the suburbs: 1a) homelessness in the suburbs has been increasing, especially with regards to homelessness in families and student homelessness; 1b) poverty (an antecedent to homelessness) has been increasing in the suburbs; 1c) the homeless in the suburbs are largely hidden; and 4) the suburbs lack the same infrastructure to serve the homeless as do the cities.

A substantial portion of homeless individuals today reside in the suburbs. Some earlier estimates approximate that about 20 percent of the homeless resided in the suburbs (Burt et al., 2001; Lee & Price-Spratlen, 2004; Lee et al., 2010). A 2009 article from *USA Today* cited data from the U.S. Department of Housing and Urban Development that the number of people in rural and suburban shelters increased by 9 percent from 2007 to 2009 (Samad, 2009). More recent estimates say that approximately 40 percent of the nation's homeless live in smaller cities, suburbs, or regional communities of care (HUD, 2014). This problem is also keenly felt in Houston. According to a report by the *Houston Chronicle* (the city's major newspaper), social service providers are seeing a consistent increase in the number of homeless on the streets and in shelters, and their resources are being tapped out (Lee, 2007).

Family homelessness and student homelessness are prevalent characteristics of homelessness in the suburbs. For example, according to recent research from the National Center for Homeless Education, there has been a 72 percent increase in the number of homeless in the public schools since the recession began in 2007/2008

(Jackson, 2013). In the researcher's small Houston suburb of Katy, Texas, it is estimated that there are almost 500 homeless students attending Katy ISD schools (although it is believed that this number is undercounted and the actual number is much larger; Hatcher & Douglas, 2015).

Similarly, the number of poor people has been on the rise in the suburbs. Some earlier research cites statistics that the number of low-income people residing in the suburbs increased by 67 percent from 2000 to 2011, due in part to urban gentrification (e.g., the cleaning up and revitalization of urban city centers, and thereby the pushing out of the poor), the increased rate of housing foreclosures due to the recession of 2007/2008, the presence of more affordable housing in the suburbs, and rapid expansion of the suburbs (Shaw, 2013). According to a recent book by Brookings Institution researchers Elizabeth Kneebone and Alan Berube, *Confronting Suburban Poverty in America* (2013), the suburban poor are the fastest growing low-income population in the nation (p. vii). Per Kneebone and Berube (2013),

Despite the fact that 'poverty in America' still conjures images of inner-city slums, the suburbanization of poverty has redrawn the contemporary American landscape. After decades of growth and change in suburbs, coupled with long-term economic restructuring and punctuated by the deepest U.S. economic downturn in 70 years, today more Americans live below the poverty line in suburbs than in the nation's big cities. (p. 2)

In fact, according to their research, in 2010, approximately 55 percent of the metropolitan poor population, or 15.3 million people, lived in the suburbs, an approximately 2.6 million more poor people than in the cities. Furthermore, the largest increases in the suburban poor population occurred in the Midwest and South regions. In

Houston, it has reported that approximately 540,000 poor people live in the suburbs (versus 504,000 in the city; Kneebone & Berube, 2013; Rice, 2013).

Homelessness has been described as invisible problem in the suburbs. For example, according to the executive director of the Texas Homeless Network (THN), a nonprofit organization dedicated to providing solutions to ending homelessness in Texas:

People often assume that homelessness does not exist in the suburbs and rural areas because they do not see it. The reality is hundreds of homeless people...survive in the woods, in their cars or on the couches of family and friends. Some suburban homeless drift into urban areas, where more services and jobs are available, but the vast majority stay in their community. It is difficult to get an accurate homeless count because of migration and the hidden homeless. Whatever number service providers come up with during annual sight counts can easily be doubled to include those they do not see. (Lee, 2007)

Similarly, the policy director for the National Association for the Education of Homeless Children and Youth shared that “Suburban homelessness is among the most invisible because it doesn't fit our stereotypes” (Deam, n.d.).

It is also acknowledged in the literature that the suburbs do not have the same infrastructure to serve the homeless as urban city centers. This is in part due to zoning restrictions, the political persuasion of the non-homeless in the suburbs, and political and legal climate. Many times, the suburban homeless must resort to commuting to the urban city centers for services (Lee et al., 2010). Some of the barriers cited in the literature that the suburban homeless tend to face (unlike their urban counterparts), include:

- a lack of public transport to needed services;
- a lack of key support and social services (such as child care, health care, and job training);

- scarce rental housing and less frequent acceptance by landlords of HUD housing vouchers; and
- greater stigma of homelessness (Daiski et al., 2012; Deam, n.d.; Kneebone & Berube, 2013; Tighe, 2013).

In addition to the infrastructure and support differences noted above, there have been some other differences noted in the literature between urban versus suburban homeless. For example, a 1998 study of 1,947 homeless in suburban California found that the particular study population was very diverse, but had needs different than those of the homeless in the inner cities (Crane & Takahashi, 1998). According to Canadian researchers investigating homelessness in a suburb of Toronto, the most important difference between urban and suburban homelessness is:

that the latter is much more effectively hidden. Social stigma and safety concerns encourage the homeless to stay invisible by hiding in ravines and woods and blending in with their surroundings as much as possible. This makes it easy for passersby to overlook whatever signs of homelessness are around them. The suburban homeless person effectively disappears underground in the grotto of poverty. (Daiski, Halifax, Mitchell, & Lyn, 2012, p. 118)

Needs of the Suburban Homeless

Similar to the causes of homelessness and subsequent needs at the national, state, and local levels, in the suburbs the primary causes of homelessness are lack of affordable housing and unemployment (Crane & Takahashi, 1998). Therefore, the top needs of the suburban homeless, like their urban counterparts, are for help with finding affordable housing and employment. For example, researchers in one study of the suburban homeless in Orange County, California (1998) found that the top requests for help from the homeless were help finding affordable shelter, help with finances, employment, and

transportation. In the same study, 56 percent of those surveyed (n = 1,947) wanted employment-related assistance, and 32 percent wanted job training (Crane & Takahashi, 1998).

Homelessness and Skills Development

“...a job can help people develop motivation to change, dignity, and self-respect, and hope for the future.” (SAMHSA, 2003, p. i)

This research is about not just homelessness generally, nor homelessness in the suburbs solely, but the skills development gaps and needs of the homeless in the suburbs with the goal to provide some key findings and guidance around what are the workforce skills that the suburban Houston homeless have, what they need, what the local market needs, and what are the gaps in order to discuss potential interventions to address and fill those gaps. Skill levels of the homeless may vary greatly not only by region (example, the homeless in El Paso may have very different skills than the homeless in Houston), but certainly will vary greatly by individual depending on any number of circumstances (their backgrounds, educational abilities, physical and mental faculties, ethnicity, age, etc.). In this final section, the researcher summarizes what the literature reveals about the education and skill levels of the homeless and their occupations.

Employment Statistics of the Homeless

First of all, it is important to point out that not all homeless are unemployed; different studies in the literature have gathered statistics around what percentage of their samples are part- or full-time employed, and the employment statistics cited varied across the literature. Lei (2013) found that day labor (such as daily construction crews)

was an important form of supplemental income for homeless people, due to the fact that day labor does not require high levels of education or skill, and often does not have as stringent of background checks as more formal work. Some of the work conducted by homeless may be considered informal or shadow work, such as peddling, panhandling, or even illegal activities (drug sales, being involved in the sex trades, etc.; Lei, 2013; Lee et al., 2010). Governmental programs represent an important form of income for many homeless individuals.

Barriers to Employment for the Homeless

Despite the fact that some percentage of homeless individuals work, there are many barriers for homeless individuals to working, including:

- bureaucracy and confusion in obtaining services;
- discrimination due to being homeless;
- distrust of the system and/or service providers;
- fear of losing government assistance if working;
- lack of awareness in all of the services available;
- lack of education and skills;
- lack of identification
- lack of transportation;
- lack of comfort with IT-enabled work applications;
- lack of a physical address (for mail, e-mail, or phone contact);
- lack of proper clothing;
- lack of coordination among service providers;

- lack of interviewing skills and job credentials;
- mobile lifestyle;
- past history of incarceration;
- physical and mental health problems/disabilities; and
- substance abuse

(Acuna & Erlenbusch, 2009; Ferguson et al., 2009; Lei, 2013; ; Long et al., 2007; Nunez & Fox, 1999; Rio, & Rosen, 2007; Radey & Wilkins, 2011; Shaheen & Rio, 2007; Zuvekas & Hill, 2000).

However, contrary to the sometimes popular perception that homeless individuals do not want to work, research has found that many homeless individuals desire to work (Lei, 2013; Long, Rio, & Rosen, 2007; Shaheen & Rio, 2007; Snow & Anderson, 1993), and even chronically homeless individuals and those with disabilities often can and want to work (Marrone, 2005; Rog & Holupka, 1998; Radey & Wilkins, 2011; Shaheen & Rio, 2007; SAMHSA, 2003; Theodore, 2000; Trutko et al., 1998).

Education Levels of the Homeless

Different studies have captured the education levels of their homeless samples. A good source for this general statistic comes from the National Healthcare for the Homeless program data, which cites that almost 50 percent of homeless adults have not completed high school (Lei, 2013). But in any one survey, education levels could vary from few years of formal education all the way to a small percentage with graduate degrees (but the majority of the homeless population across studies skews toward less education).

Occupations of the Homeless

Generally speaking, the extant research has found that the homeless are primarily employed in low-wage jobs, which do not provide enough income to allow them to escape their homelessness (Zuvekas & Hill, 2000). According to several sources, the homeless primarily hold blue collar or lower-paying jobs, such as general laborers, in construction, services (such as food and hospitality), or clerical/administrative office-type positions (Lei; 2013; Long et al., 2007; Rog et al., 1999; Snow & Anderson, 1993).

Employment-related Needs of the Homeless

As previously discussed in other sections of the literature review, researchers have found that some of the homeless' top needs are for help finding a job and with job skills training, and that supplemental services (such as employment services, mental and substance abuse assistance, etc.) complemented with housing assistance, are prime catalysts in the pathway out of homelessness for many (Radey & Wilkins, 2011). For example, researchers in one recent study of homelessness services found that 42 percent of those surveyed desired job-finding related assistance (Radey & Wilkins, 2011); another survey found the same percentage rated the desire for assistance to find work as a top priority (SAMHSA, 2003).

Benefits of Employing the Homeless

Despite the barriers that they face to employment, there are many benefits of employment for the homeless, including supporting self-identity, socialization, recovery from illness and stability; and income leading to self-sufficiency, independence, and retaining housing (Ferguson et al., 2009; SAMHSA, 2003). In addition, gainful

employment factors into people's self-esteem, self-respect, and dignity (SAMHSA, 2003).

Houston Skills Gap

In light of this discussion and the focus of this paper, it is very important to note that Houston has a huge need for middle skills workers, which are defined as “those jobs that require more than a high school diploma but less than a four-year degree,” particularly in the energy, petrochemicals, manufacturing, life sciences, and construction industries (Greater Houston Partnership, 2014). According to the Greater Houston Partnership (2014), Houston is expected to generate more than 74,000 job openings annually in middle skills occupations through 2017, with more than one-third of these openings considered blue collar. The most high in-demand jobs with the most annual openings are expected to be in the construction, installation, maintenance, and repair, drafting, engineering technician, mapping technician, and other construction and related workers type jobs (Greater Houston Partnership, 2014). As stated by the Greater Houston Partnership (2014) report:

The region can meet this demand by developing its own talent pool or by importing talent from outside of the region. The pool of potential workers in the region will graduate from the region's PK -12 education system or post-secondary institutions or, if adults, from programs that re-train or up-skill incumbent workers or work with individuals to remove or reduce barriers to employment. (p. 8)

This issue is not unique to Houston: According to the Greater Houston Partnership report, an annual talent shortage survey conducted by Manpower in 2013 found that almost one-third of companies in the United States were having a hard time filling manufacturing jobs, most considered middle skills jobs, specifically skilled

trades, drivers, mechanics, and technicians (Greater Houston Partnership, 2014; Manpower Group, 2013). And *USA Today* reports that almost 40 percent of all job growth over the next few years is expected to be in middle-skills jobs (Webster, 2014).

Chapter Summary

The literature review illustrated the following primary points:

1. Homelessness in the U.S, Texas, and Houston, while on the decline, continues to be a challenging social issue.
2. Homelessness in the suburbs, particularly with regards to families and students, is on the increase.
3. One of the top reasons for homelessness is unemployment/underemployment, and one of the top needs of homeless clients is for employment and skills assistance.
4. The researcher could not find any more specific skills related research about the Houston suburban homeless. Skill levels vary by region, and those of the Houston suburban homeless may be different than elsewhere.
5. Houston has a significant need for people to fill “middle skills” jobs over the coming years. Perhaps the Houston suburban homeless might partner with companies to fill some of these jobs, as appropriate.

Chapter 3 discusses the methodology employed by the research to gather primary data on current workforce skills, workforce skills development needs, and potential workforce skills programs that can benefit the homeless.

CHAPTER III METHODS

Introduction

This dissertation is a qualitative case study of the workforce development needs, skill gaps, and related potential interventions for the Houston suburban homeless. This chapter provides an overview of the researcher's perspective; the study purpose and research questions; the research methodology, sampling, and data collection; data analysis; issues of trustworthiness; the limitations of the proposed research design; and the timeline of the research.

Researcher's Perspective

The values that underline my motivation for this study are ultimately grounded in my faith (Christianity). It is an important Christian precept that Christians are to take care of “the least of these”—in other words, the poor and downtrodden who are considered our brothers and sisters in Christ (Matthew 25:40, New International Version). Biblical teaching directs all Christians to care for the poor, orphans, and widows in our society.

I followed an overarching paradigm of pragmatism, which is focused on research around what works in real life and acknowledges the interpretive value of the researcher in generating results (Teddlie & Tashakkori, 2009). I also adopted a transformative worldview, which according to Mertens (2007) and Teddlie & Tashakkori (2009) is a perspective that places

central importance on the lives and experiences of marginalized groups such as women, ethnic/racial minorities, members of the gay and lesbian communities, people with disabilities, and those who are poor. The researcher who works within this paradigm consciously analyzes asymmetric power relationships, seeks ways to link the results of social inquiry to action, and links the results of the inquiry to wider questions of social inequity and social justice. (Mertens, 2007; Teddlie & Tashakkori, 2009)

I selected pragmatism and the transformative paradigms because I am interested in making an impact and a difference in the community in which I live. In addition, the research concerns one marginalized group in society in particular: the Houston suburban homeless.

Study Purpose and Research Questions

The purpose of this study was to establish the perceptions of staff members working for Houston suburban homeless service provider organizations and of their homeless clients regarding the clients' current workforce skills, workforce skills development needs, and potential workforce skills development programs and interventions that could assist clients to achieve living wage employment.

Research questions addressed in the study follow:

1. What are the perceptions of staff members working for Houston suburban homeless service provider organizations regarding their clients' current workforce skills?
2. What are the perceptions of Houston suburban homeless service provider clients regarding their current workforce skills?

3. What are the perceptions of staff members working for Houston suburban homeless service provider organizations regarding their clients' workforce skills development needs?
4. What are the perceptions of Houston suburban homeless service provider clients regarding their workforce skills development needs?
5. What are the perceptions of staff members working for Houston suburban homeless service provider organizations regarding potential workforce development programs and interventions that might assist clients to achieve living wage employment?
6. What are the perceptions of Houston suburban homeless service provider clients regarding potential workforce skills development programs and interventions that might assist them to achieve living wage employment?

Although the research questions are primarily descriptive in nature (e.g., “what”), some of the “how” and “why” type questions were asked of interviewees in the data collection tools and follow-up questions by the researcher, and more is discussed in terms of explanation, interpretation, and the “how” and “why” in Chapter 4 (Results).

Methodology

I leveraged a descriptive case study methodology to conduct this research using naturalistic inquiry (Lincoln & Guba, 1985). I gathered qualitative research data from two primary audiences: 1a) the suburban homeless service providers and 1b) the suburban homeless clients themselves. I interviewed volunteers from each audience using a qualitative data collection tool: 1a) a semi-structured guide to interview a subset

of clients of each Houston suburban service provider organization (Appendix C) and 1b) a semi-structured interview guide to gather data from service providers who offer services to the local homeless and at-risk homeless in the major suburbs of Houston (Appendix D).

Data Collection

Sampling

I used purposive sampling for both service providers and their clients. Creswell and Clark (2011) noted that purposeful sampling “means that researchers intentionally select (or recruit) participants who have experienced the central phenomenon of the key concept being explored in the study” (p. 173).

In order to compile a list of prospective service provider organization respondents, I first began by conducting research on the Internet searching for Houston suburban service providers to the homeless. I also leveraged referrals from the subject matter experts who participated as part of the interview guide pilot process, and the existing “Help Card” resources published by the Coalition for the Homeless of Houston/Harris County. Through this process, I generated a list of 38 potential service provider participant organizations. I contacted each organization individually, assessed their applicability and willingness to participate in the study, and secured the “site visit authorization” required by the Texas A&M University Institutional Review Board (IRB) for the final list of 13 organizations that agreed to participate.

The criteria for sampling the Houston suburban service providers was twofold: 1) that they provided services to the Houston suburban homeless (per the operational

definition of *homeless*) and 2) that they were located in the Houston suburbs (per the operational definition of *suburbs*). Within each organization, however, the criteria for participation of service provider representatives was that the adult participants were authorized representatives of the service provider organization, were able to answer the service provider interview guide according to the scope of their responsibilities at the organization, and were willing to participate.

Homeless client participants were volunteers who signed up to participate after viewing IRB-approved study recruitment materials. All client interviewees were adults. I worked with each service provider organization to disseminate the approved study recruitment materials to potential client participants, and they signed up for interview slots.

Instruments

I submitted all study recruitment materials, including the two data collection instruments and the client and service provider consent forms, to the Texas A&M University for review and approval. Recruitment materials were approved by the IRB for the time period of November 2015 through November 2016. The IRB-approved data collection instruments are listed in Appendix C and D.

Each data collection tool is a semi-structured interview guide, comprised of the following sections: instructions for the interviewer (internal), background and demographic, current workforce skills, needed workforce skills, and potential workforce development programs or interventions. The two tools mirror one another in structure for consistency of data collection. Issues of validity/credibility of the data collection tools

are addressed in a subsequent section on Trustworthiness. The data collection instruments were developed in Microsoft Word.

Collection Procedures

My role as a researcher was to interact with the participants in data gathering and co-construct finding and meaning with the participants. I gathered qualitative data via interviews with the representatives of the service provider organizations and with clients at each service provider organization. Each service provider interview took about an hour to complete, and each client interview took an average of 45 minutes to complete.

In the sequence of events, I first interviewed service providers serving the local homeless in the major suburbs of Houston. These suburbs cross levels of income demographics and regional boundaries. With their consent, I took detailed notes during the interview using Microsoft Word (for only a few interviews conducted initially did I capture notes via pen and paper and then later typed into the Word data capture template). I interviewed 25 representatives from 13 different service provider organizations throughout a cross section of Houston suburbs, for a total of 19 interviews.

All but one interview was conducted in-person at the service provider site or another mutually agreed upon location. Three interview sessions were group sessions (i.e., involved more than one service provider participant). The three group interviews (two with three representatives, and one with two representatives) added to the value of the data collection at the organization because these respondents would respectfully build upon one another's ideas and contributions to the interview for rich dialogue and examples. The individuals interviewed across the spectrum of organizations

encompassed advocates, case managers, employment specialists, program directors/executive directors, and CEOs. I provided an incentive (\$50 per service provider organization) to each service provider organization in return for the interview as a gesture of goodwill, in appreciation of the value of their time, and as a contribution to the mission of their organization.

I also conducted interviews with 24 homeless or at-risk homeless clients from seven different service provider organizations to learn first-hand from the clients about these issues. All interviews were conducted face-to-face at their respective service provider locations. I provided each client interviewee a token monetary donation (a \$15 gift card) in the hopes of helping to stem their immediate need and in appreciation for their time to share information with me.

Each participant (both at the service provider level and client level) was provided with a consent form to sign (Appendices A and B) and was briefed at the beginning and end of the interview about informed consent, the study process, and what to expect in terms of next steps.

I also supplemented this research with Internet data collection about the service providers themselves (i.e., about their missions and organizations), as well as in certain cases a short period of immersion with the service provider (or like service providers). For example, I volunteered at one of the assistance ministries over the holidays in their annual toy drive to better familiarize myself with the organization, the scope of services that it offered to clients, and the perception of the organization by other volunteers in the community. I also participated in several Bible studies as well as a monthly “community

breakfast” gatherings organized by the service provider organization in my own suburb, again to better understand the organization and observe first-hand the interaction between the service provider and its clients and listen to the troubles and concerns raised by clients. I also participated in several homeless events with service providers that did not participant in the study to familiarize myself more broadly with the social issues at play in this study. In January 2015 I participated in the annual Point-in-Time count with the Coalition for the Homeless of Houston/Harris County. And in December 2015, I participated in the annual Houston Food Bank telethon food drive.

Data Analysis

I analyzed qualitative interview data inductively following a sequence of steps:

1. I personally transcribed each recorded interview.
2. I reviewed the transcription and distilled the essence of the responses to each question in a Microsoft Excel workbook.
3. I organized and formatted the Microsoft Excel workbook (discussed in more detail in the description below).
4. I examined data for each category, sub-categories, and question across respondents.
5. I generated key themes and findings by category, subcategory, and question, as appropriate, with rich examples and description to support each theme or finding.
6. I also leveraged text analysis software to conduct frequency analysis on certain questions that lent themselves to frequency analysis. For example, analyzing the most common reasons for homelessness cited by service providers, I leveraged

Java script text analysis software to generate a Word cloud visually depicting some of the most frequent key words or phrases cited in the service provider responses.

I leveraged a Microsoft Excel workbook to distill and organize the data for first service providers and then clients into Level I macro categories, Level II subcategories where appropriate, and Level III subcategories (questions/question topics). This data organization and analysis structure for both service provider and client data is depicted in Table 4.

Service Provider Data				
Level I Categories				
Demographics	Background	Current Workforce Skills (Research Questions 1 – 2)	Needed Workforce Skills (Research Questions 3 – 4)	Potential Workforce Programs (Research Questions 5 – 6)
Level II Categories				
	Size of Organization, Reasons/Root Causes of Homelessness	Barriers		Characteristics of Successful Programs; Roles (of Employers, CoC, DARS, and Workforce Solutions)
Level III Categories				
Description of service provider organization	SP Interview Guide Questions 1 – 8	SP Interview Guide Questions 9 – 14	SP Interview Guide Questions 15 - 17	SP Interview Guide Questions 18-22
Topics: Name, Type, and Location of Organization; Title of Interviewee(s)	Topics: Background and Roles; Mission and Purpose; Staff Size; Population Served; Client Demographics; Services Offered; Reasons/Root Causes of Homelessness	Topics: Employment Levels of Clients; Clients' Workforce Skills; Clients' Education Levels; Barriers to Employment for Clients	Topics: Workforce Skills Lacked by Clients; Workforce Training that Would Benefit Clients	Topics: Current Workforce Skills Programs; Characteristics of Most Effective Programs; Living Wage; Role of Employers, the CoC, DARS, and Workforce Solutions; Ideas for Workforce Skills Solutions
	Key themes for each category and question across respondents	Key themes for each category and question across respondents	Key themes for each category and question across respondents	Key themes for each category and question across respondents

Table 4. Data organization and analysis structure.

Client Data				
Level I Categories				
Demographics	Background	Current Workforce Skills (Research Questions 1 – 2)	Needed Workforce Skills (Research Questions 3 – 4)	Potential Workforce Programs (Research Questions 5 – 6)
Level II Categories				
Type of client		Employment level; Skills; Education and Experience; Barriers to Working	Assistance, Training, or Support Needed	Roles (DARS and Workforce Solutions)
Level III Categories				
Description of the participating clients	Client Interview Guide Questions 1 - 5	Client Interview Guide Questions 6 - 13	Client Interview Guide Questions 14 - 17	Client Interview Guide Questions 18 - 21
Topics: Name, Type of Client, Type of Homelessness; Site location; Parental Status; Age; Gender; Race	Topics: Background and Housing Situation; How Heard about Service Provider and Length of Client Status; Reasons for Homelessness; Barriers to Finding Affordable Permanent Housing; Length of Time Homeless	Topics: Employment Status; Type of Work and Skills; How Skills Were Developed; Top Three Skills; Education and Experience Levels; Barriers to Work	Topics: Perceptions of Top Most Needed Skills in the Marketplace; Type of Work Desired; Needed Workforce Skills Assistance or Training; Other Types of Workforce Support Needed	Topics: Current Workforce Skills Programs being Used and Likes/Dislikes; DARS Client Experience; Workforce Solutions Client Experience; Other Workforce Skills Programs Would Like to See Offered
	Key themes for each category and question across respondents	Key themes for each category and question across respondents	Key themes for each category and question across respondents	Key themes for each category and question across respondents

Table 4. continued.

The research findings evolved from the data analysis, and I organized findings into a case study format that provides the thick, contextual description necessary for the audience to determine the applicability of the research findings to adapt for the situation in their own communities.

Trustworthiness

Lincoln and Guba (1985) describe four key elements of trustworthiness in qualitative research: 1) credibility, 2) transferability, 3) dependability, and 4) confirmability. In order to facilitate credibility (similar to internal validity in quantitative research) of the qualitative research or findings that are believable to the intended audience, the interview guides were reviewed not only by my committee chair and the qualitative research experts on my committee but also with a few, select subject matter experts (the program manager at the Coalition for the Homeless of Houston/Harris County, an SME in homeless workforce skills development, and the enumerator for the data reports put forth by the Coalition for the Homeless of Houston/Harris County), prior to data collection.

I also piloted the survey with two Houston suburban service provider organizations and two of their clients and made adjustments to the interview guides based on their feedback. I socialized the study key findings and discussion with my committee at Texas A&M (peer debriefing) as well as with the service provider participants (member checking).

Transferability is the ability of the reader of the study to judge whether (and if so, how) the findings of the study are applicable to similar circumstances. Transferability is the corollary of external validity in quantitative research (Lincoln & Guba, 1985). To facilitate transferability, I have provided “thick description”—in other words, a detailed description of the sending context (background, demographics, participants, etc.), in

Chapter 4 (Results) so that the recipients of the information can make an informed judgement about whether or not the findings will transfer to their receiving context.

I worked toward dependability, the corollary of reliability in quantitative research, via my research proposal and dissertation defenses. Although it is not quite the same as a full audit performed by an external party of the study, the intent of these defenses in large part is to gather the feedback and suggestions of the committee, who serve as auditors regarding the value of the research and the way the research was accomplished.

To facilitate confirmability, I kept a binder of all study materials, signed consent forms, and relevant study documentation.

Timeline

Figure 2 provides an overview of the timeline that I followed for the study.

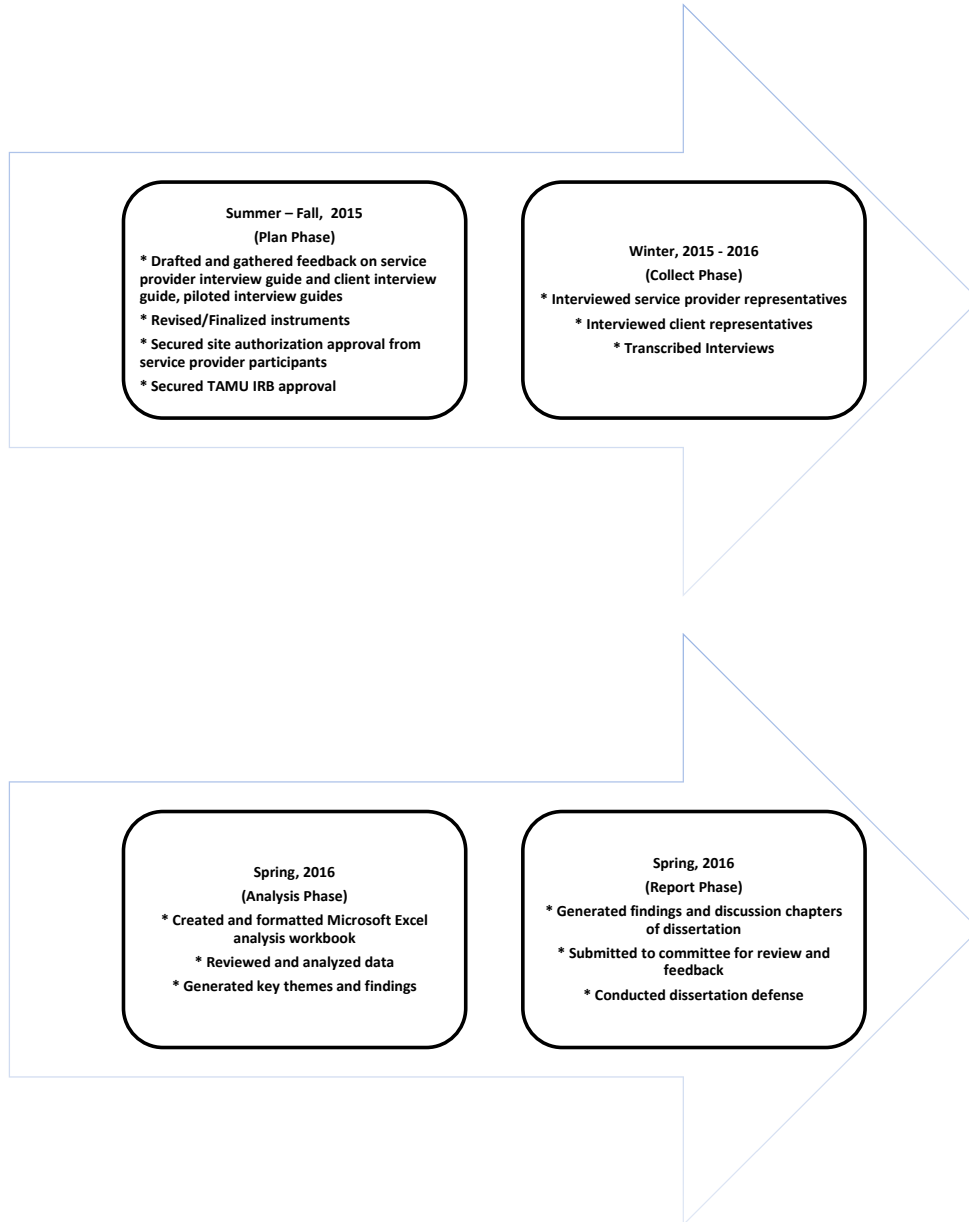


Figure 2. Study process flow and timeline.

Limitations of Research Design

The primary limitation of this research design is that the research will not be generalizable beyond the bounded scope of the study; however, the intent of naturalistic inquiry, per Lincoln and Guba (1985), is not to be generalizable.

Chapter Summary

This chapter summarizes the methods employed for the dissertation, including the study purpose and research questions, methodology, sampling, data collection and data collection instruments; data analysis, methods to assure trustworthiness and the study timeline. This dissertation was a qualitative case study of the workforce development needs, skill gaps, and related potential interventions for the Houston suburban homeless. The purpose of this study was to examine the perceptions of employees working with the agencies providing services for the homeless in the suburbs regarding the workforce skills and development needs. In addition, I gathered the perceptions of the homeless clients themselves regarding the potential workforce- and skills-related interventions that can help them. The study was conducted leveraging naturalistic inquiry with the output in the form of a case study (Lincoln & Guba, 1985). Two data collection tools were used for this research: 1) a semi-structured interview guide designed to gather data from service providers who offer services to the local homeless and at-risk homeless in the major suburbs of Houston and 2) a client interview guide for the purposes of interviewing a sampling of homeless clients at each selected Houston suburban service provider organization. The study leveraged a pragmatic and transformative paradigm using a descriptive case study methodology. Data was

transcribed, formatted, and categorized, and analyzed for key themes in Microsoft Excel for all data. The study was conducted in four phases (planning, collection, analysis, and reporting). The research proposal was approved by my committee in the Spring of 2015; data outreach began in the summer; IRB approval took place in the Fall; data collection began in the winter of 2015; and the study concluded in the Spring of 2016.

CHAPTER IV RESULTS

Introduction

In this chapter I discuss the results of the study. The chapter is organized in the same structure as the data collection instruments, beginning with an overview of the background and demographic characteristics of research participants, followed by a discussion of current workforce skills (research questions 1 and 2), workforce skills development needs (research questions 3 and 4), and potential workforce skills development programs (research questions 5 and 6) to benefit the Houston suburban homeless and at-risk homeless.

Background and Demographics

For this study, I gathered primary, qualitative data via interviews. I conducted interviews with two groups: 1) representatives from Houston suburban service provider organizations to the homeless or at-risk homeless and 2) clients of these service provider organizations. The first section of the interviews, “Background,” focused on learning more about the service provider organization and its clients. Specific questions asked are in Appendix C and D, the Client Interview Guide and the Service Provider Interview Guide.

About the Service Provider Organization Participants

Our purpose is trying to get our women and children...to a more safe, secure, and stabilized kind of a situation so that they can address issues that they need to address. To get them to a better place so that they can end up with the foundation for a better life, to not repeat, come back, and be homeless again...To break the cycle of homelessness. (Service provider participant #17, the executive director of a Houston suburban shelter)

I interviewed 25 representatives from 13 different service provider organizations throughout a cross-section of Houston suburbs, for a total of 19 interviews. The individuals interviewed from these organizations encompassed advocates, case managers, employment specialists, program directors/executive directors, and CEOs. Their educational and experiential backgrounds included counseling, fundraising, government, nonprofit leadership, psychology, social work, and theology (with the exception of those interviewed in employment services, whose experience and education tended toward workforce development and recruiting/staffing). Several individuals interviewed had multiple or advanced degrees. The individuals interviewed represented a variety of tenures with their organizations, ranging from six months to 20 years. Depending on their role with the organization, their responsibilities included: administration; advocacy; case management; community partnerships and presentations; daily operations; data collection, reporting, and analysis; homeless prevention; intakes; employment services fundraising; grant writing; leadership/management; services oversight; outreach; and rapid rehousing.

Three of the service provider participants that I interviewed were executive directors and CEOs who founded their organizations. These individuals were driven to establish their respective organizations based on perceived need in their local communities, and for two of the three, based on their own personal experience. For example, one executive director of a mid-sized volunteer homeless outreach and services

organization described her own situation whereby she was left as a result of her divorce in a new town with few resources and no idea where to turn:

I moved here a little more than 23 years ago to the Houston area. When I moved here...my ex-husband back then had decided that he no longer wanted to be married. I had two small children, and so within days of my moving here, he moved out, and consequently put me on a trajectory of figuring out how to "do life" on my own in a new area that I knew nothing about. And so, in reaching out for resources, I couldn't find resources ... it led me to realize that, just as you are looking at the homeless in a suburban area, and I was very much in a very affluent suburban area, with no resources, it was very hard to find out how do you even get food. Who helps you with that kind of thing? (Service provider participant #20)

Similarly, another executive director and founder of a small suburban volunteer outreach organization established her organization based on what she saw as a perceived lack of social services for the homeless or at-risk homeless in her suburb, as well as her personal experience with job loss, transitional homelessness, and addiction and mental illness in her family:

The reason I came to found the organization is because I realized that only by the Grace of God go any of us....My husband and I went through a situation several years ago where he was laid off from his job of 23 years, and he had a hard time finding another job...We lost our income and our housing in a matter of 24 hours, we were told we had a week to get out. We didn't know where we were going to go, we couldn't go back to our house because we had rented it out, we didn't know how long it was going to take both of us to find jobs. And so, it really hit me that, "What would we do if we didn't have family support or friends' support?" (Service provider participant #13)

The experiences of these two individuals in particular are noteworthy because they represent the paradigm shift that can happen when homelessness becomes personal; when, suddenly, now, it is yourself in this situation (without a job or a home, perhaps), and the distant experience that you have observed happening to others becomes your

own experience. Research has found that approximately half of Houston households are what the researchers termed “liquid asset poor,” meaning that they have not saved enough money to have a standard of living above the poverty level for three months.

According to this research:

In Houston, 20% of households live in poverty, but more than twice as many (52%) are financially vulnerable. These “liquid asset poor” households do not have enough savings to live above the poverty level for just three months if they lose a job, face a medical crisis or suffer another income disruption. Households of color fare even worse: 66% of African-American households and 74% of Hispanic households are liquid asset poor. Of households earning between \$50,000 and \$75,000 annually, 47% are liquid asset poor. These households live in a state of persistent financial insecurity, one emergency away from falling into debt or even losing a home. The inability to bounce back from financial pitfalls not only hurts Houston families, but also stifles the city’s long-term economic growth. (Family Assets Count, 2015, p. 1)

As will be later discussed, this study reiterates the importance of upskilling so that homeless or near-homeless individuals can earn enough in order to be able to save a financial cushion and therefore avoid potential transitional homelessness when a crisis occurs. The study also emphasizes the importance of empathy in hiring practices by employers, as the harsh reality is that for many in Houston, homelessness is a possibility in the event of a major life crisis due to the lack of sufficient financial resources and/or family and friend support.

Many of the service provider organizations that participated in this study were founded either in association with Christianity or with the support of Christian churches. For example, one of the participant assistance ministries was established by ten congregations of varied Christian denominations who agreed to combine resources in order to more effectively serve the needs of their local community. In another example,

one of the participating shelters was founded by an individual who devoted her life to helping the poor; as part of her Christian ministry, she opened her home to local women in crisis, and eventually her work resulted in the foundation of the shelter dedicated to helping homeless women.

Along these lines, several service providers mentioned the importance of the Christian faith and spirituality in helping and encouraging the homeless. For example, according to the executive director of one small suburban homeless outreach participant organization:

The faith-based Christian service providers do a huge amount of the social services without the aid of government dollars, as HUD dollars make it too difficult to minister faith too, a surprising key to recovery for so many. (Service provider participant #5)

And according to another executive director of a small volunteer homeless outreach organization:

Because the worship is a big part of it [helping the suburban homeless]. I think that if you meet people's material needs but you don't address their spiritual needs than nothing really changes—Because the true change must come from the inside, not from the outside. (Service provider participant #13)

As the genesis of this entire study was catalyzed by what I consider to be my personal spiritual, ethical, and moral obligations, I feel compelled to again reiterate the importance of faith and spirituality in the provision of services to and the recovery and encouragement of the Houston suburban homeless and near-homeless. Although sometimes the problem of homeless may seem insurmountable, Christians are again and again Biblically encouraged and reminded that we are not in this fight alone. From a

service provider standpoint, such Christian faith compels service providers to step in to fill gaps in social services in the community that physically feed the body, and also minister to the souls of the underprivileged.

The size of the participating service provider organizations ranged widely, from a volunteer homeless outreach organization comprised of three entirely volunteer staff, to an assistance ministry with about 90 paid staff. The median staff level at participating service provider organizations is 12 employees. Several of these organizations have large volunteer staff to supplement their paid staff. For example, one organization estimated they leverage approximately 1,000 volunteers throughout the course of a year for various projects and initiatives, and another estimated having 600 to 700 volunteers throughout the year engaged with her organization.

While one of the study findings addressed in Chapter 5 (Summary of Key Findings) regards the lack of structural social service resources in the Houston suburbs (such as suburban shelters), it is heartening to note the wealth of other resources already available, such as those offered by the suburban assistance ministries. The larger issue may be one of awareness, and ensuring that those who need (e.g., the Houston suburban homeless and at-risk homeless), are made aware of the existence and location of the suppliers of resources available to them. For example, in the process of making revisions to this dissertation, I was approached in a suburban Wal-mart parking lot by a young lady (currently out of work, expecting a child, and living in her car with her boyfriend) begging for money. I referred her to the various resources by that location, and when asked her if she had a copy of the “Help Card” produced by the Coalition for the

The words with larger font in the Word cloud indicate those words used more frequently in the mission statements of service provider organizations. Although the mission of each of the participating service provider organizations varies somewhat in terms of scope of services, they are almost all focused on partnering with their respective local communities to provide needed services to no- and low-income individuals and families (as indicated by the largest font words in the word cloud such as “helping,” “communities,” “provide” and “providing,” “homeless,” “families,” and “individuals”); to fill a gap for needed services in the community (as indicated by words in the word cloud such as “basic,” “needs,” and “resources,”); to help clients in a time of crisis (as indicated by words in the word cloud such as “emergency” and “crisis”); and to assist clients by providing the tools and resources for them to gain self-sufficiency (as indicated by words in the word cloud such as “self-sufficient” and “independent”). As summed by one case manager interviewed at a mid-sized Houston suburban assistance ministry:

Our goal is to get them [the clients] into a program that kind of fits whatever [their situation is]; if it’s a crisis, addressing that crisis, or if it is a chronic or generational issue, trying to address that through education, through employment opportunities, or through connecting them with the resources to get what they need. So, the goal is to move people out of needing our assistance. (Service provider participant #11)

And as described by another case manager at one of the shelters for women and children, the mission of her organization is: “We take people at what they think is their lowest... and give them an alternative to learn how to be self-sufficient.” (Service provider participant #24)

Note that the quote above from the first case manager emphasizes the triage approach taken by the service provider organizations, which involves first assessing each client's particular situation, then trying to address any immediate concerns, followed by trying to attack the underlying issues causing homelessness through an investment in education and employment, which should theoretically lead to outcomes such as economic self-sufficiency for the clients. This positive linkage between education, employment, and economic self-sufficiency is introduced with the discussion of human capital theory in Chapter 1, which forms the theoretical framework for this research.

Confidence building and encouragement are also important key parts of the informal missions of the participating service provider organizations. As summed by the executive director and founder of one of the mid-sized volunteer homeless outreach organizations:

Our ultimate goal is to bring dignity back to our clientele through methods of being a shining light of assistance that we can provide. And it trickles down into meeting their basic needs, the food, and the financial assistance. But while those physical needs are met, it is vitally important that people know that they can make it in life. You don't have to be rich to make it. (Service provider participant #20)

Similar to the importance of spirituality and faith in ministering to the needs of the Houston suburban homeless and at-risk homeless, the key point from the quote above continues to build on the types of human capital investment that the Houston suburban homeless and at-risk homeless need, notably confidence building and encouragement. So, we start to see that an investment in education and training may be insufficient for the Houston suburban homeless and at-risk homeless; many of them also

need additional levels of support (encouragement, spiritual, and motivational) to help them prevail.

Partnership with other local service provider organizations, churches, the community, and individuals in offering services and resources to the homeless, at-risk homeless, and underprivileged in the community is considered a critical success factor of the participating service provider organizations. As stated by the executive director of a small suburban volunteer homeless outreach organization:

Our mission is to partner and network together with other organizations, nonprofits, and individuals to meet emotional, spiritual, financial, and physical needs of the homeless and under-resourced in our community to the best of our ability. Because there are a lot of people that have their specialties, and my goal is not to recreate the wheel or duplicate services, my goal is that we all work together in our area of specialties to best meet the meet needs of our community, and I think that coming together and working together makes everything so much more effective and efficient than everybody doing everything separately.
(Service provider participant #13)

To this end, this particular service provider offers monthly community breakfasts whereby homeless services “vendors” in the community, such as those offering free food, free clothing, free mobile healthcare, and free spiritual counseling, convene together once a month in a common location (usually a church) and invite the local homeless and under-resourced in the community to attend in order to meet multiple needs simultaneously. As practiced by this services provider and further discussed in some of the recommendations in Chapter 5 (Summary of Key Findings), it is helpful to develop or recommend interventions to accomplish multiple objectives with one intervention, which aids in efficiency and impact of the intervention.

The service provider organizations represented a cross-section of suburbs in Houston. The 13 service provider organizations can be described as follows: three are shelters, one is considered a transitional living facility, two are employment services centers (but also provide dedicated assistance to homeless veterans), three are assistance ministries, and three are volunteer nonprofits that offer a variety of services and assistance to their clients and surrounding communities. The diversity of suburbs and types of suburban service provider organizations included in the study offered a richness of perspectives to the study data collection.

In terms of the demographics of the clientele of the participating service providers, three of the organizations (two shelters and the transitional living facility) only serve women and their children, and two have programs specifically dedicated to helping homeless and at-risk homeless veterans. Service providers reported that a high percentage of their clients are minorities (African American and Hispanic). Clients of the service provider organizations are typically referred by the local school districts, apartments, churches/religious organizations, and word of mouth. Several of the organizations (and some specific programs) are ZIP code–restricted in terms of their clientele; others served individuals from all over Houston (although they tend to have a core group of clients that reside near their respective locations). The client load of participating service provider organizations varied widely (in direct correlation to their organizational size). The smallest participating service provider has a client load of about 24 families a year, whereas the largest organization estimated that it serves approximately 29,000 (unduplicated, not just homeless) individuals in a year’s time. The

demographics of the participating service provider organizations, specifically the three dedicated to serving women and children, and the high percentage of minorities served, echoed themes discussed in Chapter 2 (Literature Review) that the face of the homeless has diversified over time to encompass more minorities and female-headed families than in the past (Brown & Mueller, 2015; CRS; 2014; Crane & Takahashi, 1998; Culhane et al., 2013; Haber & Toro, 2004; Lee et al., 2010; Nunez & Fox, 1999; Rossi, 1989).

Table 5 summarizes the different types of assistance offered across the participating Houston suburban homeless service provider organizations to their clients. The type of service that any particular organization provides depends on its mission, clientele, and the type and amount of funding that it receives.

Category	Service Offering
Food/Shelter	<ul style="list-style-type: none"> • Basic needs/hygiene • Emergency food/shelter • Housing services • Rooms and meals • Food pantry and fairs
Case management	<ul style="list-style-type: none"> • Case management • Counseling • Intake assessment
Employment services/Adult education	<ul style="list-style-type: none"> • Adult basic education • Career and skills assessment • GEDs or partnership with other organizations to provide GED classes • Computer labs or access/MS Office classes/Access to other office equipment (faxes, printers, etc.) • Financial assistance and/or referrals for education/training/Certifications • Funding to help pay for certification programs or referrals to other organizations who help with this • Internship programs offered by the service provider • Job and interview coaching/feedback • Job fairs • Job readiness workshops (resume writing, soft skills, conflict resolution, communication, etc.) • Job postings/openings/search • Mock interview training • Other employment services classes • Resume building/Critique • Partnership with organizations to provide paid work experience and on-the-job training • Vouchers to associated retail stores to purchase free clothing or free clothing offered onsite/Job clothing closets

Table 5. Summary of services offered by service providers.

Category	Service Offering
Financial Assistance	<ul style="list-style-type: none"> • Bus passes/Fare to the Houston Metro • Budgeting and financial classes (e.g., Dave Ramsey “Financial Peace” classes) • Cash assistance • Assistance with creating savings accounts • Assistance with application for social service benefits (food stamps, child care, veterans, etc.) • Gas or other gift cards • Partnering with organizations who provide free mattresses when clients move into housing • Rent and utility assistance • Vehicle/Gas/Vehicle repair assistance
Health	<ul style="list-style-type: none"> • Eyeglass vouchers • Fitness classes • Mental assessment • Nutrition center • Other health classes or services (nutrition, dental, etc.) • Parenting classes • Partnership with free or reduced cost healthcare clinics • Partnership with organizations to provide formula and/or diapers for infants • Partnership with organizations that provide free or reduced cost women’s services (mammograms, etc.) • Partnership with organizations to help clients access healthcare benefits • Pediatric children’s clinic/Immunizations/Vaccinations • Pedometer challenges • Prescription assistance

Table 5. continued.

Category	Service Offering
Legal/Immigration	<ul style="list-style-type: none"> • Assistance obtaining identification or other vital statistics (e.g., social security cards) • English as a Second Language classes • Partnership with community law firms to provide assistance with legal matters (housing, homeless court, waiving fees and violations, guardianship, child support, custody, divorce, landlord disputes, free legal advice, etc.) and legal advocacy courses/training
Transitional	<ul style="list-style-type: none"> • Free or subsidized housing, food, and continued case management for a specified period of time to help the individual/family get back on their feet
Other/Misc.	<ul style="list-style-type: none"> • Assistance with furnishing/setting up clients' households • Family violence counseling • Free haircuts • Homeless street outreach • Other supportive services • Service linkage/Referrals to other service providers • Spiritual counseling and ministry

Table 5. continued.

Table 5 indicates both the comprehensive scope and nature of services currently available (again, speaking to the earlier point for the need for a bigger marketing campaign to make prospective suburban homeless and at-risk homeless clients aware of the spectrum of these offerings by service providers), as well as the importance echoed by service providers of providing a continuum of services to clients in order to help them get back on their feet (again emphasized in the “Characteristics of Successful Programs” section later in the Chapter). In addition, the table continues to build on human capital theory for the Houston suburban homeless and at-risk homeless in terms of the types of

investment that they need with regards to workforce development, namely the employment services and adult education services offering.

Table 6 summarizes the characteristics of the service providers participating in this study.

Service Provider #	Type of organization	# of Representatives Interviewed	# of Service Provider Clients Participating in Study
1	Shelter for single adults and families	4 (Service provider participants #1 - #4)	5 (Client participants #1 - #5)
2	Volunteer homeless outreach	1 (Service provider participant #5)	--
3	Employment services center; also offers dedicated programs for veterans	3 (Service provider participants #6 - #8)	--
4	Employment service center; also offers dedicated programs for veterans	1 (Service provider participant #9)	--
5	Transitional living facility for women and children	1 (Service provider participant #10)	4 (Client participants #6 - #9)
6	Assistance ministry	2 (Service provider participants #11 - #12)	--
7	Volunteer homeless outreach	1 (Service provider participant #13)	4 (Client participants #10 - #13)
8	Assistance ministry	3 (Service provider participants #14 - #16)	5 (Client participants #14 - 17)
9	Shelter for women and children	3 (Service provider participants #17 - 19)	3 (Client participants #18 - #20)
10	Volunteer homeless outreach and services	1 (Service provider participant #20)	--
11	Assistance ministry	2 (Service provider participants #21 - #22)	--

Table 6. Overview of participating service providers.

Service Provider #	Type of organization	# of Representatives Interviewed	# of Service Provider Clients Participating in Study
12	Shelter for women and children	2 (Service provider participants #23 - #24)	3 (Client participants #21 - #23)
13	Homeless prevention	1 (Service provider participant #25)	1 (Client participant #24)

Table 6. continued.

About the Client Participants

I interviewed 24 clients from seven different service provider organizations: 13 were female, and 11 were male. (Although unintentional, the gender split for clients in this study was almost 50/50.) In terms of race, seven were Caucasian, and the remaining 17 were minorities (primarily African American and Hispanic). Their ages ranged from 24 to 67. Their housing situations varied at the time of interview; two were living on the streets (in encampments), two were living in their cars, 11 were staying at shelters, four were in transitional programs (one was the house mother in this program), and five were housed in an apartment but in homeless prevention programs. Three of the 24 could be considered chronically homeless.

Most of the clients had children. Two of the clients described short periods of literal homelessness with their children. For example, one shelter client and his son were kicked out by the client's girlfriend, and for a short period of time he and his son stayed in the airport, at the hospital, and rode the Houston Metro until they could get into a

shelter. Another young female client of a suburban transitional living facility lived behind a trash dumpster with her two young boys for a short period of time after being kicked out by her ex's family; eventually a woman discovered her, helped find her a shelter, and then ultimately assisted with her placement in the transitional living facility. Again, the demographics of the client participants in this study reiterate the changing face of homeless in the suburbs (more families with children, more minorities, more transitionally homeless and only a small percentage of the more traditional, chronically homeless that we typically see street-side that people associate with "homeless;" (Brown & Mueller, 2015; CRS; 2014; Crane & Takahashi, 1998; Culhane et al., 2013; Haber & Toro, 2004; Lee et al., 2010; Nunez & Fox, 1999; Rossi, 1989), and therefore the heightened importance of addressing this issue in the Houston suburbs.

Table 7 summarizes the characteristics of the clients participating in this study.

Client #	Service Provider	Age	Race	Sex	About the Client
1	1	30's	African American	Male	Has a criminal background; says he is homeless due to "bad decisions;" high school graduate and has two years of college; has his CDL and forklift certification; currently working full-time and staying in the shelter
2	1	39	Hispanic	Female	Born and raised in Houston; was staying with family but it didn't work out; high school graduate; currently working part-time and staying in a shelter
3	1	41	Hispanic	Male	High school graduate with some vocational education for electrical; recently lost his job; was staying with his sister but it didn't work out; currently seeking work and staying in a shelter

Table 7. Overview of participating clients.

Client #	Service Provider	Age	Race	Sex	About the Client
4	1	26	African American/Irish	Male	Divorced father; girlfriend kicked him out of the house; high school graduate and has attended some trucking school; currently working full-time and staying in a shelter
5	1	51	African American	Female	Has a Bachelors; lost her job which precipitated the homelessness; staying in a shelter
6	5	26	Hawaiian	Female	High school graduate and then enlisted in the military; currently working full-time as a receptionist and studying paralegal studies; staying at the transitional living facility
7	5	50	African American	Female	In the transitional living facility due to high levels of debt as a result of divorce; high school graduate and has one year of college; currently working full-time

Table 7. continued.

Client #	Service Provider	Age	Race	Sex	About the Client
8	5	37	Caucasian	Female	In the transitional living facility because she cannot afford housing on her salary with two young children; high school graduate and has some vocational schooling as a medical assistant; currently working full-time and going back to school to pursue a Bachelors
9	5	67	Caucasian	Female	College graduate; was homeless twice in her life due to divorce and medical bills; currently working full-time and is the house mother at the transitional living facility
10	7	40	Caucasian	Male	Chronically homeless; high school graduate with some college; laid off from his job about five years ago; currently panhandles for money and lives on the street
11	7	59	Caucasian	Male	Recently moved to Texas; currently living in his car (which is broken down); high school graduate and has some college, plus his forklift certification; not working but is seeking work

Table 7. continued.

Client #	Service Provider	Age	Race	Sex	About the Client
12	7	26	Caucasian	Male	Has been homeless on and off since he was young; an alcoholic; high school drop out; currently panhandling for money and lives on the street
13	7	57	Caucasian	Male	Was laid off and is waiting on disability; chronically homeless living in his car (which is broken down); high school graduate
14	8	45	African American	Male	Has been in Houston for under a year; was in a transitional program and just got an apartment with the help of the service provider; high school graduate and has some college; currently working full-time
15	8	24	African American	Male	High school graduate and currently attending college; has a criminal background; looking for a part-time job while he is in school and lives in an apartment with the help of the service provider organization

Table 7. continued.

Client #	Service Provider	Age	Race	Sex	About the Client
16	8	56	Caucasian	Female	Staying with her daughter; had to leave her apartment because they raised the rent and she couldn't afford it, plus she was laid off of work; high school graduate
17	8	33	African American	Male	Recently laid off of work; high school graduate currently attending school for a Bachelors; has his forklift certification; seeking a part-time job; lives in an apartment with the help of the service provider organization
18	9	37	African American	Female	Recovering alcoholic; high school drop out and would like to go back to school to get her GED, currently not working but seeking part-time work and lives in a shelter
19	9	24	African American	Female	Has her Certified Nursing Assistant certification and is seeking a job; high school graduate and has some college; currently living in a shelter

Table 7. continued.

Client #	Service Provider	Age	Race	Sex	About the Client
20	9	63	Hispanic/Italian	Female	Native Houstonian; homeless due to the passing of her husband; currently going to school to get her GED and living in a shelter
21	12	53	African American	Female	Enrolled to attend school in the Fall; high school graduate and graduate of vocational training as a medical assistant, and has her Certified Nursing Assistant certification; currently works full-time and lives in a shelter
22	12	48	African American	Female	Has been in prison for most of her life; high school drop out but has vocational training in janitorial from prison; currently working full-time and lives in a shelter
23	12	35	Hispanic	Female	Recovered drug addict; high school drop out but is working on her GED; working full time and lives in a shelter

Table 7. continued.

Client #	Service Provider	Age	Race	Sex	About the Client
24	13	33	Hispanic	Male	Native Houstonian; was laid off from his job and his family had to leave their apartment because they raised the rent; high school graduate and has a forklift driving certification; currently living in a new apartment with the help of the service provider organization

Table 7. continued.

There are a number of different themes and observations regarding workforce skills and development needs of the Houston homeless and at-risk homeless generating from Table 7 that will be discussed throughout the rest of this Chapter.

Reasons for Homelessness

The most prevalent reasons cited by clients for their homelessness were financial, such as loss of job, the inability to find a job, underemployment, being laid off, lack of savings, and sudden loss of income due to divorce, debt, or medical bills. For example, one of the interviewees who is actually now the house mother at a suburban transitional living facility cited two periods of homelessness in her life: one due to divorce and the resulting financial implications and the other due to insurmountable medical bills as a result of an accident.

The financial predicament of several clients was fueled by a crisis that they did not have the financial reserves or family support system to rely on and thus lead to

homelessness. As summed by one shelter client, an older African American lady who had relatively recently moved to Houston from Chicago and was currently living in a suburban homeless shelter:

Well, I'm homeless because I lost my job. So, you know that threw me into a crisis. And I feel like I don't have enough support, like I don't have enough of family [because they are all in Chicago]. So I don't have anybody to say, "Hey, look. I'm in this crisis. Can you help me out?" (Client participant #5)

In another instance, a shelter client (a single, Hispanic gentleman currently unemployed but seeking electrical work) experienced a series of crises leading to homelessness. He described losing his housing, his transportation, and then his job all within quick succession over a period of about two weeks. And as a result, he found himself in a shelter:

I'm in a situation right now. Everything just fell apart within two weeks. My landlord and I had a disagreement... So I moved out one day, and I told my sister that I had trouble with this landlord. So, she understood, and she, you know, allowed me to move in with her. Well, the girl I was living with, [her] and my sister didn't get along. So she [his girlfriend] went to Pearland, and I went to the Highlands. And our time apart, it was hard for us, so she didn't want to stay where she was at. And I was not 100 percent comfortable living with somebody—my sister. And I really wanted our own place again but [that] was going to take a little more time. So she decided we come to the shelter to be together. So we come here. And, well, before I came here, my truck broke down, and I tried to fix it. It broke down again; it broke the head gasket. So, I had to quit my job... I had to tell my boss, because he gave me a week off of work just to try to get my truck resolved, and it ain't working so I went ahead and just quit. And, so, there I lost my truck and my job, and so in the process it was going to be hard to look for a job without a ride. And so, it was convenient for us to decide to come to a shelter. (Client participant #3)

Many of the clients interviewed either don't have family or friend support systems, their family or friends are far away, or they don't want to stay with family or

friends. The shelter client (who is a Hispanic gentleman currently staying in a shelter who is unemployed and seeking work in electrical) continued describing his situation in the following terms:

Well, I've lost everything, you know? Toward the end of staying with my sister, my brother-and-law and I just didn't get along. And so it was easier for me to go ahead and say, "Yeah, I will go to a shelter." I didn't have no job. I didn't have no car. I didn't have a home. I don't just have a bunch of people I can chose from to move in with for a short while. (Client participant #3)

Sometimes for the clients, although they may have family or friends, they felt that it was just better for them to be independent in a shelter. For instance, one of the older, female, Hispanic/Italian interviewee was staying in a shelter although she has a daughter. When asked why she didn't want to stay with her daughter, she replied:

"Because it doesn't work when you live with your children, and they are married and have spouses. It is a problem sometimes. Not that my kids wouldn't like for me to be there, but it is the spouses, you know?" (Client participant #20) And with regard to the possibility of going back to living with one of her daughters, she stated:

She was going through a lot at the time, as far as divorce and everything. And so I felt like I needed to give her some space and give me some space. Which now she is settled down and everything and she wants me back, but I am trying to look out for *me*. I want to do my own thing, you know? That is why I am going to school and trying to make something of myself. It is not too late. (Client participant #20)

Another shelter client (a middle-aged African American lady) who has been in jail a substantial portion of her adult life also chose the shelter instead of living with her family; she expressed desire to develop a sense of independence for the first time in her life:

I need to learn to be independent. ...[I chose] to come here and start something fresh, you know? And that is what I decided to do. They [her family] are still asking me to come home, and I don't want to go. I go visit, but I am not gonna stay, because they treat me like a child, you know? And I need to be independent. Because if anything happened to my momma, I ain't going to have nothing. ... And when I used to work for her, she would give me money under the table and telling me how to spend it. And I don't want to live like that. I wasn't going to live like that.... It is just places that I chose not to go stay. I have my oldest sister, I have my brother, I have a sister in Friendswood, I have a brother in Channelview, I have an auntie that lives in La Porte. You know, there are places that I can go home, but I choose not to. I choose not to because I am not comfortable there. And where I be, I have to have peace of mind, you know? (Client participant #22)

There are a few key points that I would like to reiterate from this discussion and these quotes above from clients: 1) not all homeless or at-risk homeless have family and friend support nearby that they can lean on, if needed (Client participant #22 was one of the exceptions in this study, although she chose to live independently); 2) homeless and at-risk homeless need to build a financial reserve in the event of crisis; and 3) in order to build up a financial reserve, they need coaching and training on soft skills such as finances and budgeting, and ultimately need to earn the types of wages that are high enough to allow them to sustain and save. So, again, we continue to build on the human capital theory for the homeless and at-risk homeless in Houston to see that another important type of training and coaching investment that would be helpful to their self-sufficiency and sustainment is life skills coaching in terms of financial and budgeting training and coaching.

At least six of the clients came to Houston lured by the promise of a better job or a better life, and then things didn't pan out as expected. As summed by one shelter client (again, the single, African American lady relatively recently moved from Chicago to

Texas), “In Chicago, Texas is often brought up. People talk about going to Texas, the jobs, and Dallas. [Jokingly] I believe people think that the movie *Dallas* is real.” (Client participant #5) Another (a younger, Hawaiian lady who has two young children, currently staying in a transitional living facility) had moved to Houston so that her children could get to know their father; the outcome turned out to be disastrous resulting in a brief stint of literal homelessness with her children and eventually to her living in a Houston suburban transitional living facility for women:

When I moved to Houston, I didn’t think about all of the possible outcomes of my decision of moving here. I moved here so my children could know their father... So, when I moved here, I just kind of went on the faith that, "Yeah, he’s gonna be here always, and he’s gonna help me out." But he ended up technically kidnapping the two boys and said he wouldn’t return them. So I didn’t really think about like all possible outcomes. I just kind of, I just took a leap of faith without any analyzing the situation and think of all the possible outcomes and not knowing anybody here is also really hard. (Client participant #6)

These quotes inspire empathy for these two clients, who, in desiring a better life, did what for many of us is just human nature, and took a chance without fully investigating or thinking through the consequences. Since there is probably not one reader of this dissertation who cannot admit to at least once doing something similar (e.g., taking a chance or a risk without full due diligence), it is hard to fault the clients for this thinking. However, it does again point to, perhaps, the need for more information across state lines about career opportunity availability and making this information accessible, perhaps at the local Workforce Solutions (or equivalent) offices to these marginalized populations.

The female clients in particular cited the dissolution of a relationship or marriage as a contributing factor to homelessness. Five of the 13 female clients (and one male) mentioned divorce or dissolution of a relationship as an underlying contributor to their homelessness. Several of these divorced clients had been out of the workforce for some time as a result of the nature of their relationship with their spouse, which put them in a difficult position to try to get a job after the dissolution of the relationship. A case manager at a mid-sized Houston suburban assistance ministry described the situation as follows:

A lot of the at-risk that I serve, their husbands have left and that's like a big thing. It's not a lot of times abuse, it's just the husband was in the house, they had a fight, he's gone, and now they've got to start working, they weren't working before. That's kind of been this year, the most common thing I've seen. There's been some kind of separation of the family and now they're at risk of losing the housing. (Service provider participant #11)

Similarly, as stated by a young, female, African American shelter client when asked what were the reasons for her homelessness: "Because I was stuck in the 1800s that my husband should work and not me. I think if I would have worked and he would have worked, we would have never been in this predicament." (Client participant #19)

As discussed in Chapter 2, Literature Review, the face of homelessness has changed to a situation with many more families, many of which are headed by single women (Lee et al., 2010). Divorce and dissolution of a relationship is a huge catalyst for homelessness for females in particular, as oftentimes they may have deferred their personal investment in training and education in themselves so that they could care for the children in the family, and then when the relationship dissolves, they are left to fend

for themselves with little financial support (often little to no child support), potentially little employment history and skills, and the challenges of managing the care of children, work, and childcare while working outside the home to support the family. For example, as related by the executive director at one of the small volunteer suburban homeless outreach organizations:

We have another lady [a client] that lives in a hotel with her four kids, and her husband and her are separated. And he is not providing her with the financial stability that she needs to be able to take care of her family, and she can't manage being a mom to four children and not having transportation, financial support, going to work, and having adequate care for her children. (Service provider participant #13)

Becker (1993) discusses this phenomenon in society generally speaking with respect to human capital theory when he states:

Human capital theory gives a provocative interpretation of the so-called gender gap in earnings. Traditionally, women have been far more likely than men to work part-time and intermittently partly because they usually withdrew from the labor force for a while after having children. As a result, they had fewer incentives to invest in education and training that improved earnings and job skills. (p. 394)

The study findings reiterate a need, especially with regards to single female heads of household who are homeless or at-risk homeless in the suburbs, to provide them with the incentives, resources, and support to invest in their education and skills so that they can earn a living wage to support their families as often times new heads of household.

Other reasons cited for homelessness by clients include substance abuse issues and criminal backgrounds. Four clients cited issues with current or past alcohol or drug

addiction, and three stated that their criminal backgrounds were contributors. According to the executive director of one of the small volunteer service providers (an older gentleman who is retired), both addiction and mental health are a key contributor to homelessness in his suburb, particularly for the literally and chronically homeless: “In this area it is pain pills...OxyContin and that type of thing is very popular up here in our county.” (Service provider participant #5) The literature (Chapter 2) discusses the issues of substance abuse and criminal backgrounds (which may or may not be co-occurring issues with homeless and at-risk homeless in suburban Houston). Again, this study points to the need for empathy by prospective employers in hiring decisions and apartments in leasing, especially with regards to clients’ criminal backgrounds and rental history/credit scores. As stated by one service provider:

I don’t think you should have to be penalized for the rest of your life because you made a mistake at some point and had a felony, or you couldn’t afford your rent and had to leave the place where you lived, and have an eviction or a foreclosure, or you had to max out all your credit cards just to exist and then you have bad credit scores. (Service provider participant #13)

We have all made mistakes at various points in our lifetimes; and as will be discussed again later in the Chapter and again in Chapter 5 (Summary of Key Findings) both clients and service provider organizations would like for employers to give the homeless a second chance when it comes to hiring decisions.

Several of the chronically homeless clients interviewed persist in being literally homeless (e.g., on the streets or living in their cars) because they believe that to be a better situation than living in a shelter. For example, one of the chronically homeless clients interviewed, a Caucasian, older gentleman—who has been living in his car for

the last two years waiting on disability due to a back injury—summed it up in the following terms:

I could do the ... shelters, residential, whatever. But I can't do that. I'm pretty much a loner. I could not deal with those people. It wouldn't be worth it. I'd rather stay in my truck than deal with all that friction, and mess. It's a lot easier where I'm at. (Client participant #13)

I think many of the readers of this dissertation can empathize with clients' desire for freedom and self-sufficiency, which in some cases translates to living on the streets or in their cars, versus going to the structure, rules, and regulations often encountered at homeless shelters. Families in particular may have difficulty going to homeless shelters, and there were many instances cited by service providers and clients of homeless families living for a period of time in their cars, rather than facing a shelter. Oftentimes the issue with homelessness and families is that, depending on the age of the children in the family, the family may have to be split up by gender in the living arrangements at a shelter. In addition, in some cases homeless or at-risk homeless females may be reluctant to seek needed social services or go to a shelter due to the fear of having their children taken away from them. As stated by the executive director at one of the small volunteer homeless outreach organizations:

There is something wrong with the system. I have had moms who have been out on the streets with their children, and have their children taken away. I have had pregnant girls that have been out on the streets that as soon as they give birth they have had their children taken away from them. They want to be able to provide for their kids, there is just not enough help for them to be able to get what they need to be able to be the parents that they want to be able to be. (Service provider participant #13)

As a parent myself, I know that I would do almost anything to avoid losing custody of my only child.

The service providers interviewed echoed similar factors regarding the reasons for homelessness of their larger client populations, including unemployment or underemployment; a lack of education, training, or workforce skills; a lack of a family support system; and the precipitation of a crisis (loss of job, medical crisis, death of a spouse or divorce/dissolution of a relationship with or without domestic violence, and the breakdown or loss of transportation). These factors are combined oftentimes with a lack of a financial reserve, financial overextension, and lack of money management skills; mental or physical disability; substance abuse; criminal background; a cycle of poverty, lack of education, and abuse; and a lack of family role modeling.

Service providers also related instances of clients coming to Texas seeking a better life but then getting stuck with no job and no housing. For example, the program manager at one suburban homeless shelter described how she has seen many homeless clients come to Houston to seek the promise of a better job and life:

We have had quite a number who have come to Texas, ‘the land of milk and honey,’ from other states and to find no jobs in their field. I will give you an example. I think at one point ChevronPhilips was hiring 10,000 people for the expansion of all of their plants. What happens when those 10,000 jobs are gone and then the next 10,000 show up? And so we had a number of people come from other states seeking a new life. And when they get here the job is not, and so that is prevalent. (Service provider participant #1)

Financial reasons such as unemployment or underemployment are the biggest reasons cited by service provider interviewees as to why their clients are homeless. As

summed by a young case manager currently pursuing her Masters in social work and working at a mid-sized suburban assistance ministry:

Underemployment leads them [clients] to homelessness, as in they are employed but the income coming in is not enough to sustain, rent, utilities, household bills, food, [and] basic needs. The income is not enough, and then a small crisis occurs—like a car issue. Funds would typically go to the bill or utility. However, a car is an essential need to some families, and so the funding goes to the car instead of something else, which causes the family to get behind, including late fees, which brings the amount to something that they cannot just pay off and forces eviction. Families not all the time can lean on families or friends for assistance. And when they do reach out to agencies, either it is too late or for whatever reason there is not enough funding at certain agencies that they reached out to, and it leads them to living out of their car. We had a family in, they came in the lobby, the mom was here for employment services, but they were living out of their car. ...And then when they try to reach out to [and] we try to recommend shelters, they are full. And it leads to a dead end for the families. (Service provider participant #14)

There are a few points from the quote above that I would like to emphasize: 1) Again, the quote above reiterates the need for a financial cushion/savings by the Houston suburban homeless to help them avoid transitional homelessness (in this case, the family living out of their car); and 2) the reality that we have many families experiencing transitional homelessness living in their cars in Houston. I would like the reader to take a moment and visualize what it would be like to live with your family in your car for a period of time. These individuals are often difficult to count in the annual Point-In-Time count due to their mobility. The very fact that we have a number of homeless families living in their cars in suburban Houston again reiterates the need for solutions for this problem in our city.

Similarly to what some of the clients reiterated, the service provider interviewees also echoed that the criminal backgrounds of some of their clients are another reason

why these clients can't easily get jobs and rent apartments. The executive director, an older gentleman who is retired, of a volunteer homeless outreach organization said:

One more thing that causes people to be homeless: it is probation and parole from prison. They can't get a job. I have a black fellow right now, that connections I and others have used cannot get him a job because he has a prison background on small, petty charges on drugs. Even Wal-Mart has turned him down, and that is kind of a catch-all. They are always hiring people. He got his interview at Wal-Mart through an employee connection. And he couldn't get a job. That is another reason people end up being homeless. (Service provider participant #5)

Service providers also emphasized that substance abuse and mental health tend to be some of the biggest reasons for homelessness among the literally and chronically homeless. As stated by the young, female case manager interviewed at the mid-sized suburban assistance ministry, "So, I would say, the homeless that we see that come here regularly, the ones that are living in the woods, who we are not trying to house, they're not necessarily interested in housing or able to get into housing, I see like mental health is the biggest thing for those people, substance, some kind of combination of mental health and substance abuse." (Service provider participant #11)

Service providers emphasized that the issues with the chronically homeless (e.g., drug and alcohol abuse) are often different than reasons for those who are temporarily or transitionally homeless (e.g., job loss or financial). For example, a gentleman case manager at the mid-sized suburban assistance ministry said:

Chronically homeless is a whole different situation. You're talking about trying to work with some, and they weren't able to stay housed at the places because of their actions because of things that happened [and] because of their past behaviors. So, I see that as, I see that as being difficult. You need a 24/7 crisis manager to work some of those cases. (Service provider participant #12)

The literature supports these findings of a high prevalence of mental illness and substance abuse challenges with the chronically homeless: research has found that many of the chronically homeless have mental health and/or substance abuse issues (Burt, 2003; Zuvekas & Hill, 2000). The additional challenging nature of chronic and literal homelessness again points to the additional assistance that these clients need to help rehabilitate their lives and put them on a sustainable path forward.

Service provider interviewees also cited the attitude of some clients—sometimes of entitlement, defeatism, or even a lack of common sense—as a contributor to suburban homelessness. For example, the executive director of a Houston suburban homeless shelter for women and children said:

Sometimes it is as simple as attitude or perspective on life. Or maybe they [clients] are either feeling entitled or they don't have a good foundation or a realistic expectation about how things work. And so a lot of times you spend time trying to help them prepare for putting their best foot forward and getting a job, what are some things that you should do. Maybe a lot of it is just common sense, but some of our people have never been taught or had the parental involvement in their lives or assistance and training and so are at a disadvantage. And so you try to help them with that—overcome their deficiencies in their faulty thinking. And so their attitude is a reflection probably of the experiences that they have had and what they have been exposed to. But attitude unfortunately does come into play. (Service provider participant #17)

Up to this point, the reasons for homelessness provided by clients, and then by their service providers, have been relatively similar. But, with the point above (the attitudes and unrealistic expectations), service providers differ from clients in that they perhaps have the capacity to take a step back and see something across clients that clients are unable to see in themselves; that is, recognizing the fact that many of their homeless clients may not have had the type of upbringing and/or role modeling needed

to prepare them for realistic expectations of what it takes to obtain and keep a job. Therefore, soft skills and life skills continue to be added to the type of human capital investments that service providers believe that clients need for success.

Figure 4 is a word cloud summarizing the frequency of responses provided by service provider organizations in terms of the reasons why their clients are homeless. Similar to Figure 3, the font size of the words in the word cloud correspond to some of the most frequently-cited words in the responses of service providers. As Figure 4 illustrates, some of the most frequently used terms in describing why clients are homeless were “lack,” “job,” and “loss,” again indicating that unemployment or underemployment are some of the key reasons provided by service providers in this study as to why their clients are homeless. These findings are consistent with the Houston literature: The 2011 “Capacity and Gaps in the Homeless Residential and Service System” report found that the number one cause listed in the needs assessment is financial problems related to the loss of a job/employment (Fleming, 2011).

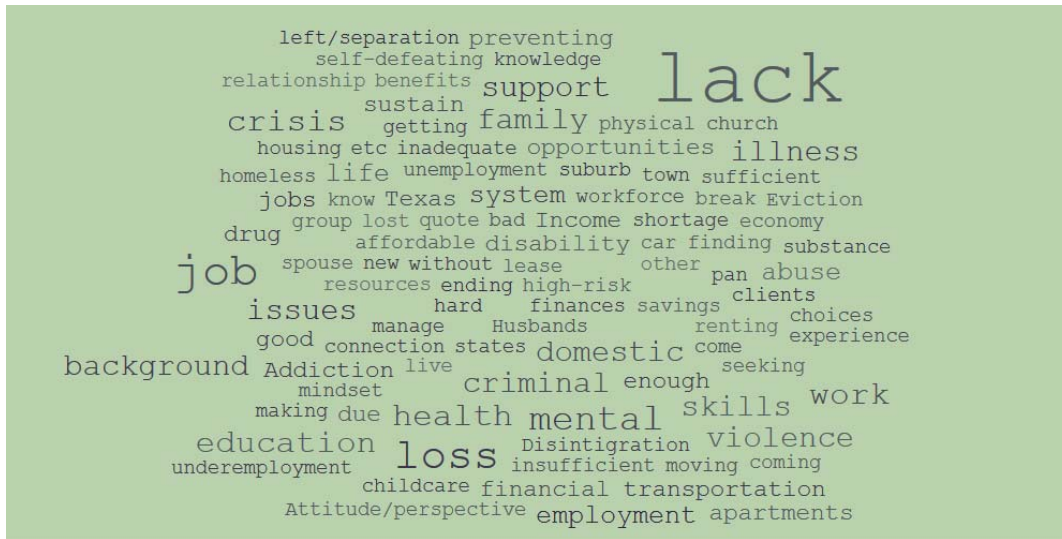


Figure 4. Frequent terms used by service providers.

Getting to the underlying cause of the homelessness issue, however, service provider participants believe that the ultimate root causes of homelessness of their clients are: the underlying lack of education and corresponding skills; cycles of generational poverty, abuse, and poor family support/role modeling; and in some cases mental illness and/or substance abuse. For example, one of the female case managers interviewed at one of the larger assistance ministries participating in this study expressed surprise at the fact that lack of education still persists as an underlying root cause of homelessness in this country, and she sees this issue across the age spectrum:

I am not understanding why in this day and age we still have the literacy problem. I thought we were done with it, but it appears we are not. I find it not just in the adults that are over 30, but I find it also with the transitional age youth; it is kids that are between 18 and 24 as well. So it kind of seems like a cycle as well. (Service provider participant #14)

Often, these issues (lack of education and skills, generational poverty, etc.) go hand-in-hand with one another with the clients. Human capital theory incorporates the positive relationship between an investment in education and training and increases in productivity and earnings (Becker, 1993; Lucas, 1988; McMahon, 2006; Nafukho et al., 2004; Schultz, 1961); therefore, theoretically, if we increase clients' levels of education and skills, their wages or earnings should increase as well.

Barriers to Finding Affordable Permanent Housing

The biggest barrier reported by clients in terms of finding affordable permanent housing in the suburbs is also often financial. It is very difficult to afford an apartment on a minimum wage or lower-income jobs (and certainly with no job). And often the waiting list for any type of public assistance housing is very long because there is a shortage of supply. Several clients have poor credit histories or scores and/or histories of broken leases or evictions that make it difficult for them to find housing. In the words of one shelter client (an unemployed Hispanic gentleman currently seeking work in electrical), "Well, the biggest barrier is I don't have a job, you know? You cannot live anywheres without money, you know? It's understandable." (Service provider participant #3) Another shelter client (an older African American female from Chicago) said:

Well, if I'm not employed, then I can't find an apartment. And then, I owe a couple hundred dollars on utilities that I didn't pay in Chicago. So getting an apartment I would think I would need an income of like, let's just say \$25,000 a year. So that's like a pretty nice sized amount... You could walk out the door and get a job at Burger King or McDonalds, all those kinds of places, but you can't pay rent with that. (Service provider participant #5)

Similarly, a female transitional program client (who is also a single parent) who can't afford housing on a para-professional's salary in a public school district said:

There is housing out there, but it's not suitable for children, you know, within your budget. Because if you look at it, I make—after taxes, you know—it's barely \$1,000 a month. And if you're gonna pay rent, ... how are you going to survive on a thousand a month when you've got a car note, you have your phone, you have utilities, [and] food—I mean, basic necessities? How will you live on a thousand a month in Houston? There's just not affordable housing for that.
(Client participant #7)

This theme is also emphasized in the literature: According to the Coalition for the Homeless of Houston/Harris County, if you consider the term “homeless” literally, a key contributor to homelessness is then naturally because people can't afford to live in the available supply of housing: “While circumstances vary, the main reason people experience homelessness is because they cannot find housing they can afford” (Coalition for the Homeless of Houston/Harris County, 2016). So, this issue is partially a supply and demand issue in suburban Houston: There is more demand for affordable housing in the suburbs for lower-income individuals and families than there is supply of affordable housing.

And even if the homeless or at-risk homeless clients are working (as described in by the client who works for a local suburban school district in her quote above), it still may not be enough to afford to rent an apartment. For example, the younger, chronically homeless client shared with me in his interview that he used to work as a fry clerk at a local restaurant, and tried to share rent with a buddy in order to afford an apartment stay, but still could not make ends work. So, in terms of structural investment needed in the

Houston suburbs, it includes the need for shelters in the suburbs as well as additional supply of affordable public housing.

For two of the three chronically homeless clients in the study, in addition to their underlying drug or alcohol addictions, homelessness itself has become a barrier for them to find jobs and/or affordable permanent housing. One chronically homeless client (a middle aged Caucasian gentleman who struggles with alcoholism) who has been living on the streets for about five years said:

It's [finding affordable permanent housing] not easy. I mean, can I ask a question? I take all your money. You don't have any money. I took your home. You don't have one of those, ok? I take your vehicle. What's that? You don't have that anymore. You don't have a job. Your cell phone, no; that's a luxury item, it's not a priority...Ok, now the clothes on your back, that's what you're wearing. So if you got up and left right now, which way would you go? Family? What's that? My brother lives right there. My dad lives right over there. No, they've taken your family, too. Friends? Friends love you when you're up [and then] they don't. (Client participant #10)

Again, with his quote this client invites the reader to walk for a moment in his shoes, and imagine what it would be like if you were a 45-year old Caucasian male, no job, no house, no car, struggling with alcoholism, and family and friends are not helping you (presumably they have given up on you). The point is that it is difficult to find affordable public housing (or anyone that will rent to you or employ you, for that matter), when you are literally homeless. Clearly, the underlying substance abuse issues must be dealt with, but when your appearance is that of a chronically or literally homeless person, you are generally granted very little credibility by the outside world. Perhaps additional education on this issue might help aid the Houston public with empathy and understanding, and eventually to solutions.

The chronically homeless client (a 26-year old Caucasian male who has been homeless on and off since he was 14 years old and struggles with alcoholism) described homelessness as a kind of cycle that it is very difficult for him to break out of in order to find a job and housing:

Being able to stay clean, like, physically is a big part of it. Like, appearance is everything, that and I have been here so long that it is kind of hard to find a job that they don't recognize me. And once you get into this hole, it is hard to get out for different reasons like that as far as job goes. (Client participant #12)

This study reiterates again that the chronically homeless in suburban Houston need even more additional support and investment to help them overcome challenges of mental illness and/or substance abuse (possibly co-occurring).

Current Workforce Skills

The quickest way to end homelessness is [getting] clients to work and getting them back on their feet—getting them to realize self-sufficiency. (Service provider participant #1, program director at a Houston suburban homeless shelter for single adults and families)

In this portion of the interviews, I asked both the service provider organization representatives and a subset of their clients about the education and employment levels of clients, what types of jobs and workforce skills that clients possess, and any barriers to employment. This section of the interview guide addresses research questions 1 and 2:

1. What are the perceptions of staff members working for Houston suburban homeless service provider organizations regarding their clients' current workforce skills?

2. What are the perceptions of Houston suburban homeless service provider clients regarding their current workforce skills?

Educational Levels of Clients

Although the education levels reported by service providers of their larger set of clients mostly tended toward the lower levels (no college), some service providers reported that they had clients with associate's, bachelor's, and/or master's degrees. In fact, one of the shelters reported two female clients who have their PhDs, one reported a client who was an attorney, and two reported a client with an MBA.

The executive director of a small volunteer homeless outreach organization described the wide variation in education levels of the homeless or at-risk homeless in her suburb:

We have a guy out here right now who was a school teacher for many, many years and has two degrees; and he is homeless. We have a guy out here that was a business man in a Fortune 500 company that was making \$60,000 a year who is now on the streets. We have people with master's degrees. And we have people that never got a high school degree or GED. (Service provider participant #13)

The executive director at the mid-sized homeless outreach and services organization (Service provider participant #20) estimated that as many as 25 percent of her clients are what she termed the “rich poor,” meaning that they were working in some type of professional or corporate job, lost their job, and now are clients of her organization seeking services but don’t qualify for most social services since they have certain assets, such as their home.

Several service providers reported that clients currently are in school. For example, two of the service provider organizations have a line of service focused

exclusively on veterans, and many of those clients are leveraging their military benefits by attending school. One of the shelters reported that it frequently has clients who attend the local community college. The transitional living facility program director (Service provider participant #10) currently has half of her clients enrolled in educational programs for teaching, nursing, surgical tech, ultrasound tech, respiratory therapist, and divinity. Her clients are attending LoneStar College, Houston Community College, the University of Houston, and Houston Baptist University.

In terms of the subset of clients interviewed directly for the study, 19 of the 24 clients graduated high school; eight have some college experience; and two have bachelor's degrees. Two of the five clients that did not graduate high school are pursuing their GED. Six are enrolled in college. The education levels of clients found in this study is consistent with the Houston homeless literature. For example, the 2012 study on the “Perceived Needs of Homeless Persons in Houston/Harris County” found that more than 75 percent of the survey sample had a high school degree or more education, and that 35 percent had some college, college degrees, or post-graduate work (Troisi et al, 2012).

It is important to discuss these phenomena (e.g., the phenomenon of homeless or at-risk homeless clients in this study with higher levels of education) in light of human capital theory. Again, recall that human capital theory discussed in Chapter 1 describes positive relationship between an investment in education and training and increases in productivity and earnings (Becker, 1993; Lucas, 1988; McMahon, 2006; Nafukho et al., 2004; Schultz, 1961). And yet in this study there are clients with advanced degrees who are homeless or at-risk homeless, demonstrating that education and training are not

always enough to prevent homelessness (especially in light of a crisis, such as divorce, hospitalization, or some other health issue). Sometimes, it is a combination of factors, such as the support of family and friends (and the willingness of the individual to accept help from family and friends), along with a level of liquid savings, that can help individuals avoid homelessness during rough periods of their lives. Or, it may be that the individual with high levels of education suffers from mental or physical health issues that inhibit their working, or some kind of substance abuse issue. For example, the program manager at the suburban shelter relayed a story of an attorney who stayed at the shelter for a period of time because she lost her license to practice law due to alcoholism. Or, it could be that the homeless or at-risk homeless individual has incurred other insurmountable financial obligations, such as child support. The same program manager also described homeless men staying in the shelter due to not being able to pay both rent and child support. Regardless, this information from this study serves as a reminder that there are many complicated factors that play into suburban homelessness in Houston, and that there are certainly some instances where suburban homeless and at-risk homeless in Houston are well-educated.

Service providers reported that many of the clients without any college degree have vocational certifications, such as forklift and commercial driver's licenses for the males and certified nursing assistant for the women. Certifications cited by clients include certified nursing assistant, communications certifications, commercial driver's license, Cardiopulmonary Resuscitation Certification (CPR), electrician, facilities' care,

forklift, food safety, medical assistant, and TWIC (Transportation Worker Identification Credential, a safety certification to work in the ports).

Several clients described certifications or vocational training that are no longer valid in the private sector. For example, one client of a transitional living facility described 684 hours of training in computer communications she has had trouble receiving credit for in terms of work experience from the private sector. In another example, a middle-aged African American shelter client who has been in prison most of her life said vocational training certified in prison for facilities care is not valued in the private sector. She said:

It is facility care, it is when we strip the floors, we buff the floors, we used to go in the office in the prison and do their floors and stuff like that. Yes, there is a lot of vocational training that you can take in prison, like a six-month class. But it don't do no good when you get out. ... Jobs like that are not hiring you [due to your background]. (Service provider participant #22)

Some homeless studies in the literature have also found that a sizable percentage of clients have vocational certifications: For example, a 2009 study of the homeless in Sacramento, California, found that almost 40 percent of the 182 homeless individuals surveyed in their study had some kind of work license or certificate (Acuna & Erlenbusch, 2009).

It is an interesting point to note that although many of the clients in this study have a license or certification, they are still homeless, thereby perhaps indicating that some of these skills or certifications may not be those most in-demand in the Houston marketplace in order to have enough employment opportunities for those currently out of a job and/or to pay a living wage. For example, Certified Nursing Assistant was one of

the most common certifications that I heard service providers talk about of interest for their female clients, and several clients interviewed actually had this certification. However, at least according to one source, the hourly wage for this career is relatively low: According to Payscale, the average hourly wage for a Certified Nursing Assistant in Houston is \$11.68 per hour, and the entry-level total salary for a certified Nursing Assistant in Houston is about \$22,000 per year (Payscale, n.d.). While it certainly may be a good start, is still not quite up to the \$15 to \$18 per hour wage that most service providers agreed was a minimum “living” wage (discussed in more detail later in this Chapter). Whereas on average a Licensed Vocational Nurse (LVN), a very similar career (but one step above in education and training) earns on average about \$20.57 per hour, and entry-level LVNs make a little over \$40,000 per year (Payscale, n.d.). With information on potential in-demand Houston careers and their corresponding wages, Houston suburban clients might be guided to the vocational training and certifications that are the most in-demand in Houston and garner the higher, living wages.

Employment Levels of Clients

The employment levels of the clients of Houston suburban homeless service provider organizations varied depending on the type of service provider organization and the types of clients that they served. For example, if the organization was one that offered employment services as a main service offering, then the employment statistics of clients tended to be on the low end, because obviously clients come to the service provider organization unemployed and seeking assistance.

If either employment or willingness to seek employment was a criteria for admission as a client, as was the case for the shelters and the transitional living facility, then the employment percentage levels tended to be higher in those instances. For example, one of the suburban shelters asked prospective clients as part of the screening if they are willing and able to work a full-time job or progressively seek full-time employment Monday through Friday by producing a minimum of five job applications a day. In another example, clients are expected to work, go to school, or work as a volunteer at the service provider organization. The executive director of the Houston suburban shelter for women and children said:

We are not an in-and-out emergency shelter. The people that are here are committing to change their life and to try to adhere to requirements, and to the program, and agree to work with case managers to try to deal with the issues that are on their plan. The expectations, I think, are higher. That is part of our screening is you have to be willing to do that. You can't just come here and try to hang out and not do anything about your situation. (Service provider participant #17)

The employment percentages reported by service providers also varied by the type of clientele. For example, clients who are chronically literally homeless and/or had some type of disability tended to be unemployed.

Finally, the employment statistics varied depending on the types of grants that service providers received. For example, one of the assistance ministries received grants that, in order to qualify, clients either received zero income or very low income.

With regard to the clients interviewed for the study, almost half (11) of those interviewed currently work in paid positions for external organizations. And of these, most indicated that they work full time. The three clients that are considered chronically

homeless were not working at the time of interview, although two of the three expressed a strong desire to work.

Most clients described working since they were teenagers, with the average work experience reported by the clients interviewed at approximately 19 years and a range from zero years to 40 years. (Some of the female clients did have less work experience due to taking care of children or other family members or having significant others that didn't want them to work outside the home.) Clients described themselves as hardworking, dependable, reliable, and people who work well with others.

Most of the service provider representatives interviewed were very adamant that their clients are willing and able to work (if they weren't working already), even the literally homeless clients. As stated by the executive director of one of the smaller volunteer homeless outreach organizations participating in this study:

Most want to work... But they need jobs where you are going to teach them what to do. They do want to work; they tend to be good workers. They tend to be able to learn. But they just don't have a leg up on getting started. (Service provider participant #5)

In a supporting example, the executive director of another small volunteer homeless outreach organization said:

Most of them want to work. They don't want to stand on the corner and hold a street sign, necessarily. It is just hard for them to find a job because of a record or of a disability or because of not having a stable place to live. (Service provider participant #13)

Clients who were either not working or not working full-time similarly indicated their interest in working. For example, as stated by one of the literally homeless clients (a middle-aged Caucasian male struggling with alcoholism) who wants to work:

Right now, I would like any job. You know. I mean, it's not like I'm sitting here like, "Oh, well yeah, I want to work for Donald Trump." No, come on now. Let's be real about it. Get a job, knock off a paycheck, get the ball rolling. (Client participant #10)

Another at-risk homeless client (a young, African American male) at a mid-sized assistance ministry said:

But I look at myself now and it's like, I just want a chance for a job, you know, because I see all these people getting hired, and they're now working. And I know, I got my background. But I know that I'll work ten times harder than people because every job that I got from last year, I worked extra harder than everybody else. (Client participant #15)

The results from the study in terms of the relatively high percentage of currently working (46 percent) in paid positions, as well as the strong desire expressed by clients who were not working (including the literally homeless clients) to work should hopefully go a long way toward dispelling the common public perception that most homeless clients either do not work currently, and/or do not want to work. These results are also supported by the literature. For example, as discussed in Chapter 2, "Literature Review," research has found many homeless individuals desire to work (Lei, 2013; SAMHSA, 2003; Shaheen & Rio, 2007; Snow & Anderson, 1993), including the chronically homeless and homeless with disabilities (Marrone, 2005; Rog & Holupka, 1998; Shaheen & Rio, 2007; SAMHSA, 2003; Theodore, 2000; Trutko et al., 1998).

Perceptions of Service Providers Regarding Homeless Clients' Current Workforce Skills

Research Question 1 gauged the perceptions of staff members working for Houston suburban homeless service provider organizations regarding their clients' current workforce skills. Although service providers were careful to note that the jobs and skills held by the clients varied, some general observations can be made. Some of the most frequently cited types of jobs held by clients reported by service provider organizations include retail/fast food/food service; distribution and warehouse; restaurant cooks, chefs, and servers; construction; home health care and elderly care; customer service; seasonal work/temporary work; general labor or day labor; welding or pipefitting; teaching or teaching assistant; accounting or office/clerical/secretarial; truck drivers; and nursing assistants. Table 8 summarizes the jobs cited by service provider organizations that are held by their clients (those at the top of the table were cited most frequently) and the workforce skills associated with those jobs.

Job Type	Skills
Retail/Fast Food/Food Service	Customer service, cashier, communication
Distribution/Warehouse	Forklift certification, safety training
Restaurant cook/Chef/Server	Food preparation, food safety, customer service
Construction	General labor
Home healthcare/Elderly care/Child care	Customer service, healthcare, childcare
Customer service	Customer service, communication, people skills
Seasonal work/Temporary	Customer service
General labor/Day labor	General labor
Welder/Pipefitter	Trade skills or certification
Teacher/Teaching assistant	Teaching skills and experience or certifications, knowledge of curricula
Accounting/Office/Clerical/Secretarial/Receptionist	Office skills, customer service, phone skills
Truck driver	Commercial driver's license, safety training
Nursing assistant	Certified nursing assistant certification
Other:	<ul style="list-style-type: none"> • Electrician • Automotive/Auto repair • Professional • Factory/Manufacturing • Farm hand • Landscaping • Supervisory • Security • Painters • Refinery/Plant Work • Grocery • Oil industry/Oil rig • Musician • Paralegal/Paraprofessional • Hospital/Pharmacy Tech • Childcare/Daycare • Pizza delivery • Housecleaning • Hotel front desk/Housekeeping • Sales/Telemarketing • Apartment managers • Janitorial • Cosmetology

Table 8. Summary of clients' jobs and skills cited by service providers.

Many of the Hispanic clients reported by the service providers are undocumented immigrants. These clients in particular tend to have general labor–type skills, or what the executive director at the volunteer homeless outreach and services organization termed “hidden skills:”

They [Hispanics] have what is called "hidden skills." They will make life happen, and they can do things like manicure your lawn like no one else, or clean your house better than any service you could have come in, or build a home that is wonderful. Those are called hidden skills because they can't acknowledge that they have those skills because they are undocumented. (Service provider participant #20)

In addition to some skills differences distinguished by ethnicity, service providers observed some interesting differences in jobs and skills by gender and age. For example, service providers mentioned that the female clients gravitated toward care taker professions (such as teaching, nursing, childcare, and home healthcare), customer service, or office work/clerical and that males gravitated toward physically demanding professions (factory, trade, driving, construction, warehousing and distribution, etc.). Many service providers noted perceived age discrimination in the workplace for their homeless or at-risk homeless clients; that is, it is harder for older clients to get a job. (This may be true regardless of an individual's housing status.) For example, according to a female case manager at one of the larger assistance ministries participating in the study,

I noticed the older population...tend to struggle with employment, especially the females. They have the most difficult time getting hired in employment. I do believe, especially with entry-level, they [employers] want someone who is younger, who is more fast-paced. They view the older as the ones who move slower, and they need someone who picks it up quickly. (Service provider participant #14)

Several service providers also noted that some of the more mature clients seem to have a stronger work ethic than some of their younger homeless or at-risk homeless clients. It should be noted that studies of age/general differences in the workforce are not unique to suburban homelessness; there are many studies in the practitioner and academic realms about the differences in retention and development styles and preferences by age/generation.

There were also some differences by region in jobs held by homeless or at-risk homeless noted by service providers. For example, those service providers with clients near the Gulf Coast tend to have some clients employed at the chemical plants or on the docks.

Although many of these jobs and skills for clients tend to be blue collar or minimum/lower wage levels, a smaller percentage of their clients hold professional jobs or skills, such as teaching, oil industry, and corporate, as listed in Table 8.

Perceptions of Clients Regarding Their Current Workforce Skills

Research Question 2 asked: What are the perceptions of Houston suburban homeless service provider clients regarding their current workforce skills? The 11 clients in the study who were working at the time of interview reported jobs working as:

- assistant/receptionist,
- auto repossession agent,
- cashier at a retail store,
- certified nursing assistant working in elderly patient care,
- house mother at a transitional living facility,
- inventory specialist for retail stores,
- supervisor at a payroll company, and
- paraprofessional in a local school

- chemical plant worker, district.
- fast food restaurant cook and shift leader,

Past jobs across the board (for clients currently working as well as the past positions of clients currently not working) include:

- author,
- cashier,
- certified AC technician,
- certified nursing assistant,
- chef/cook,
- chemical plant worker,
- computer technician,
- customer service/call center representative,
- debt collector,
- delivery agent,
- dishwasher,
- educational consultant,
- electrician,
- facility care worker,
- food preparation worker,
- machinist,
- manager at a retail bank,
- paralegal,
- pharmaceutical technician,
- pipefitter,
- pizza delivery person,
- private process server,
- professor,
- receptionist,
- retail clerk,
- RV technician,
- sales representative,
- scaffolding worker,
- service technician,
- shipping and handling worker,
- sign maker,

- forklift driver,
- gas station manager,
- general labor/construction worker,
- grocery checkout clerk,
- hospitality staff member,
- industrial worker,
- janitor,
- substitute teacher/teaching assistant,
- truck driver,
- quality analyst,
- warehouse worker, and
- welder.

Corresponding to these jobs, some of the most frequently mentioned workforce skills clients said they had developed include:

- cashiering,
- cooking and food preparation,
- communication,
- construction,
- customer service,
- healthcare/nursing,
- forklift driving,
- general labor,
- truck driving, and
- warehousing.

It should be noted that some clients cited more professional-type skills such as computer communications, computer skills (e.g., MS Office), curriculum development, paralegal skills, paraprofessional in a school district, project engineering, retail banking,

supervision/management (and the corresponding skills that go along with managing people, like developing people), task analysis and workforce development, teaching/teaching assistant, and quality assurance. In fact, one of the individuals interviewed (i.e., a house mother at a transitional living facility), who had in the past been homeless for a short-period of time due to divorce and an accident resulting in high medical bills, is a pioneer in workforce development and welfare-to-work programs for the State of Texas.

The types of jobs and workforce skills reported by service providers and clients in this study were also echoed in other homelessness studies more generally speaking. For example, the 2009 study by Acuna and Erlenbusch of 182 homeless individuals in Sacramento found similar workforce skills as discovered in this study, such as warehouse, construction, and retail. Relating the jobs associated with these skills back to human capital theory, these are often not the types of skills requiring higher levels of training and education, thereby often gleaning lower wages. This again reiterates the need to route the Houston suburban homeless and at-risk homeless to training, education, and development leading to those skills that are most in-demand in the Houston marketplace and paying a living wage.

Most clients learned their skills via on-the-job learning, from vocational training, and from formal education (where applicable). On-the-job learning and mentoring and coaching are some of the most prevalent and very important sources of learning for employees within organizations. As will be discussed a little bit more later in this chapter and in Chapter 5, Summary of Key Findings, one of the key desires of the

Houston suburban homeless and at-risk homeless service providers and their clients in this study is for more opportunities from employers for on-the-job learning, mentorship, and coaching.

Barriers to Clients Working Full-time

Service providers said that some of the biggest barriers to homeless/at-risk clients obtaining full-time jobs are lack of workforce skills and/or education, including a lack of communication and composition skills, a lack of employable workforce skills, the lack of a solid and/or continuous work background and experience, a lack of work readiness (such as interviewing or computer skills), the lack of access to computers or phones in order to effectively participate in the job search, a lack of self-confidence, and a lack of coping or interpersonal skills to remain employed. Other more structural barriers include lack of transportation, lack of affordable childcare or family support systems to help with childcare (specifically for females and single parents), homelessness itself (for those who are literally homeless), the emotional or trauma issues accompanying being homeless or near-homeless, a criminal background, disability, unhealthy attitudes, substance abuse, and mental illness (the latter two in particular for the chronically homeless. It should be noted that clients of the shelters are drug and alcohol tested, so they would be “clean” as residents.) Sometimes these barriers are co-occurring for clients. The executive director at the Houston suburban shelter for women and children summed the attitude barrier:

Sometimes because they [clients] have had a difficult life, they have unhealthy attitudes and expect people to treat them badly: "I will get you before you get me." They will come across nice and friendly but will stab you in the back because that is survival, street living. That is the way it is when you are on the

street. They have been around it enough to take on some of that mentality.
(Service provider participant #19)

Many of these barriers are also cited in the literature. For example, research on Houston homelessness reiterates that low levels of education and skills, as well as a criminal background, are barriers to employment for the Houston homeless (Fleming, 2011). Nunez & Fox (1999) cite a lack of childcare, transportation, and in-demand job skills as barriers to employment for homeless families.

Transportation in the suburbs is a significant structural barrier to the Houston suburban homeless/at-risk homeless in this study attaining full-time employment. Most of the service providers reported that their clients rely on public transportation, and many clients either have to bike, walk, or take multiple buses to get to their jobs. According to the executive director at one of the small volunteer homeless outreach service provider organizations, “You have to have a vehicle to get to work. I know people that walk to work 30 to 45 minutes every morning and every night and work at Wal-Marts—They don’t have a car, so transportation is an issue.” (Service provider participant #5) One program director at one of the larger assistance ministries participating in this study expressed her frustration with the lack of public transportation in the Houston suburbs:

I feel like as big as Houston is...I don’t understand why public transportation isn’t as accessible as it could be. I am originally from Chicago, and you look at some of the larger cities, like Chicago and LA, they have public transportation—not just inner city but also outskirts—and all sorts of transportation available almost 24/7. I don’t know if that [the lack of public transportation in the suburbs] is strategic to Houston. I don’t understand the thinking behind that. (Service provider participant #21)

Another large barrier to clients attaining full-time employment cited by service provider organizations in this study is a lack of self-confidence or sense of self-worth. For example, as described by the executive director of one of the small volunteer homeless organizations participating in this study regarding his clients' lack of sense of self-worth:

One barrier is that they [the clients] are personally intimidated applying for jobs; they don't feel worthy. They don't feel like a whole person. They are embarrassed about who they are. That is a major barrier, even to go into Workforce Solutions. I have had some people, [where] I take them in there, I get them signed up, and they refuse to go back. (Service provider participant #5)

Service providers reported that female clients, in particular, struggle with the self-confidence issue. In addition, according to service providers, female homeless or at-risk homeless suffer from the lack of affordable childcare in Houston, another more structural barrier to employment for the Houston suburban homeless/at-risk homeless in this study. As summed by the program manager at the suburban transitional living facility for women and children,

A huge barrier for homeless women with children is lack of available affordable day care. At [X organization], if we did not pay for these mom's daycare costs they would never be able to attend school and get the degrees that they need. This includes daycare for young kids year round and summer care for kids up to age 12. We spend several thousand dollars a month on childcare. I feel like until this problem is better dealt with on a federal level then homeless moms will be out of luck. The average childcare cost is about \$850 a month and if you even make \$10 an hour that would be half your monthly take home pay. Some are able to get help with NCI supplementing the costs but it's a very difficult process and you can lose it very quickly. (Service provider participant #10)

Several service provider organizations in this study have clients who are illegal immigrants, and the lack of the appropriate documentation to work legally is a big

barrier to these clients achieving living wage employment. For example, as stated by a young female case manager at the mid-sized suburban assistance ministry:

A barrier for a lot of our clients is they're just not able to work because they don't have the papers to work. And so that's a huge barrier, because ... they're working 60 hours a week and getting \$150 a week for it. And so it's like, there's this big barrier of they can't work and there aren't protections for them. So they are working, a lot of them, and not making anything near what they are actually working. (Service provider participant #11)

Additionally, for these clients (and other clients from foreign countries) the lack of English literacy is a barrier to attaining full-time employment.

Once the clients get a job, several service providers mentioned the difficulty that their clients have keeping the job. A female case manager at the mid-sized suburban assistance ministry said that one of the things that their employment center representative said that she deals with the most in the employment center is:

people getting a job and then being there for like two or three weeks and then getting frustrated with their supervisor. Or something happens at work and they don't have the coping skills to, like, handle the problem professionally. And then they quit their job...I think it's kind of [due to] the way that they were raised in a lot of ways, like they don't have a good example of overcoming problems at work...There's the potential to work somewhere and work your way up, but you have to stick with the job; and I mean that's something that we see with a lot of people in our employment center. The staff person there, she does a really good job of walking people through it. They'll call her upset, and say "I want to quit," and she'll kind of try to talk them through things that they could do to make it more bearable. (Service provider participant #11)

Some of the clients also reiterated a retention and on-the-job coping issue once hired. For example, one at-risk homeless client (a young, African American male receiving services from an assistance ministry) described his issues with keeping down a job:

But the longest I ever kept a job I could say was a month, 'cause either I would quit because I would feel like they would abuse their rights for me to work or I would get terminated because I would lash out because they would come at me certain ways that I didn't feel was right, and I would go off in a negative tone, and they wouldn't like it so they would either terminate me or I would walk off the job. (Client participant #15)

Barriers reported in their interviews by clients to working were many of the same as those reported by the service providers about their clients more generally speaking, and included a lack of transportation, a lack of education/degree/qualifications, a lack of affordable childcare and being a single parent, age discrimination, injury, unrealistic expectations, alcoholism, having a criminal record, and being able to stay clean and not sleeping well (for those who are literally homeless). Here is commentary from one of the shelter clients (a Hispanic gentleman, currently unemployed but seeking work in electrical) interviewed regarding the transportation barrier:

The biggest barrier is the transportation, cause it gets you around, you know, wherever you need to go, for the job interview ... My big thing is if I had a job right down the street and somebody would give me a ride, I'd be happy. I wouldn't need a car until I could be able to afford one. But the most depressing thing is not having a job; I guess they go hand-in-hand with having a vehicle or a means to get here and there. (Client participant #3)

This discussion of barriers to working for Houston suburban homeless and at-risk homeless clients continues to add further nuances to the types of human capital investment needed by these individuals in order to attain and maintain living wage jobs, including investment in education, skills (including soft skills, encouragement, and coping skills), but also investment in more structural enablers to work, such as more supply of affordable housing, more suburban public transportation, and more affordable

childcare options for low-income individuals in the suburbs. Bowman (1969) considered money spent on social services and health (in addition to education) as a type of human capital investment in human capital theory (Bowman, 1969; Nafukho et al., 2004), and these findings lend themselves to further extending the theory based on the results of this study to include investments in some of the non-structural and structural investments listed in the paragraphs above in order to help the Houston suburban homeless and at-risk homeless achieve living wage employment.

Needed Workforce Skills

The second section of the interview guide for service providers and clients asked about perceived needed workforce skills of clients and addressed research questions 3 and 4:

3. What are the perceptions of staff members working for Houston suburban homeless service provider organizations regarding their clients' workforce skills development needs?
4. What are the perceptions of Houston suburban homeless service provider clients regarding their workforce skills development needs?

Questions in the interview guide asked service providers about the most common workforce skills that clients lacked, any differences in lacking of skills by demographics (such as gender, age, or race), and types of workforce training that would most benefit clients. I asked clients about what they believe to be the top three most needed skills in today's job market, the type of job/work that they would like to do, and any assistance, training, and/or support that they would need.

*Perceptions of Service Providers Regarding Clients' Workforce Skills Development
Needs*

I interviewed service providers about the most common workforce skills they perceived that their clients lacked. Some of the most common cited by service providers include computer/technology skills, work readiness skills (interviewing, resume writing, dressing, presenting themselves, writing a cover letter and thank you note, etc.), soft skills (e.g., working with people, communications, coping with stress, and time management), office skills and office etiquette (e.g., typing, word processing, and appropriate work expectations and interactions), self-confidence/motivation (especially for the females), in some cases basic adult education (e.g., literacy, composition, speaking, etc.), and hands-on experience/skills or trade skills for a position.

As can be seen in Table 5 earlier in this Chapter, many service providers already have service offerings currently or planned to address these perceived needs for skills.

For clients in general, computers and technology-related skills were the most frequently cited skills by service providers that they perceive their clients are lacking, particularly by older clients. The director at one of the larger assistance ministries participating in this study said:

We are in the age/life where computers and things change—and of the internet, and tweeting and LinkedIn and Facebook and everything else. So I think that if you are not in the workforce, that can get behind you because of the constantly evolving changes. And so, if you are not ... in the loop of the things that are happening, then you fall back in the experience or the skills. And if you look at it, most positions are requiring a little more than just basic skills in computers or technology. (Service provider participant #22)

To that end, several of the service providers interviewed (the assistance ministries, the employment services organizations, and one of the shelters; another shelter and homeless outreach and services organization had plans to develop this offering) offered computer labs where clients could come use the computers and even obtain training on basic Microsoft programs. Basic computer skills were considered by service providers as a necessity for almost any type of employment, because although perhaps not all jobs require individuals to do substantial work using a computer, even those types of jobs not requiring computer work as part of the job generally require basic computer skills to apply for the job online.

In terms of demographic differences in skills lacking, service providers said that older clients tended to have more issues with technology/computer skills, and that their female clients in particular tend to be lacking in self-esteem. For example, the female program manager interviewed at the suburban transitional living facility for women and their children described the self-confidence issue that she observes in her female clients:

I see a lot of times these women have very little confidence and they have been told by certain people [family, husbands, boyfriends] that they are not really worth anything. And so for them to really see themselves as a vital potential employee is really hard for them to see themselves as valuable. And so it takes a lot of work to get them believing that and believing they can support their families on their own and believing that they can be a professional and that they can present themselves well. (Service provider participant #10)

In terms of human capital investment needed, the study reiterates that these demographics of Houston suburban homeless may need extra support and investment in skills training (computer skills training especially for older suburban homeless and at-

risk homeless, and self-confidence coaching and motivation for female suburban homeless and at-risk homeless) in order to help them earn a living wage.

Again, clients who are literally homeless have additional barriers to working. They also seem to be more lacking in time management or timeliness skills in particular, likely due to the logistics of their situation. As described by the executive director of one of the small volunteer homeless outreach organizations in terms of the on-time challenges of her literally homeless clients:

Timeliness, like you need to be able to get to a job on time. They have a problem with that. Because time doesn't mean anything to you if you are living on the streets, you know? The days all just run together... So if you are living on the street—and you don't sleep good at night because you are awake, because you hear noises, or you have something going on in the camp next to you, or there is some kind of issue with the people around you, so you don't get much sleep. (Service provider participant #13)

The lack of timeliness of chronically and literally homeless clients is a direct reflection of the fact that they are living outside, don't sleep well, and likely are not working, therefore in that situation it is possible that days and weeks run together, and they simply lose track of time and lack any kind of daily routine or structure. Again, as pointed out in quote earlier in the Chapter, “chronically homeless is a whole different situation” (Service provider participant #12), and they often have need for additional support than suburban homelessness more generally speaking, particularly due to the high prevalence of mental and substance abuse issues with this population.

I also asked service providers what types of workforce training programs would benefit their clients. In alignment with the aforementioned skills most lacking, some of the most commonly cited included:

- basic adult education;
- computer training (e.g., word processing, e-mail etiquette, and attaching résumés to e-mails);
- technical or trade training that could get people to work earning a sustainable salary quickly;
- associated hands-on training in these fields (internships, apprenticeships);
- soft skills/life skills training (communication, stress management, finances and budgeting, etc.);
- training in office etiquette (typing, answering phones, how to interact with people, appropriate work expectations, handling stress at work, etc.);
- work readiness training (mock interviewing, interviewing skills, filling out job applications, etc.);
- assessments to help clients understand what they are good at and like to do and to help route them to appropriate careers;
- and self-confidence/esteem training.

Certainly, service providers felt that basic adult literacy, grammar, communication skills, and interpersonal skills are essential skills for suburban homeless and at-risk homeless clients to be successful. Service providers consider basic adult education and a GED or high school diploma as the foundation for everything else. In addition, computer/technology skills are considered a basic required skill that all clients should develop.

Beyond computer literacy, service providers felt that “hard” or technical/trade skills are important workforce skills for clients. Service providers feel that technical training will enable clients to accomplish work competently and earn a livable wage relatively quickly. In response to the question about what type of workforce training she thought would most benefit her clients, the director at one of the larger assistance ministries said:

I think workforce trainings that are relatively shorter term. And what I mean by that is probably less than two years, because people have to go to work quickly [and] increase their income quickly. And so going into something that is an associate’s to a four-year degree can be very daunting.... So I would say skills and technical trades that can be accomplished within a relatively short period of time. And that could be anything from...HVAC, Cisco certifications, just a variety of trade skills. (Service provider participant #21)

The reality for many of the Houston suburban homeless or at-risk homeless is that they have families to support, and therefore need to get to a living wage relatively quickly. Often, the thought of a four-year college degree, or even a long-duration technical degree or certification, sounds overwhelming and infeasible to them. Therefore, the types of vocational or certification programs that would like be most helpful and impactful to them are those of relatively short duration and economic cost that can get them to earning a living wage quickly. For example, in my own suburb, there is a brand new technical college (the Texas State Technical College Industrial Technology Center) opening in the Fall of 2016 that will be offering programs in industrial maintenance technology, cyber security, telecommunications convergence technology, and welding technology. According to the school’s Web site:

In researching the Fort Bend County area, the Perryman Group found that approximately 1,349 new workers with engineering-related skills will be needed each year through 2020 to fill positions in the area. Showing an even larger need, it is estimated that there will be 5,920 new positions for mechanics and technicians trained in repair technologies each year through 2020. (Texas State Technical College, 2016)

The college offers Associate's degree programs and certification programs of relatively short duration (for example, the pipe welding technology certificate program is two semesters) at a relatively economic cost (for example, under \$5,000 total for the pipe welding technology certificate). According to the school's Web site, the hourly median wage of welders in Texas is \$19.66 per hour, and the annual median salary of welders in Texas is \$41,000 per year (Texas State Technical College, 2016). This is the type of information that homeless service providers offering employment services should compile and make available to their homeless clients so that they can pursue opportunities of interest that are the most in-demand in Houston and that earn living wages.

Furthermore, often times there are additional financial or scholarship incentives for members of the opposite gender to pursue such technical certifications and careers. For example, one of the suburban employment services service provider interviewees described a scholarship opportunity she recently became aware of for female veterans to become certified in welding:

The other day I saw where there was a grant out there and there was a school that actually was providing 100 percent of the cost if you were a female and you wanted to do welding, but you had to be a Veteran, you had to be a female, and if you were interested, [it was] a 12-week course, totally free. (Service provider participant #9)

The service provider went on to say that these were the types of programs that their employment services representatives were researching and making outreach to in order to offer them to their clients. More Houston suburban services providers offering employment services need to make their clients aware of programs and offerings such as these that lead to in-demand careers paying a living wage in Houston.

Other suggested vocational/trade training and/or certifications that service providers felt would be helpful for clients include: administrative support, commercial truck driving, forklift operating, nursing assistant, retail management, security, stenographer, and welding. Based on this response, it sounds like some of the service providers need more education and awareness on the most in-demand vocational career paths and wages in Houston to ensure that they are routing clients toward these paths.

Soft skills training was also a significant area that service providers frequently mentioned clients could benefit from. Soft skills includes communication/interpersonal relations skills, attitude and motivation, and appropriate workplace expectations. For example, the executive director at a suburban shelter for women and children described this type of needed workforce skills training in soft skills and expectations setting by his clients in the following terms:

Everyone you interact with, you need to treat them the right way—[be] respectful and that sort of thing. It could be tied into people skills or the softer skills where a lot of our people don't have; they are not as strong in those areas.... Some people kind of have maybe a minimum mindset... So it could be they need a little bit of an attitude adjustment so that you help them better understand what does a successful employment situation look like... [That they think] Somehow, you should be given an opportunity to advance, instead of understanding that you have to work for that, that there are things that you do in order to get promoted. (Service provider participant #17)

Another softer kind of skills training that service providers believed clients can benefit from relates to office etiquette, specifically concerning coping with stress at work and appropriately interacting with others. For example, one of the case managers at one of the mid-sized suburban assistance ministries described what she frequently observes in her clients:

There is like an attitude that if the only thing you have in life, if you are really poor, the only thing you have is respect. And so if you feel disrespected, you tend to put up a wall in a way that people who have other, who haven't grown up in poverty, don't really have that same thing, because respect isn't the only thing. ...I think has a lot to do with their upbringing, and I think that's a big issue in the workplace. You have to be able to deal with a certain amount of criticism, and you have to be able to deal with being told what to do. And so ... if there were some kind of coping class, some way to train people and not, like, put your defense down a little bit [and] do what you need to do to get by, like, that would be really helpful. (Service provider participant #11)

An important life skill frequently mentioned by service providers that clients lack as a complement to other types of workforce skills training was financial coaching and budgeting. Many service providers currently offer financial coaching and budgeting classes or training to help clients understand how to better manage their money going forward, and to better plan for the flow of money (inputs and outputs). Without associated financial coaching, service providers expressed that they feared that additional income made by clients might not be spent necessarily wisely, and that clients would not build up the emergency savings reserve that they would need in the event of potential future life crises.

Workforce readiness training was another needed workforce training frequently cited by service providers. This includes how to interview, how to dress, how to prepare

résumés, how to appropriately present oneself, how to apply for a job online, and business communications. The executive director at one of the Houston suburban shelters for women and children said:

How do you present yourself well? How do you fill out the application? If you get employed, what do you do to stay employed? Interviewing and application, trying to make sure you present yourself in the most favorable way. (Service provider participant #17)

Service providers expressed workforce skills training programs should begin with a skills and career fit assessment. A female case manager at one of the larger assistance ministries said:

I also think a personality assessment and also like a placement assessment [is ideal]. I don't think they have ever had that. I don't think they have ever been assessed to where it is that they have wanted to be working at. If they ever knew where it was that they liked to work at and felt good at working at, maybe they would have found that career. That would have been good for them, and they would have stayed at [that job]. Most of them were thrown into "you have to find a job." And then they weren't able to keep a job because they didn't like what they were doing. (Service provider participant #14)

To the extent that the assessments offered by service providers could be extended to then match clients with potential in-demand vocational or trade careers that they would be most suited to in Houston, this information would be extremely helpful to route clients toward living wage jobs where they are most likely to be successful.

Service providers felt that clients needed, if not formal training, informal and regular coaching and encouragement. Many of the at-risk homeless clients were approaching the assistance ministries after having lost their jobs and therefore needed encouragement and coaching regarding job readiness, in addition to persistence in

finding a job. On the other hand, many of the clients in the shelters or transitional living facilities, specifically the females, often have self-esteem issues and require encouragement to help them restore confidence in themselves. And as described by the executive director of one of the small volunteer homeless outreach organizations helping the literally homeless in her suburb, her homeless clients also require encouragement. Although she won't give them money, she tries to build a relationship with them and endeavors to provide them with the resources to change their life course to something more positive:

Everybody needs somebody that they know cares about them. But it is not a personal thing; I love them, but I won't give them money. I will take care of a need, but I won't participate in their addiction. And then we just pray with them, and we build relationships with them, and we have seen it—it works. Sometimes you have to believe in somebody before they can believe in themselves. And if you have faith in them that they can do something different—and you don't just say it, you show it over and over and over again—then they start having hope that they can do something different. And we provide them with resources to do something different. (Service provider participant #13)

This data reiterates the earlier points about the type of human capital investment in the form of motivation, encouragement, and coaching that many of the Houston suburban homeless and at-risk homeless need to be successful.

Perceptions of Clients Regarding Their Workforce Skills Development Needs

When asked what they perceived to be the top three most needed skills in today's marketplace, clients tended to agree with the service providers that computer/technology skills were most important, along with a solid knowledge base and skills for the actual job (from either education and/or experience). They also believed that being

hardworking, having strong customer service skills and communication skills, and having people skills are important in today's marketplace.

In terms of the type of job that they would ideally like to do, many of the clients are either already enrolled in school or want to go back to school. Specific clients described their dreams of going back to school to be, for example, a dental assistant, medical coder/biller, X-ray technician, a chef, and elementary education teacher. Those already enrolled in school are specifically pursuing degrees in divinity, electrical, paralegal, nursing, IT, respiratory therapy, surgical tech, teaching, ultrasound tech, and HR. These results are heartening in that those clients in this study who are pursuing Associate's or Bachelor's degrees appear to be doing so in career fields that should earn living wages (the client pursuing a nursing degree was going beyond a Certified Nursing Assistant to an LVN). For example, according to the Bureau of Labor Statistics (2015), the average hourly wages for an electrician are \$26.73 per hour, with a median annual salary of approximately \$55,590 (Bureau of Labor Statistics, 2015). And in another example, according to the same source, a paralegal in 2015 earns about \$23.47 per hour, and approximately \$48,801 per year (Bureau of Labor Statistics, 2015).

Other clients mentioned wanting careers in more artistic fields, such as composing music and pursuing a career as a guitar technician. Some clients wanted to transition out of the work and file ranks and manual labor to more leadership, management, or consulting roles.

Other clients expressed wanting to go into professions where they had some personal life experience and felt that they could help, such as helping other young

mothers in crisis or assisting with child custody cases. For example, a shelter client (an older African American lady from Chicago) described her dream of going into social service work based on her own life experience in the following terms:

I have been in contact with a lot of social services where I have been helped in my situation, so I would have compassion and understanding. ... I would understand another person in a crisis. ... I feel like to help a person out of a crisis you have to have been there, so I believe that I could step into that position.
(Client participant #5)

One woman (a middle-aged African American single mother) in a transitional living facility described how it was always her dream to own her own barbeque food truck. And others simply desired to go back to the type of work they had in the past, such as RV technician, hotel/hospitality, project engineering/construction, and transportation work. Arming clients with any information or assistance that service providers can make available from sources like the Bureau of Labor Statistics in terms of living wage careers, educational sources, potential funding sources, and employers would be very helpful to help ensure that clients are routing themselves to in-demand jobs in Houston paying living wages.

In terms of desired workforce skills training and assistance, clients most want: funding or financial assistance for certifications, vocational programs, and/or higher education; internships or on-the-job experience in their desired field; and assistance in mentoring, coaching, and/or building networks from the community in their desired career fields. For example, a chronically homeless client (an older, Caucasian male currently living in his broken down car) who would like to do project engineering consulting said:

I would say a program for people that are out of work and have people that are retired come in and give courses to help you, you know, in the area that they know more than you do. Teachers kind of, but you know, retired, have done it their whole life, and say “Ok, this is what I did, and Ok, you’re at this age. Ok, this is what you need to do.” Give back and give your resources or connections, because that’s the way it works—connections. That’s what it’s all about. It’s not what you know, it’s who you know. (Client Participant #13)

Note while there is agreement between service providers and clients regarding certain needed skill areas such as computer skills, hands-on technical skills, and some soft skills, clients particularly stressed the need for internships, on-the-job training, and mentoring/coaching. The need for internships and on-the-job training might potentially speak to the relative lack of work experience of many of these clients, and the fact that they need this additional investment in them for an introductory period of time in order to become competent in new jobs/roles. The need for mentoring and coaching may also indicate that many of these clients have not built up career networks, and therefore need additional assistance making these connections. These results may again suggest a need for service providers to continue outreach with employers in the community to try to engage prospective employers and connect employers and clients.

As cited by service providers in multiple different contexts, clients also cited (again and also in response to the next set of interview questions) more enabling or structural needs in terms of workforce skills development, including the need for reliable transportation to get them to and from work, affordable housing, and affordable childcare. For example, one shelter client (a Hispanic male) described how grateful he would be if he could just get a reliable car in order to work in his field (electrical, which requires driving to multiple job sites):

If somebody could just take me to work, that would be plenty, I could find a job. I just need the lift going up there. I'd surely be grateful and happy. That would make my life better. (Client participant #3)

A client (a middle aged African American female) at a different shelter is also saving for a car. She had been in and out of prison for almost her entire adult life and described her excitement in anticipation of purchasing her own vehicle for the first time in her life (as a woman in her fifties). The additional, more structural, human capital investment cited by clients and service providers has already been discussed, and is again reiterated here, in this Chapter.

Other clients echoed the need expressed by the service providers for coping/retention skills assistance in order to help deal with and work through situations or conflict at work. For example, here is commentary from a young, African American male currently receiving assistance from a mid-sized assistance ministry:

The support that I need is, even after I get a job, if you help me, check up on me because you know there'd be times where I don't get certain things or I'm agitated because of something that goes on, and I don't want to, you see, me myself, I make poor choices. Of how I come at people or how I handle situations at times. But now I know somewhat of it. But I still need to know more about certain situations. I never came across that people can inform me [about things like that]. (Client participant #15)

The need by homeless and at-risk suburban Houston homeless for coping skills has also already been discussed in this Chapter and is again reiterated here.

And a literally homeless client (a 26-year old Caucasian male struggling with alcoholism) said that all he needed was simply "a couch to sleep on, just somewhere I

could be inside at night and, you know, just make sure I can get up in the morning.”

(Client participant #12)

Similarly, one of the shelter clients (an older lady currently pursuing her GED) waiting on public housing (for the elderly) expressed her need for a home:

Well, I think if I was to have a home that I wouldn't have to stress out so much and just be able to be by myself and concentrate better on what I need to do versus living with 200 people and, you know, different personalities [and] different people, so. Sometimes it gets like, you know, I feel like if I had a home where I could really think, really study, and concentrate, things could be a lot better. (Client participant #20)

The preceding two client quotes speak again to the need in the Houston suburbs for additional structural support for homeless and at-risk homeless, such as shelters in the suburbs and more affordable low-income housing.

Potential Workforce Skills Programs

The final section of this results chapter concerns potential workforce programs by addressing research questions 5 and 6:

5. What are the perceptions of staff members working for Houston suburban homeless service provider organizations regarding potential workforce development programs and interventions that might assist clients to achieve living wage employment?
6. What are the perceptions of Houston suburban homeless service provider clients regarding potential workforce skills development programs and interventions that might assist them to achieve living wage employment?

I asked service providers about:

- any initiatives they have implemented to develop the workforce knowledge and skills of their clients;
- the characteristics of programs that they have seen most effective in getting client populations employed in living wage jobs;
- what they have found is the living wage in the Houston suburbs;
- the role that they see for employers, the Continuum of Care, Texas Department of Assistive and Rehabilitative Services (DARS), and Workforce Solutions in helping to get their client populations employed in sustainable jobs; and
- any other potential workforce skills-related solutions that they would like to see offered by service providers and/or the community.

I asked clients what workforce development programs they currently use and their feedback on these programs; I also inquired about their experience with DARS and Workforce Solutions, as well as any other workforce skills–related programs or services that they would like to see offered by service providers and the community.

Current Workforce Skills Programs Offered by Service Providers

Table 5 lists employment and adult education services currently offered by service providers. Several of the service providers, the assistance ministries in particular, offer comprehensive employment-related services to their clients, to the point where several of their clients interviewed felt like they did not need to go to any other employment services organization. Current workforce skills and adult education programs range from:

- basic English as a Second Language (ESL) classes and GED courses;

- a variety of work readiness classes and services (assessment, employment search, job coaching and mentoring, resume writing/builder, cover letters, interviewing/mock interviews, appropriate dress and vouchers for work clothing, etc.);
- computer classes/assistance and access to computers and computer labs;
- scholarships and partnership with local colleges for vocational certification programs (administrative assistant, welding, forklift, nursing, truck driving, etc.); and
- paid trial internships.

If a particular service provider doesn't have these programs on-site, then they have a list of other service providers for their clients to approach. Service providers try to help clients overcome barriers to working, such as a lack of transportation and lack of childcare, by providing vouchers for public transportation and by helping them access childcare benefits for single parents. One service provider is planning to hire a dedicated driver to help clients get access to transportation to and from interviews and/or jobs outside the shelter. Again, service providers offer these services in response to what they perceive to be a need by their client populations. With regards to workforce development, the items listed in Table 5 for “Employment Services/Adult Education” and described throughout this Chapter are additional investments in the human capital represented by the suburban homeless and at-risk homeless in this study to be successful and to help them obtain living wage jobs.

A few noteworthy examples or successful practices of current workforce skills programs for the homeless/at-risk follow:

- Several organizations leverage volunteer community business people or recruiters to conduct mock interviews and deliver job coaching. These individuals provide additional valuable experience and perspective to the clients from their real-world experience.
- One of the shelters has résumé class participants write essays about the types of jobs that they desire and what they've learned and what else that they would like to learn; this helps clients to orient themselves toward a goal and reinforces that learning is two-way for participants and for instructors.
- One of the volunteer service provider organizations recruits former homeless individuals to come back and give encouraging speeches or testimonials at the Bible studies and at the monthly community breakfasts to provide hope and encouragement to other homeless individuals in the community and to let them know if others have been successful, so can they.
- One of the homeless prevention service providers requires that their clients obtain their GED as part of the program requirements (if they do not have their GED or high school diploma already).
- Two organizations connect their clients with volunteer mentors out in the community to help them with coaching and networking in the business world.

- Two providers have short-term workforce development certificate programs that help build clients' résumés, make them more marketable to potential outside employers, and assure employers that the clients have employable skills.
- One of the transitional living participants described internship opportunities that they have secured with two local businesses out in the community for clients.
- Two service providers have in-office paid internships for clients. One provider recently introduced a retail/customer service internship at its resale store, where clients can work, earn some income, and build their résumés and experience. Another provider allows residents to do paid work at the organization in various areas (e.g., reception and culinary work) once they pass 20 hours per week of volunteer time.
- Two service providers offer paid internship opportunities whereby the service provider pays the salary and an external employer provides the work. Again, the goal of these programs is to give clients real-world experience and access to income.

Most of the clients interviewed who are not currently working full-time are taking advantage of—or have plans to—resources from the service providers. Many of the clients expressed their appreciation for the social services offered by their respective service providers. For example, one of the assistance ministry clients (a middle- aged African American male let go from the oil and gas industry currently seeking employment) said:

They [his service provider] have more than enough resources. I mean they have, like, they have job coaching, they have financial coaching, they have this, they

have that. I mean, dude, like it's all there for you to take advantage of. And if you don't take advantage of it, it's your loss. (Client participant #17)

In another example, a client of a local assistance ministry (a middle-aged African American male let go from the oil and gas industry and seeking employment) is so pleased with the services that he wants to volunteer at the assistance ministry after he becomes employed:

If they find new jobs that are hiring and openings, they share with you right away. They let everybody know, "Hey, there's some openings," and stuff like that. They're very responsive to, like, if you need some help and you're trying to fill out an application on the computer; they have quite a few job coaches that come through and volunteer. I mean, to put the word on it, I'd just say it's excellent. I mean, you can't ask for no more, I mean ... Even myself, once I find work, I feel like I want to come back and help volunteer.. Let me help somewhere and give back. (Client participant #17)

And a client of an assistance ministry (a middle-aged African American gentleman who recently got an apartment with the help of the service provider) described how he was pleased with the level of social services in Houston (he recently moved from Louisiana):

I am pretty happy with the things that I keep hearing that are here in Houston. I like this place. Houston in general because they [have] programs that they have had like lent a helping hand. So Houston's offered a lot, you know? Again, they have an enormous amount of food programs here. I was walking with a friend to the library and a homeless guy asked him... either for money or for food. And he said, "No, I'm not gonna do that for you; because if you can't eat in Houston, then you don't want to eat. You wanna be hungry. (Client participant #14)

Many of these same clients expressing their appreciation, however, also expressed surprise in their interviews to find all these resources, and several of them found the service providers unintentionally, which again may illustrate a need for a

broader campaign to educate the homeless and at-risk homeless (and the population generally speaking) about the existing resources available in Houston.

Characteristics of Successful Programs

Service providers felt that the most successful workforce skills–related programs were part of more comprehensive programs that focused on ensuring clients had the basics (e.g., food, housing, clothing, and medical) covered but also go beyond the basics to address additional supporting needs. As stated by a female case manager at one of larger assistance ministries:

As a case manager, obviously I am working with the employment side, but my thing is I am more thinking about those basic needs. Because I know that, if you are on the street, you can say you want a job, but if you don't have a place to take a bath, you don't want to go to a shelter, you don't have clothes to go to an interview, then as a case manager and as a social worker I try to start with the basics and then I work my way from there. (Service provider participant #14)

The comprehensive nature of the overarching programs include: assessments, individualized coaching and counseling with one-on-one attention, employment services, life skills classes and support, and help addressing clients' underlying issues that brought them to the service provider. A case manager responsible for a transitional program at an employment services center described its services in terms of addressing the continuum of clients' needs:

Our philosophy is a wraparound program: housing, case management, employment, we work together for every aspect of the client's needs. We give them gas cards, we give them housing, we ... prop them up and give them a chance, to try to make sure they are secure about their future. It is not just about dollar signs, is about people. (Service provider participant #7)

The program manager of the suburban transitional living facility for women and their children described the comprehensive nature of what she believes to be successful workforce skills program:

I think the programs that I think are most successful are the ones that are looking at all the different pieces, they are bringing the moms in and they are doing the testing to see what their interest and skills and abilities are, and then they are working on the interview skills, the communication skills, they are dressing them, they are working on how to write and how to respond, how to talk, how to dress, what to say. And then, the other piece that is good is matching you up with mentors that are already successfully employed and kind of giving you contact in the community to kind of help you take that further. (Service provider participant #10)

As illustrated by these quotes, service providers believe that successful workforce skills development programs (once the service provider is assured that the basics are covered) attack the homeless or at-risk homelessness issue from multiple fronts across the spectrum of needs (non-workforce development related as well as workforce-development related), from helping them address the root causes of the homelessness issue in the first place (counseling and case management), to addressing the basics (food, shelter, and clothing), to foundational education and workforce needs (such as education, computer, and trade skills), to helping them actually obtain the job (career assessments, workforce readiness skills, soft skills, networking, and mentoring), all the way to helping them keep or retain the job (through helping them with coping skills, teaming, and communication skills, etc.). Several service providers emphasized the importance of relationship-building with clients and even follow up with clients after they have left the service provider to check in with them and help assure their long-term

success. This need for a comprehensive approach for successfully dealing with homelessness has also been documented in the literature (Rog et al., 1998).

Service providers often felt that successful workforce skills programs begin with career assessments. Such assessments not only provide a baseline of skills and education, as which helps to determine the key gaps that need to be filled in order to achieve employability, but also provide more information about clients' desires and passions when it comes to potential careers. Ultimately, the feeling is that clients who are routed to jobs and careers that match their inclinations and desires are jobs that will be more successful for the clients in the long term. The assessment may also help broaden the paradigm for clients to get them to consider jobs or types of careers that they might not have considered or been aware of previously (such as in the instance of female clients pursuing a welding career, as described earlier in the Chapter). For example, here is how a case manager responsible for a transitional program for veterans at one of the employment services organizations described the importance of a baseline assessment as a critical success factor in helping clients to achieve employment with the help of his organization:

I ask the guys to tell me what they want to do first of all to get that on the table, what you have been through, where do you want to go, what is your desired job here, what do you want to do when you grow up, what is your passion overall, what passion do you have? Let's move forward with that passion, they often find peace with their passion. It is their desire. I don't necessarily tell you where to go here, tell me where you want to go, and if we can make it happen...So, listen to the guys well, oftentimes what they can do, desire-wise. And in doing so, they will tell you what they want to do...If they can't do it because of limitations or because of an ex-offender situation, do a second choice, or a third choice, or a fourth choice. But they take the lead on what they really want. (Service provider participant #7)

In general, service providers felt that unemployed homeless often need an additional layer of assistance and encouragement compared to the unemployed more generally speaking. This assistance is especially important for those intimidated by the computer. In fact, one of the most common complaints heard in the study about Workforce Solutions employment services (echoed by both service providers and clients) was the lack of an individualized approach—and a focus on productivity and placement numbers as opposed to quality interactions.

Service providers also felt that successful programs reach out to and partner with the community (i.e., apartments/housing providers, other service providers, educational institutions, faith-based institutions, and employers). They felt that the workforce skills-related, educational, and/or vocational certificate programs, in particular, need to quickly get clients to a sustainable earning potential.

Service providers also emphasized the importance of continued follow-up with clients after they exit the program in order to check on clients, offer encouragement, and coach them to stay employed. They believed that effective workforce programs enable the foundation for success for the long-term and not just for the duration of the program with the service provider. That is, effective workforce programs help clients, especially those who are literally homeless and have become disconnected, reintegrate with society. All of these factors, again, are what service providers believe are human capital related investments needed to help homeless and at-risk homeless clients achieve living wage jobs.

Several service providers expressed strong opinions about the duration of such programs. One service provider said it takes at least 18 months to two years of broad support to ensure clients are self-supportive. With regards to workforce skills development programs in particular, another interviewee referenced her professional experience as a subject matter expert creating workforce development models used by the state of Texas. Combined with her more recent personal experience with homelessness and current position as house mother for a service provider, she said any workforce skills development program (a subset of providers' overarching programs) should last at least six to eight weeks.

This is interesting commentary from both service provider representatives which illustrates that they believe that the human capital investment in the Houston suburban homeless or at-risk homeless should be at least of a certain duration (six to eight weeks for workforce skills development, and 18 months to two years of broader services) in order to be truly successful. Paraphrasing from the executive director of the mid-sized volunteer homeless outreach and services organization, without this length of program, “otherwise, we are just talking about it” (e.g., not really addressing the issues in a long-term fashion).

Ultimately, the consensus among service providers is that a sustainable living wage, although varying depending on the number of people in the household, is a minimum of \$15 per hour, or approximately \$25,000 to \$30,000 per year for an individual. (Families would require more.) Service providers agreed that the federal minimum wage is not a living wage (unless an individual or family worked multiple

minimum wage jobs per household for a combined income). Given this information, then, it again reiterates the importance of trying to direct the Houston suburban homeless and at-risk homeless to careers and certifications that marketplace data shows should earn them a living wage.

*Role of Employers, the Continuum of Care, DARS, and Workforce Solutions in
Employing the Homeless*

I asked both service providers and clients about the potential role that employers, the Continuum of Care, DARS, and Workforce Solutions can and should play in helping the homeless or at-risk homeless secure living wage. The Continuum of Care (CoC) is the network of agencies and service providers offering social services to the homeless, and in Houston is led by the Coalition for the Homeless of Houston/Harris County. The mission of the Texas Department of Assistance and Rehabilitative Services (DARS) is to

work in partnership with Texans with disabilities and families with children who have developmental delays to improve the quality of their lives and enable their full participation in society. (DARS Web site)

Workforce Solutions is the state of Texas' public workforce system, helping match the unemployed in Texas with employment and with other social benefits that they qualify for.

A common theme echoed by both service providers and clients is that there needs to be more education and communication to the public in general and employers in particular about the "true face" of the homeless in today's society, which primarily consists of families, particularly single women with children. Employers often have inaccurate and outdated biases against the homeless. As summed by a male case

manager at a mid-sized assistance ministry in terms of how he believes employers typically view the homeless:

The belief, when you say “homeless,” the first thing that comes to everyone’s mind is the guy who’s standing on the side [of the street], begging for change, going to the liquor store and buying, you know, a 40-ounce. That’s the thought in everybody’s mind. But that’s only maybe 30 percent of the actual population that is homeless. Because we [have] got so many mobile homeless people that are families that are moving from just one place to another for safety reasons, for whatever it might be reasons. (Service provider participant #12)

The likely reason why the general public associates homelessness with the mental picture described above of some of the chronically homeless panhandlers is because these type of homeless tend to be very visible (particularly if panhandling streetside), whereas, as discussed in Chapter 2 (Literature Review) the suburban homeless are often much less easily identifiable, in that they are often mobile, living in their cars or cheap hotels.

Service providers and clients also feel that employers should give the homeless a chance and have more of an open mind when it comes to employing potential homeless individuals. The executive director of one of the small volunteer homeless outreach organizations said:

We [have] got to give people a break. We [have] got to have a charitable side to our corporation. We have got to have a compassionate—that was George Bush’s word—side to our hiring. (Service provider participant #5)

The executive director of another small volunteer homeless outreach organization expressed similar sentiments:

I think that employers need to be more sympathetic and empathetic and think about how they would want to be treated if they were in that same situation and what kind of opportunities they would want to be given if that was their son or

daughter, or brother or sister, or mother or father. I think that sometimes our fear—as irrational as it may be—overtakes our sense of reasoning. These people are just people; the only difference between them and us is that they sleep under a bridge and we sleep in a house. And all of us have had an experience with people that we love, work with, work for, or are related to or friends with that either have mental disabilities or addiction issues. And there are answers and there is help. But you have to be willing to take chances. (Service provider participant #13)

In addition, service providers and clients alike expressed the desire and need for more on-the-job training and internship opportunities from prospective employers, and service providers expressed the wish for more partnership, outreach, and relationship-building between service providers and employers in the community.

In terms of the role of the Continuum of Care, many service providers mentioned that they believe it should continue to play a role in educating the public about the true face of homelessness. A director at one of the larger assistance ministries said:

There should be as big a campaign for homeless overall [as there was to end homelessness for veterans]. Most people think homeless want to be homeless or that is the position they want to be in. Most people look at it as who they are and not a situation. Homelessness is a situation. It doesn't define who the person is. (Service provider participant #22)

The quote above is particularly true for transitional homelessness, which represents the most common type of homelessness (Lee et al., 2010). Transitionally homeless individuals are often homeless for short periods of time due to a crisis, such as the loss of a job, a divorce, or a medical issue. It would be beneficial for the public to become aware about the true facts about homelessness in our local community, and ways that they can help.

Service providers also would like to see the Continuum of Care focus more on providing education and training, increasing skill set development, and helping to get the

homeless employed. For example, a female shelter case manager believes the Continuum of Care should focus on improving the education and skill levels of the homeless:

I do believe once their skill set is increased, their employment opportunities will increase. Of course, the employment service class can be a start, but [also] that [emphasis on] continuing to build that skill level. For example, those who do not have a high school diploma or GED, having that opportunity to obtain that higher education will help them obtain ... better employment opportunities, as well as a certification for particular jobs. Just increasing those will allow them [clients] to increase their employment opportunities. (Service provider participant #4)

Several service providers cited the new “Income Now” (an initiative that seeks to facilitate employment for homeless households assessed through the new Coordinated Access System, a new delivery system to help more quickly and efficiently end homelessness for individuals and families) and coordinated access initiatives but weren’t fully clear yet on what the new initiatives involved. Based on the description of the program in the “Income Now” Initiative Handbook, it appears that this initiative will address at least some of these potential workforce skills programs desired by service providers (such as the need for more quality interactions and personalized services for the homeless from Workforce Solutions, and the attempt to help match the homeless with employment; Coalition for the Homeless of Houston/Harris County, 2015). But given the lack of familiarity of service providers with this program at the time of interview, it perhaps indicates a need for more education of service providers about the new “Income Now” program in Houston.

Most of the service providers and clients interviewed have not had much interaction with DARS and therefore could not comment on its role. This might indicate

an opportunity for DARS to educate service providers about its services that could benefit homeless clients. Several service providers mentioned that they believed that DARS is integrating its workforce offerings with Workforce Solutions, but they were unclear about this. Those service providers and clients that did have some experience with DARS mentioned burdensome paperwork and a long perceived cycle time to receive services, thus indicating a potential need to streamline paperwork and enhance communication on status of cases between DARS and their homeless or at-risk homeless clients.

With regard to the role of Workforce Solutions, service providers did not see any initiatives from the locations in terms of helping the homeless as compared to helping unemployed individuals more generally speaking. Many service providers expressed that the homeless need more hands-on, customized support to find a job. Perhaps, speculated some, there is a way that Workforce Solutions could have programs specifically for those who self-identify as homeless (similar to the emphasis that is currently in place on employing veterans). Both service providers and clients would like more Workforce Solutions locations in the suburbs, with a few days with extended hours so that clients can more easily access the locations. Finally, multiple service providers said that the employees at Workforce Solutions are focused more on productivity and placement numbers than the quality of interaction, which may not be the most effective approach in trying to assist homeless individuals to find jobs that they will stay with. A gentleman case manager at one of the employment services organizations who is responsible for a transitional program for veterans said:

I was a supervisor for nine years for Workforce Solutions. I watched how it all changed. The way they address homeless people was to give them quick, fast jobs. Take this little job here, staffing the job, and then move on. Whereas the time was not spent focusing on the person or the candidate. [It] is all about numbers with the Workforce Solutions. Turnaround time. You have ten jobs here, go for it. The time is not spent trying to train or to work with the gentleman over time like that to see what they are capable of doing. (Service provider participant #7)

Service providers would like to see the rewards and incentive mechanisms change at Workforce Solutions to encourage employment specialists to work more closely with those that have barriers, such as the homeless population, because they require extra assistance in order to be successful. Again, as discussed above, it seems like some of these issues are just now being addressed in the new Income Now initiative, particularly the issue of providing more quality interactions to the homeless or at-risk homeless at Workforce Solutions (Coalition for the Homeless of Houston/Harris County, 2015).

Although some clients felt the same way about Workforce Solutions (in terms of the focus on quantity rather than quality) and felt that they could just as easily find the same or better job opportunities on their own, others emphasized the range of services available in a positive light and appreciated the assistance and accountability provided by the Workforce Solutions case managers.

Other Potential Workforce Skills Programs

In the final section of the interview guide, I asked both service providers and clients what other types of workforce skills development solutions or policies they would like to see offered by service providers, the public sector, and/or the community. Several common responses across service providers and clients (again) included more

public transportation in the suburbs, a bigger supply of affordable housing, more shelters and other social services in the suburbs, and more support for childcare for single parents so that they could work, including more affordable childcare and the possibility of flexible schedules and work-from-home opportunities. These factors are all important enablers to work.

Additional factors cited, and reiterated earlier, include:

- the desire for more willingness by employers to give the homeless a chance and to train them on the job and/or provide internships/apprenticeships or trial periods of employment;
- for more agencies to offer paid employment opportunities with on-the-job training to their clients;
- for more mentorship programs with employers and business people out in the community to help the clients make inroads into the world of work and build connections; and
- and more funding for education and vocational training.

Both service providers and clients recognize that although you can provide a wealth of tools and support resources for homeless and at-risk homeless, it is ultimately up to the individual client to take advantage of them. An executive director of a shelter said, “You can provide a lot of things for them, but still they have to actually be willing to take the initiative to address the areas in their life that need to be addressed.” (Service provider participant #17) Several clients interviewed seemed to agree with this

sentiment, for example (from one female African American client staying at a suburban shelter for women and children):

It has to be self-will. You have to change how you are thinking. You have to want to do it for yourself. I was an alcoholic. I was tired. My whole life has been unstable. I'm tired of having a Plan A, but there is no Plan B or C. I know that there is a better life outside the streets, and we need to be positive, sacrifice, love yourself. Sometimes people don't love themselves when they are homeless. Sometimes people lose all hope and faith. They don't have any positive influence, anyone to motivate them, anyone to encourage them to stay on the right path. But I believe self-will is number one. It starts with self and how much that you want for yourself and that you want to do better in your life. You need to know that there is a better life out there, and it is OK to change. (Client participant #18)

Summary of Key Themes and Results by Research Question

Table 9 summarizes the themes and results by research question generated by the study.

Research Question	Interview Guide Questions
1. What are the perceptions of staff members working for Houston suburban homeless service provider organizations regarding their clients' current workforce skills?	Service Provider Interview Guide Questions 9–14
Study Themes and Results Highlights	
<p><u>Themes Related to the Research Question:</u></p> <ul style="list-style-type: none"> • Service providers felt that workforce skills of Houston suburban homeless and at-risk homeless clients in this study tended toward professions that were trade skills, blue collar, general labor, and lower wage white collar (although some had higher levels of education and skills). • Many clients already had vocational skills and certifications. • Service providers felt that clients, including those that are literally homeless, are willing and able to work. 	

Table 9. Summary of themes and results by research question.

Study Themes and Results Highlights

Results Highlights:

- Educational levels of clients varied; some service providers screened for highly motivated clients who had higher levels of education or were currently enrolled in school, and others reported that clients spanned the spectrum of education (but it skewed toward lower levels of education).
- Some service providers reported that they had clients with college and higher degrees (PhDs, JDs, and MBAs).
- Service providers reported that many of the clients without a college degree have vocational certifications, such as forklift, commercial driver's licenses, and certification to work on the docks (TWIC) for the males and certified nursing assistant for the females.
- Some of the most frequently cited types of jobs held by Houston suburban homeless and at-risk homeless clients (as reported by service provider organizations) include: retail; fast food/food service; distribution and warehousing; restaurant cooks, chefs, and servers; construction; home healthcare and elderly care; customer service; seasonal work/temporary work; general labor or day labor; welding or pipefitting; teaching or assistant teaching; accounting or office/clerical/secretarial; truck drivers; and nursing assistants.
- Some of the most common workforce skills held by clients (as reported by service provider organizations) include: customer service/cashier/communication; forklift operation; safety; food preparation; general labor; office/administrative/secretarial skills; commercial driving; and nursing assistant skills.
- Although jobs and skills of clients tend toward lower-wage blue collar or minimum/lower wage white collar, service providers reported that some clients hold professional jobs or skills, such as teaching, oil and gas, and corporate professional.
- Service providers noticed some differences in workforce skills by demographic (it is likely that these factors exist in the population independent of housing status):
 - undocumented labor (often Hispanic) tend to pursue housekeeping, general labor, landscaping, and construction jobs and associated skills;
 - females tend to pursue the care-taker jobs and skills (such as teaching, nursing, childcare, and home healthcare), customer service, or office work/clerical;
 - males tend to pursue more physical professions (such as factory, trade, driving, construction, and warehousing and distribution).
 - it is harder for older homeless or at-risk homeless individuals to get a job; and
 - more mature clients tend to have a stronger work ethic than some of the younger homeless or at-risk homeless clients.
- Service providers noted some differences in workforce skills by region: service providers located on the Gulf Coast tended to have clients skew toward employment in chemical plants, as well as have their TWIC cards approving them for work on the docks.
- Most of the service provider representatives interviewed felt strongly that their clients are willing and able to work (if they weren't working already), even the literally homeless clients.

Table 9. continued.

Research Question	Interview Guide Questions
<p>2. What are the perceptions of Houston suburban homeless service provider clients regarding their current workforce skills?</p>	<p>Client Interview Guide Questions 6–12</p>
<p>Study Themes and Results Highlights</p>	
<p><u>Themes Related to the Research Question:</u></p> <ul style="list-style-type: none"> • Workforce skills of Houston suburban homeless and at-risk homeless clients in this study tended toward professions that were trade skills, blue collar, general labor, and lower wage white collar (although some had higher levels of education and skills). • Both male and female clients held a variety of vocational certifications or licenses (often related to working in the chemical plants/industrial facilities and working on the docks for males, and working in healthcare or nursing assistant for females). • Most clients were willing and eager to work and many were working on bettering their educations. <p><u>Results Highlights:</u></p> <ul style="list-style-type: none"> • 19 of the 24 clients graduated high school; eight have some college experience; and two have bachelor’s degrees. Two of the five that did not graduate high school are pursuing their GED. Six are enrolled in college currently. • Certifications cited by clients included certified nursing assistant, communications certifications, commercial driver’s license, CPR, electrician, facilities’ care, forklift, food safety, medical assistant, and TWIC. • Jobs reported by clients currently working include: assistant/receptionist, auto repossession, cashier (retail), certified nursing assistant working in elderly patient care, chemical plant worker, fast food restaurant worker, house mother at a transitional living facility, inventory support (retail), supervisor at a payroll company, and paraprofessional in a local school district. • Clients most frequently cited possessing the following workforce skills: cashiering, cooking and food preparation, communication, construction, customer service, healthcare/nursing, forklift driving, general labor, truck driving, and warehousing. • Some skills reported by clients could be considered more professional level skills, such as computer communications, computer skills, curriculum development, paralegal, paraprofessional, project engineering, retail banking, supervision/management, task analysis and workforce development, teaching/teaching assistant, and quality assurance. • Most clients learned their workforce skills on the job, through observation, and (where applicable) through vocational education. • Almost half of the clients interviewed currently work in paid positions for external organizations, and most of these work full time. The average work experience of clients interviewed is 19 years. • Most of the clients that are not working indicated their desire to work. • Clients described themselves as hardworking, dependable, reliable, and people who work well with others. 	

Table 9. continued.

Research Question	Interview Guide Questions
3. What are the perceptions of staff members working for Houston suburban homeless service provider organizations regarding their clients' workforce skills development needs?	Service Provider Interview Guide Questions 15–17
Study Themes and Results Highlights	
<p><u>Themes Related to the Research Question:</u></p> <ul style="list-style-type: none"> • The most needed workforce skills by Houston suburban homeless and at-risk homeless in this study included computer/technology skills, work readiness skills, soft or life skills, office skills/etiquette, self-confidence and motivation, basic adult education, hands-on experience/skills, job-related knowledge, and trade skills for a position. Many currently offer (or refer to other service providers who offer) workforce skills development programs around these topics. • Service providers felt that it was very important to couple these workforce skills development programs with coaching or training on finances and budgeting to ensure that clients build up their savings and have enough financial cushions to avoid transitional homelessness. 	

Table 9. continued.

Study Themes and Results Highlights
<p><u>Results Highlights:</u></p> <ul style="list-style-type: none"> • Service providers most commonly cited Houston suburban homeless or at-risk homeless clients in this study lacking the following workforce skills: <ul style="list-style-type: none"> ○ computer/technology skills; ○ work readiness skills (interviewing, resume writing, dressing, presenting themselves, writing a cover letter and thank you note, etc.); ○ soft/life skills (e.g., working with people, communications, coping with stress, time management, and budgeting); ○ office skills and office etiquette (e.g., typing, word processing, and appropriate work expectations and interactions); ○ self-confidence/motivation; ○ basic adult education (literacy, composition, speaking, etc.); and ○ hands-on experience/skills or trade skills for the position. • Service providers said some of their older clients lack technology/computer skills and that female clients in particular tend to lack self-esteem. • Service providers most commonly cited clients benefiting from the following workforce training programs: <ul style="list-style-type: none"> ○ basic adult education; ○ computer training (word processing, e-mail etiquette, attaching résumés to e-mails, etc.); ○ hands-on technical or trade training (internships, apprenticeships, etc.), vocations, and certifications; ○ soft skills/life skills training (budgeting, financial counseling, communication, stress management, etc.); ○ training in office etiquette (typing, answering phones, how to interact with people, appropriate work expectations, handling stress at work and coping, etc.); ○ work readiness training (mock interviewing, interviewing skills, filling out job applications, etc.); ○ assessments to help clients understand what they are good at and to help route them to appropriate careers; and self-confidence/-esteem coaching.

Table 9. continued.

Research Question	Interview Guide Questions
4. What are the perceptions of Houston suburban homeless service provider clients regarding their workforce skills development needs?	Client Interview Guide Questions 14–17
Study Themes and Results Highlights	
<p><u>Themes Related to the Research Question:</u></p> <ul style="list-style-type: none"> • Houston suburban homeless and at-risk homeless client participants desired funding or financial assistance for certifications, vocational programs, and/or higher education; internships or on-the-job experience; and assistance in mentoring, coaching, and/or building networks. <p><u>Results Highlights:</u></p> <ul style="list-style-type: none"> • Clients most frequently cited: funding or financial assistance for certifications, vocational programs, and/or higher education; internships for on-the-job experience in their desired field; and assistance in mentoring, coaching, and/or building networks from the community in their desired career fields. • Many of the clients who were not working were leveraging current workforce skills programs offered by their respective service providers, and clients expressed their appreciation for the social services offered by their respective service providers. 	

Table 9. continued.

Research Question	Interview Guide Questions
5. What are the perceptions of staff members working for Houston suburban homeless service provider organizations regarding potential workforce development programs and interventions that might assist clients to achieve living wage employment?	Service Provider Interview Guide Questions 18 - 25
Study Themes and Results Highlights	
<p><u>Themes Regarding the Research Question:</u></p> <ul style="list-style-type: none"> • Service providers would like to see more education and communication about the “true face” of the Houston suburban homeless. • Service providers would like for employers to have a more open mind in employing the homeless; for more on-the-job training and internship opportunities; for more partnership, outreach, and relationship building; and more flexible schedules and work from home opportunities from employers of the homeless or at-risk homeless. • Service providers would like to see more focus on education of the public and skills building of the Houston suburban homeless and at-risk homeless from the Continuum of Care. • Service providers would like Workforce Solutions to spend more quality time in assisting their homeless clients. • Service providers cited an interest in facilitating enablers to work in the suburbs for the Houston homeless and at-risk homeless. 	

Table 9. continued.

Study Themes and Results Highlights
<p><u>Results Highlights:</u></p> <ul style="list-style-type: none"> • Service providers felt that the most successful workforce skills–related programs are part of more comprehensive programs. Such programs have the following characteristics: <ul style="list-style-type: none"> ○ triage with an emphasis on the necessities first (e.g., food, housing, clothing, and medical); ○ intake and career assessments; ○ individualized coaching and counseling with one-on-one attention; ○ employment services; ○ soft skills/life skills classes and support; ○ components to address underlying issues that brought them to the service provider; ○ a philosophy and practice of partnership with individuals and organizations in the community (i.e., apartments/housing providers, other service providers, educational institutions, faith-based institutions, mentorship programs, and employers); ○ an element of follow up with clients after they exit a program in order to check on clients, offer encouragement, and coach them to stay employed; ○ a long-term focus and relationship-building with clients; and ○ a focus on helping clients reintegrate with society. • Service providers would like to see more employers give the homeless a chance at jobs and have a “charitable side” to their hiring. • From employers within the community, service providers expressed the desire and need for: <ul style="list-style-type: none"> ○ more on-the-job training and internship opportunities; ○ more agencies to offer paid employment opportunities with on-the-job training for their clients; ○ more mentorship programs with employers and business people out in the community; ○ more partnership, outreach, and relationship-building between service providers employers in the community; and ○ the possibility of flexible schedules and work-from-home opportunities. • From the Continuum of Care, service providers would like more education and communication to the public in general and employers in particular about the “true face” of the homeless in today’s society to counteract inaccurate biases, a focus more on education and training, increasing clients’ skill set/skill development, and helping to employ the homeless. • From Workforce Solutions, service providers would like to see more quality interactions (with a revised incentive structure focused on quality rather than productivity) in helping the homeless find employment, as well as more locations in the suburbs. • Looking at infrastructure, service providers expressed interest in more public transportation in the suburbs, a bigger supply of affordable housing, more shelters and other social services in the suburbs, and more support for childcare for single parents so that they could work.

Table 9. continued.

Research Question	Interview Guide Questions
<p>6. What are the perceptions of Houston suburban homeless service provider clients regarding potential workforce skills development programs and interventions that might assist them to achieve living wage employment?</p>	<p>Client Interview Guide Questions 18–21</p>
Study Themes and Results Highlights	
<p><u>Themes:</u></p> <ul style="list-style-type: none"> • Clients in this study also desire more education of the public and employers about the true face of homelessness in the Houston suburbs. • Clients would like more on-the-job training opportunities from employers, for more employers to give the homeless a chance, and for mentorship programs. • Clients would like more accessibility and value from interactions with Workforce Solutions. • Clients would like to see additional structural enablers to work in the suburbs. <p><u>Results Highlights:</u></p> <ul style="list-style-type: none"> • Most of the clients interviewed who are not working full-time are using—or plan to use—resources from the service providers, and most seemed very pleased with the resources offered by their respective service provider. • Clients agree with service providers that there needs to be more education and communication to the public in general and employers in particular about the “true face” of the homeless. • Clients also expressed the desire and need for more on-the-job training opportunities from prospective employers. • Clients would also like more employers to give the homeless a chance in hiring and for more mentorship programs with volunteers out in the community. • Clients also felt it would be helpful for Workforce Solutions to have more locations in the suburbs, as well as a few days with extended hours so that clients can more easily access the locations. • Clients echoed the need for additional social services in the suburbs (such as more public transportation, a bigger supply of affordable housing, and more shelters), as well as the need to address other enablers for work, such as more support for childcare. 	

Table 9. continued.

Chapter Summary

In conclusion, this chapter presents the study findings (a summarization of the interviews with both service providers and clients) in terms of the current workforce skills of Houston suburban homeless or at-risk homeless clients, the needed workforce skills, and potential workforce skills–related programs or solutions that might address these needs, and outlines additional human capital investments needed in the Houston suburban homeless and at-risk homeless in order to help them achieve living wage employment. I gathered data from 25 representatives from 13 different service providers (assistance ministries, shelters, volunteer organizations, employment services organizations, and a transitional living facility) from a cross-section of Houston suburbs, and from a total of 24 clients from seven of these service provider organizations.

The most prevalent reason cited by the Houston suburban homeless or at-risk homeless service providers and clients for homelessness were financial (unemployment or underemployment, the inability to find a job, wages not high enough to sustain, lack of savings and/or family support, sudden loss of income due to divorce, debt, or medical bills). Often their financial issues were precipitated by some kind of crisis (such as loss of a job, or death of a spouse, or divorce), and they were exacerbated by a lack of savings/financial reserve and a support system to help them through difficult times. Service provider participants believe that the ultimate root causes of homelessness of their clients are related to the underlying lack of education and corresponding skills; cycles of generational poverty, abuse, and poor family support/role modeling; and in

some cases mental illness and/or substance abuse (in the latter instance, especially for the chronically and literally homeless).

In terms of education, most service providers reported that their clients had lower levels of education (some high school, high school graduate or GED, few had some college), although many of them do have vocational certifications, and some were currently enrolled in school for community college degrees, vocational certification programs, and even bachelor's or associates degrees currently. There were also some clients with higher levels of education (engineering degrees, MBAs, teachers, attorneys, and Ph.Ds.) reported.

Eleven of 24 clients were working in paid (non-volunteer) work for an external organization (most full time), and the average work experience reported by clients interviewed was 19 years. For those clients that are not currently working, all but three (the three chronically homeless) were actively seeking work. Service providers agreed that their clients desire work, and the two client participants that were living on the streets also expressed their desire to work.

In terms of jobs and associated workforce skills, in line with the education levels, workforce skills of clients tended toward professions that were trade skills, blue collar, general labor, and lower wage white collar (such as administrative, cashier, retail, home health care/nursing assistant, or customer service), although there were also exceptions to this, such as clients with engineering degrees or otherwise from the oil and gas industry and with teaching degrees.

Some of the biggest barriers to work reported by both clients and service providers (in addition to a lack of education and skills and lack of “work readiness”) included a lack of transportation, lack of childcare, criminal backgrounds, mental illness, and substance abuse (the latter two especially for the chronically homeless). Often clients have multiple co-occurring barriers to working.

The most needed workforce skills by homeless and at-risk homeless uncovered by the study included computer/technology skills, work readiness skills, soft or life skills (including communication, customer service, and personal financial budgeting skills), office skills/etiquette, self-confidence and motivation, basic adult education, and hands-on experience/skills, job-related knowledge, or trade skills for a position. Study participants believed that workforce training to address these skills gaps would be beneficial to clients, and many service providers have program offerings currently to try to address these skills gaps. Study participants believed that a career assessment upon entry to the program provides a good baseline of skill levels, skill development needs, and also an important understanding of what the client would like to do and where he or she might best fit career-wise. Client participants also expressed the desire for funding or financial assistance for certifications, vocational programs, and/or higher education; internships or on-the-job experience in their desired field; and assistance in mentoring, coaching, and/or building networks from the community in their desired career fields.

In terms of potential workforce programs, service providers felt that the most successful workforce skills-related programs are part of more comprehensive programs that focus on ensuring clients have the basics, such as food and shelter, covered. Other

important characteristics of successful, broader service provider programs include: individualized coaching and counseling, employment services, life skills classes and support, help addressing clients' underlying issues, continued follow up with clients, a long-term focus and relationship-building with clients, and partnership with employers and the community. Many of the clients are currently leveraging and expressed their appreciation for the social services offered by their respective service providers.

Service providers and clients would both like to see more education and communication to the public in general and employers in particular about the “true face” of the homeless in today’s society. They also expressed the desire for employers to have a more open mind in employing the homeless, for more on-the-job training and internship opportunities, and the desire for more partnership, outreach, and relationship building between service providers and employers.

Service providers also would like to see the Continuum of Care focus more on providing education and training, increasing skill set development, and helping to employ the homeless. Service provider participants had not yet developed a depth of knowledge on the new Income Now or coordinated access initiatives, so additional education on these topics might be beneficial for service providers.

In terms of DARS, few clients or service providers participating in the study had much interaction or knowledge of DARS, which might indicate a need for more education and communication for service providers about the mission and services that DARS can offer to homeless or at-risk homeless clients.

Service providers would also like to see more focused, quality interaction from Workforce Solutions into employment programs for the homeless.

Finally, in terms of potential additional workforce skills development programs, most service providers and clients cited an interest in facilitating enablers to work, such as more public transportation in the suburbs, a bigger supply of affordable housing, more shelters and other social services in the suburbs, and more support for childcare and flexible work options for single parents.

In the last chapter (Chapter 5), I conclude with a final discussion of key findings and implications for the theoretical framework for the study. I also discuss recommendations for prospective service providers, the Continuum of Care, DARs, and Workforce Solutions, and suggestions for future research on this topic.

CHAPTER V SUMMARY OF KEY FINDINGS AND RECOMMENDATIONS

Introduction

This research addressed six questions that covered three key issues:

1. The perceptions (of service providers and clients) of current workforce skills of Houston suburban homeless and at-risk homeless;
2. The perceptions (of service providers and clients) of workforce skills development needs of Houston suburban homeless and at-risk homeless; and
3. The perceptions (of service providers and clients) of potential workforce skills development interventions, programs, and initiatives that can assist Houston suburban homeless and at-risk homeless achieve sustainable, living-wage employment.

In this chapter, I discuss the key research findings—in terms of how the results of this study were consistent with the supporting literature, as well as how this research extended the supporting literature—first examining suburban homelessness more generally speaking and then examining each of three macro issues above. I also suggest recommendations grounded in the current research findings, as well as ideas for future research related to this topic, limitations from the study, and provide some concluding remarks on the topic.

Summary of Key Findings and Recommendations

General Findings: Homelessness in the Houston Suburbs

Key findings from the research in terms of homelessness in the suburbs follow.

1. Homelessness for the Houston suburban homeless and at-risk homeless in this study is primarily due to financial reasons.

The most prevalent reasons cited by clients in this study for their homelessness were financial due to factors such as loss of job, the inability to find a job, underemployment, salaries not high enough to sustain, being laid off, and/or a sudden loss of income due to divorce, debt, or medical bills. The financial predicament of clients was often fueled by a crisis that they did not have the financial reserves or family support system to rely on and thus lead to homelessness.

The service providers interviewed echoed similar factors regarding the reasons for homelessness of their larger client populations, beginning with financial reasons such as unemployment or underemployment; and also a lack of education, training, or workforce skills; a lack of a family support system and/or savings or financial reserve; and the precipitation of a crisis (loss of job, medical crisis, death of a spouse or divorce/dissolution of a relationship with or without domestic violence, the breakdown or loss of transportation). These factors are sometimes co-occurring with other factors such as financial overextension and lack of money management skills; mental or physical disability; substance abuse; criminal background; a cycle of poverty, lack of education, and abuse; and a lack of family role modeling.

Ultimately, this study also found that the underlying root causes of homelessness for the clients in this study included lack of education and skills, cycles of poverty, and in some cases mental health and substance abuse.

The Houston suburban homeless and at-risk homeless have need of avenues to better, more in-demand skills and education, which would go far in terms of helping them earn a livable wage. Furthermore, if more in-demand skills and education are coupled with financial budgeting and coaching for these clients, it would help them build the necessary financial reserve in the event of a lost job, a medical issue, and/or another crisis such as a death of a spouse or divorce, to be able to support themselves temporarily and avoid transitional homelessness.

This research finding was consistent with the literature reviewed on the topic of homelessness. According to the empirical research, some of the biggest reasons for homelessness relate to an inability to afford housing/lack of affordable housing and unemployment/underemployment (Coalition for the Homeless of Houston/Harris County, 2016.; Hill, 1994; Lei, 2013; TICH, 2012; Troisi, Ritalinda, & Stoll, 2012; U.S. Conference of Mayors, 2013).

2. Homelessness in the Houston suburbs is a largely invisible or hidden problem in this study.

While suburban panhandlers are present in many Houston suburbs (depending on the laws of the area) and are visible, they do not represent the full extent of homeless and at-risk homeless in the Houston suburbs. Multiple service provider participants described instances of homeless families and individual clients living in their cars or staying at

cheap motels or hotels, in addition to (but not always more visible) literal homelessness. In fact, one client that I interviewed (who was living in his car parked in a local Walmart) relayed to me that at any given point in time, at least ten individuals are living in their cars in that parking lot in my suburb. In another example, another client of a service provider focused on service prevention lives in an apartment due to the assistance that he is receiving from the service provider but described multiple instances in the recent past of living in cheap hotels and motels and even being kicked out of a local motel with his family due to the number of people he had in the room.

Service providers felt that the annual count of the homeless is a low estimate due to the fact that it does not include such individuals (particularly people living in hotels or motels, people living “doubled up” on a temporary basis with friends or family, and likely not mobile homeless families or individuals living in their cars). As stated by the executive director of one of the small volunteer homeless outreach organizations, “HUD doesn’t not allow you to count people that are doubled up, and that is wrong. Because doubled-up is homeless.” (Service provider participant #5)

Service providers said that in these hotel/motel situations the client spends all of his/her money on the lodging fee and therefore can never get ahead to save enough money to break out of that cycle. The executive director of another small volunteer homeless outreach organization said:

Once you get in the cycle of living in hotels or motels, you can’t save money for deposits and for a first month’s rent because it is taking your whole paycheck to stay where you are (Service provider participant # 13)

Since the annual Point-in-Time count is not including those living on a week-by-week basis in cheap hotels and motels, those who are perhaps living in their cars and are mobile (therefore difficult to count), and those living doubled up, it is likely that the Point-in-Time count in Houston is under-reflecting the true scope of homelessness in suburban Houston.

This finding is consistent with the research. The literature also describes suburban homelessness as a “hidden” phenomenon (Daiski, Halifax, Mitchell, & Lyn, 2012; Deam., n.d.; Lee, 2007)., as well as the potential undercounting of homeless in the annual point-in-time counts (National Law Center on Homelessness and Poverty, 2013).

3. The face of homelessness in the Houston suburbs in this study does not match the typical stereotype of “homeless.”

This study found that, more often than not, the homeless are likely to be single parent families with children. This is evidenced by the fact that two of the shelters and the transitional program included as part of this study are dedicated to housing women and children in response to the great need in the suburbs. Almost all of the clients interviewed in the study were parents, and only seven of the 24 interviewed were Caucasian. Only two of the clients interviewed in this study fit the typical stereotype of “homeless” (e.g., people struggling with alcohol or drug addictions panhandling streetside, typically single Caucasian males).

As the program manager of the transitional living facility for women and children described to me, her organization receives no government support and instead only funding from local faith-based institutions and from the community; she believes

that people are starting to realize that those most affected by homelessness are women and children:

I see the church communities stepping up a lot more than they used to. I think that is a positive sign, I see more interest from church communities in the homeless, because the face of it is women and children because that is growing. (Service provider participant # 10)

This study also corrected any personal biases or misconceptions I may have had prior to commencing interviews. Clients that I interviewed were friendly, they were relatively well-spoken, they were intelligent, and they were very polite and courteous.

On the one hand, I interviewed individuals who were very highly motivated and certainly higher functioning than the general homeless population, living in the transitional living facility. (In fact, when I remarked on how clean and beautiful their facility was—the residents were responsible for housecleaning duties—I think one of the residents took offense and said to me, “You know, not all transitional living facilities are dirty.”) One of the clients that I interviewed at this facility said (paraphrased) that the face of homelessness is not always what you might expect; rather, it might look like someone like herself, a single, African American mother who has a white collar job as a supervisor at a local company and works full time but is struggling with high levels of debt due to two divorces in her recent past. She also stated,

So I’m not the average or the typical face that you see of what’s considered homelessness. I chose to come here. I didn’t have to be. I just didn’t want to continue to be in debt. I wasn’t used to it and didn’t want to continue down that path. (Client participant # 7)

Several of the clients I interviewed were almost philosophers and had beautiful things to say (that may or may not have been relevant to the study), which I tried to faithfully record. They shared admittances of their failures, their gratitude for the services that they received, and their desire to work. For example, I interviewed a young, African-American man at an assistance ministry; his parents divorced when he was a child, which resulted in him and his mom struggling with homelessness since his youth. He has a criminal record from when he was 15-years-old for assault with a deadly weapon, and he has struggled throughout his adult life to stay in school and hold down a job due to a diagnosed mental disability. But yet despite his bouts with homelessness and his violent criminal background, he was eloquent, philosophical, eager to learn and to work, and grateful. He said:

I actually don't see that [his parents' divorce] as something to look bad as because it made me the stronger person that I am, because I see my mom struggle, so I try to work hard so I can help her. It leads me to help other people, and it motivates a lot of people because they see ... It's [the divorce and resulting hardship] been good because I found God in the process. I had to go through a lot of things that I really shouldn't have had to if I knew better. But it made me the person I am, you know? I loves poetry, and I write poetry, I love to exercise and work out, I loves music and I love to dance. ... I love to sing. I tell people: Don't feel sorry for me because of what I had to go through. If anything, if you were to feel sorry for me, feel sorry for me if I didn't learn anything; because if I didn't learn anything, then you can feel sorry for somebody. Because you learn how to live life by your mistakes. And if you don't learn nothing, then you're not living life. ... I tell people if you ain't never struggled, you ain't never had a life. (Client participant # 15)

Similarly, I interviewed a middle-aged African American lady at a women's shelter who had been in prison almost her entire adult life (Client participant #22). This individual also has a criminal record for assault with a deadly weapon, which she

described as a self-defense situation. Although the stereotype is that the typical homeless person does not want to work, she was thrilled to be earning money legally for the first time in her life and expressed great satisfaction at that. She recently got a job as an inventory specialist and is now working full time and saving money for a car. She works extremely long hours for this company and rides her bike to work before dawn. She said:

You know, I got to go to work and come in at 4 [am]. And we got to get up at 7 [am; the shelter requires all clients to be up by 7 am], you know. And I be tired. Tonight, like, I got up at 3 [am], and I rode my bike to work. I got there at 4 o'clock this morning, and we made it over there at 5 [am]. And we just finished like at about 4 [pm] something. ... Tomorrow night at 7:30 [pm], we have an all-nighter in the Galleria. So that is why I have been trying to call my boss and ask him, like, can he put me on in the morning sometimes. Because I can't really do an all-nighter. Because if I go to work at 7 o'clock that night, we won't get back by 6 [am], and we got get up by 7 [am]. [Client participant # 22]

At the other end of the spectrum in terms of deprivation, I interviewed people living in their cars and on the streets in encampments. For example, for the two literally homeless participants that I spoke with, they were quite well spoken and both expressed the desire to work, although one at least explicitly referenced his alcoholism.

These literally homeless clients were very polite and even chivalrous. For example, I was interviewing one of the literal homeless clients (a middle aged, Caucasian male struggling with alcoholism) outside a local church in January (Client participant #10). It was cold outside; and when I expressed that I was cold, the client offered me his blanket for the duration of the interview.

The literally homeless clients shared stories that made me ashamed of the general population in my suburb for how these clients were treated. For example, one of the younger (aged 26) literally homeless clients (Caucasian, and homeless on and off since

he was 14 years old) shared that, while he was out panhandling one day, he was holding up a sign stating, “I used to be you.” A driver presumably took offense to that sign and spit at him while driving by.

All but two of the homeless or at-risk homeless clients that I interviewed in the study did not fit the typical perception of “homeless” (e.g., single Caucasian male panhandling streetside), most were minority, and many were parents. Furthermore, they were self-described as hard-working and almost all expressed that they were very eager to work. Both participating clients and service providers in this study would like to correct the erroneous perception that the typical homeless person today is an alcoholic panhandling at the side of the street (although two such clients were interviewed as a part of this study).

In general, through vignettes like these and through the assertions of both clients and service providers, this study reiterates the changing nature of homelessness demographically (Brown & Mueller, 2015; CRS; 2014; Crane & Takahashi, 1998; Culhane et al., 2013; Haber & Toro, 2004; Lee et al., 2010; Nunez & Fox, 1999; Rossi, 1989) and further supports literature asserting that many homeless clients desire to work (Lei, 2013; Long, Rio, & Rosen, 2007; Shaheen & Rio, 2007; Snow & Anderson, 1993). The secondary research shows that the picture of homelessness has changed over time, with more minorities and homeless families (often headed by single, female parents) today than the previous picture of the “skid row” single, Caucasian male (Brown & Mueller, 2015; CRS; 2014; Crane & Takahashi, 1998; Culhane et al., 2013; Haber & Toro, 2004; Lee et al., 2010; Nunez & Fox, 1999; Rossi, 1989).

4. There are a number of structural barriers to work for the Houston suburban homeless who participated in this study.

Service providers and clients in this study described persistent structural barriers often contributing to or exacerbating the problems of homelessness in the suburbs, including a lack of affordable housing and shelters in the suburbs, a lack of other social services in the suburbs, a lack of public transportation in the suburbs, and a lack of affordable childcare. For example, although there is an assistance ministry and a volunteer service provider organization in my own suburb, there is no shelter for homeless individuals in my suburb, and there is very little low-income housing. The executive director of one of the small suburban volunteer homeless outreach organizations said:

One of the biggest issues in [X] suburb is we do not have affordable housing. Even if you say it is affordable, it is not really affordable. Even our Section 8 housing, which has a big waiting list, is not really affordable for families who do not make a decent amount of money. The need is greater than the supply. ... There is Section 8 housing out here, but you still have to pay \$700 to live in a one-bedroom apartment, and that is supposed to be “affordable.” If we could get people in housing that would work with lower-income and would work with some of those issues [clients with past evictions and felonies], but we don’t have people in our suburb that work with high-risk situations. (Service provider participant # 13)

Service providers also reiterated the lack other social services in town, such as fewer Workforce Solutions offices and office hours that are not amenable to people working during the day.

Similarly, service providers reiterated the lack of public transportation in the suburbs. Clients and service providers alike provided multiple stories of clients having to

spend hours on circuitous bus routes (when available) to get to a job or an interview or a service provider, when the direct route (had it been available) would have taken them a fraction of the time. The executive director of a suburban shelter for women and children said:

A lot of times, to get two or three miles from here, you might have to go downtown to get back to a point that is not that far from here. You would be better off walking and would get there so much faster, just because the transportation system has some flaws in it, especially the further out that you get from the inner city. So we are talking about suburban homeless; that is one of the real disadvantages that we have out here is limited transportation. (Service provider participant # 17)

And multiple clients reiterated that they could not work or had difficulty working without transportation.

These structural barriers—lack of affordable housing, lack of other social services, lack of public transportation, and lack of affordable childcare—further exacerbate the individual barriers to work (lack of skills and education) of the Houston suburban homeless and at-risk homeless.

This research finding supports the secondary literature in this area, which likewise highlights the lack of infrastructure and social services to serve the homeless in the suburbs as compared to the urban city centers (Deam, n.d.; Kneebone & Berube, 2013; Lee et al., 2010; Tighe, 2013).

Findings: Current Workforce Skills.

1. While most Houston suburban homeless and at-risk homeless clients in this study had lower levels of skills and education, some were highly educated.

Two of 24 clients had bachelors degrees, and two had salaried positions (one with double degrees). The theoretical framework for this study was the human capital theory, which posits that human capital is a valuable asset (similar to other organizational assets, such as cash or machinery) and that training and education is considered an investment in people since it has the ability to make them productive in the workplace. Theoretically, this investment should lead to a return in the form of increased individual productivity and increased earnings with experience and years of work. For the most part, the study found this theory to be true, in that most of the homeless or at-risk homeless in the study have lower levels of skills and therefore also low levels of income or were struggling with unemployment or underemployment.

However, the study found that not all homeless studied have low levels of skills or education. Some (eight of the clients interviewed in this study had some college, and two have their Bachelors degrees) of the homeless clients in this study had higher degrees and skill levels. They may be homeless due to circumstances (such as divorce or a sickness resulting in heavy medical bills), bad choices, alcoholism or mental issues, or some combination of these items. For example, the program manager at one of the suburban shelters said:

I think what a lot people don't realize is: I think many families are one catastrophic illness away from homelessness or one major car wreck [away from homelessness]. A lot of people are finding, unfortunately, with all the changes to the health insurance that they are being caught short. (Service provider # 1)

Consider the example of the executive director of a local volunteer organization who cited that up to 25 percent of her clients are “rich poor” (e.g., service provider clients who typically work in white collar professions and do not qualify for social services due to owning an asset, such as a house). In addition, multiple service providers cited some clients with higher levels of education (e.g., teaching degrees, MBAs, JDs, and engineering degrees).

This finding illustrates that sometimes more highly educated individuals can become homeless; that suburban homelessness is a complicated phenomenon; and that there are many other factors that can play into the reasons why an individual is homeless (a life crisis coupled with a lack of savings/financial reserve and a lack of a family and friend support system; mental illness; mental health issues; substance abuse; etc.).

The wages earned by clients in this study were generally lower level (in the \$10 - \$12 per hour range), commensurate with their skills. It was the consensus of service providers and the desire of clients to be earning at least \$15 per \$18 per hour to move more toward a living wage and to be able to sustain themselves and be self-sufficient.

This finding is evidenced in the secondary literature; generally speaking, the extant research has found that the homeless are primarily employed in lower-wage jobs (Lei; 2013; Long et al., 2007; Rog et al., 1999; Snow & Anderson, 1993; Zuvekas & Hill, 2000). These jobs do not provide enough income to allow them to escape their homelessness. An employment services specialist at one of the participating employment services service providers said, “The lack of skills will set the stage for lower wages.

Any additional training will often times promote more [in wages].” (Service provider participant # 8)

2. The Houston suburban homeless or at-risk Homeless in this study had some specific skills aligned with the region.

The study found that, due to the presence of the industrial plants by the ports, many of the male homeless or at-risk homeless in suburban Houston participating in this study have forklift, warehousing and distribution, and industrial-type skills or certifications (e.g., forklift certifications and TWIC certifications). In addition, due to the proximity to the U.S. border, the study confirms that Houston has a significant minority of Hispanic undocumented homeless or at-risk homeless, and these persons tend to work in general labor, construction, housekeeping, and landscaping. Finally, due to the large local healthcare industry, the study found that many of the female homeless or at-risk homeless participating in this study either possessed or were working toward workforce skills and professions in healthcare, such as a certified nursing assistant.

The regional related skills of the Houston suburban homeless or at-risk homeless primary relate to employment with port-related organizations (such as chemical plants and manufacturing/industrial), the high prevalence of the healthcare industry in Houston, and the close proximity to Mexico.

This study confirms the literature finding that there are some workforce skills nuances by location/geography (Lee et al., 2010; Ferguson, Jun, Bender, Thompson, & Pollio, 2009) and extends body of knowledge to specify articulate what regional workforce skills Houston suburban homeless and at-risk homeless have.

3. The Houston suburban homeless and at-risk homeless in this study were willing and able to work.

Both the service providers and clients reiterated in this study that they felt that most of the suburban homeless or at-risk homeless were willing and able to work. This includes the chronically and literally homeless clients. Almost all clients interviewed in this study (with the exception of the one client waiting on disability) expressed a strong desire to work, even the two literally homeless clients. This contradicts the typical perception of the homeless as being comfortable living on public assistance and not working.

This finding was consistent with the literature, which also found that many homeless individuals desire to work (Lei, 2013; Long, Rio, & Rosen, 2007; Shaheen & Rio, 2007; Snow & Anderson, 1993), and even chronically homeless individuals and those with disabilities often can and want to work (Marrone, 2005; Rog & Holupka, 1998; Radey & Wilkins, 2011; Shaheen & Rio, 2007; SAMHSA, 2003; Theodore, 2000; Trutko et al., 1998).

Findings: Needed Workforce Skills.

1. The Houston suburban homeless and at-risk homeless in this study desire more on-the-job training opportunities and mentoring from employers.

Both service providers and clients in this study reiterated the desire for local employers to do more in training the homeless or at-risk homeless on the job. In addition, the study finds that, although many of the suburban homeless or at-risk homeless already have vocational training or certification, they are still homeless or at-

risk homeless seeking services of service providers. The study results highlight the need for a supply-and-demand analysis of the most in-demand types of vocational jobs in general and in Houston in particular, and for service providers and employment services agencies to provide more information to clients about these prospective careers and to route their interested clients to these types of jobs, where possible.

According to *USA Today* and The Greater Houston Partnership (2014), Houston is expected to add a significant number of middle-skill jobs in the near future, with many paying a living wage (Webster, 2014). So what are these jobs? According to vocational career research organization Real Work Matters, the top ten vocational careers in the United States include:

1. computer programmer,
2. licensed practical nurse (LPN),
3. respiratory therapist,
4. paralegal and legal secretary,
5. medical assistant,
6. radiology technologist,
7. graphic designer,
8. dental assistant,
9. pharmacy technician, and
10. massage therapist (Real Work Matters, n.d.).

USA Today cited research from Career Builder that the best paying middle-skills jobs in the United States are radiation therapists, elevator installers and repairers, and dental hygienists, all with a median wage of more than \$70,000 (Webster, 2014).

In Houston, some of the most in demand middle skills–type jobs outlined by *USA Today* include petroleum/petrochemical technicians, pipefitters, and electricians. Houston-based Lee College, for example, cites graduate technicians from its process technology program earning a starting base salary of \$62,000, plus overtime (Webster, 2014).

In terms of the types of job skills training the suburban homeless or at-risk homeless desire, specifically, they desire on-the-job training, internships, and apprenticeships from local employers in vocational or trade-type careers. This study points out the need for these vocational or trade-type careers to be more closely aligned to the high demand for middle wage jobs in Houston.

The secondary literature found that one of the top needs of the homeless in Houston is for job skills training (Fleming, 2011; Troisi et al., 2012), and this study extends the research in this area by articulating in more detail the specific type of job training that Houston suburban homeless clients desire and need in order to attain living wage jobs.

2. Houston suburban homeless or at-risk homeless in this study need to combine workforce skills development programs with soft skills and life skills training, such as financial coaching and budgeting.

As discussed in Chapter 4, Results, many of the reasons for homelessness generally speaking in this study had to do with financial reasons, precipitated by some kind of crisis that clients did not have the financial reserves to weather. In addition, as discussed in Chapter 1, Background and Introduction, transitional or temporary homeless is the most common type of homelessness. Admittedly, while clients are struggling making ends meet on low hourly incomes due to low skills and education levels, it is very difficult for them to save for a rainy day. However, once their education and skills levels are raised, and their incomes correspondingly increase, they will need to be taught the discipline and value of saving for living expenses in the event of a temporary crisis. Several service providers currently offer budgeting or financial life skills classes, but not all. Service providers expressed the importance of teaching clients the discipline and science of managing their budgets once they have disposable income.

While there are many personal finance gurus and books that discuss the importance and guidelines for personal savings, this study focuses on viewing this issue through a human capital development lens. Here is what one of the great authors and consultants in organization development (a subset of human capital management), and his co-author, have to say about one of the characteristics of highly performing companies that they studied for a recent best-selling book:

10exers [e.g., highly performing companies] remain productively paranoid in good times, recognizing that it's what you do before the storm comes that matters most. Since it's impossible to consistently predict specific disruptive events, they systematically build buffers and shock absorbers for dealing with unexpected events. They put in place their extra oxygen canisters long before they're hit with a storm. (Collins & Hanson, 2011)

The same guideline applies to individuals: it is almost a certainty that is not a matter of “if” a crisis will come in your life, but “when.” Long-term success of homeless and at-risk homeless is facilitated when they are provided the life skills to continue into self-sufficiency in the future, including how to better manage their finances once their incomes increase so that they avoid temporary or transitional homelessness when a crisis hits.

**Building on a Theory of Human Capital for the Houston Suburban Homeless and
At-Risk Homeless**

The discussion in this Chapter and in the previous Chapter (Results) leads to the enhanced human capital theory for the Houston suburban homeless and at-risk homeless, depicted in Figure 5.



Figure 5. Enhanced human capital theory for the Houston suburban homeless.

The additional elements listed in Figure 5 are primarily the two boxes in the middle, listing the additional types of non-structural and structural investment illustrated from this study's results and findings that are needed by the Houston suburban homeless and at-risk homeless to attain living wage jobs and self-sustain.

Recommendations: Potential Workforce Programs

The following discussion builds on the enhanced human capital theory for the Houston suburban homeless and at-risk homeless and outlines recommendations of potential workforce skills-related initiatives or programs generated by the data for service providers to the Houston suburban homeless, as well as the Coalition for the Homeless of Houston/Harris County, DARS, and Workforce Solutions.

Recommendations for Service Providers to the Houston Suburban Homeless

One the primary audiences that I hoped would benefit from this study, in addition to the clients, is the service providers to the Houston suburban homeless. Generally, I found in this study that the Houston suburban homeless service providers are doing a fantastic job by offering a wealth of services to clients. (This was confirmed by clients, as Chapter 4, Results, shows.) Some additional recommendations follow for service providers to the Houston suburban homeless in order to help them refine their work training/placement programs for living-wage jobs.

1. Encourage applicable clients to secure a GED and computer training.

Both clients and service providers acknowledged the general link in this study among education, skills, and employment (in support of human capital theory, with the exception of the small percentage of homeless that have higher levels of education,

discussed earlier). Service providers expressed that a high school diploma or equivalency, along with basic computer skills, are the bare minimum of workforce skills needed to compete in today's marketplace. With regards to computer skills, even if a client's job doesn't require his or her daily interaction on the computer, the attainment of basic computer skills would still be helpful for clients to apply for employment, as many job applications (even at local warehousing and distribution organizations) are online. With respect to GED programs, many service providers provide funding for such programs, and several have computer labs and computer training resources. One service provider organization requires any client without a high school diploma or GED to secure one as part of the program. Service providers should investigate ways to incentivize their clients to achieve these basic minimum skills and education levels if they do not have them already.

There are two ways to encourage clients: the carrot (positive reinforcement) and the stick (negative reinforcement). I recommend experimenting first with positive reinforcement; in other words, I suggest offering additional incentives or benefits for clients who achieve their GED and basic computer skills as part of the program. For example, provided this is permissible in the structure of the grant, clients who achieve their GED and basic computer skills as part of the program could be offered an extra month of extended stay at the shelter, and/or additional shelter benefits/services (such as not having to volunteer or do chore services). Alternatively, build these two requirements as part of program participation. Of course, service providers have to avoid discrimination and have to work within the requirements of their grants; however,

specifically within the ideas of positive reinforcement, there must be some creative incentive structures to encourage all clients to achieve these baseline education and skills that both service providers and clients widely acknowledge in this study as necessary prerequisites to a living-wage job.

2. Provide information and resources to clients on potential living wage career paths.

Specifically (and especially for those service providers offering employment services), educate clients on different in-demand vocational careers, expected wages, the education/skills required, potential sources of funding for any needed training or certification, and potential employers in the Houston area. This concept comes from the human resources development realm of career pathing within organizations, whereby leading organizations in this area create career paths for different careers in their company that outline the education, experiences, and skills needed to achieve ever more successful levels within the company. Whereas this study found that clients would like additional vocational training, internships, and apprenticeships, it is important to direct the clients where possible to the vocational careers and jobs that lead to living wages and not to vocational jobs that keep them mired in the same situation. (Although the latter types of jobs might be a good start in establishing a steady employment record).

Although the prospect of going from low levels of skills and education to the requirements of some of these in-demand vocational jobs may initial seem daunting, it will be made less so if there are outlined career paths that show clients specifically which vocational jobs in Houston are in the most demand (and pay living wage), what

specific educational requirements are required to get there, what potential schools or programs they would need to attend to achieve those skills or certifications, what potential funding sources exist for those programs, and finally, who Houston employers are hiring in these fields. Workforce Solutions has already compiled much of this data (see the PDF of “high skill, high-growth occupations” at <http://www.wrksolutions.com/for-individuals/training-and-education>), so it is more a matter of making clients aware of it. This information could help clients think more broadly about a wider list of career options than they had perhaps considered before (from their family examples or limitations they perceived due to their gender, perhaps).

Furthermore, because clients desire motivation and encouragement, service providers could regularly bring back successful clients to share their testimonials and provide encouragement to clients. One service provider does this in her monthly community breakfasts and Bible studies; she said it provides a powerful message of hope to other clients that change is possible.

3. Offer internships and on-the-job training by service providers to clients.

Service providers and clients repeatedly mentioned the need for more internship opportunities and on-the-job training, particularly for clients with gaps in employment or little work experience—such as women who were not the primary breadwinner in their previous relationships, or clients with felonies—to help clients get back on their feet. Several service providers in this study offer paid internships at their own agencies to help provide some initial or additional experience-building and employment opportunities to clients. For example, one agency recently introduced a retail and

customer service internship, and another offers paid employment to clients in culinary and reception, once they meet the volunteer hourly requirements to stay at the shelter. These types of programs help clients get their feet wet in the world of work and receive some valued experience, practice, and confidence building.

4. Partner with local employers to offer trial internships and apprenticeships to the homeless.

Multiple service providers and clients in the study expressed a desire for employers to “give the homeless a chance,” and yet service providers acknowledged that this may require a paradigm shift on behalf of the business hiring representatives, and may involve some risk to them as well. At least one service provider described a successful program whereby the risk of employing the homeless (in this case, individuals with past criminal backgrounds) was actually shared between the service provider and the employer for a trial period of time (90 days). During the trial period, the service provider paid the wages of the homeless individual, and the employer provided the work and the on-the-job training. If, at the end of the trial period, the employer liked the work of the employee, then the employee would be retained and the employer would take over responsibility for the wages and benefits. This type of program represents a great way to accomplish multiple benefits simultaneously: it gets the homeless client working and some training and on-the-job experience; it gets the employer the opportunity to know and trust the prospective employee and serves as a potential sourcing channel for valued talent; and the risk of this relationship is shared between the service provider and the

employer. More service providers should outreach to their local employers and try to build such programs together in the areas where employers most need skilled workers.

5. Have service provider leaders participate in local business professional associations.

Specifically, have service provider leaders become involved with the Greater Houston Partnership, the Houston Better Business Bureau, and/or other Houston business associations for a two-way flow of information. Although service provider leaders are busy in the daily operations of managing the organization and fund-raising, it is also important to build relationships and have a voice with the local business interests of Houston. Such leaders can educate Houston businesses on their agencies and their clients and help correct misperceptions that the business world may have regarding homelessness in Houston. Several such important organizations representing Houston businesses include the Greater Houston Partnership and the Houston Better Business Bureau. Service providers also should familiarize themselves and join the Greater Houston Partnership's Upskill Houston initiative. According to the Web site, this initiative is:

the nation's first business-led, community-wide, integrated workforce effort. The initiative focuses on closing the skills gap in Houston by increasing the number of Houstonians trained for great careers across the region. The Partnership forecasts nearly 75,000 annual jobs openings in these "middle skills" careers that require more than a high school education but less than a four-year college degree. (Greater Houston Partnership, n.d.)

In interviews with service providers, only one service provider indicated familiarity with this initiative. The Web site indicates that Houston is seeking "middle

skills” workers in professions such as oil and gas, manufacturing, petrochemical, healthcare, commercial and industrial, ports and maritime, and utilities. The service providers certainly have a pool of prospective employees; the question is how to better integrate with this initiative to connect the demand and supply and to get the no- or low-income employees linked with the education and training that they need to qualify for these jobs.

6. Leverage funding in shelters and/or transitional living facilities for shared transportation.

Specifically, leverage funding to purchase some shared, used transportation options or vans for carpools to help transport clients to and from job interviews. One of the biggest barriers that homeless clients mentioned to employment was a lack of transportation and the insufficiency of public transportation. In the interviews, only one service provider had plans to deal with this issue (other than providing bus passes to eligible clients); this service provider has plans to hire a driver to help shuttle clients to and from work and interviews. Service providers, shelters in particular, should consider whether or not any of their funds can be used to purchase cars or vans that can be used as shared resources for clients to leverage for job interviews and to help them more easily access social services at other agencies (similar to vanpools or what local car dealerships offer to clients while their cars in the shop). Shelters could consider more outreach to local mechanics and car dealerships for donation services, or perhaps approaching services like Uber for set group rates. Shelters can actually purchase their own vehicles

at auctions and at a minimum should sign up as beneficiaries of charity programs such are available at the Houston Auto Auction site.

Recommendations Regarding the Continuum of Care and the Coalition for the Homeless of Houston/Harris County

I also asked service providers in this study about the role of Continuum of Care and any suggestions that they have for this. The Houston Continuum of Care is the network of Houston homeless service providers, and is lead in its HUD funding application by the Coalition for the Homeless of Houston/Harris County. For purposes of this study, I assume that the Coalition of the Homeless of Houston/Harris County is the best representative of the Continuum of Care of services for Houston and its surrounding suburbs.

1. Create a broad communication campaign about the true face and statistics of homelessness in Houston.

One of the desires expressed by both service providers and clients participating in this study is for a broader educational campaign to educate the public and employers about the true face of homelessness in society and in Houston in particular. It is the perception of service providers and clients that employers and the public have misconceptions and biases about what homelessness really entails in Houston. To the extent that the Coalition could assist in a broader marketing and educational and outreach campaign to correct this misperception would be helpful.

Similarly, several of the clients interviewed came across their service providers by happenstance, perhaps indicating the need in the local community for more education

of the public and prospective clients regarding the locations of and resources available at existing service provider organizations.

In addition, the “help card” (a list of predominantly urban resources for the homeless) did not include many of the participants in this study, such as the assistance ministries, one of the shelters, the suburban volunteer service providers, and the employment services organizations. Perhaps the reason for this omission is because some of these service providers serve low or under-resourced clients beyond just homeless clients. It would be helpful to update the “help card” with a broader list of community resources, particularly in the suburbs, for low-income and under-resourced individuals. The Coalition for the Homeless of Houston/Harris County (the publisher of the Help Card), could also consider reformatting this card in the form of a map outlining where service providers are in the city. For an example of this resources map concept, please visit <http://www.uregina.ca/education/assets/docs/pdf/faculty-staff/Regina-Survival-Guide-and-Map-v5.pdf>.

2. Lobby for more social services in the suburbs.

Both service providers and clients reiterated in this study the need for additional resources for the homeless and at-risk homeless in the suburbs, particularly for more public transportation, more social services, more shelters, more affordable housing, and more affordable childcare options. Coalition facilitation would be helpful.

3. Work on more programs to increase the skill set of the homeless.

Service providers indicated that they would like to see the Continuum of Care, in addition to its work securing low-income housing, play a more active role in increasing

work skills and employment of the homeless. The executive director of one of small volunteer homeless outreach organizations said:

But most coalitions don't view themselves as skill developers for people. They are passing the dollars to the agencies to do that, but the agencies are not doing that either. They are not training, teaching, [or] educating. They are helping people. They are using the money for operations, which may include some of that. But as a rule, it doesn't. Most of the Continuum of Care money has to go for housing; [it] has to go for transitional housing, not emergency housing. And so it doesn't filter down to helping you and me as individuals become more skilled to get a job. And I hope I am wrong but that is what I see. (Service provider # 5)

The new "Income Now" initiative is an effort that facilitates employment for homeless households assessed through the new Coordinated Access System, a new delivery system to help more quickly and efficiently end homelessness for individuals and families (Coalition for the Homeless of Houston/Harris County, 2016). Although some of these recommendations may be addressed by the new Income Now and Coordinated Access initiatives, the service providers I interviewed didn't have a strong awareness of these new initiatives (possibly because they were too new at the time of interview), which perhaps indicates a need for more promotion by the Coalition about these new programs.

4. Convene a community of practice of service providers to share strategies, best practices, and lessons learned.

The concept of communities of practice comes from the realm of knowledge management and organizational development. Service providers and their clients alike could benefit from regular exchanges across entities of best practices and lessons learned in the community to help bring everyone up to the next level. The Coalition is in the best

position to lead a cross-agency/service provider community of practice. Although the assistance ministries have an association just for assistance ministries, I recommend the community of practice include all service providers (assistance ministries, shelters, transitional living programs, and other service providers) and interested community participants. This provides the opportunity to participate and to regularly meet and share lessons learned. The community of practice could also operate virtually and be supported by enabling technology, such as a group or project site.

Recommendation for DARS

I also asked service providers and clients about their experience with DARS, which is the Texas Department of Assistive and Rehabilitative Services. Although many had not much interaction with DARS, the following recommendation was clear among those who did.

1. Provide more frequent communication of the status of program admission or services eligibility to prospective clients.

Those service providers and clients who did have experience with DARs all indicated that this organization has a great opportunity for improvement in its reducing turnaround times, administrative paperwork levels, and increasing transparency and frequency of communication. The same holds true for the housing authorities in terms of their waiting lists and the status of clients in receiving public assistance for housing. Frequently, the clients that I interviewed indicated a complicated, burdensome process to deal with either DARs or public assistance housing, and they were often kept in the dark

regarding their status. Clients desire streamlined paperwork and more frequent communication (for both DARS and public assistance housing providers).

Recommendation for Workforce Solutions

1. Revisit the incentive compensation structure to facilitate quality interactions versus productivity numbers.

Both service providers and many clients indicated a desire for Workforce Solutions to provide more quality interactions and individualized attention and coaching to the homeless. Service providers indicated that the homeless need the extra attention and obviously face additional barriers than the general unemployed public. The executive director at one of the shelters for women and their children said:

Their [Workforce Solutions] primary focus tends to be on people who have an easier time getting employed. So obviously most of the homeless don't fall into that category. People with more challenges kind of fall through the cracks and don't do as well in their system. They get rewarded based on the numbers that they are able to get employed. So if you had a choice to work with this person who has a lot of things to overcome versus somebody else who is probably going to have an easier time getting employed, you are going to pick and choose who you're going to want to help. (Service provider # 17)

The executive director of one of the small volunteer homeless outreach organizations said regarding Workforce Solutions:

I think the Gulf Coast organization is excellent. I believe they address the jobs for other than homeless people very well. [But] I don't think they fathom the depth of dysfunction with the homeless people. Dysfunction includes: "I don't have a car, I don't have a computer, I don't have a cell phone, [and] I don't have a regular place to live." I don't think they grasp that in the Workforce Solutions program. (Service provider # 5)

Although the new Income Now Initiative provides more dedicated employment assistance for the homeless, service providers in particular indicated an opportunity to restructure the incentive structure for agents from one of productivity (e.g., throughput) to one of quality. Or if this is not feasible, then the leaders of Workforce Solutions could consider implementing a balanced scorecard of performance measures for agents that considers not only throughput/productivity but also satisfaction and other quality measures.

Limitations

As discussed in Chapter 1, “Limitations of the Study,” and Chapter 3, “Limitations of Research Design,” this study is a qualitative, naturalistic study. The research is not generalizable beyond the bounded scope of the study. It was my job as the researcher to provide enough detailed description in the write up to allow the reader to come to his or her own conclusion as to how similar this study’s context is in relationship to other contexts that the reader might be interested in applying the study findings to.

This study did not include domestic violence shelters or service provider organizations that focused on a particular population (such as Houston suburban homeless with mental or physical disabilities or Houston suburban homeless with alcohol or substance abuse issues).

Furthermore, the client participants included in this study are likely a higher functioning population than the homeless population generally speaking. For example, the shelters included in this study conduct routine, random drug and alcohol tests to

ensure that their clients are following the rules of the shelter and are sober. As part of its intake process, the transitional living facility screens for highly motivated clients who are interested in going back to school and/or changing their lives for the better. And, it is also possible that, since they were all volunteer participants, the clients who participated in this study are generally those clients who are interested in working, as they self-selected to participate in a study on a topic of homelessness and workforce development.

Suggestions for Future Research

In terms of future academic research, the participants in this study are predominantly transitional, temporary, or at-risk homeless. Only three of the study participants are chronically homeless, two of them literally (living on the streets). Two of the three deal with substance abuse issues as a confounding factor of their homelessness. It is my opinion that there is a need for more practical, applied research on such subjects to find out how to treat their underlying issues and help restore these people's lives.

In addition, Houston suburban homeless and at-risk homeless clients and their service providers could benefit from action research on this topic. Action research is participatory/experiential and reflective research geared to solving practical problems in organizations or communities (Argyris & Schon, 1991; Coghlan, 2016). A suggested action research scheme could involve convening together all key stakeholders (such as the Coalition for the Homeless of Houston/Harris County, assistance ministries, volunteer service providers, transitional living facilities, community leaders, and local business professional associations), beginning with a technique such as Future Search

(Weisbord & Janoff, 2012) or Open Space Technology (Owen, 2008), to come together and address the issue and brainstorm ideas and test solutions.

Finally, it would be very interesting and insightful to explore the topic of homelessness and workforce development in the suburbs and/or homelessness and workforce development more generally speaking using the lens of social capital theory (as opposed to human capital theory). This study emphasized the desire of the homeless and at-risk homeless clients in this study for network-building and mentoring with others more established in the business world in order to help them connect with the job, skills, and development opportunities that they need to obtain living wage jobs. Similarly, social capital theory recognizes the importance of social networks and relationships to help individuals obtain better outcomes (Lin, 1999). Future researchers could examine and conduct a meta-analysis of the body of existing research on suburban homelessness and workforce development and/or homelessness more generally and workforce development in order to further explore build upon social capital theory, specifically the role of your networks and connections in terms of finding living wage employment opportunities, development opportunities, and access to needed services.

Concluding Remarks

This research has focused on the workforce skills development needs and gaps of the Houston suburban homeless. Ultimately, an investment in our city's human capital will help restore lives not only at an individual level, but result in positive societal benefits (non-monetary, including an increase in productivity and wages, as well as non-monetary, such as an increase in health outcomes and a more civic society) as articulated

in human capital theory. The practical recommendations articulated above for service providers, the Coalition for the Homeless of Houston/Harris County, DARS, and Workforce Solutions in this chapter are grounded in the data collection. It is my sincere hope that these recommendations will help to contribute to the body of knowledge about suburban homelessness and workforce development, but even more importantly result in better employment and wage outcomes for the homeless, at-risk homeless, and under-resourced and help make ours a stronger Houston community.

On a personal level, I found conducting this study very rewarding in terms of the service provider and client participants who I met, who were extremely generous with their time, their information, and their advice. Service providers are the ones on the front lines of homelessness, and it is comforting to know that there are a wealth of services (some supported with public funds and others not) available to the homeless and at-risk homeless in our city. And the clients were very gracious and wise, even if some of them were plain-spoken. I know that for the clients at least at one service provider organization, they are hoping for practical results from this study: in other words, how can this study help them to get a job? As much as I would like to, I don't know that I can promise that outcome as a result of the publication of this study, but what I can say is that I now have a much greater awareness of the service providers and the need in my own hometown suburb, and can direct my own volunteer resources accordingly. I encourage others reading this study to do the same and I hope that this study has shed more light on the challenges and potential solutions to help alleviate this issue of Houston suburban homelessness. Learn about the suburban service providers in your

own local area of residence, and get involved in some form or fashion. And if you are one of the angels walking on this earth who are already involved, I thank you and I want you to know that the clients I interviewed expressed great appreciation of all that you do in the community.

Implications for the Future

Ultimately, if we are to be serious about resolving the issue of suburban homelessness in Houston (and not just “talk about it,” as paraphrased from the remarks of Service provider participant #20, the executive director of a volunteer homeless outreach and services organization), we need to invest in the individual and structural enablers outlined in Figure 5 (enhanced human capital theory for the Houston suburban homeless and at-risk homeless). The bottom line is that there is a potential pool of employees for these in-demand middle skills jobs that Houston employers are forecasting that they need, but these clients need additional investment and support, such as:

1. Information from the employment agencies and service providers on the most-in demand vocational jobs in Houston, and associated career paths;
2. Financial support from the service providers and employers to obtain the basic scholastic levels (GEDs and computer training, if they don’t have this already) and to take advantage of the vocational training and certificate programs leading to these in-demand jobs;

3. Prospective employers to look past their housing or criminal background status and give them a chance through trial internships and apprenticeships programs; and
4. A level of on-the-job training to help get them up to speed.

Employers should consider investment in such employees in middle skills jobs as an asset with an anticipated return, just like machinery and other types of capital requires an initial investment in order to generate a return.

Additionally, from a structural level, we need to invest in enablers such as more affordable housing in the suburbs, more public transportation options in the suburbs, and more affordable child care options to help mitigate the issue of Houston suburban homelessness and get clients to work in living wage jobs. It is heartening to know that progress is being made regarding at least some of these issues with the new Income Now and Coordinated Access initiatives, and I encourage city leaders to expand upon this good work to help ours continue to be one of the best cities to live in the country and one which values and invests in its human capital of all types.

Chapter Summary

This chapter reviews data and information that emerged from the study, confirming some findings from existing secondary research and adding to the body of knowledge for this topic on Houston suburban homelessness and workforce skills development. This study reiterates similar themes in the existing literature about homelessness generally, such as the reasons for homelessness, the hidden nature of

homelessness, the changing nature of homelessness and new face of homelessness in the suburbs, and the persistence of structural barriers to work for the suburban homeless.

The study adds to the body of knowledge in terms of what specific workforce skills that suburban homeless in Houston possess (healthcare, industrial and manufacturing, and general labor/construction/landscaping) due to location and also provides more information about what types of specific jobs skills training the Houston suburban homeless desire (i.e., internships, apprenticeships, and on-the-job training in high-demand vocational skills) and need (route them toward the most in-demand vocational career paths in Houston), and suggests additional types of human capital investment needed by many Houston suburban homeless and at-risk homeless (building on the framework of human capital theory) to help them achieve living wage jobs.

In summary, this study was a qualitative, naturalistic inquiry study about the workforce skills and skills development needs of the Houston suburban homeless. The contribution of this study was to fill a gap in the research by examining homelessness in the Houston suburbs and from a human resource development lens. Through interviews with 25 representatives from 13 different service provider organizations throughout a cross-section of Houston suburbs and with 24 clients from seven of these service provider organizations, I explored the current workforce skills, workforce skills gaps, and potential workforce development programs to help clients achieve living wage employment. I examined the data through the lens of human resource development, and specifically human capital theory.

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APPENDIX A: CLIENT CONSENT FORM

Project title: “Understanding the Workforce Skills and Development Needs of the Houston Suburban Homeless”

You are invited to take part in a research study being conducted by Rachele Williams, a Ph.D. student at Texas A&M University. The information in this form is provided to help you decide whether or not to take part. If you decide to take part in the study, you will be asked to sign this consent form. If you decide you do not want to participate, there will be no penalty to you, and you will not lose any benefits you normally would have. The purpose of this study is to establish the perceptions of key staff members working for Houston suburban homeless service provider organizations and of a diverse mix of their homeless clients regarding the clients’ current workforce skills, workforce skills development needs, and potential workforce skills development programs and interventions that might assist clients to achieve living wage employment. You are being asked to be in this study because you meet the criteria for participation in this study: Suburban Houston homeless service provider client, adult.

How many people will be asked to be in this study?

The researcher would like to interview a diverse group of participants per participating service provider organization. The researcher would like to interview a minimum of 15 client participants total (across different service provider organizations).

What are the alternatives to being in this study?

The alternative to being in the study is not to participate.

What will I be asked to do in this study?

You will be asked to participate in an interview with the researcher. Your participation in this study will last about one hour. The researcher prefers to conduct the interview face-to-face. The things that you will be doing are no greater than risks than you would come across in everyday life. The researcher will keep the data in a secure place to avoid any breaches of privacy or confidentiality. You do not have to answer any question you do not want to. Aside from your time, there are no costs for taking part in the study. Each interviewee will be given an appropriate incentive (a \$15 gift card) for completed interviews.

Audio Recordings

With your permission, the researcher would like to record the conversation in order to be sure she captures the key points of the conversation accurately. Audio recording of the interview is not required. By initialing the first line below, please indicate your willingness to have the interview audio recorded:

_____(Initials) I give my permission for audio recordings to be made of me during my participation in this research study.

_____(Initials) I do not give my permission for audio recordings to be made of me during my participation in this research study.

Will information from this study be kept private?

The records of this study will be kept private. No identifiers linking you to this study will be included in any sort of report that might be published. Research records will be stored securely and only Rachele Williams and her dissertation committee chair, Dr. Frederick Nafukho, of Texas A&M University will have access to the records. Electronic information about you will be stored in computer files protected with a password. This consent form will be filed securely in an official area at the completion of the study. People who have access to your information include the principal investigators (Rachele Williams and her dissertation committee chair, Dr. Frederick Nafukho). Representatives of regulatory agencies such as the Office of Human Research Protections (OHRP) and entities such as the Texas A&M University Human Subjects Protection Program may access your records to make sure the study is being run correctly and that information is collected properly. Information about you and related to this study will be kept confidential to the extent permitted or required by law.

Who may I contact for more information?

You may contact the Principal Investigator, Rachele Williams, in the EHRD Ph.D. program, to tell her about a concern or complaint about this research at 281-797-8554 or rachele_williams@yahoo.com. For questions about your rights as a research participant, to provide input regarding the research, or if you have questions, complaints, or concerns about the research, you may call the Texas A&M University Human Research Protection Program office by phone at (979) 458-4067, toll free at 1-855-795-8636, or by e-mail at irb@tamu.edu.

What if I change my mind about participating?

This research is voluntary and you have the choice whether or not to be in this research study. You may decide to not begin or to stop participating at any time. If you choose not to be in this study or stop being in the study, there will be no consequence to you.

STATEMENT OF CONSENT

I agree to be in this study and know that I am not giving up any legal rights by signing this form. The procedures, risks, and benefits have been explained to me, and my questions have been answered. I know that new information about this research study will be provided to me as it becomes available and that the researcher will tell me if I must be removed from the study. I can ask more questions if I want. A copy of this entire consent form will be given to me.

Participant's Signature

Date

Printed Name

Date

APPENDIX B: SERVICE PROVIDER CONSENT FORM

Project title: “Understanding the Workforce Skills and Development Needs of the Houston Suburban Homeless”

You are invited to take part in a research study being conducted by Rachele Williams, a Ph.D. student at Texas A&M University. The information in this form is provided to help you decide whether or not to take part. If you decide to take part in the study, you will be asked to sign this consent form. If you decide you do not want to participate, there will be no penalty to you, and you will not lose any benefits you normally would have. The purpose of this study is to establish the perceptions of key staff members working for Houston suburban homeless service provider organizations and of a diverse mix of their homeless clients regarding the clients’ current workforce skills, workforce skills development needs, and potential workforce skills development programs and interventions that might assist clients to achieve living wage employment. You are being asked to be in this study because you meet the criteria for participation in this study: suburban (non-inner city) Houston homeless service provider, adult.

How many people will be asked to be in this study?

The researcher is contacting Houston suburban homeless service providers to participate. She would like a minimum of three such service providers to participate in this study.

What are the alternatives to being in this study?

The alternative to being in the study is not to participate.

What will I be asked to do in this study?

You will be asked to participate in an interview with the researcher. Your participation in this study will last about one hour. The researcher prefers to conduct the interview face-to-face if possible. The things that you will be doing are no greater than risks than you would come across in everyday life. The researcher will keep the data in a secure place to avoid any breaches of privacy or confidentiality. You do not have to answer any question you do not want to. Aside from your time, there are no costs for taking part in the study. Each service provider will be given an appropriate incentive (a minimum of \$25 in value) for completed interviews.

Audio Recordings

With your permission, the researcher would like to record the conversation in order to be sure she captures the key points of the conversation accurately. Audio recordings will not be shared by the researcher with anyone else. Audio recording of the interview is not required. By initialing the first line below, please indicate your willingness to have the interview audio recorded:

_____(Initials) I give my permission for audio recordings to be made of me during my participation in this research study.

_____(Initials) I do not give my permission for audio recordings to be made of me during my participation in this research study.

Will information from this study be kept private?

The records of this study will be kept private. No identifiers linking you to this study will be included in any sort of report that might be published. Research records will be stored securely and only Rachele Williams and her dissertation committee chair, Dr. Frederick Nafukho, of Texas A&M University will have access to the records. Electronic information about you will be stored in computer files protected with a password. This consent form will be filed securely in an official area at the completion of the study. People who have access to your information include the principal investigators (Rachele Williams and her dissertation committee chair, Dr. Frederick Nafukho). Representatives of regulatory agencies such as the Office of Human Research Protections (OHRP) and entities such as the Texas A&M University Human Subjects Protection Program may access your records to make sure the study is being run correctly and that information is collected properly. Information about you and related to this study will be kept confidential to the extent permitted or required by law.

Who may I contact for more information?

You may contact the Principal Investigator, Rachele Williams, in the EHRD Ph.D. program, to tell her about a concern or complaint about this research at 281-797-8554 or rachele_williams@yahoo.com. For questions about your rights as a research participant, to provide input regarding the research, or if you have questions, complaints, or concerns about the research, you may call the Texas A&M University Human Research Protection Program office by phone at (979) 458-4067, toll free at 1-855-795-8636, or by e-mail at irb@tamu.edu.

What if I change my mind about participating?

This research is voluntary and you have the choice whether or not to be in this research study. You may decide to not begin or to stop participating at any time. If you choose not to be in this study or stop being in the study, there will be no consequence to you.

STATEMENT OF CONSENT

I agree to be in this study and know that I am not giving up any legal rights by signing this form. The procedures, risks, and benefits have been explained to me, and my questions have been answered. I know that new information about this research study will be provided to me as it becomes available and that the researcher will tell me if I must be removed from the study. I can ask more questions if I want. A copy of this entire consent form will be given to me.

Participant's Signature

Date

Printed Name

Date

APPENDIX C: CLIENT INTERVIEW GUIDE

Study Overview

The purpose of this study is to establish the perceptions of key staff members working for Houston suburban homeless service provider organizations and of a diverse mix of their homeless clients regarding the clients' current workforce skills, workforce skills development needs, and potential workforce skills development programs and interventions that might assist clients to achieve living wage employment. The interviewer would like to interview a diverse set of homeless clients (by age, gender, length of homelessness, etc.) at each selected service provider organization, where applicable. Each interview is anticipated to take approximately one hour. The interviewer will offer an appropriate incentive to each participant at the conclusion of the interview for completed interviews. All data provided by each interviewee will be kept confidential according to the provisions of Texas A&M University's Institutional Review Board; no interviewee data will be associated with him/her without prior permission. Each interviewee will be asked to sign a consent form to be interviewed. After all interviews are completed, the data provided by the interviewees will be analyzed and key findings generated to write a final dissertation report (blinded) at the conclusion of the study. The dissertation report is part of the interviewer's requirements for graduation at Texas A&M University with an advanced degree (Ph.D.) in human resource development.

Site

location: _____

Date: _____ Time: _____

First

name: _____

Age: _____

Gender: _____

Race/Ethnicity: _____

Background

1. Please tell me a little bit about yourself, your background, and your housing situation.	
2. How did you hear about this service provider organization, and how long have you	

been a client of the organization?	
3. What are the reason(s) why you are currently homeless (e.g., without a safe, stable place to sleep at night)?	
4. What are some of the barriers for you to find affordable permanent housing?	
5. How long have you been homeless currently, and in total over your lifetime?	

Current Workforce Skills

6. Approximately how many total years of work experience do you have? (RQ2)	
7. Are you working now? What type of work do you currently do/did do, and what skills do you use in your work currently (or did you use)? (<i>Note: this could include volunteering.</i>) (RQ2)	
8. How did you develop the workforce skills that you currently have? (RQ2)	
9. What are your top three skills that make you a desirable employee? (<i>Note: this could include volunteering.</i>) (RQ2)	

<p>10. How much education have you had (e.g., less than high school, high school graduate, vocational training, certifications, some college, college graduate, some graduate school)? (RQ2)</p>	
<p>11. (If applicable.) What are the barriers to you no longer working now? (RQ2)</p>	
<p>12. (If applicable.) What are the barriers to you working full time? (RQ2)</p>	
<p>13. (If applicable.) Would you like to have a job now? If so, why so? If not, why not? (RQ2)</p>	

Needed Workforce Skills

<p>14. What do you think are the top three most needed skills in today's job market? (RQ4)</p>	
<p>15. What type of job/work would you like to do? (RQ4)</p>	
<p>16. What kind of work skills assistance and/or training would you need to do and keep this kind of job/work? (RQ4)</p>	
<p>17. What other types of support would you find helpful to get</p>	

and keep this kind of job/work? (RQ4)	
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Potential Workforce Programs

18. If using current workforce skills programs offered by service providers, what are you using? What do you like most/least about them? (RQ6)	
19. Have you ever been a DARS (Department of Assistance and Rehabilitative Services) client? If yes, can you describe your experience and what you received? (RQ6)	
20. Have you ever received services from a Workforce Solutions office? If yes, can you describe your experience and what you received? (RQ6)	
21. What other types of workforce skills programs would you like to see offered by service providers, the community, and/or the government, and why? (RQ6)	
22. Are there any other suburban service providers that you	

recommend we speak with as part of this data collection effort?	
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Closing Comments

Thank you for your participation in this important research. As a reminder, the data that you have shared with the interviewer will remain confidential, and the intent of the study is to provide (blinded) summary data to service provider and community organizations and leaders to help get more Houston suburban homeless individuals who want to work back to work in living wage jobs and help reduce Houston suburban homelessness. *(Note to interviewer: Provide interviewee with his/her promised incentive for completing the interview.)*

APPENDIX D: SERVICE PROVIDER INTERVIEW GUIDE

Study Overview

The purpose of this study is to establish the perceptions of key staff members working for Houston suburban homeless service provider organizations and of a diverse mix of their homeless clients regarding the clients' current workforce skills, workforce skills development needs, and potential workforce skills development programs and interventions that might assist clients to achieve living wage employment. The interviewer would like to interview the executive director/director (or similar) of the service provider organization and other staff (such as case managers) who can best answer the following questions. Each interview is anticipated to take approximately one hour. The interviewer will offer an appropriate incentive/donation to each service provider organization at the conclusion of the interview for completed interviews. All data provided by each interviewee will be kept confidential according to the provisions of Texas A&M University's Institutional Review Board; no interviewee data will be associated with him/her without prior permission. Each interviewee will be asked to sign a consent form to be interviewed. After all interviews are completed, the data provided in the interviewees will be analyzed and key findings generated to write a final dissertation report (blinded) at the conclusion of the study. The dissertation report is part of the interviewer's requirements for graduation at Texas A&M University with an advanced degree (Ph.D.) in human resource development.

Site

location: _____

Date: _____ Time: _____

Name and title of individual interviewed: _____

Background

1. Please tell me a little bit about yourself and your role within the organization.	
2. Please tell me a little bit about the mission and purpose of the organization.	
3. How many staff work at the organization?	
4. Who is the primary	

<p>population served by your organization (e.g., children, teens, adults, senior citizens, etc.)?</p>	
<p>5. How many people does your organization currently serve? Approximately what percentage of the people you serve are women? Minorities?</p>	
<p>6. What types of assistance does your organization offer the population it serves (e.g., counseling, workforce skills training, employment assistance, financial help, housing, legal help, meals, shelter, religious, other)? Please provide some examples.</p>	
<p>7. What are some of the most common reasons that the population you serve are homeless (e.g., abuse, lack of workforce knowledge/skills, loss of job/economy, substance abuse, psychological handicap/impairment, physical handicap/impairment, other, etc.)?</p>	
<p>8. What do you feel are some of the ultimate root cause(s) for</p>	

homelessness amongst the population that you serve?	
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Current Workforce Skills

9. For the adult population that you serve, what percentage do you estimate currently are full-time/part-time employed? In what types of jobs? (RQ1)	
10. What percentage do you estimate currently volunteer part-time? Full time? In what types of roles? (RQ1)	
11. What are their estimated education levels (e.g., less than high school, high school graduate, vocational training, certifications, some college, college graduate, and some graduate school)? (RQ1)	
12. What barriers do you see to them gaining full-time employment in living wage jobs?	
13. What types of workforce skills do you most commonly see them possess (e.g., technical skills, trade skills, skills learned in volunteering, other, etc.)? (RQ1)	

<p>14. Are there any significant differences that you see in employment, barriers to employment, education levels, and/or workforce skills by gender? By race/ethnicity? (RQ1)</p>	
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Needed Workforce Skills

<p>15. With regards to the adult population that you serve, what types of workforce skills do you most commonly see them lacking? (e.g., soft skills, technical skills, trade skills, other, etc.)? (RQ3)</p>	
<p>16. With regards to the adult population that you serve, what types of workforce training do you think would most benefit them (e.g., career workshops, developing soft skills, developing technical skills, developing trade skills, other, etc.)? (RQ3)</p>	
<p>17. Are there any significant differences that you see in lacking and needed workforce skills by gender? By race/ethnicity? (RQ3)</p>	

Potential Workforce Programs

<p>18. Has your organization implemented any initiatives to help develop workforce knowledge/skills with the adult population that you serve? If yes, please provide some examples. If not, please discuss why your organization has not implemented any initiatives? (RQ5)</p>	
<p>19. What are the characteristics of programs that you have seen most effective in getting this population employed full-time in living wage jobs? What are the characteristics of programs that are ineffective? (RQ5)</p>	
<p>20. Are you/How are you aware of what the living wage is in suburban Houston (for example, there are living wage calculator resources at http://livingwage.mit.edu/)?</p>	
<p>21. What is your view regarding the labor market and what role employers can/should play in advancing or limiting job opportunities for homeless individuals?</p>	

<p>What is your view about how open employers are with respect to hiring homeless individuals? (RQ5)</p>	
<p>22. With regards to the adult population that you serve, what do you see as some potential workforce skills-related solutions and/or policies to help mitigate the issue of Houston suburban homelessness? (RQ5)</p>	
<p>23. What do you see as the role of the Continuum of Care in insuring homeless individuals increase their earned income? Should this involvement change, and if so how so? If not why not? (RQ5)</p>	
<p>24. How would you describe the involvement of DARS in addressing the employment of homeless individuals? Should this involvement change, if so how so? If not why not? (RQ5)</p>	
<p>25. How would you describe the involvement of the Gulf Coast Workforce Board and the Workforce</p>	

<p>Solutions system in addressing the employment of homeless individuals? Should this involvement change, if so how so? If not why not? (RQ5)</p>	
<p>26. Are there any other suburban service provider organizations that you recommend we speak with as part of this data collection effort?</p>	

Closing Comments

Thank you for your participation in this research. The researcher will validate preliminary research findings with you as part of data analysis. As a reminder, the data that you have shared with the interviewer will remain confidential, and the intent of the study is to provide (blinded) summary data to service provider and community organizations and leaders to help get more suburban homeless individuals who want to work in living wage jobs and help reduce Houston suburban homelessness. *(Note to interviewer: Provide interviewee with promised incentive for completing the interview.)*

APPENDIX E: RESEARCHER'S BIO

Rachele Collins manages advisory services and custom best-practice research projects for individual clients, and advanced working group collaborative research projects, with a special focus in human capital management, process management, and knowledge management.

During her time with APQC, she has served in several capacities, including as the Senior Program Manager for Human Capital Management Research and as a Senior Project Manager. In those roles, she developed and conducted research projects for APQC's members and clients and authored dozens of research reports, including Technical Talent Management, Effective Project Management Offices, and Putting Knowledge Management in the Flow of Work. She has also served as an author and speaker for industry publications and conferences.

Rachele has extensive experience in process improvement and benchmarking and has served as an awards examiner at both the state level for the Texas Awards for Performance Excellence and the local level for the Houston Better Business Bureau Torch Awards. She is an experienced consultant, author, and trainer, with focused competency in project management, benchmarking, writing, client facilitation, measurement, process improvement, change management, organizational development, human resource development, and knowledge management.

Prior to joining APQC in 2000, Rachele worked as a project manager and consultant for The Hackett Group and as a commercial banking officer and financial analyst at JP Morgan Chase. She is a graduate of Chase's Officer Development Program.

Rachele is currently enrolled in a Ph.D. program in human resource development at Texas A&M University and working on her dissertation, with an expected graduation of August 2016. She earned a Bachelor of Business Administration degree with a major in marketing from The University of Texas at Austin, graduating *summa cum laude*. She continued her education at Texas A&M University's Graduate School of Business, earning a Master of Business Administration degree with a concentration in finance. She is a certified Senior Professional in Human Resources (SPHR) as well as a SHRM Certified Professional (SHRM-CP).

She is a sustaining member of the Junior League of Houston, an all-women's volunteer organization dedicated to serving the Houston community, and served for years on the League's leadership team. Rachele is the mother of an active boy and is very involved in his school and baseball activities and events. She is a member of Second Baptist Church, West Campus.