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THE INTERSECTION OF HOMELESSNESS AND THE CRIMINAL JUSTICE SYSTEM



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Abstract: This article offers an overview of state and national homelessness including prevalence and causes of homelessness, criminal justice system contacts with the homeless, and recommendations to address homelessness with a focus on justice-involved populations.

Introduction

Homelessness in the United States has historically been a complex, lasting phenomenon posing significant policy challenges for officials at the federal, state, and local levels. Homeless individuals also are disproportionately more involved in the criminal justice system as both victims and alleged perpetrators. Housing is a burden for individuals, families, and communities, as well as an economic burden on the criminal justice system.¹

According to the [U.S. Department of Housing and Urban Development \(HUD\)](#), homelessness includes people in the following situations:

- Those living in a shelter, leaving an institution (i.e. jail), or living in a place not meant for habitation.
- Those who will lose their temporary residence within two weeks (hotel, home of family/friends).
- Those fleeing domestic violence without the ability to obtain resources and housing.²

Advocates for the homeless question the precision of HUD's definition of homelessness. While HUD does not consider the practice of "doubling up," or staying with family or friends, as homelessness unless the individual is to be forced to leave within two weeks, advocates argue the practice should be considered homelessness because of its instability.³

Prevalence of Homelessness

U.S. Homelessness

HUD releases two annual reports on the prevalence of U.S. homelessness, compiled using different methodologies. [One report](#) describes a count of both sheltered and unsheltered homeless persons at one point in time. This count is conducted on a single night in January. [The second report](#) details homeless prevalence and characteristics. This information is gathered throughout the year from the Homeless Management Information System (HMIS), a homeless services database used as required by federally-funded service providers.⁴

The 2017 HUD reports reported:⁵

- More than one-half million people were homeless on any given night in 2017.
- 1.4 million people experienced sheltered homelessness in 2016.
- 80 percent of those homeless became so for only one short term episode.
- 65 percent of homeless individuals were sheltered.
- 52 percent of homeless individuals lived in major cities, 35 percent lived in small cities, and 14 percent resided in rural areas.⁶

Chronically homeless individuals are those who are persistently or periodically homeless. In the United States, the number of point-in-time chronically homeless in 2017 was 16 percent of the homeless population, down from 34 percent in 2010.⁷ Seventy percent of the chronically

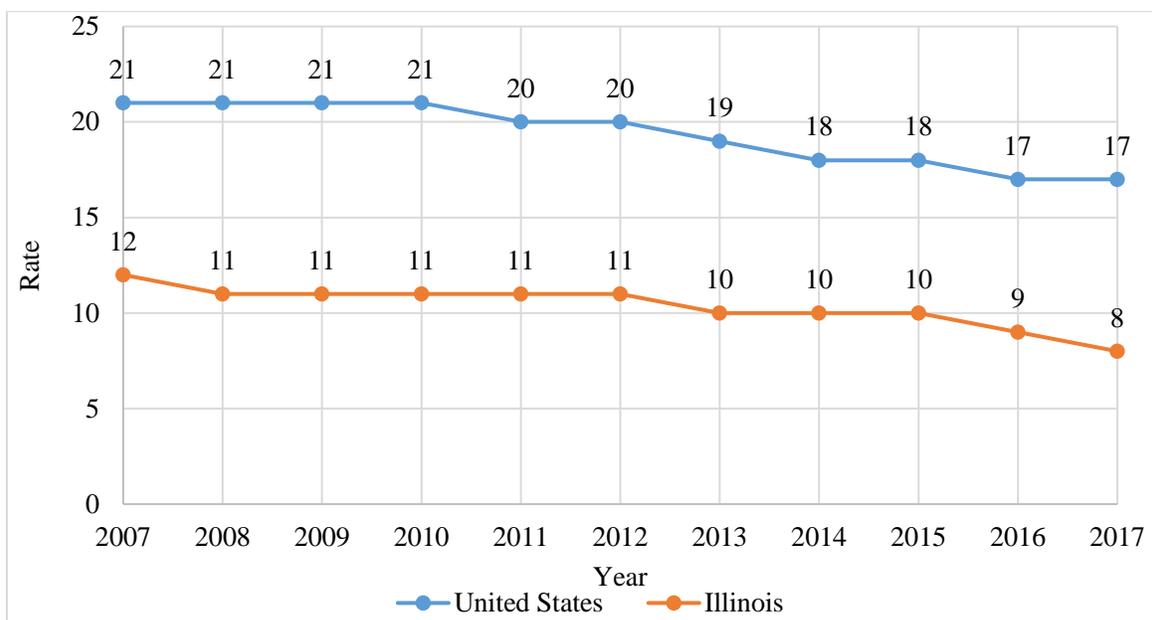
homeless were unsheltered that year.⁸ Policy changes to address the chronically homeless have focused on increasing permanent supportive housing.

[The National Alliance to End Homelessness](#) estimated 7 million U.S. residents experienced homelessness over the course of 2014, including those who were doubled up with no other place stay.⁹ While the methodology used to calculate the estimates was less rigorous than official HUD counts, it can offer another source to gauge broader housing instability.

Homelessness in Illinois

Illinois had a lower rate of homelessness than the national average that year, at eight people per 10,000 residents in Illinois and 17 per 10,000 residents nationally (*Figure 1*). A total 10,798 people were experiencing homelessness on the night of HUD’s Illinois count in January 2017.¹⁰ Of them 1,228 (11 percent) were households with at least one adult and one child; 1,475 (14 percent) were chronically homeless; and 730 (7 percent) were unaccompanied young adults.¹¹

Figure 1
Rates of Illinois and National Homelessness per 10,000 Persons, 2007-2017



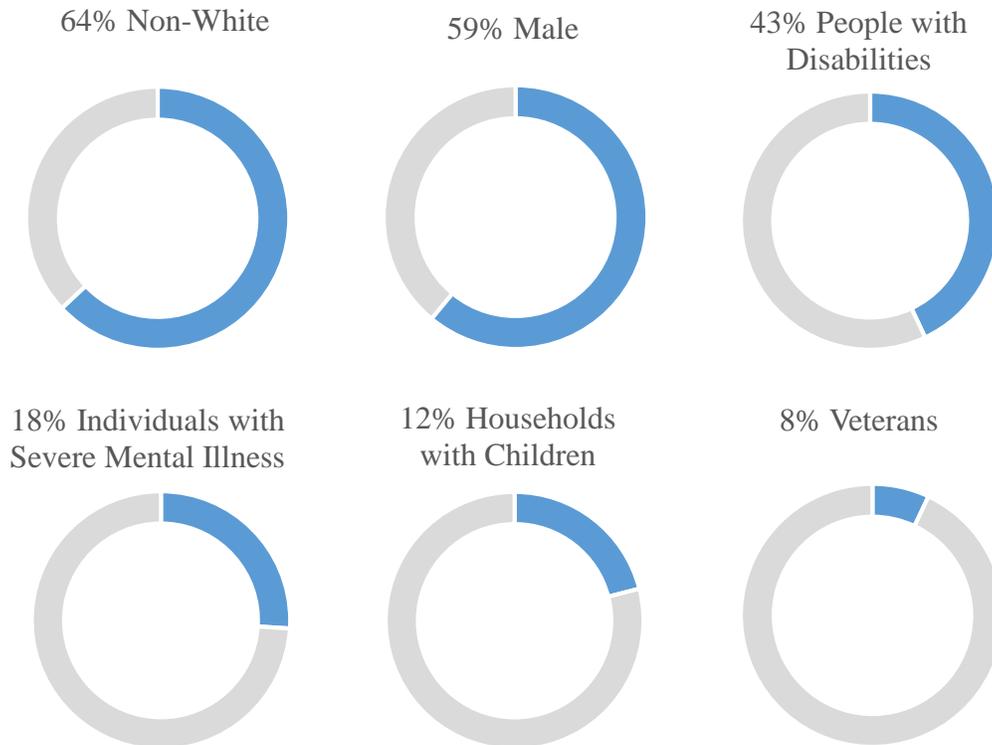
Source: Department of Housing and Urban Development Annual Homeless Report to Congress, 2007-2017
 Note: Estimates based on point-in-time count of homeless persons conducted each January.

Throughout the country, large cities, such as Chicago, have the highest rates and absolute numbers of homelessness. The City of Chicago conducts its own point-in-time count, finding 5,657 homeless persons in January 2017.

Who are the Homeless in Illinois?

Characteristics of the homeless population are diverse and varied, although the research does indicate that certain demographic sub-populations suffer disproportionately from homelessness. *Figure 2* indicates the percentage of homeless persons by characteristics.¹²

Figure 2
Characteristics of Homeless Populations in Illinois, 2017



Source: HUD 2017 Continuum of Care Homeless Assistance Programs Homeless Populations and Subpopulations
Note: Estimates based on point-in-time count of homeless persons conducted January 24, 2017, n=10,798

Racial minorities were overrepresented among the homeless population in Illinois. While 13 percent of the U.S. population are Black, in Illinois they comprised 59 percent of the homeless in 2017. Persons with disabilities were four times more likely to be homeless than non-disabled persons in 2017, making up nearly 43 percent of the homeless population.¹³

Of the 5,657 Chicago homeless persons, 16 percent were veterans, 10 percent were in households with children, 6 percent were chronically homeless, and 5 percent were unaccompanied youth.¹⁴

Causes of Homelessness

Research into the causes of homelessness indicates several risk factors, which differ for families and individuals. For families, causes tend to be structural in nature, such as lack of affordable

housing, poverty, and unemployment. In contrast, single persons tend to become homeless for more individualistic reasons, such as substance use, eviction, and mental illness¹⁵

Lack of affordable housing. The dearth of affordable housing is one of the top three causes of homelessness for both families and single individuals. A low-income household makes 200 percent or less of the federal poverty level. Housing that is affordable to low-income households must cost no more than 30 percent of the household's total income. From 2010 to 2016, rising real estate prices edged out much of the available affordable housing, with a 60-percent drop in housing stock.¹⁶ Researchers estimate there are 4.4 million more low-income households than affordable housing units nationwide.¹⁷ In addition, as affluent people move back into cities, rents increase dramatically and affordable housing decreases.¹⁸

Since 2013, rents have increased at twice the rate of inflation. More than 80 percent of families making minimum wage are considered cost-burdened, spending more than 30 percent of income on rent.¹⁹ Cost-burden significantly increases the risk of homelessness and forces families to cut back on other critical needs, such as food and healthcare. The affordable housing crisis is especially severe in Chicago, with 48 percent of households cost-burdened compared to 31 percent nationwide.²⁰ Special populations, including those who identify as LGBTQ, deal with additional barriers, such as stigma, discrimination, and mistreatment as they seek housing.²¹

Substance use and mental health disorders. The Substance Abuse and Mental Health Services Administration reported 35 percent of the homeless suffered from substance use disorders.²² Substance misuse is a bidirectional factor in homelessness—it can be the cause of homelessness, but also may be a way to cope with the stressors and trauma of homelessness.²³ Homelessness negatively affects treatment prognosis by creating barriers to treatment adherence and engagement.²⁴ These engagement barriers may include social isolation, lack of mobility/transportation, non-centralized/non-coordinated service delivery system, and lack of capability to address complex cases involving co-occurring mental health or trauma disorders.²⁵ Additionally, lack of insurance may bar access to many treatment services.²⁶

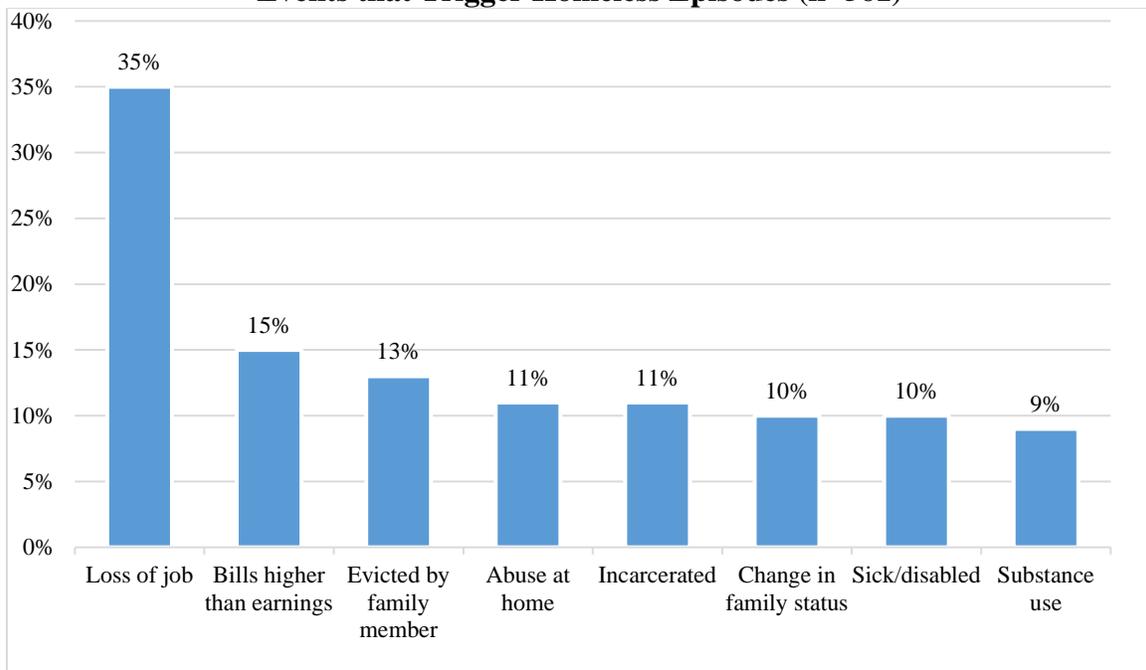
Domestic violence. Survivors of domestic violence and their children may become homeless after fleeing an abusive relationship.²⁷ Survivors are at risk of becoming homeless due to lack of access to financial resources, discriminatory policies, and stigma. A study of women receiving domestic violence services revealed 38 percent had experienced prior or current homelessness.²⁸ Another study found 61 percent of homeless women had experienced violence from an intimate partner.²⁹

Trauma. Traumatic experiences also can cause homelessness, particularly among women who have experienced sexual, physical, or emotional abuse.³⁰ This trauma is compounded by the additional trauma of being homeless. When domestic violence survivors seek homeless services or shelters after fleeing an abusive relationship,³¹ they suffer the additional trauma of the sudden loss of a home, adjusting to conditions of shelter life, experiencing discrimination or additional violence or victimization, and feeling marginalized and isolated.³²

Identifying as LGBTQ. Most LGBTQ youth became homeless not in the immediate aftermath of “coming out” but as a growing sense of rejection developed. They also face poverty, violence, substance use disorders, mental health problems, or housing instability.³³ LGBTQ youth made up 20 to 40 percent of the U.S. homeless youth population while only comprising 4 to 10 percent of the general youth population.³⁴ In a recent national study, LGBTQ young adults were more than twice as likely to experience homelessness compared to their non-LGBTQ counterparts.³⁵ Black LGBTQ young adults, particularly men, reported the highest rates of homelessness.³⁶

Loss of job/unemployment. Employment loss also can trigger homelessness. In a study in the Houston area, more than one-third of individuals reported their homelessness was a result of job loss (*Figure 3*).³⁷

Figure 3
Events that Trigger Homeless Episodes (n=561)



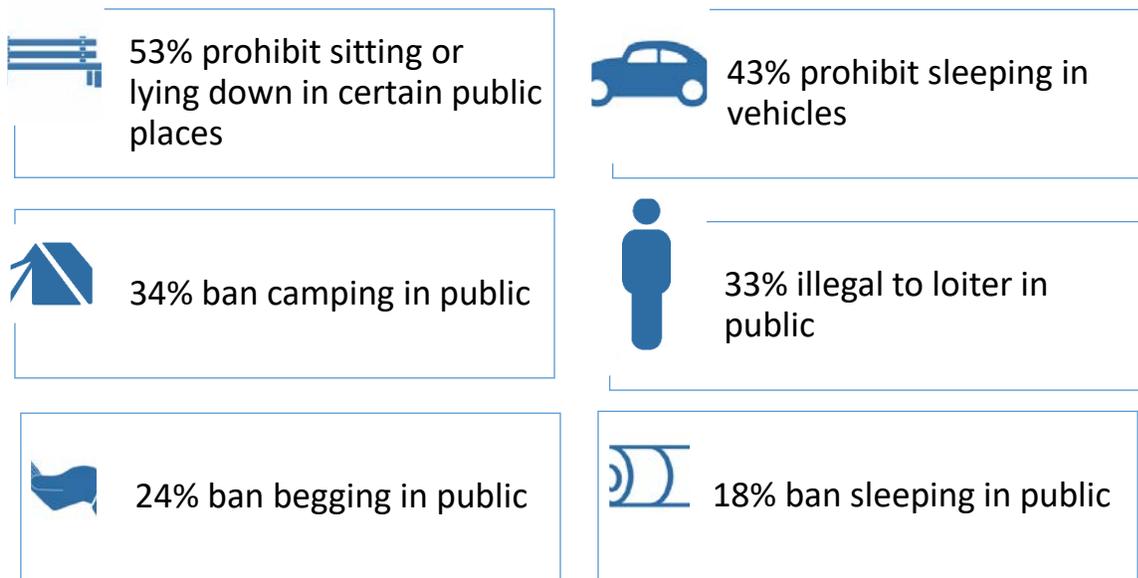
Source: Houston Coalition for the Homeless

Homelessness and Crime

Homeless persons are often involved with the criminal justice system. One study showed 54 percent of those receiving homeless services had been incarcerated in the past.³⁸ The study revealed that formerly-incarcerated, homeless individuals had an average of 19 prior arrests compared to an average of four prior arrests in a comparison group.³⁹ A study conducted by the U.S. Bureau of Justice Statistics found that 12 percent of prisoners were homeless when they were arrested.⁴⁰ Similarly, a national survey of jail inmates concluded that more than 15 percent of the jail population had been homeless at some point in the preceding year, a rate eight to 11 times the national average.⁴¹

These disproportionately high rates are driven by homeless individuals who commit minor “survival crimes.” Studies have shown that homeless individuals are more likely to be jailed for property crimes, such as theft.⁴² In addition, certain crimes seem to criminalize the very state of being homeless. These offenses, called “nuisance crimes,” violate city ordinances that disallow sleeping on benches or in doorways and public urination. *Figure 4* depicts the percentage of U.S. cities with laws that may lead to the arrest of the homeless.

Figure 4
Percent of Sampled Cities with Laws Contributing to Justice-Involvement for the Homelessness⁴³



Source: National Law Center on Homelessness and Poverty analysis of 187 cities’ municipal codes

Sociological and criminological theory can help explain community motivations behind “criminalization” of the homeless. “Rabble management” is a theoretical framework based on a community’s conscious or unconscious desire to reduce the visibility of poverty in urban spaces.⁴⁴ The theory posits that homeless people are not arrested because they present a risk to public safety, but rather because the social stigma around homelessness makes them “offensive.”⁴⁵ The Arrestee Drug Abuse Monitoring (ADAM) program found that most homeless individuals held in jail had non-violent criminal histories.⁴⁶

In addition, the homeless are vulnerable to becoming victims of violent and property crime. In a study of a nationally representative sample, crime victimization was strongly associated with past-year homelessness.⁴⁷

Substance use and mental health. Substance use disorders also increase contact with the justice system for homeless individuals.⁴⁸ More recently, the opioid crisis has worsened the relationship between homelessness, substance misuse, and the justice system.⁴⁹ When homeless

individuals are incarcerated, they are subjected to greater risk of opioid overdose, especially upon community reentry, due to loss of tolerance.⁵⁰

The Substance Abuse and Mental Health Services Administration reported 26 percent of homeless individuals in 2011 were diagnosed with severe mental illness.⁵¹ Prisoners with mental health disorders are 40 times more likely to be homeless, illustrating the relationship between mental illness, homelessness, and crime.⁵²

Prison reentry. While most leaving prison re-enter their communities to live with family, the risk of homelessness is increased for those without family ties.⁵³ Many face significant barriers to finding and maintaining safe, secure, and affordable housing.⁵⁴ These barriers may include private landlord restrictions on tenants with criminal histories, violence, and/or evictions; restricted access to public housing for people with drug or violent crimes in the last five years, and difficulty finding employment due to criminal records.⁵⁵

Individuals re-entering the community also face employment and income barriers. A Cleveland study found 37 percent of men released from prison held full-time jobs.⁵⁶ Formerly incarcerated individuals who are employed often work for low wages, earning an average of 82 percent of their pre-incarceration income.⁵⁷

Conclusion and Implications

Homelessness is a significant concern in Illinois and throughout the country, as evidenced by the 1.4 million Americans who become homeless each year and consequently face a wide spectrum of issues.⁵⁸ Research literature indicates a variety of individual and structural reasons for an individual's homelessness, including, but not limited to, behavioral health disorders, poverty and loss of employment, domestic violence, and systemic inequity.

Disproportionate contact with the criminal justice system is due to a combination of laws that seem to criminalize the state of homelessness, mental illness, victimization, and substance use disorders. Justice system stakeholders can reduce negative effects of homelessness.

Address Housing Needs

The surest way to end homelessness is to offer a full range of housing programs, including:

- Short-term emergency shelters.
- Medium-term transitional housing programs.
- Long-term permanent supportive housing.

The Illinois Department of Human Services funded 75 emergency shelters and transitional housing programs in fiscal year 2018. Efforts to reduce homelessness in Chicago focus on offering three housing types: emergency shelters, transitional housing, and permanent supportive housing. Emergency shelters, for which Chicago reported a capacity of 1,701 in 2015, are used temporarily to address immediate need.⁵⁹ Transitional housing programs last up to six months, work to address the reasons for homelessness and strive to secure stable housing for residents. Chicago reported availability of 4,574 transitional housing beds in 2015.⁶⁰ Finally, permanent

supportive housing programs offer long-term free or subsidized housing that incorporates some supportive services such as case management, mental health services, and medical services. Chicago reported availability of 7,613 permanent supportive housing beds in 2015.⁶¹

For these programs, it is critical to minimize the threshold of barriers required to access housing. Housing First is a model of homelessness services that attempts to reduce this threshold by rapidly rehousing individuals without coercing them into services like substance abuse or mental health treatment.⁶² Empirical research has found that Housing First significantly reduces offending and homelessness over treatment as usual.⁶³

To ensure the safety of those fleeing domestic violence, individuals may need an emergency shelter or transitional housing programs followed by short- or long-term rental assistance.⁶⁴ In 2017, ICJIA awarded more than \$2 million in federal Victims of Crime Act funding to 11 transitional housing programs for survivors of intimate partner violence and/or human trafficking in Illinois.

Repeal Laws that Criminalize Homelessness

Legislatively, repealing ordinances that target the homeless, like panhandling or sleeping on benches, can reduce minor nuisance crime arrests.⁶⁵ The National Law Center on Homelessness and Poverty recommends that governments stop enforcing nuisance crimes, even in the absence of statutory changes.⁶⁶ Many states, including Illinois, have passed Bill of Rights for the Homeless Acts, which attempts to decrease arrests for nuisance crimes.⁶⁷ Such legislation can mitigate the deleterious effect of laws that criminalize the state of homelessness.

Use Criminal Justice Policies and Practices to Assist the Homeless

Police departments can use problem-oriented policing when encountering homelessness. Problem-oriented policing is a model used by police to influence the way they approach an issue. Through the process of scanning, analysis, response, and assessment (SARA), police can look at their interactions with the homeless and develop less harmful responses.⁶⁸ Meta-analyses of problem-oriented policing have found significant reductions in crime and criminal behavior as the result of implementation.⁶⁹ In addition, specialized police responses to mental health crises, such as crisis intervention teams, can improve officer knowledge of mental health conditions and increase police attitudes toward individuals with mental health conditions.⁷⁰

Police diversion and deflection programs also can prevent the harmful consequences of arrest and prosecution for crimes commonly committed by homeless individuals. Police deflection occurs without official arrest, while pretrial and court diversion offer alternatives to conviction or imprisonment with referrals to services. Court diversion programs, such as homeless courts, seek to reduce homeless contact with the justice system through referral to services. While rigorous research has not been conducted, one quasi-experimental evaluation in San Diego found promising results, with 80 percent of participants having no post-hearing criminal conduct, compared to 70 percent of the control group.⁷¹

Support Prison Reentry Housing Programs and Initiatives

Formerly incarcerated individuals re-entering the community face significant housing challenges based on convictions, past evictions, and lack of income. Re-entry housing programs can address housing needs and provide supportive services, reducing the risk of homelessness and recidivism. One example is St. Leonard's Ministries in Chicago, which offers both medium-term transitional housing and long-term permanent supportive housing. Using quasi-experimental design, ICJIA researchers found that program participants [earned twice the income of the control group and program participants had statistically significant lower recidivism](#).⁷²

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¹ Burt, M. R. (1999). *Homelessness: Programs and the people they serve, findings of the national survey of homeless assistance providers and clients*. Washington, DC: The Urban Institute.;

Metraux, S., Roman, C. G., & Cho, R. S. (2007). Incarceration and homelessness. *National Symposium on Homelessness Research*, 9-1- 9-31.; Tsai, J. (2017). Lifetime and 1-year prevalence of homelessness in the U.S. population: Results from the national epidemiologic survey on alcohol and related conditions. *Journal of Public Health*, 1-10.

² Homeless Emergency Assistance and Rapid Transition to Housing Act [42 USC 11302]

³ Chicago Coalition for the Homeless (n.d.). *FAQs/ studies*. Chicago, IL: Author. Retrieved from <http://www.chicagohomeless.org/faq-studies/>

⁴ Henry, M., Watt, R., Rosenthal, L., & Shivji, A. (2017). *The 2017 annual homeless assessment report (AHAR) to congress: Part one*. Washington, DC: Department of Housing and Urban Development.;

Solari, C., Shivji, A., de Sousa, T., Watt, R., & Silverbrush, M. (2017). *The 2016 annual homeless report (AHAR) to congress: Part two*. Washington, DC: Department of Housing and Urban Development.

⁵ Henry, M., Watt, R., Rosenthal, L., & Shivji, A. (2017). *The 2017 annual homeless assessment report (AHAR) to congress: Part one*. Washington, DC: Department of Housing and Urban Development.;

Solari, C., Shivji, A., de Sousa, T., Watt, R., & Silverbrush, M. (2017). *The 2016 annual homeless report (AHAR) to congress: Part two*. Washington, DC: Department of Housing and Urban Development.

⁶ Henry, M., Watt, R., Rosenthal, L., & Shivji, A. (2017). *The 2017 annual homeless assessment report (AHAR) to congress: Part one*. Washington, DC: Department of Housing and Urban Development.

Solari, C., Shivji, A., de Sousa, T., Watt, R., & Silverbrush, M. (2017). *The 2016 annual homeless report (AHAR) to congress: Part two*. Washington, DC: Department of Housing and Urban Development.

⁷ Henry, M., Watt, R., Rosenthal, L., & Shivji, A. (2017). *The 2017 annual homeless report (AHAR) to congress: Part one*. Washington, DC: Department of Housing and Urban Development.

-
- ⁸ Henry, M., Watt, R., Rosenthal, L., & Shivji, A. (2017). *The 2017 annual homeless report (AHAR) to congress: Part one*. Washington, DC: Department of Housing and Urban Development.; Solari, C., Shivji, A., de Sousa, T., Watt, R., & Silverbrush, M. (2017). *The 2016 annual homeless report (AHAR) to congress: Part two*. Washington, DC: Department of Housing and Urban Development.
- ⁹ National Alliance to End Homelessness. (2016). *The state of homelessness in America 2016*. Washington, DC: Author.
- ¹⁰ United States Interagency Council on Homelessness (n.d.). *State data and contacts map*. Washington, DC: Author. Retrieved from [https://www.usich.gov/tools-for-action/map/#fn\[\]=1500&fn\[\]=2900&fn\[\]=6100&fn\[\]=10100&fn\[\]=14100](https://www.usich.gov/tools-for-action/map/#fn[]=1500&fn[]=2900&fn[]=6100&fn[]=10100&fn[]=14100)
- ¹¹ United States Interagency Council on Homelessness (n.d.). *State data and contacts map*. Washington, DC: Author. Retrieved from [https://www.usich.gov/tools-for-action/map/#fn\[\]=1500&fn\[\]=2900&fn\[\]=6100&fn\[\]=10100&fn\[\]=14100](https://www.usich.gov/tools-for-action/map/#fn[]=1500&fn[]=2900&fn[]=6100&fn[]=10100&fn[]=14100)
- ¹² Henry, M., Watt, R., Rosenthal, L., & Shivji, A. (2017). *The 2017 annual homeless assessment report (AHAR) to congress: Part one*. Washington, DC.: Department of Housing and Urban Development.
- ¹³ Henry, M., Watt, R., Rosenthal, L., & Shivji, A. (2017). *The 2017 Annual Homeless Assessment Report (AHAR) to Congress: Part One*. Washington, DC. Department of Housing and Urban Development.; Solari, C., Shivji, A., de Sousa, T., Watt, R., & Silverbrush, M. (2017). *The 2016 annual homeless report (AHAR) to congress: Part two*. Washington, DC: Department of Housing and Urban Development.
- ¹⁴ Voorhees Center for Neighborhood and Community (2017). *City of Chicago 2017 homeless point in time count and survey report*. Chicago, IL: Author.
- ¹⁵ U.S. Conference of Mayors (2016). *Report on hunger and homelessness*. Washington, DC: Author.
- ¹⁶ Jan, T. (2017). America's affordable-housing stock dropped by 60 percent from 2010 to 2016. *Chicago Tribune*.
- ¹⁷ Lewis, J., Williams, K., & Benefield, N. (2003). *Affordable housing in the Chicago region: Perspectives and strategies*. Chicago, IL: Housing Affordability Research Consortium.
- ¹⁸ Joint Center for Housing Studies of Harvard University (2017). *State of the nation's housing*. Cambridge, MA.
- ¹⁹ National Alliance to End Homelessness (2015). *Affordable housing increasingly unavailable to low-income renters*. Washington, DC: Author.
- ²⁰ MacArthur Foundation (2016). *How housing matters*. Chicago, IL: Author.
- ²¹ Cunningham, M., Pergamit, M., Astone, N., & Luna, J. (2014). *Homeless LGBTQ youth*. Washington, DC: Urban Institute.
- ²² Note: Severe mental illness is defined as diagnosis of Schizophrenia, Bipolar Disorder, or Major Depression.; Substance Abuse and Mental Health Services Administration. (2011). *Current statistics on the prevalence and characteristics of people experiencing homelessness in the United States*. Rockville, MD: Author.; Tsai, J., Link, B., Rosenheck, R. A., & Pietrzak, R. H. (2016). Homelessness among a nationally representative sample of US veterans: prevalence, service utilization, and correlates. *Social Psychiatry and Psychiatric Epidemiology*, 51(6), 907-916.
- ²³ PBS (2009). *Facts and figures: The homeless*.
- ²⁴ National Healthcare for the Homeless Council. (2017). *Addressing the opioid epidemic: How the opioid crisis affects homeless populations*. Nashville, TN: Author.
- ²⁵ National Alliance to End Homelessness (2016). *Opioid abuse and homelessness*. Washington, DC: Author.; Kushel, M. B., Vittinghoff, E., & Haas, J. S. (2001). Factors associated with the health care utilization of homeless persons. *Journal of the American Medical Association*, 285(2), 200-206.
- ²⁶ Kushel, M. B., Vittinghoff, E., & Haas, J. S. (2001). Factors associated with the health care utilization of homeless persons. *Journal of the American Medical Association*, 285(2), 200-206.; Main, T. (1998). How to think about homelessness: Balancing structural and individual causes. *Journal of Social Distress and the Homeless*, 7(1), 41-54.
- ²⁷ National Alliance to End Homelessness. (n.d.). *Domestic violence*. Washington, DC: Author. Retrieved from <https://endhomelessness.org/homelessness-in-america/what-causes-homelessness/domestic-violence/>

-
- ²⁸ Malos, E., & Hague, G. (1997, May). Women, housing, homelessness and domestic violence. In *Women's Studies International Forum*, 20(3), 397-409.; Baker, C. K., Billhardt, K. A., Warren, J., Rollins, C., & Glass, N. E. (2010). Domestic violence, housing instability, and homelessness: A review of housing policies and program practices for meeting the needs of survivors. *Aggression and Violent Behavior*, 15(6), 430-439.
- ²⁹ Browne, A., & Bassuk, S. S. (1997). Intimate violence in the lives of homeless and poor housed women: Prevalence and patterns in an ethnically diverse sample. *American Journal of Orthopsychiatry*, 67(2), 261.
- ³⁰ Substance Abuse and Mental Health Services Administration. (n.d.). *Trauma*. Rockville, MD: Author. Retrieved from <https://www.samhsa.gov/homelessness-programs-resources/hpr-resources/trauma>
- ³¹ National Alliance to End Homelessness. (n.d.). *Domestic violence*. Washington, DC: Author. Retrieved from <https://endhomelessness.org/homelessness-in-america/what-causes-homelessness/domestic-violence/>
- ³² Substance Abuse and Mental Health Services Administration. (n.d.). *Trauma*. Rockville, MD: Author. Retrieved from <https://www.samhsa.gov/homelessness-programs-resources/hpr-resources/trauma>
- ³³ Morton, M. H., Samuels, G. M., Dworsky, A., & Patel, S. (2018). *Missed opportunities: LGBTQ youth homelessness in America*. Chicago, IL: Chapin Hall at the University of Chicago.
- ³⁴ Cray, A., Miller, K., & Durso, L. E. (2013). *Seeking shelter: The experiences and unmet needs of LGBTQ homeless youth*. Washington, DC: Center for American Progress.
- ³⁵ Morton, M. H., Samuels, G. M., Dworsky, A., & Patel, S. (2018). *Missed opportunities: LGBTQ youth homelessness in America*. Chicago, IL: Chapin Hall at the University of Chicago.
- ³⁶ Morton, M. H., Samuels, G. M., Dworsky, A., & Patel, S. (2018). *Missed opportunities: LGBTQ youth homelessness in America*. Chicago, IL: Chapin Hall at the University of Chicago.
- ³⁷ Troisi, C. L., Lee, R. D., & Stoll, R. J. (2012). *Perceived needs of homeless persons in Houston/Harris County, 2012*. Houston, TX: Coalition for the Homeless. Retrieved from <http://www.homelesshouston.org/wp-content/uploads/2012/12/2012NeedsAssessmentReport-Aug23.pdf>
- ³⁸ Metraux, S., Roman, C. G., & Cho, R. S. (2007). Incarceration and homelessness. *National Symposium on Homelessness Research*, 9-1- 9-31.; Burt, M. R. (1999). *Homelessness: Programs and the people they serve, findings of the national survey of homeless assistance providers and clients*. Washington, DC: The Urban Institute.
- ³⁹ Metraux, S., Roman, C. G., & Cho, R. S. (2007). Incarceration and homelessness. *National Symposium on Homelessness Research*, 9-1- 9-31.; Burt, M. R. (1999). *Homelessness: Programs and the people they serve. Findings of the national survey of homeless assistance providers and clients*. Washington, DC: The Urban Institute.
- ⁴⁰ Hughes, T. A., Wilson, D. J., & Beck, A. J. (2001). *Trends in state parole, 1990-2000*. Washington DC: U.S. Bureau of Justice Statistics.
- ⁴¹ Greenberg, G. A., & Rosenheck, R. A. (2008). Jail incarceration, homelessness, and mental health: A national study. *Psychiatric Services*, 59(2), 170-177.
- ⁴² Greenberg, G. A., & Rosenheck, R. A. (2008). Jail incarceration, homelessness, and mental health: A national study. *Psychiatric Services*, 59(2), 170-177.
- ⁴³ National Law Center on Homelessness and Poverty. (n.d.). *No safe place: The criminalization of homelessness in U.S. cities*. Washington, DC: Author.
- ⁴⁴ Stuart, F. (2014). From 'rabble management' to 'recovery management': Policing homelessness in marginal urban space. *Urban Studies*, 51(9), 1909-1925.
- ⁴⁵ Stuart, F. (2014). From 'rabble management' to 'recovery management': Policing homelessness in marginal urban space. *Urban Studies*, 51(9), 1909-1925.
- ⁴⁶ Fitzpatrick, K. M., & Myrstol, B. (2011). The jailing of America's homeless: Evaluating the rabble management thesis. *Crime & Delinquency*, 57(2), 271-297.
- ⁴⁷ Tsai, J. (2017). Lifetime and 1-year prevalence of homelessness in the US population: Results from the national epidemiologic survey on alcohol and related conditions. *Journal of Public Health*, 1-10.

-
- ⁴⁸ National Healthcare for the Homeless Council. (2017). *Addressing the opioid epidemic: How the opioid crisis affects homeless populations*. Nashville, TN: Author.
- ⁴⁹ National Healthcare for the Homeless Council. (2017). *Addressing the opioid epidemic: How the opioid crisis affects homeless populations*. Nashville, TN: Author.
- ⁵⁰ Strang, J., McCambridge, J., Best, D., Beswick, T., Bearn, J., Rees, S., & Gossop, M. (2003). Loss of tolerance and overdose mortality after inpatient opiate detoxification: Follow up study. *Bmj*, 326(7396), 959-960.
- ⁵¹ Substance Abuse and Mental Health Services Administration. (2011). *Current statistics on the prevalence and characteristics of people experiencing homelessness in the United States*. Rockville, MD: Author.
- ⁵² Metraux, S., & Culhane, D. P. (2004). Homeless shelter use and reincarceration following prison release. *Criminology & Public Policy*, 3(2), 139-160.
- ⁵³ Kuehn, D. (2008). *The challenges of prisoner reentry: Facts and figures*. Washington, DC: The Urban Institute.
- ⁵⁴ Metraux, S., & Culhane, D. P. (2004). Homeless shelter use and reincarceration following prison release. *Criminology & Public Policy*, 3(2), 139-160.; Metraux, S., Roman, C. G., & Cho, R. S. (2007). Incarceration and homelessness. *National Symposium on Homelessness Research*, 9-1- 9-31.
- ⁵⁵ Roman, C. G. (2004). *Taking stock: Housing, homelessness, and prisoner reentry*. Washington, DC: The Urban Institute.
- ⁵⁶ Kuehn, D. (2008). *The challenges of prisoner reentry: Facts and figures*. Washington, DC: The Urban Institute.
- ⁵⁷ Kuehn, D. (2008). *The challenges of prisoner reentry: Facts and figures*. Washington, DC: The Urban Institute.
- ⁵⁸ Henry, M., Watt, R., Rosenthal, L., & Shivji, A. (2017). *The 2017 annual homeless assessment report (AHAR) to congress: Part one*. Washington, DC: Department of Housing and Urban Development.
- ⁵⁹ Chicago Coalition for the Homeless (n.d.). *FAQs/studies*. Chicago, IL: Author. Retrieved from <http://www.chicagohomeless.org/faq-studies/>
- ⁶⁰ Chicago Coalition for the Homeless (n.d.). *FAQs/studies*. Chicago, IL: Author. Retrieved from <http://www.chicagohomeless.org/faq-studies/>
- ⁶¹ Chicago Coalition for the Homeless (n.d.). *FAQs/studies*. Chicago, IL: Author. Retrieved from <http://www.chicagohomeless.org/faq-studies/>
- ⁶² Tsemberis, S., Gulcur, L., & Nakae, M. (2004). Housing first, consumer choice, and harm reduction for homeless individuals with a dual diagnosis. *American Journal of Public Health*, 94(4), 651-656.
- ⁶³ Somers, J. M., Rezanoff, S. N., Moniruzzaman, A., Palepu, A., & Patterson, M. (2013). Housing First reduces re-offending among formerly homeless adults with mental disorders: results of a randomized controlled trial. *PloS one*, 8(9).
- ⁶⁴ National Alliance to End Homelessness. (n.d.). *Domestic violence*. Washington, DC: Author. Retrieved from <https://endhomelessness.org/homelessness-in-america/what-causes-homelessness/domestic-violence/>
- ⁶⁵ Smith, D. M. (1994). A theoretical and legal challenge to homeless criminalization as public policy. *Yale Law & Policy Review*, 12(2), 487-517.
- ⁶⁶ National Law Center on Homelessness and Poverty. (n.d.). *No safe place: The criminalization of homelessness in U.S. cities*. Washington, DC: Author.
- ⁶⁷ National Law Center on Homelessness and Poverty. (n.d.). *No safe place: The criminalization of homelessness in U.S. cities*. Washington, DC: Author.
- ⁶⁸ The Center for Problem-Oriented Policing. (n.d.) *The SARA model*. Retrieved from <http://www.popcenter.org/about/?p=sara>
- ⁶⁹ Braga, A. A., Welsh, B. C., & Schnell, C. (2015). Can policing disorder reduce crime? A systematic review and meta-analysis. *Journal of Research in Crime and Delinquency*, 52(4), 567-588.
- ⁷⁰ Gatens, A. (2018). *Responding to individuals experiencing mental health crises: Police-involved programs*. Chicago, IL: Illinois Criminal Justice Information Authority.

⁷¹ Kern, N., & Pennel, B. (2001). *San Diego homeless court: A process and impact evaluation*. San Diego, CA: San Diego Association of Governments.

⁷² Reichert, J., Powers, M., & Skorek, R. (2016). *Housing and services after prison: Evaluation of the St. Leonard's House reentry program*. Chicago, IL: Illinois Criminal Justice Information Authority