THE CONSTRUCTION OF HOMELESSNESS IN TULSA, OKLAHOMA AS A SOCIAL PROBLEM

Ву

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Thesis Approved:

Dean of the Graduate College

Thesis Adviser

PREFACE

Writing this thesis has been a taxing ordeal, but finally it is done. The bulk of the data used in this study was collected as the TMM Day Center Survey. The supplemental information was also collected by the TMM Day Center. Despite the politics involved in obtaining the data set, I am glad that I was able to analyze this information.

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TABLE OF CONTENTS

Chapter									F	age)
I. II	NTRODU	CTIO	N							1
II. R	EVIEW	OF T	HE LIT	'ERATUI	RE					7
	Th Sp	eore ecto	tical r and	Consid Kitsus	 lerationse's So	ons ocial	Prob	 lem		7 12
	Co	nstr	uction	Schen	ne		· · · · ·		• •	14
III. M	ETHODS									17
IV. RI	ESULTS	AND	ANALY	SIS .						25
	Da	уĈе	nter		a Met: Qualit					25
										29
V. D	ISCUSS	ION	AND CC	NCLUS	ио					42
BIBLIOGRA	APHY									47
APPENDIC	ES									50
APPI	ENDIX				POLITAI EY					51
APPI	ENDIX		PHYSIC	AL SE	ATION I PARATION ULATION	ON FRO	OM THI	<u> </u>		62
APP	ENDIX				EQUATION BLES					63
APP	ENDIX		PEOPLE	: IN 15	NUMBE SELEC	CT U.S	S.			65

LIST OF TABLES

Table	Page
 Demographic Characteristics of the Sample and the Population 	19
 Reliability and Factor Loadings for Physical Separation Scale 	22
3. Communalities and Eigenvalues for Physical Separation Scale	22
4. Frequencies and Measures of Central Tendency of Items Most Associated With This Study	29
5. Pearson Correlation Matrix for Select Variables	
6. Frequencies of Daily Visits to TMM Da Center From February to September of 1986	
7. Percentages of Daily Visits to TMM Da Center From February to September of 1986	
8. Frequencies of Daily Visits to TMM Da Center From April to June of 1986 (Time of the Survey)	
9. Percentages of Visits for April to Ju (Time of the Survey)	
10. Total Visits and Total Different Peop to Visit the TMM Day Center from February to September of 1986	

CHAPTER I

INTRODUCTION

Undoubtedly, migration and "homelessness" reflect environmental pressure. There has hardly been a time in U.S. history when there was not a segment of the population that was perpetually transient. Likewise, there has always been a segment of the post-industrial population that has been known by any number of names indicating the lack of a permanent address: bums, hobos, vagabonds, tramps, and street people. These people and the subculture associated with them have constantly been the theme of movies and other fictional expressions, but nonetheless, lack of a permanent address has never been in vogue. In the past ten years, the faces of this group have changed, and their lot has grown. Now they are known as the "homeless", and "homelessness" is viewed as a national problem.

In a controversial study conducted by the U.S. Department of Housing and Urban Affairs, (1985) it was estimated that there were some 250,000 to 350,000 homeless people in the U.S. and the condition was thought then to be worsening. The plight of the homeless has captured the fancy of a plethora of persons. Entertainers, politicians, and

clergy have made homelessness a social, political, and moral issue.

As of July 1986, in 15 select U.S. metropolitan areas, there were approximately 286,500 homeless people (National Coalition for the Homeless; see Appendix D). In as much as homelessness became more of major concern in many metropolitan areas, agencies that had once been able to handle relatively small numbers of homeless people had to modify their operating procedures to accomodate larger numbers of people. In some metropolitan areas, the swelling number of homeless people brought about a need for additional facilities; Tulsa, Oklahoma was one such city.

Tulsa is a city of 373,000 (SMSA population, 691,100, Information and Research Division, Oklahoma Department of Commerce, 1988), located in Northeastern Oklahoma on the Arkansas River. Tulsa was founded as a Creek Indian village in 1832 and was incorporated in 1898. It has grown to cover some 180 square miles. Tulsa is the 38th largest city in the U.S. and the second largest city in Oklahoma in terms of population. It serves as the county seat for Tulsa County and is also a center for transportation, manufacture, energy technology and aeronautics. Of the 272,430 people within a thirty mile radius of Tulsa that make up its potential labor force, 232,125 are employed. Its largest employer is American Airlines, which currently employs about 6,000 people.

Tulsa serves as the home to two private institutions of higher education, the University of Tulsa and Oral Roberts University. Also located in Tulsa is the University Center at Tulsa (UCAT - a state sponsored consortium with the University of Oklahoma, Oklahoma State University, Northeastern State University and Langston University participating in a joint effort to provide upper-division and graduate level courses for people in Tulsa). Tulsa is also the home of the University of Oklahoma Tulsa Medical School and the Oklahoma State University School of Osteopathic Medicine. Spartan School of Aeronautics is also in Tulsa.

In terms of recreation and entertainment, there are 115 city or county parks in the metropolitan Tulsa area. Tulsa is also home to a Texas League baseball team (the Tulsa Drillers) and a Continental Basketball Association team (the Tulsa Fastbreakers). Tulsa is also home to two of the premier museums in the Southwest (Gilcrease and Philbrook). Tulsa has its own ballet company, philharmonic, and several community theatre groups that perform during the entire year. Additionally, there are any number of annual events that people in Tulsa look forward to attending. There is the "Mayfest" celebration and art fair in the spring, the Greenwood Jazz Festival in the summer, the "Oktoberfest" and the Tulsa State Fair in the fall.

Many of the events that occur in Tulsa take place outside of the central hub of the city. But the

renovations that have been done to the area of Tulsa near the Arkansas River have revitalized the downtown area. The Williams Center and its adjacent Forum; the Bartlet Center for the Performing Arts; the Maxwell Convention Center; the Metro Campus of Tulsa Junior College and the UCAT campus have all contributed to the new "buzz" in the Downtown Tulsa area.

It seems odd then, that in the midst of all of the economic growth and development, some of Tulsa's most indigent citizens had been virtually unnoticed. Like many urban centers in the U.S., Tulsa has always had a section of town, adjacent to the downtown area that was the sight of abject poverty, vacated buildings, half-way houses, relief centers and the like. Until the mid-1980's, these centers of refuge had seemingly been adequate enough to "handle" the needs of the poor and destitute. Perhaps as an artifact of the economic pressures that the plagued the entire country, the number of waif people who huddled together in the Downtown Tulsa area encreased greatly. Many of the people, with no place to go and no where to call home, began to use public facilities as their own. After several incidents in which the patrons of the Downtown branch of the Tulsa City-County Library complained about people sleeping in the library building and otherwise disturbing them, a library employee contacted a local social services agency. During this same period of time, the staffpersons of the existing shelters

became increasingly worried that their facilities would no longer be able to accommodate the needs of all of the homeless people in that area of Tulsa. Through cooperative community efforts and the financial support of the Tulsa Metropolitan Ministry, a task force on Homelessness was formed. The task force, after taking inventory of the needs of the homeless people of Tulsa decided to provide a day center.

The Tulsa Metropolitan Ministry Day Center for the Homeless was opened in February of 1986. The Day Center is located near downtown Tulsa, in an area that is also the headquarters for a number of places that cater to the needs of the indigent of Tulsa (such as John 3:16 Mission and the Salvation Army Center). According to the Metropolitan Human Services Commission of Tulsa (1988), there are an estimated 1,000 homeless persons in Tulsa. During the months of April through June of 1986, the Tulsa Metropolitan Ministry conducted a study on a sample of 100 of its patrons (interviews were conducted on a voluntary basis). This thesis focuses upon the construction of homelessness in Tulsa, Oklahoma as a social problem and upon the origins of the Tulsa Metropolitan Ministry (TMM) Day Center for the Homeless. The primary source of information in regards to the homeless of Tulsa is the results of the aforementioned study. Through the use of secondary analysis techniques, I found that the majority of the patrons were not natives of Oklahoma and that

homelessness and general economic hardship are inextricably linked to one another. The general conclusion of this thesis is that homelessness must be considered as a result of many structural variables that the individual homeless person has little or no control over.

CHAPTER II

REVIEW OF THE LITERATURE

Previous Research

In 1962, Michael Harrington's controverisal, but thought-provoking book, The Other America was first published. Harrington told of a bifurcated society that was becoming more and more separate with each passing year. Further, Harrington asserted that because poverty in the U.S. takes place in a relatively affluent society, it is ignored by the vast majority of the populous. Twenty years later, the "other" America still existed but it had grown and begun to encompass a slightly different lot of people than it had previously. Nonetheless, the methods used to study and allegedly help these people stayed the same. Much of the early research on the subject of homelessness focused on the connection between homelessness and the emotional/psychological problems of the homeless. C. Wright Mills (1959) contends that the "sociological imagination" is the abiltiy to view individual behavior in relation to the larger social context in which the behavior is displayed. In fact, the debate between people who advocate this view of homelessness as an

individual/personal (individually caused) pathology and others who hold that homelessness is a social problem (socially caused) is perhaps one of the factors that has prevented any great resolution to the situation of the homeless.

In an ethnographic study of 168 homeless people in Austin, Texas, Snow and Anderson (1987) found that the people classified as "homeless street people" have self-identities that center around one of three basic patterns of behavior:

- 1. distancing- the people tend to purposefully separate themselves from other homeless people and from the general public
- 2. embracing- the people are very open and try to establish strong ties with other homeless people and the general public.
- 3. fictive story telling- the people have a story for everything, they have done and seen almost everything, and have traveled extensively.

The authors conclude that these three basic profiles of homeless people could be indicative of a number of different types of psychological problems that could be precursors to homelessness. In 1984, Bassuk, Rubin, and Lauriat found that the general psychological disposition of the homeless is less cheerful than that of other poor people and the general population. In fact, their mood was the most pessimistic of the three groups. The researchers concluded this mood is not neccessarily

antecedant to the homelessness, but rather a result of it.

Crystal (1984), in a study of homeless men and women in

New York City found that homeless women have a history

of psychiatric treatment, while homeless men have a history

of incarceration.

Other studies on homelessness and the homeless have had slightly different focal points, and thusly have revealed different kinds of results. In 1986 Wiegand found that the average number of homeless people in Nashville, Tennessee was 822 and that the composition of the homeless population changed seasonally. Peterson and Wiegand (1985), through the utilization of four sources of information (data from the U.S. Department of Housing and Urban Development, 80 taped interviews with homeless people in Nashville, participant observation and discussions with workers at homeless centers in Nashville) found that there is a "culture of tramps", which consists of six distinctly different types of homeless people. These findings are echoed by the findings of the Metropolitan Human Services Commission of Tulsa. This commission found that the homeless people of Tulsa can be divided into seven distinct groups. They further concluded that only 30 to 50 of Tulsa's 1000 homeless are "street people" (i.e. perpetually homeless) (Tulsa World, Saturday, August 13, 1988).

As stated in the previous chapter, there are an estimated 250,000 to 350,000 homeless people in the U.S.

If this estimate is true, then these people only constitute between 0.01% to 0.14% of the U.S. population.

Nevertheless, in many metropolitan areas, the proportion of the population that is homeless is quite a substantial number. Bassuk (1984) found that in the winter of 1983, there were more homeless people in the U.S. than there were at any other time except during the great Depression. Further, in her study of homelessness in Boston, she found that unemployment, lack of low-rent/cost housing, cuts in government benefit programs, and changes in dealing with the mentally ill were the primary reasons for increases in the number of homeless. Freeman and Hill (1987), found in their study of homelessness in New York City that the homeless population is growing (especially homeless families). They also found that homelessness is a chronic, long-term condition for many people. This study also pointed out that a great deal of homelessness can be considered an artifact of the number of poor in the 1980's, and that a decline in the number of low rent housing units has contributed to the number of homeless people. Surprisingly enough, very few of the homeless are the recipients of government benefits.

Many homeless have spent time in jail. Main (1986), in a study of homeless families in New York City, echoes these findings. He concludes that homelessness is an artifact of three major causes:

(1) a housing market whose prices have soared, (2) the

shelter policy of New York City, and (3) a greater history of behavioral and psychological problems among the homeless. Snow, et.al.,(1986) found that most of the homeless people in Texas are people caught in a cycle of low paying, dead end jobs: jobs that don't allow people to advance.

Other studies have looked at slightly different economic factors as the root of increased homelessness. According to Hopper, Susser, and Conover (1985), gentrification and the increase in the service industry economy in New York City have widened the gap between the poor and the non-poor, and have further facilitated a more bifurcated economic system. Hence, the number of homeless people in New York City is increasing. Baxter and Hopper (1982), in an ethnographic study of the New York homeless over a period of 15 years, found that the composition of the homeless of that city has expanded from the chronically unemployed and the marginally mentally handicapped to now include the once employed and the marginally physically handicapped.

All of these studies, while different in their orientations, methodologies, and results, do show some common themes and recurrent correlates with homelessness. The two primary characteristics that stand out are:

1. the homeless as a group of people who have been physically separated from the general population through incarceration in either criminal or mental institutions. the homeless as a group of people who are unable to find and/or afford adequate housing because they cannot procure sufficient economic resources.

Theoretical Considerations

In the aforementioned studies of homelessness, there is seemingly very little discernable consensus among the researchers about a clear theoretical explanation of this problem. Perhaps this is because individuals from a number of academic backgrounds have been the primary investigators of this subject. It is possible to view homelessness from any number of theoretical perspectives. Of the three prevalent paradigms within sociology (structural-functionalism, interactionism, and conflict), only one of these paradigms (conflict theory) has been utilized to any great extent as a theoretical crux for an explanation of homelessness. Marcuse (1988), employed conflict theory in his investigation of homelessness. In his critique of current policies regarding homelessness, he has embraced the conflict perspective. Through this perspective, he has surmised that the sudden public interest in homelessness is because capitalism has created homelessness and it (capitalism) must try to solve homelessness because the very existence of homelessness threatens the legitimacy of capitalism as a viable form of productive economics. Marcuse's approach, utilizing a general conflict perspective lends itself to the notion

that homelessness is an indication of a lack of a very valued resource in our society (a permanent shelter).

While this approach may seem applicable to any study of homelessness, this approach does not specifically establish why and how homelessness became a social problem per se. For this reason, I have chosen to study homelessness from the social constructionist perspective as proposed by Spector and Kitsuse. I believe that this theoretical perspective is an appropriate mechanism in which to base an analysis of homelessness in Tulsa because of the major assumptions of social constructionist theory. This view holds that social problems must first be recognized as such by people who are in positions to effect change in the way that people view a given social situation. I propose that in this specific case that the issue of homelessness in Tulsa. Oklahoma is related to the manner in which it was constructed as a social problem by Tulsa Metropolitan Ministry.

It is often taken as a given in sociology that there are certain discernable social problems in any society. Structural-functionalism maintains that social problems arise out of a lack of consensus, but that these problems have a purpose in society. Conflict theory holds that social problems arise because of the constant upheaval in the social arrangements of a society. Merton and Nisbet (1961) state that a comprehensive theory of social problems has yet to exist. They further acknowledge the

fact that social problems are defined and viewed in a plethora of ways. Typically, a social problem is thought to be any social situation or condition that causes people undue duress. Eitzen (1983) enumerates specific social problems in American society, yet he points out that it is very hard to arrive at a clear definition of the term "social problem". The aforementioned theorists and others agree that most definitions (and in turn most of the phenomena that are considered as such) fall short of capturing the full essence of what a social problem really is. Thus enters Spector and Kitsuse and their Social Constructionist Theory. Their theory does not hold to the standard definition of social problems. In fact social constructionist theory as espoused by Spector and Kitsuse (1987) states that there is not an adequate definition of social problems within sociology. They then proceed to establish their view of how social problems are constructed.

Spector and Kitsuse's Social Problem
Construction Scheme

Stage 1: Assertion that some condition is societally unacceptable.

Stage one of the process involves making the initial claim that some situation in society is not acceptable.

Crucial elements involved in this step of Social

Constructionist Theory are who the claims makers are and

their ability to articulate their opinion. The ability to validate the claim is predicated in part upon the power of the group making the claim and the level of the organization of the people making the claim. (This part of the theory is somewhat akin to the notion of Thomas of the "definition of the situation", 1937). Other factors involved in getting a condition recognized as a social problem are: the validity of the definition of the condition, the visible level of dissatisfaction with the condition and the ability of the group making the claim to offer concrete solutions to the problem. Most importantly, the people making the claim must be able to publicize the problem to a wide range of people.

Stage 2: Recognition of the group making the claim.

Stage two of this process involves some official organization that can do something about the claims raised, recognizing the group as having a valid point in viewing the condition as a problem. This official organization then adds to the legitimacy of the group making the claims by responding to the claims.

Stage 3: Reiteration of the claims

Stage three involves the original complaints being raised again by the group who first made the claim and/or others who are displeased by the official solution to the problem.

Stage 4: Rejection of official action

Stage four involves developing new strategies for voicing complaints. This step also includes stating displeasure with the official action and offering solutions other than those already in use.

This strategy proposed by Spector and Kitsuse does not preclude that at any one stage the condition which was viewed as a social problem can be solved. By employing the Social Constructionist theory of Spector and Kitsuse, this study proposes to overcome the problems faced in other studies of homelessness because the focus of this study is how the increase in the number of visible indigent people in the Downtown Tulsa area became perceived as an unacceptable condition. In this specific instance, I contend that homelessness in Tulsa, Oklahoma was constructed as a social problem.

Because this study is a historical analysis of the origin of the TMM Day Center for the Homeless and a descriptive study of the center and of the population that it will serve; there were no specific hypothesis in reference to homelessness that were tested.

CHAPTER III

METHODS

It should be noted that the intent of the collection of this data was to provide the TMM Day Center Staff and the TMM Task Force on Homelessness with a demographic profile of the patrons of the center. It should also be noted that this data collection was done as a TMM directive. Finally, it should be reiterated that this thesis is a descriptive study.

Data presented in this study were gathered through the auspices of Tulsa Metropolitan Ministry during the spring and summer (from the month of April through the month of June of 1986). One hundred patrons of the Tulsa Metropolitan Ministry Day Center for the Homeless participated in the study. These people voluntarily participated in this study. The survey was designed to include input from workers at the center. The interview instrument consisted of five sections (see Appendix A). The interviews were conducted in person, at the Day Center and the interviewers had been rehearsed in the process of interviewing the participants. The supplemental data in the Results section was provided the by Day Center director and is result of the daily count of patrons at

the Day Center. Homelessness was operationalized as one's presence at the center. The descriptive statistics are reported in Table 1. The results of the Pearson Correlation test performed on some select variables are found in Table 5. Also one set of seemingly related items was combined and used as a scale to measure participants degree of physical seperation from the general population through some type of incarceration. The results of reliability and factor analysis procedures are recorded in Tables 2 and 3.

In reference to the Spector and Kitsuse model, the following time table is a guide to the establishment of the TMM Day Center for the Homeless.

Stage 1 (February 1985-May 1985): As the number of visible indigent people in the downtown Tulsa area began to swell, a number of various people in the area (including those who had been dealing with this situation before) perceived that something had to be done. Simultaneously, an employee of the Tulsa City County Library contacted an employee of a local service agency.

Stage 2 (June 1985-December 1985): This contact led to a member of the Tulsa Metrpolitan Ministry (TMM) Board of Directors becoming involved in the legitimization of the claims making process. Finally, the TMM Board of Directors created the TMM Task Force on Homelessness and together, they established the TMM Day Center for the Homeless.

In this particular situation, and at this particular

time, only stages one and two of the model proposed by Spector and Kitsuse have been executed. Only time will tell if the entire cycle will be completed. I believe that if the current rate of increase in the number of homeless people in the U.S. continues, Tulsa will find itself in a position in which the TMM Day Center will not suffice as an adequate solution to homelessness.

Table 1 compares the general demographic characteristics of the sample to those of the general population of Tulsa. In terms of the demographic characteristics of the sample in comparison to the demographic characteristics of the population of Tulsa, we find many interesting results. As one reads Table 1, note that the total sample size is the 100 patrons of the TMM Day Center and not the estimated 1,000 homeless people of 1 Tulsa and that the population total of Tulsa is 373,000).

TABLE 1
DEMOGRAPHIC CHARACTERISTICS
OF THE SAMPLE AND
THE POPULATION

Characteristic	Sample Statistic (N=100)	Population Parameter (N=373,000)
Median age	37 years old	30 years old

TABLE 1 (Continued)

Characteristic	Sample Statistics (N=100)	Population Parameter (N=373,000)
Percentage male	75% male	49.6% male
Median years education	10 years	12.8 years
Median yearly income 2 Racial/Ethnic Background	\$1,290.00	\$17,719.00
Euro-American African-American Native American Hispanic Other/unreported	16% 1%	81.4% 11.66% 3.76% 1.71% 0.65%

As was stated in Chapter 2, this study was not formulated to test any specific hypotheses in regards to homelessness. In the interest of seeing how this sample of homeless people compared to the bulk of the homeless people who were referred to in the aforementioned chapter, certain statistical procedures were excecuted on selective parts of the data. Based in part upon the notion that seemingly pervaded a great deal of the literature about the homeless (see Chapter II), one scale was created in reference to the idea of the homeless as persons who had been physically separated from the general population through some type of

incarceration. The relationship between physical separation from the general population and homelessness seemed to be one of the most salient issues involved in studies of homeless people. In the survey instrument there were five questions that dealt directly with the issue of being detained in either a penal, psychiatric, or chemical dependency institution/center. These questions were stated as follows: "Have you ever been in jail or prison?", "Have you been hospitalized for psychiatric reasons?", "Have you ever received counseling/treatment at a community mental health center?", "Have you ever been in an alcohol treatment program?", and "Have you ever been in a drug treatment program?". For the purposes of scale construction, all affirmative answers were coded to equal 1 and all negative answers coded to equal 0. Next, each individual question was standardized. Finally, these z-scores were added together to create the scale.

This scale created using the aformentioned information consisted of the standardized results of those five questions. Tables 2 and 3 report the results of factor analysis and reliability procedures.

TABLE 2
RELIABILITY AND FACTOR LOADINGS
FOR PHYSICAL SEPARATION SCALE

Variable Label	Mean	St.D	Factor Loadings F1	F2
Have you ever been jailed?	0.0266	0.9930	-0.3906	0.3315
Have you ever been hospitalized for psychiatric reasons?	0.0456	1.0392	0.6363	0.2339
Have you ever receive counseling/treatment at a community mental health center?		1.1110	0.5924	0.4457
Have you ever been in an alcohol treatment program?		1.0176		0.6437
Have you ever been in a drug treatment program?	n 0.0210	1.0158	-0.2341	0.2805
			Scale All Unst.	phas St.
Physical Separation Scale	0.4959	2.7225	0.3448	0.3434

TABLE 3
COMMUNALITIES AND EIGENVALUES FOR PHYSICAL SEPERATION SCALE

Variable Label	Communality	Eigenvalue	%Of Variance
Have you ever been jailed?	0.15035	1.65625	33.1%

TABLE 3 (Continued)

Variable Label	Communality	Eigenvalue	%Of Variance
Have you ever been hospitalized for psychiatric reason?	0.25608	1.39883	28.0%
Have you ever recei counseling/treatmen at a community ment health center?	t al	0.82383	16.5%
Have you ever been an alcohol treatmen program?		0.63406	12.7%
Have you ever been an drug treatment program?	in 0.08180	0.48704	9.7%

The scale mean was 0.4959 and the standardized alpha was 0.3434. The factor analysis procedure revealed that the question "Have you ever received counseling/treatment at a community mental health center?" had the highest communality score. There were two factors extracted from this scale. The question "Have you ever been hospitalized for psychiatric reasons?" had the highest factor loading on factor one (0.6363), and the item "Have you ever been in an alcohol treatment program?" had the highest factor loading on factor two (0.6437). Two items in this scale

reported eigenvalues that exceeded one ("Have you ever been jailed?", 1.65625, explaining 33.1% of the variance, and "Have you ever been hospitalized for psychiatric reasons?", 1.39883, explaining 28.0% of the variance).

The information in reference to the population of Tulsa is based upon the 1980 U.S. Census and projections by the Oklahoma Department of Commerce.

The terms used in the narrative for different ethnic/racial groups are the terms that the author prefers. See Appendix A for the terminology employed in the TMM Day Center survey.

CHAPTER IV

RESULTS AND ANALYSIS

Background of Tulsa

Metropolitan

Ministry Day

Center

Tulsa Metropolitan Ministry is a social organization located in the Urban League office of Tulsa, Oklahoma. TMM is an ecumenical group of clergy and lay persons from various Christian denominations and the Jewish community in Tulsa. TMM's membership includes representatives from some 150 various congregations in Tulsa (Fact Sheet, Tulsa Day Center for the Homeless). It is a hiearchically, bureaucratically arranged organization. The TMM Board of Directors is elected by the general membership of the organization. This board is responsible for hiring the staff of TMM. Currently, they employ a full-time executive director, a full-time assistant executive director and an administrative assistant. This not-for-profit organization has an extended history of being active in charitable and community service work throughout Tulsa (especially on its North and West sides, where the majority of the poor people and people of the four major ethnic/racial domestic minority groups in Tulsa live). In 1979, the Hunger Task Force of TMM did an extensive study of the nutrition of the poor of Tulsa which was instrumental in changing many of the policies that had been established for food distribution to the poor of Tulsa. Also, TMM has a history of contributing great amounts of time, energy and financial support to the efforts of other social service agencies in Tulsa. TMM has facilitated summer youth activities and summer youth employment programs. TMM has also been instrumental in programs for the elderly and has been an essential part of Tulsa's effort to lessen its rate of illiteracy.

In 1985, the staffs of various social service centers for the indigent noticed that there had been an increase in the number of indigent people who could be found in and around the downtown Tulsa area. Further, the staff people of these places noted that they had recently been hard pressed to accomodate all of the people in need. They (the staff members) were concerned their clients would not have their needs met if something could not be done. Also, and perhaps more importantly, during this same period of time, a great number of indigent people, driven by the harsh Northeastern Oklahoma winter, had begun to congregate in the downtown branch of the Tulsa City County Library. Often, the indigent used the library restrooms as their own private bathrooms. On many occasions, the

indigent people would be intoxicated or would otherwise disturb the patrons of the library. Because of this situation, the library director contacted the director of the Tulsa Community Service Council. After a short meeting, they decided to present the problem to a larger audience. Concerned citizens (including the staff people of existing shelters) and these two individuals approached a TMM board member. Based upon the observations of the group of concerned people, this TMM board member then proceded to bring up the issue of the Tulsa's growing homeless population to the TMM board of directors. Upon the authority of the TMM board of directors, the board member formed the TMM Task Force on Homelessness. The task force included many of the people who had made the original claim, but also included people who had been made aware of the problem of the growing number of homeless people in Tulsa due to their involvement with TMM. The first act of the task force was to conduct an in depth needs assessment of the plight of the homeless in Tulsa. After a review of the needs assessment, the TMM Task Force on Homelessness and the TMM Board of Directors concluded that the best possible immediate solution to the problem of homelessness would be to establish some sort of day-time haven for the homeless as opposed to opening a 24-hour shelter. Next, the TMM Board of Directors and the TMM Task Force on Homelessness began a search for a director of the proposed center. A director was hired in June of 1985. Next the

center director, the assistant executive director of TMM. and other members of TMM Task Force on Homelessness began to search for a place in the downtown area where the center could be housed. An abandoned building located at 210 North Denver Avenue, directly across the street from the Salvation Army Social Service Center was procured. After extensive discussions with people who had already worked in this area of social services, the TMM task force decided that the day center should and could offer the homeless a number of services. The task force then decided that neccessities such as personal hygiene facilities, clothing and food should be top priorities. Other services that the task force viewed as very important and in turn provided were outreach workers from other social service entities. After the task force established these provisions, the TMM Day Center for the Homeless was opened in February of 1986. The period of time involved in this entire process from the inception of the idea through to the online functioning of the TMM Day Center was eleven months (February 1985 to January 1986). As is evidenced in this synopsis of how the TMM Day Center for the Homeless came into being, it should be noted that issues such as providing or facilitating employment or job skill acquisition or a permanent home were not major priorities of the TMM Board of Directors or the TMM Task Force on Homelessness. Their primary concern was that the indigent had their immediate personal neccessities met. As the Day Center

director stated:

"The center provides a focal point for the person on the street. We can attempt to know them by name and give them a smile and ask how they are...A hot cup of coffee awaits them in the morning after a long night on the street. Fresh clothes, a shower, shave, toothbrush and toothpaste...all make a difference. Getting clean does wonders for the individual's self esteem."

Quantitative and Qualitative Information

Although there was a plethora of information contained in the data set, for the purposes of this study, there was some that merited special attention. Table 4 illustrates the frequencies and measures of central tendency associated with those variables.

TABLE 4
FREQUENCIES AND MEASURES OF
CENTRAL TENDENCY OF ITEMS
MOST ASSOCIATED WITH
THIS STUDY
(N=100)

Variable Label	Frequency	MoCT	StD
Date of interview April 1986 May 1986 June 1986	13 49 37		
Age of Participant Mode Median Mean		28 (8) 37 39.444	13.857

TABLE 4 (Continued)

Variable Label	Frequency	MoCT	StD
Sex of Participant			
Female	23		
Male	75		
Racial/Ethnic			r
Background of the			
Participant			
Euro-American	68	,	
African-American	13		
Native American	16		
Hispanic	1		
other/unreported	2	ı	
Marital Status of			
Participant			
Single	47		
Married	10		
Divorced Widowed	23		
Widowed Separated	7 12		
Separated	. 12		
Length of Time			
in Tulsa			
0-3 months	32		
4-6 months	5		
7-11 months	3		
1- 3 years	8		
4-6 years	10 2		
7- 9 years 10-14 years	11		
15 + years	1		
10 · yours	•		
Tulsa native			
Mode		No (79)	
If not from Tulsa			
why are you here?			
To work	15		
To find work	26		
To attend school	2		
Marriage	1		
Health care	1		
Other	44		

TABLE 4 (Continued)

Variable Label	Frequency	MoCT	StD
Length of time in Oklahoma 0-3 months 4-6 months 7-11 months 1-3 years 4-6 years 7-9 years 10-14 years 15 + years	18 6 3 9 9 9 3 6		
Oklahoma native Mode		No (57)	
Birthplace Northeast Mid-Atlantic South Great lakes North central Mid central South central West Pacific coast	4 3 5 13 1 7 46 15 2		
Residence before Tulsa Northeast Mid-Atlantic South Great lakes North central Mid central South central West Pacific coast	8 1 7 8 3 8 53 7 2		
Ever jailed Mode		Yes (63)	
Permanent place of residence Mode		No (72)	

TABLE 4 (Continued)

Variable Label	Frequency	MoCT	StD
Length of time without	,		
permanent residence 0-3 months	43		
4-6 months	10		
7-11 months	4		
1- 3 years	12		
4-6 years	6		
7-9 years	2		
10-14 years	0		
15+ years	5		
Number of years of	ı		
school completed Mode		12 (40)	
Median		10 (40)	
Mean	ě	11.1	
iiodii		11.1	
Employment			
Mode		No (86)	
How long unemployed 0-3 months 4-6 months 6 months but < 1 yr. 1 year but < 2 yrs. 2-4 years 4 years or more			
Monthly income	*		
Mode		0	
Median		\$107.50	
Mean		\$252.90	425.70
Ever received psychiatric			
care Mode		No (78)	
11040		10 (70)	
Ever received counseling at	,		
community mental			
health center Mode		No (73)	
node		RO (13)	
Ever received			
alcohol treatment			
Mode		No (51)	

TABLE 4 (Continued)

Vari	able Lable	Frequency	MoCT	StD
Ever	received			
drug	treatment			
	Mode		No (58)	
Vete:	ran	,		
	Mode		No (88)	'
		7	¥.	
Viet	-Nam Veteran			
	Mode	1	No (97)	
I.i fe	Five Years Ago	m ,		
DITC	Better	65		
	Worse	11		
	Same	23		
-				
	rviewer sification			
	articipant			
OI P	Transient	13		
	Street lifestyle	3		
	Traditional (Sr.)	- 3		
	Traditional (N-Sr.)	1.		
	Physically D.P.	4		
	Physically D.T.	1		
	Unemployed	22		
	Employed-Low Income	11		
	Immigrants	0	t	
	Ex-Offenders	1		
	Chronic Alcohol	10		
	Abusers	19		
	Chronic Drug Abusers	3		
	Chronically Mentally	J		
	Ill	13		
	Mental Retardations	5	1	

In Table 4, we find that most of the interviews were conducted in May (49%). This is intriguing when we consider that there were only a total of 5,252 visits in the month

of May (see Table 6). One of the most notable findings in the sample is its gender composition. If one is familiar with the "feminization of poverty" hypothesis (Pearce, 1978), it is somewhat surprising that 75% of the participants in this survey were men. Also a point of interest is that most of the participants (79) were not originally from Tulsa and 57 of them were not natives of Oklahoma. Most of the participants reported that they were born in and had most recently resided in a neighboring state though. Also interesting was the fact that a great number of them had come to Oklahoma for some reason other than education or work. It was also interesting to note that over half of the participants (63%) reported that they had been in jail or prison at some time.

Table 4 also contains the employment and income information about the sample and there are very few surprising findings here. Most of the sample (86) is unemployed, but 30 report that they are just recently unemployed. The average monthly income of \$252.90 is a small sum, when considered that 33 of the participants in the sample report no income at all.

Table 4 also illustrates the medical history of the sample. In terms of psychiatric treatment, etc., there were very few people who responded affirmatively to these type of questions. Of those who did report that they had received counseling, 17 reported that they were satisfied with it and nine reported that they had been counseled in

1986. Drug and alcohol treatment were also lowly reported, but 60 of the participants reported that they used alcohol.

One factor that has been correlated with the incidence of homelessness is the status of an individual as a veteran, especially the status of an individual as a veteran of the Viet-Nam War, but as Table 4 illustrates, only 12 of the people in this sample report that they are veterans and only 3 of the people in this sample report that they are veterans of the Viet-Nam War.

Table 4 also shows the results of two very subjective items on the survey. One of these is in reference to how the participant characterizes her or his life five years ago as compared to now. Not surprisingly, 65% report that their life was better five years previous, but 23% report that their life is the same. The other highly subjective item that is reported in Table 4 is the interviewers' classification of the participant. The most common classification used was "unemployed", but we are not given any indications as to how the interviewers were instructed to classify the people.

Table 5 is the Pearson Correlation Matrix. The survey item about a permanent place of residence is the principle variable of interest for the purposes of this study. The correlation matrix shows that marital status, unemployment and physical separation all are significantly correlated (p < 0.05) with lack of a permanent residence. At least one of these significant correlations is almost expected

(unemployment and a lack of a permanent shelter for example). But the positive relationship between lack of a permanent residence and physical separation from the general population lends some credence to the findings of other researchers (Crystal, Freeman and Hill) who have found that many homeless people have a history of physical separation from the rest of society and/or chemical dependency problems unlike those of the general population. It should be noted that the correlation procedure is a measure of association, not causation. In my opinion these findings warranted further investigation; thus multivariate regression procedures were performed using the scale on physical separation and particular survey items as predictor and criterion variables. These results can be found in Appendix C. It should also be noted that the demographic variables of age, sex and race were not significantly correlated with the lack of a permanent shelter.

Tables 6 through 10 contain information revealed from the monthly reports of the TMM Day Center for the first eight months of 1986. It is interesting to note the fluctuations in the number of visits per month and the composition of the visitors in terms of gender and age. It is also worth noting that the number of visits by women and children increases substantially in the months of June, July and August. It is also very interesting to notice that by the time that the survey had been completed (June),

there had been 2,500 different people who had utilized the services of the TMM Day Center, but only 100 participated in the survey.

TABLE 5
PEARSON CORRELATION MATRIX
FOR SELECT VARIABLES

•	AGE.	SEX	RACE	М.8Т	EDUC	. Incm.	Perm. Res.	sep.	UNEM.
age	1.000					•			
Sex	0.158 (. 5 3)	1.000							
RACE		-0.118 (.12)	1.000						
M.8T.	-0.038 (.36)		0.135 (.09)	1.000					
RDUC.	0.103 (.15)		-0.053 (.30)		1.000				
incm.	0.035		-0.001 (.50)		0.085 (.23)	1.600			
Perm. Res.	0.115		-0.142 (.09)			-0.063 (.30)	1.000		
SEP.	-0.050 (.50)					0.180 (.08)			
uhem.	0.144		-0.017 (.44)	0.007 (.47)		-0.436	0.364	0.121 (.17)	

TABLE 6
FREQUENCIES OF DAILY VISITS
TO TMM DAY CENTER FROM
FEBRUARY TO SEPTEMBER
OF 1986

Month	#Of Visits By Males	#Of Visits By Females	#Of Visits By Children	Total
February	5,476	345	39	5,860
March	6,592	631	66	7,289
April	6,376	739	72	7,187
Мау	4,590	602	60	5,252
June	4,987	565	127	5,679
July	6,241	701	150	7,092
August	6,629	831	168	7,628
September	6,465	733	115	7,313
Total	47,356	5147	797	53,300
Averages	5,920	643	100	6,663

TABLE 7
PERCENTAGES OF DAILY VISITS
TO TMM DAY CENTER FROM
FEBRUARY TO SEPTEMBER
OF 1986

Month	% Males	% Females	% Children
February	93.4	5.9	0.7
March	90.4	8.7	0.9

TABLE 7 (Continued)

Month	% Males	% Females	% Children
April	88.7	10.3	1.0
May	87.4	11.5	1.1
June	87.8	9.9	2.2
July	88.0	9.9	2.1
August	86.9	10.9	2.2
September	88.4	10.0	1.6
Averages	88.875	9.6375	1.475

TABLE 8
FREQUENCIES OF VISITS FOR APRIL
TO JUNE OF 1986 (TIME OF
THE SURVEY)

Month	#Of Visits By Males	#Of Visits By Females	#Of Visits By Children	Total
April	6,376	739	72	7,187
May	4,590	602	60	5,252
June	4,987	565	127	5,679
Total	15,953	1,906	259	18,118
Average	5,318	635	86	6,039

TABLE 9
PERCENTAGES OF VISITS FOR APRIL
TO JUNE OF 1986 (TIME
OF THE SURVEY)

Month	%Male	%Female	%Children	
April	88.7	10.3	1.0	
May	87.4	11.5	1.1	
June	87.8	9.9	2.2	
Averages	87.966667	10.566667	1.4333333	

TABLE 10
TOTAL VISITS AND TOTAL DIFFERENT
PEOPLE TO VISIT TMM DAY
CENTER FROM FEBRUARY
TO SEPTEMBER OF 1986

Month	Total #Of Visits	Total #Of Different	People	#Of	New	People
February	5,860	921	,	921		
March	7,289	1,400		479		
April	7,187	2,000		600		
May	5,252	2,200		200		
June	5,679	2,500		300		
July	7,092	3,500		1,000		
August	7,628	3,800	4	300		
September	7,313	4,200	ı	400		
Total	53,300	20,521		4,200		
Averages	6,663	2,565		525		

CHAPTER V

DISCUSSION AND CONCLUSION

In February of 1986, the TMM Day Center for the Homeless was opened. In the months of April, May and June of that year, the TMM Task Force on Homelessness conducted a survey of 100 patrons of the Day Center. The preceeding chapters have been concerned with how the Day Center came into existence, what the results of the survey can tell us about homelessness in Tulsa, Oklahoma, and how these results relate to other findings about the homeless people throughout the U.S.A. The results of the 1986 survey conducted by the TMM Task Force on Homelessness revealed some very interesting information.

It should be noted that the entire issue of homelessness is muddled by the fact that there is no accurate manner by which to count the homeless. As was stated in previous chapters, HUD reports that there are "only" between 250,000 and 350,000 homeless people in the U.S. Advocates of the homeless claim that the actual number of homeless persons is somewhere between 2,000,000 and 3,000,000. Further, they project that if homelessness continues to increase at the same rate, there will be 18,000,000 homeless people in America by the end of

the century (Lochhead, 1988). Likewise, the highest estimate of the number of homeless people in Tulsa is 1,000 and yet between February and September of 1986, 4,200 different people were patrons of the TMM Day Center for the Homeless.

Tulsa, Oklahoma, not unlike many urban areas in the United States has a transient population that congregates in its Downtown area. But unlike many urban areas in the U.S., Tulsa has not suffered structural unemployment to a great degree. Even though the oil bust of the mid-1980's had a huge detrimental economic effect upon all of Oklahoma, the participants in TMM Day Center study, for the most part were not natives of Oklahoma. Also, only 57% of the dwellings in Tulsa are owner occupied, meaning that many people in Tulsa are in the process of buying their homes or they are simply renting their places of residence. Clearly, there are more factors involved in the plight of the homeless people in Tulsa than the information utilized in this thesis shows.

As Kiecolt and Nathan (1985) noted, there are many advantages and limitations involved in secondary analysis of survey data. The methodology by which this data set was collected, the nature of the particular study and the wording of many of the questions left much to be desired in many instances. These factors thus inhibited the type of statistical analysis that could be done feasibly. Also, because of the nature of the data set, no specific hypothesis were tested. Nonetheless, some very interesting

information was garnered through this study.

First, an extensive review of the literature revealed that homelessness in the U.S.A. has become a major topic of concern for social scientific researchers. Secondly, through the use of Spector and Kitsuse's model of the construction of social problems, a mechanism was developed to offer a possible explanation of how the TMM Day Center for the Homeless came into existence. As of the writing of this thesis, the data set examined in this study is one of the few, if not the only data set in Oklahoma about the homeless people in any area of the state. Inasmuch as the Social Constructionist Model of Social Problems precludes grand theoretical orientations, this thesis lays the ground work for understanding the how of the public perception of homelessness in Tulsa, Oklahoma, as a social problem and subsequently how one group of people sought to alleviate what they thought to be a social ill. Not unlike the findings of Timmer (1988), the TMM Day Center for the Homeless, while taking into account social and economic changes over the past several years, has been formulated considering homelessness as a personal pathology as opposed to a condition brought on by an unbalanced structural situation. Further work in the area of homelessness, in Tulsa, in Oklahoma, or in the U.S. should focus upon trying to create balance in social structures and finding the homeless long term solutions in addition to catering to their immediate personal needs. Also, future research

in this area could address the issue of the ability of people to mobilize in an effort to change conditions that they find socially unacceptable. Future research also could focus upon interaction between different groups of people who are concerned with the problem of homelessness and how they collectively and/or distributively have approached the issue. Also, future research that could lead to viable solutions should be done on this issue simply because the homeless are citizens in a land of plenty. Housing policies should be formulated so that there is affordable housing for everyone.

Because of the results of the Pearson correlation procedure, interesting research could be done on the issue of what are the major precedent conditions that homeless people find themselves in before they become homeless.

Also, the information in Tables 6 through 10 warrants further discussion here. The fluctuations in the composition of visitors can be explained in several ways, but I would offer the following explanation: the number of visits increased in the warmer months because of the nature of the TMM Day Center. In as much as it is a day center, people might have been more hesitant to use its facilities in the winter because they knew that they would have to leave at a particular time, so they might have opted for the use of a 24-hour shelter. Also, the number visits by women and children increased quite a great deal in the months of June, July and August. I think that this

could be explained partially by the fact that school is not in session at this time, so minor children would be with their primary caregivers and because adolescents would be employed in many of the jobs that non-skilled adult laborers would have during other times of the year. These two situations could possibly be rallying points for future advocates of the homeless in Tulsa.

In conclusion, it is almost assured that homelessness will continue to be a social condition that will be studied extensively in the next decade, if the present trends continue at the same rate. In a larger scheme then, perhaps more people will mobilize to create shelters along the lines of the TMM Day Center. Also, because only two stages of the Specter and Kitsuse Social Constructionist Model have been utilized in response to homelessness in Tulsa, if current trends continue, other solutions might have to be devised to handle this problem in Tulsa.

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APPENDICES

APPENDIX A

TULSA METROPOLITAN MINISTRY

DAY CENTER SURVEY

		Code Number
		Date Day of the Week Temperature Weather
A.	BIOGRAPHICAL	
	1. Age	
1	2. Sex	a. Male b. Female
	3. Race	a. Caucasian b. Negro c. Hispanic d. Indian e. Oriental f. Other
	4. Marital Status	a. Single b. Married c. Divorced d. Widowed e. Seperated
	5. How many childre do you have?	n
,	6. How many depende do you presently	
	7. How long have you in Tulsa?	u lived

			Code Number	<u> </u>
8.	Are you from Tulsa?		Yes No	
9.	If no, why did you come to Tulsa?			indi salam gaya kepan-dawa kuda sada sada
10.	How long have you lived in Oklahoma?		,	
11.	Are you from Oklahoma?		Yes No	
12.	Where were you born?			
13.	Where did you live just before coming to Tulsa			
14.	Have you ever been in jail or in prison?		Yes No	
15.	How would you describe your reading and writing skills?	a. b.	Good Adequate Poor	
16.	If poor, would you be interested in improving your reading and writing skills?		Yes No	
B. BAS	SIC SERVICES UTILIZED	ı		
1.	Do you have permanent shelter?		Yes No	
2.	If no, how long have you been without			

		C	Code Number	
•	ET .			
3.	Where do you stay at night?	a Sa	alvation Army	
	45 111g115.		Paying _	
			Free Nights _	
			Allotted time	
			ouse of Prayer	
			ounty Shelter	
			ings of Faith	
			atholic Worker	•
		Ho	ouse	
		f. Jo	ohn 3:16	
		M	ission	
		g. Ba	aptist Women's	3
			helter	
		h. Ot	ther Shelter	
		i V	acant Building	•
			nder Bridge	
			iverparks	
			ersonal	
			esidence	
			ith Relatives	
		n. Wi	ith friends	
		o. 0i	utside	
		Wł	here?	
		p. Ve	ehicle	
			hat?	
			y the tracks	
		\mathbf{r} . Ot	ther	
4.	Usire way even heen			
4.	Have you ever been arrested in Tulsa			
	for not having a			
	permanent address?	a. Ye	20	
	permanent address:	b. No		
		D. 140	J	
5.	If so, please describe	the		
•	situation:			
6.	Do you have family or			
	relatives in Tulsa or			
	Oklahoma?	a. Ye		
-		b. No	0	
7.	If yes, can you stay	**		
	with them?	a. Yes	3	
		b. No	n't choose to	
		c. por	n t choose to	
8.	If so, how often do yo	u stay	y with them?	

		Code Number
9.	Where do you eat?	a. Salvation Army b. Trinity Episcopal
	,	Church c. Holy Family
	· C	Cathedral d. Catholic
		Charities e. Tree of Life
		f. Calvary Mission
		g. House of Prayer
		h. County Shelter
		i. Fellowship Church
		j. Other Shelter
		k. Personal
		Residence 1. Prepare own
		food outside
		m. Discarded Food
		n. Food from Rev.
		Jackson o. John 3:16
		Mission
		p. Other?
10.	Do you get enough to eat?	a. Yes b. No
11.	Do you get a	- V
	balanced diet?	a. Yes b. No
		c. Don't Know
		1
12.	Where do you go	- Par Cantar
	in the day?	a. Day Center b. Library
		c. Oklahoma State
		Employment Office-
		Day Labor
		d. Tulsa Temporary
		e. Peakload
		f. Labor Source
		g. Oklahoma State
		Employment Office Branch Offices

Which one?

	Code Number	
	0000 00000	
12. Where do you go in the day? (cont.)	h. Other Employment Services i. Dept. of Human Services j. Social Services Agencies k. Post Office l. Main Mall m. Blood Bank n. Williams Center Forum o. Park p. Work q. Other?	
13. Where do you perform personal hygiene? (shower, shave, etc).	a. Night Shelter _	
	b. Day Center c. Residence d. Other	
14. Where do you use re facilities?	stroom	
	Outside?	
15. Which services do you use at the Day	a ,	
Center?	a. Showers b. Restrooms	
	c. Clothing	
•	d. Coffee e. Snacks	
	f. Telephones	
	g. Message	
*	Service h. Mail Service	
	i. Reading	
,	Materials .	
•	j. Gamesk. Leave things	
	here in day	
	1. Socialization m. Information &	
	m. Information &	
	Referral	

Code	Number	
Code	Number	

16.	What other services we like to have available Day Center?		
17.	Do you use the Tulsa bus system?	a. Yes b. No	
18.	If yes, are bus services adequate for your needs?	a. Yes b. No	
19.	Do you have your own transportation?	a. Yes b. No	
	PLOYMENT/INCOME INFORM Educational Level (no completed)		of school
	Have you attended trade school?	. Yes . No	
3.	If yes, how long did you attend?		
4.	If yes, what did you study?		
5.	Occupation:	_ _ _	
6.		. Yes . No	
7.	If no, how long have unemployed?	you been	

		Code Number	***************************************
8.	Do you use the service of the Oklahoma State Employment Day Labor Office?		
9.	If no, why not?		
10.	Do you use the service of the Oklahoma State Employment Branch Offices?		
11.	If no, why not?		
12.	Are you a veteran?	a. Yes b. No	
13.	Are you a Vietnam veteran?	a. Yes b. No	 ount/mo
14.	What is your source of income?	a. Social Security b. SSI (Supp. Securi Income) c. Disability Reason? d. Aid to the aged, or disabled e. AFDC f. Medicaid g. Veterans' Benefits h. Employment Where? Wages? Full tm./pt. time i Unemployment j. Blood Bank k. Panhandling l. Child Support/ Alimony m. None n. Other? Total Per Month	blind

			Code	Number	
15.	Do you receive food stamps?		Yes Amount No		
D. ME	DICAL				
1.	Do you have medical problems?		Yes No		
2.	If yes, what are the	у? .			Reason
3.	What medication do ye	ou	take?		
4.	What medications do	you	need?		Reason
5.	What medical facilit	ies	do you i	use?	Reason
			•		
6.	Are medical services adequate and available?	a. b.	Yes No Don't K	now	
7.	Do you have dental problems?		Yes No		
8.	If yes, what are the	у?		40 ma are sas test ann m	
9.	Where do you go for	den	tal serv	ices? _	
10.	Are dental services adequate and available?		Yes No	now	

11. Do you need eyeglasses? b. No c. Don't Know 12. Do you think you are disabled? a. Yes b. No 13. If yes, explain: 14. Have you ever been hospitalized for psychiatric reasons? a. Yes b. No Where When 15. If yes, were you released with medication? a. Yes b. No 16. Have you ever received counseling/treatment at a community mental health center? b. No Where When 17. If yes, did they help you and were you satisfied? a. Yes a. Yes b. No				Cod	le Number	
are disabled? a. Yes b. No 13. If yes, explain: 14. Have you ever been hospitalized for psychiatric reasons? a. Yes b. No Where When 15. If yes, were you released with medication? a. Yes b. No 16. Have you ever received counseling/treatment at a community mental health center? a. Yes b. No Where When 17. If yes, did they help you and were you satisfied? a. Yes	11.		b.	No	Know	
14. Have you ever been hospitalized for psychiatric reasons? a. Yes b. No Where When 15. If yes, were you released with medication? a. Yes b. No 16. Have you ever received counseling/treatment at a community mental health center? a. Yes b. No Where When 17. If yes, did they help you and were you satisfied? a. Yes	12.					
hospitalized for psychiatric reasons? a. Yes b. No Where When 15. If yes, were you released with medication? a. Yes b. No 16. Have you ever received counseling/treatment at a community mental health center? a. Yes b. No Where When 17. If yes, did they help you and were you satisfied? a. Yes	13.	If yes, explain:	············			
15. If yes, were you released with medication? a. Yes b. No 16. Have you ever received counseling/treatment at a community mental health center? a. Yes b. No Where When 17. If yes, did they help you and were you satisfied? a. Yes	14.	hospitalized for				
released with medication? a. Yes b. No 16. Have you ever received counseling/treatment at a community mental health center? a. Yes b. No Where When 17. If yes, did they help you and were you satisfied? a. Yes			Who	ere		When
released with medication? a. Yes b. No 16. Have you ever received counseling/treatment at a community mental health center? a. Yes b. No Where When 17. If yes, did they help you and were you satisfied? a. Yes						
16. Have you ever received counseling/treatment at a community mental health center? a. Yes b. No Where When 17. If yes, did they help you and were you satisfied? a. Yes	15.	released with				
b. No Where When The state of the state o	16.	counseling/treatment at a community mental	ed L			e con sand halls, and provide desp
17. If yes, did they help you and were you satisfied? a. Yes		health center?				garan-rando emisio carrio evente galana Galdre galde dilizio (1) dea electrololista
you and were you satisfied? a. Yes			Who	ere		When
you and were you satisfied? a. Yes						
b. No	17.	you and were you	a.			
Why?		Why?				

			Code Num	nber		
18.	Have you ever been in an alcohol treatment program?	a.	Yes	_		
~		ъ.	No	-		
		Wh	ere	Ţ.	Vhen	
				-		
19.	Have you ever been in a drug treatment	n	THE STATE ST	-		nas vigo
	program?		Yes No	-		
		Wh	ere	V	\hen	
				-		
20.	Tiı	mes	vel of Use Times Weekly 	Time Mont		Amount
. GEI	NERAL					
1.	What was your life 1:	a. b.	five years Better Worse Same	ago? - -		
Exp	plain:					
2.	Describe your present	t s	ituation: _			
Andrew States and						

E

Code Number 3. What do you need? _____ 4. Your Comments: _____ 5. Interviewer's Comments: _____ If you are between the age of 13 and 19, complete supplemental section. Interviewer _____ Date ____ F. CLASSIFICATION BY INTERVIEWER ___ 1. Transient - temporary resident 2. Street Lifestyle - area resident
3. Traditional Inner City Resident - Senior 4. Traditional Inner City Resident - Non-senior ____ 5. Physically Disabled - Permanent 6. Physically Disabled - Temporary ____ 7. Unemployed ____ 8. Employed - Low Income 9. Immigrants ___10. Ex-offenders ____11. Chronic Alcohol Abuser ____12. Chronic Drug Abuser

___13. Chronically Mentally Ill 14. Mental Retardations

APPENDIX B

VARIMAX ROTATION FOR SCALE ON PHYSICAL SEPARATION FROM THE GENERAL POPULATION

Variable Lable	Rotated Fa	ctor Matrix F2
Ever Jailed	-0.14095	0.49254
Psychiatric Care	0.65915	-0.15853
Counseling At A Community Treatment Center	0.74012	0.04200
Alcohol Treatment	0.07588	0.72320
Drug Treatment	0.03906	0.36321

APPENDIX C
REGRESSION EQUATIONS UTILIZING
SELECT VARIABLES

Variable Label	В	Beta	StErr	Т	SigT
Years Of School	-0.03719	-0.03756	0.11341	-0.328	0.744
Race "Dummy" Coding (1=White, 0=All Others)	-0.09784	-0.10763	0.09292	-1.052	0.297
Total Monthly Income	0.18699	0.24905	0.09795	1.909	0.062
Marital Status "Dummy" Coding (1=All Oth 0=Married)	hers, 0.12848	0.11617	0.12772	1.006	0.320
Age	0.14204	0.14701	0.10797	1.316	0.195
Sex "Dummy" Coding (1=Male, 0=Female)	0.06137	0.06438	0.11164	0.550	0.585
Unemployment "Dummy" Coding (1=Unemployed, 0=Employed)	0.51496	0.58198	0.0960	4.482	0.000
Physical Separation	0.06380	0.21285	0.0377	1.691	0.097
(Constant)	0.10063		0.0943	1.067	0.291
2 R = 0.35038	F = 5.08	3539	SIG F =	0.0001	

Variable Label	B 	Beta 	StErr	T	SigT
Years Of School	0.3664	0.1110	0.4339	0.845	0.403
Total Monthly Income	0.7620	0.3042	0.3584	2.126	0.039
Age	-0.5860	-0.1818	0.4074	-1.438	0.157
Marital Status "Dummy" Coding (1=All Oth O=Married)	ners, 0.7573	0.2053	0.4764	1.590	0.118
Race "Dummy" Coding (1=White, 0=All Others)	0.0169	0.0062	0.3473	0.049	0.096
Sex "Dummy" Coding (1=Male, 0=Female)	0.6066	0.1907	0.4182	1.450	0.154
Unemployment "Dummy" Coding (1=Unemployed, 0=Employed)	0.5962	0.2020	0.4325	1.379	0.174
(Constant)	0.1390		0.3604	0.384	0.702
2 R = 0.26139	F = 2.4	2668	SIG F	0.0327	ONE Comment with the state to the transmission of the state of the sta

APPENDIX D

APPROXIMATE NUMBER OF HOMELESS

PEOPLE IN 15 SELECT U.S.

METROPOLITAN AREAS

Metropolitan Area		Approximate Number of Homeless People		
1.	New York City, N.Y.	60,000		
2.	Los Angeles, CA.	50,000		
3.	Detroit, MI.	27,000		
4.	Houston, TX.	25,000		
5.	Chicago, IL.	25,000		
6.	Baltimore, MR.	20,000		
7.	Philadelphia, PA.	15,000		
8.	Dallas, TX.	14,000		
9.	Washington, D.C.	12,500		
10.	San Francisco, CA.	10,000		
11.	Miami, FL.	9,000		
12.	Boston, MA.	7,500		
13.	Phoenix, AR.	4,500		
14.	Portland, OR.	4,000		
15.	Seattle, WA.	3,000		
	Total	286,500		

Candidate for the Degree of

SHANA MARIE MILLER

Master of Science

Thesis: THE CONSTRUCTION OF HOMELESSNESS IN TULSA,

OKLAHOMA AS A SOCIAL PROBLEM

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