

Growing Need & Shrinking Opportunities

Findings and Recommendations

from the 2007 Downtown Women's Needs Assessment

Acknowledgements

The Downtown Women's Action Coalition extends deep appreciation to the women residents of downtown Los Angeles who shared their stories and gave voice to the needs of their community. Without the welcoming spirit and active participation of the women being interviewed, this community-based research project would not have been possible.

We acknowledge the commitment and professionalism of the more than 60 volunteers who devoted their time and enthusiasm to this project. Like our previous Needs Assessment projects in 2001 and 2004, this project continued the culture of community spirit and action generated by broad and diverse participation.

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Lastly, DWAC would like to recognize community organizations who participated in the project that donated staff time, gifts for respondents, resources for volunteer stipends, lunch for volunteers, and space for interviews at their sites:

Central City Church of the Nazarene
Central City Community Outreach
Downtown Women's Center
Esperanza Community Housing Corporation
Homeless Health Care Los Angeles
Lamp Community
Los Angeles Community Action Network
Salvation Army Safe Harbor
Shelter Partnership
Skid Row Housing Trust
SRO Housing Corporation
St. Vincent's Cardinal Manning Center
Volunteers of America

Note: The above-named participating organizations supported this project in a variety of ways. However, the opinions, conclusions and recommendations in this report do not necessarily reflect the views of all of the participating agencies.

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I. EXECUTIVE SUMMARY

The Downtown Women's Action Coalition (DWAC), formed in 2001, consists of service providers, advocates, and downtown residents whose initial focus was to seek immediate emergency relief for homeless single women but, since that time, has been working collaboratively to promote both short and long-term changes to improve the health and safety of women living downtown. The number of homeless and very low-income women living in Skid Row has gradually but steadily increased since 2000, in a community primarily designed to serve single, adult men. Housing and services for women with or without children have not expanded nearly enough to serve the growing and changing needs.

Growing Need and Shrinking Opportunities, a community-based research project, is the third in a series of survey projects focused on the needs, characteristics, and conditions facing homeless and other very low-income women living downtown. The purposes of the project and this resulting report are: 1) to provide updated data on the current characteristics and most immediate needs of women living downtown, most of whom are currently homeless or have experienced homelessness; 2) to provide much needed information about the incidence of violence against women, issues specific to women with children under the age of 18, and increased policing in downtown Los Angeles; and 3) to identify appropriate recommendations to improve conditions for women living in the Skid Row/Central City East community.

Primary Findings

Demographics

The women surveyed ranged in age from 18 to 82 years and the median age was 48 years. The largest number of respondents identified as African American (44.1%), with the next largest categories being non-Hispanic white (20.1%) and Hispanic/Latina (16.2%). The majority of women (68.6%) had a high school education or General Equivalency Degree (GED), attended some college, or had a college degree.

Most of the women (90.9%) had at least one source of income or public benefits; the most common sources were General Relief, Food Stamps, and Supplemental Security Income (SSI).

Housing Issues and Community Stability

The majority of women (62.4%) had been homeless for one year or more during their lifetimes, with 29.3 percent experiencing homelessness for five years or more.

Housing patterns of the women were largely unstable, both over the past year and in the past month. Most women (89.2%) had slept in two or more places during the past year and 75.0 percent had experienced homelessness in that time. During the past month, 62.9 percent of the women had been homeless. Although individual housing patterns showed multiple places



It took me awhile when I first arrived downtown to find the services that I needed. Once I found them I also found out there was an inadequate amount of services for women in the community struggling like me. Who better than I to tell my story and share my experiences? As co-chair of DWAC I know it is necessary for women in the community to collect information about us. This research is important so that we are no longer isolated from other communities, that everyone knows the real story.

--Debbie, DWAC Co-Chair

of residence, long-term residence within the downtown community was quite stable. The median length of time that women had lived downtown was three years, with more than 40 percent living in the community for more than four years. The majority of women (61.2%) have not moved away from the Skid Row community since they first arrived.

Community Health

Over half (52.3%) of the women reported physical health problems during the past year and 34.1 percent reported a permanent physical disability. About one-quarter (24.4%) of the women received a prescription for medication during the past year that they could not fill. Less than half (41.9%) had gotten a flu shot in the past year.

Just under one-quarter (22.8%) of women had an abnormal Pap smear or abnormal mammogram in the past three years. Although the majority of respondents reported that they were able to get follow-up treatment, a significant percentage (26.3%) were not able to get follow-up treatment.

More than one-third (36.0%) of the respondents reported drug or alcohol abuse during the past year, and slightly more (38.2%) reported being in recovery from drug or alcohol abuse. Just under one-half (46.0%) of the women reported substance abuse, recovery, or both.

The majority of women (66.4%) were affected by mental illness (reported experiencing mental illness in the past year and/or reported taking medication for a mental health problem).

Over half of the women (61.2%) had no family or friends currently living in the downtown area. While the large majority of women reported that they had the opportunity to confide in someone about important issues in their lives, 13.6 percent did not have anyone to fill this role.

Women with Children

Many of the women living downtown (32.7%) had children under the age of 18. However, the majority had lost custody of their children; only 21.6 percent of all women with minor children had current legal custody.

The most commonly reported reason for children being removed from custody was "because I am homeless," which is not a legal reason to remove children from custody. Although this is self-reported data, it is significant that women believe this is the reason they lost custody. Additionally, the majority (63.0%) of women who lost custody reported they needed access to appropriate housing and almost half (44.8%) needed legal assistance to regain custody of their children.

Acts of Violence against Women

Seven out of ten women had experienced domestic violence, sexual assault and/or child abuse during their lifetimes.

The majority of women (56.1%) reported that they had been victims of domestic violence during their lifetimes. Among lifetime victims, 54.3 percent experienced domestic violence during the past year. Almost half of women (47.2%) reported that they had been victims of sexual assault during their lifetimes. Among lifetime victims, 44.7% experienced sexual assault during the past year. About one-third (34.3%) of women who had experienced domestic violence and/or sexual assault had come directly downtown afterward. Of those, less than half (45.9%) were offered services or help to deal with the after-effects of violence.

Over one-third (35.2%) of the women were victims of child abuse. Additionally, 39.2 percent of respondents reported they had been expected to perform a sexual favor in exchange for housing, protection, cash or other needs, a form of sexual intimidation and exploitation.

Interaction with Law Enforcement

Almost one-third (31.2%) of all women respondents had been arrested during the past year. Almost half of women (45.5%) reported negative interaction with law enforcement in at least one of these categories: ticket/citation, stopped/detained, held in custody, arrest, incarceration, or "raid" in place of residence.

Among women with negative interaction with law enforcement, just over one-quarter (27.5%) were offered shelter or services during the interaction, and 62.5 percent of those women actually received the shelter or services that had been offered.

Community Resources and Barriers to Access

Housing emerged as the clear priority need in the community. Affordable permanent housing was the overwhelming priority, with 63.9 percent of the women indicating this as a need, with emergency or transitional housing (28.3%) and dental care (21.1%) as the other top choices.

Barriers to accessing housing and services reported by at least 40 percent of women are: waiting lists (64.6%), housing not being affordable (48.1%), unsafe or unwelcoming environment (45.2%), needed services not being available (42.6%), and long lines (40.9%).

A majority of respondents felt that access to public transportation (59.9%), availability of housing (52.9%), and availability of free or low cost food (52.9%) were current assets of the downtown community.

Recommendations

Although a multitude of conclusions and recommendations could be gleaned from the data presented in this report, the following section reflects top priorities, as identified by survey participants and a wider group of community stakeholders. Given the size and complexity of the issues and problems faced by homeless and low-income women, these recommendations should not be viewed in isolation; they are intended to fit into an integrated systems approach to prevent and end homelessness as well as the broader movement to eliminate social inequity by gender and the feminization of poverty.

Housing and Community Stability

- A-1. Immediately and drastically increase safe, affordable permanent housing options for women and families in downtown Los Angeles and throughout Los Angeles City and County, using a variety of short-term and long-term approaches.
- A-2. Increase the stock of permanent supportive housing, a model that reduces homelessness, reduces interaction with law enforcement, and is cost-effective for government.
- A-3. Immediately and drastically reduce arrests for non-violent and non-serious crimes
- A-4. Provide incentives for and facilitate service partnerships with affordable housing developers to increase the number of housing developers serving extremely low-income and/or homeless people.
- A-5. Evaluate the existing system of emergency and transitional housing to ensure that program rules and procedures do not increase community instability.

- A-6. Increase homeless prevention and housing stability using a variety of interventions, including:
- Adopt a widespread preservation and improvement platform for all existing affordable housing, both within the community and region-wide.
 - Increase free legal assistance and representation for tenants facing eviction and other tenant rights violations; facilitate dispute resolution between landlords and tenants to aid in housing retention.
 - Increase enforcement and penalties against landlords who force people into homelessness through illegal evictions and other violations of tenant rights.
 - Identify and secure multiple sources of public and private funding to provide resources for rent subsidies on an emergency basis.
 - Develop funding sources for programs that provide in-home and community-based services that assist people in maintaining their housing.

Community Health

- B-1. Ensure health access, quality, and continuity of care for homeless women and their families living downtown.
- B-2. Establish and sustain communicable disease prevention and health promotion programs with homeless residents and health, housing, and social service agencies in Central City East/Skid Row; strengthen infection control practices and disease reporting; increase adult vaccination (influenza, pneumonia, and hepatitis); provide education on skin infections (bacterial, parasitic, and viral), foodborne illnesses, and diseases transmitted person-to-person.
- B-3. Increase access to a wide range of community-based and clinical mental health treatment, including permanent supportive housing.
- B-4. Increase dental care in the downtown community.

Violence against Women

- C-1. Enhance current housing and service programs to assess all participants for incidence of violence and trauma and offer appropriate treatment and intervention services.
- C-2. Eliminate the exclusion of homeless women from the traditional domestic violence shelter system.
- C-3. Implement a wide variety of community-based events to raise awareness about and prevent violence against women and include survivors of violence in planning and implementation.
- C-4. Reduce incidence of abuse of power and other poor treatment in our community that re-traumatizes and demeans women (and others), including improving and increasing staff training, implementing grievance procedures, establishing codes of conduct, etc.
- C-5. Reduce incidence of inappropriate referrals and placement of recent domestic violence survivors to homeless shelters not equipped with confidentiality, appropriate services and other safety protocols.
- C-6. Create model programs to meet the needs of unhoused women experiencing domestic violence/partner abuse.

Enhancements to Community Resources

- D-1. Research and implement new, comprehensive service programs for women who have lost custody of their children to promote reunification of families.
- D-2. Conduct targeted outreach to women to engage them in employment and training programs, as well as local hiring opportunities.
- D-3. Continue and expand outreach and advocacy programs focused on increasing access and maintenance of crucial public benefits.
- D-4. Continue community-wide training models to develop expertise on issues facing women living downtown and create incentives for participation.
- D-5. Remove unnecessary and unintended barriers to accessing services and all types of housing.

II. Introduction

In April 2001, downtown residents and service providers learned of the imminent closure of the Union Rescue Mission's single women's emergency shelter program, the largest provider of emergency shelter to single women on Skid Row. The closing of the Union Rescue Mission's program, combined with the explosion of women and families living on Skid Row, led to the formation of the Downtown Women's Action Coalition (DWAC). DWAC consists of service providers, advocates, and downtown residents whose initial focus was to seek immediate emergency relief for homeless single women but, since that time, has been working collaboratively to promote both short and long-term changes to improve the health and safety of women living downtown, including engaging in community-based research.

The number of homeless and very low-income single women living in Skid Row has gradually but steadily increased since 2000, in a community primarily designed to serve single, adult men. Additionally, women with children living in Skid Row dramatically increased between 2000 and 2005, then spiked downward again. Housing and services for women with or without children have not expanded nearly enough to serve the growing and changing needs.

Growing Need and Shrinking Opportunities, a community-based research project, is the third in a series of survey projects focused on the needs, characteristics, and conditions facing homeless and other very low-income women living downtown. As in our 2001 and 2004 reports¹, DWAC members intend to utilize this report to provide relevant and up-to-date information to inform collaborative work, community-based changes, and public policy. We believe, and our experience has shown, that community-based research is a powerful tool in building relationships and creating positive change.

As was the case with previous DWAC research, women were eager to participate and happy to share their feelings, needs, and concerns. Volunteers also reported extremely positive results in their roles as interviewers and noted that, in general, the participants were extremely appreciative that people cared about their situations, had many opinions to share and were candid in their responses. We hope the information collected, documented, and distributed will help inform the entire Los Angeles community about the crisis facing women and families in our community and will, hopefully, spark much-needed action by policy makers and citizens alike.

¹ "2001 Downtown Women's Needs Assessment," Dennison, Mantley, Mendizabal and White; "Many Struggles, Few Options: 2004 Downtown Women's Needs Assessment," Dennison, Mendizabal and White (both available at www.cangress.org)

III. METHODOLOGY

A. Planning and Design

As with the Needs Assessment projects in 2001 and 2004, a sub-committee of DWAC, with representatives from the Downtown Women's Center, Los Angeles Community Action Network, and SRO Housing Corporation, was formed to plan and facilitate the project. The 2007 assessment followed a similar format as the others: a one-day survey conducted by trained volunteers at nine sites throughout Skid Row, designed to identify the needs and characteristics of homeless and housed women living downtown.

In designing the 2007 project, the goals were both to provide updated data and to revise the survey to gather new data relating to recent changes or developments occurring on Skid Row. DWAC members, both downtown residents and service-providers, held several brainstorming and planning sessions to determine what trends had been observed in the neighborhood since 2004 and what information agencies needed to better serve women. DWAC members decided to expand survey questions in the areas of violence against women, women with minor-aged children, and interaction with law enforcement to gather more detailed information in these areas of interest.

The survey instrument contained three qualifying questions (to determine gender and residence in the target community, as well as prevent duplication); 37 closed-ended questions, with additional sub-questions in some cases; 3 one-page addendums in the target research areas; and one open-ended question (see Appendix A). The instrument was tested on a small group of community residents, presented to the DWAC members for feedback, finalized, and translated into Spanish. The sub-committee also solicited volunteers to administer the surveys, trained volunteers, identified and prepared survey sites, conducted outreach to service providers and residents, planned and coordinated the survey day, and provided small stipends for volunteers who were downtown residents.

Survey sites were selected to cover areas with heavy traffic patterns and encompass the full geography of Skid Row. High traffic areas were essential to completing a large number of surveys because of the short period of time allocated to administer the survey. The sites selected and used for this survey were: 1) Central City Church of the Nazarene; 2) Downtown Women's Center; 3) Gladys Park; 4) James Wood Center; 5) Los Angeles Community Action Network; 6) Lamp Community; 7) Olympia Hotel; 8) Safe Harbor; and 9) Volunteers of America Drop-in-Center.

Sites were also selected based on their accessibility to women not regularly seeking services to encourage participation by all women living in the area. In general, volunteers were stationed on the sidewalk in front of the site or in an area visible from the street and were trained to approach women in friendly ways to invite their participation. At Downtown Women's Center, VOA Drop-In Center and the James Wood Center, the only sites where volunteers were located inside a facility, the areas where interviews were conducted were accessible to all interested women and there were no facility or program barriers to participating in the survey. In addition, teams of roving outreach volunteers walked the streets in the area, distributing informational flyers, speaking to women about the purpose of the survey and how to participate, and assisting interested participants in locating the nearest survey site.

All of the considerations in site selection were intended to assist in gathering data representative of all women living in the area, although there was no attempt to ensure the sample of women surveyed was statistically representative.

B. Data Collection and Analysis

Two survey administration training sessions were conducted for volunteers. The volunteers for survey administration were all women, including women who live in the community, service providers, and other interested women from throughout Los Angeles. The training consisted of general information about homelessness, sensitivity to issues homeless women may be confronting, definitions of relevant terms, review of survey questions, and protocol for administering the surveys.

Volunteers for the roving outreach teams were oriented to their roles as well. These teams were comprised of Skid Row neighborhood residents, both male and female.

The surveys were completed from 9:30 a.m. to 12:00 p.m. on Saturday, July 14, 2007. The data collection procedure consisted of an individual, face-to-face, written survey with each respondent. A number of procedures were implemented to encourage participation and protect the respondent's rights during the survey process. It was made clear to prospective respondents that the survey was totally voluntary, they could terminate the survey at any time, and they could decline to answer any question throughout the survey process. Respondents were also offered a gift of women's care products as an incentive for participation.

The survey was conducted in English and Spanish (by fluent Spanish-speaking volunteers) and lasted approximately 30-45 minutes, depending on the length of responses given. Responses were self-reported by each respondent; no additional verification of answers was requested. A total of 188 surveys were administered and collected by 38 trained volunteers. No attempt was made to determine whether 2007 participants had also participated in 2001 and/or 2004.

The survey data were cleaned and entered into SPSS for statistical analysis. Of the 188 completed surveys, 6 were discarded due to ineligible respondents and incomplete surveys. Although 182 surveys were analyzed, the total sample size for each question varies due to questions that respondents chose not to answer and sub-questions that did not apply to every respondent.

Data were analyzed using frequency distributions and other basic statistical analysis. In some cases, variables were created or computed using raw survey data in order to report the most relevant information.



My observations included individuals eager to share their experiences and perspectives on what would improve their lives, despite what many could see as insurmountable obstacles. It confirmed once again how structural and institutional racism topped by interpersonal sexism results in injustice in the City of Angels.

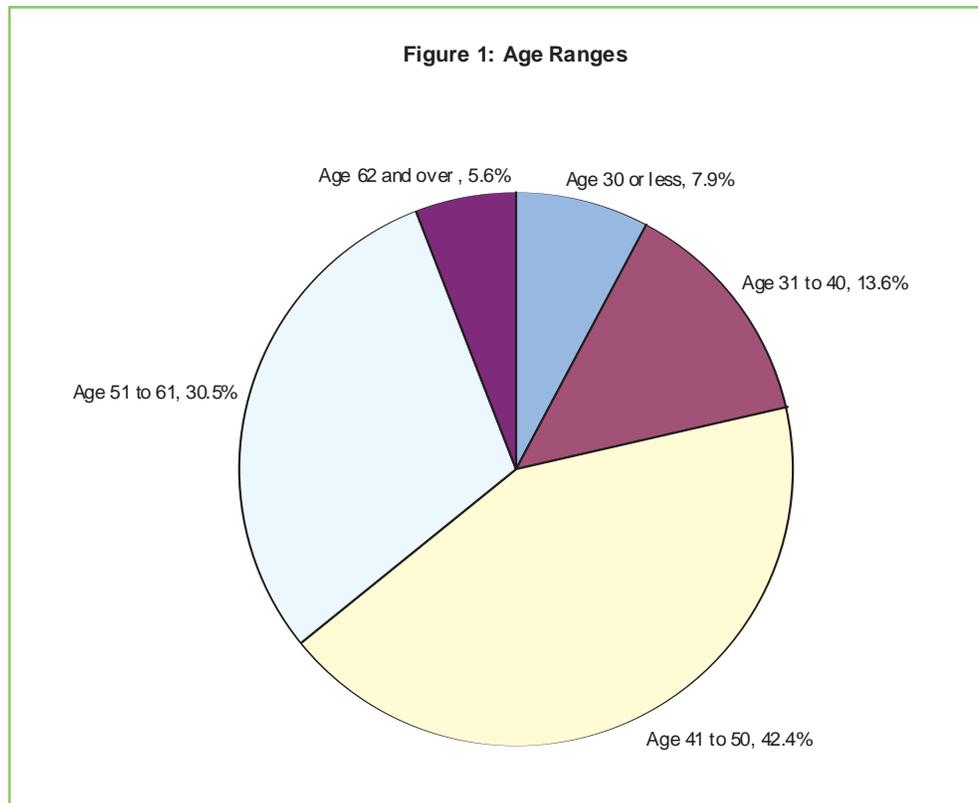
--Fabiola , DWAC Member

IV. DATA ANALYSIS AND PRESENTATION

A. Demographics

Age

The women surveyed ranged in age from 18 to 82 years, with the large majority between 41 and 61 years (see Figure 1). The age range with the largest number of women was between 41 and 50 years of age (42.4%), followed by age 51 to 61 (30.5%), age 31 to 40 (13.6%), age 30 or less (7.9%), and 62 and over (5.6%). The mean and median ages were very similar, at 47 and 48 years respectively.



Place of Birth

The large majority of respondents (90.6%) were born in the United States, and 4.1 percent were born in Mexico. Almost half of United States-born women were born in California (46.7%), with the remaining born in a wide range of states. Of those born in California, 53.8 percent were born in the City of Los Angeles and 66.7 percent were born in Los Angeles County.

Race/Ethnicity

The largest number of respondents identified as African American (44.1%), followed by non-Hispanic white (20.1%), Hispanic/Latina (16.2%), Multi-Racial/Ethnic (8.9%), Native American/American Indian (2.8%), Asian or Pacific Islander (2.2%), and Other (5.7%).

Note: The percentage of African American women is substantially lower than in 2001 and 2004 survey projects, as well as lower than the estimated percentage of African American adults in the community. This may indicate that African Americans are underrepresented in the overall results. It could also indicate that the forced displacement of homeless and poor residents from downtown LA in the past three years has disproportionately affected African Americans.

Education

The majority of women had at least a high school education or a General Equivalency Degree (GED). Only 31.4 percent of women had completed grade 11 or lower, while 29.0 percent were high school graduates or GED recipients, 25.6 percent had completed some college, and 14.0 percent were college graduates.

Other Demographics

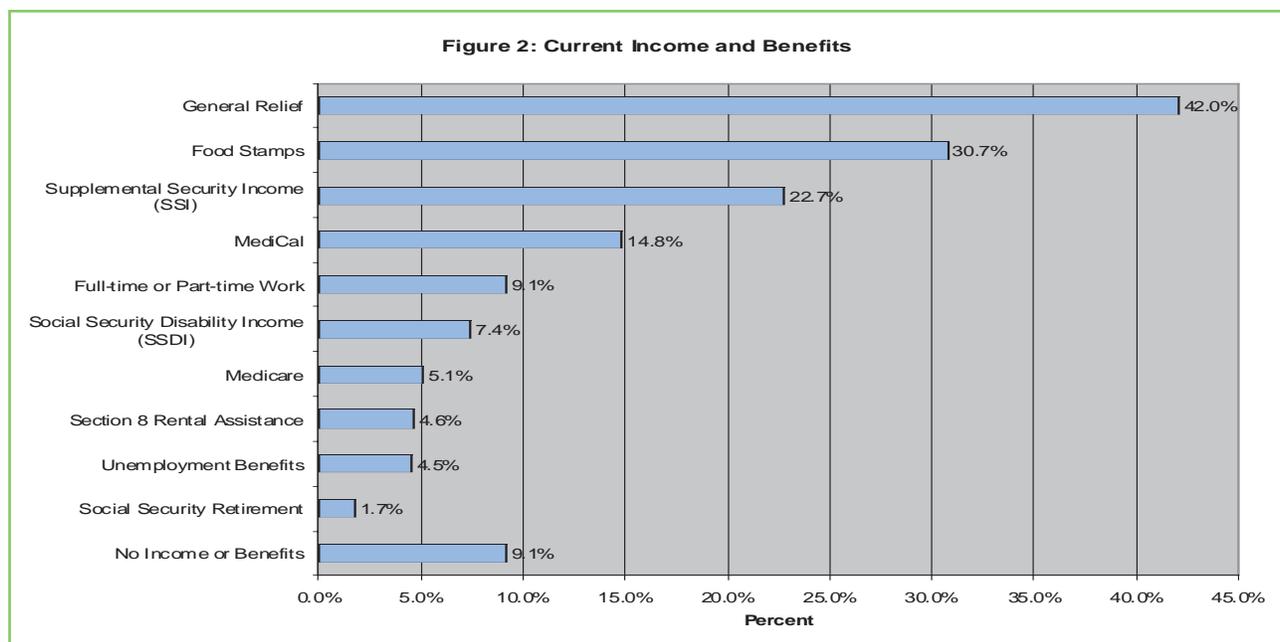
A notable percentage of women had spent time in foster care during their lifetimes (11.6%). Additionally, a very small group of women was comprised of United States veterans (4.0%).

Current Income and Benefits

The large majority of women (90.9%) reported at least one current source of income and/or public benefits, with 9.1 percent reporting no income or benefits of any kind. See Figure 2 for all reported income and benefits.

Income or benefits reported by at least 20 percent of respondents included: General Relief (42.0%), Food Stamps (30.7%), and Supplemental Security Income (22.7%). As a point of reference, General Relief is equivalent to about 12 percent of Area Median Income (AMI) and Supplemental Security Income is equivalent to about 22 percent of AMI.

Although 42 percent of women received General Relief (GR), just 55.4% of them also received Food Stamps, although GR recipients are generally eligible for Food Stamps. Additionally, 16.1 percent of respondents reported a loss of government benefits at some point during the past year. Only 9.1 percent of women reported income from part-time or full-time work.

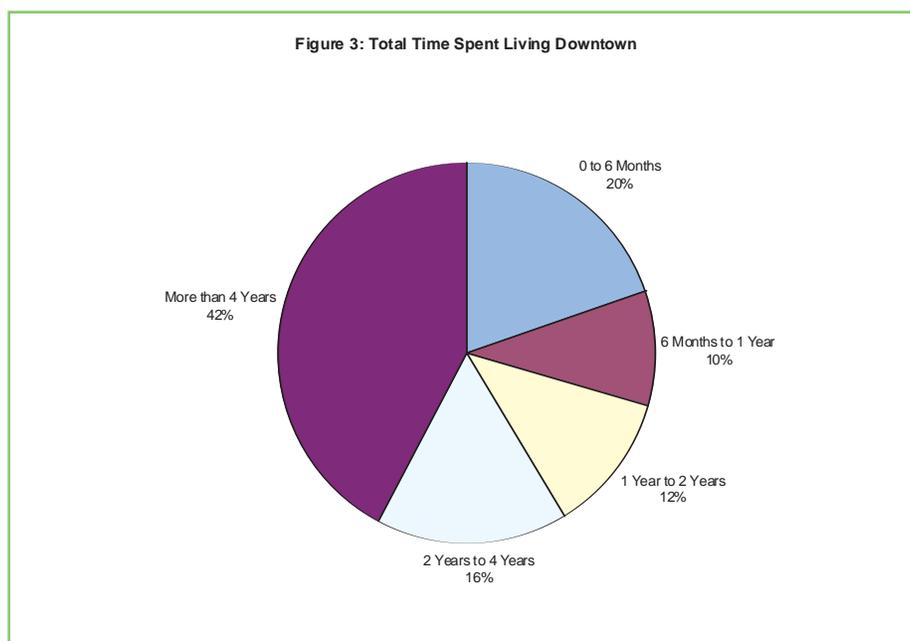


Note: Percentages do not add to 100% because respondents could choose more than one answer

B. Housing Issues and Community Stability

History of Living in the Downtown Community

Contrary to the commonly-accepted description of Skid Row/Central City East as a transitory community, women have often stayed for lengthy periods in the community. The total length of time that women had lived downtown varied greatly, from one week to forty years. The median length of residency was three years and the mean was approximately six and one-half years. More than 40 percent of the women had lived in the community for more than four years. Figure 3 shows the variation in the amount of time women had lived downtown.



Most respondents lived in local communities within Los Angeles County prior to moving downtown. More than two-thirds (68.8%) of respondents moved to Central City East/Skid Row from a city within Los Angeles County. Of those that moved to the community from within Los Angeles County, 54.5 percent moved from another neighborhood in the City of Los Angeles (or 37.5% of total respondents). Only 39.8 percent of respondents had moved away from Central City East/Skid Row since they first arrived.

History of Homelessness

The majority of women (62.4%) had been homeless for one year or more during their lifetimes, with 29.3 percent experiencing homelessness for five years or more. In contrast, only 5 percent of women had never experienced homelessness (see Table 1).

Table 1: Total Time Spent Homeless in Lifetime

	Number of Respondents	Percent
None	9	5.0
Less than 3 months	26	14.4
4 - 11 months	33	18.2
1 - 4 years	60	33.1
5 - 9 years	21	11.6
10 or more years	32	17.7
Total	181	100

Recent Homelessness and Housing

In the previous month, the places where women usually stayed were generally unstable (see Table 2). The majority of women (64.9%) were usually homeless, by federal definition¹⁹, in the past month. However, almost one-quarter of women (22.9%) were living in more stable housing, with most of these women renting their own rooms in residential hotels/SROs.

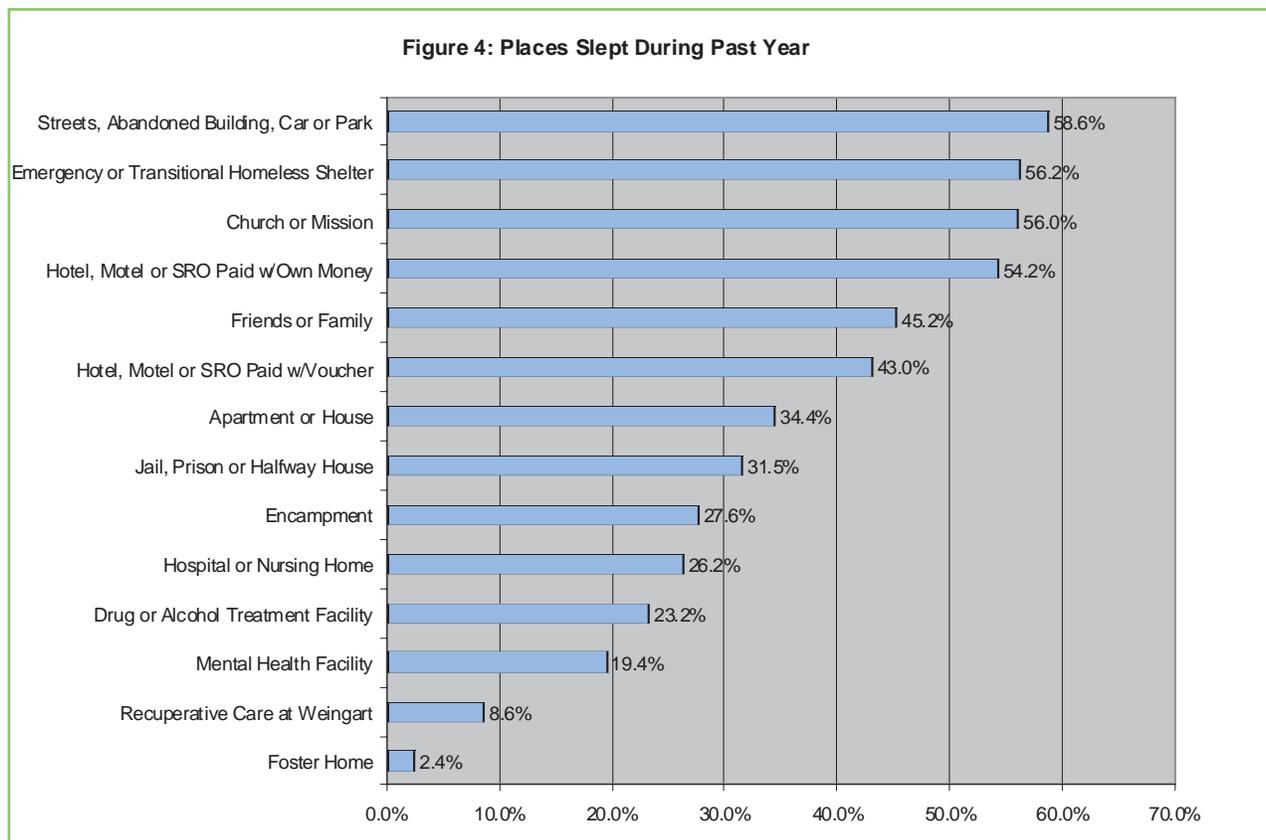
Table 2: Place Usually Slept during Past Month

	Number of Respondents	Percent
Homeless (by Federal Definition²)	96	64.9
Streets, Abandoned Building, Car, or Park	24	16.2
Encampment	1	0.7
Church or Mission	21	14.2
Emergency or Transitional Homeless Shelter	42	28.4
Hotel, Motel or SRO paid for w/ housing voucher	8	5.4
Stable or Semi-Stable Housing	34	22.9
Hotel, Motel or SRO paid for w/ own money	20	13.5
Own Apartment or House	7	4.7
Friends or Family	7	4.7
Institutions	18	12.2
Jail, Prison, or Halfway House	9	6.1
Hospital or Nursing Home	0	0
Recuperative Care at the Weingart Center	1	0.7
Drug or Alcohol Treatment Facility	3	2.0
Mental Health Facility	0	0
Foster Home	0	0
Other	5	3.4
Total	148	100

² The Federal definition of a homeless person, established in the Stewart B. McKinney Homeless Assistance Act of 1987, is an individual who lacks a fixed, regular, and adequate nighttime residence or an individual whose primary nighttime residence is a temporary shelter or place not ordinarily used as a regular sleeping accommodation for human beings.

Although many women were accessing subsidized housing in the downtown area, only 19.7 percent of respondents had ever received a City-wide Section 8 housing voucher³. Of those who had received a housing voucher, 29.0 percent were never able to utilize it and only 19.4 percent still had possession of their voucher (or 3.4% of all women surveyed).

Places that at least 30 percent of respondents had slept during the past year include: the streets, abandoned building, car, or park (58.6%); emergency or transitional homeless shelter (56.2%); church or mission (56.0%); friends or family (45.2%); a hotel, motel or SRO paid for with own money (54.2%); a hotel, motel or SRO paid for with a housing voucher (43.0%); own apartment or house (34.4%) and jail, prison or a halfway house (31.5%). The full range of places that women slept is seen in Figure 4.



Note: Percentages do not add to 100% because respondents could choose more than one answer.

Overall housing patterns of the women were largely unstable over the past year, with 75.0 percent reporting that they had experienced homelessness and 60.7 percent reporting that they were unable to find or secure affordable housing during the past year. The large majority of women (89.2%) had slept in two or more different places over the past year and almost two-thirds (63.3%) had slept in four or more places. Additionally, over one-third of respondents (37.2%) had been evicted at some point in their lifetimes and, of those, 15.6 percent had been evicted in the past year.

Showing similar patterns as 2004, places of residence are generally unstable. However, moves generally occur within the neighborhood, not to and from other neighborhoods. Long-term residence within the community shows quite a bit of stability since the majority of women (60.2%) have not left the Central City East community since they first arrived and more than half (58.0%) of the women surveyed have lived in the community for two years or more.

³ Section 8 is a mainstream federal housing subsidy program which allows participants to pay approximately 30% of their income in rent for a government-approved apartment and rent level and have the remaining rent subsidized. Currently in the Los Angeles region, waiting lists for access to the program are years-long or closed completely.

C. Community Health

General Health Issues

The women, overall, had serious health issues. Over half (52.3%) of the women reported physical health problems during the past year and 34.1 percent reported a permanent physical disability.

The majority of the women (60.6%) surveyed were currently taking medication. About one-quarter (24.4%) of all respondents received a prescription for medication during the past year that they could not fill. Less than half (41.9%) of women had gotten a flu shot in the past year.

Over one-quarter (28.0%) had an illness with frequent diarrhea, fever and/or cramps in the past six months, common symptoms of foodborne illness and diseases transmitted from person to person, but only 33.3% of those received medical care for the condition. Additionally, one-fifth (20.2%) of respondents sought treatment for a wound infection and 15.0 percent were diagnosed with a skin infection.

Women's Health Issues

Just under one-quarter (22.8%) of women had an abnormal Pap smear or abnormal mammogram in the past three years. Although the majority of respondents reported that they were able to get follow-up treatment, a significant percentage (26.3%) were not able to get follow-up treatment.

About half (47.7%) of women reported that they had access to an adequate supply of condoms and one-fifth (20.3%) reported that they did not; the remaining 32.0 percent reported access to condoms was not needed/not applicable. Over one-quarter (29.2%) had access to birth control methods other than condoms and an additional 29.2 percent reported that they did not; the remaining 41.6 percent reported access to birth control other than condoms was not needed/not applicable.

Substance Abuse

Just over one-third (36.0%) of the respondents reported drug or alcohol abuse during the past year, and slightly more (38.2%) reported being in recovery from drug or alcohol abuse. However, these groups were not mutually exclusive, with many women reporting both abuse and recovery during the past year; just under one-half (46.0%) of the women reported substance abuse, recovery, or both.

Mental Health

The majority of women (66.4%) were affected by mental illness, as identified by a positive response to at least one of two separate survey questions: 40.0 percent experienced mental illness in the past year and 55.3 percent reported taking medication for a mental health problem. Clearly, not everyone who was taking medication also reported experiencing mental illness. It is possible that some women did not feel they had experienced mental illness because their illness was controlled by medication, but no questions were asked to clarify the difference in reporting.

Note: The reported rate of mental illness is almost double the reported rate of 36.0 percent in 2004.

Social Isolation

The women reported a variety of factors that often contribute to social isolation. The majority of women (61.2%) had no family or friends, including husbands, unmarried partners, and children of any age, currently living in the downtown area. For those women who had lived in the community for two or more years, the percentage of women who had no family or friends living downtown dropped to 49.5 percent, still a significant group of women who may be experiencing isolation.

Additionally, in the past year, 34.9 percent of women had experienced a change in family structure, including divorce, death, and changes in children's custody, and 19.8 percent had lost a job. These psychological stressors may contribute to isolation and/or the high incidence of mental illness. While the majority of women reported that they had the opportunity to confide in someone about important issues in their lives, generally a friend, family member or professional, 13.6 percent did not have anyone to fill this role.

Another possible factor that could contribute to social isolation is that about one-third (32.7%) of the women living downtown had children under the age of 18, but the large majority of these women had lost custody of their children and/or did not have their children currently staying with them downtown.

D. Women with Children under the Age of 18

Many of the women living downtown (32.7%) had children under the age of 18. Among the women with children, almost half (45.1%) had one child; about one-quarter (23.5%) had four or more children. Among women under the age of 50, a significantly higher percentage (43.1%) had children under the age of 18.

However, Table 3 shows that the large majority of women have been separated from their children. Of those separated, the majority had lost custody of their children. Only 21.6 percent of all women with minor children had current legal custody. Of those with legal custody, just three women (27.3%) had their children currently staying with them downtown, indicating that most women had made alternative arrangements for the care of their children while living downtown. The number and percentage of women with legal custody and/or currently living with their children show a sharp decrease from both 2001 and 2004 data, indicating that multiple policies in place to remove children from downtown may be making a major impact on women in the community.



AS a woman living downtown, I have the ability to be of service and be a recognized and counted voice from the perspective of a female. I valued the openness and participation of women residents downtown. Sharing our struggles of the homeless experience provides a means to bring us help.

--Cloletta & Manuel, DWAC Members

Table 3: Children under Age 18

	Number of Respondents	Percent
Women with Children under Age 18	55	32.7
Of Women with Children, Had Legal Custody of All or Some of their Children	11	21.6
Of Women with Legal Custody, Had Children Currently Staying with them	3	27.3

Note: Percentages were calculated from the total respondents in each question, not all respondents answered follow-up questions.

Although the sample of women with legal custody of their children was very small, these women reported very low rates of receiving public benefits and child support. Less than half (45.5%) received CalWORKs, Healthy Families Benefits, or Women, Infants and Children Benefits (WIC); only 20 percent received Food Stamps; none received child support. Just over half (54.4%) had child care assistance in the community.

Among those who had lost custody, the large majority (83.3%) had visitation rights. Women reported a wide variety of reasons given to them that led to their children being removed from their custody. However, the most commonly reported reason was because they were homeless, which is not a legal reason to remove children from custody. Although this is self-reported data, it is significant that women believe this is the reason they lost custody. Additionally, the majority (63.0%) of women who lost custody reported they needed access to appropriate housing and almost half (44.8%) needed legal assistance to regain custody of their children.

Among all women with children under the age of 18, half of them (51.1%) are allowed to bring their children to their current place of residence and one-third (34.0%) had participated in events in the community with their children.

E. Acts of Violence against Women

Over one-third (35.2%) of the women were victims of child abuse. More than half (56.1%) of women had experienced domestic violence in their lifetimes and almost half (47.2%) had been sexually assaulted.

Additionally, 39.2 percent of respondents reported they had been expected to perform a sexual favor in exchange for housing, food, protection, cash or other needs. Although the survey did not include information about whether women actually engaged in sexual favors in exchange for housing, the expectation alone is a form of sexual intimidation and exploitation, possibly induced by the lack of housing and resources available to women.

Domestic Violence

The majority of women surveyed (56.1%) reported that they had been victims of domestic violence during their lifetimes. Most of the women had experienced domestic violence as an adult (86.6%), with 30.5 percent reporting domestic violence both as an adult and a child (see Table 4). Among lifetime victims, 54.3 percent experienced domestic violence during the past year (28.7% of the total respondents had experienced domestic violence in the past year).

Table 4: Incidence of Domestic Violence

	Number of Respondents	Percent
Experienced domestic violence during past year	50	28.7
Experienced domestic violence during lifetime	92	56.1
<i>Age experienced domestic violence (10 did not respond)</i>	--	--
Before age 18 (as a child)	11	13.4
Age 18 or older (as an adult)	46	56.1
Both (as a child and an adult)	25	30.5

Note: Percentages were calculated from the total respondents in each question; not all respondents answered follow-up questions.

Sexual Assault

Almost half of women (47.2%) reported that they had been victims of sexual assault during their lifetimes (see Table 5). In contrast to experiences of domestic violence, a significant portion of victims of sexual assault reported that the assault was experienced as a child only (27.7%). Among lifetime victims, 44.7% experienced sexual assault during the past year (19.9% of the total respondents had experienced sexual assault in the past year).

Table 5: Incidence of Sexual Assault

	Number of Respondents	Percent
Experienced sexual assault during past year	34	19.9
Experienced sexual assault during lifetime	76	47.2
<i>Age experienced sexual assault (11 did not respond)</i>	--	--
Before age 18 (as a child)	18	27.7
Age 18 or older (as an adult)	24	36.9
Both (as a child and an adult)	23	35.4

Note: Percentages were calculated from the total respondents in each question; not all respondents answered follow-up questions.

Survivors of Domestic Violence, Sexual Assault and/or Child Abuse

Seven out of ten women had experienced domestic violence, sexual assault, and/or child abuse during their lifetimes. Among those women, the violence occurred outside of the downtown community for about half (47.0%) of the women, within downtown for 21.6 percent of women, and 31.4 percent of women had experienced violence both within and outside of downtown. The large majority reported that more than one perpetrator had committed violence against them and almost half (44.3%) reported five or more perpetrators. Just under one-third (29.0%) reported that a perpetrator lived in the downtown community.

Less than half (43.1%) of women who had experienced violence currently lived in a place where they could lock an individual door. Among women who could lock their door, the large majority (87.2%) felt safer than if they were in a situation without a locked door.

About one-third (34.3%) of women had moved downtown directly after experiencing domestic violence and/or sexual assault. Of those, less than half (45.9%) were offered services or help to deal with the after-effects of violence.

The majority (67.0%) of women believed that events that raise awareness about violence against women are effective in reducing violence and, among those, 82.2 percent reported they would like to participate in such events.

F. Interaction with Law Enforcement

Among women who had requested assistance from law enforcement, about an equal percentage were satisfied (43.1%) as those who were not satisfied (44.6%) with the assistance received; 12.3 percent received no response to their request.

Almost half of women (45.5%) reported negative interaction with law enforcement in at least one of these categories: ticket/citation, stopped/detained, held in custody, arrest, incarceration, or "raid" in place of residence. Among women with negative interaction with law enforcement, just over one-quarter (27.5%) were offered shelter or services during the interaction, and 62.5 percent of the women who were offered shelter or services actually received them.

Almost one-third (30.9%) of respondents had received a ticket or citation in the past year. Table 6 shows the most common reasons for citations among those who received them in the past year.

Of those who received tickets/citations, 66.7 percent received a fine and the large majority of those fined (89.3%) were not able to pay the fine. Among those reporting they were unable to pay their fine, 40.0 percent had their fine turn into a warrant and an additional 20.0 percent did not know if their fine had prompted a warrant.

Table 6: Reasons for Tickets and Citations

	Number of Respondents	Percent
Jaywalking	23	50.0
Sitting, sleeping or blocking the sidewalk (41.18d)	17	36.2
Trespassing	6	13.0
Shopping cart or milk crate violation	5	11.1

Note: Percentages do not add to 100% because respondents could choose more than one answer and not all categories are listed. Additionally, many people declined to report the specific reasons for citations.

A significant percentage (31.2%) of respondents reported that they had been arrested during the past year and 31.5 percent had slept in jail, prison or a halfway house during the past year. Table 7 shows the most common reasons for arrest. It is notable that only two women were arrested for burglary, robbery or theft and none were arrested for the violent crimes of battery, assault, rape or homicide.

Table 7: Reasons for Arrests

	Number of Respondents	Percent
Drug Possession	17	37.8
Sitting, sleeping or blocking the sidewalk (41.18d)	10	23.8
Shopping cart or milk crate violation	4	9.5

Note: Percentages do not add to 100% because respondents could choose more than one answer and not all categories are listed. Additionally, many people declined to report the specific reasons for arrests.

G. Community Resources

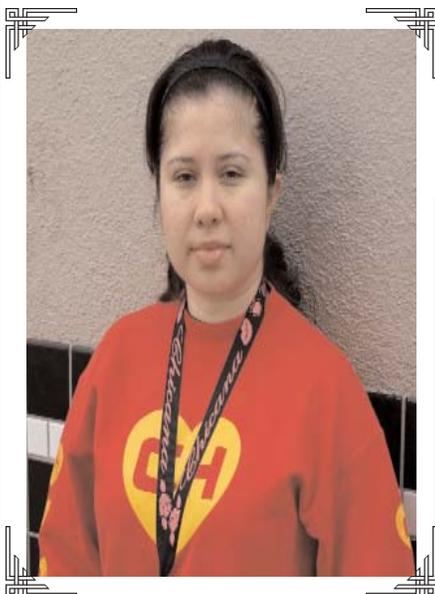
Resources Most Needed

The respondents were asked to report the top three resources (not in ranked order) needed to improve the downtown community. As in 2001 and 2004, housing continued to emerge as the clear priority need in the community. Affordable permanent housing was the overwhelming priority, with 63.9 percent of the women indicating this as a need, with emergency or transitional housing (28.3%) and dental care (21.1%) as the other top choices. Table 8 reports the resource priorities identified by at least ten percent of respondents.

Table 8: Resources Most Needed to Improve the Downtown Community

	Number of Respondents	Percent
Affordable Permanent Housing	106	63.9
Emergency or Transitional Housing	47	28.3
Dental Care	35	21.1
Jobs/Employment Opportunities	34	20.5
Employment and Training Programs	33	19.9
Child Care	31	18.7
Drug or Alcohol Treatment Programs	30	18.1
Legal Assistance	30	18.1
Mental Health Care	22	13.3
Domestic Violence Programs	21	12.7
Financial and Credit Counseling	21	12.7
Medical Care	18	10.8

Note: Percentages do not add to 100% because respondents could choose up to three types of housing and services.



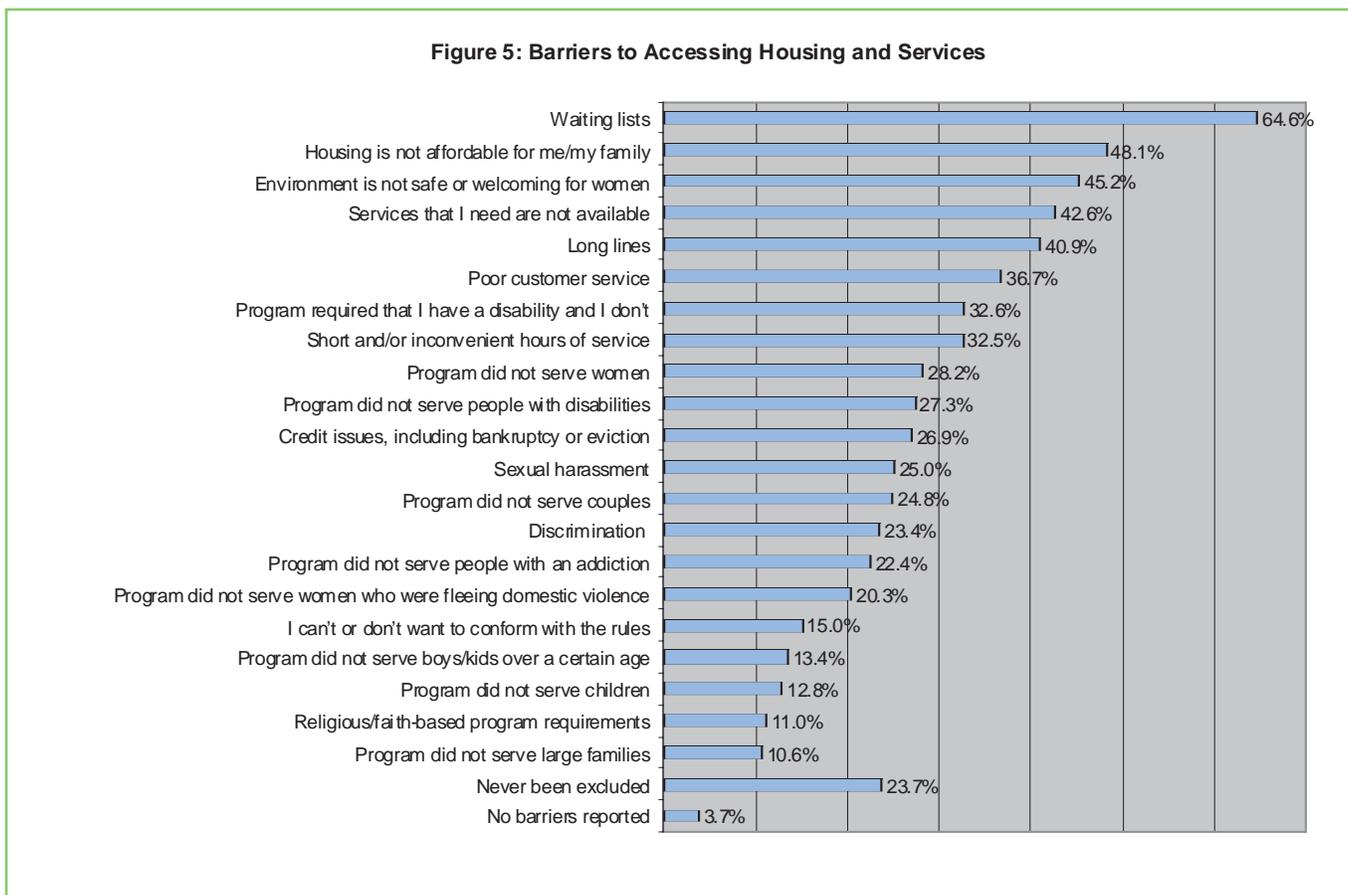
Saying that womyn living downtown face great needs and obstacles is an understatement. A better question is what kind of social policy and approach is being adopted to address those needs? In the case of womyn living downtown, housing is a must. It's not a privilege, an option or a last resort. It's a must and a right.

--Yadira, DWAC Member

Barriers to Accessing Resources

The respondents reported a wide range of barriers to accessing housing and services (see Figure 5). Barriers that at least 40 percent of women reported were: waiting lists (64.6%), housing not being affordable (48.1%), unsafe or unwelcoming environment (45.2%), needed services not being available (42.6%), and long lines (40.9%). Complete information on barriers reported is included in Figure 5.

While not specifically identified in the survey as a barrier to accessing resources, it is somewhat related that only about one-quarter of women (27.2%) had ever been asked for input about housing or services they had received in the Skid Row community.



Note: Percentages do not add to 100% because respondents could choose more than one answer.

Current Community Assets

Respondents were also asked to report the top three assets or strengths of the downtown community, not in ranked order. A majority of respondents felt that access to public transportation (59.9%), availability of housing (52.9%), and availability of free or low cost food (52.9%) were assets. Assets identified by at least ten percent of women are listed in Table 9.

Table 9: Top Assets or Strengths of the Downtown Community

	Number of Respondents	Percent
Access to Public Transportation	103	59.9
Availability of Housing	91	52.9
Availability of Free or Low Cost Food	91	52.9
Social Services are Available	58	33.7
Availability of Community Centers	51	29.7
Community Relationships	31	18.0
Employment Opportunities are Available	25	14.5
Parks and Open Space	19	11.0

Note: Percentages do not add to 100% because respondents could choose up to three assets or strengths

H. Qualitative Data Summary

In contrast to our 2004 Women's Needs Assessment, we collected only limited qualitative data through one open-ended question at the end of the survey. There were a total of 36 qualitative responses, with a short summary below.

The most commonly mentioned topic area was housing, with the most common response that housing is extremely hard to access. More specifically, women reported that housing for couples is greatly needed, rents are not affordable, substantially more housing overall is needed, and eviction assistance is lacking. The second most common topic was employment, with women generally stating a need for more jobs and better wages.

While housing and employment were mentioned by the majority of women, there were additional important themes that emerged from several women. These included:

1. A need to focus on preventing domestic violence and providing more support for survivors of domestic violence.
2. A need to make basic resources more readily available such as food, feminine hygiene products, showers, toothpaste, etc.
3. There is a lack of skilled professionals in the area, including social workers, domestic violence counselors, and general counseling services.
4. Reports of being continually harassed by police in the streets and/or expressing the opinion that police need to stop harassing residents.

V. CONCLUSIONS AND RECOMMENDATIONS

Although a multitude of conclusions and recommendations could be gleaned from the data presented in this report, the following section reflects top priorities, as identified by survey participants and a wider group of community stakeholders. Given the size and complexity of the issues and problems faced by homeless and low-income women, these recommendations should not be viewed in isolation; they are intended to fit into an integrated systems approach to prevent and end homelessness as well as the broader movement to eliminate social inequity by gender and the feminization of poverty.

The following conclusions and recommendations are grouped into four interrelated categories: Housing and Community Stability, Community Health, Violence against Women, and Enhancements in Community Resources. The recommendations are applicable to a variety of stakeholders, including: elected officials and other policymakers, service providers and other community-based organizations, the business community, residents of the Los Angeles region, and other interested parties.

A. Housing and Community Stability

Throughout many sections of the data, housing emerges as the clear unmet need and priority for women living downtown. About 65 percent of women surveyed were currently homeless, over 60 percent had been homeless for one year or more during their lifetimes, and almost 30 percent had experienced homelessness for five years or more. Affordable, permanent housing was overwhelmingly identified as both a current community asset and the resource most needed to improve the downtown community. Barriers to accessing housing included waiting lists and lack of affordability.

Although long-term residence within the Central City East/Skid Row community is prevalent, housing instability within the community is extremely common. The large majority of women had lived in multiple places over the past year. Housing stability is difficult to achieve due to evictions, illegal "lock-outs" by slumlords, arrests and incarceration, and/or because of emergency and transitional housing program time limits and other protocol.

An additional negative impact on community stability is the incredibly high rate of arrest, incarceration, and other negative interaction with law enforcement among women. Although the media has regularly reported that downtown policing is focusing on serious and violent crime, the data shows almost no arrests in these categories. Thirty-one percent of women had been arrested in the past year, compared to 17 percent in the 2004 DWAC report, and compared to only 5 percent of all adults Statewide (of whom only 22 percent are women). Arrests and incarceration often lead to the loss of housing, both permanent and temporary, further exacerbating housing instability and poor community health.



As an entirely community-based research project, I believe this report extends the voices of women downtown into policy making and future program development in a unique and vital way. The alarming struggles illuminated here give me great respect for the resiliency and strength of the community members who shared their stories for this document. Surely if women can work this hard to overcome such challenge, our society can do more to help them.

—Brooke, DWAC Co-Chair

The data strongly support the need to greatly and immediately increase production of safe, affordable, permanent housing for homeless and extremely low-income women and families. We believe, and other research supports, that housing with voluntary supportive services on-site or nearby is the only proven method of ending homelessness and improving individual and community health.

Recommendations:

- A-1. Immediately and drastically increase safe, affordable permanent housing options for women and families in downtown Los Angeles and throughout Los Angeles City and County, using a variety of short-term and long-term approaches.
- A-2. Increase the stock of permanent supportive housing, a model that reduces homelessness, reduces interaction with law enforcement, and is cost-effective for government.
- A-3. Immediately and drastically reduce arrests for non-violent and non-serious crimes
- A-4. Provide incentives for and facilitate service partnerships with affordable housing developers to increase the number of housing developers serving extremely low-income and/or homeless people.
- A-5. Evaluate the existing system of emergency and transitional housing to ensure that program rules and procedures do not increase community instability.
- A-6. Increase homeless prevention and housing stability using a variety of interventions, including:
 - a. Adopt a widespread preservation and improvement platform for all existing affordable housing, both within the community and region-wide.
 - b. Increase free legal assistance and representation for tenants facing eviction and other tenant rights violations; facilitate dispute resolution between landlords and tenants to aid in housing retention.
 - c. Increase enforcement and penalties against landlords who force people into homelessness through illegal evictions and other violations of tenant rights.
 - d. Identify and secure multiple sources of public and private funding to provide resources for rent subsidies on an emergency basis.
 - e. Develop funding sources for programs that provide in-home and community-based services that assist people in maintaining their housing.

B. Community Health

Women living downtown face a multitude of health issues, including a high incidence of physical health problems and disabilities, substance abuse issues, and social isolation. Mental illness was reported by two-thirds of women, compared to 36 percent in the 2004 DWAC report.

Additionally, there were gaps in access to healthcare needs identified in the survey, including significant percentages of women reporting lack of access to birth control methods and a fairly low rate of flu shots, given the age and health conditions reported. Another gap in health services that appeared to arise is the inability to get necessary follow-up care. For example, about one-quarter of the women who had an abnormal pap smear or mammogram were not able to get follow-up treatment. Only one-third of women who reported symptoms of foodborne illness and diseases transmitted from person to person received medical care for their conditions. This finding is of particular concern given the increased incidence of Hepatitis A in downtown during 2007. One quarter of respondents received a prescription that they could not fill. Although it was not documented directly in the survey, DWAC members report that the lack of "medical homes" may contribute to the lack of appropriate follow-up care.

Recommendations:

- B-1. Ensure health access, quality, and continuity of care for homeless women and their families living downtown.
- B-2. Establish and sustain communicable disease prevention and health promotion programs with homeless residents and health, housing, and social service agencies in Central City East/Skid Row; strengthen infection control practices and disease reporting; increase adult vaccination for influenza, pneumonia, and hepatitis; provide education on skin infections, foodborne illnesses, and diseases transmitted person-to-person.
- B-3. Increase access to a wide range of community-based and clinical mental health treatment, including permanent supportive housing.
- B-4. Increase dental care in the downtown community.

C. Violence against Women

The level of violence against women is so pervasive, affecting at least seven out of ten women, that we feel it is the greatest health issue facing women in the Skid Row/Central City East community and warrants its own section. The acts of violence experienced by significant percentages of women, both recently and throughout women's lifetimes, include domestic violence, sexual assault, child abuse, and expectations of sex in exchange for housing and other basic needs ("survival sex").

In addition, the deep trauma that results from these acts is often exacerbated by conditions in the downtown community, including the lack of safe and secure homes, the lack of specific services offered to recent victims of violence, and negative interaction with law enforcement.

Recommendations:

- C-1. Enhance current housing and service programs to assess all participants for incidence of violence and trauma and offer appropriate treatment and intervention services.
- C-2. Eliminate the exclusion of homeless women from the traditional domestic violence shelter system.
- C-3. Implement a wide variety of community-based events to raise awareness about and prevent violence against women and include survivors of violence in planning and implementation.
- C-4. Reduce incidence of abuse of power and other poor treatment in our community that re-traumatizes and demeans women (and others), including improving and increasing staff training, implementing grievance procedures, establishing codes of conduct, etc.
- C-5. Reduce incidence of inappropriate referrals and placement of recent domestic violence survivors to homeless shelters not equipped with confidentiality, appropriate services and other safety protocols.
- C-6. Create model programs to meet the needs of unhoused women experiencing domestic violence/partner abuse.

D. Enhancements to Community Resources

It is well-known that housing and services in the Central City East/Skid Row community were designed for single men, who comprised the large majority of the population for decades. Many housing and service providers have incorporated changes over the past several years, in part through the collaborative work of the Downtown Women's Action Coalition. However, overall, the survey results continue to show critical gaps in community resources for women. There were multiple barriers reported to accessing the housing and services that do exist, the most significant being waiting lists. It is crucial that government and private funding sources continue to increase housing and services in the downtown community and that our housing and service programs incorporate needed changes to effectively and appropriately serve women and their children.

Although community resource needs are included in all sections of the recommendations, there were additional important areas to be addressed that did not fit in previous categories. The finding that more than 40 percent of women under the age of 50 have children, yet the majority have lost custody, is noteworthy. Most unaccompanied women are housed and served as "single" women in the downtown area, yet are in need of legal assistance and appropriate housing in order to begin the reunification process. Additionally, there is an incredibly low employment rate among women and a strong desire expressed for work at fair wages. Lastly, there was a low rate of utilization of public benefits among women who appeared eligible, including Food Stamps and benefits specific to women with minor children.

Recommendations:

- D-1. Research and implement new, comprehensive service programs for women who have lost custody of their children to promote reunification of families.
- D-2. Conduct targeted outreach to women to engage them in employment and training programs, as well as local hiring opportunities.
- D-3. Continue and expand outreach and advocacy programs focused on increasing access and maintenance of crucial public benefits.
- D-4. Continue community-wide training models to develop expertise on issues facing women living downtown and create incentives for participation.
- D-5. Remove unnecessary and unintended barriers to accessing services and all types of housing.

APPENDIX A: Survey Instrument

DOWNTOWN WOMEN’S SURVEY PROJECT 2007

Interviewer’s Name: _____
Site/Region: _____

Interviewer:

- *We are conducting a survey of women today. We represent the Downtown Women’s Action Coalition, a group of downtown service providers and residents that is working to increase and improve housing and services for women in the downtown area.*
- *We have a small gift for completing a survey. We also have a flyer with all of the existing services for women in this area, which you can take whether you complete a survey or not.*
- *The survey will take about 15-25 minutes and is completely confidential. I will not ask your name. If you’d like to receive the results of the survey, I can put your name and contact number on a separate sheet of paper.*
- *Some of the questions are very personal. You do not have to answer any questions that make you uncomfortable, just let me know if you do not wish to answer.*
- *We will use the results of the survey to try to convince service providers to design programs sensitive to the needs of women and to try to convince government agencies and elected officials to increase funding and resources for women downtown.*
- *Would you like to participate?*

If they say no, ask if they would be willing to tell us whether they are currently homeless. Record this information on your “Declined to Participate” list.

Qualifying Questions

Do you live in the Downtown/Central City East/Skid Row area? Yes No
If no, do not continue with survey.

Have you already completed this survey today? Yes No
If yes, do not continue with survey.

What is your gender? Man Woman Transgender
If man, do not continue with survey.

Begin survey on next page.

8. In the past year, have you slept in any of the following places? (*Read and answer each category*)

- a. On the streets, in an abandoned building, car or other vehicle, park Y N
- b. Encampment Y N
- c. Church or mission Y N
- d. Emergency or transitional homeless shelter..... Y N
- e. A hotel, motel or SRO paid for with an emergency housing voucher Y N
- f. Your own rented room in a hotel, motel or SRO Y N
- g. Your own apartment or house Y N
- h. With friends or family Y N
- i. Jail, prison, or halfway house..... Y N
- j. Hospital or nursing home Y N
- k. Recuperative Care at the Weingart Center Y N
- l. Drug or alcohol treatment facility Y N
- m. Mental health facility Y N
- n. A foster home Y N
- o. Other, please specify: _____

9. Of the places you've been staying over the past year, in what kind of place have you usually slept during the past month? (*Interviewer: circle the letter of the category above – allow only one answer*)

10. Have you ever been evicted? 1. **Yes** 0. No

If yes,

10A. How many times have you been evicted in your lifetime? _____

10B. Of your evictions, how many were done through the legal court process? _____

10C. Have you been evicted in the past year? 1. **Yes** 0. No

If yes,

10C-1. Were you evicted from a hotel located in the downtown area? 1. **Yes** 0. No

11. Have you ever been asked for input about housing or services you have received in the Skid Row community? 1. **Yes** 0. No

If yes, how was your input solicited? (*Circle all that apply*)

- a. Survey
- b. Participated in a tenant/client council
- c. Participated in an advisory group
- d. Other: _____

12. What are the top three assets or strengths of the downtown community?

(*Read all choices first and circle top 3 choices*)

- a. Access to public transportation
- b. Affordability of housing
- c. Availability of community centers
- d. Availability of free or low cost food
- e. Community relationships (friends and/or family live downtown)
- f. Employment opportunities are available
- g. Membership in community organizations
- h. Parks and open space
- i. Social services are available
- j. Other: _____

13. Have any of the following reasons made it difficult or impossible to get housing or services in the downtown/Skid Row community? (*Circle all that apply*)
- Credit issues, including bankruptcy or eviction
 - Discrimination (based on: _____)
 - Environment is not safe or welcoming for women
 - Housing is not affordable for me/my family
 - I can't or don't want to conform with the rules
 - Long lines
 - Poor customer service
 - Religious/faith-based program requirements
 - Services that I need are not available
 - Sexual harassment
 - Short and/or inconvenient hours of service
 - Waiting lists
 - Other: _____
14. Have you ever been excluded from housing or services because of any of the following characteristics? (*Circle all that apply*)
- Program did not serve people with disabilities
 - Program did not serve people with an addiction
 - Program did not serve children
 - Program did not serve boys/kids over a certain age
 - Program did not serve large families
 - Program did not serve couples
 - Program did not serve women
 - Program did not serve women who were fleeing domestic violence
 - Program required that I have a disability and I don't
 - Other: _____
15. Do you have the opportunity to confide in any of the following people about issues that are important in your life (i.e. living situation, relationships, traumatic incidents)? (*Circle all that apply*)
- Family member
 - Friend
 - Clergy (religious official such as a minister, rabbi, etc.)
 - Counselor, social worker, case manager, or other professional
 - Other, specify: _____
 - None of the above/I do not have anyone to confide in
16. Do you have any family or friends currently staying downtown? 1. Yes 0. No
If yes, who? (*Circle all that apply*)
- Husband
 - Unmarried partner (boyfriend or girlfriend)
 - Children
 - Parent
 - Other Family Member
 - Friend(s)
 - Other _____

17. What type of income and/or benefits do you receive? (Circle all that apply)

- a. Full-time or part-time work
- b. Food Stamps
- c. GR (General Relief)
- d. MediCal
- e. Medicare
- f. Section 8 Rental Assistance (of any type)
- g. SSDI (Social Security Disability Income)
- h. Social Security Retirement
- i. SSI (Supplemental Security Income)
- j. Unemployment Benefits
- k. Other, specify source: _____
- l. I currently do not have any source of income or benefits

18. Have you ever received a Section 8 Housing Voucher that could be used City-wide? **1. Yes** 0. No

If yes,

- 18A. In what year did you receive your voucher? _____
- 18B. Were you able to use your voucher to obtain housing? 1. Yes 0. No
- 18C. Do you still have possession of your housing voucher? 1. Yes **0. No**
- 18C-1. **If no,** what month and year did you lose your voucher? _____, _____

19. In the past year, have you experienced any of the following?

(Read each category and circle Yes or No for each line)

- a. Arrest Y N
- b. Change in family structure (i.e. divorce, death, separation, children's custody change, etc.)... Y N
- c. Domestic violence Y N
- d. Drug and/or alcohol abuse..... Y N
- e. Homelessness (i.e. living in a shelter, transitional program, on the street, in a car, etc.) . Y N
- f. Interaction with the Department of Children and Family Services (DCFS) Y N
- g. Loss of government benefits Y N
- h. Loss of job..... Y N
- i. Mental illness Y N
- j. Permanent physical disability..... Y N
- k. Physical health problems (i.e. heart problems, difficulty breathing or walking) Y N
- l. Recovery from drug and/or alcohol addiction..... Y N
- m. Sexual assault Y N
- n. Unable to find/secure affordable housing Y N
- o. Other, specify: _____

20. In the past year, did you have a flu shot? 1. Yes **0. No**

If no,

- 20A. Did you try to get one but could not? 1. Yes 0. No

21. In the past six months, did you have an illness with frequent diarrhea (more than 3 times/day) with fever and/or cramps? **1. Yes** 0. No

If yes,

- 21A. Did you receive medical care for the condition? 1. Yes 0. No

22. In the past six months:

- a. Did you seek treatment for a wound infection? 1. Yes 0. No
- b. Did a healthcare provider diagnose you with a skin infection? 1. Yes 0. No

23. What are the top three resources most needed to improve the downtown community?
(Read through all the choices, then circle top three)
- Affordable permanent housing
 - Child care
 - Dental care
 - Domestic violence counseling
 - Drug or alcohol programs
 - Emergency or transitional housing
 - Employment and training programs
 - Financial and credit counseling
 - General counseling services
 - Jobs/employment opportunities
 - Legal assistance
 - Medical care
 - Mental health care
 - Parks
 - Schools
 - Services/programs specifically for kids
 - Support groups
 - Other, specify: _____
24. In the past year, have you had any prescription for medication that you could not fill?
 1. Yes 0. No
25. Do you currently take medication? **1. Yes** 0. No
If yes,
 25A. Does this include medication for a mental health problem? 1. Yes 0. No
26. Do you have access to an adequate supply of condoms?
 1. Yes 0. No 2. Not needed/applicable
27. Do you have access to birth control methods other than condoms?
 1. Yes 0. No 2. Not needed/applicable
28. In the past three years, did you have an abnormal Pap smear or mammogram? **1. Yes** 0. No
If yes, was it:
 28A. 1. Abnormal Pap smear 2. Abnormal mammogram 3. Both
 28B. Were you able to get follow-up treatment for the abnormal results? 1. Yes 0. No
29. Have you ever been expected to perform a sexual favor in exchange for any of the following?
(Circle all that apply)
- One or more nights of housing
 - Food
 - Protection
 - Cash
 - Other, specify: _____
 - None of the above

30. Have you ever served in the U.S. Armed Forces? 1. Yes 0. No
31. Were you ever in foster care? 1. Yes 0. No
32. What is the highest level of education you have completed?
- Grade 11 or less
 - High school graduate or GED
 - Some college
 - College graduate or higher
33. In the past year, have you had any of the following interactions with law enforcement in the downtown community? (*Circle all that apply*)
- I called 911 for emergency help
 - I sought help at Central Station (6th and Wall)
 - I received a ticket/citation
 - I was stopped, questioned and/or detained on the street
 - I was stopped, questioned and/or detained in my place of residence
 - I was held in custody at Central Station (6th and Wall)
 - I was arrested
 - I served time in jail or prison
 - Law enforcement did a “raid” in my building
 - Other: _____

IF YES TO ANY OF 33-A through J, Complete Section A, Page 8

34. Do you have any children under the age of 18? 1. Yes 0. No

IF YES TO 34, Complete Section B, page 9

INTERVIEWER: The next section of questions is very personal and some are related to traumatic events that many women experience.

“Your answers will not be shared with anyone. Government agencies and housing providers will only see the total results of the survey, not individual responses. Also please remember, you can tell me that you do not want to answer any question that makes you uncomfortable.”

35. In your lifetime, have you ever been a victim of domestic violence? 1. **Yes** 0. No

If yes,

- when? 1. Before the age of 18 (as a minor)
- 35B. 2. Age 18 or older (as an adult)
- 35C. 3. Both (as a minor and as an adult)

36. In your lifetime, have you ever been a victim of sexual assault? 1. **Yes** 0. No

If yes,

- when? 1. Before the age of 18 (as a minor)
- 36B. 2. Age 18 or older (as an adult)
- 36C. 3. Both (as a minor and as an adult)

37. Were you a victim of child abuse (before age 18)? 1. Yes 0. No

IF YES TO 35, 36 OR 37, Complete Section C, Page 10

Section A – Interaction with law enforcement in the past year

A-1. If you asked for help from law enforcement, were you satisfied with the results?
1. Yes 0. No 2. I never got a response 3. N/A, I never requested assistance

A-2. I had interaction with law enforcement in the past year, but was not arrested, charged or ticketed for anything in the past year. 1. True 0. False

If true, do not complete the rest of Section A. If false, finish Section A.

A-3. Were your tickets or citations for: (*circle all that apply*)
a. Jaywalking
b. Littering
c. Public urination or defecation
d. Shopping cart or milk crate violation
e. Sitting, sleeping or blocking the sidewalk (41.18d)
f. Trespassing
g. Other: _____
h. N/A – I did not receive a citation in the past year

(Note: if people have tickets, refer to LA CAN for citation defense program)

A-4. Was your arrest for: (*circle all that apply*)
a. Drug possession
b. Drug sales
c. Drug possession with intent to sell
d. Sitting, sleeping or blocking the sidewalk (41.18d)
e. Shopping cart or milk crate violation
f. Battery or Assault
g. Rape or Homicide
h. Burglary, Robbery or Theft
i. Other: _____
j. N/A - I was not arrested in the past year

A-5. Did LAPD or other law enforcement enter your building of residence to question, cite or arrest you? 1. Yes 0. No

A-6. Were you held in custody at the police station for any period of time in the past year?
1. Yes 0. No

A-7. Were you offered any shelter or services during any interaction with law enforcement?
1. Yes 0. No

If yes,

A-7A. Did you actually receive shelter or services? 1. Yes 0. No

A-8. Did you serve time in jail or prison in the past year? **1. Yes** 0. No

If yes,

A-8A. Did you lose your housing or shelter because you were in jail or prison? **1. Yes** 0. No

If yes,

A-8A(i). Did you lose: 1. Shelter 2. Housing 3. Both

A-9. Were you fined for a citation or other violation? **1. Yes** 0. No

If yes,

A-9A. Were you able to pay your fine? 1. Yes **0. No**

If no,

A-9B. Did your fine turn into a warrant? 1. Yes 0. No 2. Don't know

Section B - Women with children under the age of 18, with or without custody

- B-1. How many children under the age of 18 do you have? _____
- B-2. Have you participated in activities or events in the community with your children? 1. Yes 0. No
- B-3. Are your children currently in your legal custody? 1. Yes 0. No 2. Some of them
- B-4. If all or some of your kids are in your legal custody, how many are currently living/staying with you? 1. Number: _____ 0. N/A
- B-4A. If some of your children are staying with someone else, who are they staying with?
- a. Family member
 - b. Friend
 - c. Their father
 - d. Other: _____
- B-5. Are you allowed to bring your children to your current place of residence? **1. Yes** 0. No
If yes, when?
- a. Anytime I choose
 - b. At certain times
- B-6. Are you receiving any of the following benefits? (*Circle all that apply*)
- a. CalWORKs (welfare)
 - b. Child Support
 - c. Healthy Families Benefits (medical care)
 - d. Women, Infants, and Children Benefits (WIC)
- B-7. Do you currently have child care assistance in the community? **1. Yes** 0. No
If yes, who provides it: (*circle all that apply*)
- a. Central City Community Outreach
 - b. School on Wheels
 - c. Family member or friend
 - d. Other: _____
- B-8. Do you currently have a DCFS (Department of Children and Family Services) case worker?
1. Yes 0. No
- B-9. If any of your children are not in your legal custody, what were the reasons given to you by the County that led to your children being removed from your custody? (*Circle all that apply*)
- a. N/A - all of my children are in my legal custody (**if yes - stop page 9 HERE**)
 - b. Abuse (physical, emotional or sexual)
 - c. Caretaker absence/incapacity
 - d. Exploitation
 - e. Neglect
 - f. Because I am homeless
 - g. Because I live in Skid Row
 - h. Other: _____

If answer to B-9 is anything EXCEPT a:

- B-9A. Do you have visitation rights? 1. Yes 0. No
- B-9B. What assistance do you need to regain custody of your children? (*Circle all that apply*)
- 1. Access to housing where both myself and my children can live
 - 2. Legal assistance
 - 3. Assistance in meeting the requirements of the County/courts
 - 4. Other: _____

Section C - Experienced violence at some point in lifetime

- C-1. Has violence against you occurred:
a. Downtown
b. Another community
c. Both
- C-2. How many different people have committed violence against you in your lifetime? _____
- C-3. Was the perpetrator(s): *(Circle all that apply)*
a. Acquaintance/Associate
b. Friend
c. Husband/partner
d. Neighbor
e. Other family member
f. Parent
g. Stranger
h. Other: _____
- C-4. Do any of the perpetrators currently live in the downtown community? 1. Yes 0. No
- C-5. Do you currently live in a place where you can lock your own individual door?
1. Yes 0. No
If yes,
C-5A. Does that make you feel safer than a situation without a locked door?
1. Yes 0. No
- C-6. Did you come directly to the downtown community after experiencing domestic violence and/or sexual assault? **1. Yes** 0. No
If yes:
C-6A. Where did you first stay? _____
C-6B. Were you offered services or help to deal with the after-effects of violence? **1. Yes** 0. No
If yes,
C-6B-2. By whom? *(Circle all that apply)*
a. Case manager
b. Family or friend
c. Other: _____
- C-7. Do you believe that events that raise awareness about violence against women are effective in reducing violence? **1. Yes** 0. No
If yes,
C-7A. Would you like to participate in awareness events? 1. Yes 0. No

