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# **Alternative Emergency Services: Identifying the Specialized Needs of Homeless Vehicle Residency in King County Washington**

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## **Abstract**

*Vehicle residency is a subpopulation of the homeless who primarily live out of their car, RV, or van. In academic literature, homelessness has been highly researched in many fields, but little research has focused specifically on vehicle residency. The purpose of this study is to understand more about what resources vehicle residents need in order to make recommendations to stakeholders. The study conducted seven interviews and one small group interview from vehicle residents. Thematic analysis was used to construct qualitative codes to identify the specialized needs of vehicle residents. The study found two major barriers to accessing resources which were finding safe parking and maintaining their vehicle. Participants of the study recommended that there needs to be more safe lots, services tailored to women, LGBTQ, and housing services. The study concludes that since there are not enough affordable housing options from the time this study was conducted, that alternative emergency services tailored for vehicle residents is necessary. The emergency service the study recommends is safe parking programs where vehicle residents can park safely at night and get connected to services.*

## **Introduction**

According to the United States Department of Housing and Urban Development, (HUD) homelessness is defined as “an individual or family with a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings, including a car, park, abandoned building, bus or train station, airport, or camping ground” (Definitions of Homelessness for Federal Program Serving... n.d.). In this study, vehicle residency will be defined as a subpopulation of homeless individuals who primarily live in their car, van, or RV. In King County Washington, 19% of the total population of homelessness consisted of vehicle residents. They also accumulate 41% of the total unsheltered population with an estimated count of 2,147 individuals (Count us in, 2019). What differs vehicle residents from other homeless subpopulations are the specialized needs that come along with owning a vehicle. Vehicle residents typically find places to park that allow them to sleep legally overnight. “Today, they can be found in warehouse districts, under highways and viaducts, and increasingly on residential streets” (Vehicular Residency 2012, p.6).

Along with finding legal places to park, vehicle residents have other specialized needs that differ from other homeless subpopulations. Finding parking that is not only legal, but safe as well can provide a challenge for many vehicle residents. Public perception of vehicle residency is limited, due to being spread out of public view to ensure their safety, privacy, and comfort (Vehicular Residency 2012, p.29). Vehicle residents are also at a disadvantage from traffic ordinances that specifically criminalize them from doing daily living activities. “Current ordinances which help create dense areas of vehicle residency on limited streets and place the wellbeing of vehicle residents at risk include the ‘oversized’ overnight parking restriction to industrial/manufacturing zones (SMC 11.72.070), the city-wide 72-hour parking restriction

(SMC 11.72.440), the use of ‘No Parking 2-5am’ signs within areas of high vehicle residency, and the ‘Scofflaw Law’ which enables the mechanical immobilization of vehicles with multiple unpaid tickets (SMC 11.35)” (Vehicular Residency 2012 p.35). To avoid ordinances, vehicle residents are forced to be on the constant move which increases the cost on vehicle maintenance. The Scofflaw Law also increased the chance of vehicle residents being towed, which can lead to chronic homelessness.

Addressing homelessness in King County uses a three-step approach. These steps include prevention, emergency, and housing. Prevention focuses on keeping people in their homes, emergency provides people a safe place to stay, and housing solutions prioritize permanent housing (“Addressing Homelessness” n.d.). Eighty percent of the \$89.5 million budget focuses on housing and emergency aid services. King County has a population of about 2.1 million people, and Seattle at just over 700,000 (US Census, 2019). Despite the difference in population, around ninety percent of King County shelter beds are in Seattle (Bell, 2016 p.30). The geographic location of services could explain one of the reasons for a high-density rate of homeless in Seattle. Due to the parking restrictions in Seattle, alternative emergency shelters outside of Seattle may be beneficial for vehicle residents.

Alternative solutions to emergency shelters, could address the needs of a significant number of the homeless in King County. “Adequate shelters are commonly inaccessible to vehicle residents because there is no place to leave the vehicle” (Ivey, Gilleland, & Rankin, 2018 p.4). Parking in downtown Seattle is expensive, and the reason for this is to diminish the amount of time someone is parked and to add to the city’s revenue (So, MacDonald, Olson, Mansell, & Rankin, 2016 p.20). Therefore, vehicle residents are pushed away from services the shelters provide even if they are not staying overnight. Barriers for all subpopulations of homeless are

affected by shelter conditions. Skinner's research about shelter barriers, highlights the lack of available beds, unsanitary conditions, overcrowding, gender identification rules that keep LGBTQ youth on the streets, and forces families apart (Skinner & Rankin, 2016). To decrease barrier to resource access, one potential solution would be programs that are specifically tailored to vehicle residents.

Safe parking programs could be a temporary emergency service solution that allow vehicle residents to park safely at night and connect to services. These programs emphasize using private and public owned existing infrastructure to provide emergency services to vehicle residents (Ivey, et al., 2018). A safe parking program in Kirkland Washington costs an additional 5,000 to 6,000 dollars in higher utility bills due to their existing infrastructure. (Bell, 2016 p.28). Services that are not tailored to the populations needs, could decrease the person's ability to use emergency services on how they are intended. "The linear residential treatment (LRT) model of service provision espoused by the continuum of care (CoC) offers emergency shelter as the first stage in the recovery/rehabilitation process" (Wakin 2006, p.97). With little safe parking programs in King County, vehicle residents could potentially be deprived of emergency services, forcing them to transition out of homelessness in other ways.

## **Purpose**

The purpose of this study is to understand what resources vehicle residents use in order to recommend needed service provisions. This study seeks to extend on the current literature of vehicle residency by using a qualitative approach to understand vehicle residents. The study conducted seven interviews and one small group interview, to gather data on the personal stories of vehicle residents and their access to resources. The study found six major themes using thematic analysis which were past home environment, mental health, safety, parking,

community, resources pertaining to access, barriers, and participants recommendations to their peers and stakeholders.

Providing services for homeless is essential for individuals and families to seek the help they need: “Families need basic supports beyond decent affordable housing to thrive: food, education, employment, child care, transportation, health and mental health care, trauma-informed care, and children’s services” (Bassuk, Decandia, & Richard, 2010 p.4). Emergency services is one of the priorities King County uses to address homelessness. Therefore, a service-based framework will be used to understand the specialized needs of vehicle residents. This framework was chosen due to the relationship between services and resource access. The study will also review how services and resources may pertain to vehicle residents and other subpopulations of homelessness. Bellow I review literature on homelessness and vehicle residency pertaining to resource access, polices, and recommendations. I then review other homeless subpopulations that relate to the findings of the study such as emergency services, homeless community, and mental health.

### **Literature review**

**Vehicle residency.** Public perception of the vehicle resident population size is different from reality according to the Seattle Vehicular Residency Research Project (2012). To understand how to map where vehicle residents live, Seattle University’s Department of Communication developed guidelines to determine how vehicle residents could be counted and mapped. Two of the six of characteristics were used to count vehicle residents: “The view through the front to rear windows is blocked, at least one side window is blocked by sheeting, blankets, panels, and/or curtains, there is evidence of unfrozen condensation on windows, at least one window is partially open, there are items often associated with vehicle residency such as

generators, bicycles, or storage containers externally secured, and there are unusually large volumes of possessions, sometimes appearing as ‘garbage’ (often in bags), within or near the vehicle” (Vehicular Residency p.20 2012). In addition, higher density of vehicle residents was associated with a 72-hour parking rule (MC 11.72.440) and industrial zoned areas that enforce No Parking signs from 2-5am.

Parking restrictions force vehicle residents to worry about police interaction, traffic, parking infractions and moving from one place to another. With the enforcement of vehicle ordinances, residents are criminalized for using a necessity for survival. Seattle University’s School of Law studied the relationship of vehicle residency, laws, and criminalization. The researches surveyed 29 cities in Washington that could potentially prohibit life sustaining activities such as sleeping and storing possessions. They found 291 ordinances in Washington, “five cities with the highest number of ordinances are Seattle (20), Auburn (18), Kent (18), Aberdeen (17), and Vancouver (17)” (So et al., 2016 p. 9). The three most occurring ordinance laws were parking with expired tabs, not moving in 20 to 72 hours, and scofflaw (gives the city rights to boot vehicles when they have four unpaid tickets). A third of the identified ordinances do not have other viable options for vehicle residents which criminalize life sustaining practices.

Safe parking programs could be a viable solution to decrease the criminalization of vehicle residents. Ivey et al., (2018) conduct a case study about different operational procedures that emphasized affordability. New Beginnings is a counseling center in Santa Barbara California that operates 24 safe lots with a total of 150 spaces. “The two important criteria for suitable lots are: (1) that the public does not utilize the lot during the overnight hours in which the program operates, and (2) that they are located in inconspicuous areas, such as in industrial zones, or outside of residential areas” (Ivey et al., 2018 p.12). They partner with the community

to determine the best locations for their safe lots. Dreams of Change, a nonprofit in San Diego California, uses an alternative approach by using three lots and providing the same amount of space. Their main approach is strategically putting the safe lots in inconspicuous areas that are gated for the residents of the area to feel safe. Lake Washington United Methodist Church offers one lot and 35 parking spaces at night. Resources from the church include a kitchen, Wi-Fi, and bathrooms to provide basic needs. Safe parking programs offer vehicle residents safety, connections to resources, community, and housing.

The Seattle/King County point in time count is a snapshot of how many homeless people there are on a given night. The purpose of this count is to meet a requirement of the Continuum of Care that is a policy of the Department of Housing and Urban Development. The methodology states that the count happens in January between the hours of 2-5am. After an estimated count is conducted from all subpopulations of homeless, a self-reported survey is given to those who contributed to the count. Out of 1,171 survey respondents, 19% were vehicle residents (Count Us In 2019 p.21). Below are the overall results from the survey data comparing vehicle residents to non-vehicle residents:

*“Overall, Count Us In Survey respondents living in vehicles reported a lower rate of accessing community based services compared to all other survey respondents (83% compared to 92%). Sixty percent (60%) of vehicle resident survey respondents reported issues in trying to access services in the community, including not having ID/personal documents, lack of transportation, not qualifying for the service(s) they wanted, never hearing back after applying for services, and not knowing where to go for help. Among those accessing services, health services were of particular interest among survey respondents (35% compared to 30%). Survey respondents living in vehicles indicated accessing Safe Parking sites at higher rates than all other survey respondents (25% compared to 6%)” (Count Us In 2019 p.68).*

The survey results indicate that vehicle residents have a lower rate of accessing resources than other subpopulations of the homeless. As discussed earlier, this could be due to the lack of

services that pertain to the specialized needs of vehicle residents. My study will add to the literature from this study on resource access, barriers, and mental health. In addition, homeless community and parking issues will be considered as a resource.

The City of Seattle 2016 Homeless Needs Assessment was another study conducted to “develop a profile and description of the population as well as defining current service needs in order to better serve and mitigate the experience of homelessness” (Flores 2016 p.1). The methodology of the study uses a mix method approach of qualitative and quantitative analysis. A self-reported survey was given to 1,050 homeless individuals from different subpopulations. In addition to the survey, a focus group of over 80 individuals was conducted to understand their personal perspectives (Flores 2016 p.29-31). Reported in the current living arrangements, 17% reported living in a vehicle (N=1,002) (Flores 2016 p.17). Throughout the data results, participants were asked what is needed for effective services. “Participants felt good programs should include clinical assessments, long-term support, and staff who care and invest in individuals. Participants reported that programming felt paternalistic and that services did not recognize them as people” (Flores 2016 p.22). This needs assessment focuses on all subpopulations of homeless to showcase in general the overall issues with homelessness. My study focuses on the needs of vehicle residents, which could pertain to needing different services than identified in the cities study. Asking specific questions that would pertain to different subpopulations of homeless, could allow service providers and local government more accuracy when determining services.

**Emergency services/departments.** Homeless individuals are at a much higher risk of emergency room visits and tend to require higher levels of emergency services compared to housed individuals. “Homeless adults contributed an estimated 0.5% of total emergency

department (ED) visits across the United States but represent only 0.25% of the general population” (Chambers, et al., 2013 p.302). Chambers conducted a study assessing ED visit rates from the Institute for Clinical Evaluative Sciences (2005–2009). The results found that among 1165 homeless adults, 77% had at least one ED visit, with an average of two visits per person a year. Frequent users (defined as ED visits of 4.7 or greater) averaged 12.1 visits per year, consisting of 10% of the sample and contributed more than 60 percent of visits (Chambers, et al., 2013 p.306). Therefore, homeless individuals and families are at a higher risk of using a ED. A reason for the frequent contact with ED is due to lack of shelter and safety. Emergency Medical Services (EMS) contacts declined from a mean of 15.85 (SD = 22.96) to 9.54 (SD = 15.08), representing a 54% reduction in the number of EMS contacts when connected to housing first (Mackelprang, Collins, & Clifasefi, 2014 p.1). According to Chambers, there is a connection between safety and more ED visits.

**Hygiene Services.** Access to hygiene is critical for personal health and to decrease the spread of illnesses. Access and use of hygiene services such as showers, bathrooms, and laundry are not readily available to the public. A cross sectional study was conducted in Boston, MA about personal hygiene practices. Requirements of the study were to be homeless, over the age of 18, English speaking, and be in enrolled in the Boston Health Care for the Homeless Program (BHCHP), a large healthcare provider in Boston. The results of the study show that “most participants (72%) reported taking a daily shower. More than 60% reported hand washing with soap five or more times each day and use of hand sanitizer was widespread (89% reported using sanitizer in the last week). A majority (86%) used a laundromat or laundry machine to wash clothing, while 14% reported washing clothing in the sink” (Leibler, Nguyen, León, Gaeta, & Perez, 2017 p.4). Shelters and laundromats were the highest access point for hygiene services.

The study also found that drinking, injection drug use, and outdoor sleeping were all significantly related with a reduction in hygiene (Leibler, et al., 2017). If a homeless person can get into a shelter and use its hygiene services, there is a chance that you will not be able to access them. A literature review of Twenty-eight peer-reviewed studies from medical journals found reporting at least one environmental health or hygiene behavior in homeless shelters. Results found that “thirteen studies (46%) observed inadequate ventilation, insufficient outdoor air supply, and/or the poor state of air-handling units in studied shelters. Five studies (18%) noted overcrowded conditions... Fifteen studies (54%) mentioned clients were able or encouraged to shower; another noted shower was often broken, without water, or not wheelchair accessible” (Moffa, Cronk, Fejfar, Dancausse, Padilla, & Bartram, 2018, p.335-336). Hygiene expressed in my study was important for participants who worked, are in school, or had access to a shelter. Other participants who did not use shelters, either did few hygiene practices, or use public utilities such as parks and restrooms.

**Homeless community.** In my study, participants described that they felt as an ‘outcast’ from society due to homeless stigmas. Gerrard and Farrugia (2015) argue that discourses of homelessness comes from a free market framework. Since homelessness is usually seen in a public space along side the ideology of capitalism, legislation will attempt to separate the two by making daily living activities for homeless illegal (Gerrard & Farrugia 2015, p.2226). Gerrard and Farrugia develop what they call the ‘out of joint’ phenomena that explains the social differences of homelessness. “Social understandings of homelessness are developed and framed by a whole raft of judgments which aim to understand and explain this ‘out of joint’ phenomena: judgements of social success and failure, of appropriate and inappropriate public behavior, of respectability and disrespectability, of luck and bad luck, of inequality and justice, and of

productivity and laziness” (Garrard & Farrugia 2015 p.2227). This ‘out of joint’ phenomena were expressed by participants in my study. They stated that they feel isolated from society and being a part of the homeless community allows them to be surrounded by peers who understand them. This separation of communities could be traced down to homelessness and capitalistic culture not aligning with each other.

In my study, participants saw their community as a resource and a challenge. One viable resource was social capital among peers. They stated that homeless people can come together easily and share resources, but at the same time can take advantage of you. Stablein’s (2011) research on homeless social capital for youth share similar findings. The study interviewed homeless and non-homeless youth ages 15-30 in one square block in the United States. The study shows that homeless communities offer resources for survival needs such as safety, socioemotional supports, finding food, money, and sharing street knowledge (Stablein 2011 p.293). Challenges or consequences of homeless communities found that “they also increased/perpetuated homelessness (and one’s decision to become homeless), involvement in delinquent/criminal activity, and the potential for exploitation” (Stablein 2011 p.306). This was a challenge that was brought up in my research as well; criminal activity, drug and alcohol use, and exploitations among peers were common.

According to Chamberlain & Johnson (2011) research on pathways to homelessness, they identified five pathways which were housing crisis, family breakdown, substance abuse, mental health and youth to adult. The authors used a large database from services providers in Melbourne Australia in addition to 65 interviews. The study found that different subgroups based on age and family dynamics, determined their involvement in the homeless subculture. People in a housing crisis or family breakdown pathway, they did not consider homelessness as a way of

life. Substance abuse and youth to adult pathways were more integrated in the homeless subcultures and stayed homeless longer. And those who have issues with mental health issues do not endorse homelessness as a way of life, but have few options exiting homelessness (Chamberlain & Johnson 2011).

**Mental Health.** As discussed earlier, mental health can lead to an individual experiencing homelessness longer with little options to exit homelessness. Mental health was a theme identified in my study, which pertained to vehicle residents experiencing depression, anxiety, and PTSD before being homeless, and in addition to living on the streets. Piat and Polvere (2015) conducted a qualitative study on how individuals with mental illnesses experience pathways into homelessness in Canada. Methods for the research were recruiting individuals through community agencies to interview about their experience of entering a state of homelessness. Four themes were identified in the study; Theme one states that individual factors leading to homelessness are important, theme two addresses the transitional steps out of foster care and other institutional settings, theme three addresses that structural factors create barriers, and the fourth theme found that structural barriers amplified individual risk factors of entering homelessness (Piat & Polvere 2015 p.8). Themes one and four pertain the most to my findings due to each participant expressing their own individual traumas and each identifying barriers to resource access.

To understand more about homeless youths mental and physical health, Edidin, Ganim, Hunter, & Karnik, (2012) conducted a literature review discussing contributing factors to mental illnesses. The most common reason for youth to leave home is due to disruptive family relationships that is associated with parental use of drugs, alcohol, sexual violence, and neglect (Edidin et al., 2012). A study in Seattle of 328 youth on the streets or in shelters (12-21 years-

old) found that 82% experienced physical abuse, 26% sexual abuse, and 43% described being neglected. “Abusive family relationships are particularly detrimental, because they have been associated with subsequent mental health problems and risky behaviors” (Edidin et al., 2012, p.356). These mental health problems from traumatic experience can cause a youth to be diagnosed with PTSD, anxiety, depression, and psychosis (Edidin et al., 2012). A barrier for youth to address their mental health issues are the structural factors in health care. Studies show that youth do not access health care services due to lack of knowledge, identification, having a permanent address, and lack of health insurance (Edidin et al., 2012). However, if youth do have access, one study found that 99% of youth used health care services in the last three months if it was readable accessible. Youth typically see health care professionals to treat mental health issues, trauma, STIs, and substance use problems, as well as chronic conditions, pregnancy, and dental problems (Edidin et al., 2012).

## **Methods**

### **Participants**

The methods of this study were approved by the Human Subjects Division from the University of Washington. The participants in this study identified themselves as individuals who are experiencing vehicle residency or have in the past. I used purposive sampling to identify individuals that are especially knowledgeable about or experienced with a phenomenon of interest” (Palinkas, L. A., et al. 2015, p. 553-554). Therefore, this strategy was used because of the difficulties identifying individuals who lived in their vehicle. This was due to the population being relatively hidden, not wanting to be bothered by people and police. My approach to data collection started with knowing someone who experienced vehicle residency. From there I went to local “hot spots” where homeless congregate, e.g., shelters, food banks, and parks in King

County. I approached individuals and asked them if they would be willing to do an interview. Qualifications of the study were explained verbally and on paper. The qualifications of the study were: the participant experienced homelessness, currently or previously lived in their vehicle, and is 18 or older. A total of seven interviews were conducted and one small group interview with a couple who lived together in a van.

The sample is comprised of nine participants; seven of the participants stated that they previously experienced vehicle residency, while two participants were currently homeless. The following demographic information was released voluntarily before the interview process began. The youngest participant was 18 and the oldest 55. Race composition of participants consisted of four White, two Hispanic, one White Hispanic, one Black, and one Asian/Hawaiian. There was an even number of men and women with one participant identifying as gender non-conforming. The shortest amount of time experiencing vehicle residency was two months, and the longest 30 months. Most participants lived in a sedan-type vehicle (i.e. 4-door) during their vehicle residency. Fewer lived in vans/trucks (n=02) and other types of vehicles.

## **Procedures**

Semi-structured interview methods were used for data collection. Once participants agreed to an interview, a consent form was given to them describing the study and included participant expectations and interview questions. All interviews were audio recorded for transcribed and coding purposes. Interviewees were given \$20.00 for their time. Once the interview began, the first half of the interviews focused on the participants story and background. These questions included, “Can you tell me generally about your childhood” and “what life events lead you to become homeless?” The second half of the interviews were focused on resource access, barriers, and recommendations. These questions included “what resources did

you use while experiencing vehicle residency,” and “what resources do you recommend service providers and the county prioritize for vehicle residents?” Interviews ranged from 20-60 minutes. All locations for the interviews took place in King County, many in Seattle parks. Other locations took place outside of homeless shelters and the University of Washington. For the full interview protocol see appendix A.

### **Coding**

A qualitative thematic analysis method was used to code the transcribed data. “Coding is the process of organizing the data by bracketing chunks (or text or image segments) and writing a word representing a category in the margins” (Cresswell 2014, p. 197-198). This method was used to condense interview data. In order to determine coding, thematic analysis uses “a method for identifying, analyzing, and reporting patterns (themes) within data” (Braun & Clarke, 2006, p. 79). There are six phases of thematic analysis that Braun and Clarke (2006) developed that were used to determine the studies themes. The first phase is familiarizing yourself with the data. This was done by reading each transcription once and taking notes of what appeared to be significant to the research question. Phase two includes initiating codes, which is the process of taking notes and looking for patterns. In phase three codes are changed to themes by considering “how different codes may combine to form an overarching theme” (Braun & Clark 2006, p. 96). Phase four requires refinement and condensing themes to determine if there is enough data to support them. Phase five and six define and reports themes. Table one represents the themes and definitions acquired from interview data.

[Table 1]

<b>Themes for Becoming and Living Homeless</b>	<b>Definitions</b>
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<b>Past Home Environment:</b> Participants family dynamics, socioeconomic status, and childhood.	Refers to contributing factors of homelessness from the home. Examples include drug use, domestic violence, sexual abuse, and non-accepting families for LGBTQ.
<b>Current Mental Health:</b> participants well-being while being homeless (psychological)	Mental health in this study is defined as their current psychological state due to their trauma from the past and while homeless. Examples include anxiety, depression, stress, and PTSD.
<b>Safety for Vehicle Residents:</b> Measures level of safety (physically)	Refers to anytime the participant was placed in a physically unsafe position when experiencing homelessness. Examples include knife fights, being assaulted, sleeping at night, and being around drugs.
<b>Themes for Needed Resources</b>	<b>Definitions</b>
<b>Parking:</b> Locations, hardships	Refers to the day to day issues finding places to park day or night. Examples would be where they would sleep, how often they had to move before receiving a ticket, and why did they sleep there.
<b>Homeless Community:</b> Looks into the importance of community and culture	Refers to the participants community and how it can be used as a resource and its challenges. Examples include homeless culture, survival, and coping with their mental health.
<b>Resources:</b> Access, barriers, and recommendations	Refers to any asset that can be drawn on by the participant while experiencing homelessness. Examples include shelters, food banks, social supports, counselors, parks, gas stations, social services, income, community centers, internet access, housing, and libraries.

## Results

Each theme refers to one of two components of participants' lives – their history of homelessness and the resources needed for vehicle residency. Below, I outline the history of homeless themes, which include past home environment, current mental health, and safety for vehicle residents. Past home environment will outline the participants childhood and life events that caused them to live in their vehicle. Majority of the participants leave home at a young age due to fights, disagreements, drug use, and sexual abuse from family members. Current mental health will highlight the stressors of homelessness and physiological disorders such as PTSD,

anxiety, and depression. Safety will address females who expressed feeling unsafe sleeping in their vehicle, shelters, and the risks of abusive men. I then outline the themes related to resources needed for vehicle residency, which include parking, homeless community, resource access, barriers, and recommendations. Overnight parking access was a difficult resource to obtain by all participants, majority parked illegally and hoped police would not bother them. Homeless communities are essential for individuals to share resources, building safety with groups, and coping with daily stressors. However, the unpredictability of people you associate yourself with could lead to unsafe situations. Resources participants were able to access are free meal services, counselors, food stamps, and income through disability or odd jobs. Resource barriers common with participants were shelter access, not qualifying for services, and vehicle registration. Recommendations participants expressed were safe parking lots, community spaces, more services tailored to women, LGBTQ, and affordable housing.

### **Past Home Environment**

Home environment is defined in this study as contributing factors of homelessness prior to living in their vehicle. Six out of eight interviews stated that the reason for leaving home was due to their safety being jeopardized by family members. This quote is from Jessica<sup>1</sup>, a 23-year-old white female that addresses why she left home:

*“My dad was pretty abusive growing up both physically, mentally, and emotionally. I think the biggest reason why I became homeless was because my dad molested me at 17. That was never really talked about in the family and up into the point when I had become addicted to Adderall at 20 years old, I was kind of losing my mind and I went to a treatment center... Nobody in the family really had validation for the molestation part. They think it was a mistake and that’s the reason why I had to leave home.”<sup>2</sup>*

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<sup>1</sup> Pseudonyms are used for all participants of the study to protect confidentiality.

<sup>2</sup> All quotes have been edited for readability. Exclamations and other speech pauses such as “um,” “like,” and “you know” have been removed. Additionally, all proper nouns within quotes have been removed or anonymized.

Safety was compromised when Jessica's dad sexually molested her, causing severe mental health and drug use problems to cope with the trauma. She also stated that her dad was an alcoholic and her family was frequently evicted from their homes.

Another participant Maddy, a 25-year-old white female had to leave home due to her mom being addicted to drugs. Safety was compromised when multiple people would come in and out of the home dealing drugs.

*“Growing up my mom was incarcerated, so I was born in the prison system. I was conceived while my mom was incarcerated, so she stayed in prison until I was 10. When she got out, our living situation got a lot more confusing because she had been incarcerated for 23 years and had a severe mental illness. There was a lot of drug use and a lot of homeless people living in my house. So, my house became kind of a weird, almost like shelter of sorts where my friends could come live, but also other people. And as I got older, my dad got sick and passed away, which was right before I went on the road and started living in the van. My mom started selling heroin and things got bad, there were a lot of unsafe men living in my house.”*

Other unsafe home environments that were identified in this study were participants being rejected from their family for being a part of the LGBTQ community. Stephanie, a 21-year-old Hispanic female was kicked out of her home when she was 15 for being gay; *“I was kicked out for coming out basically... My family was extremely religious, and I was raised religiously, once I told them I had to leave.”* In addition to feeling unsafe, seven out of the nine participants experienced homelessness as middle adolescents (15-17) and later adolescents (18-24) (Pathways for Youth 2013).

### **Current Mental Health**

Mental health in this study is defined as their current psychological state due to their trauma from the past and while homeless. All participants had emotional and psychological trauma being homeless. Five out of the nine participants were coping with mental health issues regarding PDST from the past and unsafe experiences being homeless. Jessica lived in her vehicle when she was

not accepted into shelters. While in a shelter, she would get touched by men who were sleeping next to her on a mat. When asking a follow up question about resource recommendations, I asked if she preferred if the shelter had stricter rules, she responded;

*“In the beginning I would have done it sober. However, as time went on by, there was no way in hell I was going to get through my situation without being inebriated. If I did not have marijuana to smoke, if I did not have to rely on alcohol, I would not have gotten through that situation at all. But there's just some nights where you are going in that shelter and you do not want to be sober. You do not want to be in that situation at all, but you must be. So, if it was a stricter shelter and it was a better environment and there was not blood in the bathroom, pee or puke, and if there was not someone trying to touch me at night, if it was a better shelter... I don't think I would have to do those things.”*

Smoking marijuana and alcohol abuse was a way for the participant to cope with the environment of the shelter. The participant was emotionally and physically abused in the shelters, and in the past home environment. This caused her to have PTSD, anxiety and depression.

Using substances was common throughout the interviews, Maddy took alcohol over food at times because of the stressors of homelessness; *“priority did not go to food and went to alcohol and cigarettes. It is a shitty situation trying to sleep in your car. So how can you make it more livable?”* Another participant Marcus, an 18-year-old African American male describes how homelessness changes you on an emotional and psychological level.

*“When you are homeless in your car. It's like you are being stripped of everything to rebuild your own self. It's when you are going into the military, they break you down they strip you of nothing. They make you psychologically think that you are nothing.”*

### **Safety for Vehicle Residents**

Safety for vehicle residents is defined as anytime the participant did not feel physically safe when homeless. All female participants expressed situations where they did not feel safe sleeping in their vehicle at night or being around unsafe men. Janet, a 52-year-old white female who was currently homeless when interviewed, slept in West Seattle, but alternated to shelters due

to safety. Janet expressed from a female perspective that sleeping in your car where other homeless congregate, makes it safer for the individual at night.

*“I sleep in my car sometimes and sometimes I sleep in the shelter. Sometimes I get a little scared, so I don’t like to do it seven days a week. So, a couple of times a week I might try a bed shelter... I would try to park around Home Gate and Ballard, those are the two safe places to live in your car. I have family in west Seattle, that's why I do it there. But I would suggest if you're going to live in your car, stay around Sodo and stay up and Ballard where they unite together over there.”*

Sodo and Ballard are neighborhoods in Seattle are known areas for vehicle residents to park. Sodo is an ideal location because its highly industrial and there are less restrictive parking locations. Participants who experienced homelessness as a minor or youth found safety in neighborhoods, parks, and Walmart parking lots.

Maddy who lived in a van, expressed that she felt unsafe with a man she was living with. In the van there were two dogs and three other men she felt safe around. Since the van was the only shelter she could go to at times, she was not able to avoid him.

*“I was also couch surfing on my aunt and uncle's couch, which was not a safe place. So, I would bounce back and forth between staying there just because I needed to get away from the guys. We stayed with a volatile and abusive guy in the van who particularly targeted me and was constantly trying to get me to sleep with him.”*

With few viable options for Maddy, it was safer for her to be around this man rather than living on the streets. One of the safety concerns being homeless is the uncertainty of daily living. All the participants expressed that everyday can be different and unpredictable. The abusive man living in the van stayed because of the uncertainty of what he would do if they told him to leave.

## **Parking**

Parking is defined as the day-to-day issue of finding places to park. Each participant was asked where they parked at night. The data shows that participants would park either at a friend’s house, Park and Rides, Walmart, neighborhoods, businesses, or parks. One participant was towed

due to a non-operating vehicle that was parked on the street for too long. Four participants either received a parking ticket or were told by police to move. Joel a 28-year-old white Hispanic male expressed in his interview that moving his van was a daily stressor:

*“Depending on who you interact with, there are certain times you are in a park and ride, and we were getting taps on our window. They would say ‘Hey, you got to move the van.’ Other times it was, ‘what are you guys doing in here?’ Flashing their flashlights around and talk to us for 20 minutes, question us, all this other stuff. It really depends who you are interacting with in that moment.”*

Joel moved his van daily to avoid police ordinances, however there were times when the van was out of gas and needed to be stationary until he was able to get gas money. The constant moving increased the cost to maintain his home. Joel also expressed that other municipalities treat vehicle residents differently.

Robbie, a 31-year-old white male lived in his truck on and off for about ten years. Some of the difficulties he expressed where parking areas that were close to hygiene resources. Majority of the time he would park would be at his cousins’ house, but time to time he would need to find places along the side of the road. He stated that if it is possible, going out of city limits is the best place to find parking at night in order to avoid harassment and police.

*“As a person who lives in the car, it is extremely difficult to find a place to park, to sleep at night. Especially in city limits, it is extremely difficult. As far as finding a place that is relatively quiet, finding a place that is relatively close to a place to do your duty, or to get basics like water. Also, am I going to get harassed or get robbed being here?”*

Alex, a 25-year-old Asian Hawaiian gender non-conforming person had a similar experience. Alex would switch from parking on private and public parking lots. When it was available, they would sleep in front of a friend’s house. At the time Alex went to high school, so they needed to park close to the school on weekdays.

*“Depending on where I parked the car at night, I might have to wake up early to move the car to a different location so that I did not get a ticket or get heckled by police or business owners... I would either find a well-lit street that I could park on or go find a place near the end of a forest in Skagit County. I would sleep around there because I would less likely get harassed.”*

Joel, Robbie, and Alex all had difficulties finding legal places to sleep at night. Alex received a parking ticket for illegal parking but was able to pay them off due to having a part time job. Alex expressed that when she paid the ticket, providing herself with necessities such as hygiene supplies, food, and gas were more difficult.

### **Homeless community**

Homeless community is defined as individuals or groups the participant congregated with that provided resources and/or challenges. All nine participants in this study expressed the importance of community. Benefits of the homeless community were sharing resources, building safety within groups, and coping with daily stressors. Challenges associated being a part of the community were; uncertainty of the individuals background, vulnerable to others regarding safety, and taken advantaged of with their resources.

**Homeless community resources.** Homeless community resources are defined as any useful asset that came from the community. Jessica expressed in the interview that associating yourself with other homeless can help cope with daily stressors. Sharing each other’s belongings and helping one another with resources were common. She also stated that vehicle residents or someone who appears to have income are taken advantaged off:

*“Everyone is coming from broken families and everyone is at their lowest point, and it's like okay, we'll all be miserable together. In a sense there is a community with each other, and we do share a lot of our things, bum from each other's smokes, and however much we can. But I also feel there are people out there to hustle you if you do have the job and money. But people come together very easily.”*

'Being miserable together' as Jessica puts it, is one of the reasons why homeless people come together so easily. You feel isolated from society because nobody understands you. "social support that community members provide is a principle way by which people and households get resources" (Wellman & Wortley 1990, p.558-559). Negative stigmas of homelessness make it difficult for homeless to reach out to other communities.

Homeless communities as social supports is a resource Marcus acknowledges. He expressed that one of the problems with homelessness is not enough people caring about the issues they face. Marcus points out the homeless community understand what other homeless are going through:

*"I have seen a homeless person crying because the birds snatched his sandwich. That was his only food in the entire day, and he was going crazy and people thought he was nuts... I thought he was crazy too until I talked to him and found out why he was acting that way."*

**Homeless community challenges.** Homeless community challenges are defined as anything that had a negative consequence associating yourself with other homeless individuals or groups. Maddy was asked about their daily routines living in the van. She stated that majority of the time was spent socializing with other homeless. The participant was then asked what caused her to become housed. She replied that surrounding yourself with safe people was the first step to getting off the streets:

*"You know, you just talked to homeless people, you are hanging out with homeless people, and you are one in the same. But then at the same time, some of the homeless people look at you like you are different because you have a car. Some of them will try to take advantage of you and try to leech off your car. Other ones will straight up move into your car... You do not get to choose who you spend your time with, it's whoever's around is around. Of course, people around here are abusers and rapists, but when you are in a position where you can choose who to be around, it definitely made a big shift."*

The culture of homelessness was a natural occurring phenomenon. She claims that you do not get to choose who you associate yourself with, because when you are in a vulnerable place you do not

have the option to go someplace safe. The back and forth of support and distrust of individuals appeared to create a community who benefited off each other in an unhealthy way. This is due to the community prioritizing individual safety, wants, and survival.

## **Resources**

Resources are defined as any asset that can be drawn on by homeless people while experiencing homelessness. Each participant was asked how they defined a resource, all had varying answers. A common theme to the answers was anything that can benefit regarding their current situation. The results of what resources did vehicle residents use will be broken down into three subcategories. Resource access will address what resources they used while homeless. Resource barriers are any asset the participant was not able to access due to ineligibility or policy. Resource recommendations will be advice of what current resources homeless should use, and what resources the county or state should provide.

**Resource access.** Resource access is defined as any asset the participant was able to access with no barriers. Other than the vehicle itself, necessities, counselors, and source of income were common resources from the data. Eight out of the nine participants used either shelters, food stamps, or food banks for food access. Drop in centers, particularly for women, were essential for basic supplies such as feminine hygiene:

*“Drop-in centers gave me all the supplies to take care of me. They checked me out and fixed up my foot and hooked me up with other stuff like toothbrush, toothpaste and tampons... Drop-in centers are crucial for women that are living in their cars, especially if I was living alone. That is somewhere I would regularly check into, just to make sure there was somewhere to go if I did not feel safe” -Maddy, 25-year-old white female*

Counselors provided from shelters or high schools allowed two out of nine participants access to therapy. The counselors were able to address how to cope with their past home environments and stressors being homeless in a healthy way. *“He was a sexual assault specialist.*

*He kept me on my toes and helped me clarify in my head what certain boys were doing in the shelter and how it could have been manipulative or suggestible to me or another girl”-Jessica, 23-year-old white female. The participant stated that if it were not for the counseling, she would still be homeless. The counselor helped her cope with anxiety and depression to be stably employed. Alex stated that the school provided them with a therapist to address their past, help register for college, and recommended shelters to stay at: “The therapist helped me figure out, not only emotional wellbeing and taking care of myself, but in a sense that I deserved it. He helped me sign up for community college and helped me go over my resume when I was looking for a different job. They were really a lifeline for me.”* Jessica and Alex both expressed that the counselors were one of the major assets that transitioned them into housing.

Income was obtained working low paying jobs, busking, odd job postings on Craig’s List, EBT, Social Security Income (SSI), asking strangers for money, and selling marijuana. Income was essential for upkeep on car maintenance and gas money. Without a source of income, vehicle residents risk becoming chronically homeless. All participants expressed the desperation of trying to find enough money every day:

*“Honestly, I was really ashamed for a long period of time. Asking for basic resources and having to walk up to somebody is embarrassing. Asking for gas is something that I did quite a bit. Driving the van, I ate through gas, asked nice people, and sitting around at a gas station for hours on end sometimes really made you feel like a pretty shitty person.”* -Joel, 28-year-old White Hispanic male.

Income was essential for Joel to keep his van. He was driving from California to Washington and the one option for him to earn money was to beg. Joel expressed that begging for money made him feel ashamed and embarrassed. In order to not lose the van, Joel was forced to put himself in situations that were degrading.

**Resource barriers.** Resource barriers are defined as any time the participant failed to seize an asset that was out of their control. Barriers from the data found safe places to sleep at night, level of vulnerability, and car registration. Seven out of nine participants stated that shelters were either too full, or conditions of the shelters were poor enough that participants would rather sleep in their vehicle. Alex was asked why they preferred sleeping in their car rather than a shelter, they replied:

*“It was because of some of the ways that people were treated in the facilities. Some of the ways that I had seen staff that worked there interact with people outside of the professional setting. That made me feel not safe going there”*

Qualifying for services that shelters provide appeared challenging for Jessica. She stated that if you are not considered highly vulnerable, the staff would allocate resources to others. She said the reason why she got assistance was because she was persistent, had to beg, and presented why she qualified.

*“You have to be in such a vulnerable state, you have to keep bothering your case managers relentlessly because they are not going to come to you. You need to go knocking on their door or go find them. They are always someplace else and every blue moon, they will be in the shelter.”*

Joel and Maddy who lived in a van together in Seattle, decided to move to Los Angeles California due to family living there. It was not a long-term solution because they did not want them living there. The family allowed them to come occasionally, to use the kitchen or stay the night. Therefore, while registering the van in California, they failed emission tests and were forced to move back.

*“We tried to get the van registered, and we were unable to get it registered in California because of the fact it was an eighties van and it had such high pollutant value... So, we went further north to get to a DOL for vehicles up in Oregon. And they said sorry, you need to be a resident here for you to register it. Therefore, we might as well go home to Washington” -Joel, 28-year-old White Hispanic male.*

## Resource recommendations

Resource recommendations is defined as any resource the participant recommended to their peers, service providers, or local government. Recurring recommendations from the interviews were: safe parking lots, more services tailored to women and LGBTQ, shelters, and affordable housing. Providing for their basic needs was something that all the participants expressed as important. Few made those recommendations due to already accessing them, however many participants had difficulty accessing basic needs such as food and hygiene. For example, in Joel's interview he told me that he once waited 14 hours for food stamps. Therefore, recommendations will be tailored towards resources we lack, have little of, or need improvement.

**Safe parking.** Four participants recommend the county to provide safe lots for vehicle residents. In her interview, Maddy expressed that being apart of your community in a safe way was essential to get out of homelessness:

*“Safe lots that are monitored, and not random lots where anything could be happening. But lots where this is a safe place for people to come park their vehicles, charge stuff, and whatever. I do not know how the hell you would run that to make it work within the city boundaries, but I think we need to figure that out”*

Challenges Maddy faced were being safe where she parked and the people she interacted with. It was when Maddy was able to remove herself from the unsafe people in her life, that she was able to hold a job, find a place to stay, and have the luxury to choose who to be around. Having the social support from Joel was the reason she was able to provide safety for herself. A healthy community dynamic was also something Marcus recommended local government to provide alongside a safe lot. *“It would be an RV lot for homeless that don't have a home, a place to go. It would be like a community of tents but with cars.”*

Joel also recommended the homeless need more safe lots. Safety was also a major challenge when engaged of daily activities. A recurring theme for Joel throughout the interview were the stressors to find parking. Not only did he need to find legal parking, but in a location that appeared safe.

*“Yeah, I think places where you can offer basic utilities to be able to cook, clean, feel safe, have recreational activity, and connect with other people who are in similar circumstances. Other people who are living in other vans or just homeless. And I think particularly resources for queer and trans people who likewise probably do not feel safe out on the street, let alone in a shelter”*

Joel and Maddy both recommended that safe lots should provide basic utilities such as cooking space, bathrooms, and showers. A theme in all the interviews were the daily struggles of providing for your basic needs. Having access to those resources near safe lots, would allow more energy into transitional steps out of homelessness.

**Services for women and LGBTQ.** Seven out of nine participants expressed that services tailored more towards women and LGBTQ are needed. Jessica stayed in a shelter when they were available. She states that since the shelter was for everyone, women were victims of sexual assault from men. When asked what the shelters could improve on, she replied being aware of potential harm men can do to women:

*“I wish girls had a better situation because there is barely any female population at the shelter. I feel like girls are so vulnerable to suggestible actions, manipulations, and sexual assault. It happens so easily, and the staff can not really do anything about it because they have to be fair to everyone.”*

I mentioned to Jessica that there are shelters specifically designed for women. She was aware that those existed and attempted to stay in one. She went to a different shelter because of the unhealthy conditions and she had no peers. Being a part of the homeless community was a need Jessica

sought after. A youth shelter allowed her access to people her age, and she did not foresee men in the youth shelter being abusive.

Alex, who left home because of her abusive father, recommended that there needs to be more services for women who have experienced domestic violence:

*“Better resources for work force, vocational rehabilitation type of thing. Better resources for people that are fleeing domestic violence. Yeah as far as like specifics for that, I would say more money channeled into getting people who are escaping from domestic violence, therapy, and into safe housing.”*

When Alex was homeless, she was still attending high school. She used the services offered at her school such as free lunch and counselors. They expressed they were fortunate to utilize the schools resources to transition out of homelessness. However, many homeless individuals do not have that kind of access. Therefore, shelters and housing services that have therapist would be a beneficial resource to this population.

**Housing services.** All the participants expressed that there needs to be more affordable housing options. Janet expresses her frustration with housing options who makes limited income due to being on disability:

*“What needs to change are the people that are running houses and separate renting rooms, and only charge them 700 a month so people on SSI can rent. Everyone does not make twice the amount that they ask you for. Like, Oh, you got to make 1400 a month to rent, no that is evil.”*

At the time of the interview, Janet was currently homeless and alternated sleeping in shelters and her vehicle. She has been housed in the past in transitional housing but after a few years would end up homeless again. Janet expressed that one of the reasons of her going in and out of homelessness was because her income does not change. Janet is determined to be housed but there are few housing options for disabled.

Maddy was talking about her transitioning out of homelessness. She and Joel were able to find a small place outside of King County that was affordable:

*“I made enough money so that we could get this little farmhouse. We got this hundred-year-old, 250 square foot cabin on a farm and it was 500 bucks a month, all utilities included. We lived on five acres with animals and stuff.”*

Even though Maddy and Joel recommended safe lots, they are a transitional piece in getting out of homelessness. All the participants who exited homelessness found roommates, other family members, or found an affordable place. The two participants who were experiencing homelessness during the interview depended on disability.

## **Discussion**

The research shows that vehicle residents have specific needs that are tailored to living out of their vehicle. Specifically, those needs are finding safe, legal places to park at night and vehicle maintenance. The research method uses the perspective of the participants lives in order to understand more about resources for vehicle residents. Therefore, the purpose of the study is to determine the specialized needs of vehicle residents to make recommendations on resource allocation between stakeholders.

Past home environment from the participants shows that they come from a background of trauma. Participants were exposed to physical, sexual, and emotional abuse, that involved the use of drugs and alcohol. Majority of participants experienced homelessness as a youth. This is also found in Coats (2010) study on interviewing homeless youth about their trauma. “The results indicate that trauma is both a cause and a consequence of youth being homeless, as a large majority of participants experienced a number of types of highly stressful events both preceding and during homelessness, and that trauma in the lives of both male and female homeless youth should be understood as a pervasive reality with serious implications.” When unsafe situations presented

itself in the home environment, their vehicle was the only safe option. Jessica was molested by her father who also was an alcoholic. Her family members thought it was a mistake, and fear that he would continue to molest her, she became homeless. For Maddy, when her father passed away, her mom was the only person she could go to. Her mom was in prison for over 20 years and addicted to drugs. Dangerous people were coming in and out of her home and she did not feel safe.

Common symptoms of psychological disorders from the participants past and while homeless were PTSD, anxiety, and depression. PTSD came from either abusive people in the past or being exposed to unsafe people in the community. The stress of trying to take care of your basic needs created anxiety of not have predictors in their lives. When participants were asked to talk about a typical day as a vehicle resident, most responded that each day can be drastically different. Depression came from not knowing how to fix their situation or being frustrated knowing they are helpless. Marcus expressed that being homeless strips away who you are as a person. Being around their peers was one way to help participants cope with depression. Jessica and Maddy used drugs and alcohol as another way to cope with their mental health. As Hudson (2010) put it in her qualitative study on homeless youth drug users “negative health consequences experienced by homeless young adults include sexually transmitted infections, poorly controlled chronic mental illness, and lack of immunization for conditions, such as hepatitis A and hepatitis B.” In addition, Maddy and Jessica accessed health care services to address medical and mental health issues. As discussed in Edidin’s literature review, (2012) youth typically used health care services to address substance use, mental health, trauma, and chronic conditions.

For participants’ physical safety, the study shows that safety concerns happen when sleeping in their car at night, and unpredictable people in the homeless community. Janet alternated from sleeping in shelters and her vehicle. She expressed that sleeping in her vehicle seven days a

week was not safe. Jessica had a similar perspective and stayed in shelters when she was able to. She also experienced sexual abuse in the shelter, and while in the community she had a knife pulled on her. Maddy who lived in a van, stayed with a man who was abusive and tried to sleep with her. She had others who lived in the van who protected her from him.

The research shows that finding places to park at night proved difficult for all participants. Walmart, Park and Rides, parks, neighborhoods, and businesses were common places vehicle residents parked. Moving their vehicle from location to location was common to avoid traffic ordinances. Sol et al., (2016) in her research about homeless vehicle ordinances found similar findings of vehicle residents moving vehicles: “Vehicle residents are often required to move their vehicles frequently throughout the city in order to stay in compliance with time and location restrictions.” Joel’s experience with police for parking were different depending on the metropolitan location. Some police would be quick to tell him to move on, while others will ask him several questions about what he was up to. As for Alex and Robbie, they preferred to be away from city limits when possible to avoid harassment from police and people.

All the participants expressed that being a part of their community is important. The results of my study found similar pathways identified in Chamberlain and Johnson’s study. Participants experiencing mental health issues were either still homeless or took longer to exit out of homelessness. Youth participants were integrated in the subculture more than older participants. However, older participants used homeless community as more resourced based than socially. The community can provide resources such as sharing belongings, safety, and social supports. Even though my study acknowledges that the community can be at times harmful, being around peers who understand your situation can help cope being homeless. The homeless community provides

challenges such as being taken advantaged of their resources and unsafe people. Maddy states that homeless people who appear to be “better off” can be targeted by other homeless people.

Resources participants accessed were free meal services, drop in centers, case managers, counselors, and shelters. All the participants either used EBT, food stamps, or food banks as a consistent resource. Drop in centers were useful for Maddy when accessing female hygiene supplies. In relation to Chambers study on ED visits three participants from my study use some sort of ED service e.g. clinics and hospitals. All participants expressed that they felt unsafe in their vehicles at night, especially women. Therefore, there could be a relationship with frequent ED visits with vehicle residents in addition to other homeless subpopulations. Also, case managers were useful for Jessica to get connected to housing services. Both Alex and Jessica had access to counselors and therapists to address their mental health. Jessica and Janet used shelters while the other participant chose not to.

Barriers to resources were access to some of the services shelters provide, the shelters themselves, and car registration. Jessica stated that getting case managers to work with her was a constant struggle of finding them and helping you. Janet used shelter because she did not feel safe sleeping in her vehicle seven days a week. The other participants did not use shelters due to being full, poor conditions, scared of other people in the shelter, and unprofessional actions. Car registration for Joel was not possible due to failing emissions in California. In order to not lose his home, he moved back to Washington.

**Recommendations.** The three main recommendations from the research were safe parking, more services for women and LGBTQ, and housing services. Therefore, my recommendation as to what resources vehicle residents need are safe parking programs. Safe parking programs provide vehicle residents a safe, legal place to park while connected to services.

If King County can model safe parking programs as discussed in Ivey's case study on New Beginnings and Dreams of Change, we can meet some of the specialized needs of vehicle residents. The Vehicle Residency Report recommended safe parking programs and hygiene services such as waste collection. The report and Skinner's research on vehicle ordinances suggest that we need to investigate the laws and policies that negatively affect vehicle residents. Below, each theme will be addressed about how safe parking programs can be a potential solution to address vehicle residency needs.

Safe parking programs can be a solution to addressing the individuals past home environment and mental health. If someone has become homeless due an unsafe home environment, the parking program can provide them a place to go. Case managers and counselors could be hired to work with clients to address their mental health. For vehicle resident's safety, security or staff could monitor the lots for any unsafe behavior. Parking at night will reduce the stress of frequently moving, decrease vehicle ordinances, and save money on vehicle maintenance. Potentially, safe parking programs could offer small grants to pay off long existing parking tickets, gas cards, and general maintenance assistance. Safe parking programs could also benefit the homeless community to interact with each other in a positive way. Programs can lead community events, host weekly dinners, and help maintain the program. Once safety and basic needs are met, the community will not be presented with some of the challenges they face on the streets. Resource such as hygiene services, trash collection, internet access, and meals could be provided with a safe parking program. It would reduce the barriers vehicle residents face due to proving safety, access to services, and reduce vehicle maintenance. Finally, for recommendations by the participants, safe parking programs can be designed to tailor to women, the LGBTQ community, and provide an alternative solution to shelter access. I recommend that King County and other stakeholders

consider safe parking programs when deciding where emergency funds are being allocated. The overall goal of ending homelessness is to get people housed. Safe parking programs are not the solution to the problem, but it is an alternative way of providing emergency services to vehicle residents.

### **Limitations**

This study had several limitations that provide the opportunity for further study. Even though this study has a geographical restriction, not all participants experienced homelessness in King County. Four out of the nine participants experienced homelessness in King County, while others were in different counties such as Skagit, Kitsap, and Snohomish. One participant experienced homelessness in San Diego, and two others traveled the west coast living in Washington, Oregon, and California. Due to time constraints, the sample size of the study is small and may not be generalizable. Exploration into different demographic populations in addition to interviewing vehicle residents would bring more accuracy to the data. Some demographic populations to consider could be based off youth, adult, elderly, and minors. In addition, female, males, other gender identities, race, and immigrants should be considered in further studies. Considering that many vehicle residents in this study lived in sedan type cars, an analysis of the same study but with a different vehicle type would add accuracy. Interviewing people who are enrolled in a safe parking program could add validity to the safe parking program recommendation. Another recommendation of further studies is to explore specialized needs of other subpopulations of homeless such as chronic and street homelessness, encampments, and folks who have insecure housing.

### **Implications**

This study has important implications on the specialized needs of vehicle residency. There has been little research on vehicle residents and their specialized needs. The study adds to the history of homelessness in general by adding vehicle residency to the literature. This study identified accessing safety and vehicle maintenance were a common need. Shelters are not always an option for vehicle residents due to issues parking their car overnight. Other barriers to shelters are their conditions and overcrowding. Their car is a major priority to ensure nothing happens to it. If their car was towed or at risk losing their license, they would end up on the streets. Not having access to safety is not the only concern but getting connections to other services shelters provide are being deprived to vehicle residents. How funds are allocated to emergency services, and policy regarding vehicle parking, should consider the needs of vehicle residents. Policy implication that were identified in this study have serious altercations to the lives of vehicle residents. A review of traffic ordinances that hinder the access to services and criminalization of daily living activities should come from the perspective for those who depend on their vehicle for safety. Providing safety as an emergency services needs to be addressed to provide social justice and equity to vehicle residents such as implementing more safe places to park. Finally, implications of this study show the underrepresentation of vehicle residents, and their needs not being currently addressed. Vehicle residents experience hardship due to the lack of awareness of the needs this homeless subpopulation has. If we want to provide better access to services, we need to identify their needs and acknowledge that they are different than other subpopulations of homelessness.

## Appendix A: Interview Protocol

### Demographic information

What type of car did you live in when experiencing homelessness? (SUV, RV, Sedan)

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How old are you? (must be 18 or older to participant)

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What gender do you identify as?

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What race/ethnicity do you identify as?

---

How long have you experienced (or experiencing) Vehicle residency?

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Before beginning, ask the participant if they have any other questions before the interview.

### Interview Questions

1. What was your childhood like growing up? Economic status? Family dynamics?
2. What life events do you believe contributed to you becoming homeless and experiencing living in your vehicle?
3. Can you walk me through a typical day for you? (routines and rituals). Where do/did you sleep most nights? Did you feel safe? Have you received any parking violations? How did/do you manage to maintain your vehicle?
4. People may define resources differently, how would you define resources?
5. What resources did you use when you were/are experiencing homeless? Why were you using them? What was helpful for those services? What could be better?
6. Did you experience any barriers trying to obtain certain resources? Why do you think that may be?
7. What recommendations do you have for those who are still living in their vehicles and how they can get help? What resources do you think that state/county should provide for those who are transitioning into housing?
8. From your experience, do you see any successes? What does success mean to you? How could (organizations, local government, friends/family, etc.) be more helpful in achieving that success?"

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